APRIP ROUND 1 OVERVIEW

June 15, 2015

THIS SECTION PROVIDES THE READER WITH THE RESULTS OF THE INITIAL REVIEW OF ALL APRIP TEAM REPORTS. ONE OF THE APRIP TEAM REPORTS FOLLOWS THIS SECTION.

The purpose of this report is to provide a high-level overview of Round 1 of the UMS Program Integration portion of the Academic Portfolio Review and Integration Process (APRIP). Nine discipline-based teams met from January-May, 2015 to discuss strategies to increase quality, access, and fiscal sustainability through inter-institutional collaboration. Teams represented business, criminal justice, education, engineering, history, languages, marine science, nursing, and recreation/tourism. Each provided a detailed report containing recommendations for further development.

On June 11, the Chief Academic Officers reviewed all nine team reports and determined which action items would be pursued at this time. They presented and discussed their recommendations with the APRIP Oversight Committee on June 12. They especially noted the following:

1. The team reports represent extraordinary levels of time, thought, and effort on the part of over 100 individuals. The teams were working under very difficult conditions, both in terms of time available and because so many of the factors required to implement One University were and remain undecided. CAOs and the Oversight Committee are deeply grateful to these academic pioneers for their good work.

2. The CAOs are recommending follow-up on many but not all of the team recommendations, based on a variety of factors. They will return to the reports in the future as the system is able to lay more groundwork for additional action steps.

3. The CAOs will assign follow-up responsibility for recommended actions to individuals or groups that have the appropriate responsibility and authority to bring them to life – in most cases to administrators or official groups. Team input will continue to have value as needed, but they have fulfilled the responsibilities requested of them.

ACTION ITEMS FOR INITIAL IMPLEMENTATION

1. Business
   a. Support the development of a single MBA for UMaine and USM. Increase recruitment efforts and expand pipelines into that MBA from business programs at the other five campuses. Develop opportunities for students in undergraduate majors other than business, as well, to move into this MBA.

   b. Further develop a vision and plan for the business programs at the five smaller campuses. This plan should further integrate, with intentionality, these programs to support them with more efficient operations, while also encouraging campus differentiation where appropriate.

   . Criminal Justice and Criminology
      a. Establish a common community / professional advisory board.

      b. Develop a common associate’s degree with common course numbering, descriptions, and learning outcomes.
c. Pursue ACJS certification / accreditation of the common associate’s degree.

3. Education
   a. Re-institute System-wide Education Deans’ and Directors’ meetings to coordinate the work already being done across the System, and to explore, plan, and implement other collaborative efforts going forward.
   b. Continue work on the common Master of Education in Instructional Technology currently in development between UMaine, USM, and UMF.
   c. Continue work on the 3+2 program in Rehabilitation and Counselor Education currently in development between USM and UMF, and the suspension of UM’s Counselor Education program.
   d. Collaboratively deliver secondary education methods courses for all secondary candidates across the System.
   e. Build pathways from all seven campuses into graduate work in Education.
   f. Collaborate on course / program delivery across the seven campuses using the cohort model to the greatest extent possible, to achieve the greatest possible access and efficiency.

4. Engineering
   a. Develop a uniform curriculum for students in their first two years of mechanical engineering and electrical engineering. Courses will be primarily delivered on site, but will be fully transferable to facilitate student transfer between UM and USM.
   b. Move a selection of upper-level courses toward more online pedagogy to facilitate sharing those courses between the two campuses.
   c. Establish curricular committees in mechanical engineering and electrical engineering to meet each semester to ensure that first-two year curricula remain aligned and to ensure that the coordination is operating effectively and efficiently.
   d. Develop curricula at the five smaller campuses to allow those students, after one or two years, to transfer into the engineering programs at UM and/or USM.
   e. Develop uniform course numbering in the core areas—mathematics, physics, and chemistry—to facilitate transfer and ensure consistency.

5. History
   a. Develop a stronger pathway from the various undergraduate programs into the graduate program at UMaine, and invite all UMS history faculty to apply for admission into UMaine’s graduate faculty.
   b. Explore the possibility of merging the four current undergraduate programs into a single program that would be available on all seven campuses, in order to sustain and build the availability of history curriculum. Encourage differentiation in areas of expertise at various campuses, to further build the diversity of history education.

6. Languages
   a. Continue the existing French and Spanish degree programs, with access at all seven campuses, initially with a focus on language acquisition.
   b. Expand language acquisition opportunities in other languages such as Japanese, Chinese, and Arabic. For example, Chinese could be offered through USM’s Confucius Institute.
c. Continue the M.A. in Applied Teaching in French and Spanish.

d. Coordinate and integrate all UMS study abroad offices to expand and support study abroad on all seven campuses.

7. **Marine Sciences**

a. Develop joint, blended, team-taught, etc. courses in a variety of ways, such as distance courses with field-based components. Take advantage of short course opportunities, such as one day per week, summers, weekends, etc. that allow rich use of off-site facilities.

b. Articulate the curricula, particularly with learning outcomes at upper levels, to facilitate students moving from undergraduate into graduate programs.

c. Explore further opportunities to collaborate on use of facilities, both on campus and off site.

d. Develop a 4+1 Professional Science master’s degree, with dual 400/500 level courses as appropriate.

e. Develop a common Web presence, particularly for purposes of marketing and student recruitment.

8. **Nursing**

a. Develop a plan for the full alignment of nursing curriculum within the UMS, including a detailed articulation of the challenges and a plan for addressing them.

b. Given the critical importance of expanding nursing programs to meet the current and future needs of Maine, consult with appropriate external group(s) to help us better understand the challenges and identify strategies for expanding our capacity, particularly in clinical placements. Also explore strategies currently being used at nursing programs in other rural states.

c. Develop a report on the current nursing education partnership between UMA and UMFK. Include an analysis of the challenges and successes experienced in this collaboration thus far, as well as suggestions for improvements. This report should be delivered to the UMS CAOs for their review by the end of the fall 2015 semester.

9. **Recreation and Tourism**

a. Strengthen communication across the campuses with the development of a central Web site, designed to serve students and faculty, but also to serve as a marketing and student recruitment tool.

b. Seek opportunities for semester-long “residencies,” to allow students at any campus to take full advantage of the differentiated areas of expertise and opportunity at other campuses.

c. Further expand the range of short courses available, taking advantage of the range of specializations already available on the various campuses. Consider a full range of possibilities—summers, weekends, January and May terms, semester breaks, etc.

d. Develop pathways to take further advantage of articulated 4+1 opportunities for student progression into graduate work.

e. Consider the development of hybrid team-taught courses, employing “point persons” in the field to work with the primary on site (or online) instructor.

f. Collaborate on market-based certificate programs, expanding access across multiple campuses.
Essential Next Steps

The APRIP Teams were engaged in high-level planning. All of the disciplines require additional work to bring the recommendations to reality, some more than others. The existing teams or successor designees must do some additional planning, and most will need funding. Leaders and professional staff must do considerable work to enable the plans to become reality. This work will be costly and requires a capital budget. External funding would significantly advance the time frame for implementation.

In a May 2015 meeting, Team Leaders recommended that UMS support their recommendations as follows:

1. Build capacity for extensive distance-delivery and blended instruction, including
   a. Significant increases in interactive video instructional sites that are absolutely reliable and faculty-friendly.
   b. Significant increases in faculty professional and instructional development capacity (time, access to expertise and resources), ease of access, and expectations.
   c. Common academic calendar system-wide
   d. System-wide academic information system for course planning, advising, program marketing
   e. System-wide marketing
2. Establish capacities and systems for students to enroll simultaneously in multiple institutions – capacities that are seamless and impact-neutral for students, faculty, and institutions.
   a. Students: Advising, registration, tuition rates, fees, billing, payment, reliable planning for transfer, financial aid, grade transfer, online comprehensive catalog and pathways, etc.
   b. Faculty: Workload and P&T recognition
   c. Institutions: Revenues and enrollment credit, non-competitive funding model

Additional Achievements, Round 1:

- Emerging culture: help each other better serve students, whether on the giving or receiving end; inter-institutional respect for faculty expertise; expanded professional colleagueship
- Transferability enhancements, certificate and associate programs
- Increased awareness of benefits from greater comparability/standardization of general education
- Extraordinary voluntary service to UMS despite heavy workloads, contrary administrative systems, fear, and sometimes-difficult interpersonal issues
- Important lessons to apply to the Round 2 process and beyond
APRIP NURSING TEAM MEMBERS

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Executive Summary: Academic Portfolio Review and Integration Process Nursing Team Report

The APRIP Nursing team report is a collective effort to present a proposal for consideration in answer to the charge to “restructure nursing education to enhance quality and expand access while achieving fiscal efficiencies”. The APRIP team members met together in meetings via polycom, phone and face to face to discuss ideas and formulate a plan. Correspondence was also conducted through document sharing via the established google site. Data was collected and used as a basis for decisions as it was available.

It should be noted that the APRIP Nursing team was unable to come to a consensus agreement regarding substantive collaborative efforts that will increase quality, access and financial efficiencies. However, the recommendations in the report have the potential to move nursing education to a sustainable model. While many committee members recognized the numerous similarities in the individual nursing curriculums and share the same challenges regarding supply of nursing faculty and clinical learning placements, many do not support complete collaborative efforts that might risk losing academic and financial control of individual campus programs.

The proposals that follow received wide-ranging support of committee members and are designed to preserve the integrity and authority of each individual nursing program of the University of Maine System. Proposals to significantly increase collaboration or create a one-curriculum model were discussed but did not receive support from the majority of team members.

At the start of its work, the APRIP Nursing team members reviewed nursing education initiatives ongoing in the State of Maine. It was agreed that the team would observe and support the established work of the statewide commissions and committees. These initiatives are described in the report and throughout the proposal as they relate to individual suggestions. The team also developed fundamental principles to direct the suggestions for the proposal. These principles are to maintain each individual curriculum plan at UM, USM and UMFK, to address the nursing workforce need for Maine, and to address the shortage of qualified nursing faculty and clinical placement locations.

A proposal for a semi collaborative model for pre licensure baccalaureate nursing education is included in the report. The model is best described as a shared delivery model that enhances student access by opening admission to students at additional campuses, centers and sites that are underserved by nursing education. Additional study should be conducted to determine the most appropriate locations for these additional access sites.

The model presented maintains nursing programs at campuses already offering nursing education while adding access locations not offering nursing but having the support and general education courses needed for the academic plan. Students entering one of these new access sites would transfer to one of the campuses with nursing education to complete the clinical courses of the chosen program. Details of the plan are included in the proposal along with additional suggestions for collaboration in nursing education to enhance quality, address faculty need and support financial sustainability.
Recommendations for pre-licensure nursing education include:

- Curriculum collaboration of courses common to all nursing curriculum plans
- Shared faculty among all nursing programs
- Establish a blue ribbon committee to assist clinical practice setting need
- Increased need for student advising
- Strategies for permanence and sustainability

Collaboration efforts have been initiated for the Doctor of Nursing Practice degree offered by the University of Southern Maine. Information is provided about this collaboration and recommendations for further collaboration of doctoral level education for nurses is encouraging.

Recommendations for graduate nursing education include:

- Shared faculty among nursing programs
- Expansion of Masters level nursing education programs to meet the needs of Maine
- Expansion of Doctoral Nursing Programs through collaboration of qualified nursing faculty

The work of the APRIP Nursing team has elevated discussion about the necessity for and productivity of nursing education in the state. It has also provided a forum for nurse educators to collectively identify areas of need to help with program sustainability for student success and financial viability. The work presented in this report is a beginning. Ongoing planning, work and support can make worthwhile changes a reality.
Introduction

The charge issued for the Academic Portfolio Review and Integration Process (APRIP) by the University Of Maine System Board of Trustees, to consider restructuring and redesigning of nursing programs, is introduced at a time when nurse educators and nurse practice leaders across the State of Maine have been working together to redefine and redesign nursing education. Collaboration and restructuring nursing education to meet the health care needs of the future is a top priority of all nursing program faculty in the State. As the Nursing APRIP team began its work, the decisions of established statewide nurse educator and nursing practice committees was reviewed. It was decided that the agreed on decisions should be maintained and not be discussed for re-negotiation by the APRIP sub team. Those decisions are summarized below.

Statewide Nursing Practice and Education Initiatives:

The Maine Partners in Nursing Education and Practice committee members developed and adopted Maine Nurse Core Competencies for the Nurse of the Future. In 2012, every public and private school of nursing in the State of Maine agreed to adopt the core competencies to be included in the nursing program learning outcomes. Each University of Maine System nursing program has adopted the Maine Nurse Core Competencies and have integrated them into the student learning outcomes of the individual program. The APRIP Nursing team recognized this as a relevant parallel in our nursing programs that will facilitate collaboration between programs.

The Maine Nursing Education Collaborative (MENEC) is a subgroup of the Maine Partners in Nursing Education and Practice and is comprised of members representing the thirteen nursing programs in the State of Maine. The work of the group is dedicated to transforming nursing education in Maine to prepare graduates to meet the demands and challenges of an evolving health care system. One priority of the group is to develop pathways to more easily educate the nurses at the baccalaureate level. This initiative is in response to the national goal for eighty percent of the nursing workforce to be a baccalaureate educated nurse by the year 2020. As part of this work, MENEC has proposed and agreed on a recommendation for common admission standards for all nursing programs. The adoption of common admission standards will help in the transition of Associate Degree Nursing graduates from community colleges to baccalaureate programs. The recommended admission standards were approved by the MENEC members in May of 2015. (Appendix A)

An initiative to establish a formal transfer agreement between the associate degree nursing programs of the Maine Community College system and the University of Maine System RN – BSN nursing programs is ongoing. MENEC is currently working with Barbara Woodlee and Rosa Redonnet to facilitate the initiative. The APRIP nursing team agreed that this initiative should be supported by the recommendations in the APRIP proposal. Recommendations for the RN-BSN program options are included in the proposal section of this report.

Working principles of the APRIP Nursing Team:
In addition to the agreement that work of Statewide Nursing Education and Practice committees be maintained as it relates to the APRIP initiative, the Nursing APRIP team agreed on the following fundamental principles for use in developing a team proposal. Variations to the proposal were introduced by a few team members and those suggestions are included in the report. In addition, two distinct minority proposals were submitted for consideration by the team. The proposals were discussed and aspects of each proposal have been incorporated into the nursing curriculum design presented for review. The stand-alone proposals are included in appendix B for review.

Nursing Curriculum Design

Currently, there are four campuses of the University of Maine System that offer Nursing Programs at various degree levels. Traditional pre licensure baccalaureate education is offered through the University of Maine (UM), the University of Southern Maine (USM), and the University of Maine at Fort Kent (UMFK). The University of Maine and the University of Southern Maine also offer graduate level degree programs. The University of Maine at Augusta offers an associate to baccalaureate degree completion program as does the University of Maine at Fort Kent and the University of Southern Mane. UMFK also offers a traditional baccalaureate degree program on the Augusta Campus in collaboration with UMA. (Appendix C)

Each campus program is designed with unique philosophies that align with the campus mission. Nursing education courses are taught from the context of the unique mission and program philosophy. The committee ultimately agreed that it is important for nursing students studying in the State of Maine to have choices in nursing education that will also meet their personal preferences for place, practice design and program uniqueness. Therefore, the Nursing APRIP committee continues to support separate nursing curriculums on each campus. The proposal for collaboration is presented with this belief and principle as a basis for design.

Nursing Workforce Need:

Development of strategies to meet nursing workforce needs for the State of Maine is necessary to meet a priority goal of the State of Maine Nursing Workforce Strategic Plan (Maine Partners in Practice and Education, 2012). Current data reported by the U.S. Department of Health and Human Services (HRSA, 2014) shows that the state of Maine is one of ten states in the United States that continue to have a projected inadequate supply of licensed registered nurses compared to an increased demand for nursing care services. This projection is calculated through the year 2025. Nationally, Registered Nursing continues to be listed as one of the top ten occupations for job growth and the need for nurse job replacement continues to grow as the Baby Boomer population retires. In the State of Maine the average age of fifty percent of all practicing nurses is over fifty. Additionally, research has shown that quality patient care is dependent on an educated nursing workforce. Lower mortality rates, fewer patient care errors and positive patient care outcomes are linked to nurses being educated at the baccalaureate and graduate degree level. Therefore, it is the belief of the APRIP Nursing Team that increased access to nursing education through the University of Maine System is a responsibility that must be fulfilled to assist with the workforce needs of the State of Maine.
Nursing Faculty Shortage:

Nursing faculty shortages impact each school of nursing in the University of Maine system. The recent loss of budgeted faculty lines in some programs should not be viewed as a lack of need for faculty positions, but as a reality of the higher cost of nursing education due in part to the mandate for small clinical and laboratory learning course faculty to student ratios. Nationally, the nursing faculty shortage is recognized as a contributing factor in the ability to increase access to nursing education. One reason for the nursing faculty shortage is related to faculty retirement without adequate numbers of nurses advancing as educators. In Maine, the age range of most nurse educators is between forty-five and sixty-five. Nationally, the average age of nurse educators is reported as fifty-five. Higher compensation in clinical and private sector positions for graduate educated nurses is another reason cited for the faculty shortage. In addition, masters and doctoral programs for nurse educators are not producing enough new nurse educators to meet the demands. (AACN, 2014) The Nursing APRIP team recognizes that a nursing faculty shortage will impact the ability to increase access and quality of nursing education while maintaining fiscal sustainability for the University of Maine system. Recommendations for graduate nursing education programs are made with these considerations.

Clinical Practice Opportunity Challenges:

The APRIP Nursing team identified the need for increased statewide access to clinical practice settings for all levels of nursing education. This need is addressed in each program level proposal and is an integral part of each plan for growth and access to nursing education. The University of Maine System can be a leader for statewide nursing education if we work together with leaders in health care to examine and create solutions to provide clinical learning opportunities in settings evolving as the nursing care settings of the future.

Proposal

Collaborative Model for Traditional Baccalaureate Nursing Education

The proposal for collaboration of baccalaureate nursing education at the pre licensure level is developed to fulfill each APRIP initiative as well as support Statewide Nursing Practice and Education initiatives. The model of program delivery used as a basis for the proposed plan is best described as a shared delivery model. The proposed plan is described with identified core components.

The UMS Collaborative Baccalaureate Nursing Education model preserves and maintains the academic programs currently offered and accredited at UM, USM and UMFK. The UMFK program includes the collaborative program option at UMA. Student enrollment in each of these programs is steady and each year the number of applicants exceeds the available number of seats in each program. Increased access to nursing education has been identified as an area of need and potential growth for the University of Maine System nursing education programs. Over-all, the proposed plan provides for access to nursing education at additional UMS campuses, sites and centers for the first two years of academic study after which the students will relocate to a
targeted campus offering nursing education for program completion. Students will identify the
campus program for completion after their first year of study. Program selection will allow for
individualized academic planning and completion of campus specific general education
requirements. It will also allow time for clinical placement planning and for students to arrange
housing.

The core components of the collaborative model for traditional baccalaureate nursing education
are described below. Each core component includes key recommendations that must be
accomplished to ensure success of the proposal.

**Statewide Access to Nursing Education**

*Description:* Students enter nursing education at identified UMS campuses, centers and sites.
Students transfer to and complete nursing education at approved, accredited UMS nursing
education programs at UM in Orono, USM in Portland and UMFK in Fort Kent and Augusta.

*Intent/Rationale:* The principle purpose of statewide access to nursing education is to increase
opportunities for students statewide to access nursing education through the University of Maine System. Appendix D contains a schematic design to illustrate student admission to program
completion.

Currently, prospective nursing students have access to pre licensure nursing education at four
campus locations. These locations include Orono, Portland, Fort Kent and Augusta. For the past
twenty years, the University of Maine at Augusta offered an associate degree in nursing (ASN)
program in Ellsworth, Machias, Calais and Rockland. UMA is closing the ASN program and
program delivery is scheduled to end in 2017 with graduation of the final admitted class. This
closure will leave areas of the state without direct access to nursing education. Anecdotal
requests for nursing education programs in Maine’s Downeast and Rockland areas are numerous.
Requests are also frequently received from the Rumford and Hutchinson Centers. These requests
suggest an urgency to develop and plan pathways to nursing education that originate in these
areas of our state.

Review of location of nursing programs offered in the State of Maine also verifies the need for
access in the Downeast, Rockland and Western Maine areas. Appendix E lists current nursing
education programs by location in the State of Maine.

Nursing workforce data obtained in 2014 by the Maine Board of Nursing demonstrates that over
50% of Maine’s nursing workforce is over the age of 50. This workforce data suggests an
increased need statewide for nurses entering the profession within the next ten years. Increased
access and availability to nursing education will assist with the nursing workforce demand within
this time period.

*Key Recommendations for Success:*

1) Identification of campuses, sites and centers for additional nursing program access through
completion of a needs assessment.
2) Identify and approve an admission number per nursing program campus for transfer students. Each campus must research and identify the number of additional students that can be accommodated for clinical cohorts. (See Core Component: Clinical Practice Access)

3) Establish and maintain common admission criteria, policies and processes for all nursing programs. Admission criteria for students entering access sites will also be identified.

4) Establish an admission and transfer process with a timeline that provides for seamless transfer into the nursing program for curriculum completion.

**Curriculum Collaboration**

*Description:* Each nursing program of the University of Maine System has an individual, campus mission specific, nursing curriculum designed to reflect the philosophy of the nursing program. Curriculum collaboration between campuses is designed and established with respect to each unique curriculum. General education, nursing support courses and nursing courses are coordinated between campuses to facilitate student completion of the chosen nursing curriculum.

*Intent/Rationale:* The collaborative nursing curriculum model for traditional baccalaureate education is designed with recognition of the similarities in state regulatory requirements for prelicensure graduates. For example; all nursing graduates take the same nursing licensing exam, practice under the same nurse practice act and are governed by the same State Board of Nursing rules and regulations. Additional guiding principles for the collaborative model are the established Maine Nurse Core Competencies and accepted initiatives to meet State of Maine education goals for nursing.

One of the goals in the 2012 – 2020 State of Maine Nursing Workforce Strategic Plan (Maine Partners in Nursing Education and Practice, 2012) identifies the need for statewide, seamless application into and progression through nursing programs. The collaborative nursing curriculum proposal has the potential to contribute to achievement of this goal as it creates a new and creative access model for nursing education statewide.

The program of study proposed for the collaborative baccalaureate nursing curriculum is four years or eight semesters in length. The first one to two years consists of general education, nursing support courses and introductory courses to the nursing profession. Usually, the foundation for subsequent nursing courses in each nursing program is built through study in the introduction of nursing courses. Therefore, the introduction to nursing courses in this plan are to be designed to meet the curriculum needs of each individual campus nursing program and should be readily transferred from one program to another. Course development using this proposed design is possible through use of the established Maine Nurse Core Competencies and State and National principles for nursing education. A beginning proposal for a plan of study is presented for illustration in appendix F.

Support courses for all prelicensure nursing education consist of science and social science courses. At this time, the science and social science courses required for each UMS nursing program vary slightly. Agreement to change to a common support course plan or to maintain the
differences will need to be finalized as the collaborative plan is realized. The differences have been outlined in the illustrated plan of study in appendix F.

Completion of general education requirements within the collaborative nursing curriculum is designed to follow the newly approved UMS general education plan. Students will complete general education requirements as defined for the University System and the targeted campus. Students will identify the target campus at the end of year one which will give students time to identify and complete campus specific general education courses or outcomes. Academic plans will be designed to assist students navigate necessary course selection.

Additional courses currently common to all nursing programs are pharmacology, nursing research and health assessment. Each campus has approved courses for these content areas that are designed to meet unique individual program outcomes. Review of these courses for redesign potential to meet cross program outcomes could provide additional course selection options for students in all programs. The courses, if selected for cross campus sharing, could also provide students with consistent course scheduling and academic variety. Quality of education would be enhanced as faculty may specialize in an area and be assigned to teach the courses for several campuses. (See Core Component: Faculty Sharing)

Nursing courses with clinical learning components are taught in the third and fourth year of each nursing program in the University of Maine System. Options for clinical course sharing among the nursing programs has been introduced for discussion and potential planning. One example that could increase academic quality and experience for students would be to develop a student exchange program for clinical courses. For example; if a student who has chosen to complete their nursing education with a rural health care focus at the University of Maine at Fort Kent is interested in an experience with inpatient pediatrics at a hospital and University with a metropolitan mission, might a “semester away” experience be established? This arrangement would require application, planning for space in the courses and student advising and preparation for program philosophy differences. Residency requirements for graduation would also need reconsideration as well as curriculum content differences between programs.

Another potential clinical course design initiative is to develop specialty clinical courses that would meet all nursing program outcomes and that could be taught by an identified campus for all nursing programs when necessary or desired. The clinical courses would include subject areas that most often are difficult areas to recruit qualified educators such as adult health, women’s health, pediatrics and mental health. The teaching of theory content for these courses could be shared among the campuses and accepted as part of the curriculum plan for each individual campus program.

Grading and academic progression policies for nursing programs are approved for each campus. Campus-to-campus differences exist within these polices and is a topic of discussion at statewide nursing faculty meetings as work on alignment for student transfer options is addressed. Review and potential revision of these policies are required to maintain seamless transfer for all nursing students within the University of Maine System.
Each traditional nursing program of the University of Maine System is currently externally accredited by the Commission on Collegiate Nursing Education (CCNE). The addition of the proposed collaborative initiatives, if adopted, will require each program to submit a substantive change report and request for continued accreditation.

**Key Recommendations for Success:**

1) Complete development of the Collaborative Nursing Education Student Curriculum Plan which includes development of:
   a) Course proposals for introduction to nursing courses
   b) Course proposals for identified common nursing courses for cross-campus teaching

2) Establish agreements for transfer of general education and support courses from all access campuses, centers and sites.

3) Continue to explore clinical course collaborations described in the proposal.

4) Review and agree on grading and academic progression policies for entrance into individual campus nursing programs.

5) Research external accreditation implications for the collaborative curriculum proposal and report changes as necessary.

6) Establish a schedule for ongoing curriculum review and revision.

**Curriculum Collaboration – Alternate Proposals**

Alternate suggestions to the above curriculum proposal are proposed by some Nursing team members for consideration. The suggestions are included below with rationales as presented to the team.

1) Students should identify the desired nursing program campus location for transfer upon admission to the first year of study at alternate campuses, centers or sites.

   Rationale: Student advising needs for individual nursing programs vary due to different course requirements in each nursing program. To assist students with navigation through program plans, they should identify which program of study they will follow upon admission to a nursing program or access campus, center or site.

2) Students entering nursing education at alternate campuses, centers or sites should transfer to the selected nursing program campus at the beginning of the second year or at the end of the third semester of study.

   Rationale: Matriculation in the campus community should occur at the beginning of the second year of nursing education to provide students with sufficient orientation to program culture and philosophy. Some courses with laboratory learning components are currently scheduled in the second year and would also be difficult to provide at the alternate campus locations. A change to an alternate campus location would necessitate curriculum restructuring of the courses into the
third and fourth year of the program. Individual campus revenue loss was also identified as an area of concern if students were to transfer to a nursing program campus for less than three years of study.

3) Students should complete all clinical courses through the degree-granting campus.

Rationale: Nursing programs have unique course sequencing designed to ensure achievement of program outcomes. Therefore all clinical courses should be completed at the degree-granting campus.

Shared Faculty

Description Shared faculty are defined as nursing faculty who are hired by a University Campus that could have part of their teaching workload assigned to another nursing program at another University of Maine System campus.

Intent/Rationale: It is well known among nursing professionals that nursing faculty positions are often times difficult to fill with qualified educators. Open nursing faculty positions often remain unfilled close to the start of the academic year and qualified faculty for specialty courses are most in demand. A survey released by the Association of Colleges of Nursing in 2013 reported the top reasons cited for having difficulty finding faculty were a limited number of doctoral-prepared faculty and noncompetitive salaries compared to the practice arena. While survey data for the State of Maine is not available, each nursing program director anecdotally confirms this information.

A faculty-sharing model can create an opportunity to attract nurse educators interested in teaching in their specialty areas for several nursing programs. Sharing of faculty may also contribute to fiscal savings for the University of Maine System and individual campuses. Additionally, quality education can be enhanced as nurse educators are able to teach in their areas of expertise for more than one nursing program.

It is the intent of this proposal that a faculty-sharing model be created for areas of need and that each program maintain a core number of campus specific faculty at the onset of the collaborative plan. A core unit of nursing faculty is necessary to maintain adequate student advising and faculty mentorship and to complete the work of program revision and refinement.

Concern for the faculty-sharing proposal in pre-licensure programs has been voiced by some APRIP Nursing Team members. Full support is articulated for faculty sharing in graduate and doctoral nursing education where it is often times more difficult to secure qualified nursing faculty for specialty programs.

Key Recommendations for Success:

1) The University of Maine System should begin discussion of contract negotiations that would allow for faculty sharing.

2) Identify course teaching assignments for faculty sharing among the four nursing programs with respect to faculty workload parameters.
3) Develop a prospective five year plan of full and part-time faculty need to accommodate delivery of the proposed curriculum for collaborative baccalaureate nursing program.

4) Develop a prospective five year plan of full and part-time clinical faculty need to accommodate clinical teaching of students in the proposed collaborative baccalaureate nursing program. (State of Maine regulations maintain a minimum ratio of 8 students to 1 faculty member in clinical learning settings.)

5) Develop a model for cost sharing of faculty salaries and benefits for faculty engaged in teaching across campuses.

6) Establish a common academic calendar for the University of Maine System campuses.

Access to Clinical Practice Settings

Description: Available access to clinical learning settings for undergraduate nursing students must be adequate and sustainable to accommodate students admitted into each nursing program.

Intent/Rationale: Nursing program coordinators, responsible for placement of nursing students in health care settings for clinical learning, have experienced increased difficulty securing adequate numbers of placements for all admitted nursing students. Health care facilities experience inpatient census decline, increased acuity of inpatients, fewer qualified nurses available to assist with clinical student supervision, and a host of other reasons that cause reduced numbers of clinical practice placements or refusal of clinical students in a given semester. In addition, the need to increase the number of clinical placements for learning due to increased numbers of nursing students admitted to assist with upcoming demand for nurses, creates an even larger deficit for adequate clinical learning placements across the state. The problem is particularly challenging in rural areas of Maine where health care facility changes have impacted the number of health care services provided in those areas.

Research on access to clinical practice settings is needed to identify the number of students that can be responsibly admitted into the collaborative baccalaureate nursing program proposal. Research and planning for alternate clinical learning scheduling will also need consideration. Examples of alternate clinical learning might include block clinical courses during the summer months for student cohorts once theory learning is completed and weekend and night clinical learning schedules. Clinical faculty availability will also need consideration in this planning process.

Simulation learning is used to enhance clinical learning at each campus nursing program. UMA, UMFK and USM on the LAC campus recently received bond money to expand nursing simulation learning capability. These campuses are currently making plans to purchase and expand the use of simulation in clinical learning. UM and USM also have robust simulation learning experiences incorporated into clinical nursing courses.

Costs associated with equipment for nursing laboratory and clinical simulation learning can be high. The small student-to-faculty ratio for clinical learning also increases program faculty
costs. Student contribution to the program costs could be increased though differential tuition or adequately calculated course fees for laboratory and clinical nursing courses.

Key Recommendations for Success:

1) Research clinical learning opportunities currently in use for increased access with creative scheduling.
2) Research underused and unidentified clinical practice opportunities.
3) Evaluate the use of rural health care facilities for quality learning and fiscal sustainability.
4) Develop collaborative simulation learning plans for use in cross campus curriculum courses.
5) Propose that University of Maine System contracts be negotiated for all health care facilities used in all nursing programs. Common contracts would facilitate access for nursing students statewide.
6) Research the benefits of a proposal for creation of a system wide nursing clinical coordinator to schedule and track clinical learning experiences for each program. This role is currently assigned to separate individuals on each campus.
7) Propose system-wide nursing tuition differential or adequate course fees for clinical nursing courses.
8) Establish a blue ribbon committee comprised of leaders in nursing education and health care to examine and recommend strategies for health care partnerships and alignment of clinical practice resource need.
9) Expand the University of Maine at Augusta location as a nursing clinical course access campus. (At the close of the Associate Degree program in Nursing, UMA will have formerly established access to clinical learning sites in the Augusta and Mid-coast areas)

Student Advising

Description: Student advising consists of guidance and information provided to students as they start, continue and complete their academic careers in nursing education. Student advising begins on application and continues through graduation. Student advising should also continue after graduation for students interested in pursuing graduate degrees in nursing.

Intent/Rationale: Students entering academic programs at various locations throughout the university system will have need for clear academic advising as they identify and navigate completion of the nursing curriculum. Accurate and accessible student advising is integral to student success and satisfaction. The following key recommendations for student advising are not unique to nursing education but are considered essential for all collaborative programs.

Key Recommendations for Success:

1) Professional advisers who are informed about specific program options should be located on each campus, center and site of the University of Maine campus.
2) Curriculum plans for each program option should be available for students on the University of Maine System web site.

3) The University of Maine System web site should include regularly updated collaborative program advising information.

4) Establish a plan for regularly scheduled meetings of enrollment services and advising staff involved in the delivery of collaborative programs.

5) Access to advising information on Main-street should be provided for all relevant advising staff and faculty advisers.

6) Study of financial aid differences between campuses and how differences will affect individual student awards should be conducted. Financial aid information sheets should be created to clearly inform students of process and financial aid implications when transferring courses between campuses.

**Permanence and Sustainability**

*Description:* University of Maine System initiatives are established to ensure continuing collaborative program viability.

*Intent/Rationale:* Recommendations for success have been presented throughout the proposal for a collaborative baccalaureate nursing education program model. Many of the recommendations are for continued work of the nursing program leaders and faculty. Some of the recommendations are for support and changes needed at the University of Maine System level. These changes and commitments will be fundamental to the sustainability of any collaborative program model.

**Key Recommendations for Success:**

1) Coordination between programs to ensure student progression and program completion.

2) Organization of financial aid services.

3) Expansion of the centralized process of admission to avoid multiple applications, fees, and transcript requests for collaborative programs.

4) Contract negotiations to support faculty sharing initiatives.

5) Initiation of a system wide general education curriculum plan.

**For the Future**

The Nursing APRIP team members also discussed a vision for the future that would align with goal six of the State of Maine Nursing Workforce Strategic Plan and provide incentive for students to continue graduate nursing course study at the University of Maine System schools. The goal established by the State of Maine Nursing Workforce states that “At least 10% of all baccalaureate graduates will matriculate into a master’s or doctoral program within 5 years of graduation.” The Nursing APRIP team realizes that achievement of this goal is necessary and
desirable to sustain the nursing faculty workforce as well as provide expert nurses in the practice setting. One idea discussed for continued program development and collaboration was design of dual enrollment courses for baccalaureate and graduate nursing courses. Collaboration proposals for graduate nursing education are included below.

**Associate to Baccalaureate Degree in Nursing (ASN-RN to BSN)**

Three campuses of the University of Maine system currently have Associate-to-Bachelor’s degree nursing programs. The University of Southern Maine has an on campus option. The University of Maine at Augusta has a hybrid or blended online program and the University of Maine at Fort Kent has a fully online program. Beginning in 2012, the State of Maine Nursing Workforce began initiatives to increase the proportion of nurses with a baccalaureate degree to eighty percent by the year 2020 (also based on the recommendations of the 2010 Institute of Medicine report on the Future of Nursing). Work has been underway to support pathways for graduates of associate degree nursing programs to seamlessly continue in an RN to BSN degree program. Articulation agreements are in place between individual University BSN programs and the community college system ASN programs. To further this initiative representatives from the community college system and the university system are tasked with developing a system-wide articulation process and agreement. The APRIP Nursing team recommends the following initiatives in support of this work.

1) Maintain each ASN-RN to BSN program option offered through the University of Maine system at this time. Conduct a cost analysis to determine the best delivery option and required number of programs for the ASN-RN to BSN degree.

2) Identify common courses among the ASN-RN to BSN programs for potential cross program sharing and scheduling.

3) Continue work with the community college and university representatives to create a system wide articulation agreement between all ASN programs and ASN-RN to BSN programs.

4) Establish an expanded plan for a seamless pathway for ASN-RN to MSN program completion.

5) Research the feasibility for faculty sharing among nursing programs for ASN-RN to BSN program delivery.

It is recognized that many ASN-RN students choose to continue education in an ASN to BSN program on a part time basis. Many employers are requiring BSN degree completion but give a five year time span to complete the degree requirements. Tuition support from employers is often limited to one course per semester. Faculty sharing among campuses that offer these degrees may be a way to offset some of the costs associated with programs with a large number of part time students.
Collaborative Model for Graduate Programs in Nursing

One key message from the 2010 Institute of Medicine report on the Future of Nursing for the nation emphasizes that nurses should achieve higher levels of education through an improved education system that promotes seamless academic progression. A recommendation to double the number of doctoral prepared nurses nationally by the year 2020 was also made at that time. Nursing workforce supply data for the State of Maine in 2014 indicates that less than ten percent of nurses surveyed currently hold a Masters or Doctoral level degree. The State of Maine Nursing Workforce Strategic Plan includes a goal to “Champion that at least 10 percent of all Baccalaureate graduates matriculate into a master’s or doctoral program within five years of graduation”. (Maine Partners in Nursing Education and Practice, 2012, p. 12) An identified strategy for this goal was to increase the number of graduate programs in advanced practice and education within the State. The University of Maine system nursing education programs are well positioned to contribute to achievement of this goal for nursing in the state of Maine. The APRIP Nursing team proposal for a collaborative model for graduate education is prepared with respect to need for graduate education in Maine as well as the APRIP initiatives of quality, access and financial sustainability. Core components and key recommendations for success of this proposal are presented below.

Doctoral Programs in Nursing

Description: Doctoral programs in nursing will be available to nurses in the State of Maine through the University of Maine System.

Intent/Rationale: The intent to increase options for doctoral nursing education in Maine is to be achieved by collaborative work with all doctoral prepared nursing faculty working in the nursing programs within the UMS.

Currently there are two doctoral program options in nursing offered through the University of Maine System campuses. The University of Maine (Orono) has an Interdisciplinary PhD that nurses sometimes enroll in to earn a PhD. The program is a self-design option available on the Orono campus. There are no nursing specialty courses available through this option unless achieved through independent study. The University of Southern Maine has an approved Doctor of Nursing Practice (DNP) degree option. The program is on hold at this time and is scheduled to restart with a potential admission of eight students in the spring of 2016. The faculty at the University of Southern Maine initiated meetings over the past year to redesign the DNP program and offer it mainly online with a collaborative approach to course delivery. Qualified faculty from all nursing programs met to work on a collaborative design for course teaching and membership on student capstone committees.

The impact of the nursing faculty shortage for teaching and advising graduate students is particularly evident when working towards program expansion. The inadequate numbers of qualified nursing faculty in Maine is part of the reason the current curriculum delivery plan was modified. Many of the suggestions for success of the doctoral program proposal are in response to the faculty shortage. In addition, faculty sharing could help with financial savings while generating revenue.
Key Recommendations for Success:

1) Continue faculty collaboration to provide DNP education through the University of Southern Maine.

2) Establish contract negotiations for faculty sharing as necessary.

3) Establish a plan for graduate course sharing between campuses.

4) Establish a process for seamless admission from masters programs to doctoral programs in nursing.

4) Develop a collaborative PhD in nursing program or a focus in nursing for the Interdisciplinary PhD to be offered through the University of Maine.

5) Expand access to distance and online learning technologies as necessary for program growth.

6) Institute differential tuition for graduate nursing students.

Expansion of Master’s Degree Nursing Education

Master’s degree education in nursing is currently offered at The University of Maine and at the University of Southern Maine. The master’s degrees offered through these campuses are listed in appendix C. Most programs are unique to one campus with the exception of the Family Nurse Practitioner program and the Master’s in Nursing Education. Master’s level education builds on the baccalaureate degree to enable students to develop expertise in one area. Classroom and clinical work is involved in many of the programs and thus adds to the cost of program delivery. Qualified nursing faculty, preceptors and clinical placement options for the nurse practitioner programs are areas of need for master’s level education just as it is with undergraduate programs.

The Master’s in Nursing Education is offered at both campuses yet enrollment in these programs does not generate the number of nurse educators needed statewide. The APRIP team discussed possible initiation of incentives for enrollment in these programs to help generate needed faculty for the nursing programs. Preliminary information indicates that an Acute Care Nurse Practitioner Program would be beneficial for the health care needs in Maine. This degree would be a new program option for the University system.

Description: Expand master’s degrees in nursing through collaboration to meet the workforce needs of the state.

Intent/Rationale: Graduate nursing education is underserved in several areas of the state and expanded collaborative online access to master’s level nursing degrees would help to meet the needs of place-bound students working in the nursing profession. Collaboration between UM, USM, UMA and UMFK to generate a degree option for graduate education is advised. Students completing baccalaureate education could be provided with program options in the regional location via distance education and online learning. Collaboration with established campus degrees would make these programs options financially possible. Courses common to master’s level study at all campuses could be identified and shared offerings could increase enrollments thus insuring courses are offered on a consistent rotating basis.
Key Recommendations for Success:

1) Establish contact negotiations to facilitate a process for faculty sharing.

2) Evaluate and establish a plan for Master’s Program expansion on the UMA and UMFK campuses.

3) Research incentives to interest students in Master’s in Nursing Education.

4) Review program curriculum for collaboration and coordinate program course schedules to facilitate shared teaching.

5) Establish a blue ribbon committee to examine and recommend strategies for health care partnerships and alignment of clinical practice resource need.

Conclusion

The recommendations of the APRIP Nursing team are presented with a hope for effective change to meet the needs for the future of nursing education in the University System and the State of Maine. Each proposal addresses quality with respect to discipline specific specialties and relevance to the nursing workforce need. Increased access to nursing education is paramount to the collaborative proposal for pre licensure baccalaureate education and graduate nurse programs at the masters and doctoral level. Financial sustainability and savings is addressed with intercampus course and faculty sharing throughout the proposed collaboration design as well as through increasing access to all nursing programs.

As we look to the future of Nursing Education for the University of Maine System we should continue to explore the potential for clinical learning in rural areas as well as the areas in which clinical learning already occurs, creating a priority to establish clinical learning opportunities where nursing care is needed. Nursing program student capacity should be researched to ensure maximum access potentials from added campuses, centers and sites within the University System.

It is certain that collaborative nursing education will evolve and discoveries for efficiencies will surface as faculty undertake the work to identify common program outcomes and courses to be included in a shared delivery model for nursing programs. Therefore, it is recommended that review of the collaborative program design for efficiencies and needed modifications be scheduled as part of the planning process.

New models for delivery of nursing education are necessary for improved quality and sustainability of nursing programs. Collaboration efforts can provide the opportunity for program renewal.
Reference List

American Association of Colleges of Nursing. 2014. *Nursing Faculty Shortage Fact Sheet, August 2014*. http://www.aacn.nche.edu/media-relations/FacultyShortageFS.


Appendices

Appendix A: Maine Nursing Education Collaborative Recommended Admission Requirements
Appendix B: Minority proposals
Appendix C: Nursing Programs Offered by Campus Location
Appendix D: Schematic Plan – Collaborative Model for Traditional Baccalaureate Nursing Education
Appendix E: Current Maine Nursing Education Programs by Location
Appendix F: Plan of Study Proposal
# Appendix A

## MAINE NURSING EDUCATION COLLABORATIVE
### RECOMMENDED ADMISSION REQUIREMENTS

<table>
<thead>
<tr>
<th>Part A</th>
<th>RECOMMENDED ADMISSION REQUIREMENTS</th>
<th>MINIMUM STANDARD</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>High School GPA</td>
<td>3.0 (80)</td>
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<td>2.</td>
<td>High School Course Work</td>
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<tr>
<td></td>
<td>Biology with Lab</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>Chemistry with Lab</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>Algebra</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>English</td>
<td>3.0</td>
</tr>
</tbody>
</table>

*Arrangements will be made for students who graduated from schools or were home schooled where grades were not provided. Individual programs will work with applicants to assure required subject competencies are met.

<table>
<thead>
<tr>
<th>Part A</th>
<th>RECOMMENDED ADMISSION REQUIREMENTS</th>
<th>MINIMUM STANDARD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>College GPA</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>College Math (3 credits) i.e. Algebra, statistics</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>College Science with Lab (4 credits) i.e. biology, A &amp; P I</td>
<td>3.0</td>
</tr>
<tr>
<td></td>
<td>English Composition (3 credits)</td>
<td>3.0</td>
</tr>
</tbody>
</table>

* Programs who do not require these courses to be taken prior to admission will use alternative criteria, such as entrance testing.

**All other criteria become part of discretionary points including applicant entrance testing (ie, HESI, PAX)

Approved May 2015
Appendix B

Minority Proposal Suggestion 1:
Proposal: That the University of Maine System Nursing Education Program consist of a common curriculum accessed at multiple campus locations. The following criteria are suggested.

1. This Nursing School would have a statewide access mission including all historic nursing education campuses and centers.
2. All Nursing faculty (located across the state) would be employed by the University that houses the Nursing School.
3. A high level Board of Visitors (with reps from the other campuses and the health sector) would advise the school.
4. The Nursing School would be required to work with all other Universities to identify transferable pathways for the students to attain their Gen. Ed. and support classes.
5. The leadership of this new program would need the admin leadership to address systemic challenges to the system such as clinical, access to high quality simulations, and the development of Masters level nurses.

Minority Proposal Suggestion 2:
Proposal: Recommend formalizing and expanding course equivalency agreements among the UMS campuses that offer Nursing education. I imagine that a student who was (or wished to be) matriculated in any UMS Nursing program could take classes on other UMS campuses because we would have formal agreements for course equivalency for courses required of Nursing students in at least the following areas:

1) Life sciences (A&P, Microbiology, Chemistry, Pathophysiology)
2) Social sciences (Sociology and Psychology)
3) Additional supporting courses (Statistics, Research Methods, Nutrition, Community Health, Pharmacology, Gerontology)
4) Clinical Nursing courses (Adult Health, Women's Health, Pediatrics, and Mental Health)

This proposal meets your initial call to describe current collaborations and explore how they can be expanded because some of these courses are already recognized as equivalent across UMS campuses even if there aren't always formal agreements to this effect.

This proposal also meets the initial charge to our group as outlined below:

1) The quality of nursing education would be enhanced because faculty with specific expertise on any UMS campus that offered Nursing education would be able to share that expertise with nursing students on all UMS campuses in person or by distance education.

2) Access to Nursing education would be improved because students from one UMS Nursing program who saw on-line courses on other UMS campuses they wished to take or who spent
summers in areas of the state far from their campus but near another UMS campus would be able to take transferable courses.

3) There would also be financial saving because distance education would allow students from multiple UMS campuses to take the same course thus producing fewer under-enrolled classes.

This proposal is also a potential recruitment tool. Students, including students from away, would be drawn to UMS Nursing programs because they would have the opportunity to access clinical placements all over the state.
<table>
<thead>
<tr>
<th>Campus</th>
<th>Traditional Pre Licensure</th>
<th>Accelerated Programs</th>
<th>RN-BSN</th>
<th>Graduate Nursing NP</th>
<th>MS in Nursing</th>
<th>Doctoral</th>
</tr>
</thead>
<tbody>
<tr>
<td>USM</td>
<td>BS</td>
<td>Accelerated BSN – option for non nursing prior BS or BA degree students</td>
<td>ASN(RN)-BSN on campus program</td>
<td>MS in Nursing: Adult Gerontology - Nurse Practitioner (NP)</td>
<td></td>
<td>DNP – currently on hold until spring 2016</td>
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<tr>
<td></td>
<td></td>
<td>MS in Nursing – option for non nursing prior BS or BA degree students</td>
<td>ASN(RN) - MSN</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>UMFK</td>
<td>BSN</td>
<td>BSN in Nsg-accelerated</td>
<td>ASN(RN)-BSN fully online</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UMA</td>
<td>Collaboration with UMFK – BSN</td>
<td></td>
<td>ASN(RN)-BSN hybrid online</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UM</td>
<td>BSN</td>
<td>Pre Nursing Admission – BSN program of study</td>
<td></td>
<td>MSN-FNP</td>
<td></td>
<td>Interdisciplinry PhD(I-PhD) which has been used by nurses to obtain a PhD degree at UM</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MS – educator</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MSN – Individualized</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>CAS</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Nursing Education Certificate – 10 CH</td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Interprofessinal Graduate Certificate in Gerontology – 12CH</td>
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</table>
Appendix D

UNIVERSITY OF MAINE SYSTEM
COLLABORATIVE MODEL FOR TRADITIONAL BACCALAUREATE NURSING EDUCATION

SCHEMATIC: PATHWAYS FOR STUDENT ADMISSION THROUGH PROGRAM COMPLETION

Students begin following the nursing education curriculum plan at one of the following:

- Identified UMS Campus
- Current UMS Nursing Program
- Identified sites or centers

Students (at non nursing campus and identified site or center) identify campus for nursing program completion at the end of the first year of study:

- UM
- USM
- UMFK-UMA

Students transfer to campus location for completion of the third and fourth year of the chosen nursing program:

- UM
- USM
- UMFK-UMA
### Appendix E

**MAINE NURSING PROGRAMS BY LOCATION (Public and Private)**

<table>
<thead>
<tr>
<th>Location</th>
<th>School, College or University</th>
</tr>
</thead>
<tbody>
<tr>
<td>Portland Area</td>
<td>University of Southern Maine</td>
</tr>
<tr>
<td></td>
<td>University of New England</td>
</tr>
<tr>
<td></td>
<td>St. Joseph’s College</td>
</tr>
<tr>
<td></td>
<td>Southern Maine Community College (also offers program in Brunswick and York)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Lewiston/Auburn Area</td>
<td>University of Southern Maine-Lewiston Campus</td>
</tr>
<tr>
<td></td>
<td>Central Maine Community College</td>
</tr>
<tr>
<td></td>
<td>Maine College of Health Professions (CMMC)</td>
</tr>
<tr>
<td>Central Maine Area (Augusta, Waterville)</td>
<td>University of Maine Augusta/UMFK Collaborative</td>
</tr>
<tr>
<td></td>
<td>Kennebec Valley Community College</td>
</tr>
<tr>
<td></td>
<td>Kaplan University</td>
</tr>
<tr>
<td>Bangor Area</td>
<td>University of Maine (Orono Campus)</td>
</tr>
<tr>
<td></td>
<td>Eastern Maine Community College</td>
</tr>
<tr>
<td></td>
<td>Husson University</td>
</tr>
<tr>
<td>Northern Maine Area</td>
<td>University of Maine at Fort Kent</td>
</tr>
<tr>
<td></td>
<td>Northern Maine Community College</td>
</tr>
</tbody>
</table>
Appendix F

Traditional Baccalaureate of Nursing Program of Study

UMS Collaborative Nursing Education

Additional Campus and Site - Student Access Plan

Proposal: 4 year Plan of Study – Nursing and Nursing support courses – *illustration

*Proposal: Students would identify desired campus for transfer into Nursing Program at the end of the freshman or completion of first year of study. Admission into the Nursing program at the desired campus would be determined at that time. Students would be admitted into a nursing program cohort - necessary to determine clinical practice placements.

Students would remain at the distant campus or site for the first two years of college attendance.

*General Education courses to be determined per UMS General Education Proposal

<table>
<thead>
<tr>
<th>Semester I Courses</th>
<th>CH</th>
<th>Semester II Courses</th>
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<tbody>
<tr>
<td>Gen Ed</td>
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<td>Gen Ed</td>
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<tr>
<td>Anatomy and Physiology I</td>
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<td>Anatomy and Physiology II</td>
<td>3</td>
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<td>Anatomy and Physiology I Lab</td>
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<td>Anatomy and Physiology II Lab</td>
<td>1</td>
</tr>
<tr>
<td>Introduction to Psychology</td>
<td>3</td>
<td>Statistics</td>
<td>3-4</td>
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<tr>
<td>Introduction to Professional Nursing</td>
<td>2 to 3</td>
<td>Introduction to Sociology ( if required )</td>
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</tr>
<tr>
<td>Chemistry</td>
<td>3</td>
<td>Health Promotion and Wellness or NUR course designed to cover into concepts</td>
<td>2 -3</td>
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<table>
<thead>
<tr>
<th>Semester III Courses</th>
<th>CH</th>
<th>Semester IV courses</th>
<th>CH</th>
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<tbody>
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<td>Gen Ed</td>
<td>3</td>
</tr>
<tr>
<td>Gen Ed</td>
<td>3</td>
<td>Pathophysiology</td>
<td>3</td>
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<tr>
<td>Nutrition</td>
<td>3</td>
<td>Pharmacology</td>
<td>3</td>
</tr>
<tr>
<td>Microbiology</td>
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<td>Developmental Psychology</td>
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<td>Microbiology Lab</td>
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<table>
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<th>Semester V Courses</th>
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<tr>
<td>Students transfer to follow campus specific curriculum – Nursing and additional Gen Ed courses as defined per UMS agreement and campus requirements</td>
<td></td>
<td>Students transfer to follow campus specific curriculum – Nursing and additional Gen Ed courses as defined per UMS agreement and campus requirements</td>
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<table>
<thead>
<tr>
<th>Semester VII Courses</th>
<th>CH</th>
<th>Semester VIII Courses</th>
<th>CH</th>
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</thead>
<tbody>
<tr>
<td>Campus specific curriculum</td>
<td></td>
<td>Campus specific curriculum</td>
<td></td>
</tr>
</tbody>
</table>
Non Nursing courses not currently common to campus nursing curriculum:

Chemistry – UM and UMFK/UMA requires CHY with a lab – lab not required at USM

Communications – UMFK/UMA requires a specific Oral Communications course

English – All campuses require English Composition I, UMFK requires Eng Comp II and an Eng Lit course. USM and UM have other General Education requirements

Information technology – required at UMFK/UMA,

Introduction to College Experience – required at UMFK for students with under 30 CH of college coursework, EYE at USM

Math – two math courses required at UM, UMFK/UMA. Only Statistics required at USM

Sociology – not required at UMFK/UMA

*NOTE: Curriculum differences (from current campus curriculum plans) in this design that require planning and substantive change considerations

- Health Assessment is taught in the third semester at UMFK/UMA on campus programs. This course has a nursing lab component and would need to be taken by students when at the nursing program campus, thus shifting the curriculum plan at some campuses.

- Introduction to nursing courses that prepare students for the study of nursing are generally taught in the first year. These courses would require Compressed Video or ITV scheduling for distance sites and campuses. These courses might be shared by nursing program campus faculty on a rotating basis – semester to semester. Another possibility for the first and second year NUR courses would be to assign a campus to a particular course to offer to the sites, centers and campuses involved in the collaborative nursing program. For example: USM would offer Pharmacology, UMFK/UMA would offer Promoting Health and Wellness, UM would offer Intro to Professional Nursing. (To be negotiated)

- Foundations of Nursing Practice labs are taught in the first and second year for some programs. Nursing Curriculum plans at each campus will need revision to accommodate students entering at the 3rd year. This might be accomplished by a bridge semester or a separate curriculum plan for students entering locations from added campuses. Further development of this plan is needed.

- Pharmacology for nursing education is traditionally taught by qualified nursing faculty. This course could also be taught at the distant campuses and sites and be offered either via compressed video, ITV or online. Again, this course might be shared by nursing program campus faculty on a rotating basis – semester to semester.