

Middle States Commission on Higher Education

Self-Study Design

Mount Sinai Phillips School of Nursing

June 2024

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I. Institutional Overview

Celebrating its 120th anniversary in 2024, The Mount Sinai Phillips School of Nursing (PSON) was chartered in 1904 as a diploma program and was registered at that time as an independent educational institution with the Board of Regents of the State of New York. The School is currently a single-site and single-purpose institution, located in the east Harlem section of Manhattan, offering programs of study leading to the Bachelor of Science degree in nursing. It is an operating division of Mount Sinai Beth Israel (formerly Beth Israel Medical Center), which is an integral part of the Mount Sinai Health System.

Over the years, the School has consistently sought out opportunities to advance the academic quality and status of its programs, with a major focus on the changing needs and landscapes in nursing education, by seeking to fulfill its commitment to inclusive academic excellence through student success. By finding solutions and promoting innovation, PSON has advanced nursing science and acted as a transformative change agent to ultimately improve patient health outcomes. At no time in history has nursing education been more important in addressing the range of health concerns faced by a global society and in challenging its students to champion health and human rights for the diverse communities they serve. The School has been successful in meeting its challenges as evidenced by this timeline of accomplishments:

- In 1978, the School received approval to grant the degree of Associate in Applied Science (AAS) with a major in nursing. It graduated its first AAS class and its last diploma class in 1980.
- In 1979, the National League for Nursing (NLN) conducted a pilot project to determine the feasibility of hospital-based associate degree programs meeting established criteria for specialized accreditation. Seven pilot schools in the northeastern region, including PSON (then the Beth Israel School of Nursing), were permitted to apply for direct NLN accreditation. Regional accreditation from the Middle States Association of Colleges and Schools (now the Middle States Commission on Higher Education) was waived for the purpose of the study.
- In 1985, the Beth Israel School of Nursing received full accreditation by the National League for Nursing. The NLN granted a waiver of regional accreditation to schools that received initial accreditation through this pilot project. The School was reaccredited by the NLN (now the Accreditation Commission for Education in Nursing [ACEN] in 1993.
- PSON continued to value and maintain ACEN accreditation. Following an accreditation visit in 2009, the School was granted reaccreditation for 8 years through 2017.
- In 2012, the School's Honor Society was founded. Induction into the Honor Society was accorded to those graduates achieving a 3.70 or higher cumulative GPA.
- Continuing its pursuit of higher levels of academic excellence, also in 2012, the School achieved institutional accreditation by the Regents of the State of New York and the Commissioner of Education. This national accreditation was for a 5-year period (2012-2017), the maximum timeframe for new candidates. Subsequently, Board of Regents reaccreditation was administratively extended to PSON through January of 2022.
- In 2013, the School received approval from the New York State Education Department to offer the Bachelor of Science degree in Nursing and to initiate an RN-BSN post-licensure program for nurses possessing an associate degree in nursing. The first cohort began in the Fall of 2014, and 35 students graduated in 2016.
- In 2014, the School was designated a Center of Excellence (COE) in Nursing Education by the National League for Nursing for the years 2014-2018. The School earned this designation in the category of "Enhancing Student Learning and Professional Development".

- In 2015, the School established an affiliation agreement for exchange programs with the National Taipei University of Nursing and Health Sciences in Taipei, Taiwan. By 2022, the School had expanded its global footprint by establishing official Memoranda of Understanding (MOUs) with colleges in Taiwan, Belgium, Colombia, India, Malaysia, and Saudi Arabia.
- In 2016, the School's baccalaureate degree program received initial accreditation by the Commission on Collegiate Nursing Education (CCNE) for 2016-2021.
- Also in 2016, the New York State Education Department approved PSN's request to offer a second baccalaureate degree nursing program – a 15 month accelerated BSN program (pre-licensure) which was initiated in the Summer of 2017, and which graduated its first cohort of 27 students in August of 2018.
- In 2017, the ACEN reaccredited the associate degree program for 8 years, through 2025.
- In 2021, the School closed its AAS program primarily due to decreased job opportunities for graduates post-licensure.
- Also in 2021, the CCNE reviewed the School's baccalaureate program, resulting in reaccreditation for 10 years, from 2021-2031. Likewise, in June, a peer review team from the New York State Board of Regents conducted an institutional reaccreditation visit, resulting in the School being reaccredited through January, 2023, with the option to be administratively reaccredited to May, 2023. At that time, the Board of Regents opted to relinquish its status as a national accrediting agency with the United States Department of Education.
- In 2022, the School was approved as a charter member of the International Honor Society of Nursing, Sigma Theta Tau; the initial induction ceremony occurred in the Fall, 2022 semester.
- Also in 2022, the title of the School's Dean was augmented with the addition of Vice President of Nursing Academic Affairs for the Mount Sinai Health System. This appointment provides heightened opportunities to strengthen the nexus between the School, clinical nursing service, nursing research and the health system as a whole.
- In order to further bolster the School's position within the Mount Sinai Health System, in 2022, the School's name was changed to Mount Sinai Phillips School of Nursing. Nevertheless, with respect to the Table of Organization within the health system, no changes were made to the School's reporting relationships.
- In May of 2023, the School was granted Candidate for Accreditation status with the Middle States Commission on Higher Education.
- In December of 2023, Dr. Kimberly Glassman was appointed Dean of the School of Nursing and Vice President of Nursing Academic Affairs for the Mount Sinai Health System. She brings to the School a wealth of accomplished leadership experience and expertise in nursing education and nursing service.

The above-cited achievements have been strongly supported by the School's Board; the Board is composed of a diverse group of committed members who represent the profession, the disciplines of finance and development, the community, the Mount Sinai Health System as well as comparable and aspirational institutions of higher education. The Board's Chair is a member of the former Beth Israel Medical Center Board who demonstrated a specific interest in PSN; she represents the fifth generation of her family to be involved in the School's advancement and it is her grandfather, Seymour J. Phillips, for whom the School is named in recognition of his stalwart support of the School for over 50 years. As staunch advocates for the School, and as its governing body, the Board works diligently and collaboratively with the School's leadership and faculty to develop, support and implement its mission, vision, Strategic Plan and key institutional priorities.

The overarching governing organization of the School is the Mount Sinai Health System, of which Mount Sinai Beth Israel (MSBI) [formerly Beth Israel Medical Center] is a member. The Board of Trustees of the Medical Center has legal authority for the Phillips School of Nursing. This authority stems from Letters of Incorporation of the Beth Israel Medical Center and the charter of the School granted by the Regents of the State of New York. In all but financial matters, Phillips School of Nursing is a free-standing institution, administered by the Dean of the School. For 120 years, it has been a highly valued asset of the Medical Center and the Mount Sinai Health System.

The School's unique position in the Health System affords many opportunities for students, faculty and leadership in terms of enhanced experiences with patient care, education and research. The School has benefited from the relationship with MSBI by experiencing strong financial and administrative support over the years, most recently manifested in the relocation of the School in 2020 to its current location in east Harlem. The 35,000 square foot facility was specifically designed and built to meet the specifications of a growing school; it has provided the students, faculty and staff with an outstanding space in which to learn and work. The diversity of the neighborhood is mirrored in our student body which is multi-ethnic and culturally diverse (see breakdown of student demographics below).

Student Demographics

T=233 (as of April 2024)

Gender

Female - 203 (87%)

Male - 30 (13%)

Ages	# of students	% of students
20-29	186	82%
30-39	34	13%
40-49	11	4%
50+	2	1%

Ethnicity

Designation	# of students	% of students
American Indian/Alaska Native	2	1%
Asian	51	22%
Black	59	25%
Hispanic	29	12%
Pacific Islander	2	1%
Two or more races	9	4%
White	81	35%

In addition, as part of the Mount Sinai Health System, the School is aligned with an integrated health system that encompasses the Icahn School of Medicine and eight hospital campuses in the New York metropolitan area as well as a large regional ambulatory footprint of more than 400 sites. Mount Sinai is internationally acclaimed for its excellence in research, patient care and education across a wide range of specialties. The Health System's mission is congruent with that of the School, namely, to provide compassionate care with seamless coordination and to advance medicine through unrivaled education, research and outreach to the many diverse communities served.

The School's **mission** is to provide an exceptional nursing education to a diverse student body in an inclusive, equitable environment that will advance the delivery of outstanding healthcare to local and global communities.

The School's **vision** reinforces its mission and affirms what it endeavors to achieve:

- To actively respond to society's need for caring, knowledgeable, and skilled nursing professionals
- To use and develop evidence-based research as the foundation for contemporary education and clinical practice
- To be a leader in nursing education

A key advantage of the relationship with the Mount Sinai Health System is that PSON students are welcomed in all Mount Sinai hospitals where they are given priority for the best possible clinical placements and rotations available. Furthermore, faculty members have many opportunities to network and collaborate with clinical and research experts, and they are supported by their nursing colleagues who work at the hospitals.

The commitment of the faculty is an essential component to the School's success. The faculty is prepared in a variety of nursing specialties. All full-time teaching faculty have expertise in their assigned areas and possess a minimum of a master's degree in nursing. With nine full-time nursing faculty members and a cadre of 60+ academically prepared and clinically skilled adjunct faculty, the School is well positioned to meet the needs of a student complement of 250-350.

Currently, all PSON students in attendance are enrolled in the 15 month Accelerated Bachelor of Science in Nursing (ABSN) degree program. They enter the School possessing prior baccalaureate degrees in other disciplines and have completed a core of liberal arts and science pre-requisite courses. The School also offers a 15-month RN-BSN completion Program for registered nurses who possess prior Associate degrees in nursing. The current school census, as of May 2024, is 262. PSON presently employs 13 staff and leadership personnel who work to meet the School's institutional priorities, mission and vision, attained through the lens of student success. The School is growing its student population, enrolling three cohorts per year starting in 2024 (as opposed to the two cohort per year admissions model adopted in 2017 at the initiation of the ABSN Program).

The School is in the process of transformation, having closed its Associate in Applied Science in Nursing (AAS) degree program in 2021 and having developed collaborations to revitalize its RN-BSN Program in synchronous distance education format. Furthermore, it is actively working to initiate a Master's degree program for Family Nurse Practitioners in early 2025. Towards that end, the School's charter has been revised by the Health System and by the State of New York to permit the School's Board to confer the Masters degree in Nursing.

The School continuously monitors the effectiveness of its programs, utilizing formative and summative outcome measures, to ensure the attainment of program goals relating to completion rates, licensure pass rates, employment rates and student satisfaction measures. It presently exceeds established benchmarks for the following ABSN Program outcomes:

1. Completion rates within 150% of the published full-time completion time: Cohort 9 – 80.77% [Benchmark is 75%]. The completion rate is calculated by dividing the number of students in the

cohort graduating within 150% of the normal published full-time graduation time by the number of students beginning in the cohort.

2. NCLEX-RN Examination Pass Rates for first-time test takers: 85.42% in 2023 and 92.55% for the first quarter of 2024 [Benchmark is 80%]. These statistics are obtained from the New York State Education Department, Office of the Professions.
3. Employment rates within one year of graduation: 100% in 2022 [Benchmark is 80%], based on feedback from the graduates.
4. Student satisfaction is measured on a continual basis with the implementation in 2024 of a 24/7 student feedback survey monitored by leadership. In addition, a formal student feedback survey is conducted at the end of each semester, with results (both in the aggregate and disaggregated by cohort) being reviewed by leadership as well as by the Board's Committee on Institutional Quality and Integrity. Results have demonstrated overall program satisfaction and acknowledgement that prior identified concerns have been addressed and resolved going forward. In the March 2024 student feedback survey, the mean overall program satisfaction rating was 3.75 on a Likert scale of 1-5 (5 being the highest and 1 the lowest). [Benchmark is 3.00]. Each semester, students also have the opportunity to submit Student Opinion Reports documenting their feedback on the quality of the teaching-learning experience for each course in which they are enrolled.

In addition, as demonstration of the School's financial sustainability, its operating statements have evidenced net gains for the last eight years. In 2023, the School's net gain of revenue over expenses was \$1,309,188. In 2022, its net gain was \$2,491,546.

II. Institutional Priorities to be Addressed in the Self-Study

In tandem with developing the Self-Study Design, the School is in the process of solidifying its Strategic Plan for 2024-2027, utilizing the foundational pillars of Teaching, Scholarship and Service, with an underpinning of resource stewardship; these pillars had been identified in prior strategic plans and embraced the tenets of Ernest L. Boyer with respect to advocating for the scholarship of discovery, teaching, integration and application in nursing education (Boyer, EL: *Scholarship Reconsidered: Priorities for the Professoriate* San Francisco: Jossey-Bass Publishers; 1990).

In December of 2023, a Strategic Planning retreat was held, with robust attendance from the following School representatives: students, staff, faculty, leadership and alumni members. The primary goal of the retreat was to reimagine the School's Strategic Plan for 2024-2027. In addition, in order to begin work on the Self-Study Design, the three individuals who would later be named the Tri-Chairs of the Self-Study Steering Committee utilized the retreat as a platform to introduce the PSON stakeholders to the Middle States Self-Study process: its objectives, its timeline and the linkage of the MSCHE standards with the School's mission, vision, institutional priorities and Strategic Plan. During the retreat, in breakout and plenary sessions, institutional priorities were discussed in synergy with the development of reasonable and attainable goals for each of the three Strategic Plan pillars. Actions were identified to demonstrate how each goal would be achieved, with outcome measures derived to assess attainment of the cited goals. The salient points of the Strategic Plan, as well as the concepts for institutional priorities, were reviewed with the Board members at their February 2024 meeting. These documents were circulated to the Board for review, feedback and approval. They are currently receiving final review by the School's faculty and leadership and will be forwarded to the Board for final approval.

The institutional priorities stated below have been identified by School stakeholders as being mission-driven and intrinsically aligned with the new Strategic Plan; they are:

- **Promote student achievement and success**
- **Advance equitable and inclusive academic excellence and scholarship**
- **Maintain financial sustainability**
- **Enhance community engagement**

As a school preparing registered nurses at the baccalaureate level to meet the multifaceted healthcare needs of diverse communities, all School stakeholders embrace the necessity of attaining equitable and inclusive academic excellence through continuous assessment and improvement of the educational program. Educational effectiveness can only be achieved through initiatives and processes that promote student achievement and student success. A hallmark of academic excellence is student and faculty scholarship that recognizes evidence-based practice, professionalism and professional values, the application of technology, interprofessional collaboration and organizational leadership as well as population health. The School of Nursing is housed in the east Harlem community where health disparities are evidenced by higher rates of diabetes and obesity when compared with the overall Manhattan population. In addition, in 2021, 31.2% of household incomes in east Harlem fell below the poverty line, as compared with 17.3% citywide (NYU Furman Center for Real Estate and Urban Policy Research Institute, <https://furmancenter.org/neighborhoods/view/east-harlem>). Since living in poverty limits healthcare choices and makes it difficult to access resources that promote health and prevent illness, enhancing community engagement to support augmented health education and screening are therefore high priorities for the School. Finally, in order to accomplish the School's goals and priorities, it must maintain financial sustainability while investing its budgetary resources in the key areas of personnel, facilities, technology and communications.

These institutional priorities are congruent with the School's mission, vision and the foundational pillars of its Strategic Plan. As such, they will represent central points for the entire Self-Study Report. The table below demonstrates the alignment of the School's institutional priorities with the Middle States Standards for Accreditation, mapped so the primary focus areas of parity are highlighted. The Working Groups charged with each specific MSCHE standard will endeavor to provide support to identify how PSN complies with each criterion within each standard; they will evaluate how this information is positioned within the context of the School's institutional priorities in order to promote educational effectiveness.

Alignment of Institutional Priorities with MSCHE Accreditation Standards

Institutional Priorities	Standard I: Mission and Goals	Standard II: Ethics and Integrity	Standard III: Design and Delivery of the Student Experience	Standard IV: Support of the Student Experience	Standard V: Educational Effectiveness Assessment	Standard VI: Planning, Resources, and Institutional Improvement	Standard VII: Governance, Leadership and Administration
Promoting student achievement and success	X		X	X	X	X	
Advancing equitable and inclusive academic excellence and scholarship	X	X	X	X	X	X	X
Maintaining financial sustainability					X	X	X
Enhancing community engagement		X	X	X		X	X

X= Primary Focus

III. Intended Outcomes of the Self-Study

The Tri-Chairs of the Self-Study Steering Committee presented these proposed intended outcomes of the Self-Study to the Dean, the School's leadership and the members of the Board for approval:

- Demonstrate how the institution currently meets the Commission's Standards for Accreditation and Requirements of Affiliation (Fourteenth Edition) and provides evidence by standard in alignment with the Evidence Expectations by Standard Guidelines.
- Leverage periodic assessment through each standard, using assessment results for continuous improvement and innovation to ensure levels of quality for constituents and the attainment of the institution's priorities, mission, and goals.
- Engage the institutional community in an inclusive and transparent self-appraisal process, including analysis of a range of data, including disaggregated data, to ensure students are appropriately served and institutional mission and goals are met.
- Utilize the Self-Study process to inform and support new and continuing strategic initiatives for the institution.

IV. Self-Study Approach

Since this will be PSON's first Self-Study with the Middle States Commission on Higher Education, the School has opted to utilize the **standards-based approach** to the Self-Study, thereby concurrently reviewing its institutional priorities, Strategic Plan, MSCHE Accreditation Standards and Requirements of Affiliation to establish parity in purpose and objectives. The Self-Study Working Groups, identified later in this design document, were established to review and document PSON's compliance with each Standard, the Requirements of Affiliation, and applicable federal regulatory requirements to address institutional priorities as an intrinsic part of their analysis and to delineate areas of strength as well as opportunities for improvement in the designated areas. The five Working Groups will lead assessment of each standard, with a sixth group responsible for the Evidence Inventory. They will develop crosswalks that focus on the recurring themes of student success, academic excellence, diversity, community partnerships and operational sustainability, with the interwoven common threads of respect, equity, accountability, trust and transparency.

V. Organizational Structure of the Steering Committee and Working Groups

Following attendance by the key School stakeholders to the Self-Study Institute in the Fall of 2023, early in 2024, Dean Glassman confirmed the members of the **Self-Study Steering Committee**, comprised primarily of those who attended the Institute since they were highly invested in the success of the Self-Study process. The Tri-Chairs of the Steering Committee were also confirmed to oversee the Self-Study initiative and to provide leadership in the School's quest for initial Middle States accreditation.

The Tri-Chairs are Dr. Vivian Lien, Assistant Dean for Undergraduate Programs, Dr. Pennie Sessler Branden, Associate Professor, and Bernice Pass-Stern, Assistant Dean for institutional Effectiveness and ALO for the School. Throughout this process, they will report to Dean Glassman. During the next two years, the Steering Committee will be responsible for overseeing all documentation required for Self-Study activities including the Self-Study Design, Self-Study Report with the Requirements of Affiliation, and the Evidence Inventory. Since the School's leadership group and student services team meet at least

once per week, communications will be facilitated with the Steering Committee and between the Working Groups; faculty meet with the Assistant Dean at least two times per month. Lines of inquiry for each standard will be clearly delineated to avoid potential overlap of data analysis. This ease of communications between the Steering Committee and the Working Groups will ensure that the School's mission and institutional priorities will be analyzed along with the MSCHE Standards of Accreditation and Requirement of Affiliation utilizing the overarching criteria contained in the School's Program Evaluation Plan (PEP) as well as other formative and summative evaluation modalities.

Responsibilities of the Steering Committee will include the following:

- Structure the Self-Study Design to ensure MSCHE Standards for Accreditation are addressed within the context of the School's mission, goals, priorities and strategic plans
- Review and approve the Self-Study Design and timeline after identifying major topics and lines of inquiry to be delineated in the Self-Study
- Develop and approve the charge to the Working Groups
- Provide extensive guidance, support and timelines to the Working Groups as they develop their chapters, ensuring that they address the assigned Standards, Requirements of Affiliation, and institutional priorities
- Support the Working Groups as they contribute to the Evidence Inventory, serving as a resource as warranted
- Ensure that the drafts submitted by the Working Groups contain areas of strength as well as opportunities for improvement and innovation
- Monitor the progress of the Working Groups, reviewing and editing their drafts
- Work with the School's Medical Librarian to build the Evidence Inventory wherein redundancies in data submission are minimized
- Coordinate the reports of the Working Groups, providing feedback as necessary, to produce a cohesive Self-study document
- Assist in constructing the final Self-Study Report and Evidence Inventory, confirming that the MSCHE Standards of Accreditation and Requirements of Affiliation are addressed, along with the School's institutional priorities and lines of inquiry
- Support the development of the Self-Study Communications Plan to facilitate School-wide engagement in the Self-Study process
- Ensure appropriate alignment between the Standards of Accreditation, the institutional priorities and the School's Strategic Plan
- Ensure that the School meets accreditation-relevant federal regulations and that compliance is documented in the final Self-Study Report
- Ensure timely completion and submission of the final Self-Study Report and Evidence Inventory by assisting in assembling the final Self-Study documents after review by all stakeholders
- Oversee arrangements to host the Evaluation Team's site visit
- Prepare stakeholders to meet with the Evaluation Team

The members of the Steering Committee are:

Pennie Branden, PhD, FACNM, CNM, CNE, RN
Associate Professor
Self-Study Tri-Chair

Vivian Lien, DNP, RN, CNE
Senior Associate Dean for Academic Affairs and Wellbeing and Clinical Associate Professor
Self-Study Tri-Chair

Bernice Pass-Stern, MS, MEd
Assistant Dean for Institutional Effectiveness
Self-Study Tri-Chair

Natalie Cline, MPH
Associate Dean for Administrative Services

Linda Fabrizio, BBA
Director, Donor Relations and Communications

Kimberly Glassman, PhD, RN, NEA-BC, FAONL, FAAN
Dean

Sarla Santos, MS, NPD-BC, CCRN
Director of the Simulation Laboratory and Assistant Professor

Charge to the Working Groups

The Working Groups will have key responsibilities for contributing to the preparation of the Self-Study Report and to the compilation of the Evidence Inventory. The groups were developed in early 2024 and, over the next two years, will complete a thorough and comprehensive review of the School's policies, procedures, protocols and programs with the goal of not only ensuring compliance with the Middle States accreditation standards and federal regulations but also attaining best procedural practices for institutions of higher education. The Working Groups will report to the Steering Committee and, working internally, will be responsible for engaging with the Steering Committee and with the other Working Groups. Externally, they will communicate with and report their findings to the greater School community, and they will meet with the review team during the Spring, 2026 site visit.

Since PSON is small in size, one Working Group was charged with reviewing and analyzing criteria from several related Middle States standards and compliance areas. Consequently, a total of six Working Groups were established, along with an interdisciplinary team charged with reviewing and assessing data to demonstrate compliance with the federal regulatory requirements embedded within each standard. Working Group Chairs and members were selected based on the diversity of their expertise and experience in the delineated areas of focus. The Chairs will organize the group's findings, track their progress and report to the Steering Committee, of which they are members. This process should streamline the flow of information to the Steering Committee, ensuring all criteria are addressed and the goals of the Self-Study are attained for the benefit of students and all School constituents.

Within each Working Group, responsibilities will include:

- Collect and analyze data documenting compliance with criteria for their Middle States Standard(s), considering the School's mission and institutional priorities and utilizing the *Evidence Expectations by Standard Guidelines* for data compilation and analysis
- Determine which of the priorities cited in the Strategic Plan to incorporate into the discussion of the Working Group's Standard(s) and criteria

- Delineate the key terms and focus areas within each Working Group's Standard(s) and compliance areas, pursuing lines of inquiry as they relate to the assessment of policies, procedures, processes and program outcomes
- Schedule meetings within the Working Group, with all the Working Groups and with the Steering Committee to ensure open channels of communication and coordination for cohesion of data recording; contribute relevant information to all meetings
- Identify existing evidence relevant to their Standard(s) or compliance regulations, along with any gaps in evidence; identify areas of strength and opportunities for growth and improvement
- Identify School community groups that are most relevant in providing input into their Standard(s) and coordinate with the Steering Committee to arrange meetings with those groups
- Adhere to the timelines set by the Steering Committee, completing documents in consonance with the Steering Committee timelines
- Develop draft outlines and a final report of their Standard(s) to submit to the Steering Committee for inclusion in the final Self-Study Report
- Present findings to the School community in tandem with the Steering Committee
- Participate in the MSCHE review team's site visit slated for Spring, 2026

Information on the six Working Groups follows:

Working Group A

Assigned Standards:

- Standard I – Mission and Goals
- Standard II – Ethics and Integrity
- Standard VII – Governance, Leadership and Administration

Chair:

- Bernice Pass-Stern, MS, MEd, Assistant Dean for Institutional Effectiveness

Members:

- Natalie Cline, MPH, Associate Dean for Administrative Services
- Linda Fabrizio, BBA, Director of Donor Relations and Communications
- Kimberly Glassman, PhD, RN, FAAN, Dean
- Janet Green, Chair of the PSON Board
- Vivian Lien, DNP, RN, CNE, Senior Associate Dean for Academic Affairs and Wellbeing and Clinical Associate Professor

Institutional Priorities to be Addressed:

- Promote student achievement and success (Standard I)
- Advance equitable and inclusive academic excellence and scholarship (Standards I, II and VII)
- Enhance community engagement (Standards II and VII)
- Maintain financial sustainability (Standard VII)

Potential Lines of Inquiry:

For Standard I: Mission and Goals

- To what extent are the School's mission, institutional priorities and strategic plans aligned with planning for budgetary allocations of resources, curriculum development and an assessment of program outcomes to yield heightened student success?
- To what extent do the processes, policies and procedures currently in place demonstrate the correlation between actual program outcomes and the attainment of the School's mission, institutional priorities and strategic plans?
- To what extent has the School evidenced alignment between its objectives for diversity, equity and inclusion and its mission, strategic goals and budgetary support for resource allocations?

For Standard II: Ethics and Integrity

- To what extent is there evidence supporting the alignment of the School's policies and procedures with a culture supporting academic freedom, fair and ethical communications and respectful treatment of students and faculty?
- To what extent do existing School policies and procedures demonstrate compliance with applicable governmental regulations and Middle States policies and procedures?

For Standard VII: Governance, Leadership and Administration

- To what extent can the School's current comprehensive Program Evaluation Plan (PEP) be upgraded to ensure it captures all requisite data points and analyses to systematically assess the effectiveness of the School's governance, leadership and administration in a sustainable manner?
- To what extent can mechanisms, policies and procedures be in place to ensure the School continues to operate with appropriate autonomy within the Mount Sinai Health System?

Working Group B

Assigned Standard:

- Standard III – Design and Delivery of the Student Learning Experience

Chair:

- Vivian Lien, DNP, RN, CNE, Senior Associate Dean for Academic Affairs and Wellbeing and Clinical Associate Professor

Members:

- Pennie Branden, PhD, FACNM, CNM, CNE, RN, Associate Professor
- Gagandeep Kaur, PhD, RN, Associate Professor
- Lorraine McGrath, MS, RN-BC, Senior Director of Clinical Affairs and Associate Professor
- Sarla Santos, MS, NPD-BC, NC-BC, CCRN, Director of Simulation Laboratory and Assistant Professor
- ABSN Program alumni - TBA

Institutional Priorities to be Addressed:

- Promote student achievement and success
- Advance equitable and inclusive academic excellence and scholarship
- Enhance community engagement

Potential Lines of inquiry:

- To what extent does the assessment of student learning experiences inform enhancements in quality, resource stewardship, and innovation to promote student achievement?
- To what extent does faculty design, delivery and evaluation of the student learning experience ensure appropriate rigor, coherence and logical structure to optimize student success and support the achievement of expected student learning outcomes and the demonstration of attainment of program outcomes?

Working Group C

Assigned Standard:

- Standard IV – Support of the Student Experience

Chair:

- Natalie Cline, MPH, Associate Dean for Administrative Services

Members:

- Tuan Le, MA, Assistant Director, Enrollment Management
- Guerdie Lucien, MEd, Student Services Coordinator – Admissions
- Bernice Pass-Stern, MS, MEd, Assistant Dean for Institutional Effectiveness
- Melissa Vargas, EdD, Assistant Director, Financial Aid
- 2 students – TBA
- ABSN Program Alumni - TBA

Institutional Priorities to be Addressed:

- Promote student achievement and success
- Advance equitable and inclusive academic excellence and scholarship
- Enhance community engagement

Potential Lines of Inquiry:

- To what extent can the School leverage an ongoing assessment of student achievement data to develop enhanced strategies that support student success, heightened community engagement and that promote improvements to the student experience?
- To what extent can the School utilize an ongoing assessment of student services to support diversity, equity and inclusion in student recruitment, retention, persistence and completion?

Working Group D

Assigned Standard:

- Standard V – Educational Effectiveness Assessment

Chair:

- Bernice Pass-Stern, MS, MEd, Assistant Dean for Institutional Effectiveness

Members:

- Kathleen Begonia, PhD, NI-BC, CCRN, Clinical Associate Professor
- Pennie Branden, PhD, FACNM, CNM, CNE, RN, Associate Professor
- Marjorie Cooke, DNP, MSN, RN, Assistant Professor
- Vivian Lien, DNP, RN, CNE, Senior Associate Dean for Academic Affairs and Wellbeing and Clinical Associate Professor
- 2 students – TBA

Institutional Priorities to be Addressed:

- Promote student achievement and success
- Advance equitable and inclusive academic excellence and scholarship
- Maintain financial sustainability

Potential lines of Inquiry:

- To what extent do our formative and summative systematic methods used to assess student learning and achievement demonstrate the attainment of student and program learning outcomes?
- To what extent are the results of assessment used to continuously improve the teaching-learning experience, to advance student achievement and ultimately to enhance educational effectiveness?

Working Group E

Assigned Standard:

- Standard VI - Planning, Resources and Institutional Improvement

Chair:

- Natalie Cline, MPH, Associate Dean for Administrative Services

Members:

- Suzanne Cutler, PhD, Member, Executive Committee, PSN Board
- Linda Fabrizio, BBA, Director, Donor Relations and Communications
- Vivian Lien, DNP, RN, CNE, Senior Associate Dean for Academic Affairs and Wellbeing and Clinical Associate Professor
- Bernice Pass-Stern, Assistant Dean for Institutional Effectiveness

Institutional Priorities to be Addressed:

- Promote student achievement and success
- Advance equitable and inclusive academic excellence and scholarship
- Maintain financial sustainability
- Enhance community engagement

Potential lines of inquiry:

- To what extent can the School develop crosswalks documenting the synergies between an institutional assessment process and School planning, resource stewardship and responsible fiscal management?
- To what extent can the School's policies, procedures and processes demonstrate it possesses adequate and efficient financial resources to ensure the sustainability of its community engagement initiatives?
- To what extent can the development and analysis of key performance indicators (KPIs) be leveraged to demonstrate attainment of strategic planning objectives (including those for diversity, equity and inclusion), institutional mission, student success and ultimately institutional effectiveness and improvement?

Working Group F – Evidence Inventory

Chair: Linda Paulls, MLS, School Research Librarian

Members:

- Pablo Obando, MFA, Assistant Director, Academic Technology and Media
- Representative from Mount Sinai Health System's Digital and Technology Partners – TBA

Interdisciplinary Team to Support Compliance with Federal Regulatory Requirements: 1 member from each Working Group will be assigned to this team

VI. Guidelines for Reporting

Each Working Group will follow these guidelines in terms of reporting to the Steering Committee:

Develop a draft outline for their chapter(s) that attains the following:

1. Indication which institutional priorities will be highlighted
2. Analysis of the existing evidence based on the criteria for the Standard(s)
3. Delineation of the process and timeline for identifying gaps in available evidence and leveraging strategies to remediate those gaps
4. Highlight of programs and processes that demonstrate attainment of goals, institutional priorities and strategic plans
5. Identification of School strengths, challenges and opportunities for improvement; justification of recommendations for improvement identified by the group based on the alignment with the School's mission, institutional priorities and Strategic Plan
6. Demonstration of ongoing and periodic assessment of the evidence inherent in the standard(s) and delineation of how results will be utilized for program improvement
7. Revision of the draft outline as necessary based on feedback from the Steering Committee

Lines of inquiry will be developed for each standard and criterion based on a review of the requirements by the Working Groups; they will submit their inquiry plans taking into consideration an analysis of the requisite documentation in the *Evidence Expectations by Standard Guidelines*. Inquiry plans will be submitted to and finalized by the Steering Committee.

The following represents the **Working Group Timetable**, with deadlines for submission of drafts and final reports:

<u>Deliverable</u>	<u>Due Date</u>
Working Group Chairs identify membership	Early Spring 2024
Working Group membership finalized	Spring 2024
Working Groups draft lines of inquiry	Spring-Summer 2024
Chapter outline and evidence required for standard developed	Summer-Fall 2024
Steering Committee comments returned to Working Groups regarding chapter outline and evidence requirements	Fall 2024
First draft of chapter completed	Spring 2025
Steering Committee communicates comments back to Working Groups regarding first draft of chapter	Spring 2025
Working Groups revise chapter contents based on feedback from Steering Committee	Summer 2025
Self-Study Tri-Chairs draft and edit full Self-Study document	Summer-Fall 2025
Self-Study draft posted for comment on dedicated page of School's website	Fall 2025
Findings from Working Groups presented at town hall meetings	Fall 2025
Revisions made by Working Groups based on community feedback	Fall 2025
Draft Self-Study Report submitted to Chair of MSCHE Review Team	Fall 2025
Chapters finalized based on comments from Chair of the MSHE Team	Early Spring 2026
MSCHE Review Team site visit	Spring 2026

The template for preparation of the Working Group first draft reports will specify:

1. Analysis of existing data and delineation where gaps in evidence may be present
2. Documentation of how the School meets/exceeds expectations for the Standard and its criteria
3. Linkage of criteria for the Standard with evidence documents uploaded to the Evidence Inventory
4. Indication of specific evidence that demonstrates compliance with the Standard and specification where the evidence is documented
5. Identification of gaps in policies and procedures that may suggest the School is not in compliance with the Standard and its criteria
6. Recommendations for methodologies for the School to strengthen its policies and procedures to meet the Standard and its criteria
7. Citation of examples how the School supports evidence-based decision making to enhance educational effectiveness
8. Recommendation of opportunities for innovation and improvements
9. Explanation, with examples, of how the School's strengths, challenges and growth opportunities are supported by the assessment process
10. Demonstration of how the findings align with the School's institutional priorities and strategic plans

The **Chapter Specifications** follow:

Chapter Section	Approximate Length
Introduction	1 page
Overview of findings: summarize how the Working Group	1 page

demonstrated compliance with the criteria for the Standard based on the School's Strategic Plan and institutional priorities	
Working Group Sources and Methods of Data Analysis	1 page
Detailed Analysis of Data Collection and Findings: specific data considered for each criterion	6 pages (most voluminous section)
Opportunities for Innovation and Improvement: cite examples of strengths and opportunities for improvement based on the School's compliance with the Standards	1 page
Implementation recommendations on areas of strength and opportunities for improvement: Steering Committee will develop a final list of recommendations in tandem with the Working Groups	1 page
Appendix (for Evidence Inventory)	Unlimited

The Working Groups will receive detailed instructions on formatting their reports in terms of structure, approximate page lengths, font/font sizes and standardized use of terms. Each Working Group will obtain instructions on utilization of the Evidence Inventory as a repository for their documents.

VII. Organization of the Final Self-Study Report

Since the Self-Study report will employ a standards-based approach, the chapters will be organized by the seven standards. Verification of compliance with federal regulations will be embedded in the relevant chapters. The final Self-Study report will include the following items:

1. Table of Contents
2. Executive Summary: to include an overview of the School, a summary of chapter findings and a list of recommended opportunities for innovation and improvement by standard
3. Introduction: to provide historical information about the School as well as its mission, vision, institutional priorities and Strategic Plan for 2024-2027. An outline of the Self-Study process will be delineated.
4. Standard I: Mission and Goals – to include a focus on institutional priorities of promoting student achievement and success as well as advancing equitable and inclusive academic excellence and scholarship
5. Standard II: Ethics and Integrity – to include a focus on institutional priorities of advancing equitable and inclusive academic excellence and scholarship, enhancing community engagement
6. Standard III: Design and Delivery of the Student Experience – to include a focus on promoting student achievement and success, advancing equitable and inclusive academic excellence and scholarship as well as enhancing community engagement
7. Standard IV: Support of the Student Experience – to include a focus on promoting student achievement and success, advancing equitable and inclusive academic excellence and scholarship as well as enhancing community engagement
8. Standard V: Educational Effectiveness Assessment – to include foci on promoting student achievement and success, advancing equitable and inclusive academic excellence and scholarship as well as maintaining financial sustainability
9. Standard VI: Planning, Resources, and Institutional Improvement – to include foci on promoting student achievement and success, advancing equitable and inclusive academic excellence and scholarship, maintaining financial sustainability and enhancing community engagement

10. Standard VII: Governance, Leadership and Administration – to include foci on advancing equitable and inclusive academic excellence and scholarship, maintaining financial sustainability and enhancing community engagement
11. Conclusion: summary of the major findings of each chapter with identified opportunities for improvement and recommendations for enhanced educational effectiveness
12. Evidence Inventory: list of documents that will be made available to the MSCHE Review Team
13. Appendices

VIII. Self-Study Timeline

The following timeline has been approved by the Steering Committee Tri-Chairs and plans for a Spring, 2026 Review Team site visit.

Timeframe	Activity
Fall, 2023	<ul style="list-style-type: none"> o Attend Self-Study Institute o Initially create and charge the Steering Committee, after identifying Tri-Chairs o Initially create and charge the Working Groups, to cover all 7 standards and the Evidence Inventory o Identify Working Group Chairs o Hold Town Hall meetings with the PSON community regarding the Self-Study process
Spring, 2024	<ul style="list-style-type: none"> o Confirm Steering Committee Tri-Chairs and committee members as well as Working Group members o Begin to develop the Self-Study Design to represent the template for the Self-Study Report o Launch a dedicated page on the PSON website for Self-Study progress reports o Draft Self-Study Design and share with key stakeholders (leadership, faculty, staff and students) o Lines of inquiry by standard crafted by the Working Groups o Submit Self-Study Design draft o Host an MSCHE VP liaison visit o Revise Self-Study Design for final MSCHE approval o Hold Town Hall meetings to present Self-Study Design to campus communities o Post Self-Study Design on School's website page
Summer, 2024	<ul style="list-style-type: none"> o Commence work on Self-Study Report; Working Groups meet regularly to draft the outline for chapters and provide list of evidence needed o Steering Committee meets regularly with Working Group Chairs o Upload documents from the Working Groups to the Evidence Inventory data bank o Post regular updates to the Self-Study dedicated page
Fall, 2024	<ul style="list-style-type: none"> o Work continues on the Self-Study Report o Working Groups meet with appropriate stakeholders and conduct research

	for Standards, criteria and regulatory compliance
Spring, 2025	o Working Groups initial chapters submitted, including accomplishments and opportunities for innovation and improvement aligned with institutional priorities
Summer, 2025	o Self-Study draft of preliminary reports from Working Groups reviewed by the Steering Committee o Feedback from the Steering Committee received by the Working Groups o Working groups complete and submit updated chapters to the Steering Committee o Solicit feedback from all stakeholders on Self-Study draft, including PSON Board and communities of interest
Fall, 2025	o Complete final draft of the Self-Study Report o Post regular updates on the Self-Study website page o Host Self-Study Team Chair visit to campus o Review feedback from Team Chair report on draft Self-Study Report
Spring, 2026	o Respond to feedback from Team Chair o Finalize draft Self-Study Report o Share final Self-Study report with all key stakeholders in Town Hall meeting o Post final Self-Study Report on Self-Study website page o Upload final Self-Study Report to MSCHE portal 6 weeks prior to team visit o Plan Self-Study team visit o Host Self-Study visiting team (prior to 04-15-2026)

IX. Communication Plan

The School will utilize several platforms to communicate the launch and subsequent progress with its Middle States Self-Study initiatives. These modalities include:

- a dedicated landing page on the School's website with relevant updates and Self-Study Design and Self-Study Report posted for all School community members
- periodic School-wide emails sent to ensure students, faculty and staff are kept informed with respect to progress in the Self-Study process
- key milestones and upcoming events posted on Moodle, the School's learning management system for student and faculty awareness
- hosting Town Hall meetings to (1) initiate the Self-Study process in concert with its Strategic Planning retreat and (2) coincide with MSCHE campus visits

The website landing page will also contain information on the School's Strategic Plan, being finalized for 2024-2027. Since the Self-Study process will run concurrent with the School's strategic planning enterprises, the significant interfaces will indicate to all School stakeholders that both processes are aligned and mutually informed priorities for the School. The dedicated page will provide general information about the accreditation process and will include a list of Working Group members, updates from the Working Groups, a calendar of events and draft documents as they become available. On the

landing page, a feedback form will be provided for all constituents; the form will be reviewed by the appropriate Working Groups.

Within the School, the Steering Committee will be responsible for fostering communications relating to the Self-Study process and the feedback from MSCHE submitted documents. Key stakeholders will be kept informed as follows:

- Since the Dean is a member of the Steering Committee, she will have input into all draft and final documents transmitted to the Steering Committee from the Working Groups.
- The School's leadership team meets weekly. All members of the Leadership team are also members of the Steering Committee, so they are intrinsically invested and aware of all communications and documents conveyed as part of the Self-Study process.
- Both faculty and staff meet on a regular basis: the full-time faculty meets at least twice per month and the student services team meets every week. Both group meetings are chaired by members of the Steering Committee; consequently, communications will be facilitated as they relate to the Self-Study process, document updates and upcoming events.
- Communications with students will be maintained on an ongoing basis in relation to the Self-Study process developments. In addition to receiving updates on Moodle, their learning management system, and informational emails, Student Government leaders from all cohorts meet with the Dean once per month wherein she relays essential updates that are shared with the student body.
- The School's Board is extremely invested in and committed to the Self-Study process. Both the Board's Chair and a member of the Board's Executive Committee are members of Working Groups. They will keep the entire Board informed on progress made throughout the Self-Study journey. Furthermore, the Dean and the Assistant Dean for Institutional Effectiveness present Middle States updates at each Board meeting. Finally, the Board is in the process of initiating an ad hoc committee responsible for working with the School on all pertinent Middle States accreditation policies, procedures, structures and documents.

X. Evaluation Team Profile

Within the Middle States community of member institutions, the Mount Sinai Phillips School of Nursing represents one of a very small number of private, non-profit, single-purpose 4-year baccalaureate Schools of Nursing not affiliated with a university. Consequently, there would be few similar institutions from which to select evaluation team members and a Team Chair. Recognizing that fact, the School feels it would be appropriate to select representatives from colleges of health science whose mission, vision and institutional priorities are closely aligned with PSN and whose leadership recognize the resources necessary to sustain a free-standing baccalaureate college of nursing operating within a health system.

PSN would seek the following characteristics for the evaluation Team Chair and team members:

- **Team Chair:** Ideally, a nursing school/health sciences dean or associate dean with expertise in conducting Middle States accreditation reviews
- **Team Members:** Ideally, members should possess experience in nursing education or a comparable health science. Their expertise should vary and include the disciplines of administration, academics/curriculum development, student services, faculty affairs, assessment and financial management.

For the selection process, PSON has identified the following **peer institutions** based on their size, parity with the number of nursing program graduates and 2023 NCLEX-RN examination licensure pass rates:

1. College of Mount Saint Vincent, New York
2. Mercy College, New York
3. Pace University, New York
4. Fairfield University, Connecticut
5. Quinnipiac University, Connecticut
6. Sacred Heart University, Connecticut
7. Eastern University, Pennsylvania
8. Wilkes University, Pennsylvania
9. Caldwell University, New Jersey
10. Felician University, New Jersey

Competitors within the MSCHE membership were identified based on the proximity of their location to PSON and, since most are CUNY or SUNY institutions, their tuition is lower than that of PSON:

1. Helene Fuld College of Nursing
2. Hunter College
3. Lehman College
4. SUNY Downstate Medical Center College of Nursing

XI. Strategy for Addressing Annual Institutional Update Indicators and Metrics

The Assistant Dean for Institutional Effectiveness is responsible for gathering, evaluating and trending data related to program outcomes in the areas of student achievement (retention and graduation rates; pass rates on NCLEX-RN nursing licensure examinations) and employment rates. The School's attainment of these program outcomes, trended over the last three years, are documented on the School's website. The School's financial health and its federal financial responsibilities, as they relate to federal Title IV regulations, are assessed through the School's participation in annual A-133 audits. These indicators and metrics, as delineated in the School's Annual Institutional Update (AIU) from IPEDS (Integrated Postsecondary Education Data System) surveys, will be analyzed for the Self-Study Report, with recommendations made for innovation and improvement in policies, procedures and structures to enhance educational effectiveness. This process will be facilitated since the Assistant Dean is a Tri-Chair of the Steering Committee and chairs the working group charged with analyzing data points for Standard V, Educational Effectiveness Assessment. The Steering Committee will, as a group, also verify the School's compliance with applicable federal regulations reviewed in Standards I, II, IV and V.

Data for IPEDS reporting is derived from reports generated by Empower, the School's student information system, and verified by internal audit mechanisms conducted by student services team members. Graduation rates correspond with NCLEX-RN licensure pass rates supplied by the New York State Education Department, Office of the Professions, as reported to the School on a quarterly basis. In addition, the Office of the Professions monitors the School's trended program outcomes via submission of annual reports to the State Education Department.

XII. Evidence Inventory Strategy

The Steering Committee established a Working Group solely responsible for compiling a repository of documents that will support the School's demonstration of compliance with MSCHE Standards for

Accreditation and Requirements of Affiliation utilizing data points of evidence exemplified in *Evidence Expectations by Standard Guidelines*. The School's research librarian who chairs this Working Group will confer with her leadership colleagues in the Icahn Mount Sinai Libraries and Information Sciences to obtain consensus on the most appropriate software to utilize when building the Evidence Inventory.

The Evidence Inventory will feature three levels of data collection:

1. Meta-Evidence Data Bank – will contain all documents deposited for review and potential inclusion in the final Evidence Inventory and citation in the Self-Study Report.
2. Working Group Data Inventory – will contain folders for each criterion within each Standard. Working Groups will select requisite documents from the meta-evidence data bank and place them in the appropriate folder, renaming them by criteria utilizing a standardized referencing system.
3. Final Evidence Inventory – will contain the final set of documents selected to demonstrate compliance with the delineated criteria and referenced in the Self-Study Report.

All files contained in the Meta-Evidence Data Bank that are not utilized in the final Evidence Inventory will be renamed utilizing a standardized referencing convention; these files will be retained and made available to the Steering Committee and Working Groups as necessary in preparation for the Self-Study review team visit.

The following chart delineates key data points that will be evaluated by the Working Groups to demonstrate compliance with MSCHE accreditation criteria by standard.

Working Groups and Designated Standards	Evidence Expectations Key Data Points
Working Group A: Standard I (Mission and Goals); Standard II (Ethics and Integrity) and Standard VII (Governance, Leadership and Administration)	<ul style="list-style-type: none"> • School charter • Board By-laws • School's Annual Report, 2023 • Table of Organization • Verification of compliance with designated federal regulations • School's Strategic Plan 2024-2027 • Trended data on program outcomes • Conflict of Interest policy
Working Group B: Standard III (Design and Delivery of the Student Learning Experience)	<ul style="list-style-type: none"> • Commission on Collegiate Nursing Education (CCNE) program reviews • Trend analysis of Student Opinion Reports (SORs) • Faculty and staff manuals; faculty by-laws • Faculty outcomes survey trended data • School catalog/student handbook • Sample course syllabi and curriculum maps • Program Evaluation Plan (PEP)
Working Group C: Standard IV (Support of the Student Experience)	<ul style="list-style-type: none"> • Student support services (including counseling, tutoring, academic advisement, special academic accommodations)

	<ul style="list-style-type: none"> • Student demographics trended data • Financial aid profiles; loan default rates
Working Group D: Standard V (Educational Effectiveness Assessment)	<ul style="list-style-type: none"> • Trended analysis of Student Opinion Reports (SORs) • Trended analysis of student achievement/program outcome assessment results (retention and completion rates, employment rates, NCLEX-RN licensure pass rates)
Working Group E: Standard VI (Planning, Resources, and Institutional Improvement)	<ul style="list-style-type: none"> • Crosswalk linking institutional assessment with planning, budgeting and resource allocation • Analysis of Key Performance Indicators (KPIs) • School budget 2024 • Alignment of School's enrollment plan with Strategic Plan • A-133 financial audit • Three-year trended student loan default rates