Overview

Substantive change at the University of South Florida is driven by policies and procedures derived from the Policy Statement on Substantive Change for Accredited Institutions of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC). SACSCOC accredits the entire institution and its programs and services, wherever they are located or however they are delivered. Accreditation, specific to an institution, is based on conditions existing at the time of the most recent evaluation and is not transferable to other institutions or entities.

What is a Substantive Change?

Substantive change is a significant modification or expansion in the nature and scope of an accredited institution. SACS defines three types of procedures for Substantive Change based on the circumstances of the change. The types of substantive change and the procedures for addressing them appropriately may be found in the Commission's Policy on Substantive Change (http://www.sacscoc.org/pdf/081705/Substantive change policy.pdf).

NOTE that, pursuant to Florida Board of Governors Regulation, 8.009, Educational Sites, and the USF Policy on Educational Sites 10-235, all off-campus sites must be approved prior to operation and monitored for ongoing productivity. These regulations are relevant to substantive change for the following:

- An off-campus program reaching the 25 – 49% level of credit-hour offerings for a degree must also report it as a “Procedure Two” Substantive Change prior to the point at which the 25% level is reached.
- An off-campus program reaching the 50% level of credit-hour offerings for a degree must also report it as a “Procedure One” Substantive Change prior to the point at which the 50% level is reached.

See “Procedures of Substantive Change” below for details.

USF System Policy on Reporting Substantive Change

USF System Policy 10 – 061, USF System Policy on Reporting Substantive Changes, was originated December 5, 2011. The responsibility for the implementation of USF System policies lies with the USF System President who has delegated the authority for promulgation to the Office of the General Counsel (OGC) via USF System Policy 0 – 001 which also contains the procedural steps and format for implementing policies and procedures within areas comprising the USF System. In these procedural steps, the USF System Provost and Executive Vice President for Academic Affairs is empowered normally to propose policies related to academic matters.
As Substantive Change normally involves a change in the delivery or location of academic programs, the System Provost and Executive Vice President receives the original draft policy for Substantive Change (10–061) and approves it to move on to the Office of General Counsel for promulgation. As with all policies, it is then issued by the OGC for a six-week open review period, during which comments are received and reviewed. After the six-week review, alterations based on comments are considered and the final policy signed by the System Provost and Executive Vice President and System President after which it is posted as final. It is then added to the list of policies on the OGC web site (http://generalcounsel.usf.edu/policies-and-procedures/policy-procedures2.asp).

How do I know if I need to report a change to SACS?

SACSCOC provides a table to assist institutions in determining whether or not a proposed curricular change is considered substantive (see Appendix A). Any program meeting one of the “Types of Change” criteria MUST file the appropriate substantive change through the USF Tampa SACS Liaison. Some substantive changes are “institutional” changes, e.g. change in governance or addition of a college or school out of the normal mission boundaries, while others may be program specific, e.g. initiating an off-campus site where a degree program will be offered or initiating a certificate at an employer’s request that is a significant departure from previous certificates. The SACSCOC table also shows the Level of Change (One, Two, or Three) and the notification period required.

NOTE: The notification period may be as long as six months prior to implementation.

The most common types of substantive changes at USF are the following:

- Establishment of an off-campus site where at least 50% of the coursework for a degree may be obtained (Full Prospectus required)

- A dual or joint agreement through which students may receive at least 50% of the coursework for a degree (Provide a letter of intent and copy of the contract or memorandum of understanding)

- Establishment of an off-campus site where 25-49% of the credits needed for a degree may be obtained (A simple letter of notification with specific information)

Who do I contact at USF Tampa regarding Substantive Change?

The SACS Liaison is responsible for assisting with Substantive Change and submitting the appropriate documentation to SACSCOC. The office of the USF SACS Liaison can be contacted through the Office of Institutional Effectiveness, Academic Planning and Review. Phone: 813-974-7568; Email: richarde@usf.edu

How do I report a Substantive Change?

The process begins with the completion of the Request to Report a Substantive Change form (Appendix B) submitted to the Office of Institutional Effectiveness (OIE).

Following submission of the form the person initiating the request will be contacted by OIE to review the request and to determine the specific type of Substantive Change to be reported. The OIE will then provide
assistance in completing the documentation requested by SACS. When the documentation is complete, the USF SACS Liaison will submit the report to the President for her review and approval. The USF SACS Liaison will then submit the report to SACS. For additional information please contact Steve RiCharde. Phone: 813-974-7568; Email: richarde@usf.edu

**Procedures of Substantive Changes:**

There are three procedures for addressing the different types of substantive changes:

- **Procedure One** for the Review of Substantive Changes Requiring *Notification and Approval Prior to Implementation*

- **Procedure Two** for the Review of Substantive Changes Requiring *Only Notification Prior to Implementation*

- **Procedure Three** for Closing a Program, Site, Branch Campus or Institution.

**Review of Substantive Changes Requiring Approval Prior to Implementation - Procedure One**

Substantive changes requiring submission of an application or a prospectus, and approval by the SACSCOC Board of Trustees prior to implementation by the institution are as follows:

1. **Initiating coursework, certificates, or programs of study at a different level than those previously approved by SACSCOC.** Institutions may not offer individual credit courses or programs beyond the level of current accreditation. Examples include: an associate degree granting college initiating bachelor's degrees or a four-year institution initiating degrees at the master's level; a graduate institution initiating degrees at the undergraduate level, a baccalaureate degree-granting institution initiating occupational and technical degrees at the associate degree level. An institution requesting a level change should complete an Application for Members Seeking Accreditation at a Higher or Lower Degree Level.

   **Note:** Repackaging of an existing approved curriculum to create a new degree level, such as an institution that offers a full 120-hour baccalaureate program creating an associate degree from its lower-division offerings, usually requires only advance notification and not approval.

SACSCOC classifies institutions according to the highest degree level offered by an institution. Those classifications are as follows:

- Level I Offers the associate degree as the highest degree
- Level II Offers the baccalaureate degree as the highest degree
- Level III Offers the master’s degree as the highest degree
- Level IV Offers the master’s and specialist degree as the highest degrees
- Level V Offers three or fewer doctorate degrees as highest degrees
- Level VI Offers four or more doctorate degrees
An institution adding a fourth doctorate degree, causing it to be reclassified from Level V to Level VI, is required to request the level change in writing in order for SACSCOC to reclassify the institution within its data base.

Applications for a change from Level III to Level IV and Level V to Level VI will be reviewed and, if possible, approved by SACSCOC staff.

2. **Initiating certificate programs for workforce development.** These are typically offered at the request of an employer, either on campus or at the workplace. Offering previously approved certificate programs at an unapproved off-campus site requires approval of the site prior to implementation. Similarly, offering a certificate program that is a significant departure from existing approved certificate programs, either on or off campus, requires approval prior to implementation. SACSCOC will waive the six-month notification requirement and accept a modified prospectus consisting of the name of the certificate, date of implementation, the complete physical address of the off-campus site (if applicable), a faculty roster, a discipline specific description of library/learning resources, a description of physical facilities, and descriptions of courses to be offered at the site.

3. **Initiating other certificate programs.** Certificate programs consisting of courses drawn from the existing approved curriculum for a degree or diploma program do not require separate approval; they are considered to be included in the institution’s current accreditation. However, to offer such a certificate at a new site requires approval of the new site. A certificate that is a significant departure from previously approved programs must be approved in advance—the same as any other new educational program.

4. **Initiating an off-campus (additional) site (site-based/classroom group instruction) at which students can earn at least 50% of the credits toward an educational program.** Locations at which instruction is offered by distance delivery, but students must be present on-site to access such instruction, are considered off-campus instructional sites and must be approved in advance.

   Approval of an off-campus site is effective for a maximum of five years and will be reviewed again in the context of the fifth-year or decennial review.

   For an institution replicating an approved educational program that is already offered at three or more approved sites, a modified prospectus consisting of the following elements:
   
   a. a faculty roster,
   b. descriptions of the courses to be offered at the site,
   c. a description of discipline-specific library resources,
   d. a description of student support services,
   e. a description of physical resources

   Such a modified prospectus will suffice in lieu of responding to the requirements of a full prospectus.

5. **Initiating degree completion programs.** Degree completion programs usually include a compressed format with classes offered evenings or weekends to accommodate working adults, a requirement to transfer in some amount of previous college credit, and may include offering credit for career or life experience. The
prospectus should include a discussion of how the degree completion program differs from the same program offered in traditional form, and how the institution will ensure that student learning outcomes are the same for both offerings. An example of such a change is adult or accelerated programs in management or organizational leadership.

6. **Initiating a branch campus.** A branch campus is defined as a location of an institution that is geographically apart and independent of the main campus of the institution. A location is independent of the main campus if the location is (1) permanent in nature, (2) offers courses in educational programs leading to a degree, certificate, or other recognized educational credential, (3) has its own faculty and administrative or supervisory organization, and (4) has its own budgetary and hiring authority. The prospectus for a proposed branch campus must include a business plan for the branch campus that describes:

- The educational program(s) to be offered at the branch campus;
- The projected revenues and expenditures and cash flow at the branch campus; and
- The operation, management, and physical resources at the branch campus.

7. **Initiating distance learning or correspondence courses and programs by which students can earn at least 50% of a program’s credits through delivery in a format other than face-to-face.** Institutions must demonstrate that a student who registers for a distance or correspondence course or program is the same student who participates in and completes the course or program and receives academic credit. Means of verification might include a secure login and pass code, proctored examinations, or other technologies and practices that are effective in verifying student identification. Processes used to verify student identity must also protect student privacy. Please see also the SACSCOC policy “Distance and Correspondence Education.” ([http://www.sacscoc.org/subchg/policy/Distanceandcorrespondencepolicyfinal.pdf](http://www.sacscoc.org/subchg/policy/Distanceandcorrespondencepolicyfinal.pdf))

8. **Expanding at the institution’s current degree level (significant departure from current programs).** What constitutes a “significant departure” from existing programs depends on what related programs are currently in place at a given institution. Examples include the following: developing a new general education program, adding a master's degree in nursing when the institution is accredited at Level III but currently offers only a master's degree in education; an institution accredited at Level II (bachelor's degrees), offering only a bachelor’s degree with a major in religion, adding three new bachelor's degrees with majors in biology, business administration, and computer science.

9. **Initiating a significant change in the established mission of the institution.** Significant changes in mission are those that lead to a fundamental shift in the nature of the institution. Examples include the following: the transformation of a technical college into a comprehensive community college, the initiation by a seminary of significant liberal arts offerings, the addition by a medical college of general education offerings, the initiation of an engineering school at a liberal arts institution. Editorial changes in the language of a mission statement are not substantive and need not be reported. See Commission staff regarding the prospectus. The change in mission may dictate a mix of required documentation.
10. **Changing from clock hours to credit hours.** The prospectus must include a clear explanation of the formula used to calculate equivalency of credit awarded. Please see also the SACSCOC policy “Credit Hours” (http://www.sacscoc.org/subchg/policy/CreditHours.pdf)

11. **Changing significantly the length of a program, substantially increasing the number of clock or credit hours awarded for successful completion of a program.** Significant changes in program length are those with noticeable impact on the program’s completion time. Examples include the following: expanding a certificate program from 250 contact hours to 450 contact hours, increasing a baccalaureate degree from 124 hours to 150 hours.

12. **Relocating a main or branch campus.** The prospectus should demonstrate that the new facilities maintain the institution’s compliance with Comprehensive Standard 3.11.

13. **Initiating a collaborative academic program with another institution not accredited by SACSCOC.** The prospectus should demonstrate compliance with the SACSCOC policy “Agreements Involving Joint and Dual Academic Awards: Policy and Procedures” (http://www.sacscoc.org/pdf/AgreementsInvolvingDualandJointAwards.pdf). Examples include joint degree or dual degree programs.

14. **Entering into a contract with an entity not certified to participate in USDOE Title IV programs.** This applies if the entity provides 25% or more of an educational program offered by the accredited institution. The prospectus must include a copy of the signed agreement.

**Changes Requiring Notification Only Prior to Implementation - Procedure Two**

1. For site-based/classroom group instruction (where the instructor is present)
   a) **Initiating an off-campus site at which a student may earn at least 25% but less than 50% of credits toward a program.** The letter of notification must include the starting date and complete physical address of the new site.

   b) **Moving an approved off-campus instructional site within the same geographic area to serve essentially the same pool of students.** The letter of notification must include the complete physical address of the old site, the complete physical address of the new site, and the starting date of the new site.

2. For distance learning/technology-based group or individual instruction (where the instructor and student are geographically separated), offering for the first time credit courses via distance learning/technology-based instruction by which students can obtain at least 25% but less than 50% of their credits toward an educational program.

3. **Initiating program/courses delivered through contractual agreement or a consortium.** This provision does not apply to articulation agreements with other institutions, clinical agreements, or internship
agreements. The notification must include (1) a letter with the starting date of the agreement and the names of the institutions and programs involved and (2) a copy of the signed agreement.

4. **Entering into a contract with an entity not certified to participate in USDOE Title IV programs if the entity provides less than 25% of an educational program offered by the accredited institution.** A copy of the signed agreement must be provided.

5. **Repackaging of an existing approved curriculum** to create a new degree level, such as an institution that offers a full 120-hour baccalaureate program creating an associate

### Closing a program, Instructional Site, Branch Campus or an Institution – Teach-out Plans and Teach-out Agreements - Procedure Three

In accordance with Federal regulations, an institution is required to submit a teach-out plan to SACSCOC for approval if any of the following occurs:

1. The USDOE notifies the Commission that it has initiated an emergency action against an institution or an action to limit, suspend, or terminate an institution participating in any Title IV, HEA program.

2. The Commission terminates accreditation or candidacy.

3. The institution notifies the Commission that it intends to cease operations entirely or close a location that provides at least 50% of at least one program.

4. A State Licensing or authorizing agency notifies the Commission that an institution’s license or legal authorization to provide an educational program has been or will be revoked.

If an institution decides to close an educational program, approved instructional site, branch campus, or the entire institution, it must choose one of the following options:

1. The institution teaches out currently enrolled students; no longer admits students to programs; and terminates the program, the operations of an approved instructional site or a branch campus, or the operations of an institution after students have graduated. *(Teach-out plan)*

2. The institution enters into a contract for another institution or organization to teach out the educational programs or program. *(Teach-out agreement)*

Teach-out plans and teach-out agreements must be approved by SACSCOC prior to implementation. *See also* the SACSCOC Good Practices document **“Closing a Program, Site, Branch or Institution”**

### Teach-out Plans
A teach-out plan is a written plan developed by an institution that provides for the equitable treatment of students if an institution, or an institutional location that provides fifty percent or more of at least one program, ceases to operate before all students have completed their program of study, and may include, if required by the institution’s accrediting agency, a teach-out agreement between institutions. Teach-out plans must be approved by SACSCOC in advance of implementation.

To be approved, a teach-out plan must include the following information:

1. Date of closure (date when new students will no longer be admitted)
2. An explanation of how affected parties (students, faculty, staff) will be informed of the impending closure
3. An explanation of how all affected students will be helped to complete their programs of study with minimal disruption
4. An indication as to whether the teach-out plan will incur additional charges/expenses to the students and, if so, how the students will be notified
5. Signed copies of teach-out agreements with other institutions, if any
6. How faculty and staff will be redeployed or helped to find new employment
7. If closing an institution, arrangement for the storing of student records, disposition of final financial resources and other assets.

Following review and approval of a teach-out plan that includes a program that is accredited by another accrediting agency, the Commission will notify that accreditor of its approval.

Teach-out Agreements

A teach-out agreement is a written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, or an institutional location that provides fifty percent or more of at least one program offered, ceases to operate before all enrolled students have completed their program of study. Such a teach-out agreement requires SACSCOC approval in advance of implementation.

For approval by SACSCOC, the agreement must be between institutions that are accredited by a nationally recognized accrediting agency, be consistent with applicable standards in the Principles of Accreditation and with SACSCOC policies, and provide for the equitable treatment of students by ensuring that:

1. The teach-out institution has the necessary experience, resources, and support services to provide an educational program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the closed institution; and
2. The teach-out institution demonstrates that it can provide students access to the program(s) and services without requiring them to move or travel substantial distances.

Please see the SACSCOC Good Practices document “Closing a Program, Site, Branch or Institution” (http://www.sacscoc.org/subchg/policy/Closeprogramcampusinstitution.pdf) for additional discussion of issues regarding closing of programs, sites, branch campuses or institutions.

Closing an institution without an agreement

If an institution accredited by SACSCOC closes and is no longer accredited, SACSCOC will seek assistance from the United States Department of Education and appropriate state agencies to help its students find reasonable opportunities to complete their education without additional expense.

Changes that require SACSCOC Committee Visits:

1. The initiation of an additional off-campus site/location at which a student can earn at least 50% of the credit toward an educational program, if any of the following applies: (a) the institution has a total of three or fewer additional locations, or (b) the institution has not demonstrated, to the satisfaction of SACSCOC, that it has a proven record of effective educational oversight of additional locations, or (c) the institution has been placed on sanction by SACSCOC or is subject to some limitation on its accreditation, or (d) the institution has been accredited by SACSCOC for less than ten years. See Attachment A for more detailed information.

2. The initiation of a branch campus.

3. The initiation of a change in governance/ownership with a change in control.

4. The initiation of mergers/consolidations.

5. The initiation of coursework, credit certificates, or degree programs at a different level than currently approved by SACSCOC. (Depending on the existing related programs offered by an institution, a committee visit may not be required for institutions moving from Levels III to IV or from Levels V to VI. See level classifications on page 14 of this document.)

Fees and Expenses (Please note that payment of fee is due at time of submission):

1. Denial of approval of substantive change is not appealable. An institution that fails to gain approval of the substantive change may resubmit a revised prospectus or application following the guidelines and time frames described in Procedures One and Two.

The following fees will be assessed to institutions for the review of an application or prospectus:

- $300 For an institution seeking review of a substantive change prospectus or application for level change
• $150 Per institution for a collaborative effort between two member institutions seeking review of a single prospectus

• $100 Per institution for a collaborative effort among three or more member institutions seeking review of a single prospectus

• $300 Per institution for review of a Category Three collaborative academic arrangement. The SACSCOC accredited institution(s) are responsible for ensuring payment.

Fees related to Substantive Change Committee visits:

2. In addition to the fee assessed for reviewing the substantive change prospectus, the following total cost will be assessed to an institution hosting a Substantive Change Committee visit:

The actual cost of the committee (Includes travel, lodging, food, and related expenses), and $2,000 administrative fee
### Appendix A

#### Types of Changes:

<table>
<thead>
<tr>
<th>Types of Change</th>
<th>Procedure</th>
<th>Prior Notification Required</th>
<th>Time Frame for Contacting COC</th>
<th>Prior Approval Required</th>
<th>Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiating coursework or programs at a different level than currently approved</td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
<td>Application for Level Change&lt;br&gt;Due dates: April 15 or Sept 15</td>
</tr>
<tr>
<td>Expanding at current degree level <em>(significant departure from current programs)</em></td>
<td>1</td>
<td>Yes</td>
<td>6 months</td>
<td>Yes</td>
<td>Prospectus</td>
</tr>
<tr>
<td>Initiating a branch campus <em>(See definition of “branch campus” on p. 3 of this document.)</em></td>
<td>1</td>
<td>Yes</td>
<td>6 months</td>
<td>Yes</td>
<td>Prospectus</td>
</tr>
<tr>
<td><strong>Initiating a certificate program at employer’s request and on short notice</strong></td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>…using existing approved courses</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>…at a new off-campus site <em>(previously approved program)</em></td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
<td>Modified prospectus</td>
</tr>
<tr>
<td>…that is a significant departure from previously approved program</td>
<td>1</td>
<td>Yes</td>
<td>Approval required prior to implementation</td>
<td>Yes</td>
<td>Modified prospectus</td>
</tr>
<tr>
<td>Initiating other certificate programs</td>
<td></td>
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<td></td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
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<tr>
<td>… using existing approved courses</td>
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<tr>
<td>... at a new off-campus site (previously approved program)</td>
<td></td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
</tr>
<tr>
<td>...that is a significant departure from previously approved programs</td>
<td></td>
<td>1</td>
<td>Yes</td>
<td>6 months</td>
<td>Yes</td>
</tr>
<tr>
<td>Altering significantly the educational mission of the institution</td>
<td></td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
</tr>
<tr>
<td>Initiating Joint or Dual Degrees with another institution:</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(See: &quot;Agreements Involving Joint and Dual Academic Awards.&quot;)</td>
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<tr>
<td>Joint programs</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>………with another SACSCOC accredited institution</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>NA</td>
<td>Copy of signed agreement and contact information for each institution</td>
</tr>
<tr>
<td>………with an institution not accredited by SACSCOC</td>
<td>1</td>
<td>Yes</td>
<td>6 Months</td>
<td>Yes</td>
<td>Prospectus</td>
</tr>
<tr>
<td>Dual programs</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>No</td>
<td>Copy of signed agreement and contact information for each institution</td>
</tr>
<tr>
<td>Initiating off-campus sites (including Early College High School and dual enrollment programs offered at the high school)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…Student can obtain 50 % or more credits toward program</td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
<td>Prospectus</td>
</tr>
<tr>
<td>...Student can obtain 25-49 % of credit</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>NA</td>
<td>Letter of notification</td>
</tr>
<tr>
<td>...Student can obtain 24 % less</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Expanding program offerings at previously approved off-campus sites</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td>...Adding programs that are significantly different from current programs at the site</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<td>...Adding programs that are NOT significantly different from current programs at the site</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<td>Altering significantly the length of a program</td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
<td>Prospectus</td>
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<tr>
<td>Initiating distance learning...</td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>Yes</td>
<td>Prospectus</td>
</tr>
<tr>
<td>...Offering 50 % or more of a program for the first time</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>No</td>
<td>Letter of Notification</td>
</tr>
<tr>
<td>...Offering 25-49 %</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>...Offering 24 % or less</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Initiating programs or courses offered through contractual agreement or consortium</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>NA</td>
<td>Letter of notification and copy of signed agreement</td>
</tr>
<tr>
<td>Entering into a contract with an entity not certified to participate in USDOE Title IV programs</td>
<td>2</td>
<td>Yes</td>
<td>Prior to implementation</td>
<td>NA</td>
<td>Letter of notification and copy of signed agreement</td>
</tr>
<tr>
<td>Event Description</td>
<td>Code</td>
<td>Substantive Change</td>
<td>Implementation Time</td>
<td>Approval</td>
<td>Documentation</td>
</tr>
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<td>… if the entity provides 25% or more of an educational program offered by the COC accredited institution</td>
<td>1</td>
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<td>… if the entity provides less than 25% of an educational program offered by the accredited institution</td>
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<td>Prior to implementation</td>
<td>NA</td>
<td>Copy of signed agreement</td>
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<tr>
<td>Initiating a merger/consolidation with another institution</td>
<td></td>
<td>See SACSCOC policy</td>
<td>“Mergers, Consolidations and Change of Ownership: Review and Approval.”</td>
<td>Yes</td>
<td>Prospectus - Due Dates: April 15 or September 15</td>
</tr>
<tr>
<td>Changing governance, ownership, control, or legal status of an institution</td>
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<td>See SACSCOC policy</td>
<td>“Mergers, Consolidations and Change of Ownership: Review and Approval.”</td>
<td>Yes</td>
<td>Prospectus - Due Dates: April 15 or September 15</td>
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<tr>
<td>Relocating a main or branch campus</td>
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<td>6 months</td>
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<td>Moving an off-campus instructional site (serving the same geographic area)</td>
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<td>Yes</td>
<td>Prior to implementation</td>
<td>NA</td>
<td>Letter of notification with new address and starting date</td>
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<tr>
<td>Changing from clock hours to credit hours</td>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Justify reasons for change, indicate calculation of equivalency, and other pertinent information</td>
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<td>Altering significantly the length of a program</td>
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<td>NA</td>
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<td>Initiating degree completion programs</td>
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<td>NA</td>
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<td>Closing a program, approved off-campus site, branch campus, or institution</td>
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<tr>
<td>…Institution to teach out its own students</td>
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<td>Immediately following decision to close</td>
<td>Yes</td>
<td>Description of teach-out plan included with letter of notification</td>
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<td>…Institution contracts with another institution to teach-out students (Teach-out Agreement)</td>
<td>3</td>
<td>Yes</td>
<td>Immediately following decision to close</td>
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<td>Acquiring any program or site from another institution</td>
<td>See SACSCOC policy</td>
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<td>Adding a permanent location at a site where the institution is conducting a teach-out for students from another institution that is closing</td>
<td>See SACSCOC policy</td>
<td></td>
<td></td>
<td>Yes</td>
<td>Prospectus</td>
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Office of Institutional Effectiveness,  
Academic Planning and Review

SACS Substantive Change Request Form

Request to Report a Substantive Change

This form must be completed to request the reporting of a substantive change to the Southern Association of Colleges and Schools (SACS) by the USF SACS Liaison. The completed form should be submitted to Steve RiCharde in the Office of Institutional Effectiveness, Academic Planning and Review (OIE): CGS 401 or richarde@usf.edu.

After receiving the completed form, OIE will respond with the following:
- Approval of the request
- Validation of the type of Substantive Change
- Information on what will be needed to complete the report to SACS

Contact Information

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>College</td>
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<tr>
<td>Department</td>
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<tr>
<td>Program/major</td>
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<td>Phone</td>
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<td>Email</td>
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Information on Proposed Change

<table>
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<tr>
<th>Brief description of proposed change and proposed implementation date</th>
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<tr>
<th>Academic programs related to proposed change - Degree, Certificate, etc. (If applicable)</th>
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<tr>
<th>Name and physical address of where change will occur (If off-campus location)</th>
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## Approvals

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
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<tbody>
<tr>
<td>Person requesting change</td>
<td></td>
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<tr>
<td>Department Chair</td>
<td></td>
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<tr>
<td>College Dean</td>
<td></td>
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</tbody>
</table>
Appendix C

Contents of the Substantive Change Prospectus - Example

Substantive Change Letter of Notification

Name of institution:
College of Nursing
University of South Florida
12901 Bruce B. Downs Blvd., MDC Box 22
Tampa, FL 33612

Contact for question on prospectus: (Include name, phone number, email)
Dianne Morrison-Beedy, PhD, FAANP, FNAP, FAAN
Dean University of South Florida College of Nursing
Sr. Associate VP USFHealth
Phone: (813) 974-9091
dmbeedy@health.usf.edu

Name of the change proposed:
Change of geographic location to CAMLS for Nurse Anesthesia students in MS program.

Credential(s) involved:
Nursing Program
Master of Science (M.S.) Degree
Concentration in Nurse Anesthesia

List degrees that institution is authorized to grant. As a subset of each degree, list majors available.
Not Applicable

List certificate, diploma and degree programs which are related to the proposed program:
Not Applicable

Starting date:
CAMLs opened March 30, 2012.
Nurse Anesthesia started using facility for Spinal Epidural Labs on April 5 & 26, 2012.
Official Nurse Anesthesia academic courses started on May 14, 2012.

Name and physical address of the off-campus site:
Center for Advanced Medical Learning and Simulation (CAMLs)
124 S. Franklin Street
Tampa, FL 33602
www.camls-us.org
Institutional strengths that facilitate the offering:
USF’s Nurse Anesthesia program prepares students to meet the needs of the Tampa Bay area, College of Nursing and underserved. The majority of the graduates go into practice throughout the state of Florida.

The USF Nurse Anesthesia program has teamed up with CAMLS to provide the most state-of-the-art simulation experience, which is integrated into the curriculum.

USF’s Nurse Anesthesia program is the first in the nation to be housed within a state-of-the-art simulation center. This center prepares graduates with real world and interdisciplinary experiences.

Nurse anesthetists practice in every setting in which anesthesia is delivered, from traditional hospital surgical settings to primary care and specialty healthcare clinics. CRNAs are the sole anesthesia providers in nearly half of all hospitals and more than two-thirds of the rural hospitals in the United States. Nurse anesthetists break barriers by providing anesthetics for U.S. military and Department of Veterans Affairs healthcare facilities, as well as 100 percent of all anesthetics for the United States Army frontline facilities.

List of existing approved off-campus sites and their addresses:
Not Applicable

Nurse Anesthesia Substantive Change

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Appendix C – Clinical Site Affiliations Pg. 39 – 40
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Appendix E – Market Base Tuition Budget Pg. 49 – 53
Appendix F – BOG Minutes from the USF Market Tuition Proposal Pg. 54 – 62

1. ABSTRACT

Proposed Change: The University of South Florida (USF) College of Nursing’s Master’s Program was approved by the Board of Regents and the USF Graduate Council in 1979, and is a classified instructional program of study. Nurse Anesthesia is a limited access concentration and one of the nine Master’s Program concentrations; it accepted the first class of students in August 2006. The Master of Science concentration in Nurse Anesthesia (NA) is a challenging full-time,
A 28-month, 72-credit academic and clinical endeavor that consists of seven continuous semesters starting annually in August, and continues independent of the university calendar.

**Date of Implementation:** Initially, the first twelve months (didactic phase) were spent at the USF main campus in Tampa, Florida. In May 2012, with the opening of new Center for Advanced Medical Learning and Simulation (CAMLs) in Tampa, Florida students, attended classes live at both sites. In fall 2012, with a newly admitted cohort of 30 students, the three core courses (common to all Master’s concentrations) and the statistics course continue to be taught live at the Tampa campus. All other nurse anesthetist specialty courses are offered at the CAMLS site.

**Off-Campus Location:** CAMLS is a 90,000 square foot, state-of-the-art, three-story facility located at 124 South Franklin Street, Tampa, Florida 33602, approximately ten miles from the Tampa campus. The facility integrates simulation technology, aviation science, team training, and evidence-based best practice into innovative programs with measurable outcomes. CAMLS combines cutting-edge simulation with research and innovation to move the latest advances in healthcare into practice. Nurse anesthesia students have access to a variety of high-tech simulators, operating rooms, and medical equipment where they can practice procedures and simulated surgical cases ranging from general surgery and trauma scenarios to a number of different specialty surgical cases. Students will attend live didactic classes and participate in a variety of simulation learning situations. This use of CAMLS will be on-going.

**Projected Enrollment and Target Audience:** The primary target audience for the student cohort is: BSN or other appropriate degree from a regionally accredited college or university, a current license as a registered nurse (RN); and at least one year experience as an RN in an acute care setting. Recruiting efforts are focused on these minimum requirements and include contacts with interested students at local hospital educational events, current USF College of Nursing (CON) undergraduate students, annual CON Open House attended by up to 200 attendees and advertising in the nursing membership brochures.

**Projected Life of Program:** As indicated, 30-35 students are admitted in each cohort yearly on an ongoing basis. The annual admission date is in August and graduation occurs 28 months later in December. For the latest admission cycle 91 applications were received, 65 applicants met all the criteria for admission. Offers were made to 35 applicants with 29 matriculating.

**Instructional Method:** The classes at the Tampa campus and at the CAMLS site are taught live by USF full time and adjunct faculty. In addition to the presentation of didactic content, teaching strategies include simulation scenarios, competence assessment, and inter-professional experiences.

2. BACKGROUND INFORMATION

**Purpose Within the USF Mission and Goals:** The mission of USF includes “Research and scientific discovery, including the generation, dissemination, and translation of new knowledge across disciplines.” The CRNA program is aligned not only with this mission but also with the primary goal of the USF Strategic Plan, “Expanding world-class interdisciplinary research, creative, and scholarly endeavors.” The CRNA program makes use of the world-class facility
that is CAMLS and operates at the highest level of academic standards. As of fall 2012, classes for the students in the nurse anesthetist concentration of the Master’s program were taught live at both Tampa campus (three core courses and statistics) and at the CAMLS site (nurse anesthetist specialty courses). The courses at the Tampa campus provide the opportunity for the nurse anesthetist students to share classes with student in the other eight master’s concentrations as well as the Doctor of Nursing Practice (DNP) students.

There will be no effect on congruency between the USF mission and goals with those of the College of Nursing as a result of this change in location. In addition to the above cited goals of the mission and strategic plan, both the 2008-2013 and the newly approved 2013-2018 Strategic Plan’s mission and goals provide opportunities for student access and success in a competitive program where knowledge is generated and students are stimulated intellectually (Goals I and II, 2008-2013 and Goal I, 2013-3018 respectively). All concentrations in the master’s program provide for academic and future success for a diverse student body. These goals are also in concert with the SUS Board of Governor’s (2012-2025) goal focused on teaching and learning.

**Legal Authority for the Change:** CAMLS is part of the USF Health Simulation Consortium, which has received Level I accreditation as a comprehensive education center from the American College of Surgeons (ACS). Multidisciplinary CAMLS staff will provide expertise to guide development and design of simulation curricula. CAMLS’s CEO serves as the Associate Vice-President, USF Health. There is no further need for evidence of legal authority required by governing Board of Trustees or the state. Both sites are funded under the USF Financing Corporation and part of USF Health and operate within the guidelines established by the Florida Board of Governors.

**Stability of Degree Offering:** The nurse anesthetist curriculum will not change: the only change is that classes in the concentration will be split between the two sites, the Tampa Main Campus and CAMLS. The Tampa campus will be the site for the three core courses and statistics which will be taught live and the remaining courses in the curriculum will be taught live at the CAMLS site. In addition to classrooms, students will have access to the state-of-the-art simulation labs and all of the other facilities within CAMLS. There are no plans to offer the CRNA concentration classes at any other off-site facility.

3. **ASSESSMENT OF NEED AND PROGRAM PLANNING/APPROVAL**

**Rationale for the Change:** According to the U.S. Department of Labor’s 2006-07 Occupational Outlook Handbook published by the Bureau of Labor Statistics, job opportunities for registered nurses in all specialties are expected to be “excellent” in the next few years, with employment rates growing much faster than the average for all occupations through 2014. The Handbook also predicts that advanced practice nurses, including Certified Registered Nurse Anesthetists (CRNAs), will be in high demand, particularly in medically underserved areas.

**Assessment of Need:** CRNAs already provide more than one-half of the anesthetics delivered in the United States each year, operating in a cost-effective manner while maintaining high-quality patient care. As the country’s hospitals and health care facilities work to control the rising cost of health care and maintain adequate staffing while accommodating the need for more surgeries
overall, the demand for CRNAs is expected to increase well into the next decade especially in areas such as inner cities and rural areas. The job opportunities will vary by employment setting, however. For example, employment is expected to grow more slowly in hospitals, which comprise health care’s largest industry, but rapid growth is expected in hospital outpatient facilities, such as those providing same-day surgery, rehabilitation, and chemotherapy.

The American Association of Nurse Anesthetists (AANA), which represents more than 92 percent of the 36,000 CRNAs nationwide, reports that nurse anesthetists currently administer approximately 27 million anesthetics in the United States each year. Practicing in every setting where anesthesia is available, CRNAs are the sole anesthesia providers in nearly ten percent of all health care facilities across the country, and in two-thirds of all rural hospitals. More than 80 percent of CRNAs practice in major metropolitan areas. Eighty-two percent work in hospital settings, while ten percent work in ambulatory service centers (including 7% in university hospitals).

Based on recent profiles of the AANA membership, Sommer (spokesperson for AANA) provided this snapshot of today’s CRNAs: the average age of today’s working CRNA is 48.5 years, and 40 percent have practiced for twenty years or more. The attrition rate is low, at just under four percent, and approximately ten percent of CRNAs who are eligible to retire choose to continue working. The gender breakdown for CRNAs is 55 percent female and 45 percent male, and the average CRNA salary is $140,000 per year. Nurses of color are vastly underrepresented in the field. According to the AANA, only 2.1% of CRNAs are black, 2.1% are Asian, 1.4% are Hispanic and less than 1% are Native American.

As these data indicate, there continues to be a shortage of nurse anesthetists as well as the need for education of practitioners who have a curriculum which provides state-of-the-art equipment and facilities to ensure preparation of well qualified safe practitioners. As the health care system continues to expand, the need for these practitioners will continue to grow; people are living longer and medical advances will result in more diagnostic procedures and surgeries. Their contribution to the health care of citizens will be significant.

Inclusion of Change in Planning/Evaluation: All USF units engage in ongoing planning and evaluation within the context of the College and Institutional Strategic Plan. The original rationale for the construction of the CAMLS facility was based on benchmarks from around the discipline which demonstrated the need for a world-class simulation facility, a shortcoming considered egregious by the President and Vice President for Health. The construction of the site and the change from offering classes only at the Tampa campus site to offering classes for the same nurse anesthesia students at CAMLS provides the most state-of-the-art simulation experience which can be integrated into the curriculum. Beyond the three live core courses at the Tampa campus (shared by all MS concentrations) and the statistics course (shared by Doctor in Nursing Practice students), the content of the nurse anesthetist courses are specific to nurse anesthesia students and scheduling is facilitated by having these courses at one site. Travel from Tampa campus to CAMLS takes about 17 minutes depending on traffic. With several classes a day and scheduling needs, travel is a consideration. Discussion of this move of specialty classes occurred at the administrative level and involved the President of USF, Provost, Senior VP USF Health, Dean College of Nursing, and the CEO of CAMLS. At the College level, the director,
teaching faculty of the nurse anesthetist concentration and faculty council members were included in the discussions and decision.

Assessment Strategy: Data will be collected from faculty and students as designated in the College Evaluation Plan each semester and also by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) at their designated time intervals. The outcome of these data is aggregated and reviewed at the Annual Master’s Program Review. Based on this review, faculty members make recommendations for changes to the concentration or master’s program.

4. DESCRIPTION OF THE CHANGE

Description of Change: The only change in the CRNA (nurse anesthesia) concentration is the addition of the CAMLS site where all classes (except the three live core courses: NGR 6002C Advanced Health Assessment Across the Life Span; NGR 6803 Research and Evidence-Based Practice; and NGR 6152 Advanced Physiology/Pathophysiology and NGR 7848 Fundamentals of Statistics for Clinician which will continue to be taught on the Tampa campus) will be offered live at CAMLS.

Course Schedule: The current course offerings focused on nurse anesthesia content offered live include:

Semester I
- NGR 7848 Fundamentals of Statistics for Clinicians (3)
- NGR 6404 Anatomy and Physiology for Nurse Anesthesia I (3)
- NGR 6400 Chemistry, Biochemistry, and Physics for Nurse Anesthesia (3)
- NGR 6460 Pharmacology for Nurse Anesthesia I (3)
- NGR 6803 Research and Evidence-Based Practice (3)

Semester 2
- NGR 6152 Advanced Physiology and Pathophysiology (4)
- NGR 6931 Pharmacology and Physiology for Nurse Anesthetists II (5)
- NGR 6424 Principles for Nurse Anesthesia (3)
- NGR 6002C Advanced Health Assessment Across the Life Span

Semester 3
- NGR 6422 Principles of Nurse Anesthesia Through the Lifespan (3)
- NGR 6492 Nurse Anesthesia Role Development (3)
- NGR 6420 Foundations & Methods of Nurse Anesthesia Practice (4)

Semester 4
NGR 6423 Principles of Cardiothoracic Nurse Anesthesia (3)
NGR 6431 Nurse Anesthesia Clinical Residency I (4)
NGR 6440L Nurse Anesthesia Simulation Lab I (2)
NGR 6929 Clinical Correlational Conferences (1)

Semester 5
NGR 6432 Nurse Anesthesia Clinical Residency II (4)
NGR 6929 Clinical Correlational Conferences (1)
NGR 6441L Nurse Anesthesia Simulation Lab II (2)

Semester 6
NGR 6433 Nurse Anesthesia Clinical Residency III (4)
NGR 6929 Clinical Correlational Conferences (1)
NGR 6442L Nurse Anesthesia Simulation Lab III (2)

Semester 7
NGR 6434 Nurse Anesthesia Clinical Residency IV (4)
NGR 6929 Clinical Correlational Conferences (1)
NGR 6491 Nurse Anesthesia Practice Comprehensive (2)

Assessment of Student Learning Outcomes: There are no changes to the specific outcomes and learning objectives of the nurse anesthesia concentration.

Course Learning Outcomes: Below is the course learning outcomes for the nurse anesthetist courses.

 Semester 1
NGR 7848 Fundamentals of Statistics for Clinicians

- Calculate and interpret means, proportions, and other descriptive statistics commonly used in clinical research.
- Understand and generate plots to depict frequency distributions.
- Apply concepts of sampling distributions and probability theory for continuous and categorical variables.
- Calculate, interpret, and present confidence intervals for common parameters including means and proportions.
- Apply the principles of hypothesis testing for dependent and independent samples.
- Understand and apply principles of non-parametric methods including Spearman rank correlation and Wilcoxon Rank Sum test.
- Explain the elements of power analysis in planning a study.
• Understand and apply correlation and linear and logistic regression analyses to health-related data.
• Explain and interpret measures of inter-rater agreement and reliability.
• Demonstrate basic proficiency in use of the Statistical Package for the Social Sciences (SPSS).
• Demonstrate proficiency in presenting results in formats (e.g. Power Point) suitable for manuscripts, reports, and grant applications.

NGR 6404 Anatomy and Physiology for Nurse Anesthesia I
• Examine the anatomy and physiology of the human body, normal physiological functions, and systems integrations.
• Discriminate among the different functions, responses and controls of the nervous system.
• Describe normal anatomical and physiological functions of the cardiovascular system.
• Compare the body fluid compartments, composition, and elimination.
• Analyze respiratory function and gas exchange in the human body.
• Compare and contrast endocrine function.

NGR 6400 Chemistry, Biochemistry, and Physics for Nurse Anesthesia
• Describe the general principles of physics of diffusion, osmosis and fluid dynamics as they relate to the practice of anesthesia safety.
• Analyze the general principles of electricity, electrical safety and hazards, magnetism and their relation to safe anesthesia administration.
• Demonstrate the use of anesthetic monitoring systems.
• Interpret the general principles of organic chemistry, inorganic chemistry and biochemistry as they relate to anesthesia practice.
• Explain the working components and safety principles of an anesthesia gas machine.
• Calculate vaporization percentages and the composition of anesthetic gas flows.
• Distinguish among breathing systems used in the administration of anesthesia.
• Examine safety principles regarding environmental hazards and monitoring systems in the anesthesia arena, and the use of these principles on patient care outcomes.
• Describe the impact of health care regulations on equipment, monitoring systems and environmental hazards in the anesthesia setting.

NGR 6460 Pharmacology for Nurse Anesthesia I
• Understand general pharmacologic principles including pharmacokinetics, pharmacodynamics and various pharmacotherapeutics of anesthetic agents and adjunctive agents.
• Interpret the general principles of uptake and distribution of inhalation anesthetic agents.
• Compare the pharmacological and clinical use of modern inhalation anesthetics.
• Evaluate the pharmacological and clinical usage of various narcotic agents used in anesthesia including narcotic antagonists, tolerance, and addiction.
• Distinguish the pharmacological and clinical use of non-narcotic agents used in anesthesia, including the barbiturates, benzodiazepines, and non-barbiturate induction
• Examine the indication for the use of various induction agents, local anesthetics, anticholinesterase and anticholinergic drugs, muscle relaxants, and non-steroidal anti-inflammatory drugs.

• Discuss the effect of psychopharmacological therapy, chemotherapy, nutritional therapy and antiepileptic drugs upon anesthesia care.

• Discuss the effect and appropriate choice of antibiotics and antiviral agents utilized in surgical care.

• Examine the effects of multiple drug regimes on patient’s health and the impact on the anesthetic plan of care.

NGR 6803 Research and Evidence-Based Practice

• Perform rigorous critique of evidence derived from qualitative and quantitative research databases to generate meaningful evidence for application in practice.

• Develop an Evidenced-Based Synthesis Paper on a significant clinical or practice problem with particular attention to the research on which the practice is supported for use in the clinical or practice area.

• Design an evidence-based outcome project to support policy changes through knowledge generation, knowledge dissemination, planning and evaluating knowledge dissemination.

• Quizzes on relevant statistics and case studies and class participation.

Semester 2

NGR 6152 Advanced Physiology and Pathophysiology

• Describe mechanisms by which the latest immunological, genetic, epigenetic, and molecular biology discoveries influence the pathogenesis of common diseases.

• Describe mechanisms by which the latest immunological, genetic, epigenetic, and molecular biology discoveries influence the pathogenesis of common diseases.

• Discuss the mechanisms by which developmental factors, environment, and psychosocial factors influence physiology and lead to disease states.

• Discuss the pathogenesis, and clinical manifestations of common altered health state.

• Analyze biobehavioral responses to illness and treatment modalities.

NGR 6931 Pharmacology & Physiology for Nurse Anesthetists II

• Acquire advanced knowledge of pharmacological and physiological principles related to the neurological system.

• Identify the principle functions of the kidneys and the influence of anesthesia and surgery on physiology and pharmacodynamics specific to the renal system.

• Understand physiological principles of organ communication, regulation of metabolic function, hormone function and regulation, hemostasis, and blood coagulation – correlating physiology to current pharmacological treatment measures specific to the hematologic and endocrine systems.

• Apply knowledge of liver and gastrointestinal physiology to create appropriate pharmacological plans for patients requiring various types of anesthesia.
• Determine the indication for use of various pharmacologic agents including induction agents, local anesthetics, anticholinesterase, anticholinergic drugs, muscle relaxants, non-steroidal anti-inflammatory, and other drugs appropriate for neurological, renal, hematological, endocrine, gastrointestinal, and hepatic conditions.
• Explore alternative anesthesia delivery methods in rural and/or military settings for the victim of a traumatic injury.

NGR 6424 Principles of Nurse Anesthesia
• Apply the scope and standards of nurse anesthesia practice to patients with neurologic, renal, genitourinary, and musculoskeletal dysfunction.
• Evaluate the impact of neurologic, renal, genitourinary, and musculoskeletal pathophysiology on anesthesia care.
• Apply the concepts of nurse anesthesia care to the patient with advanced neurologic, renal, genitourinary, and musculoskeletal dysfunction.
• Evaluate and integrate the implications of neurologic, renal, genitourinary, and musculoskeletal dysfunction on nurse anesthesia care.
• Prepare and develop anesthesia care plans for neurologic, renal, genitourinary, and musculoskeletal pathophysiology.
• Explore the implications of trauma/spinal cord injury to nurse anesthesia care.
• Understand the anesthetic implications of peripheral nerve blocks, pain management/office-based anesthesia, and laparoscopic surgery.

NGR 6002C Advanced Health Assessment Across the Life Span
• Perform comprehensive, problem focused and interval health histories using various data collection techniques and instruments related to history taking.
• Complete systematic and organized comprehensive, problem focused and interval physical examinations based upon and pertinent to the health history findings.
• Present the health history and physical examination findings in both written and oral forms.
• Identify a list of present and potential health problems (differential diagnoses) through the analysis of symptoms and the synthesis of data gleaned from the health history and physical examination.
• Demonstrate the use of common laboratory/diagnostic tests in advanced practice.

Semester 3

NGR 6422 Principles for Nurse Anesthesia Through the Life Span
• Evaluate the obstetrical patient for anesthesia to include preoperative assessment considering normal obstetrical physiology and the more common pathophysiologies, pain management, cesarean section care, proper positioning, and epidural anesthesia.
• Examine the principles of neonatal and pediatric anesthesia during preoperative assessment, operating room and equipment set-up, appraisal of normal physiology and pathophysiology, and post anesthesia pain management.
• Organize the care of geriatric surgical patients for anesthesia to include: physical assessment, selection and administration of anesthesia techniques, management of
anesthetic and postoperative care.

- Demonstrate the integration of biopsychosocial, genetic, cultural, economic, environmental, and political elements into anesthesia assessment, health maintenance, health promotion, and illness prevention strategies of the advanced practice nurse.
- Prioritize needs and resources for individuals, families, and vulnerable population groups related to health promotion and preservation throughout the lifespan and anesthesia related issues.
- Identify areas of cultural competence employed in current nurse anesthesia practice and resources for further development of skills to practice in diverse population settings.
- Understand the periodic health examination and its components across the lifespan to include physical, mental, developmental, and social health related to interactions with patients and families in need of anesthesia services or consultation.
- Discuss the knowledge derived from theories and models that develop counseling strategies for patients related to health promotion in the preoperative clinic visit.

NGR 6492 Nurse Anesthesia Role Development

- Describe the historical aspects leading to the development of nurse anesthesia as a profession.
- Analyze the impact that the founders of the American Association of Nurse Anesthetists had in directing the future practice of nurse anesthesia.
- Examine the structure and function of the American Association of Nurse Anesthetists.
- Examine the legal and ethical aspects of nurse anesthesia practice.
- Assess the steps involved in a court trial for a malpractice case.
- Describe risk reduction strategies appropriate for nurse anesthesia.

NGR 6420 Foundations and Methods of Anesthesia Practice

- Assemble anesthesia equipment for the delivery of an anesthetic to include: gas machine check, basic anesthesia cart assembly, and collection of adjunct anesthesia equipment.
- Utilize all routine monitors employed in anesthesia practice.
- Evaluate general surgical clients pre-operatively and compose an applicable anesthesia care plan to include appropriate anesthetics and adjunct pharmacological agents tailored to the patient’s needs based on physiological, psychosocial, cultural, race, gender and ethnicity.
- Demonstrate beginning skills of airway management to include airway assessment, appraisal of a potential difficult airway, and oral, nasal, and fiberoptic intubation.
- Relate the rationale for intubation and the different techniques used to intubate.
- Demonstrate beginning skills for the insertion of arterial lines and central lines and analyze the techniques of regional, arterial, and central line monitoring.
- Demonstrate beginning skills in administering regional anesthesia. Compare the different modalities of regional anesthesia. Differentiate among different types of regional techniques appropriate for patient’s age, diagnosis, surgical procedure, and physical assessment.
• Comprehend the physiological implications of each type of regional anesthesia and different local anesthetics agents and evaluate the use of each of the different local anesthetic agents.

• Utilize the principles and legal aspects involved in the correct completion of the anesthetic record and informed consent.

• Examine techniques employed by the nurse anesthetist to ensure that the client is positioned in the correct physiology position during surgery and anesthesia.

• Manage intravenous access for the general surgical client.

• Obtain BLS, ACLS, and PALS certification.

• Review patient rights and responsibilities.

• Discuss screening tests for individuals within the context of anesthesia clinical evidence based methods.

• Evaluate theories/models utilized in anesthesia including physiological, social, and mid-range theories related to change in health behaviors and provisions of quality health care.

• Discuss how knowledge and concepts derived from theories and models guide decision-making and solve problems in the health care delivery system and the anesthesia environment.

Semester 4

NGR 6423 Principles of Cardiothoracic Nurse Anesthesia

• Apply the scope and standards of nurse anesthesia practice to patients with cardiac, respiratory, ophthalmic, hepatic, endocrine, and ENT derangement and dysfunction.

• Evaluate the impact of cardiac and respiratory pathophysiology on anesthesia care.

• Evaluate the impact of ophthalmic, ENT, endocrine, and hepatic pathophysiology on anesthesia care.

• Explain the process of respiration including pulmonary ventilation and oxygen-carbon dioxide exchange.

• Apply the concepts of nurse anesthesia care to the patient with advanced cardiothoracic dysfunction.

• Assess acid-base balance, fluid management, and electrolyte balance of an anesthetized patient, including during cardiothoracic anesthesia.

• Prepare and develop anesthesia care plans for cardiothoracic, ophthalmic, ENT, endocrine, and hepatic pathophysiology in a culturally diverse population.

NGR 6431 Nurse Anesthesia Clinical Residency I

• Evaluate the general surgical patient through a pre-operative assessment culminating in an appropriate written care plan in collaboration with a certified registered nurse anesthetist.

• Synthesize the set-up of all gas machines, adjunct anesthesia equipment, monitors, and pharmaceutical agents necessary to anesthetize the general surgical patient, ensuring all safety guidelines (patient and operating room environment) are followed.

• Develop proficiency in normal airway maintenance to include: airway insertion, mask ventilation, laryngeal-mask airway insertion, intubation, and extubation.
• Relate the condition of the post-anesthetic patient to recovery room personnel accurately, efficiently, and completely.
• Document a complete and accurate record of the general surgical patient’s anesthetic course.
• Utilize effective communication with respect and caring for all patients and members of the health care team.
• Develop leadership skills by serving as a patient advocate, adhering to regulations, policies and procedures including infection control protocols.
• Develop and institute fiscally responsible anesthetic plans ensuring cost effective quality of care.
• Demonstrate critical thinking skills during the intraoperative management of patients and adjustment of anesthetic plan as required for safe quality care.
• Evaluate anesthetic plans postoperatively for quality assurance.

NGR 6440L Nurse Anesthesia Simulation Lab I
• Competency in the use of health information technology to transform health care such as electronic health records.
• Correct demonstration of an anesthesia evaluation of the patient with neurologic, renal, and orthopedic dysfunction or derangement.
  o Satisfactory completion of pre-operative assessment considering physiology and the more common pathophysiologies for these systems, pain management, and proper positioning.
• Correct demonstration of the principles of trauma anesthesia.
  o Satisfactory completion of pre-operative assessment, operating room and equipment set-up, appraisal of normal physiology and pathophysiology, and post anesthesia pain management.
• Develop and carry-out the plan of care for the spinal cord injury patient.
  o Satisfactory completion includes: physical assessment, selection and administration of the anesthesia techniques, management of the anesthetic and post-operative care.
• Demonstrate effective communication tools, techniques, including information systems and communication technologies, to facilitate discussions and interactions that enhance team function.
  o Satisfactory completion includes proper use of Team STEPPS concepts including: Team Structure, Leadership, Situational Monitoring, Mutual Support and Communication.

NGR 6929 Clinical Correlational Conference
• Using evidence-based literature, present and discuss anesthesia management of an unusual, interesting, difficult case.
• Critically assess the ramifications of adverse clinical occurrences and using current research offer alternative solutions.

Semester 5

NGR 6432 Nurse Anesthesia Clinical Residency II
- Demonstrate competency for all Clinical Residency I objectives.
- Manage most anesthetic complications with assistance from the CRNA preceptor.
- Demonstrate integration and application of theoretical knowledge into nurse anesthesia practice.
- Exhibit coordination and integration of knowledge base with most technical skills.
- Write complex plans of care and offer spontaneous verbal plans of care for more basic procedures.
- Implement occasional verbal cues for correction of technical skills and frequent directive, supportive cues for anesthetic development by the mentor/preceptor.
- Exhibit efficiency with time management and case presentation.
- Recognize potential problems and accurately prescribe appropriate interventions in a timely manner.

NGR 6929 Clinical Correlational Conferences
- Using evidence-based literature, present and discuss anesthesia management of an unusual, interesting, difficult case.
- Critically assess the ramifications of adverse clinical occurrences and using current research offer alternative solutions.

NGR 6441L Nurse Anesthesia Simulation Lab II
- Correct demonstration of an anesthesia evaluation of the obstetrical patient to include pre-operative assessment considering normal obstetrical physiology and the more common pathophysiologies, pain management, cesarean section care, proper positioning, and epidural anesthesia.
- Describe and demonstrate the principles of neonatal and pediatric anesthesia during pre-operative assessment, operating room and equipment set-up, appraisal of normal physiology and pathophysiology, and post anesthesia pain management.
- Develop and carry-out the plan of care for the geriatric surgical patient to include: physical assessment, selection and administration of the anesthesia techniques, management of the anesthetic and post-operative care.
- Demonstrate the anesthesia evaluation/health examination and its components across the life span to include physical, mental, developmental and social health related to interactions with patients and families in need of anesthesia services or consultation.

Semester 6

NGR 6433 Nurse Anesthesia Clinical Residency III
- Demonstrate competency for all previous clinical objectives.
- Exhibit ability to function independently, with minimal assistance for all types of surgical procedures.
- Manage most intra-anesthetic emergencies with little or no assistance.
- Incorporate professional ethics, responsibilities, philosophies, and attitudes consistent with the practice of a certified registered nurse anesthetist.
- Consider alternative nurse anesthesia plans for specialty anesthesia such as: cardiovascular, neurosurgical, and EENT surgeries and pediatric, obstetric, and
geriatric patients.

NGR 6929 Clinical Correlational Conferences
- Using evidence-based literature, present and discuss anesthesia management of an unusual, interesting, difficult case.
- Critically assess the ramifications of adverse clinical occurrences and using current research offer alternative solutions.

NGR 6442L Nurse Anesthesia Simulation Lab III
- Analyze physiologic changes and develop a plan of care demonstrating comprehension and knowledge of the scope of practice for the surgical patient with cardiac, thoracic, respiratory, ophthalmic, hepatic, endocrine, and ear, nose, and throat (ENT) derangement and dysfunction.
- Satisfactory completion of simulation testing to include:
  - Correct demonstrate proper pre/intra/post-operative management of cardiac and respiratory pathophysiology while under anesthesia care;
  - Proper demonstration of airway management;
  - Demonstrate comprehension of respiratory pathophysiology including pulmonary ventilation and oxygen carbon dioxide exchange;
  - Successful management of vascular access, fluid resuscitation, and acid base management.

Semester 7

NGR 6434 Nurse Anesthesia Clinical Residency IV
- Demonstrate competency for all previous courses and clinical content.
- Exhibit ability to function independently for all types of surgical procedures.
- Manage intra-anesthetic emergencies with little or no assistance.
- Portray a professional philosophy and attitude consistent with the professional practice of a certified registered nurse anesthetist.
- Be eligible to take the certification examination.

NGR 6929 Clinical Correlational Conferences
- Using evidence-based literature, present and discuss anesthesia management of an unusual, interesting, difficult case.
- Critically assess the ramifications of adverse clinical occurrences and using current research offer alternative solutions.

NGR 6491 Nurse Anesthesia Practice Comprehensive
- Integrate all didactic material to provide a solid knowledge base for nurse anesthesia practice.
- Demonstrate the necessary technical skills needed to sit for the national certification examination for nurse anesthetists.
- Combine nurse anesthesia knowledge and technical skills.
**Differences in Admission, Curriculum, or Graduation Requirements:** There are no differences or changes in admission, curriculum, or graduation requirements for the nurse anesthesia students taking classes at the CAMLS site. In addition, no special arrangements are required for grading, transcripts, or transfer policies as they relate to nurse anesthesia students at the CAMLS facility.

**Administrative Oversight:** The administrative oversight will continue to be from the administrative officers for the College at the Tampa campus. This includes the Dean and Senior Associate Vice President, Health, Dianne Morrison-Beedy; Associate Dean of Academics Affairs and Inter Professional Initiatives, Rita D’Aoust; and Assistant Dean Master’s Program and Academic Affairs, Brian Graves.

**No Distance Learning Offerings:** All of the courses offered at CAMLS are offered live and taught by CON full time or adjunct faculty. No courses are offered in the distance format. The College has permission from COA to offer distance learning courses. However, there are no plans to offer live courses for this concentration at CAMLS.

**FR 4.9:** All courses in the CRNA program are taught face-to-face therefore there are no complications with FR 4.9. All credit hour assignments comply with the Federal Definition of a credit hour.

### 5. FACULTY

**Faculty Roster:** A roster of faculty is provided in Appendix A and includes their academic qualifications and experiences relevant to the courses they taught. As noted in the appendices, all faculty teaching courses within the nurse anesthesia concentration are educationally and clinically qualified to teach assigned courses, that is they maintain certification in their specialty where indicated.

**Adequacy of Faculty to Support the Program:** The nurse anesthesia concentration was approved by the COA on October 14, 2011 for the maximum number of ten years. In addition, the College files the annual report and has always received confirmation that all requirements are met. There is no impact on the faculty because of the use of CAMLS. The nurse anesthesia faculty assignments are consistent with faculty in the other concentrations. Based on FTEs there are six full-time faculty members (60%) and four part-time (40%). The numbers of faculty are adequate to support the program and its students and ensure quality and integrity of the nurse anesthesia program. Faculty members are required to file a conflict of interest form if they are employed outside of the College; all concentration faculty members are in compliance.

**FR 4.9:** All courses in the CRNA program are taught face-to-face therefore there are no complications with FR 4.9. All credit hour assignments comply with the Federal Definition of a credit hour.

**Scholarship and Research Capability of Faculty:** Evidence of faculty scholarship is noted on the faculty roster (Appendix A).

### 6. LIBRARY AND LEARNING RESOURCES
Library and Information Resources: There are six USF libraries located on the USF campuses providing a variety of services for students and faculty. Library services are available on site as well as through electronic resources. A valid ID card provides access to the six USF libraries as well as local, regional and libraries that include public libraries, and libraries at other state academic institutions. The College of Nursing, Morsani College of Medicine, College of Public Health, School of Physical Therapy, School of Biomedical Sciences and College of Pharmacy utilize the Hinks and Elaine Shimberg Health Sciences library.

Library Staffing and Services: USF Libraries provide students with specialized research assistance and information literacy information. Assistance is available from research and references librarians either by appointment, on-line via the library website, by phone, or in a classroom setting. The Shimberg Health Sciences Center Library holds on reserve required texts for the Nurse Anesthesia concentration, as well a large variety of anesthesia related texts available for student check out. Ninety-eight percent of journals are available online. The Shimberg Library provides classes as well as individual instruction as requested. Off-campus access is provided to databases.

Electronic Resources: Shimberg has been successful in developing an extensive digital library while maintaining the integrity of print serial and monographic collections. The Library systematically acquires monographs, journals, audio-visuals and software published in the last five years, providing health care professionals with state-of-the-art health sciences resources. Remote access is available to students with valid ID cards.

7. PHYSICAL RESOURCES

Physical Facilities: CAMLS facility is a 90,000 square foot complex where human and technological elements are assembled under one roof for learning and innovation across all healthcare professions. There are four core components at the Center: The Surgical and Interventional Training Center, The Education Center, the Virtual Patient Care Center, and the Tampa Bay Research and Innovation Center.

This Center provides state-of-the-art facilities and the Brochure in Appendix B provides a detailed plan of each component. The nurse anesthesia concentration has access to classroom and training facilities through centralized booking. The nurse anesthesia concentration shares equipment provided by CAMLS and the College.

Currently existing simulation facilities at the College will also be utilized for the core Physical assessment course. This includes the George and Marion Miller Center for Virtual Learning and the Center for Advanced Clinical Learning (CACLS), a shared space for all USF Health students.

The CRNA concentration has been an overwhelming success within the Tampa Bay Community. This is evidenced by the growth in clinical sites interested in and willing to train our students. In 2006, the program was affiliated with only three clinical sites: James A Haley Veteran’s Hospital, Bayfront Medical Center and Tampa General Hospital. Today, the program has 19 clinical site affiliations, all in the Tampa Bay region all approved by the COA (Appendix C).
Physical Resources for Students: At CAMLS, student facilities include four study areas and a lounge with a microwave oven, refrigerator and vending machines. Students have access to free parking Monday through Friday. At the College the students have access to all facilities which are provided for the student body at large.

Physical Resources for Faculty: Faculty offices are provided at each site (one faculty office at the Tampa campus, a full-time Program Assistant and a full time recruiter). At the CAMLS site there are two faculty offices and one advising workstation. Office hours are posted at each site to ensure students have access to faculty at either site.

8. STUDENT SUPPORT SERVICES

Change in Student Support Services: The services available and offered to students will not change with the use of the CON and CAMLS sites for classes.

University Student Support Services: A variety of support services are available to all students at USF. Included are the Writing Center, Graduate School Workshops, Technology Services, Safety/Mo Bull, Financial Aid services and the Campus Recreation Center with an array of gyms, pools, park and outdoor recreation center.

College Student Support Services: At the College of Nursing the Office of Student Affairs is available to all students at both the undergraduate and graduate levels. Advisors provide information sessions for potential students, program advising for in-house students and also participate in off campus recruitment activities. The College Research Center provides formal infrastructure to assist students and faculty in conducting research. In addition the Center provides assistance for students with preparation of materials that can be used for publications and posters.

Program Student Support Services: The Nurse Anesthesia concentration has its own advisor who is responsible for recruitment, advising, preparation of admission packets and on-going assistance with availability of services and resources at USF and the CON. The Nurse Anesthesia advisor splits advising time at the USF Tampa campus and at CAMLS on a published schedule. The full time program assistant is also available to students by email, phone and walk-ins.

9. FINANCIAL SUPPORT

Title IV Funding: The University is currently on reimbursement for Title IV Funding.

Business Plan: The budget is adequate to support the CRNA concentration including the CAMLS site. The following is provided in support of Business Plan: Appendix D, Nurse Anesthesia Tuition Form -Final Nursing; Appendix E, CRNA Tuition Budget; and Appendix F provides revenue versus expenditures report for year 1 to year 4.

10. EVALUATION AND ASSESSMENT
**Overall Institutional Effectiveness and Monitoring of Program:** The College participates in the Academic Assessment Plan under the responsibility of the Institutional Effectiveness, Academic Planning and Review at the University. Annual assessment reports are filed with the Office of Institutional Effectiveness. These assessments include: Administrative Assessment, Undergraduate program, Master’s program (nine concentrations including nurse anesthetist), Doctor of Nursing Practice program, and PhD program.

The College of Nursing, including the master’s program, is accredited by the Commission on Collegiate Nursing Education (2010-2020) and the nurse anesthesia concentration is also accredited by the Council of Accreditation (2011-2021).

**Procedures for Systematic Evaluation of all Nursing Programs and Concentrations:** The College has an internal evaluation plan which is based on the accreditation model. Data are collected from each program, including the master’s concentrations each semester and aggregated on a yearly basis culminating in an annual review for each program. Review of the aggregated evaluation data is used to foster changes in curriculum, processes and procedures. The Master’s annual review is held in the summer and is open to the faculty who teach in the program. All faculty and staff may attend.

The evaluation plan will not require change as a result of the utilization of CAMLS. Clinical facilities are currently evaluated by both students and faculty for all nursing concentrations as described in the evaluation plan and reported to faculty annually.

**11. APPENDICES**

The following appendices are included and referenced in the text above:

- Appendix A, Faculty Roster Form
- Appendix B, CAMLS Brochure
- Appendix C, Nurse Anesthesia Clinical Site Affiliations
- Appendix D, Nurse Anesthesia Tuition Form – Final Nursing
- Appendix E, CRNA Tuition Budget
- Appendix F, SACS Budget Projection for CRNA

**Submit paper or CD/DVD to:**
Southern Association of Colleges and Schools, Commission on Colleges
1866 Southern Lane, Decatur, Georgia 30033-4097
Faculty Roster Form (SAMPLE)
Qualifications of Full-Time and Part-Time Faculty

Name of Institution: University of South Florida College of Nursing
Name of Primary Department, Academic Program, or Discipline: Nurse Anesthesia
Academic Term(s) Included: Fall 2011 – Fall 2012
Date Form Completed: 2/1/2013

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<td>OTHER QUALIFICATIONS &amp; COMMENTS Related to Courses Taught</td>
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| Erik Rauch (F) | Fall
NGR 6431 Nurse Anesthesia Clinical Residency I, 4 (G)
NGR 6434 Nurse Anesthesia Clinical Residency IV, 4 (G) | DNP (General), University of South Florida MSN, CRNA, ARNP (Nurse Anesthesia), Florida Gulf Coast University | Specialty in Obstetric Anesthesia – Clinical Practice at Bayfront Medical Center Baby Place Certification in Simulation |
| | Spring
NGR 6432 Nurse Anesthesia Clinical Residency II, 4 (G) | | Publications:
| | Summer