



St. John's College Policies and Procedures

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SYSTEM: HSHS	MANUAL(S): HSHS St. John's College Policies
TITLE: Program Evaluation and Assessment Policy	ORIGINATING DEPARTMENT: St. John's College
EFFECTIVE DATE: 06/01/2025	REVISION DATE(S):
SUPERCEDES: Local ministry handbooks/catalogs/policies adopted prior to the effective date of this policy.	

Purpose:

This policy outlines the systematic process for evaluating curriculum effectiveness and program outcomes at the end of each semester through structured, collaborative faculty participation, ensuring continuous quality improvement and alignment with accreditation standards.

Policy:

- I. Policy Statement
St. John's College of Nursing conducts a structured, comprehensive program evaluation at the end of each semester. The process includes the review of course-level data and program-level outcomes to ensure alignment with the mission, expected end of program student learning outcomes (EPSLOs), and accreditation requirements.
- II. End-of-Semester Program Assessment Days
 - a. Each semester concludes with two designated assessment days where all faculty are required to be present.
 - b. These days are dedicated to program evaluation, curriculum alignment, and evidence-based improvements.
- III. Course Outcome Plan and Evaluation (COPE) Document Review
 - a. Each faculty member presents their COPE document for each course they taught during the semester.
 - b. The COPE includes:
 - i. Analysis of summative assignment performance
 - ii. Mapping of summative assignments to course outcomes
 - iii. Aggregation of course outcomes to program-level outcomes (EPSLOs)
 - iv. Recommendations for improvement
 - v. Review of any implemented improvements from the previous semester
 - c. Faculty collaboratively review the strength of evidence used to assess outcomes and identify trends across levels, semesters, and modalities.
 - d. All COPE documents are kept in the Academic Affairs Team Site.



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- IV. Program-Level Data Review
 - a. The following program outcome data are reviewed and discussed during the end of semester program outcome assessment days:
 - i. NCLEX-RN first-time and ultimate pass rates
 - ii. Job placement/employment rates within 6-12 months of graduation
 - iii. Student retention and program completion rates
 - iv. Feedback from course evaluations and exit surveys
- V. Action Planning and Continuous Improvement
 - a. Program-level findings and recommendations are documented in annual program evaluation reports.
 - b. Faculty identify strategies to strengthen curriculum design, enhance instructional practices, and address performance gaps.
 - c. These recommendations are tracked by the Academic Dean and reviewed by the Curriculum Committee.
- VI. Oversight and Review
 - a. The Academic Dean in collaboration with the department chair(s) tracks and trends NCLEX-RN first-time pass-rates.
 - b. The Academic Dean in collaboration with the Dean of Students tracks and trends 6–12-month post-graduation employment.
 - c. The Academic Dean in collaboration with the Registrar and Chancellor tracks and trends on-time program completion.
 - d. The Academic Dean and Chancellor oversee the implementation and documentation of this policy.
 - e. Revisions to this policy and evaluation process will occur every three years or as required to maintain alignment with ACEN standards and institutional needs.