Compact for Nursing
FY 2003-04

A. Introduction

The School of Nursing is the first continuously operating school organized under the auspices of a university. The school is ranked in the top 5% of the 636 U.S. nursing schools with baccalaureate and higher degree programs. In the most recent NIH funding rankings, the school placed 14th. Its graduates have made significant and sustained contributions to health care and the profession of nursing. Approximately 300 graduate and 200 undergraduate students are registered at any one time.

The undergraduate curriculum takes full advantage of the professional educational opportunities in a major research university. The SON programs provide 17% of baccalaureate, approximately 50% of masters level and 100% of PhD level degrees in nursing for the state of Minnesota. Graduates assume patient care and leadership roles in the full range of health care facilities and health-related industries. Master's degree programs prepare nurses for advanced practice roles as nurse midwives, clinical specialists, and nurse practitioners in most major clinical areas as well as educational and management roles. The Ph.D. program, initiated in 1983, is designed to prepare scholars and researchers for academic roles. Faculty members conduct extramurally funded research on health and illness behavior and methods for maintaining and improving health status.

The school is an active participant in interdisciplinary programs of the University and the Academic Health Center including the Rural Health School, the Center on Aging and its programs, the Primary Care Initiative, the Center for Spirituality and Healing, and the Consortium on Children, Family and Youth. A number of faculty members also engage in clinical practice.

B. Major Long-Term Goals/Priorities

1. Current Goals/Priorities from Previous Compacts

- Recruit additional faculty and associate dean for research in support of the research program
  Accomplishments – Some of the planned faculty and the associate dean for research positions planned have been filled. Other searches are ongoing. A federally funded program to increase the number of American Indian faculty has resulted in the admission of one PhD student for Fall 2003.
  Additional Action Plans – Continue with search procedures. Tenure track positions are being sought in public health, pediatrics, oncology and a family nurse practitioner. Efforts to recruit and develop underrepresented minority faculty members will continue. Term faculty are sought for part-time clinical teaching and to fill needs created by faculty released on grants.
  Relationship to AHC Strategic Plan – Rebuild the AHC’s health research capacity (AHC Plan 6.0). Increase class size in nursing (AHC Plan 2.0, 2.1, 4.0)
  Cost summary – Funding for the faculty positions will come from vacant positions and additional tuition revenues. Request support for associate dean salary.

- Recruit clinical practice director
  Accomplishments – The position was filled.
  Additional Action Plans – We continue to pursue practice arrangements with UMP and others.
  Relationship to AHC Strategic Plan – Engage the community of providers, employers & consumers in helping to define the changing competencies, knowledge & skills required for health professionals in various components of the care delivery system (AHC Plan 3.01)
Cost summary – Funding was provided in the last compact process.

- **Develop a Post-baccalaureate Certificate Program**
  
  **Accomplishments** – Applications far exceeded available slots. The program is meeting expectations.
  
  **Additional Action Plans** – Add 8 additional students for FY04 and consider adding the option in Rochester.
  
  **Relationship to AHC Strategic Plan** – Engage the community of providers, employers & consumers in helping to define the changing competencies, knowledge & skills required for health care professionals in various components of the care delivery system (AHC Plan 3.01)

Cost summary – The program is financed primarily with tuition dollars. Some medical education endowment funds are used to meet the total need.

- **Increase the efficiency and effectiveness of support services for the preparation of research proposals and implementation of funded projects.**
  
  **Accomplishments** – Using recurring funds, we have reallocated positions to this function.
  
  **Additional Action Plans** – Negotiate with AHC HR about sharing a human resources specialist.
  
  **Relationship to AHC Strategic Plan** – Rebuild the AHC’s health research capacity (AHC Plan 6.0)

Cost summary – Recurring funds are used

- **Improve the physical environment of classrooms**
  
  **Accomplishments** – Work continues on this problem.
  
  **Additional Action Plans** – Because these facilities are not under school control, we will continue to press for AHC and central University support for upgrading classrooms.
  
  **Relationship to AHC Strategic Plan** – None

Cost summary – NA

- **Assure the availability of clinical sites for instruction through effective rewards**
  
  **Accomplishments** – This problem has increased as productivity requirements and budget cuts have affected clinical sites.
  
  **Additional Action Plans** – Continue to explore and use non-monetary rewards.
  
  **Relationship to AHC Strategic Plan** – Continue to communicate, educate & form coalitions at local, state & national levels to promote increased funding for health professional education & research (AHC Plan 2.1)

Cost summary –

- **Implement strategies to respond to the needs of other MN nursing schools for doctorally prepared faculty**
  
  **Accomplishments** – A federal grant proposal to develop graduate education courses via distance education was not funded. For the second year, a special session was held with promising Mn undergraduates to interest them in doctoral studies early in their careers.
  
  **Additional Action Plans** – Consider offering doctoral courses in summer session. Develop a web-based program to prepare nurse educators as a degree program and/or post-graduate certificate
  
  **Relationship to AHC Strategic Plan** – Continue to communicate, educate & form coalitions at local, state & national levels to promote increased funding for health professional education & research (AHC Plan 2.1)

Cost summary – Additional funds will be needed for curriculum development.

- **Increase the visibility of the school and nursing as a profession**
  
  **Accomplishments** – Hiring of a full-time communications director has done wonders for both internal and external communications.
  
  **Additional Action Plans** – Continue to update and implement our communications plan and actively pursue vehicles for telling our stories.
Relationship to AHC Strategic Plan – Continue to communicate, educate & form coalitions at local, state & national levels to promote increased funding for health professional education & research (AHC Plan 2.1)  
Cost summary – Internal funds have financed this to date.

• Develop support systems for information technology commensurate with growing use of Internet and web-based courseware  
Accomplishments – An information technology task force recently completed an analysis of the current systems. We are working through their recommendations.

Additional Action Plans – Continue to upgrade computers and provide technical support for ongoing offering of web-based courses.

Relationship to AHC Strategic Plan – Develop & deploy new information tools & applications… (AHC Plan 5.2)  
Cost summary – Support is still needed to upgrade computers for faculty whose current equipment is inadequate for web-based course offerings.

• Create a strategic plan for faculty practice  
Accomplishments – Our newly hired director of faculty practice is preparing a comprehensive school plan.

Additional Action Plans –  
Relationship to AHC Strategic Plan – Engage the community of providers, employers & consumers in helping to define the changing competencies, knowledge & skills required for health care professionals in various components of the care delivery system (AHC Plan 3.01)  
Cost summary – None required at this time.

• Participate in interdisciplinary efforts with other AHC Schools:
  • Clinical Practice site(s) in 2003  
  • Educational program(s) in 2003  
Accomplishments – The school has played an active role in establishing the Transitional Care Unit.

Additional Action Plans –  
Relationship to AHC Strategic Plan – Develop and implement interdisciplinary health professional education opportunities (AHC Plan 1.1.0).  
Promote/enhance strong, integrated, interdisciplinary clinical practices (AHC Plan 4.1.0)  
Financing – Practice income will be needed to cover clinical practice expenses. Educational funds can be redirected to cover most of the educational costs.

• Re-envision the role and preparation of registered nurses  
Accomplishments – Several sessions have been held with practicing nurses and resulting plans are being implemented.

Additional Action Plans – We will propose one or more demonstration projects to test feasible, sustainable and satisfying practice models.

Relationship to AHC Plan – Engage the community of providers, employers & consumers in helping to define the changing competencies, knowledge & skills required for health care professionals in various components of the care delivery system (AHC Plan 3.01)  
Cost summary – Extramural support could be sought for any major investigation or demonstration project.

2. New Goals/Priorities

• Complete work with the task force evaluating the need for and wisdom of a nursing outreach at UM-Crookston  
Expected Outcomes – Data from the feasibility study together with task force deliberations will arrive at a reasoned answer to this question.

Future Plans – Maintain school representation in task force deliberations
Relationship to AHC Strategic Plan – Engage the community of providers, employers & consumers in helping to define the changing competencies, knowledge & skills required for health care professionals in various components of the care delivery system (AHC Plan 3.01)
Financing – not applicable

• Continue development of the school’s research agenda by:
  · Increasing sponsored revenue and streamlining pre- & post-award processes

Expected Outcomes – 25% increase in number of federal grants; 25% increase in grants with >$50,000 in direct costs; high NIH funding ranking

Relationship to AHC Strategic Plan – Rebuild the AHC’s health research capacity (AHC Plan 6.0). Increase class size in nursing (AHC Plan 2.0, 2.1, 4.0)
Financing – Within current budget.

  · Ensuring that research portfolio reflects societal priorities

Expected Outcomes – Increased number of community research partnerships; increased number of response to NIH RFAs/PAs.

Relationship to AHC Strategic Plan – Rebuild the AHC’s health research capacity (AHC Plan 6.0)
Financing – Within current budget

  · Submit at least one institutional pre-doc and one exploratory center proposals

Expected Outcomes – If successful this will support PhD students in areas of school strength

Relationship to AHC Strategic Plan – Rebuild the AHC’s health research capacity (AHC Plan 6.0). Increase class size in nursing (AHC Plan 2.0, 2.1, 4.0)
Financing – Within current budget.

• Provide leadership for clinical research activities in AHC

Expected Outcomes – Increased number of nursing PIs on interdisciplinary projects; sustained collaboration with FUMC and Densford Clinical Scholars programs; annual nomination for AHC Academy of Distinguished Researchers

Relationship to AHC Strategic Plan – Rebuild the AHC’s health research capacity (AHC Plan 6.0). Increase class size in nursing (AHC Plan 2.0, 2.1, 4.0)
Financing – Within current budget

• Develop a plan for forming and financing relationships for international experiences for students and faculty, visiting scholars, sister schools, etc.

Expected Outcomes – Meaningful and sustainable relationships will be established.

Future Plans – A task force is exploring methods for sorting through the multiple requests for international collaboration received annually. From this a strategic plan will be developed.

Relationship to AHC Strategic Plan –
Financing –

• Match graduate course and program offerings with demand by:
  · Suspending two areas of study (school health and oncology)
  · Considering development of post-master’s certificate curricula in: women’s health nurse practitioner, education, international health and adult health and/or family nurse practitioner
  · Considering development of web-based modules or May seminars on gerontological nursing for ANPs and FNPs
  · Assuming responsibility for the Minneapolis VAMC nurse anesthesia program in Fall 2004
  · Considering scheduling doctoral courses in the summer

Expected Outcomes – Improved relationship between demand and resources invested

Future Plans – Explore options for financing the certificate and module development
Relationship to AHC Strategic Plan –

Financing – The nurse anesthesia can be funded partially with tuition income and an additional fee. We are also requesting $120,000 from the Compact Pool to meet the remainder of the incremental cost. Funds for developing and certificate and module development will need to be identified.

C. Workforce Issues / Student Enrollment / Diversity

The latest job vacancy survey by the Department of Economic Security identified more than 2,436 RN vacancies in Minnesota. The number of baccalaureate graduates from Minnesota schools seeking licensure in the state rose slightly from 512 in 2001 to 546 in 2002. Including associate degree graduates, the total number of Minnesota graduates seeking licensure in the state rose from 1,453 in 2001 to 1,668 in 2002. The shortage of faculty for other Minnesota nursing schools has not improved and is likely to become worse as the current faculty members retire and fewer replacements are available. Our student enrollments are within expected ranges and applicants for the undergraduate class were up, dramatically so for the sophomore class. But preferences for UM-Rochester continue to be low. Applications for the accelerated post-baccalaureate program continue to be strong.

Previous non-recurring support permitted the hiring of a minority recruiter, who has increased targeted recruiting of minority students. A project to increase the number of American Indian faculty has funded by the Institute of General Medicine. In addition to facilitating master’s studies of students at the University of North Dakota, we have admitted one of the early students to the PhD program for Fall 2003.

D. Improved Productivity and Service

- Undergraduate tuition policies gave the school no rate increase in FY98, .2% in FY99 and 2.5% in FY00 (assuming 15 credits/student). As a result undergraduate tuition income actually declined if FYEs generated are held constant. The decision to charge a flat rate for all undergraduate credits over 13 credits resulted in forgone income of approximately $40,000 and an effective tuition increase of 5.4% rather than the expected 13.7%. Until FY03, increasing tuition revenues have come largely through increased faculty productivity.
- Decentralization of administrative functions have increased workloads to the point where we have had to add administrative staff to meet needs.
- An increasing number of courses are being revised using web-based or web-assisted strategies. This development plus the additional computerized administrative systems have intensified the need for most faculty members to have high-end computers and seriously strained our supply budget.

E. Compact Development

F. Facilities Issues / Precinct Plan

Appendix 1.

G. Additional Financial Issues

Tuition – The agreed upon tuition revenue estimate is $4,058,747 for fiscal year 2003-04.

ICR – The agreed upon ICR revenue estimate is $231,108 (49.5%) for fiscal year 2003-04.
H. Data Profile/Critical Measures for Health Professional Schools

For a display of planning data related to the School of Nursing, refer to a link of the University web site managed by the Office of Institutional Research and Reporting at http://www.irr.umn.edu. This site contains standard financial, staffing and student information. (Unit specific goals related to certain measures will be displayed here.)
I. **Report Summary and Allocation Summary**

**FY1999 through 2004 Compact Investments**

<table>
<thead>
<tr>
<th>School</th>
<th>Funded Academic Priority</th>
<th>FY00</th>
<th>FY00</th>
<th>FY01</th>
<th>FY01</th>
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<td></td>
<td>Nurse Anesthesia program from VAMC</td>
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<td></td>
<td>Doctorally Prepared Faculty for other MN Nursing Schools</td>
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<td>Develop support systems for information technology commensurate with growing use of Internet and web-based courseware: Computer Services/ Web Development</td>
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<td>Student recruitment</td>
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<td>Faculty Recruitment - Efforts continue to replenish senior faculty ranks by continuing to review areas of need and trying to solve the spousal-hiring problem</td>
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<td>Assure the availability of clinical sites for instruction through effective rewards: Moorhead Outreach Grant Funds - Matching dollars for a federal grant proposal to support this nursing program</td>
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<td>Implement the class expansion in Rochester: Expand Nursing Education &amp; Rochester Outreach - To respond to needs for nursing education in greater MN; deliberations are underway about development of undergraduate nursing programs at the University of MN - Rochester</td>
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<td>Develop the clinical practice arrangements for faculty: Recruit Clinical Practice Director</td>
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<td>Participating in national forums and programs: National workshop: re-envision and develop a blueprint on the future of nursing</td>
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T = tobacco, C = compact, A = AHC other sources, P = permanent allocation on allocation worksheets
Graduate School / VP Research College Investments FY03-04

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<thead>
<tr>
<th>Investment</th>
<th>Amount</th>
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<td>DDF</td>
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<td>DOVE</td>
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<td>Grant-in-Aid</td>
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Reports:
   a. Interscholastic, interdisciplinary research efforts
   b. Plan for increasing the visibility of the SON.
   c. Plan for development of clinical practice.

An update of the School's on-going performance measures is attached.
V. FINANCING PLANS

<table>
<thead>
<tr>
<th>Activity</th>
<th>Funding Sources for FY2002-03</th>
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<tbody>
<tr>
<td>Faculty Recruitment</td>
<td>Reallocated and internal funds from vacant position to fill as many needed positions as possible</td>
</tr>
<tr>
<td>Add 8 additional students</td>
<td>Tuition revenue</td>
</tr>
<tr>
<td>Share HR position with AHC Human Resources</td>
<td>Internally reallocated funds</td>
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<tr>
<td>Interdisciplinary AHC practice/ education sites</td>
<td>Practice funds and internal reallocation</td>
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<td>Develop additional web-based courses and modules</td>
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<td>Continue development of research agenda</td>
<td>Internal reallocation</td>
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<td>Lead clinical research activities</td>
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<td>Develop plan - international programs</td>
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<td>Transfer nurse anesthetist program to UM</td>
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