Standard II: Culture of Excellence and Caring – Faculty

The expertise, creativity, and innovation demonstrated by the collective faculty enable the nursing program to achieve expected outcomes that are congruent with the program’s mission, goals, and core values. The faculty complement consists of academically and experientially qualified individuals who have expertise as educators, clinicians, scholars, and researchers, and use their expertise to create a student-centered learning environment relevant to the program’s mission, goals and core values, and achievement of expected program outcomes.

Quality Indicators

II-A. Faculty are sufficient in number and qualifications to meet the program’s mission, goals, and expected outcomes.

*Interpretive Guidelines:* There are sufficient faculty to meet the program’s expected outcomes and support students in achieving learning outcomes. Faculty numbers are calculated and expressed in full-time equivalencies (FTE) for each program, including distance education programs, using methodology that is clearly established and supported by rationale. Established faculty/student ratios in classroom, clinical, and laboratory settings, including distance education environments, meet the standards set forth by professional and regulatory bodies and are designed to support the assessment and evaluation of student learning outcomes.

Full- and part-time faculty are academically and experientially qualified for their areas of teaching responsibility and meet the qualifications set forth by state and other regulatory bodies. Nursing programs have clearly developed and implemented policies regarding academic qualifications of faculty, including non-nursing faculty, which are adhered to and aligned with the mission and expected outcomes of the program. Nurse faculty hold active and unencumbered licensure as registered nurses and maintain active engagement in the nursing profession through current or recent relevant practice required for their assigned teaching responsibilities; non-nurse faculty who are licensed health care professionals are likewise held to similar expectations. Full- and part-time faculty hold a graduate degree in nursing or related field; those who do not hold a graduate degree have documented evidence of active and steady progression toward achieving a graduate degree in nursing or a related field within a defined timeline. Programs that employ faculty without the graduate degree credential provide rationale for doing so. Faculty who teach in advanced practice nursing programs possess the relevant content and practice expertise and relevant national certification credentials for their assigned teaching responsibilities as set forth by the appropriate regulatory and professional specialty organizations.

II-B. Preceptors are academically and experientially qualified for their role in facilitating student achievement of expected learning outcomes.
Interpretive Guidelines: The nursing program provides rationale for the use of preceptors and other alternative clinical supervisory models at the program level in which they are being utilized. The nursing program defines the academic qualifications of preceptors that are used within the program in alignment with relevant professional standards and regulatory bodies. The preceptor’s role, qualifications, and responsibilities in the learning environment are clearly described and communicated to all members of the learning community. Preceptor role and responsibilities are congruent with relevant regulatory and professional nursing standards. The nursing program has established performance evaluation measures for the preceptor role which are shared with preceptors. Preceptors are oriented to and coached in the role.

II-C. Faculty are supported in providing their unique and innovative contributions, as appropriate for the teaching, practice, research/scholarship, and service missions of the parent institution and nursing program.

Interpretive Guidelines: The unique and innovative contributions of each faculty member are valued and recognized by the parent institution and program. Clearly established expectations of faculty in the areas of teaching, practice, research/scholarship, and service that are congruent with the mission and goals of the institution and program are in place; support systems exist to help faculty achieve those expectations. Institutional and program support, development opportunities, and resources are made available to faculty to create a workplace environment that encourages individual faculty to meet expected faculty competencies and outcomes related to teaching, practice, research/scholarship, and service. Evidence exists that faculty are afforded the opportunity for ongoing development as educators, practitioners, and scholars/researchers and that they participate in those opportunities. Examples of resources that may be made available to support faculty development include but are not limited to travel funds, research support, development programs, internal grant funds, faculty practice plans, etc.

II-D. Faculty demonstrate individual and collective achievement of the program’s expected faculty outcomes.

Interpretive Guidelines: Expected faculty outcomes are clearly identified by the program and aligned with parent institution and program mission and goals. Data describing actual faculty outcomes are collected and analyzed in aggregate, and used to measure program effectiveness in meeting mission and goals within an environment supportive of continuous quality improvement. A system for evaluation of individual faculty performance is in place and is used to recognize accomplishments as well as define plans for future development and contributions to the program.
Standard II: Supporting Evidence Exemplars

- List of all full- and part time faculty by name and including credentials, degrees and granting institutions/dates of award, certifications, honorary designations, and other pertinent academic credentials
- Documentation of compliance with state board of nursing rules and regulations regarding faculty qualifications
- Descriptions of faculty/student ratios in classroom, laboratory, and clinical settings
- Number of faculty and staff FTEs committed to the program
- Descriptions of formula used to calculate faculty FTEs
- Policies related to faculty workload
- Examples of selection, orientation, and evaluation criteria for preceptors and others who supervise students in practice settings
- Description of expected preceptor qualifications, roles, and responsibilities
- Examples of faculty development resources and opportunities and related outcomes
- Evidence of faculty evaluation criteria and support for meeting future performance goals related to teaching, practice, scholarship/research, and service
- Documentation of aggregate faculty outcomes (from past three years) meeting expected faculty outcomes