The report attached was provided to the Faculty Senate on April 13, 2010, with corrections and additions provided on April 16, 2010.
PROPOSAL FOR A SCHOOL OF NURSING

Presented to
The George Washington University Faculty Senate

April 13, 2010

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# School of Nursing Proposal to University Faculty Senate

## Supplemental Information

Department of Nursing Education  
Tenure Review Schedule for Current Tenure Track Faculty

<table>
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To ensure an efficient and smooth transition and start-up of the school, it is proposed Jean Johnson, PhD, RN, FAAN and Ellen Dawson PhD, RN be respectively named Dean and Senior Associate Dean for Academic Affairs, and also be recognized as the founding deans. They will serve a maximum of three years in these positions with decanal searches being complete by the end of the three (3) years. Additional decanal and staff positions and functions are described in the proposal.

The nursing faculty has developed APT criteria for tenure and promotion of regular active status tenure track and non tenure track faculty. Information about APT criteria is presented in the Bylaws (Appendix 10). This document is consistent and complies with the Faculty Code. A plan to meet the required 75% tenure track/tenure requirement of the faculty senate by 2014 is described on page 20.

The administrative and organizational structure of the school is presented on pages 21-23, and the organization chart is included as Appendix 12. The organizational chart for the current department of nursing education is presented in Appendix 11 for comparison. The faculty developed proposed Bylaws which are presented in Appendix 10 and are compliant with the Faculty Code.

The school will be primarily at the Virginia Science and Technology Campus with a continued presence in Foggy Bottom. There will be no new on campus students planned for Foggy Bottom, but there are nursing students integrated with medical and physician assistant students on the Foggy Bottom campus as well as inter-professional research projects. Therefore, select faculty will remain on the Foggy Bottom campus.

The financial plan includes a five year (FY2010-15) income and expense projection including FY 2010 forecasted revenue and expenses, and the preliminary budget for FY 2011. Expenses are budgeted only against tuition revenue. The projection shows an increasing contribution margin for all years. FY 2011 includes development costs for forming a school of nursing as well as new program development costs for the quality care program. FY 2012 projection shows a 12% increase to the contribution margin from FY11. Revenue increases in proportion to expenses as new programs launch. It is expected the School will be and remain self sustaining. Tuition rates for nursing are included in Appendix 19 as approved by the Board of Trustees. Fundraising efforts will be focused on scholarships and endowed chairs.

Analysis shows minimal financial effect of separating nursing from health sciences. In FY 2010 nursing is 18.0% of the Health Sciences revenue and 22% of the expense. In FY 2011 nursing is 27.2% of revenue and 25.8% of expense. All research grants are assigned to a department based on the PI. Any grant that has a nursing faculty will go to the school, while those with a health sciences PI will stay in health sciences. Nursing also has its own cost centers as do other health sciences programs, so they are easily separated. Separation of shared services will take place during FY 2011 with minimal disruption as described in the proposal.
year clinical rotation, and research projects in order to minimize the financial affect of the higher cost space.

Appendix 16 provides details about the space needs to support the information in the table above. Currently the School of Nursing is not requesting a building of its own. The space requirements for the school are modest. However, as the school grows there may be a need for a building. That building is envisioned to be on the VSTC.

In addition to space, equipment is needed for teaching skills and testing students. The major equipment need for undergraduate students is equipment for the skills laboratory at the VSTC. This equipment includes beds, otoscopes, ophthalmoscopes, stethoscopes, IV lines, catheters, etc. Critical pieces of equipment include computerized, hi-tech “manikins” that provide students the opportunity to practice and demonstrate their clinical skills and clinical decision making abilities. All of the equipment noted, including the manikins, has already been obtained. All service agreements and periodic updates of equipment have been included in the operations budgets. Other equipment purchased with maintenance agreements includes audio visual equipment, cameras with the capacity to visually record student activities, and white boards.

Equipment necessary for the graduate students includes the patient simulation laboratory on the Foggy Bottom campus. The patient simulation laboratory is shared with medical students, physician assistant, and other health sciences students. The nurse practitioner students in particular are required to participate in simulated clinical experiences to both demonstrate and test clinical decision making abilities.

Fiscal Plan

Separation of the nursing budget from Health Sciences Programs is not problematic. Nursing currently has its own cost centers, and those cost centers will be the basis of the School of Nursing budget. Each of the Health Sciences programs also has their own cost centers so separation of budgets at the program level is straightforward.

There are shared services that currently are financially managed by the senior associate dean for Health Sciences. These include student services, admissions, technology support and financial management. A staff member in student services, admissions, and technology support is already assigned to the nursing programs. Those individuals will be included in the 2012 nursing budget rather than the health sciences budget. The School of Nursing will need an entity financial director. The current fiscal manager position for health sciences will remain with those programs.
The School of Nursing already contributes to the overhead of the Medical Center and University for support services. The School of Nursing will continue to receive support services from the Medical Center for faculty affairs, finance, Himmelfarb Library, development, and facilities.

An overview of the income and expense budget for the School of Nursing is shown below in Table 7.

### Table 7: Five Year Summary Budget Forecast

<table>
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A detailed five-year forecast with revenue projections is provided in Appendix 17. The revenue projections are built on a detailed mapping of revenue over the next five years and an estimated number of credits by type of program. See Appendix 18 for the credit mapping calculations underlying the revenue projections. As a reference, tuition rates for FY 2011 are included in Appendix 19. To remain conservative projections assume a 3% tuition increase each year after FY 2012.

The revenue increase from FY 2011 and FY 2012 reflects the increase from 50 to 75 Second Degree BSN students at VSTC, which accounts for approximately $1.2 million of the increase. A tuition increase of 8% for the distance education graduate students accounts for approximately $750,000. Also contributing to the increasing revenue are the launch of the new programs as well as expansion of the existing adult and family nurse practitioner and health care quality programs. The new programs include health information technology master program, executive leadership masters program and RN to BSN.

The revenue increase between FY 2012 and FY 2013 reflects the initiation of an entry level BSN program as well as an anticipated tuition increase of 3% for all programs. Also, the revenue projections include monies related to the contract with George Mason University that has been in existence since 1988—it is anticipated this income will be stable through FY2013.

The increase between FY 2013 and FY 2014 reflects the increased enrollment in both undergraduate and graduate programs. Increases are anticipated in the expansion of the RN to BSN and entry level BSN. For graduate programs, increased student enrollment is expected in the masters in health information technology and executive nurse leadership program.

The expenses reflect primarily the addition of new faculty and space. The estimates for faculty time are based on a full-time faculty teaching load being
18 credits for a 12-month contract. Another forecasting assumption is the average class size will be 20 students, while knowing some of the classes will actually have 50 students yet clinical courses require a maximum of eight students to one faculty member (per Virginia Board of Nursing regulations). It is anticipated that 4 new faculty will be added during FY 2011, 8 during FY 2012, 3 in FY 2013 and 3 in FY 2014—for a total number of faculty in 2015 of 36. In addition to the faculty additions, the increase expenditures reflect the costs of the administrative structure that will be included in the FY 2012 budget. This includes the salary of the Dean, Senior Associate Dean, .25 FTE assistant/associate dean for research, .25 FTE administrative director/dean, and the other .75 of both the research dean and administrative director/dean will be covered by either research grants or teaching. The time of the research dean and the administrative director/dean will increase to .5 FTE by 2013 anticipating more research and the increase in program activity. Also, space costs, while usually included in overhead expenses, are included in the operational budget.

FY 2011 will be a transition year with budgetary planning beginning in November 2010. The FY2012 budget will include the full array of School of Nursing expenses, including decanal positions and administrative support positions. During FY2011 year, the administrative support expenses for student services, admissions, instructional technology and financial support will remain integrated with the Health Sciences budget. The “contribution” that nursing generates already pays for its portion of these services. As noted, the FY2012 budget will then have the full costs of the School of Nursing. Appendix 20 provides a detailed budget for FY2011 showing all expense lines.

The source of funding for the School of Nursing operations budget is tuition dollars. Funds are not being diverted from other University programs or initiatives. Research funds are not included in the operations budgets as they are managed differently. There also was no endowment income budgeted against expenses even though we are anticipating raising funds as shown in the “Development” section below. This approach provides a conservative method of estimating revenue.

The costs of the initial start-up for FY 2011 are modest. The costs are modest not due to efforts to short change the development of a new school; costs during the year will include special events, publicity, travel to potential donors, consultants, web redesign, and printing and graphics for new cards and stationary. The operations budget also supports travel, attending meetings to promote the school and provide a venue for faculty recruitment, as well marketing and other special activities relevant to transitioning from a department to a school.

Analysis shows minimal financial effect of separating nursing from health sciences. In FY 2010 nursing is 18.0% of the Health Sciences revenue and 22% of the expense. In FY 2011 nursing is 27.2% of revenue and 25.8% of expense. See Appendix 21 for the financial details related to the separation effect.
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Executive Summary

This proposal for a School of Nursing at The George Washington University (GW) provides a comprehensive strategic and financial plan that considers the advantages, disadvantages, benefits and risks of changing the status of the current department of nursing education to a School of Nursing. The proposal addresses the information requested by the Faculty Senate of the University, and addresses the specific matters outlined by the Faculty Senate Special Committee on the Proposed School of Nursing in the “Need for a Strategic Plan for the Formation of a School of Nursing.”

The vision and mission for the proposed School of Nursing are presented on page 8, and are consistent with the University and Medical Center vision, mission, and goals. To assist nursing in attaining its mission and vision, an Advisory Board of national nursing leaders was convened in 2007 and has met regularly since. The nursing Advisory Board strongly supports the formation of a School of Nursing and sees it as essential to creating an endowment for nursing programs, expanding the national recognition of nursing at GW, and attracting highly renowned faculty particularly those with research portfolios.

Market data supports the sustainability of a School of Nursing and comes from both national and regional workforce projections as well as from GW’s experience with applicants to the existing nursing programs. Compelling data from the Department of Labor indicate nursing will add the most jobs of any occupation in the coming decade. While the economy has reduced the nursing workforce shortage, the most recent national data note a significant shortage beginning in 2018 increasing to 260,000 in 2025. Recent Virginia data mirror the national picture with a shortage of 10,000 nurses in 2017 increasing to 30,000 by 2028. Applications to all GW nursing programs have been brisk, particularly for the BSN which increased from 79 in 2009 to 437 in 2010. These data suggest a strong market for nursing education programs. Analysis of competing schools in the area was performed to establish pricing of the programs and development of competitive niches for GW.

The marketing plan will build on the existing marketing for the nursing programs, including but not limited to using the Web to advertise, ensuring a friendly and efficient service to applicants, conducting information sessions, and advertising in print media and at national meetings. Recruitment of faculty is also part of the marketing plan and will include identifying potential faculty recruits, making personal contact, and networking at national and other professional meetings. In addition, notices of positions will be sent to the American Academy of Nursing Fellows, American Association of Colleges of Nursing, the Chronicle of Higher Education, and other organizations and publications as pertinent. Tenure track positions will assist in the recruitment of faculty.
To ensure an efficient and smooth transition and start-up of the school, it is proposed Jean Johnson, PhD, RN, FAAN and Ellen Dawson PhD, RN be respectively named Dean and Senior Associate Dean for Academic Affairs, and also be recognized as the founding deans. They will serve a maximum of three years in these positions with decanal searches being complete by the end of the three (3) years. Additional decanal and staff positions and functions are described in the proposal.

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The school will be primarily at the Virginia Science and Technology Campus with a continued presence in Foggy Bottom. There will be no new on campus students planned for Foggy Bottom, but there are nursing students integrated with medical and physician assistant students on the Foggy Bottom campus as well as inter-professional research projects. Therefore, select faculty will remain on the Foggy Bottom campus.

The financial plan includes a five (5) year income and expense statement including the FY 2010 actual revenue and expense as well as a detailed budget for FY 2011. Expenses are budgeted only against tuition revenue. The budgets show costs are covered and there is a contribution for all years. FY 2011 has a reduced contribution due to the additional costs of the school and the cost of new program development. The school is self sustaining and will remain self sustaining. Tuition rates for nursing are included in Appendix 19 as approved by the Board of Trustees. Fundraising efforts will be focused on scholarships and endowed chairs.

Analysis of the financial effect of separating nursing from health sciences shows there is minimal. In FY 2010 nursing is 18.0% of the Health Sciences revenue and 22% of the expense. In FY 2011 nursing is 27.2% of revenue and 25.8% of expense. There is no significant effect of the separation. All research grants are assigned to a department based on the PI. Any grant that has a nursing faculty will go to the school, while those with a health sciences PI will stay in health sciences. Nursing also has its own cost centers as do other health sciences programs, so they are easily separated. Separation of shared services will take place during FY 2011 with minimal disruption as described in the proposal.
GW has rapidly growing nursing educational programs and research activities. Fundamental components for a school are already in place. The proposed School of Nursing presents new opportunities and benefits to the University, Medical Center, and Virginia Science and Technology (VSTC)—such as the addition of $7 million in additional revenue without adding Foggy Bottom campus students as well as establishing an anchor school at VSTC. More information about the opportunities and benefits are presented in the SWOT analysis, which was requested by the Chairman of the Board of Trustees, on page 30 and in Appendix 24, and also address the risks and strengths as requested by the University Faculty Senate.

Following a thoughtful process, the School Formation Committee, the Medical Center Faculty Senate Executive Committee, the Medical Center Faculty Senate, and Medical Center leadership unanimously support the establishment of a School of Nursing.

Thus, this proposal is to transition nursing from a department to school level. The proposed timeline is to establish the School of Nursing effective July 1, 2010, with a public launch of the School in July 2011.
Proposal for a School of Nursing

Proposition

This proposal is to transition nursing from a department to school level. The proposed timeline is to establish the School of Nursing effective July 1, 2010, with a public launch of the School in July 2011.

Rationale

The George Washington University has rapidly growing nursing educational programs and research activities. These are currently housed in a department that is part of the Health Sciences Programs in the School of Medicine and Health Sciences. Fundamental components for a school of nursing are all already in place:

- Undergraduate, graduate, and doctoral programs are offered.
- Enrollment is on a growth trajectory.
- There is a national and regional market demand for nurses.
- The Commonwealth of Virginia, particularly Loudoun County, support increasing the pipeline for nurses.
- Tuition revenue exists to support a school.
- The faculty is innovative and industrious.
- Policies and procedures for student services are in place.
- Space is available at the Virginia Science and Technology Campus (VSTC) to house current program activities and future development.

The proposed School of Nursing presents new opportunities and benefits to The George Washington University, such as:

- $7 million in additional revenue without adding Foggy Bottom campus students
- Creates new donor opportunities
- Attracts funded researchers to expand the University NIH portfolio
- Enhances the Virginia Science and Technology Campus (VSTC)

While the investment in any program diverts funds from other programs, the nursing program has a well established revenue stream that will not require funds outside of the Medical Center. Nursing is and will continue to be self-sustaining. Minimal investment capital is required to become a school, as shown in the fiscal plan section of this proposal. Revenue generated by the School of Nursing will be reinvested in the school. Also, expansion of the school will occur at the VSTC, not the Foggy Bottom campus. Following a thoughtful process, the School Formation Committee, convened by Provost and Vice President for Health Affairs John Williams, unanimously recommended the nursing programs should be reorganized as a School of Nursing. The membership of the School Formation Committee is presented in Appendix 1, and the recommendations of the School Formation Committee are presented in Appendix 2.
In addition, the Medical Center Faculty Senate Executive Committee and the Medical Center Faculty Senate voted unanimously to support the creation of a School of Nursing as a complement to the other schools in the Medical Center, recognizing that nursing is the profession with the largest healthcare workforce and an essential partner in educating health professionals. The Medical Center Faculty Senate Executive Committee and the Medical Center Faculty Senate unanimously endorsed recommendations of the School Formation Committee. The Resolution of the Medical Center Faculty Senate is presented in Appendix 3 and the minutes of that Medical Center Faculty Senate Meeting are provided in Appendix 4.

Thus, it is proposed the organizational unit for the nursing programs at GW transition from a department to school level.

**History of Nursing at GW**

Nursing education has a long but little known history at GW. In 1903, a school of nursing was established and existed until 1931, when it and five other schools were discontinued due to financial strains caused by the Depression.

In 1973, a family nurse practitioner program was founded as part of an effort to staff an emerging health maintenance organization at GW. The program initially offered a certificate and evolved to offering a Bachelor of Science degree. When the professional standard moved to a requirement that all nurse practitioner education be at the graduate level, GW partnered with George Mason University (GMU) in 1988 to offer a collaborative nurse practitioner Master’s program. The Master’s degree is based at GMU and students complete twelve credits of course work at GW and share courses with medical and physician assistant students on the Foggy Bottom campus. This GW-GMU partnership continues to exist.

In May 2004, the Board of Trustees approved a Master of Science in Nursing (MSN) and the first class of GW nursing students matriculated in fall of 2004. In 2005, as part of a reorganization of the Health Sciences Programs, the department of nursing education was established. In 2006, the first MSN students graduated. In 2007, the Doctor of Nursing Practice (DNP) was approved by the Board of Trustee and the Second Degree Bachelor of Science in Nursing (BSN) program was approved.

**Vision and Mission**

The vision and mission for the proposed School of Nursing are based on the University vision and mission statements as well as those of the Medical Center and were developed by the nursing faculty. The mission and vision for the proposed School of Nursing are as follows:
Vision

The George Washington University School of Nursing will become a leader in nursing education and research. Through its educational programs, graduates will advance the nursing profession. This vision stems from society’s need for well-educated nursing professionals who are prepared to deliver high quality health care services and to lead future generations in the improvement of health for all through management, research, policy and practice. The School of Nursing values leadership, research, quality, knowledge, collaboration, innovation, and compassion.

Mission

The mission of The George Washington University School of Nursing is to develop nursing leaders who will actively engage in promoting health and well-being at local, national, and global levels. The School encourages nursing students and faculty to achieve a high level of excellence through rigorous scholarship, translational and evidence based research, and by promoting quality in all their endeavors. Pursuit of knowledge is a key thread that crosses the entire curriculum and will enable students to critically evaluate and integrate theory, research, and current practice trends and will encourage life-long learning. Learning is enhanced through collaborative interaction with other health care disciplines, broadening students’ appreciation for diverse points of view. In continuing the GW tradition of embracing innovation, students will examine future oriented concepts and incorporate information technology. The program will cultivate ethical and empathetic professionals who are compassionate, respectful of diversity, and view individuals from a holistic perspective.

The overall goal of the proposed school is to be a leader in education and research and within eight (8) years to be recognized in the top 25 schools of nursing as rated by U.S. News and World Report. When GW admitted its first Master of Science (MSN) degree students in 2004, the GW nursing program was ranked 63rd in the country out of nearly 600 programs at the baccalaureate level and above.

Academic Programs

Currently there is a complement of undergraduate, graduate, and doctoral nursing degree programs offered at GW and the nursing program is well-positioned for growth. However, it is unusual for nursing to be housed in a school of medicine and this hinders the growth of the nursing programs. A school of nursing is perceived by discerning applicants, students, and faculty as a sign of commitment to nursing education and therefore a desirable institution at which to pursue professional goals.
Creating a School of Nursing will bring greater regional and national visibility to our nursing education programs and will better position GW to address the limited regional and national supply of faculty, schools, and resources to educate nurses. Supporting graduate education is a priority for the nursing profession as it seeks to grow the supply of nursing faculty, researchers, health system leaders, and primary care and specialty nurses. A school would help achieve this goal for the nursing profession as well as for the communities it serves.

The GW nursing program values and is committed to interprofessional educational activities across the University and to external collaborations as well. As a school, Nursing would continue to seek new opportunities for interprofessional education. Examples of these opportunities are discussed in the program-specific descriptions below. Other schools of nursing and other potential collaborators, both nationally and internationally, are more likely to partner with a school of nursing than a department of nursing.

Following is information about the current complement of educational programs in nursing offered at GW, as well as information about accreditation, enrollment, market demand, regional competition and the competitive advantage of the GW nursing programs.

A. Educational Programs

The department of nursing education offers a full complement of undergraduate, graduate, and doctoral degree programs. Specifically, the programs offered are:

- Second Degree (accelerated) Bachelor of Science in Nursing (BSN)
- Master of Science in Nursing (MSN)
  - Fields of study: Adult Nurse Practitioner, Clinical Research Administration for Nurses, Family Nurse Practitioner, Nursing Leadership and Management
- Doctor of Nursing Practice (DNP)
- Post-Master’s Certificates: Adult, Family, and Palliative Care Nurse Practitioners

Undergraduate Programs

The Second Degree Bachelor of Science (BSN) program is a 15-month; full-time program designed for students who already have a bachelor's degree in a field other than nursing and who wish to pursue professional nursing as a career. This on-campus program is based at the Virginia Science and Technology Campus (VSTC). Graduates of the program use knowledge from the natural and behavioral sciences, as well as humanities and nursing theory, to analyze and synthesize responses to health problems and to provide appropriate nursing interventions. Graduates emerge from the program with the knowledge, skills, and practical experience needed to demonstrate
nursing practice that is based on ethical, legal, and professional values and standards of practice. The BSN curriculum prepares students to be generalist nurses who are providers of direct and indirect patient care, coordinators and managers of care, and members of the profession who serve the community.

Recognizing that students have completed an undergraduate degree and therefore have the preparation necessary for graduate coursework, the BSN program of study incorporates four graduate nursing courses for students who continue into the GW graduate program. These students may apply all of the 12 credits to the MSN or DNP program. More information about the BSN program of study is presented in Appendix 5.

The Second Degree BSN program has clinical contracts with Inova Fairfax Hospital System, which includes Loudoun Long-Term Care, Loudoun Hospital Center, Fair Oaks Hospital, Fairfax Hospital, Alexandria Hospital, and Mount Vernon Hospital. BSN students also have clinical rotations at the Virginia Hospital Center in Arlington. It is planned that fourth semester students will begin rotations at GW Hospital in fall 2010.

Future plans for the expansion of undergraduate education include adopting the findings of the recent major study by the Carnegie Foundation for the Advancement of Education which calls for curricular transformation in nursing education. Traditional BSN programs begin with two years of general study, followed by two years of nursing study and clinical experiences. A new BSN program envisioned here at GW will offer nursing study and clinical experiences in the first year. This will be a collaborative endeavor with the Columbian College of Arts and Sciences, and all courses will be offered at the VSTC. This is an example of how the GW nursing program is ahead of others in curricular innovation.

Also in development is a BSN completion program for Associate Degree Nurses, also known as an RN to BSN program. This is an excellent collaborative opportunity with regional community colleges. All of the courses for this program will be offered at the VSTC.

Graduate Programs

The Master of Science in Nursing (MSN) Program prepares nurses for advanced nursing practice in the areas of clinical research administration, nursing leadership or as nurse practitioners in either adult or family practice. The MSN Programs are distance learning programs with on-campus experiences. The MSN curriculum is built on a set of professional core courses (12 credits) and research courses (6 credits) taken by all MSN students. The curricula for the MSN fields of study are presented in Appendix 6.
The Clinical Research Administration for Nurses (CRA) field of study prepares graduates to participate in the science and business of clinical research. It is an interprofessional program, taught collaboratively with the department of clinical research and in the School of Medicine and Health Sciences, and it is expected this collaboration will continue. Clinical research and administration is a vast and expanding field that involves the processes in which product and treatment protocols are developed for patient care. This is a growing field for nurses who manage the various aspects of clinical trials, including the health and administrative aspects.

The Nursing Leadership and Management (NLM) field of study prepares nurses for leadership positions in all sectors of the healthcare delivery system. The curriculum is designed to develop and enhance knowledge and skills in management and leadership for practicing professionals and prepares graduates for mid-to-upper level management positions. The Nursing Leadership and Management program is taught collaboratively with the department of clinical research and administration in the School of Medicine and Health Sciences, and it is expected this collaboration will continue. The students in this program are drawn from across the country. A redesign of this program into an executive nursing leadership program is planned. The program will be an executive education format combining distance and on-site learning. The redesigned program will be housed at the VSTC.

There are two Nurse Practitioner (NP) fields of study: adult and family nurse practitioner. The NP fields of study provide the theoretical and practical foundation for nurses to expand their scope of practice to encompass advanced primary care practice. The program includes didactic and clinical experiences that focus on the primary care needs of patients, families and communities. The distance learning program allows students to complete coursework and clinical practicum at sites across the country. The NP programs have students in more than 37 states and each student receives a faculty site visit at their primary site. NP students come to GW’s Foggy Bottom campus three times for on campus experiences.

A recently-developed Health Care Quality MSN Program is now in the process of admitting its first cohort of students. This will be a distance learning program with an on-campus summer experience. The program is designed to meet the emerging demand for nurses with expertise in quality and patient safety and who have the skills and competence to grow and sustain a culture of continuous improvement at all levels and with all sectors of the health care delivery system. Graduates will be prepared to lead the design, development, implementation, and evaluation of health care quality and patient safety initiatives; and will have the skills and knowledge needed to be successful in quality and patient safety leadership, management, and research positions within health care organizations or policy agencies.
This program is being developed in collaboration with the National Quality Care Association (NCQA) and with the department of clinical research and administration in the School of Medicine and Health Sciences. The first students are currently being admitted and are scheduled to begin classes in the summer semester.

**Doctoral Programs**

The Doctor of Nursing Practice (DNP) program at GW launched in 2007 and was the first DNP program in the region. The DNP program is designed for nurses seeking a terminal degree in nursing practice and offers an alternative to research-focused doctoral programs. This program emphasizes the integration and translation of evidence-based practice, health policy, quality improvement, and systems thinking into practice settings. The DNP at GW advances professional nursing roles in nurse practitioner practice and in nursing leadership and management. The DNP curriculum was developed to strengthen the leadership capacity, refine critical-thinking, and develop stronger decision-making and evaluative abilities that will enhance the knowledge and skills of the graduates. The clinical research project immerses students in a practice environment and lays the foundation for future scholarship. The courses were designed to increase the clinical competency of graduates by focusing course assignments and the clinical research project on clinical and practice based problems. The DNP is a distance learning program, bringing students to the Foggy Bottom campus for several on-campus experiences.

The DNP clinical research project is not a dissertation; rather, it is a final product to demonstrate student growth in knowledge and expertise. Examples of clinical research projects include a quality improvement project, program plan and evaluation, research synthesis leading to an evidence-based practice guideline, public policy briefing, policy issue tool kit, and use of technology to solve a practice problem. The student works with an advisory committee to develop and implement a practice-oriented research project. More information about the DNP curricula is presented in Appendix 7.

Future plans include the creation of a nursing PhD program. This program would be a research-focused program and would be developed in collaboration with the Columbian College of Arts and Sciences.

**Other Programs**

A range of Post-Master’s Certificate programs are offered and include the Adult Nurse Practitioner Certificate, Family Nurse Practitioner Certificate, and Palliative Care Nurse Practitioner Certificate. A certificate in Health Care Quality Improvement is also in process.
The GW nursing program also has a 22-year collaborative nurse practitioner program with George Mason University (GMU). GMU nurse practitioner students complete 12 credits of study at the GW Foggy Bottom campus and share courses with medical and physician assistant students. They begin in November and finish in April the following spring. GW nursing faculty and GMU faculty co-teach in several courses.

B. Accreditation

The accrediting body for nursing educational programs is the Commission on Collegiate Nursing Education (CCNE). The Master of Science Program received full five-year accreditation in 2006. The official CCNE document recognizing GW accreditation is in Appendix 8. In February 2010, CCNE conducted a site visit to accredit all of the nursing programs. The site visitors' exit report stated the GW nursing programs met all of the standards. The official CCNE accreditation report is expected in October 2010.

C. Enrollment

Enrollment in the GW nursing programs provides useful information about the strength of the programs and the market. Below is enrollment information about each of the degree offerings, followed by a table showing specific enrollment data.

Applicants to the second degree BSN program offered at VSTC and launched in 2009 are drawn primarily from Northern Virginia. This program began with 20 students drawn from an applicant pool of 75. For fall 2010, the admissions target is 50 students and currently there is an applicant pool of more than 400 potential students.

The four Master of Science in Nursing (MSN) programs are all distance education programs and as such, draw from a national pool. The first MSN program launched in 2004; since then, the admissions data shows a strong and steady increase in applicants with the exception of 2008. The enrollments have increased correspondingly since the beginning of the graduate programs. For example, the number of enrolled MSN students has increased dramatically from 4 students in 2005 to 158 students in 2009. In 2010, the number of applicants to the FNP program alone is larger than it has ever been, with 119 applicants, bringing the total MSN applicants to date for 2010 to 196.

The DNP program, a distance learning program launched in 2007, draws applicants from across the country. Currently, 86 students are enrolled in the DNP program. The three years of data show growth in the number of applicants from 39 to 100 for 25 positions.

Tables 1 and 2 below present specific admissions and enrollment data for 2007-2010 for all the degree programs offered. Enrollment for 2005 and
2006 was only in the MSN programs, and was 41 and 87 students respectively.

Table 1: Number of Applicants and New Students 2007 to 2010

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>DNP</td>
<td>39</td>
<td>24</td>
<td>100</td>
<td>30</td>
<td>100</td>
<td>29</td>
<td>89</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>MSN</td>
<td>137</td>
<td>84</td>
<td>104</td>
<td>54</td>
<td>167</td>
<td>75</td>
<td>196</td>
<td>105</td>
<td></td>
</tr>
<tr>
<td>BSN</td>
<td>na</td>
<td>na</td>
<td>na</td>
<td>na</td>
<td>70</td>
<td>20</td>
<td>437</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Certificate</td>
<td>19</td>
<td>17</td>
<td>16</td>
<td>14</td>
<td>13</td>
<td>13</td>
<td>14</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>195</td>
<td>125</td>
<td>220</td>
<td>98</td>
<td>350</td>
<td>137</td>
<td>736</td>
<td>195</td>
<td></td>
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</tbody>
</table>

Table 2: Number of Students Enrolled by Degree with Future Projections (Based on Fall Registration)

<table>
<thead>
<tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2010</td>
<td>2011</td>
<td>2012</td>
</tr>
<tr>
<td>DNP</td>
<td>24</td>
<td>48</td>
<td>66</td>
<td>78</td>
<td>78</td>
<td>78</td>
</tr>
<tr>
<td>MSN</td>
<td>114</td>
<td>131</td>
<td>145</td>
<td>154</td>
<td>225</td>
<td>299</td>
</tr>
<tr>
<td>BSN</td>
<td>na</td>
<td>na</td>
<td>20</td>
<td>70/50</td>
<td>125/75</td>
<td>160/85</td>
</tr>
<tr>
<td>Certificate</td>
<td>17</td>
<td>14</td>
<td>13</td>
<td>16</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>GW/GMU Program</td>
<td>38</td>
<td>37</td>
<td>67</td>
<td>37</td>
<td>37</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>193</td>
<td>230</td>
<td>324</td>
<td>369</td>
<td>438</td>
<td>478</td>
</tr>
</tbody>
</table>

* BSN numbers include the fall and spring enrollments recognizing the overlap of two classes in the fall and one class during spring and summer.

D. Market Demand

There is ample evidence showing a strong market for students. This evidence is both in the direct experience and track record that the nursing programs have had over the past 6 years as well as projections based on national and regional data.

According to the U.S. Bureau of Labor Statistics, nursing is slated to add the most jobs of any occupation in the coming decade.\(^1\) National data in the early 2000’s indicated a severe nursing shortage for the nation. With the

economic downturn this shortage has been attenuated until the economy recovers. Nurses eligible to retire have chosen to stay in the work force due to the economy, thus there is a less severe shortage projected for the near term. A recent report in Health Affairs, based on Current Population Survey Data (CPS) and other data spanning 1973 to 2008, takes into account the complexity of the supply and demand issues related to the nursing workforce. However, there continues to be an estimated shortage of nurses in 2018, increasing to 260,000 by 2025.\(^2\) The nursing supply data is as recent as 2008.

Nursing workforce trends in Virginia mirror those occurring nationally. The Healthcare Workforce Data Center housed in the Department of Health Professions in Virginia is charged with providing data on the healthcare workforce through a periodic assessment of supply and demand. In a report released in January 2010, using data from a variety of sources including the 2007-2008 Virginia Nursing Workforce Survey, data indicate a need of approximately 10,000 more RN FTEs in 2017 compared to 2008 and an additional 30,000 RNs needed by 2028. The report notes that while the current supply and demand is in equilibrium, it is projected this will be short lived due to the large number of nurses expected to retire when the economy improves and due to the aging of the population accompanied by chronic illness.\(^3\)

The usual law of supply and demand has not been operative in increasing the number of nurses because of constraints in educational programs. According to a March 2010 report by the American Association of Colleges of Nursing, nearly 55,000 qualified applicants were turned away from nursing programs in 2009. Specifically:

- More than 45,000 applicants were turned away from baccalaureate programs
- Nearly 8,500 applicants were turned away from masters programs
- More than 1,000 applicants were turned away from doctoral programs.

This is similar to the data trends in 2005, 2006, 2007, and 2008. The major reasons that schools of nursing cannot increase the supply of graduates include lack of clinical placements, a shortage faculty, and limited classroom space.\(^4\)

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Given the national and regional projections as well as the actual admissions experience, there will be a need for nursing education for decades to come. Even with swings in supply and demand, the University commitment to excellence gives the nursing programs a competitive edge.

E. Competition and GW Competitive Advantage

Regional competition for the GW nursing programs consists primarily of private institutions, including Marymount University, Shenandoah University, Catholic University, Georgetown University (which does not have a doctoral program), and Howard University (which offers only a Family Nurse Practitioner Master’s program and does not have a doctoral program).

George Mason University (GMU) is the only public university competitor for nursing programs in the region. At GMU, programmatic and class size reductions are in consideration due to continuing decreases in state funding. The 22-year collaborative nurse practitioner program between GW and GMU is slated to continue.

The GW nursing programs have many competitive advantages. Foremost is the “GW” brand of excellence in education. Rapid response to nursing workforce needs is also a key competitive advantage. GW launched the first Doctor of Nursing Practice (DNP) program in the region and established the Second Degree Bachelor of Science (BSN) program in direct response to workforce and markets needs.

GW is also ahead of the other schools in the region in terms of curricular innovation. For example, GW incorporated patient simulations as part of clinical learning and testing. Also, planning is in process for an innovative BSN program based on a recent major study by the Carnegie Foundation for the Advancement of Education. The study calls for curricular transformation. Traditional BSN programs are two years of general study followed by two years of nursing study and clinical experiences. The new GW program will offer nursing study and clinical experiences in the first year. This program will be collaborative with the Columbian College of Arts and Sciences, and all courses will be offered at the VSTC.

Other competitive advantages of the GW nursing programs are the creative program development in quality improvement and leadership; the full complement of undergraduate, graduate, and doctoral programs; the nursing programs’ growing reputation for quality improvement in education, research, and policy; strong regional and national partnerships; and an interprofessional approach to program development.

Marketing Plan

The School of Nursing will continue to use the marketing practices that have proved beneficial in the past, as well as incorporate new activities, to attract quality students. Examples of marketing activities includes:
• Maintaining an engaging and informative Web site.
• Placing advertisements in key nursing journals (e.g. Advance).
• Working with community colleges, particularly to launch the RN-to-BSN program.
• Continuing faculty provision of educational programs and other services to local hospitals and health facilities to increase visibility.
• Continuing to subscribe to online marketing with sites that promote nursing schools.
• Expanding faculty leadership and visibility in professional organizations
• Continuing to monitor workforce reports and adjust marketing strategies based on the reports.
• Attending key national meetings to increase visibility and distribute information to attendees.
• Ensuring admissions process is streamlined and student friendly.
• Engaging a marketing consultant, if needed.
• Working with University and Medical Center communications and marketing offices on program and research messaging and availability for media commenting
• Continuing to monitor competitor universities for program offerings, tuition, and other pertinent information
• Holding online information sessions as well as campus visit sessions

Marketing for new faculty will require several strategies depending upon the desired skill set of the faculty members that GW needs. These strategies include reviewing current literature to identify individuals working in areas in which the School of Nursing needs expertise and talking with potential recruits personally. Ads will be placed in the Chronicle of Higher Education and other publications likely be read by the faculty experts the schools seeks to recruit, and school leaders will attend national meetings to recruit potential faculty. Notices of tenure-track positions will be disseminated through the American Association of Colleges of Nursing and the American Academy of Nursing to alert Fellows of the Academy to faculty positions. In addition, school leaders will network with colleagues to identify individuals who may meet the School of Nursing’s faculty needs.
Research

GW nursing leadership and faculty members are committed to research excellence. The department of nursing education has a sound research track record with nearly $5 million in sponsored funding since the department was established in 2005. As illustrated in the table below, the GW nursing program has both federal and foundation grant funding, although no NIH funding has been obtained.

Table 3: Grants Awarded to GW Department of Nursing Education

<table>
<thead>
<tr>
<th>Funding</th>
<th>Sponsor</th>
<th>Project Title</th>
<th>PI</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000,000</td>
<td>U.S. Department of Homeland Security</td>
<td>National Nurse Emergency Preparedness Initiative</td>
<td>J. Johnson, PhD, RN, FAAN E. Dawson, PhD, RN</td>
</tr>
<tr>
<td>$900,000</td>
<td>Robert Wood Johnson Foundation</td>
<td>Nursing Alliance for Quality Care (NAQC)</td>
<td>J. Johnson, PhD, RN, FAAN E. Dawson, PhD, RN</td>
</tr>
<tr>
<td>$504,000</td>
<td>U.S. Department of Health &amp; Human Services: Health Resources and Services Administration (HRSA)</td>
<td>Geriatric Education Utilizing Palliative Care</td>
<td>B. Lunsford, PhD, RN</td>
</tr>
<tr>
<td>$386,000</td>
<td>U.S. Department of Health &amp; Human Services: Health Resources and Services Administration (HRSA)</td>
<td>Advanced Nursing Education Grant</td>
<td>C. Pintz, PhD, RNC, FNP</td>
</tr>
<tr>
<td>$359,000</td>
<td>Robert Wood Johnson Foundation</td>
<td>Establishing a Nursing Quality and Safety Alliance</td>
<td>E. Kurtzman, MPH, RN</td>
</tr>
<tr>
<td>$331,000</td>
<td>Robert Wood Johnson Foundation</td>
<td>Nursing Engagement in Performance Measurement and Public Reporting</td>
<td>E. Kurtzman, MPH, RN</td>
</tr>
<tr>
<td>$350,000</td>
<td>Robert Wood Johnson Foundation</td>
<td>Consumer Perspective of Nursing Sensitive Quality Measures</td>
<td>J. Johnson PhD, RN, FAAN E. Dawson PhD, RN</td>
</tr>
</tbody>
</table>

Also, the nursing program has a research collaboration with the Department of Health Services Management and Leadership in the School of Public Health and Health Services (SPHHS). SPHHS was recently awarded a $4.6 million HHS grant for a health information technology curriculum development project, and nursing is collaborating with the SPHHS on this endeavor.

In comparison to the other six nursing programs in the region, in just four years the GW nursing program has achieved comparable research activity
and funding with the much-longer established programs at George Mason University and Howard University. The Georgetown University School of Nursing and Allied Health Services is the regional research leader with 21 funded projects (including 6 NIH grants), reflecting a research portfolio built over decades of work. The other three nursing programs in the region—Catholic University, Marymount University, and Shenandoah University—have little or no funded nursing research activity. It is important to note that the GW nursing program is the only regional recipient of nursing research funds from the Robert Wood Johnson Foundation, the nation’s largest philanthropic organization devoted exclusively to health and health care.

A key challenge for the GW nursing program is recruitment of funded researchers, especially NIH-funded researchers, to a department of nursing. Well-known and experienced researchers perceive a school of nursing as a sign of institutional commitment to nursing education and research and therefore a more desirable institution at which to pursue professional goals.

It is also challenging to attract research partners and sponsored funding to a department of nursing. Federal and foundation research sponsors perceive schools of nursing as having greater institutional commitment to research than departments of nursing. Others schools of nursing, both nationally and internationally, are more likely to partner with a school of nursing than a department, which could lead to new grant opportunities.

The future goals for research include increasing the number of grants submitted, increasing NIH funding, and maintaining foundation funding.

Table 4 provides a summary of the goals.

**Table 4: Number of Grants Planned for Submission 2010-2013 and Status of 2010 Grants Submitted to Date**

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants planned for submission</td>
<td>8/1 yet to have RFP</td>
<td>11</td>
<td>14</td>
<td>16</td>
</tr>
<tr>
<td>NIH grants submitted/ funded</td>
<td>1/0</td>
<td>3/</td>
<td>5/</td>
<td>6/</td>
</tr>
<tr>
<td>Government (non-NIH) grants submitted/ funded</td>
<td>4/2 and 1 pending</td>
<td>4/</td>
<td>4/</td>
<td>5/</td>
</tr>
<tr>
<td>Foundation grants submitted/funding</td>
<td>2/decisions pending</td>
<td>4/</td>
<td>5/</td>
<td>5/</td>
</tr>
</tbody>
</table>

**Faculty**

The innovative and nationally recognized nursing faculty at GW considers the formation of a school of nursing essential to the continued development of academic and research excellence and is committed to the work of establishing a school of nursing at GW. A description of the current nursing faculty members is presented in Appendix 9.
The most important resource for our educational programs is the faculty. Currently there are 17 full-time regular active status faculty of which 53% are tenure track or tenured. One position is open from a tenure track faculty member who resigned due to illness in the family. That position will be filled with a tenure track faculty member. In addition there are two full-time research faculty as well as paid part-time faculty and unpaid adjunct clinical faculty. The School of Nursing is committed to achieving the required 75/25 ratio of regular active status tenure-track/tenured faculty to regular active status non-tenure-track faculty. Currently, the department of nursing education exceeds the Faculty Code’s departmental requirement for tenure/tenure track faculty. However, the nursing program is very young compared to other schools in the University and as such, the school will need time to comply with the 75/25 ratio requirement. Continuing the expansion plan for the nursing programs will require recruitment of more faculty members. The table below outlines the time frame for complying with the required 75/25 ratio. While this will be a challenge, tenure-track opportunities are highly valued. Having tenure-track positions will also help recruit faculty who have a record of funded research. The information to support the number of new faculty is included in the “Fiscal Plan” section with detailed summary to support the number of new faculty in Appendix 16.

Table 5: Nursing Faculty Recruitment Forecast

<table>
<thead>
<tr>
<th></th>
<th>FY 2010</th>
<th>FY 2011</th>
<th>FY 2012</th>
<th>FY 2013</th>
<th>FY 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(4 new faculty)</td>
<td>(8 new faculty)</td>
<td>(3 new faculty)</td>
<td>(3 new faculty)</td>
<td></td>
</tr>
<tr>
<td>Regular Active Status TT/T</td>
<td>9 (53%)</td>
<td>11 (58%)</td>
<td>17 (68%)</td>
<td>20 (71%)</td>
<td>23 (76%)</td>
</tr>
<tr>
<td>Regular Active Status nonTT/T</td>
<td>8</td>
<td>8</td>
<td>8</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Clinical Education Professor</td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Total full time faculty</td>
<td>17</td>
<td>21</td>
<td>29</td>
<td>32</td>
<td>35</td>
</tr>
</tbody>
</table>

Nursing is a clinical profession. Full time faculty who are primarily interested in teaching students at their clinical sites will use the “special service” category of faculty as noted in the Faculty Code and will carry the title “clinical education professor.” This category of faculty is not included in calculating the ratio. The special service category will enable the School of Nursing to fulfill programmatic needs in the clinical areas while complying with Faculty Code requirements.

Most of the regular active status faculty are in tenure-track positions, but have not yet been reviewed for tenure. There will be a period of time before current tenure-track faculty members are reviewed for tenure. Presuming these faculty members meet the criteria for tenure, it will be 2015 before they all are reviewed. This makes it critical to recruit faculty who meet the tenure requirements, and particularly at the professor level. It is difficult to recruit faculty members at the full professor level to a department of nursing. It will be the highest priority of the School of Nursing to recruit faculty.
members who meet tenure criteria and can join GW as tenured faculty members.

**Governance**

The proposed School of Nursing will become the third school in the Medical Center, joining the School of Medicine and Health Sciences (SMHS) and the School of Public Health and Health Services (SPHHS). As such, it will be governed by both the University *Faculty Code* and the Medical Center Organizational Plan. The reporting structure will be the reporting structure that currently exists for schools within the Medical Center. The Dean will report to the Provost as well as to the Vice President for Health Affairs until the Provost puts in place a new reporting structure related to schools within the Medical Center.

Bylaws for the School of Nursing were developed by the nursing faculty, and follow the design and principles of other schools across the University. The Bylaws are compliant with the *Faculty Code* and the Medical Center Organization Plan. The Bylaws are presented in Appendix 10.

Challenges related to governance will include having an adequate number of tenured professors at the initiation of the school. A plan is suggested that faculty would continue to be reviewed for promotion and tenure by the School of Medicine and Health Sciences Committee for five years at which time through promotion and tenure of current faculty and through recruitment of faculty that meet the criteria for tenured professor. An alternative would be to have the Provost appoint members from the faculty of the University with knowledge of health care professions with the concurrence of the Dean.

**Operations**

**A. Administration and Organizational Structure**

The School of Nursing will transition from a department. It is anticipated that this transition can be complete by July 2011. The current organizational structure of the department of nursing education is presented in Appendix 11. The start-up organizational structure for the proposed School of Nursing is presented in Appendix 12. The intent is to create an efficient yet adequately resourced structure that produces the least disruption to all entities involved.

The chief administrative and academic officer of the School of Nursing will be the dean. The dean of the School of Nursing will have the same authority and status as other deans within the University structure. Major functions of the dean will include fundraising, creating a milieu of innovative and professional nursing programs in education, research, and community service; and, working with University leadership, the senior associate dean, and faculty to set the future direction of the school through formal strategic plans. The dean will manage the financial aspects of the school, oversee
student support services, and be committed to enhancing collaborative and interprofessional education and research activities. The Dean will report to the Provost and the Vice President for Health Affairs, as do the deans of the School of Medicine and Health Sciences and the School of Public Health and Health Services. Recognizing that a new Provost will begin July 1, the dean will follow whatever reporting structure the new Provost puts into place.

The senior associate dean for academic affairs will report to the dean. The major functions of the senior associate dean will include operational oversight of the School of Nursing academic programs and key research projects, coordinating effective use of nursing faculty resources, fostering an environment conducive to recruitment and retention of students and faculty, and coordinating and managing accreditation preparation and processes. Academic program directors, academic support staff, and faculty will report directly to this decanal position. Additional information about the decanal positions is provided in Appendix 13.

It is proposed that Jean Johnson PhD, RN, FAAN and Ellen Dawson PhD, RN be respectively named as dean and senior associate dean for academic affairs. They will also be referred to as the founding deans. This will facilitate an efficient and smooth transition and start-up of the school. Their curriculum vitae are provided in Appendices 14 and 15.

In order to establish the school and yet recognize the Faculty Code guidelines requiring a search for decanal positions, the founding deans would provide leadership to the school for up to three years at which time a search for these decanal positions will have taken place. These searches would be coordinated so the decanal positions are not simultaneously involved in a search process.

The organizational structure of the School of Nursing does not include departments. The basic organizational units are the program units, with program directors already in place with administrative support. This structure is consistent with other schools at the University and other schools of nursing across the country.

As the school grows, the structure will evolve. As the academic programs grow, the organizational structure may transition to a department-oriented structure and an assistant/associate dean for student affairs may be added. Also, as research expands, it is anticipated an assistant/associate dean for research would be added. These new decanal positions would be filled in accordance with the Faculty Code. Also, there may be a future need for a position with oversight responsibility for admissions and student services, and to provide leadership in the areas of communications and marketing, planning, and management of special strategic initiatives. The timing of changes to the proposed start-up organization structure will be determined by the needs of the school as student numbers in existing programs increase, new programs are added, research activities expand, and other strategic opportunities are identified.
B. Connection to the Medical Center

Currently, nursing is one of the program areas based in the Health Sciences component of the School of Medicine and Health Sciences in the Medical Center. The School of Nursing will remain part of the Medical Center. Also, like the School of Medicine and Health Sciences and the School of Public Health and Health Services, the School of Nursing will be governed by the University Faculty Code and the Medical Center Organizational Plan.

Nursing is a clinical profession with strong relationships with medicine, allied health professionals, and public health for education and research. Nursing is integrated into the fabric of the Medical Center with shared program activity with the Health Sciences Programs in health care quality, clinical management and leadership, and clinical research administration. Nurse practitioner students learn with medical students and physician assistant students in integrated clinical medicine courses and with physician assistant students in pharmacology. Nursing students are also integrated with students from all areas of the Medical Center in working with community clinics and other organizations on health promotion projects. With the upcoming revisions in the medical education program, there are significant opportunities to expand on interprofessional education. Community-based interprofessional projects have been recognized nationally as innovative and providing a contribution to the community. These experiences include students in both schools and will continue with a SON. In addition, there are numerous research projects that cross disciplines within the Medical Center including the new $4.6 health information technology grant. Quality of care depends on the ability for all health professionals to work well together. This begins with how students are educated and organizational structures that support students learning together.

C. Separation from Health Sciences

The nursing program is currently part of the Health Sciences component in the School of Medicine and Health Sciences. All faculty members in the Department of Nursing Education will transition to the School of Nursing and are enthusiastic in their support for the formation of the school. All current nursing academic program staff are enthusiastic about the formation of the school and will transition from the Department of Nursing Education to the School of Nursing.

Currently, the nursing and health sciences programs share administrative staff resources for admissions, fiscal management, instructional design, learning systems and support, and student services. The School of Nursing will proceed to full independence in these areas as quickly as possible, though for a transitional period of time there will continue to be shared administrative services.

Presently, research grants are assigned to departments within the Health Sciences programs. The grants assigned to the Department of Nursing Education will be assigned to the School of Nursing. Any grant assigned to
the other departments in Health Sciences will remain with those departments. There are not endowment funds that need to be divided.

Although these administrative separations will occur, the School of Nursing and the Health Sciences programs will continue to value and seek opportunities for educational, research, and strategic collaborations.

An analysis has been done to assess the financial impact of the separating nursing from the health sciences. The detailed budget information is noted in the “Fiscal Plan” section.

D. Space and Equipment

The GW nursing program is currently a dual campus program, and whether or not nursing becomes a school, space will be needed to support nursing education activities. Currently, the graduate program faculty members are housed at the Foggy Bottom campus and the undergraduate faculty members are at the Virginia Science and Technology Campus (VSTC).

It is envisioned the School of Nursing will be an anchor at the VSTC. Substantial opportunities exist for growth at the VSTC, and it is expected nursing undergraduate programs will expand there. Also, the availability of clinical sites and the presence of the Inova Health System and soon to be HCA health systems provide a rich learning environment for GW undergraduate students.

It is important to maintain a presence in Foggy Bottom due to the interconnectedness of the graduate nursing programs with the School of Medicine and Health Sciences and research collaboration with the School of Public Health and Health Services. Specifically, these collaborative education programs include the nursing management and leadership, clinical research administration, quality improvement, and health information technology programs. In these programs, courses are shared and there is a significant amount of interprofessional teaching. Also, nurse practitioner students (graduate students) are on the Foggy Bottom campus and integrated with the medical and physician assistant students. In addition, fourth-year BSN students are slated to being clinical rotations at GW Hospital. Nursing must have faculty present for these students.

The majority of School of Nursing space will be at the VSTC. There will be no additional space added at Foggy Bottom unless there is a programmatic or research benefit. The square footage needed for the School of Nursing in 2012 is 13,231 NSF. The cost estimate used for both Foggy Bottom campus is based on an estimate of $60/square foot which GW facilities management provided as a realistic cost. The cost of space at the VSTC is estimated at $35/sq foot. The space at the VSTC includes more than 2,000 square feet for a skills laboratory and additional space for offices. Classrooms at VSTC are considered shared space and not charged to individual programs. The School of Nursing will keep faculty and staff at the Foggy Bottom who are critical to the work associated with the graduate academic programs, fourth-
year clinical rotation, and research projects in order to minimize the financial affect of the higher cost space.

Appendix 16 provides details about the space needs to support the information in the table above. Currently the School of Nursing is not requesting a building of its own. The space requirements for the school are modest. However, as the school grows there may be a need for a building. That building is envisioned to be on the VSTC.

In addition to space, equipment is needed for teaching skills and testing students. The major equipment need for undergraduate students is equipment for the skills laboratory at the VSTC. This equipment includes beds, otoscopes, ophthalmoscopes, stethoscopes, IV lines, catheters, etc. Critical pieces of equipment include computerized, hi-tech “manikins” that provide students the opportunity to practice and demonstrate their clinical skills and clinical decision making abilities. All of the equipment noted, including the manikins, has already been obtained. All service agreements and periodic updates of equipment have been included in the operations budgets. Other equipment purchased with maintenance agreements includes audio visual equipment, cameras with the capacity to visually record student activities, and white boards.

Equipment necessary for the graduate students includes the patient simulation laboratory on the Foggy Bottom campus. The patient simulation laboratory is shared with medical students, physician assistant, and other health sciences students. The nurse practitioner students in particular are required to participate in simulated clinical experiences to both demonstrate and test clinical decision making abilities.

**Fiscal Plan**

Separation of the nursing budget from Health Sciences Programs is not problematic. Nursing currently has its own cost centers, and those cost centers will be the basis of the School of Nursing budget. Each of the Health Sciences programs also has their own cost centers so separation of budgets at the program level is straightforward.

There are shared services that currently are financially managed by the senior associate dean for Health Sciences. These include student services, admissions, technology support and financial management. A staff member in student services, admissions, and technology support is already assigned to the nursing programs. Those individuals will be included in the 2012 nursing budget rather than the health sciences budget. The School of Nursing will need an entity fiscal manager. The current fiscal manager position for health sciences will remain with those programs.

The School of Nursing already contributes to the overhead of the Medical Center and University for support services. This overhead contribution will continue, though it will be temporarily reduced in FY 2012. The School of
Nursing will continue to receive support services from the Medical Center for faculty affairs, finance, Himmelfarb Library, development, and facilities.

An overview of the income and expense budget for the School of Nursing is shown below in Table 7.

**Table 7: Five Year Summary Budget Forecast**

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<tbody>
<tr>
<td>Revenue</td>
<td>$4,667,872</td>
<td>$7,658,968</td>
<td>$9,976,305</td>
<td>$11,032,285</td>
<td>$11,776,460</td>
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<tr>
<td>Expenses</td>
<td>$3,267,570</td>
<td>$5,939,198</td>
<td>$7,272,862</td>
<td>$8,117,707</td>
<td>$8,590,557</td>
</tr>
<tr>
<td>Contribution</td>
<td>$1,400,302</td>
<td>$1,719,770</td>
<td>$2,703,443</td>
<td>$2,885,521</td>
<td>$3,185,903</td>
</tr>
</tbody>
</table>

A detailed five-year forecast with revenue projections is provided in Appendix 17. The revenue projections are built on a detailed mapping of revenue over the next five years and an estimate of number of credits by type of program. See Appendix 18 for the credit mapping calculations underlying the revenue projections. As a reference, tuition rates for FY 2011 are included in Appendix 19. Projections assume a 4% tuition increase each year.

The revenue increase from FY 2011 and FY 2012 reflects the increase from 50 to 75 Second Degree BSN students at VSTC, which accounts for approximately $1.2 million of the increase. A tuition increase of 7% for the distance education graduate students accounts for approximately $750,000 as well as expansion of the adult and family nurse practitioner and health care quality programs.

The revenue increase between FY 2012 and FY 2013 reflects the initiation of the RN to BSN program, the start-up of an entry level BSN program, as well as an anticipated tuition increase of 4% for all programs.

The increase between FY 2013 and FY 2014 reflects the expansion of the entry level BSN program, a slight increase in the adult and family nurse practitioner programs, and development of the executive nurse leadership program. Also included in the revenue are projections related to the contract with George Mason University that has been in existence since 1988—it is anticipated this income will be stable.

The expenses reflect primarily the addition of new faculty. While space rental costs are often considered indirect costs, they are included in the budget. The estimates for faculty time are based on a full-time faculty teaching load being 18 credits for a 12-month contract. Another forecasting assumption is the average class size will be 20 students, while knowing some of the classes will actually have 50 students yet clinical courses require a maximum of eight students to one faculty member (per Virginia Board of Nursing regulations). It is anticipated that 4 new faculty will be added during FY 2011, 8 during FY 2012, 3 in FY 2013 and 3 in 2014—for a total number
of faculty in 2015 of 36. In addition to the faculty additions, the increase expenditures reflect the costs of the administrative structure that will be included in the FY 2012 budget. This includes the salary of the Dean, Senior Associate Dean, .25 FTE assistant/associate dean for research, .25 FTE administrative director/dean, and the other .75 of both the research dean and administrative director/dean will be covered by either research grants or teaching. The time of the research dean and the administrative director/dean will increase to .5 FTE by 2013 anticipating more research and the increase in program activity. Also, space costs, while usually included in overhead expenses, are included in the expenses.

FY 2011 will be a transition year with budgetary planning beginning in November 2010. The FY2012 budget will include the full array of School of Nursing expenses, including decanal positions and administrative support positions. During FY2011 year, the administrative support expenses for student services, admissions, instructional technology and financial support will remain integrated with the Health Sciences budget. The “contribution” that nursing generates already pays for its portion of these services. As noted, the FY2012 budget will then have the full costs of the School of Nursing. Appendix 20 provides a detailed budget for FY2011 showing all expense lines.

As noted in Table 7, the contribution of the School of Nursing for FY 2012 is decreased due to the increased costs of new programs and the infrastructure of the school. The five-year budget has been reviewed and approved by the Medical Center financial officers with the reduced contribution for 2012.

The source of funding for the School of Nursing operations budget is tuition dollars. Funds are not being diverted from other University programs or initiatives. Research funds are not included in the operations budgets as they are managed differently (see the research section for a description of the past and current research activity. There also was no endowment income budgeted against expenses even though we are anticipating raising funds as shown in the “Development” section below. This approach provides a conservative method of estimating revenue.

The costs of the initial start-up for FY 2011 are modest. The costs are modest not due to efforts to short change the development of a new school; costs during the year will include special events, publicity, travel to potential donors, consultants, web redesign, and printing and graphics for new cards and stationary. The operations budget also supports travel, attending meetings to promote the school and provide a venue for faculty recruitment, as well marketing and other special activities relevant to transitioning from a department to a school.

Analysis of the financial impact of separating nursing from health sciences shows there is minimal affect. In FY 2010 nursing is 18.0% of the Health Sciences revenue and 22% of the expense. In FY 2011 nursing is 27.2% of revenue and 25.8% of expense. See Appendix 21 for the financial details related to the separation effect.
**Development**

The transition from a department to school creates myriad new donor opportunities for GW. The addition of a School of Nursing will enhance the University portfolio as it prepares to embark on a major campaign. Expansion from two to three schools will strengthen the national recognition of the Medical Center as an academic health center, which better positions the Medical Center with potential donors.

The creation of a School of Nursing offers a wide range of new donor opportunities—from scholarships to research support to major programmatic support, and from a wide range of sources such as alumni, grateful patients, philanthropists, and foundations. For example, the University of California-Davis received a $100 million gift from the Gordon and Betty Moore Foundation to support the new nursing school there—this gift stemmed from care provided elsewhere and an interest in improving the quality of patient care and fostering nursing excellence through education.

To assist the GW nursing program in achieving academic, research, and philanthropic goals, a Nursing Advisory Board was established in 2006. The Advisory Board brings external experienced voices to facilitate the work and growth of the nursing program at GW. The members of the advisory board are nursing leaders involved with defining the future of nursing regionally and nationally. A list of the current Advisory Board members is presented in Appendix 22. Expansion of the Advisory Board is in process to further facilitate development efforts.

The Advisory Board strongly recommends the creation a school of nursing. Their rationale for this recommendation is multifold. The Advisory Board sees the transition to a school as creating greater visibility for GW nursing education and research regionally and nationally to attract donors. Also, the Advisory Board sees the transition to a new school as a significant step to help reduce the current and expected future nursing workforce shortages and to address the limited supply of faculty, schools, and resources to educate nurses. At the last Advisory Board meeting in January 2010 it was strongly suggested the board expand in a strategic approach to include members with business, financial and fundraising experience.

Goals for fund raising will be fully established following the approval to establish the school. However, initial plans include making contacts with potential donors knowing that it often takes time to establish a relationship and agree on fundable programs of mutual interest. There will be a designated, experienced development staff member to work with the School of Nursing from the staff assigned to the Medical Center. During the transition year before the public launch of the School, the Medical Center development team, the Dean, and others in the school will work together to develop a philanthropic case. Also, they will collaborate to develop long term plans for alumni engagement, identification and cultivation of individual non-alumni potential donors and foundations who share in the concern for nursing workforce development, nursing quality improvement, nursing and patient care.
care, nursing research, and nursing leadership development, as well as other related areas. Also, any near-term opportunities will be assertively pursued.

**SWOT Analysis**

This SWOT analysis – an evaluation of the internal strengths and weaknesses as well as the external opportunities and threats– for the proposed School of Nursing was requested by Chairman Ramsey. It was developed with robust faculty input, internal expertise from across the University, and external consultation. The figure on the following page presents a synopsis, the analysis is presented on the following page, and detailed information is provided in Appendix 24.

**Figure 1. Strengths, Weaknesses, Opportunities, and Threats**

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
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<tbody>
<tr>
<td>• Tuition revenue exists to support school</td>
<td>• Some additional cost from 2 decanal positions (elimination of department chair)</td>
</tr>
<tr>
<td>• Industrious and innovative nursing faculty</td>
<td>• Separating student services from Health Sciences may add costs</td>
</tr>
<tr>
<td>• 53% of faculty are tenured or tenure track</td>
<td>• No endowment support for nursing</td>
</tr>
<tr>
<td>• Unanimous support from Medical Center Faculty Senate</td>
<td>• Limited alumni pool</td>
</tr>
<tr>
<td>• Baccalaureate/graduate/doctoral programs</td>
<td>• Few faculty members are tenured at the rank of professor</td>
</tr>
<tr>
<td>• Fastest growing program within SMHS</td>
<td>• High tuition may limit enrollment</td>
</tr>
<tr>
<td>• Strong applicant pool/enrollment history</td>
<td>• No NIH funded research</td>
</tr>
<tr>
<td>• Student services already in place</td>
<td>• Nursing could become isolated at VSTC</td>
</tr>
<tr>
<td>• Federal and foundation funded research</td>
<td>• Will require change to the Medical Center Faculty Organization Plan</td>
</tr>
<tr>
<td>• Nationally recognized for patient care quality improvement</td>
<td></td>
</tr>
<tr>
<td>• Dual campus program with BSN at VSTC</td>
<td></td>
</tr>
<tr>
<td>• Nursing education at VSTC is cost effective</td>
<td></td>
</tr>
<tr>
<td>• University commitment to developing VSTC</td>
<td></td>
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<tr>
<td>• Accredited program and no additional site visit necessary to become a school</td>
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<tr>
<td>• Support from community partnerships</td>
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<tr>
<td>• Strong partnerships with HCA and Inova</td>
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<tr>
<td>• Well-positioned for growth</td>
<td></td>
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<tr>
<td>• Solid competitive advantages</td>
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<td>• Political support in Virginia</td>
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<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
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<tbody>
<tr>
<td>• Add $7M in revenue without adding Foggy Bottom campus students</td>
<td>• GMU owns land and may develop health education program creating competition</td>
</tr>
<tr>
<td>• Create new donor opportunities</td>
<td>• Economy may make it difficult for students to afford GW program</td>
</tr>
<tr>
<td>• Enhance University portfolio</td>
<td>• Other schools may see GW as a threat and, behind the scenes, seek to limit access to clinical sites</td>
</tr>
<tr>
<td>• Establish an anchor school at VSTC</td>
<td></td>
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<tr>
<td>• New linkages in Virginia could support new educational programs</td>
<td></td>
</tr>
<tr>
<td>• Attract NIH funded researchers</td>
<td></td>
</tr>
<tr>
<td>• Other SONs more likely to partner with GW</td>
<td></td>
</tr>
<tr>
<td>• Strengthen clinical partnerships</td>
<td></td>
</tr>
<tr>
<td>• Regional and national nursing shortages</td>
<td></td>
</tr>
<tr>
<td>• Renewed interest in nursing as a well-paying profession</td>
<td></td>
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<tr>
<td>• Nursing slated to add most jobs in the next decade</td>
<td></td>
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<tr>
<td>• Nationally 55,000 qualified applicants turned away</td>
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The SWOT analysis includes those strengths, weaknesses, opportunities and threats that relate specifically to launching a school of nursing and not to further developing nursing as it currently exists in the department of nursing education. Primary among the strengths is the compelling support that a school has from the faculty of the department, faculty in the School of Medicine and Health Sciences, the Medical Center Faculty Senate, and Medical Center and University leadership. On February 3, the Medical Center Faculty Senate voted unanimously to support the establishment of a School of Nursing to complement the two existing schools. The Resolution of the Medical Center Faculty Senate is presented in Appendix 3 and the minutes of that Medical Center Faculty Senate Meeting are in Appendix 4.

Schools of nursing are present in most major academic health centers across the country. Currently, the department of nursing education is housed within the School of Medicine and Health Sciences. This is highly unusual and viewed by applicants, potential new faculty, and potential research sponsors as evidence of diminished institutional support for nursing. Faculty in the department have been told by other faculty and students during recruitment processes that it is important to have a school as a sign of the institutional commitment to nursing and they would not come to GW as a result of there not being a school here. Also, being a department rather than a school makes GW less competitive for federal research grants, especially NIH research grants.

Establishing a School of Nursing will build on the existing academic programs in the department, which already include baccalaureate, graduate, and doctoral programs. These programs created a strong reputation for GW in nursing education and provide a tuition base to support the evolution of the department to a school. Also, key infrastructure activities that contribute to the viability of a school are already in place. Also, the range of policies and processes from marketing to graduation has been established within the department and can evolve to a school.

Nursing has accredited programs. The latest accreditation site visit occurred in February 2010, and while the official accreditation report will not be sent until October, the exit report by the site visit team indicated all programs meet the Commission on Collegiate Nursing Education (CCNE) standards.

Financially, the proposed School of Nursing could add approximately $7 million dollars in revenue through expanded academic programs—and without adding Foggy Bottom campus students. However, there will be additional costs with a School of Nursing, including costs of two part-time decanal positions, with some offset from the elimination of the department chair position. There will also be additional costs associated with launching the school in terms of publicity and public events. The department already provides funding for infrastructure costs including admissions and student services staff. These costs are currently integrated into the health sciences budgets and will need to be separated out. The weakness of the lack of an endowment to draw on in the development of the school means the initial
launch must be funded from operations. Endowment funds will continue to be limited if nursing remains at a departmental level.

Nursing leadership has met very aggressive goals for the development of new activities as demonstrated by initiating nursing education in 2004, creating a full complement of programs that will be fully accredited by 2010, and developing a nursing research portfolio. Within a short period of time, the department of nursing education developed successful bachelor’s, master’s and doctoral programs; became fully accredited; and, initiated a research agenda and educational theme focused on improving quality of nursing care. The department established a solid research track record, with a federally- and foundation-sponsored projects portfolio of $4.9 million dollars. While this shows strength, a weakness is that none of the research is NIH funded—the result of having a departmental level nursing program which makes it especially challenging to attract high level nursing researchers and makes GW less attractive to NIH for nursing research grants.

Housing the majority of the School of Nursing at the VSTC will provide unique opportunities in terms of having adequate space for program development and parking for students and faculty. With lower rental costs than in downtown DC, the school will be able to invest in developing faculty and research opportunities. However, the challenge of housing the majority of activity at the VSTC is to retain nursing in the mainstream of the Medical Center and University as well as maintaining a cohesive faculty among those who are at the VSTC and those at Foggy Bottom.

Organizational changes will be necessary with a review and update of the Medical Center Organizational Plan through the Quadrennial Review Process which takes place on a periodic basis. It is time for an update, and changes related to the School of Nursing would be included. The school would need to create bylaws that are consistent with the Faculty Code. The requirement for 75% of the regular service faculty being tenured or tenure track is manageable with the use of the special service faculty category for clinical faculty. As noted by the Executive Committee of the University Faculty Senate, this category of faculty is not counted in the ratio of tenure/tenure track to non-tenure track faculty. By appointing faculty who will be primarily supervising students in clinical sites into the special service category with the title of clinical faculty and not including them in the denominator for regular service, the School of Nursing will be able to increase the current 53% ratio (which exceeds the 50% requirement for departments) to reach the 75% requirement by 2013 given the student and faculty projections. However, the issue of having a sufficient number of tenured professor faculty members is a challenge. Over the next year efforts will be made to attract faculty who could be appointed to tenured professor positions. Having school status will make this easier to accomplish.

A potential threat of launching a school is having opposition from other schools of nursing, particularly the Virginia based schools. Despite the potential opposition from other schools, the opportunities are many. According to regional and national workforce reports, the demand for nurses
will remain strong for at least the next two decades and likely beyond. The aging of the population creates new demands for nursing care at all levels. The current nurse faculty shortage also presents opportunity for growing educational programs that will prepare nurses for faculty positions. With the growth and wealth of Loudoun County come opportunities to recruit students and to strengthen our partnerships with health systems dominating the region, specifically the Inova and HCA health care systems as well as the department of public health, home care agencies, and nursing homes. In addition, the potential to develop a donor base given the wealth and health interest in the County is significant. Also, as nursing develops an MSN in health information technology, there are significant opportunities for innovative partnerships with information technology firms in Virginia.

In summary, the SWOT analysis shows there are many strengths and opportunities associated with forming a School of Nursing. While the weaknesses and threats need to be addressed, these are all manageable. The analysis indicates much can be gained by creating a school of nursing at GW, particularly for those areas that are consonant with the direction of the University—enhancing academic programs, growing research, expanding the donor base, and service. Nursing centers around service to the community.

**Conclusion**

There is a unique set of circumstances creating an optimal time to establish a School of Nursing:

- Successful undergraduate, graduate, and doctoral programs are in place.
- There is strong market demand.
- Academic growth potential exists.
- Strong research growth potential exists.
- Space is available and growth opportunities exist at VSTC.
- Tuition revenue exists to support the School.
- Timing is good for the upcoming University fundraising campaign.
- Unanimous support from the Medical Center Faculty Senate which understands the need for nurses.
- There is strong support from the Commonwealth of Virginia to develop an additional source of nurses.

Forming the proposed School of Nursing offers significant new opportunities and benefits to The George Washington University, Medical Center, and Virginia Science and Technology Campus (VSTC). Primary opportunities and benefits of a School of Nursing include:

- Adds $7 million in revenue without adding Foggy Bottom campus students
- Creates new donor opportunities
- Attracts funded researchers and expand the NIH portfolio
• Enhances the Virginia Science and Technology Campus (VSTC):
  - Establishes an anchor school
  - Expands academic programmatic development
  - Increases onsite weekday educational offerings
  - Augments campus research portfolio
  - Creates opportunities for new regional linkages and other partnerships
• Strengthens the Medical Center reputation as an academic health center
• Expands international partnerships
• Provides the structure to be a top nursing school in the U.S.

Establishing the proposed School of Nursing will not divert resources from other University programs and initiatives:

• Nursing is and will continue to be self-sustaining.
• Minimal investment capital is required to become a school.
• Revenue generated by the School of Nursing will be reinvested in the school.
• Space expansion will occur at the Virginia Science and Technology Campus, not Foggy Bottom.

Thus, it is proposed the organizational unit for nursing transition from a department to a school level. The proposed timeline is to establish the School of Nursing effective July 1, 2010, with a public launch of the School in July 2011.
APPENDIX 1: School Formation Committee Membership

The George Washington University Medical Center

School Formation Committee Membership

Jean Johnson, PhD, RN, FAAN (Chair)
Senior Associate Dean, Health Sciences
Professor of Nursing Education

Vincent Chiappinelli, PhD
Medical Center Faculty Senate Executive Committee
Chair, Department of Pharmacology and Physiology
Professor of Pharmacology and Physiology

Ozgur Ekmekci, EdD
Medical Center Faculty Senator
Assistant Professor of Clinical Research and Leadership

Ray Lucas, MD
Chair, Medical Center Faculty Senate Executive Committee
Assistant Professor, Emergency Medicine

Christine Pintz, PhD
Member, Medical Center Faculty Senate Executive Committee
Assistant Professor of Nursing Education

Margaret Plack, EdD
University Faculty Senator
Chair, Department of Health Care Sciences
Director, Physical Therapy Program
Associate Professor of Health Care Sciences

Josef Reum, PhD
Interim Dean, School of Public Health and Health Services
Associate Professor of Health Policy

Sara Rosenbaum, JD
Chair, Department of Health Policy
Professor of Health Policy and of Health Services Management

Gary Simon, MD, PhD
University Faculty Senator
Vice Chair, Department of Medicine
Professor of Medicine

Sylvia Silver, PhD
Associate Dean for Health Sciences
Professor of Pathology

Karen Wright, PhD
Director of Research, Physician Assistant Program
Assistant Professor of Health Care Sciences

Facilitator: Ronna Halbgewachs, MBA, MA
Assistant Vice President, Planning and Health Affairs

Also attending: Ellen Dawson, PhD, RN
Chair, Department of Nursing Education
Kate Brannon
Health Sciences Entity Fiscal Manager
APPENDIX 2: School Formation Committee Recommendations

Unanimously approved by School Formation Committee - 1/11/10
Unanimously endorsed by Medical Center Faculty Senate Executive Cmte.- 1/19/10
Unanimously endorsed by Medical Center Faculty Senate - 2/3/10

SCHOOL FORMATION COMMITTEE

Recommendations

Introduction

As charged, the School Formation Committee has reviewed and discussed a range of options for a new school. The recommendation of the Committee is to create a School of Nursing. The rationale for this decision is that nursing has great academic growth potential through expansion of current programs and addition of new program areas (national enrollment and workforce data support this). Nursing also has great potential to expand research and attract donors. This is an optimal time to establish a School of Nursing because of the continued nursing shortage and the attention being given to nursing education. A School of Nursing will be a strategic and marquis asset to the Medical Center and University.

The School Formation Committee offers the following specific recommendations for the establishment of a School of Nursing:

Academics

- The School should be an educational entity which offers certificate and undergraduate, masters, and doctoral degree programs.

- The current nursing certificate and undergraduate, masters, and doctoral degree programs should continue and should all transfer to the new School.

- The nursing education programs should remain fully accredited by the Collegiate Commission for Nursing Education (CCNE) and notify CCNE of the change in status from Department of Nursing Education to School of Nursing.

- The School of Nursing should be committed to enhancing collaborative and interprofessional educational activities and remain fully integrated into the academic life of the Medical Center and University.

Research

- The School should have a strong commitment to research, as research is critical to the ability of the school to flourish.

- The School should be committed to collaborative and interprofessional research activities.
APPENDIX 2: School Formation Committee Recommendations

- The School should maximize research capability to advance a research agenda through recruitment of research-intensive faculty and should seek a dynamic partnership with the University research leadership and enterprise.

- All currently funded nursing research projects should transition to the School of Nursing. Staff funded by these sponsored projects should transition to the School of Nursing. The National Collaborative on Aging and the National Alliance for Quality Care should transition to the School of Nursing. Should U.S. Department of Health and Human Services funding be awarded for the proposed Health Information Technology Curriculum Development Center, the Center should transition to the School of Nursing.

Service

- The School should participate in and demonstrate a commitment to community service—locally, nationally, and internationally.

- The faculty in the School of Nursing will remain committed to the work of the Area Health Education Center and the Office of Community Partnerships.

Structure and Administration

- The School should have equal status with the other health professional schools in the Medical Center and with the other degree-granting schools in the University.

- The School should have programmatic units, rather than departments, at this time. These programmatic units should include undergraduate, masters, doctoral, and certificate programs.

- The School should proceed to full independence as quickly as possible, though for a transitional period of time there should be shared administrative services with the Health Sciences Programs such as admissions, distance learning systems support, finance management, instructional design, and student services.

- A Dean and Senior Associate Dean should be named to lead the school during a transitional phase. These deans will be noted as founding deans of the school. The transitional phase shall not exceed 3 years and the positions will be filled in accordance with the Faculty Code.

- An Assistant Dean for Research position should be created. This position should drive growth of the nursing research enterprise. This position should be filled in accordance with the Faculty Code.

- A new position(s) responsible for oversight of admissions and student services, and to provide leadership for marketing, communications, planning, and strategic initiatives should be established. Some of
APPENDIX 2: School Formation Committee Recommendations

these areas may involve integrated operations with the Health Sciences programs during a transitional period.

- All current nursing academic program staff should transition to the School of Nursing. These positions include program directors and coordinators, an administrative manager, and executive coordinators.

- For a transitional period, all administrative and support service staff should continue to support both the nursing and health sciences programs. These positions include the entity fiscal manager, executive coordinator, and staff in admissions, distance learning systems support, instructional design, and student services.

Faculty

- The School should have appointment authority for primary, secondary, and dual faculty appointments.

- All faculty members in the Department of Nursing Education should transition to the School of Nursing.

- Select faculty should receive a secondary appointment. Secondary and dual faculty appointments should facilitate the collaboration with other programs and Schools across the Medical Center and University.

- There should be an Appointment, Promotion, and Tenure (A.P.T.) Committee within the School of Nursing, and this Committee should comply with the University Faculty Code.

- The School of Nursing should develop A.P.T. requirements, which comply with the University Faculty Code, and tenure should require a combination of teaching, research, and scholarship.

- The School of Nursing should have a commitment to faculty development to enhance teaching and other educational activities, scholarly work, and research.

- Faculty in the School of Nursing should be encouraged to participate in University and Medical Center committees and governance.

- The School should develop a plan and timeline to achieve compliance with the Faculty Code requirement that 75% of the School’s regular full-time faculty be tenured or on tenure track.

Faculty Senate/Governance

- The Dean of the School should be an administrative member of the Medical Center Faculty Senate Executive Committee.

- The School should have a cluster grouping of faculty for purposes of Medical Center Faculty Senate representation.
APPENDIX 2: School Formation Committee Recommendations

- The Medical Center Faculty Organization Plan and Bylaws should be reviewed and amended to assure equitable application and representation, such as representation on Committees, for the School of Nursing faculty.

- The Faculty Code should be reviewed and amended to assure equitable application and representation for the School of Nursing faculty.

- Bylaws for the School of Nursing should be developed by the faculty.

Fiscal Design

- The school should be established as revenue neutral with increasing revenue from tuition, sponsored projects, development, and endowment covering all needed direct and indirect costs.

- New academic programs should continue to be prospectively budgeted to ensure a stable faculty to student ratio.

- The School of Nursing should have distinct cost centers.

- The School of Nursing should have a founding endowment.

- Funding for student scholarships and recruitment of research intensive faculty should be priorities.

- Development funding is needed and there should be an allocation for a development support position focused on the School of Nursing.

Space

- The nursing programs should continue to have a dual campus presence on both the Foggy Bottom and Loudoun County campuses.

- It is imperative the School of Nursing have a solid presence on the Foggy Bottom campus in order to be fully integrated into the University and Medical Center.

Mission/Vision

- A mission and vision for the School should be developed, with input from faculty and staff. The mission should encompass the University commitment to education, research, and service.

Institutional Commitment

- The School of Nursing should have a founding endowment. To demonstrate institutional commitment to the School of Nursing, the Medical Center and University should make a matching contribution to a founding seed endowment for the School of Nursing.
APPENDIX 2: School Formation Committee Recommendations

- The School of Nursing should be part of the upcoming University campaign.

Timing

- It is an optimal time to establish a School of Nursing as there are continued projections of a major nurse workforce shortage, the growing demand for nurses, and the significant demand for both undergraduate and graduate nursing education programs.

- The intention to establish a School of Nursing (SON) should be presented to the Board of Trustees for approval in May 2010.

- The timeline for the School of Nursing should be:
  - Establish the School effective July 1, 2010
  - Have a one year transition period
  - Publicly launch the School in July 2011
Resolution by the Medical Center Faculty Senate
Endorsing Establishment of a School of Nursing

WHEREAS, the School Formation Committee reviewed and discussed fundamental and key aspects of establishing a new school, evaluated a range of options for a new school, and recommends the establishment of a School of Nursing at The George Washington University;

WHEREAS, nursing has great academic growth potential through expansion of current programs and addition of new program areas;

WHEREAS, a School of Nursing has great potential to attract high caliber researchers to contribute significantly to the research portfolio of the Medical Center and University;

WHEREAS, a School of Nursing create important opportunities to attract donors to develop a substantive endowment;

WHEREAS, there continues to be a notable shortage of nurses in all health care settings projected well into the future and GW can best position itself as being a leader in nursing education as a School of Nursing;

WHEREAS, most major academic health centers in the US have a School of Nursing;

WHEREAS, there will be additional costs related to a School of Nursing, the Department of Nursing has a firm financial basis that will fund the development of a School with limited additional resources required;

WHEREAS, the current Department of Nursing Education has established a substantial portfolio of educational programs including a Bachelor of Science in Nursing, a Master of Science in Nursing, and a Doctor of Nursing Practice and these programs can be best expanded in a School of Nursing;

WHEREAS, a School of Nursing provides more leverage for recruiting faculty that is a major challenge given a continued faculty shortage;

WHEREAS, establishing a School of Nursing is a strategic initiative that will strengthen the University and Medical Center for the reasons cited above; be it

RESOLVED that the Medical Center Faculty Senate endorses:

1. Establishment of a School of Nursing as an educational entity which offers certificate and undergraduate, masters, and doctoral degree programs.

2. The specific recommendations presented regarding School of Nursing academics, research, service, structure and administration, faculty, faculty senate/governance, fiscal design, space, mission/vision, institutional commitment, and timing;
3. The recommendation for the School of Nursing to have a founding endowment and for the Medical Center and University to make a matching contribution to create a founding seed endowment to demonstrate institutional commitment to the new School; and,

4. The plan to establish the School of Nursing effective July 1, 2010, to have a one year transition period, and to publicly launch the School of Nursing in July 2011.
I. Dr. Lucas opened the meeting in Dr. Williams’ absence at 5:05 p.m. in Ross 117. Present: Drs. Barbour, Barnett, Bayat, Brassard, Brindley, Burke, Chiappinelli, Chiaramello, Cleary, Ekmekci, Ms. M. Goldstein, Drs. Hamm, Hawley, Hoffman, Knoll, Lucas, Macri, Petinaux, Pintz, Schwartz, Zapanta; Dr. Hirshfield; Dr. Parkin for Dr. Reum, Dr. Schroth for Dr. Scott; Dr. Frake (Resident). Absent: Drs. Abrams, Afkhami, Aly, Ayas, Belyea, Brindle, Mr. Cawley, Drs. Cohen, Corriveau, D’Angelo, DePalma, Dor, Ebbert, Elliott, Friedman, A. Goldstein, Gupta, Hawdon, Henson, Holmes, Jain, Junker, Katz, Lee, Markle, Markus, May, McCaffrey, Mendelowitz, Mookherji, Ottolini, Pearl, Phillips, Roberti, Sadeghi, Siegel, Trinidad, Verme, Vyas; Drs. Williams, Reum, Scott; Mr. Jackson (SMHS student), Mr. Murrain (SPHHS Student).

II. The minutes of the meeting of November 4, 2009, were approved as distributed.

III. Executive Committee Report: A list of Executive Committee activity since the previous Senate was distributed with the agenda. Dr. Lucas stated that since most of the major items were on today’s Senate agenda, he would let the listing serve as the report.

IV. Action Items

A. Advice and Consent to Dr. Petinaux as Parliamentarian: Explaining that Dr. Gallo could not be here, Dr. Lucas asked for a volunteer from the floor, stressing that the parliamentarian may not vote or to participate in the discussion. Dr. Petinaux volunteered, and the Senate provided its advice and consent to his serving as parliamentarian for the meeting.

B. Advice and Consent to Appointment of Dr. Alex Stagnaro-Green as Senior Associate Dean for Education: A CV had been distributed with the agenda, and copies were provided at the meeting. For Dr. Scott, Dr. Schroth explained that Dr. Stagnaro-Green has served in several medical schools, most recently at Touro, and will be leading the new Office of Medical Education. A motion to advise and consent to the appointment was made, seconded, and passed.

C. Approval of Granting of Degrees in the School of Public Health and Health Services [SPHHS]: Lists of SPHHS candidates for fall graduation, including those who had applied since the last Senate meeting, were provided. For Dr. Reum, Dr. Parkin read the resolution asking the Senate’s approval. A motion was made, seconded, and passed to approve the candidates as listed.

D. Replacement on Academic Freedom and Ethics Committee: Dr. Lucas asked the Senate’s approval to replace Dr. M. Tejero (Biochem.) (left institution) with Dr. D. Perry (Pharm./Phys.). A motion to approve was made, seconded, and passed.

E. Recommendations by Executive Committee for Follow-Up to the Faculty Survey: A summary of the Executive Committee’s suggestions was provided with the agenda and at the meeting. Dr. Lucas explained that the Committee on Faculty Support and Professional Development, chaired by Dr. Lipson, had reported on the completed survey almost a year ago, along with their recommendations. He stated that the Executive Committee had supported their suggestions, but wanted more time to review the material and to offer its own suggestions. Therefore, the survey data was posted temporarily without suggestions, and the goal is to re-post the data with the suggestions of both the Executive Committee and the Faculty Support Committee.
Dr. Lucas moved that the Senate approve the Executive Committee’s suggestions, and the posting of these suggestions along with those of the Faculty Support Committee, with the posted data. The motion was seconded.

Dr. Burke, a member of the subcommittee that had formulated the Executive Committee’s suggestions, summarized them as follows:

1. Reinstitute a formal faculty orientation program
2. Devise a web-based faculty handbook as a companion to orientation, updated yearly
3. The Annual Faculty Report form and process will continue, but revise in some cases to include more frequent reporting for junior faculty
4. Adopt a more formal approach to mentoring needs
5. Have the Associate Vice President for Faculty Affairs and Educational Resources be responsible for these areas, creating a “faculty development resource center” or position to assist in managing them

Dr. Wasserman asked whether the Senate was being asked to accept the recommendations as a report. Dr. Lucas replied in the affirmative. Dr. Schwartz maintained that the draft document constituted institutional policy, which Dr. Wasserman objected to given the variation in departments. While respecting Dr. Schwartz’ point of view, Dr. Lucas stated that his understanding was that the document constituted recommendations by the Executive Committee to Medical Center leadership, to be implemented by the Associate Vice President for Educational Resources. He clarified that there is only one annual report, but the Executive Committee suggests considering more frequent assessments in the case of junior faculty.

Dr. Wasserman moved to table the motion to the next meeting. The motion was seconded. 4 voted yes and 10 voted no.

Dr. Wasserman asked that Item 3, l. 6, be amended as follows: “The [annual report] process may occur at the discretion of the Chair on a semi-annual basis between the department chair and junior faculty....” The amendment was approved by a vote of 12 yes, 3 no.

The motion to approve the amended statement was then voted on and passed with 16 in favor and 1 opposed.

F. Proposal for a School of Nursing: A resolution to establish a School of Nursing was distributed with the agenda, along with supporting documents. Copies of today’s presentation were provided at the meeting. Using PowerPoint, Dr. Johnson explained that in September 2009, Dr. Williams had constituted a School Formation Committee to consider the possibility of a separate school for nursing and health sciences, which after much discussion and input had ended in a recommendation for a separate School of Nursing, leaving the Health Sciences with the School of Medicine. She explained that factors in support of a separate School of Nursing included that it has three degrees, and more research than the other components; and that the Health Sciences programs felt more closely allied to the School of Medicine, whereas most nursing schools are separate from schools of medicine. Additionally, she stated that the committee felt that having nursing at the school level would attract NIH researchers and donors; its primary location on the Virginia campus gives it great potential for development; it will help expand international partnerships; with the structure basically in place, it has the potential of being a top-level school; and it addresses the ongoing shortage of nurses.

Dr. Johnson briefly reviewed the history of nursing at GW, as a nursing program from 1903-31, as a nurse practitioner program from 1973, and a series of steps beginning in 2004 with a master’s in 2004, a Nursing Department in 2005, departmental accreditation in 2006, a
doctrinal program in 2007, and a bachelor of science in 2009. She displayed a graph showing student growth, with the largest in the bachelor’s program. She stated that full-time faculty total 17, projected to 38 by 2015; and 13 are adjunct. She stated that 59% of the 17 full-time faculty are tenure or tenure track, and the plan is to reach the Faculty Code requirement of 75%. She stated that research totaled almost $5M in grant funding in the last four years. She stated that space will be needed, but would be for a department as well as a school, and a separate building is not anticipated at this point. She noted that nursing will maintain a continued presence at Foggy Bottom. She noted an accreditation site visit for all nursing programs at the end of the month, adding that should the transition be made to a school, the accrediting body will simply be notified.

After reiterating the benefits that a School of Nursing will bring, Dr. Johnson expressed the hope that the Senate will endorse the resolution so that the proposal may be made to the Board of Trustees at its May meeting. She noted that the request will be for the School to be effective July 1, 2010, but that a public launch be delayed for one year to allow for funding.

Dr. Lucas thanked Dr. Johnson and the members of the School Formation Committee.

A motion was made, seconded, and passed, to approve the resolution to establish a School of Nursing.

V. SPHHS Report: Dr. Lucas asked to move the report forward to accommodate a time commitment by Dr. Parkin. Dr. Parkin reported that the SPHHS Dean’s Search Committee interviewed twelve candidates; Environmental and Occupational Health is near completion; and Health Policy and Prevention and Community Health are beginning. Additionally, she reported four faculty positions filled, and ongoing faculty searches in all departments. She stated that two SPHHS faculty went on leave to accept high-profile positions with the government: Dr. David Michaels (EOH) as Assistant Secretary for Occupational Safety and Health Administration, DOL; and Dr. John Andrus (GH) as Deputy Director of PAHO. She also described the Global Health Overseas Learning Collaborative, in which 88 first-year MPH students will spend Spring 2010 in Kenya or Bangladesh. She stated that Research expenses are up 16% (without Biostatistics Center), with four departments leading the growth: Epidemiology and Biostatistics, Exercise Science, Global Health, and Health Policy. She stated that student applications continue to increase.

VI. LCME Update: For Dr. Scott, Dr. Schroth announced that the LCME has lifted the school’s probationary status, and has accredited the medical school for eight years. He said there will be no visits, but written reports will be required. He thanked everyone for their assistance. The assembled responded with applause.

VII. Ad Hoc Committees on APT Issues:

A. School of Medicine and Health Sciences [SMHS]: Dr. Werling, Chair of the SMHS Ad Hoc Committee, reported that it has met once and will review the Criteria to make sure the language is clear so that everyone may progress who wants to progress, and to recommend an educator track.

B. SPHHS: Dr. DiPietro reported that the committee has held two meetings and is discussing the language while being mindful of Faculty Code requirements.

VIII. Search Reports

A. Senior Associate Dean for Education: See Item VI.B., above.
B. **Provost and Executive Vice President for Academic Affairs**: Dr. Schwartz reported that 100 applications were received; 25 were considered, and seven visits took place. He added that of these seven, four will visit on campus, and a decision is anticipated in about a month.

C. **SPHHS Dean**: Dr. DiPietro reported that 46 applications were received; 13 candidates had airport interviews February 21-22; of these candidates, three to five will be invited to campus.

D. **Neurology**: Dr. Lucas read a report from Dr. Caputy, detained in surgery, that the process to reopen the search using the firm Korn/Ferry is ongoing. Dr. Wasserman explained that a perceived conflict of interest in using this firm had caused a temporary delay, but the process is now moving forward.

E. **Surgery**: Dr. Zeman reported that eleven candidates have visited the campus, and the committee will meet tomorrow to discuss a final list.

F. **Environmental and Occupational Health**: For Professor Goldstein, Dr. DiPietro reported that ten applications were received, of which four were interviewed and are being considered.

G. **Health Policy**: Dr. DiPietro reported that the committee will hold its first meeting tomorrow.

H. **Prevention and Community Health**: Dr. Lucas stated there was nothing to report as yet.

IX. **University Senate Report**: Dr. Biles reported three main topics of discussion:

- **Innovation Task Force**: Dr. Biles explained that this group, chaired by Dr. Jeff Lenn, seeks to redirect expenditures of $30M/year to fund academic priorities. He stated that the faculty have no information on their recommendations, and are concerned to know what they will be.

- **Science and Engineering Building**: Dr. Biles noted reports by Dr. Dolling, Dean of the School of Engineering, and Vice President Chalupa. He identified two major faculty concerns: (1) The cost, now at $300M, and how, with our tuition already at or near the highest, these funds will be provided. (2) The fact that the original resolution for the building included undergraduate science departments, yet now no space is allotted them. He added that GW compares unfavorably to other schools in this respect, and Dr. Gallo’s Space Committee had identified undergraduate science departments as being in the greatest need. Yet now two-thirds of the space proposed is for the Engineering School.

- **Resolution Regarding the Faculty Code**: Dr. Biles explained that the relevant provision in the Faculty Code is the footnote on p. 18 which reads, “In the governance of the Medical Center, all faculty eligible for membership in the Medical Center Faculty Assembly shall be eligible to participate whenever the term “regular” faculty appears in this document.” The resolution is to replace “Medical Center” with the original wording, “Medical School,” which was to allow the voluntary faculty of the SMHS to participate in faculty governance. He stated that the issue is the role of the research faculty in the SPHHS, which has a disproportionate number of research faculty, and is still well below the Faculty Code requirement of 75% tenure of tenure-track; areas in which this disproportion became an issue included the composition of the search committee for the Dean of the SPHHS. He explained that the proposal shifts the SPHHS to fit all other schools in the University with the exception of the School of Medicine. To Dr. Lucas, he replied that the resolution will be voted on at the meeting of February 19.

X. **Administrative Announcements**

A. **Provost and Vice President’s Report**: Deferred in Dr. Williams absence.
B. **Health Sciences**: Dean Johnson said she had nothing further to report.

C. **SMHS**: Dr. Schroth reported that medical school applications increased 2% and are at the highest number ever, and that early matches went well. To Dr. Schwartz, he replied that the ratio of offers to acceptances is 3 to 1.

D. **Research**: Dr. Hirshfield announced that two days ago, the Medical Center received a $15M ARRA Renovation Grant, for which the University will be contributing a major matching investment. She noted that the award will lead to major changes, including relocating people from one entire side of Ross Hall. She announced Research Day on March 10, with Drs. Daniel Geschwind and Mark Batshaw as speakers, and a large number of abstracts received. She reported a new intramural competition for seed money, with total funds of $200,000. She described an important transition in administrative processes: all research human resource matters will go to a new team in the HR office, which will lead to improved services and processes. She reported $14M in sponsored project awards to the University since September, of which 1/3 are Medical Center.

Dr. Hirshfield announced that her team will move to Rice Hall in two to three weeks, to be nearer Dr. Chalupa, and that she will miss the daily interactions with Medical Center people.

XI. **Brief Statements**: None.

XII. The meeting adjourned at 6:00 p.m.

Raymond H. Lucas, M.D.  
Chair, Executive Committee  
(for Dr. Scott, Secretary)

RHL:Ir

Attachment:  
Report by the Executive Committee Subcommittee on the Faculty Survey, as amended
# BSN Program of Study with Course Descriptions

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall, Semester 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NURS 110</td>
<td>Transition into the Nursing Profession</td>
<td>The development of nursing as a profession. Overview of the values and characteristics of professional nursing practice. Legal and regulatory issues; critical reasoning and evidence-based practice; professional ethics and cultural competence. Students keep a journal as a self-reflection tool to facilitate the transition into professional nursing.</td>
</tr>
<tr>
<td>NURS 111</td>
<td>Health Assessment (Foundations of Nursing Practice)</td>
<td>Development of the knowledge and skills necessary for conducting comprehensive and need-specific health assessments for individuals in the context of their family and community and for determining areas in which health promotion activities should be implemented or reinforced. Students use structured interviews to elicit health histories and health practices and perform physical examinations in a systematic manner. Identification of a broad range of normal variations through practice with peers in the laboratory setting. Foundational skills of nursing practice in the laboratory setting, including physical mobility, safety, infection control, drug calculation, medication administration, and other health technologies.</td>
</tr>
<tr>
<td>NURS 113</td>
<td>Nursing Practice and Clinical Reasoning I: Adult and Aging Acute and Chronic Illness</td>
<td>The first of five courses that combine didactic and clinical experience. Students are introduced to the values, knowledge, and competencies that are the foundation for safe, evidence-based, professional holistic nursing care of adults with common medical and surgical needs. The classroom component focuses on the expected outcomes and effects of nursing</td>
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</table>
### APPENDIX 5: Bachelor of Science in Nursing Program of Study

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Descriptions</th>
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<tbody>
<tr>
<td></td>
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<td>interventions with adults experiencing selected health conditions and the loss associated with compromised health. In the clinical component, students use critical thinking and effective communication skills to deliver care to adults with common medical and surgical needs.</td>
</tr>
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</table>

#### Spring, Semester 2

<table>
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<tr>
<th>Course #</th>
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</thead>
<tbody>
<tr>
<td>NURS 114</td>
<td>Nursing Practice and Clinical Reasoning II: Adult and Aging Acute and Chronic Illness</td>
<td>Continuation of nursing interventions with adults experiencing selected psychiatric, neurologic, oncologic, endocrine, sensory, and orthopedic conditions. Didactic and clinical experience.</td>
</tr>
<tr>
<td>NURS 115</td>
<td>Nursing Practice and Clinical Reasoning III: Maternity &amp; Women’s health Care **</td>
<td>Nursing interventions used in health promotion, risk reduction, and clinical decision making and management. Women’s health issues, perinatal care of mothers and infants, and gynecological health. Men’s reproductive health. Didactic and clinical experience.</td>
</tr>
<tr>
<td>NURS 201</td>
<td>Theoretical Foundations of Nursing *</td>
<td>Evaluation and analysis of the theoretical foundation of nursing. Overview of various philosophical schools of thought, with emphasis on ontology and epistemology toward development of a framework for practice.</td>
</tr>
<tr>
<td>NURS 119</td>
<td>Patient Safety and Quality</td>
<td>The processes and skills needed to provide safe, high-quality nursing care. Critical competencies of patient-centered care, teamwork and collaboration, evidence based practice, quality improvement, safety, and informatics.</td>
</tr>
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</table>

#### Summer, Semester 3

<table>
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<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Descriptions</th>
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</thead>
<tbody>
<tr>
<td>NURS 116</td>
<td>Nursing Practice and Clinical Reasoning IV: Children and Families **</td>
<td>Focus on families with usual childhood issues and with children who require acute and chronic care. Working with persons of diverse backgrounds, nursing colleagues, and other members of the interdisciplinary team, students prioritize and provide nursing care in hospital and community-based settings. Didactic and clinical experience.</td>
</tr>
<tr>
<td>NURS 117</td>
<td>Nursing Practice and</td>
<td>Introduction to principles of</td>
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## APPENDIX 5: Bachelor of Science in Nursing Program of Study

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<tr>
<td></td>
<td>Clinical Reasoning V: Epidemiology and Community Health Nursing **</td>
<td>Epidemiology and the roles and responsibilities of nurses in population-based health systems. Emphasis on vulnerable populations locally, nationally, and globally. Epidemiologic, demographic, economic, and environmental health factors used to identify community-oriented strategies aimed at primary, secondary, and tertiary levels of prevention. Didactic and clinical experience.</td>
</tr>
<tr>
<td></td>
<td>NURS 203 Nursing Leadership *</td>
<td>Through a self-reflection process, students learn evidence-based leadership skills as a core competency in nursing to improve quality in patient care and to strengthen nursing as a profession. Theories of leadership, skills building through mentoring and communication, team building techniques, and related topics.</td>
</tr>
<tr>
<td></td>
<td>CML 203 Health Information, Quality and Outcomes *</td>
<td>Approaches to medical informatics to support managerial decision making, patient care, and quality improvement in clinical practices. Ethical, legal, and social dimensions of health care information technology.</td>
</tr>
<tr>
<td></td>
<td>HSCI 270 Research Methods for Health Professionals</td>
<td>Methodological issues of basic, applied, and clinical research. Students develop the knowledge and skills to critically appraise and synthesize research results, analyze qualitative and quantitative data, evaluate evidence-based methods, develop research questions, and identify appropriate inquiry methodologies. Students become familiar with all elements of a research proposal, including those relating to the use of human subjects and informed consent.</td>
</tr>
<tr>
<td></td>
<td>NURS 120 Capstone Experience (Transition into practice)**</td>
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</table>

*Courses with an asterisk are graduate-level, web-based learning that may be applied to the MSN.

**Courses with two asterisks have a clinical practicum, and each rotation will require the student to have reliable transportation to the clinical site (an agency within the DC metropolitan region).
### MSN Program of Study with Course Descriptions

#### Core Courses for all MSN Programs

<table>
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<tr>
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<tr>
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<td>Nursing Leadership</td>
<td>Through a self-reflection process, students learn evidence-based leadership skills as a core competency in nursing to improve quality in patient care and to strengthen nursing as a profession. Theories of leadership, skills building through mentoring and communication, team building techniques, and related topics.</td>
</tr>
<tr>
<td>NURS 201</td>
<td>Theoretical Foundations of Nursing</td>
<td>Evaluation and analysis of the theoretical foundation of nursing. Overview of various philosophical schools of thought, with emphasis on ontology and epistemology toward development of a framework for practice.</td>
</tr>
<tr>
<td>NURS 202</td>
<td>Concepts in Population Health</td>
<td>Integration and synthesis of concepts associated with quality of care, health promotion, disease prevention, and chronic health problems in communities, the general population, and specific population groups. Issues of culturally diverse and vulnerable populations.</td>
</tr>
<tr>
<td>HSci 241</td>
<td>The Health Care Enterprise</td>
<td>An overview of global business principles related to health care systems: management of patient-centered care delivery; marketing, finance, and fiscal management principles; information, technology, and quality improvement.</td>
</tr>
<tr>
<td>HSci 270</td>
<td>Research I</td>
<td>Methodological issues of basic, applied, and clinical research. Students develop the knowledge and skills to critically appraise and synthesize research results, analyze qualitative and quantitative data, evaluate evidence-based methods, develop research questions, and identify appropriate inquiry methodologies. Students become familiar with all elements of a research proposal, including those relating to the use of human subjects</td>
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</table>
and informed consent.

**HSci 271**  
Research II  
Methodological issues of basic, applied, and clinical research. Students develop the knowledge and skills to critically appraise and synthesize research results, analyze qualitative and quantitative data, evaluate evidence-based methods, develop research questions, and identify appropriate inquiry methodologies. Students become familiar with all elements of a research proposal, including those relating to the use of human subjects and informed consent.

**NURS 275**  
Leadership and Change in Nursing (*CRA and NLM only*)  
A capstone course focusing on the concept of leadership within the contexts of health professionals, health systems, and health policy.

### Clinical Research Administration for Nurses Major Courses

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRA 201 –</td>
<td>Critical Analysis in Clinical Research (3)</td>
<td>Critical analysis and integration of the clinical practices and research procedures required to meet GCP, GLP, IRB, regulatory, and medical requirements in the development of new therapeutics, diagnostics, vaccines, and practices that improve health care delivery.</td>
</tr>
<tr>
<td>CRA 202 –</td>
<td>Clinical Trials Management (3)</td>
<td>Analysis of the principles, policies, and practices that impact clinical trials and the development of products within clinical research administration. Framework of the course integrates the regulatory and project management perspectives.</td>
</tr>
<tr>
<td>CRA 203 –</td>
<td>Partnership with Human Subjects (3)</td>
<td>Evaluation of the strategies and regulations applied to recruitment, retention, and compliance of participants who enroll in clinical research projects.</td>
</tr>
<tr>
<td>CRA 204 –</td>
<td>Clinical Research Industry (3)</td>
<td>Analysis of the stakeholders within the clinical research industry and how these stakeholders interact to deliver products, services, and results across</td>
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<tr>
<td>Health Care Systems Course</td>
<td>Course Name</td>
<td>Course Description</td>
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<tr>
<td>Elective (3)</td>
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<td>Total credits = 36</td>
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### Nursing Leadership and Management Major Courses

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<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPM 202</td>
<td>Human Resource Management (3)</td>
<td>Impact of demographic, legal, and regulatory change on personnel management practices in clinical organizations. The role of the supervisor in developing and implementing effective strategies for recruitment, retention, and organizational development.</td>
</tr>
<tr>
<td>CPM 203</td>
<td>Health Information Systems, Quality, and Outcomes Assessment (3)</td>
<td>Approaches to medical informatics to support managerial decision making, patient care, and quality improvement in clinical practices. Ethical, legal, and social dimensions of health care information technology.</td>
</tr>
<tr>
<td>HCQ 202</td>
<td>The Health Care Quality Landscape (3)</td>
<td>Analysis of quality and patient safety challenges in U.S. health care with a focus on political and environmental influences.</td>
</tr>
<tr>
<td>NURS 274</td>
<td>Health Economics and Finance (3)</td>
<td>Issues of health care economics, financial management, and budgeting that relate to managerial decision making. Applied financial management, management control systems, budgeting, staffing, and cost accounting.</td>
</tr>
<tr>
<td>Elective (3)</td>
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<td>Total credits = 36</td>
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### Family Nurse Practitioner Major Courses

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Course Description</th>
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<tbody>
<tr>
<td>HSci 234</td>
<td>Pharmacology (3)</td>
<td>System-focused advanced physiology and pathophysiology, analyzing health</td>
</tr>
<tr>
<td>NURS 220</td>
<td>Advanced Physiology and</td>
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</tr>
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</table>
### Pathophysiology (3)
- **NURS 222**: Advanced Health Assessment and Diagnostic Reasoning (3)  
  Development of skills needed to collect data for comprehensive health assessments. Advanced health assessment and diagnostic reasoning skills are applied during a clinical practicum.

### Primary Care Seminar (2)
- **NURS 223**: Primary Care Seminar (2)  
  Integration of content from pathophysiology, pharmacology, health assessment, and diagnostic reasoning with primary care management principles.

### Family Nurse Practitioner I (8)
- **NURS 230**: Family Nurse Practitioner I (8)  
  First clinically based course for family nurse practitioner students. Didactic and clinical experiences in primary care, focusing on common and chronic problems across the lifespan.

### Family Nurse Practitioner II (8)
- **NURS 231**: Family Nurse Practitioner II (8)  
  Second clinically based course for family nurse practitioner students. Didactic and clinical experiences in family nurse practitioner care focusing on common and chronic problems across the lifespan.

### Family Nurse Practitioner III (3)
- **NURS 232**: Family Nurse Practitioner III (3)  
  Seminar and clinical practicum that focuses on professional issues for family nurse practitioners. Role development, certification, ethical issues in practice, interprofessional collaboration, and health-care reimbursement issues are discussed and related to current clinical experiences.

**Total credits = 48**

### Adult Nurse Practitioner Major Courses

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
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<tr>
<td>HSci 234</td>
<td>Pharmacology (3)</td>
<td>System-focused advanced physiology and pathophysiology, analyzing health</td>
</tr>
<tr>
<td>NURS 220</td>
<td>Advanced Physiology and Pathophysiology (3)</td>
<td>System-focused advanced physiology and pathophysiology, analyzing health</td>
</tr>
<tr>
<td>NURS 222</td>
<td>Advanced Health Assessment and Diagnostic Reasoning (3)</td>
<td>Development of skills needed to collect data for comprehensive health assessments. Advanced health assessment and diagnostic reasoning</td>
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## APPENDIX 6: Master of Science of Nursing Program of Study

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<th>Course Code</th>
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<tr>
<td>NURS 223</td>
<td>Primary Care Seminar (2)</td>
<td>Integration of content from pathophysiology, pharmacology, health assessment, and diagnostic reasoning with primary care management principles.</td>
</tr>
<tr>
<td>NURS 224</td>
<td>Primary Care of the Adult Patient (8)</td>
<td>Advanced concepts of primary care conditions in the adult patient.</td>
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<tr>
<td>NURS 225</td>
<td>Assessment and Management of the Adult and Older Adult (8)</td>
<td>Theoretical and practical foundations of primary care of the adult and older adult with chronic health problems. Advanced decision making, health assessment, health promotion, diagnosis, and patient management, including those from culturally diverse backgrounds.</td>
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Total credits = 45
# Doctor of Nursing Practice: Post Master’s

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<td>Nurs 202</td>
<td>Concepts in Population</td>
<td>Integration and synthesis of concepts associated with quality of care, health promotion, disease prevention, and chronic health problems in communities, the general population, and specific population groups. Issues of culturally diverse and vulnerable populations.</td>
</tr>
<tr>
<td>Nurs 401</td>
<td>Organizational and Interdisciplinary Concepts in Nursing</td>
<td>The knowledge and skills nurses need to contribute to shaping the future of health care. Health care delivery systems, the nurse's role in interprofessional/interdisciplinary teams, and organizational development from a nursing perspective</td>
</tr>
<tr>
<td>Nurs 402</td>
<td>Knowledge Management in Healthcare</td>
<td>The use of knowledge management and information technology as it applies to health care. Develop strategies to improve the efficiency and effectiveness of health care with the use of technology</td>
</tr>
<tr>
<td>Nurs 403</td>
<td>Translating Research Into Practice</td>
<td>This course outlines models and processes of evidence-based practice, describes strategies to translate evidence into practice, and includes tools useful for promoting practices in health care settings. Systematic reviews, evidenced based practice guidelines, meta-synthesis and meta-analyses will be evaluated and strategies for application of findings discussed. The project will involve the completion of a quantitative synthesis of research problem</td>
</tr>
<tr>
<td>Nurs 404</td>
<td>Health Services Research &amp; Policy for Nurses</td>
<td>Methods for evaluating the effectiveness, efficiency, and equity of health care and nursing services delivery. Approaches to measuring the relevant structure, process, and outcome variables that can be used to address effectiveness, efficiency, and equity issues are presented.</td>
</tr>
<tr>
<td>Course</td>
<td>Title</td>
<td>Description</td>
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</tr>
<tr>
<td>Nurs 405 (3)</td>
<td>Healthcare Quality Improvement</td>
<td>Throughout the course, linkages are made between nursing, health care policies and related health services research. This course provides a multidisciplinary background for the science of health care quality management. The goal of this course is to equip DNP students with the ability to contribute to continual improvement in health care through case studies and data analysis exercises. Students will be given the opportunity to learn about current quality issues, intervention strategies, as well as analysis of data that contribute to continuous quality improvement.</td>
</tr>
<tr>
<td>HSci 241 (3)</td>
<td>The Health Care Enterprise</td>
<td>An overview of global business principles related to health care systems: management of patient-centered care delivery; marketing, finance, and fiscal management principles; information, technology, and quality improvement.</td>
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<tr>
<td>Nurs 498 (3)</td>
<td>Clinical Research Project Proposal</td>
<td>A proposal for a clinical research project is developed through interaction with the student’s advisory committee. The final product is a presentation of the proposal to the advisory committee.</td>
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<tr>
<td>Nurs 499 (6)</td>
<td>Clinical Research Project</td>
<td>An individual investigation of a clinical problem with relevance to the student’s practice setting. Students work under the direction of a faculty committee to prepare a written and oral report of their findings.</td>
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<tr>
<td>Electives (6)</td>
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<tr>
<td>Total credits = 36</td>
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</table>
May 1, 2006

Ellen M. Dawson, PhD, ANP
Chair and Associate Professor
Department of Nursing Education
The George Washington University
510 23rd Street, NW, Suite 6167 B
Washington, DC 20037

Dear Dr. Dawson:

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am pleased to advise you that the CCNE Board of Commissioners acted at its meeting on April 8, 2006, to grant accreditation of the master's degree program in nursing at The George Washington University for a term of 5 years, extending to June 30, 2011. You should plan for the next on-site evaluation to take place in the fall of 2010.

At its meeting, the Board determined that the program met all four accreditation standards. The Board additionally determined that there are no compliance concerns with respect to the key elements.

As is required for all accredited programs, the Board requested that the program submit a continuous improvement progress report at the mid-point of the accreditation term. That report should address the nursing program's continued compliance with all accreditation standards. The deadline for submitting the progress report to CCNE is June 30, 2009. The Report Review Committee, and then the Board of Commissioners, will review the progress report in the fall of 2009. For more information about the continuous improvement progress report, please refer to the CCNE procedures.

A copy of the accreditation report that was sent to you earlier, along with your response to it, is being transmitted to the institution's chief executive officer as the Commission's official report to The George Washington University. We hope that both the results of your self-study process and the accreditation report will be useful to the continued growth and development of the nursing program. A certificate of accreditation is enclosed.

As a reminder, programs are expected to continue to comply with the CCNE standards and procedures throughout the period of accreditation. This includes advising CCNE in the event of any substantive change in your nursing program or of any major organizational changes that may affect the program's administration, scope or quality. These reporting requirements are discussed further in the CCNE procedures.
APPENDIX 8: Collegiate Commission on Nursing Education GW Accreditation

We appreciate the many courtesies and the helpfulness extended to the CCNE evaluation team in the fall of 2005. The Commissioners join me in expressing our best wishes as you proceed with tasks important to the future of your nursing program.

Sincerely,

Jill B. Derstine, EdD, RN, FAAN
Chair, Board of Commissioners

cc: President Stephen Joel Trachtenberg
    CCNE Board of Commissioners
    CCNE Accreditation Review Committee
    CCNE Evaluation Team
### Faculty Appointments Categorized by Employment Status

<table>
<thead>
<tr>
<th>Full-time Faculty in Department of Nursing Education</th>
<th>Regular Part-time Faculty</th>
<th>Research Funded Faculty</th>
<th>Adjunct Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jean Johnson</td>
<td>Malliarakis, Kathleen</td>
<td>Janet Bull Assistant</td>
<td>Randi Abramson</td>
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<tr>
<td>Professor (1FTE)</td>
<td>Assistant Professor</td>
<td>Assistant Professor</td>
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<tr>
<td>Regular Appointment</td>
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<td>Malliarakis, Kathleen</td>
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<tr>
<td>Janet Bull</td>
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<tr>
<td>Assistant Professor</td>
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<tr>
<td>Allen Kurtzman</td>
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<tr>
<td>Adjunct Faculty</td>
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<tr>
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<td>Brenda Sheingold  Assistant Professor (1FTE) Regular Appointment</td>
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<td>Vacancy  (1 FTE) Regular Appointment</td>
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</table>
# APPENDIX 10: Draft Bylaws

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**THE GEORGE WASHINGTON UNIVERSITY**

---

**THE GW SCHOOL OF NURSING**

---

Bylaws of The Faculty of The GW School of Nursing

<table>
<thead>
<tr>
<th>Article</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Name of the Organization</td>
<td>2</td>
</tr>
<tr>
<td>II</td>
<td>Purpose of the Bylaws</td>
<td>2</td>
</tr>
<tr>
<td>III</td>
<td>Membership in the Faculty</td>
<td>2</td>
</tr>
<tr>
<td>IV</td>
<td>Authority of the Faculty</td>
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<tr>
<td>V</td>
<td>Meetings of the Faculty</td>
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<tr>
<td>VI</td>
<td>Standing Committees</td>
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<td>Committee on Evaluation</td>
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<td>Committee on Curriculum</td>
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<td>X</td>
<td>Appointment, Promotion, and Tenure Committee</td>
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<td>XI</td>
<td>Decanal Search Committee</td>
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<td>XII</td>
<td>Special Committees of the Faculty</td>
<td>14</td>
</tr>
<tr>
<td>XIII</td>
<td>Amendments to the Bylaws</td>
<td>14</td>
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<td>Publication of Bylaws</td>
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<td>XV</td>
<td>Addenda</td>
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<tr>
<td>ADDENDUM A</td>
<td>Criteria for Tenure and Promotion in The GW School of Nursing</td>
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<tr>
<td>ADDENDUM B</td>
<td>Procedures for Tenure and Promotion Decisions of the Appointment, Promotion and Tenure Committee of The GW School of Nursing</td>
<td>20</td>
</tr>
</tbody>
</table>
APPENDIX 10: Draft Bylaws

I: NAME OF THE ORGANIZATION

The Faculty of The George Washington University School of Nursing, hereafter referred to as “the School.”

II. PURPOSE OF BYLAWS

These Bylaws set forth the structures and procedures by which the Faculty of the School define their authority to formulate and fulfill their educational policies and programs. They shall not contravene regulations established by the Trustees, the University, or the Faculty Code.

III: MEMBERSHIP IN THE FACULTY

(A) Grades of Academic Personnel

Congruent with the Faculty Code, the grades of academic personnel are:

(1) Retired Status: University professor emeritus, professor emeritus, professor emeritus in residence, associate professor emeritus, associate professor emeritus in residence, and retired (in any given rank for age or disability).

(2) Active Status
   (i) Regular: University professor, professor, associate professor, assistant professor, and instructor. Each of the regular, active-status ranks may be tenure-accruing or non-tenure-accruing as specified in the original letter of appointment. However, the proportion of regular, active-status faculty serving in non-tenure-accruing appointments shall not exceed 25 percent in the School, nor shall any department (if department exist) have fewer than 50 percent of its regular, active-status faculty appointments either tenured or tenure-accruing.

   (ii) Limited Service: Adjunct professor, adjunct associate professor, adjunct assistant professor, adjunct instructor, clinical professor, professorial lecturer, associate clinical professor, associate professorial lecturer, assistant clinical professor, assistant professorial lecturer, clinical instructor, lecturer, studio instructor, special lecturer, fellow, teaching fellow, and graduate teaching assistant.

   (iii) Visiting: Visiting professor, visiting associate professor, visiting assistant professor, and visiting instructor.

   (iv) Research Staff: Members of the research staff may be appointed, upon recommendation of the appropriate faculty and officers of the administration, as research professor, associate research professor,
assistant research professor, and research instructor. Such appointments do not provide tenure.

(v) Special Service: Special service faculty may be appointed, upon recommendation of the appropriate faculty and officers of the administration, as teaching professor or program administrator or with such other special service faculty designation as may be approved by the Provost, in order to fulfill special teaching or program administration or development needs. Such appointments do not provide tenure, and special service faculty are not expected to generate productive scholarship.

(B) Voting

(1) Voting membership in the School shall extend to all persons whose primary appointments are active status, regular appointees with the title of University Professor, Professor, Associate Professor, Assistant Professor, Instructor, hereafter referred to as “the Faculty.”

(2) Ex officio membership (non-voting) shall be accorded to the President of the University, the Provost, and emeritus Faculty.

(3) Special service faculty may be appointed, upon recommendation and approval by the Dean, as teaching professor or program administrator or with such other special service faculty designation as may be approved by the Provost, in order to fulfill special teaching or program administration or development needs. Such appointments do not provide tenure or voting rights within the Faculty of the School.

IV. AUTHORITY OF THE FACULTY

The Faculty, working closely with the Dean, shall determine and direct all matters relating to educational policies and programs leading to degrees in the School. The Faculty shall:

(A) Elect members of all standing committees

(B) Decide the eligibility of candidates to receive degrees before every convocation;

(C) Elect representatives to the Faculty Senate in accordance with the Faculty Organization Plan;

(D) Elect members of special committees as deemed necessary and appropriate;
(E) Participate in the search for a Dean as warranted and as provided by the University Faculty Code;

(F) Approve the guidelines for promotion and tenure as recommended by the Appointment, Promotion, & Tenure Committee;

(G) Participate in the formulation of policy and planning decisions affecting the quality of education and life at the University. This participation includes an active role in the development, revision, or elimination of curricular offerings of the School.

(H) Make recommendations on proposals concerning the creation, consolidation, or elimination of departments, institutes, or other academic or research units making up a part of the School.

Faculty duties are not exhausted by the aforementioned.

V: MEETINGS OF THE FACULTY

(A) Stated meetings of the Faculty shall be held at least twice in the fall semester and twice in the spring semester. The Dean shall determine the dates and times of stated meetings and shall so notify the Faculty at the beginning of each Academic Year.

(B) Special meetings of the Faculty may be called by the President of the University, the Provost, or the Dean of the School. In addition, if at least fifty percent of the members of the Faculty present a written petition to the Dean specifying a proposed agenda, the Dean shall convene a special meeting of the Faculty.

(C) Notice of Faculty meetings, stated or special, with agenda and the texts of all resolutions to be voted upon, shall be distributed to all members of the Faculty at least seven days before each meeting. (The seven days include weekends.)

(D) Attendance at Meetings: Attendance shall be open to all persons whose membership in the Faculty is defined by Article III. Persons other than members of the Faculty may attend specific meetings at the invitation of the President of the University, the Provost, the Dean, or the Dean's designated representative. The Faculty as defined by Article III may, however, vote itself into executive session at any time by majority vote.

(E) A quorum consists of a number equivalent to one-half of the Faculty (as defined by Article III) of the School.

(F) The Dean or the Dean's designated representative shall chair Faculty meetings.

(G) Order of Business: At any stated meeting, the Faculty may by two-thirds majority vote take action on any resolution not previously included on the agenda. Otherwise,
Roberts Rules of Order, Revised, shall be used as the authority for the conduct of meetings of the Faculty and shall inform all voting procedures.

(H) A slate of candidates for the role of Parliamentarian shall be solicited and compiled annually by the Dean and elected by the Faculty. During meetings, the chair or any member of the Faculty may turn to the Parliamentarian for advice on a ruling or on proper methods of procedure.

(I) A Secretary to the Faculty shall be nominated annually by the Dean and elected by the Faculty. The Secretary's principal responsibilities shall be to publish these Bylaws, to assist the Dean in the preparation of meeting agendas and schedules to comply with these Bylaws, and to keep written minutes of meetings, including the full text of matters voted upon. A staff member within the School will be designated to support the Secretary in scheduling meetings and taking minutes. The Secretary shall also be responsible for maintaining the list of allocations of departments or programs, as necessary and appropriate. Minutes and texts shall be distributed to the Faculty through the office of the Dean as soon as possible after meetings. The Secretary shall monitor faculty elections.

VI. STANDING COMMITTEES

Although actions taken at meetings of the Faculty are determinative, the Faculty delegate much of their authority to Standing Committees, whose composition, mode of election, and authority are specified below. Terms of membership shall begin and end on July 1. No member shall serve more than two consecutive two-year terms. The Dean or the Dean's representative shall be an ex officio (non-voting) member of all committees. The Dean or the Dean's representative shall convene the first meeting each year of each committee, at which a chair for the year shall be elected for those that require a Chair other than the Dean or Dean's representative. A simple majority of the members of a committee will be a quorum.

Within their charters, Standing Committees may make recommendations to the Dean or to the Faculty. When they take actions on behalf of the Faculty, they must report these actions to the Faculty at regular intervals, normally at the next stated meeting, and must submit an annual report at the last stated meeting of the academic year.

VII. SCHOOL ELECTIONS

University Faculty Senate Representatives
The GW School of Nursing is entitled to elect 1 representative to membership on the University Faculty Senate. Sections III-2 of the Faculty Organization Plan stipulates that persons elected to the Senate: (1) shall serve a two-year term, beginning on May 1 of the year in which they are elected, and (2) must hold the rank of associate professor or above and have tenure as of the academic year next succeeding the date of their election.

(A) Procedures for Nomination and Election
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(1) At the last stated meeting of the full semester (usually held in December), the Faculty shall present at least two nominees for each Senate vacancy from the floor.

(2) The names and biographies of the persons so nominated shall be circulated to the Faculty with the call for the first stated meeting of the new calendar year, which shall be held no later than the end of February.

(3) At that meeting, election shall be held by secret ballot. To be elected, nominees must receive a majority of the votes cast.

(4) The results of the election shall be announced in a timely and appropriate manner and transmitted by the Dean to the Executive Committee of the University Faculty Senate.

(5) Should a vacancy occur in the School’s representation on the Faculty Senate, the Faculty may elect a representative to serve the remainder of the term of the office vacated. In that event, the Faculty shall present two nominations for any such vacancy (along with appropriate biographies) along with the agenda to the next stated meeting of the Faculty. Additional nominations shall be permitted from the floor at that meeting. The election shall then take place as specified in (3).

Medical Center Faculty Senate Representatives

(A) The GW School of Nursing is entitled to elect representative(s) to membership on the Medical Center Faculty Senate in proportion to the number of faculty in the School. Schools (or departments, if departments are in existence) having five or more faculty members as defined in 3(a) of the Medical Center Faculty Organization Plan but less than twenty may elect one Senate member. Schools or departments having twenty or more faculty members as defined in 3(a) but less than fifty may elect two Senate members. Schools or departments having fifty or more faculty members as defined in 3(a) may elect three Senate members. In addition, the School is entitled to elect four faculty members from and by the faculty in the GW School of Nursing to serve on the Medical Center Faculty Senate Executive Committee.

(B) Article III Section 2-C of the Medical Center Faculty Organization Plan stipulates that the term of office for faculty members of the Senate shall be three years beginning July 1, save that in the first election following the adoption of these amendments, members shall serve a period of one, two, or three years to be decided by lot as to provide for the annual election of one-third of the faculty members of the Senate. All members of the Medical Center Faculty Assembly, save those holding academic administrative appointments in the rank of Dean,
Associate Dean or Assistant Dean, shall be eligible for election to the Medical Center Faculty Senate.

(C) Article III Section 2-A of the Medical Center Faculty Organization Plan stipulates that all members of the Medical Center Faculty Assembly, save those holding academic administrative appointments in the rank of Dean, Associate Dean or Assistant Dean, shall be eligible for election to the Medical Center Faculty Senate.

(1) The voting membership of the Medical Center Faculty Assembly consist of all faculty members in the following grades of academic service: (1) Professor, Associate Professor, Assistant Professor, Instructor; (2) Clinical Professor, Professorial Lecturer, Associate Clinical Professor, Associate Professorial Lecturer, Assistant Clinical Professor, Clinical Instructor, Lecturer, Special Lecturer, Adjunct Professor, Adjunct Associate Professor, Adjunct Assistant Professor, Adjunct Instructor; and (3) Research Professor, Associate Research Professor, Assistant Research Professor, Research Instructor.

(C) Procedures for Nomination and Election

(1) At the last stated meeting of the full semester (usually held in December), the Faculty shall present at least two nominees for each Senate vacancy. In addition, the floor shall then be open for additional nominations.

(2) The names and biographies of the persons so nominated shall be circulated to the Faculty with the call for the first stated meeting of the new calendar year, which shall be held no later than the end of February.

(3) At that meeting, election shall be held by secret ballot. To be elected, nominees must receive a majority of the votes cast.

(4) The results of the election shall be announced in a timely and appropriate manner and transmitted by the Dean to the Executive Committee of the Medical Center Faculty Senate.

(5) Should a vacancy occur in the School’s representation on the Medical Center Faculty Senate, the Faculty may elect a representative to serve the remainder of the term of the office vacated. In that event, they shall present two nominations for any such vacancy (along with appropriate biographies) along with the agenda to the next stated meeting of the Faculty. Additional nominations shall be permitted from the floor at that meeting. The election shall then take place as specified in (3).
(6) Faculty in the School may also serve as members of standing committees of the Medical Center Faculty Center as specified in the *Medical Center Faculty Organization Plan*.

VIII. COMMITTEE ON EVALUATION

(A) The Committee on Evaluation, in consultation with the Senior Associate Dean, shall serve as the principal body to act on, advise, and provide oversight for matters pertaining to the evaluation of the programs of the School. The Committee shall be composed as follows:

(1) Seven members of Instructor or higher in rank shall be elected.

(2) Three members shall be elected from the undergraduate programs, three members shall be elected from the graduate programs, and one member shall be elected from the faculty as a whole as an at-large member.

(3) Members are elected for three-year terms of office, staggered, and may be re-elected for one additional term.

(4) The Dean and Senior Associate Dean shall be members *ex officio*.

(5) In addition to the 7 elected members of the committee, five or fewer administrative appointments may be made to the committee.

(6) Two student representatives shall be appointed to the committee – one from the undergraduate programs and one from the graduate programs of the School.

(7) Chair shall be selected from the voting members of the committee at the first meeting of the academic year (called by the Senior Associate Dean).

(8) Replacement of members: If a Committee member is unavailable for any significant part of the year, the member's term shall be forfeited and he/she shall be replaced for the remainder of the term according to the selection process.

(B) The Committee on Evaluation is charged with:

(1) Developing, implementing and monitoring the School’s evaluation plan;

(2) Tracking and reporting outcomes of the School’s programs;

(3) Reviewing student issues and concerns regarding grades, grade appeals, and the evaluation of student progress through the academic programs of the School;

(4) Other duties as assigned.
(C) All activities of the Committee on Evaluation shall be coordinated with other advising bodies whenever multiple decisions are to be made.

(D) Provision for Faculty Review of Actions by the Committee on Evaluation:
At least once each semester the Committee shall file a written report summarizing its actions, to be transmitted to the Faculty with the call for their next stated or special meeting. At such meetings, any voting member of the Faculty may appeal any policy reported by the Committee. The Faculty shall immediately consider the appeal and shall decide by majority vote whether to accept it. If the Faculty agree to a motion to review any policy, but postpone hearing the challenge until a later date, they shall also decide whether the challenged policy is to be suspended or left in force until the challenge is affirmed, amended, or rejected by majority vote. All decisions pertaining to the curriculum are subject to review and approval of the Faculty as a whole.

IX: COMMITTEE ON CURRICULUM

(A) The Committee on Curriculum, in consultation with the Senior Associate Dean, shall serve as the principal body to act on, advise, and provide oversight for matters pertaining to the evaluation of the programs of the School. The Committee shall be composed as follows:

(1) Seven members of Instructor or higher in rank shall be elected.

(2) Three members shall be elected from the undergraduate programs, three members shall be elected from the graduate programs, and one member shall be elected from the faculty as a whole as an at-large member.

(3) Members are elected for three-year terms of office, staggered, and may be re-elected for one additional term.

(4) The Dean and Senior Associate Dean shall be members ex officio.

(5) In addition to the 7 elected members of the committee, five or fewer administrative appointments may be made to the committee.

(6) Two student representatives shall be appointed to the committee – one from the undergraduate programs and one from the graduate programs of the School.

(7) Chair shall be selected from the voting members of the committee at the first meeting of the academic year (called by the Senior Associate Dean).

(8) Replacement of members: If a Committee member is unavailable for any significant part of the year, the member's term shall be forfeited and he/she shall be replaced for the remainder of the term according to the selection process.
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(9) Two standing subcommittees will be convened to consider issues particular to the undergraduate and graduate curricula, respectively.

(B) The Committee on Curriculum is charged with:

(1) Considering and acting on all matters of undergraduate and graduate study, including new program and course proposals, major changes in existing programs and courses, and other matters significantly affecting the curriculum.

(2) Reviewing and evaluating, on a regular basis, the programs and courses within the undergraduate and graduate curriculum;

(3) Assessing, reviewing, and developing new proposals for Core Curriculum Requirements;

(4) Reviewing and approving all proposals for new programs, discontinuation of existing programs, and substantial revision of existing programs;

(5) Undertaking reviews/studies, at the request of the Dean, on matters concerning the undergraduate and graduate curriculum: e.g., advising, Departmental Honors to their graduates, etc;

(6) Advising the Senior Associate Dean on selection and recognition of outstanding undergraduate and graduate students; and

(7) Other duties as assigned.

(C) All activities of the Committee on Curriculum shall be coordinated with other advising bodies whenever multiple decisions are to be made.

(D) Provision for Faculty Review of Actions by the Committee on Curriculum:
At least once each semester the Committee shall file a written report summarizing its actions, to be transmitted to the Faculty with the call for their next stated or special meeting. At such meetings, any voting member of the Faculty may appeal any policy reported by the Committee. The Faculty shall immediately consider the appeal and shall decide by majority vote whether to accept it. If the Faculty agree to a motion to review any policy, but postpone hearing the challenge until a later date, they shall also decide whether the challenged policy is to be suspended or left in force until the challenge is affirmed, amended, or rejected by majority vote. All decisions pertaining to the curriculum are subject to review and approval of the Faculty as a whole.
X: APPOINTMENT, PROMOTION AND TENURE COMMITTEE

(A) To implement the procedures required in Sections B.3 and C.2 of the *University Faculty Code*, the School shall establish a school-wide personnel committee (hereafter referred to as the Appointment, Promotion and Tenure Committee) as an elected standing committee of the School Faculty to consider recommendations for appointments with tenure, for promotion, or for tenure of regular full-time faculty. Such committees may request additional information, documentation, or clarification respecting such recommendations. Congruent with the *University Faculty Code*, tenure shall be dependent upon professional competence as evidenced by teaching ability, productive scholarship, participation and leadership in professional societies, service to the School and University, and public service. Upon a specific showing that the academic needs of the School and/or University have changed with respect to a particular position, that factor may also be considered in determining whether tenure shall be granted.

The Appointment, Promotion and Tenure Committee, sitting in review of recommendations originating from a department or equivalent unit, shall advise the Dean of the School whether the candidate has met the relevant School criteria and whether it has identified any "compelling reasons" that may exist for not following the departmental recommendation. Such advisories shall not be construed as "faculty recommendations" as defined by Section B.3 of the Procedures for Implementation of the Faculty Code. Only departmental recommendations (or, in the absence of departments or department chairs, the recommendation of the Senior Associate Dean) and not the Committee's advisories, shall constitute a "faculty recommendation" in the sense of the "Procedures for Implementation of the Faculty Code," paragraph B, any departure from which requires that an administrative officer give "compelling reasons."

(1) During the five-year period immediately following the establishment of the School by the Board of Trustees, the School will use the School of Medicine and Health Sciences Appointment, Promotion and Tenure Committee as its APT Committee.

(2) At the beginning of the sixth year following the establishment of the School by the Board of Trustees, the Faculty of The GW School of Nursing will elect five of its tenured members to two-year terms on the Appointment, Promotion and Tenure Committee, staggered so that at least two members are elected in each year. Membership will normally include at least one member of the Faculty from each of the undergraduate, masters, and DNP faculties. At such time, when the School has recommendations for actions other than appointments concerning instructors, assistant professors, or associate professors, these recommendations shall be determined by the tenured members of the faculty of higher rank or of equal and higher rank, as the faculty may have determined by previously established procedures. Recommendations for actions other than appointments
concerning professors shall be determined by tenured members of the rank of professor.

(3) Chair shall be selected from among the committee members at the first meeting of the academic year (called by the Dean).

(4) The Faculty will nominate persons to this committee for election by the Faculty at its stated meeting in April.

(5) The Dean may appoint an associate dean to act as convener and chief administrative officer of the committee.

(6) Positive recommendations for promotion and tenure require the concurrence of a majority of committee members making up the quorum.

(B) The Appointment, Promotion and Tenure Committee shall:

(1) develop, subject to Faculty approval, the criteria for promotion and tenure in the School and the procedures under which the Committee shall perform its functions. These criteria and procedures shall be published as Addenda to these Bylaws.

(2) review the applications of all faculty candidates for promotion and tenure according to the published guidelines, and make recommendations to the Dean concerning the recommended action on the application;

(3) review all nominations for Associate and Assistant Deanships in the School and recommend candidates for the Dean's final choice;

(4) serve as a hearing body for any regular active status member of the Faculty who requests a review of his/her department's decision not to recommend reappointment, promotion, or tenure for reasons other than alleged discrimination based on ethnicity, race, religion, gender, sexual orientation, or other factors prohibited by law. The Committee shall inform the Dean of its disposition of such complaints; and

(5) Provision for Faculty Review of Actions by the Appointment, Promotion and Tenure Committee: At least once each semester the Committee shall file a written report summarizing its actions, to be transmitted to the Faculty with the call for their next stated or special meeting. At such meetings, any voting member of the Faculty may appeal any policy reported by the Committee. The Faculty shall immediately consider the appeal and shall decide by majority vote whether to accept it. If the Faculty agree to a motion to review any policy, but postpone hearing the challenge until a later date, they shall also decide whether the challenged policy is to be suspended or left in force until the challenge is affirmed, amended, or rejected by majority vote.
XI. DECANAL SEARCH COMMITTEE

Whenever the Provost shall request the Faculty to establish a Search Committee for the Dean, the incumbent Dean shall be responsible for implementing the following procedures:

(A) Size and composition of the Search Committee: From among the tenured Faculty of the School holding a rank of Associate Professor or above, there shall be elected a total of seven members. The Search Committee is encouraged to include non-voting members such as the Provost or a designated representative thereof, a Board of Trustees member, a School alumni member, at least one undergraduate student, and at least one graduate student.

(B) Procedures for the election of the Search Committee:

(1) Nominations: Each Faculty member of the School shall be invited to nominate one Faculty member for the Search Committee.

(2) Voting

   (a) A ballot shall be formed from the top six nominees who do not refuse assent to having their names placed in nomination.

   (b) Each Faculty member may vote for three candidates.

   (c) Only a plurality is needed to win; runoff elections will be held in case of a tie.

(3) Further Procedural Stipulations for the Election of the Search Committee:

   (a) The Provost’s call for the election of a Search Committee shall occur upon the permanent incapacity or resignation of the incumbent Dean, or no later than 18 months before the retirement of the incumbent Dean.

   (b) An Elections Committee formed of members of the Faculty shall be charged with the general responsibility for supervising the election of the Search Committee.

   (c) An interval of at least one week shall be allowed the Faculty for receiving, preparing and returning the nominations and the ballots.

   (d) The Dean shall arbitrate any disputes arising from these procedures

(4) Responsibilities of the Search Committee:
(a) When the Search Committee has been elected, the Vice President for Academic Affairs shall convene its first meeting, at which the Committee shall elect its Chair.

(b) The Search Committee shall establish criteria to be used in the search for the Dean, and shall present its report of such criteria to the Faculty at a special meeting called to receive, consider, and act on the report. In addition, the Committee shall place advertisements, set appropriate deadlines, and otherwise solicit applications for the position.

(c) The Search Committee shall forward the names of its nominees who have majority approval of the Committee to the appropriate academic officer only. In the event that all nominees are rejected by the Administration, this fact shall be reported to the Faculty.

XII: SPECIAL COMMITTEES OF THE FACULTY

The Faculty may at any time establish Special Committees to assist in the attainment of its objectives. The Faculty shall determine the mode of selecting members of such committees, specify the charge to the committee, and determine whether such committees shall report their recommendations to the Faculty and/or to the Dean.

XIII. AMENDMENTS TO BYLAWS

These Bylaws may be amended by a two-thirds vote of the Faculty. Proposed amendments shall be circulated with the call for the meeting at least 7 days (including Saturdays and Sundays) prior to the date the vote will taken.

XIV. PUBLICATION OF BYLAWS

The Secretary of the Faculty shall furnish a copy of these Bylaws to every new member of the Faculty and to the Faculty Senate Office. The Secretary shall also furnish any amendments to the Bylaws promptly to each member of the Faculty and to the Faculty Senate Office.

XV. ADDENDA

Though published as separate documents, the following Addenda shall have the same force and effect as these Bylaws and be subject to the same requirements for publication, distribution, and amendment as stated herein:

(A) "Criteria for Tenure and Promotion in The GW School of Nursing"
(B) "Procedures for Tenure and Promotion Decisions of the Appointment, Promotion and Tenure Committee of The GW School of Nursing"
ADDENDUM A:
Criteria for Tenure and Promotion in The GW School of Nursing

Preamble
As the Faculty Code specifies (Section· IV.B.), "Promotion shall be dependent upon professional competence as evidenced by teaching ability, productive scholarship, participation and leadership in professional societies, service to the university, and public service." These criteria apply to all regular, active-status members of the faculty of The GW School of Nursing, as defined in the Bylaws of the School. Making judgments of academic excellence is a complex matter and cannot be reduced to a quantitative formula. The considerations applicable in individual cases cannot always be adequately described in general terms. But the criteria to be applied in all cases must represent excellence in the quality of the candidate's performance, especially as an educator and scholar. Scholarly productivity must reflect a serious and sustained commitment to the life of scholarship. Appointments, renewals, terminations, promotions, tenure, compensation, and all other term and conditions of employment shall be made solely on the basis of merit and without regard to race, color, religion, gender, national origin, age, handicap, veteran status, or sexual orientation.

(A) Tenure

A recommendation of tenure represents a judgment that a regular full-time, active-status member of the faculty can be expected to perform all professional duties well over an extended period of time. In evaluating candidates for academic tenure, the department and the Dean shall consider the following factors (see Addendum B, Procedures):

(1) Evidence of effective teaching. Examples of such evidence may include written faculty evaluations, written evaluation by students, and materials presented within an educator’s portfolio.

(2) Evidence of peer-reviewed contributions to specific disciplines or fields of study. The evidence shall be in the form of scholarly publications, public presentations of creative works, papers presented at scholarly conferences, policy papers, congressional/expert testimony on issues of importance to the field of nursing, and other forums of publication or scholarly/creative accomplishment as determined by the profession. These shall be evaluated by the appropriate faculty experts. Although applying for and obtaining grants may count positively towards meeting this criterion, it shall not be deemed necessary to have obtained research grants if the faculty member's publication record is satisfactory.

(3) Evidence of active and continuing involvement with professional and educational activities outside the classroom.
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(4) Evidence of active and continuing involvement in University affairs, particularly in areas directly related to faculty administrative responsibilities and governance, at the department, School or University level.

Tenure shall be conferred only upon faculty members who have demonstrated the capacity to grow professionally to the extent necessary to achieve senior academic rank. In recommending the tenuring of faculty members appointed to more than one academic department (i.e., where there is a split budgetary line, not a courtesy appointment), the concurrence of all departments sharing the appointment shall be solicited. In the event of disagreement among the departments, the Appointment, Promotion and Tenure Committee shall recommend to the Dean which of the recommendations should be accepted as the final faculty recommendation. In recommending the tenuring of School faculty members who have been initially elected to the faculties of other colleges or schools within the University, the opinion of the deans of those other colleges or schools shall be solicited. Upon a specific showing that the academic needs of the School have changed with respect to a particular position, that factor may also be considered in determining whether tenure shall be recommended.

(B) Promotion

A recommendation of promotion is a judgment that the faculty member deserves recognition for outstanding achievement and can be expected to continue to perform at a high level. In recommending the promotion of faculty members appointed to more than one academic department (i.e., where there is a split budgetary line, not a courtesy appointment), the concurrence of all departments sharing the appointment shall be solicited. In the event of disagreement among the departments, the Appointment, Promotion and Tenure Committee shall recommend to the Dean which of the recommendations should be accepted as the final faculty recommendation. In recommending the promotion of School faculty members who have been elected initially to the faculties of other colleges or schools within the University, the opinion of the deans of those other colleges or schools shall be solicited. In the case of non-tenure accruing (FT contract) faculty and research faculty, the weighting of the factors below should conform to their contractual agreements. In the case of research faculty, responsibilities for teaching may be met by guiding the research of graduate and undergraduate students. Congruent with the Faculty code, decisions regarding appointments, reappointments, and promotion of regular, active status faculty for non-tenure-accruing positions at a rank lower than the rank of professor may be based on published criteria that assign different weights to the factors of teaching ability, productive scholarship, and service to the University, professional societies and the public than the published criteria that would be applied to faculty members serving in tenure-accruing appointments in the applicable department or non-departmentalized school; provided, however, that none of the foregoing factors shall be assigned a weight of zero, and each regular, active-status faculty member serving in a non-tenure-accruing position shall be expected to generate evidence of teaching ability and productive scholarship; and the weights to be applied to the foregoing factors shall be based on the purpose(s) of the particular non-tenure
accruing appointments, and such weights shall be explicitly stated in the applicable letters of appointment or reappointment.

In evaluating candidates for promotion to the rank of Associate Professor, the department and the Dean shall consider the following factors:

1. Evidence of effective teaching. Examples of such evidence shall include written faculty evaluations and appropriate written evaluation by students. Evidence may also include effective guidance of the research of individual students.

2. Evidence of peer-reviewed contributions to specific disciplines or fields of study. The evidence shall be in the form of scholarly publications, public presentations of creative works, papers presented at scholarly conferences, policy papers, congressional/expert testimony on issues of importance to the nursing and/or health care, and other forums of publication or scholarly/creative accomplishment as determined by the profession. These shall be evaluated by the appropriate faculty experts.

3. Evidence of active and continuing involvement with professional and educational activities outside the classroom, including, but not restricted to, service to the community and nation.

4. Evidence of active and continuing involvement in University affairs particularly in areas directly related the organizational life of the School and to faculty administrative responsibilities and governance at the department, School, or University level.

In evaluating candidates for promotion to the rank of Professor, the department and the Dean shall consider the following factors:

1. Evidence of sustained effectiveness in teaching. Examples of such evidence shall include written faculty evaluations and appropriate, written evaluation by students.

2. Evidence of significant, sustained, and substantial peer-reviewed contributions to specific disciplines or fields of study and evidence of national or international recognition for these contributions through published research, public presentations of creative work, or other means of peer-reviewed recognition. These shall be evaluated by the appropriate faculty and by experts outside the University.

3. Evidence of active and continuing involvement with professional and educational activities outside the classroom, including, but not restricted to, service to the community and nation, such as distinguished contributions to American higher education, service on presidential advisory boards or
commissions, leadership positions in professional associations or agencies, planning or coordination of projects for major national or international agencies dealing with cultural, clinical or scientific issues of broad significance.

(4) Evidence of active and continuing involvement in University affairs, particularly in areas directly related to the organizational life of the School and to faculty administrative responsibilities and governance, at the department, School, or University level.
ADDENDUM B:
Procedures for Tenure and Promotion Decisions of the Appointment, Promotion and Tenure Committee of The GW School of Nursing

(A) School Procedures

(1) All tenure and promotion actions shall be initiated by the candidate. The candidate will submit their dossier to the Senior Associate Dean who will, in turn, submit it to the Appointment, Promotion and Tenure Committee for their review and consideration. The Committee shall then forward its advice to the Dean by February 1 for tenure and promotion and by March 1 for promotion only (unless there are extenuating circumstances in the case, e.g., the need for more external letters). The accompanying dossier shall include the candidate's resume, external evaluations, and such evidence as copies of written faculty evaluations and appropriate written student comments. The department (or the candidate, in the absence of the existence of department) may also forward to the Committee letters solicited from GW faculty, students, or administrators attesting to the candidate's contributions to the organizational life of the School and the University. Unfavorable decisions and supporting documentation shall be forwarded to the Dean only, unless the candidate requests that the decision first be reviewed by the Appointment, Promotion and Tenure Committee. The Dean shall concur or not concur, and may seek the advice of the Appointment, Promotion and Tenure Committee before forwarding this decision to the Provost. In preparing recommendations to be forwarded to the Committee, the School shall use the following procedures:

(a) For tenure decisions: At least three letters shall be solicited by the Senior Associate Dean from appropriate experts outside the University attesting to the candidate's scholarly achievements and potential. The Sr. Associate Dean shall call a meeting of all tenured members of equal or higher rank within the School. The notice of the meeting, accompanied by the candidate's resume, external evaluations, and other pertinent material, shall be made available five working days in advance. After discussion of the candidate's qualifications, a vote shall be taken in accordance with the School’s bylaws.

(b) For promotion decisions: The Senior Associate Dean shall call a meeting of all tenured members in the School of rank higher than the rank of the candidate to be considered. The notice of the meeting, accompanied by the candidate's curriculum vitae and other pertinent material, shall be sent out at least five working days in advance. After discussion of the candidate's qualifications, a vote shall be taken in accordance with the School’s bylaws.
(2) The Dean of the School shall notify the eligible members of the Faculty of the School of concurrence or non-concurrence with their recommendation in a timely fashion following receipt of the Committee's advice, but not later than April 15 (unless there are extenuating circumstances in the case, e.g., appeals, the need for more external letters, etc.). The Dean shall forward the recommendation of the School to the Provost. In the event of non-concurrence with the recommendation of the School, the Dean shall give the reason(s) in writing.

(3) Departments within the School may establish their own procedures for faculty evaluations of teaching and scholarly productivity and for student input. Departmental criteria and practices may supplement and specify but may not violate, the School’s criteria and procedures, which function as required minima for the entire Faculty in the School. The Senior Associate Dean shall make known to all members of the full-time faculty of the School both the department-specific practices and the School’s overarching criteria and procedures herein stated.

(4) The Senior Associate Dean shall request from each candidate for tenure and/or promotion a list of experts in a position to provide objective external evaluations of the candidate's scholarly or creative work or of professional service to community or professional organizations.

(5) When a faculty member eligible for tenure or promotion is appointed in a department that, in the judgment of the Dean, has a number of tenured members insufficient to provide comprehensive evaluation, the Dean shall constitute an ad hoc expanded committee of faculty members from disciplines closely related to the candidate's academic field who shall be charged to make the review. The Dean shall follow the procedures described in (1) above and make the appropriate recommendation to the Appointment, Promotion and Tenure Committee. Similarly, when a faculty member becomes eligible for promotion in a department with insufficient tenured members above the candidate's rank to provide comprehensive evaluation, the Dean shall constitute an appropriate ad hoc committee charged to review the candidate's case and, if warranted, make a recommendation for promotion.

(B) Committee Operations

(1) Membership
See Article I.

(2) Operating Rules

In conducting its affairs, the Committee shall observe the following rules:

(a) A quorum for decision on recommendations shall consist of two-thirds of the membership of the Committee.
(b) A positive recommendation to the Dean must be grounded in a majority vote of those voting. All other distributions are recommendations of non-concurrence. An abstention of member eligible to vote shall be considered a negative vote. If a committee member has a conflict of interest or is unable to vote, the proper action is recusal. In a case of disagreement over propriety of recusal, the chair shall decide.

(c) In general, only materials since last promotion are relevant to the case. Publications that appeared during the timeframe of an earlier review or were relevant for a previous promotion are not generally part of the current case. In the case of Faculty seeking promotion with tenure from the rank of Assistant to Associate Professor, all materials will be reviewed and considered without constraints as to time frame.

(d) Absentee votes on recommendations, submitted in writing to the presiding officer, shall be accepted on condition that the member casting the absentee vote shall have been present for a significant portion of Committee discussion of the issue being decided.

(e) All discussions and recommendations of the Committee are to be held in strict confidence.

(f) All necessary communications between the Committee and the Dean, faculty members, and departments shall be made through the chair of the Committee.

(g) The Dean may consult with the Committee to understand more fully the nature of its deliberations and recommendation, but only after the vote has been taken. This preserves the independence of the Committee.

Timeframe and deadlines for decisions and appeals can be found in Addendum A.

(3) Tenure and Promotion Recommendations

With respect to all department or ad hoc committee recommendations for appointments with tenure and for promotion or tenure of regular active status faculty the Committee shall advise the Dean as to whether the recommended actions satisfy the relevant department, School, and Faculty Code criteria and whether it has identified any "compelling reasons" which may exist for not following the department or program recommendation. Decisions shall be reached in the following manner:
(a) The Committee may ask departmental or ad hoc committee representatives to appear before it and/or to supply additional information beyond what was originally presented.

(b) After deliberation, the Committee shall forward its recommendations for tenure and promotion to the Dean by February 1 and its recommendations for promotion only by March 1 (unless there are extenuating circumstances in the case, e.g., appeals, the need for more external letters, etc.). The Dean shall take these recommendations as advisory.

(c) The Dean shall consider the Committee’s recommendations and notify the department(s) of his or her concurrence or non-concurrence not later than February 15 for tenure and promotion and not later than March 15 for promotion only (unless there are extenuating circumstances in the case, e.g., appeals, the need for more external letters, etc.).

(4) Complaints Concerning Reappointment, Promotion, or Tenure

As prescribed in Article XIII (H) of the Bylaws, the Committee will review complaints by regular active-status members of the Faculty who have not been recommended for reappointment, promotion, or tenure for reasons other than alleged discrimination. Complaints alleging discrimination are brought before the Grievance Committee of the Faculty Senate under provisions of the Faculty Code.

(a) In initiating a complaint, the complainant will be expected to provide the Committee with appropriate documentation to support the charge. The documentation should in general parallel that requested from the department to accompany a recommendation for reappointment, promotion, or tenure.

(b) The complainant may consult the chair of the Committee concerning the nature of materials to be presented without the chair being considered a party to the complaint.

(c) A copy of materials furnished by the complainant will be made available to the department (or to the Senior Associate Dean, in the absence of departments) for preparation of a written response. The department’s response will be made available to the complainant.

(d) After examination of the materials presented by both complainant and department, the Committee may recommend a disposition of the complaint without holding a hearing.
(e) If a hearing is held, the Committee will meet separately with the complainant and department representative(s) (or School representative(s), in the absence of departments), who will not be allowed to question each other. Committee members will direct questions to either party concerning the materials presented and the merits of the complaint.

(f) After hearing and deliberating about the complaint, the Committee will send a recommendation to the Dean concerning its disposition.

(g) Within fourteen working days of receipt of the Committee's report, the Dean shall notify the complainant and the Department of his or her action in the matter of reappointment, promotion, or consideration for tenure.

(5) Appointments of Assistant and Associate Deans

Upon announcement of a vacancy for appointment as Assistant or Associate Dean of the School, the Committee will review applications from the Faculty and recommend candidates to be interviewed by the Dean. If none of the candidates is approved for appointment by the Dean, or if all nominees decline appointment, the vacancy will be re-opened, external applications sought, and a new list of nominees be submitted to the Dean by the Committee.
Proposed GW School of Nursing: Start-Up Organizational Structure
APPENDIX 13: Position Descriptions

The George Washington University
School of Nursing

Leadership Positions

Dean

The Dean serves as the chief administrative and academic officer of the school and will report to the Provost and the Vice President for Health Affairs, as do the deans of the School of Medicine and Health Sciences and the School of Public Health and Health Services. Recognizing that a new Provost will begin July 1, the dean will follow whatever reporting structure the new Provost puts into place.

Major functions:

- provide strategic vision and operational leadership that supports the development and delivery of academic programs of the highest quality, a program of research that promotes practice of translational nursing care delivery and clinical practice, congruent with the University Faculty Code and the Medical Center Organizational Plan
- fundraise for the School, in coordination with University and Medical Center development team
- provide leadership to enhance the national reputation of the School as a leader in nursing education
- work with University leadership, the senior associate dean, and faculty to set the future direction of the school through formal strategic plans
- develop and manage the annual School budget
- create a milieu of innovative and professional nursing programs in education, research, and community service
- oversee student support services
- enhance collaborative and interprofessional education and research activities

Senior Associate Dean for Academic Affairs

The Senior Associate Dean will report to the Dean, School of Nursing. Academic program directors, academic support staff, and faculty will report directly to this decanal position.

Major functions:

- collaborate with the dean and faculty on strategic planning
- oversee academic program operations and key research projects
APPENDIX 13: Position Descriptions

- responsible for implementation of curricula at all levels
- coordinate effective use of nursing faculty resources
- foster an environment conducive to recruitment and retention of students and faculty
- coordinate and manage accreditation preparation and processes
- responsible for faculty development and mentorship

Assistant/Associate Dean for Research (Future Position)

The Assistant/Associate Research Dean will report to the Dean, School of Nursing. The incumbent will demonstrate sustained and distinguished research performance.

Major functions:

- collaborate with the dean and faculty on strategic planning, particularly in the areas of grant and research opportunities
- provide leadership for faculty regarding research activity in the school
- advance faculty scholarship activities, including collaboration with faculty across the University
- foster excellence in research, research policy, and research training

Assistant/Associate Dean for Student Affairs (Future Position)

The Assistant/Associate Student Affairs will report to the Dean, School of Nursing. Admissions and student services staff will report to this position.

Major functions:

- collaborate with the dean and faculty on strategic planning, particularly in the areas of marketing, recruitment, admissions, financial aid, student services, and student life
- oversee recruitment and admissions operations
- achieve targeted admission goals in all academic programs

Director, Doctor of Nursing Practice

The program director reports to the Senior Associate Dean.

Major functions:

- work with the Senior Associate Dean for faculty workload scheduling
APPENDIX 13: Position Descriptions

- provide leadership to the DNP faculty and assumes responsibility for evaluation of the DNP nursing faculty
- assist faculty in developing effective, efficient teaching strategies
- orient new faculty to the teaching role
- assist adjunct instructors in the preparation of course materials, tests and related materials.
- conduct ongoing evaluation of faculty and staff within the Human Resources guidelines and maintain a system for assuring current credentials for nursing faculty
- serve on institutional committees and attends meetings representing the program
- assist the senior associate dean to create, revise, recommend and implement university policies, practices and procedures

Director, Master’s Degree Programs

The program director reports to the Senior Associate Dean.

Major functions:
- work with the Senior Associate Dean for faculty workload scheduling
- provide leadership to graduate faculty and assumes responsibility for evaluation of the graduate nursing faculty
- assist faculty in developing effective, efficient teaching strategies
- orient new faculty to the teaching role
- assist adjunct instructors in the preparation of course materials, tests and related materials.
- conduct ongoing evaluation of faculty and staff within the Human Resources guidelines and maintain a system for assuring current credentials for nursing faculty
- serve on institutional committees and attends meetings representing the program
- assist the senior associate dean to create, revise, recommend and implement university policies, practices and procedures
APPENDIX 13: Position Descriptions

Director, Undergraduate Programs

The program director reports to the Senior Associate Dean.

Major functions:

- work with the Senior Associate Dean for faculty workload scheduling
- provide leadership to undergraduate faculty and assumes responsibility for evaluation of the undergraduate nursing faculty
- assist undergraduate faculty in developing effective, efficient teaching strategies
- orient new faculty to the teaching role
- assist adjunct instructors in the preparation of course materials, tests and related materials.
- conduct ongoing evaluation of faculty and staff within the human Resources guidelines and maintain a system for assuring current credentials for nursing faculty
- serves on institutional committees and attends meetings representing the program
- assist the senior associate dean to create, revise, recommend and implement university policies, practices and procedures
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

JEAN JOHNSON, Ph.D., FAAN

June 2009

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CURRICULUM VITAE

QUALIFICATIONS SUMMARY

Twenty years of experience in a leadership position including senior associate dean; director of nurse practitioner program; leadership in policy health policy issues; presidency of national organizations, and national program director for the Robert Wood Johnson Foundation; creative teacher using educational methods ranging from clinical and classroom to distance learning; research in the area of long-term care; and clinical practice in long term care and community clinics.

CURRENT POSITIONS:

Senior Associate Dean for Health Sciences Programs

Professor in the Department of Health Care Science, George Washington University Academic Health Center.

Adjunct Associate Professor, College of Nursing and Health Sciences, George Mason University

EDUCATION:

Doctoral Degree in Health Policy, The George Washington University, 1993

M.S. in Nursing, University of Wisconsin, 1978

Geriatric Nurse Practitioner Certificate Program, University of Wisconsin, 1978

B.S. in Nursing, Texas Woman's University, 1974

B.A. in Economics, University of Illinois, 1968
PROFESSIONAL CERTIFICATION:

Certified as an Adult Nurse Practitioner by the American Nurses Association - 1980 to 1998.

PROFESSIONAL EXPERIENCES:

The George Washington University, School of Medicine and Health Sciences

*Senior Associate Dean and Professor – 1994 to Present*

Responsible for all the Health Sciences Programs including curriculum, student affairs, faculty affairs, policy implementation, research activity, and financial status. Provide academic leadership through teaching. Promote Interdisciplinary education whenever possible. Accomplishments include:

* Development of undergraduate distance learning programs, including Clinical Research Administration, Clinical Management and Leadership, and Emergency Medical Services Management.

* Development of graduate distance learning program Clinical Leadership for Health Professionals.

* Development of the Office of Distance Learning to provide curriculum development and technology support.

* Establishment of a plan for regular program review.

* Development of a Physical Therapy Program.

* Establishment of alumni relations’ strategic plan.

* Implementation of a core curriculum for undergraduate health science students.

* Plan (implementation next year) a core health science curriculum for graduate programs.

* Enhancement relationships with the community the rough grants funded by the Pew Health Professions Commission, W.K Kellogg Foundation, and a newly funded Area Health Education Center grant in which substantial funds go to community clinic partners.

* Establishment of a research capacity by having a majority of health science faculty doctorally prepared, recruitment of research faculty, and investment to research faculty time to pursue research interests.

* Participation in senior management for the Medical Center to establish goals and business plan for the Medical Center.
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

* Partnership with the Army and Navy to develop occupational career pathways for enlistees in health occupations.

* Development of an investment strategy to secure University funds for future program development.

Robert Wood Johnson Foundation

_Scholar in Residence—The Robert Wood Johnson Foundation 2001-2003_

Provide assistance to senior program staff to establish program agenda to fund projects addressing the nursing shortage. Assist with creating the national funding agenda, review proposals and make recommendations for funding. Meet with individuals to work through project details for solicited projects and work with investigators of unsolicited projects.

_National Program Director – 1994 to 2004_

Direct the $14 million dollar, 8-year project Partnerships for Training funded by the Robert Wood Johnson Foundation. Provide technical assistance to 12 grantees during the planning phase and 8 grantees that were funded for the implementation phase. Provide leadership and administrative support in the National Program Office and work with the staff of the Association of Academic Health Centers. Responsibilities include:

* Establishment of selection criteria for grantees in conjunction with Foundation staff.

* Site visits to each grantee at least annually to provide technical assistance and assess progress.

* Provision of financial oversight of projects working with project and Foundation staff.

* Establishment of a management information system to collect data for comprehensive program evaluation.

* Development of strategic plans with staff of AHC to jointly promote projects in a variety of forums: web, conference, and written materials.

_Director – Nurse Practitioner Program 1981-1994_

Provide administrative direction to the Nurse Practitioner Program as well as develop and implement new curriculum and new programs offering ongoing continuing education for preceptors. Provide classroom and clinical teaching to NP students and work collaboratively with the medical, physician assistant and basic science faculty. Achievements include:

* Development of a geriatric curriculum and clinical component to the adult NP program.

* Development of a partnership with George Mason University (public-private academic partnership) that has lasted 16 years.

* Implementation of innovative curriculum to assist students to understand business aspects of primary care practice.
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

* Institution of one of the first post-masters NP programs in the country.

* Integration of NPs into the GW Ambulatory Care Center as well as community clinics, and other sites, in the Washington Region.

* Teaching courses in health assessment, clinical decision-making, professional role issues, case-based clinical seminars, and health policy.

FUNDED GRANTS:

Robert Wood Johnson Foundation 2010-2012, $900,000, Nursing Alliance for Quality Care

American Association of Colleges of Nursing, funded through The Robert Wood Johnson Foundation, Quality and Safety Education for Nurses 2009-2012 $150,000. PI on subcontract.


The Robert Wood Johnson Foundation 2006-2008, $350,000, INQRI Project


Sloan Foundation –$35,000 to fund joint RWJF and Sloan meeting on the use of technology for health professions education

National Program Office for Partnerships for Training – 1998-2000, $750,000

Robert Wood Johnson Foundation, Evaluation Project for Partnerships for Training, 1999, $70,000

U.S. Army, Virtual Reality in the Classroom, Principal Investigator, 1998-2000, $38,000.

Robert Wood Johnson Foundation, Home Medical Care, Co-Principal Investigator, 1998-99, $40,000.


Robert Wood Johnson Foundation, Enhancing Primary Care, Co-Principal Investigator, 1997-99, $49,000.

W.K. Kellogg Foundation, Nurse Practitioner Workforce Study, Co-Principal Investigator, 1993-95, $40,000.
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

HONORS:

- Life Time Achievement Award from the National Organization of Nurse Practitioner Faculties-2009
- Information Technology Award, Sigma theta Tau Nursing Honor Society--2009
- USDLA Award for Best Practices for Distance Learning Programs--2008
- Associate Honorary Member of the American Association of Colleges of Nursing--2008
- Harriet Cook Carter Lecturer, Duke University School of Nursing, 1998
- Fellowship of the American Academy of Nursing, 1996
- Primary Care Fellow - Public Health Science, 1995
- Nellie Westerman Prize – 1st runner up - 1992

CLINICAL ACTIVITIES:

- Washington Home; 1981 to 1992
- Thomas House; 1982 to 1994
- Washington Center for Aging Services; 1980 - 1982
- St. Mary's Court; 1979 - 1981
- Zaccheaus Clinic; 1993 - 1998

CONSULTANT ACTIVITIES:

- Member of the Technical Advisory Group for the Fogarty planning grant with the University of Cape Town
- American Association of Colleges of Nursing on Cost of Clinical Education for Advanced Practice Nurses
- National Project Director, Partnerships for Training, Robert Wood Johnson Foundation
- American Health Care Association on the following issues:
  - Quality Assurance
  - Nurse Assistant Education
  - Implementation of Federal Nursing Home Regulations
- American Association of Homes for the Aged on professional development issues.
- Consultant to Professional Training Services for interactive videodisc program development.
- Consultant to the Educational Testing Services on development of test questions for evaluation of clinical services in nursing homes.
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

COMMITTEE SERVICE:

Education Council, 1994 to Present
Information Technology Committee, 1998 to Present
School of Public Health Advisory Committee, 1994-1997
Middle States Accreditation Steering Committee, 1996-1998
Co-chair, Public Policy & Ethics Interest Group, 1989
Health Sciences Committee, 1979 - Present
Patient Care Committee, 1979 - 1993
Committee for Continuing Medical Education, 1981
Gerontology Steering Committee, 1979 - 1982
Chair, NP Admissions Committee, 1979 – 1993
WRACC Project Leadership Group, 1996 to Present

PROFESSIONAL MEMBERSHIP AND POSITION/SERVICE TO PROFESSIONAL ORGANIZATIONS:

Chair-APRN Consensus Group 2004-present
Facilitator—APRN Joint Dialogue Group 2007- present
Co-Chair—National Task Force for Criteria for Evaluation of Nurse Practitioner Programs 2006-present
Chair—Board of the Nurse Practitioner Healthcare Foundation 2004 to present
Public Advisory Board Member, American Academy of Family Physicians, 2001 to present
President of the American College of Nurse Practitioners – 1998-99
Institute of Medicine, Committee on the Future of Primary Care – 1994-96
Director of Policy Analysis for the National Organization of Nurse Practitioner Faculties – 1993-95
Pew-Fetzer Task Force on Health Professions Education - 1992
Pew Health Professions Commission - 1991– 993
National Fund for Medical Education – Board Member – 1999-2001

National Organization for Nurse Practitioner Faculties
- Member, 1980 to present
- President, 1986
- Chairperson of Education Committee, 1983-1988
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

- Committee Member, Clinical Competency, 1982-1984
- Special Appointment: Director of Government Affairs, 1993 to present

Primary Care Fellowship Society – CoChair Education Committee – 1996-1998

American Nurses Association
- State member
- Test question writer for certification exam
- Member of task force to analyze standards of NP practice - 1984 -1985

American Public Health Association

District of Columbia Nurses Association
- Member - 1981
- Board Member - 1984 -1985
- Member of Long-term Care Committee - 1989 -1994

National Capital Area Health Care Coalition, Board Member – 1984-1987

The Gerontological Association Society of America - 1981 to present

Alpha Eta Honor Society
- President – 1983-1984
- Member - 1983 to Present
  National Capital Health Care Coalition
- Board Member – 1985-1987

PUBLICATIONS:

Editorships:
- Topics in Advanced Practice Nursing: An E-Journal, Medscape, 2001 to present
- Journal of Gerontologic Nursing, Editorial Reviewer, 1992 to present
- Clinician Review, Williams & Williams, 1990-1996.
- Journal Of Nutrition For The Elderly, Editorial Board, 1984 to Present
- Caring Practices, Editorial Advisor, 1986 to Present
- How To Be A Nurse Assistant, Interactive Video Disc Program, editor, 1988-1990

Books and Chapter:

APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean


Johnson-Pawlson, J.E.: Continuous Quality Improvement in Long Term Care, American Health Care Association, 1992


Journals:


APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean


APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean


POLICY REPORTS:


APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean


WEB-BASED LEARNING TOOLS


SELECTED PROFESSIONAL PRESENTATIONS:

2010 Quality Improvement and HIT, Quality and Safety Conference, San Antonio, American Association of Colleges of Nursing.


2005 The Future of Nurse Practitioners, American association of Medical Colleges Interdisciplinary Practice, Washington Area Geriatric Education Consortium

Primary Care: Yesterday, Today, and Tomorrow, HRSA Primary Care Fellowship

2004 Diversity in Nursing, San Joaquin Valley Health Consortium

Nurse Practitioners: Past, Present and Future, George Mason University

2003 The Promise of Online education: Educating Future Health Professionals, Association of Academic Health Centers
APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

2001  Aging and Chronic Illness, Health Vector Assembly
Advanced Practice Nursing Issues, George Mason Research Day

2000  Future Education for Primary Care, Generalist Physician Initiative, Tuscon, AZ
MD-NP Collaboration, Partnership for a Quality Education
Policy Implications for Distance Education, National Organization of Nurse Practitioner Faculties

1999  Web Based NP Education, National Organization of Nurse Practitioner Faculties
Primary Care National Initiatives, Primary Care Education for the 21st Century
Workforce policy issues, Interagency Institute for Federal Health Care Executives
Policy Update, NP Issues Forum, Nurse Practitioner Symposium, Keystone, Co

1998  Harriet Cook Carter lecture, Duke University School of Nursing.
IOM Report and Next Steps for Primary Care, Primary Care Fellowship Society Annual Meeting.
Cultural Issues related to Distance Learning, National Organization of Nurse Practitioner Faculties.
Challenges for NPs in the coming Millennium, National Conference of Nurse Practitioners
Interdisciplinary Teamwork in Managed Care, Kellogg Sponsored Professional Quality Education Project.
Advanced Practice Nurses for the Future, Keynote address, Delaware Advanced Practice Nursing Association.
Keynote Address, Naval Health Professions Graduation.

Interdisciplinary Education, American Association of Colleges of Nursing.
Nursing Leadership in Long Term Care, American Health Care Association.
Policy Issues Facing NPs, National Conference for Nurse Practitioners.
Are there too many NPs, American College of Nurse Practitioners Annual Summit Meeting.
1995  Jonathan King Visiting Professorship, Keynote speaker, Stanford University.
      Nurse Staffing in Nursing Homes, Institute of Medicine hearing.
      Nurse Workforce, Interagency Institute for Federal Health Care Executives.

      Quality of Care & Nursing Staff, Institute of Medicine Committee, Studying Nurse Staff and
      Quality of Care in Nursing Homes and Hospitals.

1993  Nurse Practitioner Program Development: The Marriage of Nursing and Medicine,
      American Association of Colleges Nursing, San Antonio.
      Education Reform: Preparing Future Practitioners, American Association of Critical Care
      Nurses, Annual Meeting, Nashville.
      Report on Nursing Facility Surveyor Performance, American Health Care Association,
      Annual Convention, Nashville.
      The Role of Foundations in Forming Health Policy, National Organization of Nurse
      Practitioners Facilities, Annual Meeting, Chicago.
      Policy Challenges in the Future, National Nurse Practitioner Summit, Washington, DC.

1991  Nurse Practitioner Practice Workshop, American College of Physicians annual meeting.

1990  Nursing Leadership in LTC - Keynote address, American Association of Homes for the Aged
      annual meeting.
      Functional Assessment; Exercise and Aging, University of Hawaii School of Medicine,
      Honolulu, Hawaii.

1989  Public Policy and Aging - Keynote address, National Gerontologic Conference, Baltimore,
      MD.

      Geriatric Society.

      Training Program, Tennessee Health Care Association.

APPENDIX 14 – Curriculum Vitae for Proposed Initial Dean

Assessment of Common Problems in the Elderly for the American Health Care Institute in Chicago, Atlanta, and Cleveland.

Quality Assurance for the Greater New Jersey Home for the Aged.

Health Maintenance in the Frail Elderly, Greater Southeast Community Hospital, Washington, D.C.

1985  Quality Assurance in the Nursing Home in Phoenix, New Mexico for the New Mexico Health Care Association.

Quality Assurance in the Care of the Elderly at SUNY for New York State Nursing Home Administrators.

Quest for Quality for the Colorado Health Care Association.


Computerized Assessment of the Elderly, American Geriatric Society Meeting in Orlando, Florida.

Quality Assurance in the Nursing Home for the Montana Health Care Association.

1984  Assessing Quality of Care in the Nursing Home at American Geriatric Society Meeting, Orlando, Florida.

Taking Time to Assess the Elderly Client; Multicare Issues of Aging at Georgetown University.

Future Trends in Nursing Education and Practice - The Nurse Practitioner Perspective at League for Nursing Annual Symposium.

Nurses in the Political Arena at Nurse Practitioner Associations for Continuing Education.

Quest for Quality at Indians Health Care Association.

1983  Nutritional Needs of the Elderly at Carrier Foundation.


Nutritional Needs for the Aging Adult at Institute for Learning in Retirement Nutrition and Exercise for the Elderly at First Annual NP and PA Primary Care Update.

Health Maintenance In the Elderly at Department of Nursing George Washington University.

1982  Assessment and Management of the Elderly Client at Hadley Memorial Hospital.
Physical Assessment Related to the Physiologic Changes of Aging at George Washington University.


1981 Nursing Care Management of Long-term Care Patients at St. Elizabeth's Hospital, Washington, D.C.

Physical Assessment of the Aging Person at George Washington University.

Testimony for the Use of Geriatric Nurse Practitioners at National Academy of Sciences, Institute of Medicine.

The Geriatric Nurse Practitioner Role in the Long-term Care Setting the Third National Symposium on Gerontological Nursing.

Health Assessment of the Geriatric Patient at The George Washington University Hospital, Washington, D.C.


Mid-level Practitioners Workshop at George Washington University. The Impact of Aging on the Health Care System. The George Washington University Hospital, Washington, D.C.

Geriatric Curriculum in an Adult and Family Nurse Practitioner Program at National Organization of Nurse Practitioner Faculties, Albuquerque, New Mexico.

Health Assessment of the Aged, Psychosocial Aspects at Greater Southeast Hospital, Washington, D.C.

APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

Ellen M Dawson, Ph.D., ANP
13648 South Springs Drive
Clifton, VA 20124
H (703) 266-1776 W (202) 994-7961
FAX (703) 993-1949 EMAIL hspemd@gwumc.edu

HIGHER EDUCATION

Ph.D. 2000 George Mason University, Fairfax, VA
Major: Nursing Administration and Health Policy

MSN 1991 George Mason University, Fairfax, VA
Major: Adult Nurse Practitioner in Primary Care

BA 1975 Windham College, Putney, VT
Major: Music Education

Diploma 1971 Newport Hospital School of Nursing, Newport, RI
Major: Nursing

AWARDS/HONORS

2009 Sigma Theta Tau International Honor Society awarded the 2009 International Award recipient of the Computer-Based Professional Education Technology Award for: Nurses on the Front Line: Preparing for and Responding to Emergencies and Disasters - The National Nurse Emergency Preparedness Initiative (NNEPI). Course Developers: Jean E. Johnson, PhD, FAAN, Ellen M. Dawson, PhD, ANP, Kimberly D. Acquaviva, PhD, MSW, and Laurie Posey, EdD

2008 U.S. Distance Learning Association awarded the Best Practice Award for Distance Learning Programming to the George Washington University School of Medicine and Health Sciences, Department of Nursing Education for: Nurses on the Front Line: Preparing for and Responding to Emergencies and Disasters - The National Nurse Emergency Preparedness Initiative (NNEPI). Course Developers: Jean E. Johnson, PhD, FAAN, Ellen M. Dawson, PhD, ANP, Kimberly D. Acquaviva, PhD, MSW, and Laurie Posey, EdD

2008 Selected to attend the Robert Wood Johnson Foundation Strategic Communications Training Program

2004 Recognized by the Fairfax County Board of Supervisors for contributions pertaining to access to health care for vulnerable populations. Recommended by the Fairfax County Health Department in recognition of work accomplished through the Community Access Program (CAP)
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

2000 Selected among all women faculty at George Mason University to attend “The Summer Institute for Women in Higher Education” at Bryn Mawr College. (June 2000)

2000 George Mason University Customer Service Annual Award presented to the Student Health Services

1993 “Outstanding Undergraduate Faculty Award” presented by the George Mason University School of Nursing Class 1993 in recognition of commitment to excellence in the art of nursing education.

1991 Sigma Theta Tau, Epsilon Zeta Chapter, Honor Society in Nursing

LICENSES/CERTIFICATIONS

License:
Registered Nurse/Nurse Practitioner: Virginia 0001107843

Certifications from American Nurses Credentialing Center:
Certification as an Adult Nurse Practitioner
American Heart Association: BCLS Provider

SELECTED ACCOMPLISHMENTS IN MOST RECENT AND CURRENT POSITION

2005-Present Chair and Associate Professor, Department of Nursing Education
George Washington University (GWU) School of Medicine and Health Sciences

- Provide leadership and vision to the new Department of Nursing Education (DNE) which was established July 1, 2005.
- Co-leading the university supported effort to form a School of Nursing with final presentation to the Board of Trustees, May 2010
- Launched the MSN programs Fall 2005; The DNP Program Fall 2007 and the BSN Program Fall 2009.
- Led the building of a nursing presence with creation of a simulation lab at the Virginia Campus for Science and Technology
- Recruited and hired over 30 faculty since July 2005
- Manage all personnel matters in the department involving academic and non-academic employees including: recruiting, appointment, termination and dismissal; faculty evaluation, preparation and approval(s) of faculty workload plans and long-range professional development plans.
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

- Articulate the budgetary needs of the department and manage the revenues and expenditure of resources for the department
- Supervise the preparation of class schedules on two campuses and comply with institutional policies
- Promote grant applications by faculty members and prepare proposals for outside funding opportunities.
- Led a successful external National Accreditation site visit, the first nursing accreditation at GWU. Full accreditation received April 2006.
- Created an atmosphere for faculty research agenda which has grants over $4.9 million dollars
- Serving as Co-PI on $900,000 research initiative.
- Restarted the Washington Regional Nursing Research Consortium (WRNRC) and was Co-Chair (2006-2009).
- Developed collaboration with Thammassat University, Thailand Faculty of Nursing, offering two faculty and student exchanges (15 faculty/students came to GWU 2006, 2007).

2000 to 2005. Associate Professor, Assistant Dean, Graduate Nursing Programs, College of Nursing and Health Science (CNHS) George Mason University (GMU).

- Participated as a member of executive leadership team in the College of Nursing and Health Science from 2000 – 2003, including significant leadership in areas of strategic planning, faculty mentoring, student advising and recruitment, program evaluation
- Strengthened graduate nursing programs by generating 24 new graduate nursing courses, modifying 24 graduate nursing courses, initiating 6 new certificate programs, modifying 1 certificate program; consolidating 2 new concentrations under a major, and obtaining approval for 1 new graduate degree program. This included expanding the Graduate Nursing Program offerings on Fairfax Campus and at 13 area hospitals (2000-2004)
- Led and managed grants and projects exceeding $1,000,000 which include $630,000 in research grants and $450,000 in traineeship grants
- Partnered with other academic units to offer CNHS students interdisciplinary opportunities: Institute of Conflict Resolution; Public Administration; School of Management; Graduate School of Education; Graduate School of Public Policy; School of Information Technology and Engineering, School of Law, and School of Biodefense
- Collaborated with external partners to create a joint Post MSN Family and Adult Nurse Practitioner Certificate Programs with George Washington University; Established the Peace Corp Master’s International Program MSN in Advance Clinical and MSN in Nursing Administration; Led GMU’s efforts to create a Certificate Program in “Health Care Interpreter Certificate Program” as part of a Robert Wood Johnson Grant Project for Hablamos Juntos and Inova Health Care System
- Evaluated and revised the Advanced Clinical Major to reflect the growing demands for clinical nurse specialists. Formed a task force of faculty,
explored needed changes using “Essentials for Masters Education” and together formulated a plan of action.

- Developed and delivered graduate and undergraduate level courses in organization, research and leadership, consistently receiving superior student evaluations and mentored 10 graduate clinical nurse specialist students through regular clinical site visits and review of weekly clinical logs (2003-2004)
- Co-Chair (2001-2003) then Member (2004) of the CNHS Accreditation Steering Committee. Successfully completed the Accreditation Process with a ten year accreditation from CCNE
- Led the CNHS Space Task Force to create a Technology Simulation Lab with 40 computers stations, built additional clinical lab with 20 exam tables and teaching station with state-of-the-art technology

PRIOR PROFESSIONAL EXPERIENCE

1998 – 2000  Associate Dean, University Life, George Mason University, Fairfax, VA, serving both the academic and service side of the university.

- Provided leadership, policy, and strategic planning with an emphasis on outcome management for the Health and Wellness Center, which included the Student Health Services, Health Education Services, Drug Education Services, Sexual Assault Services and the Health and Wellness Resource Library. This position reported to the VP, University Life and was an integral member of the Senior Leadership Team. Experience interacting with University Board of Visitors.

1993 – 2000  Director, Student Health Services (including Director, Health and Wellness Services: 1996-2000)

- Administrative oversight for all aspects of operating the Health and Wellness Center. Responsible for program and service development, including an operating budget of $1.2 Million, generating revenue, and managing 23 employees.

- Increased student access to health care from 2500 student/patient visits in 1993 to over 20,000 student/patient visits in 2000

- Created, monitored and analyzed operational metrics which included patient encounters, patient satisfaction, laboratory work performed, immunization compliance, and health promotional program evaluation. Data used to facilitate planning of personnel and budget
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

1993-2000 College of Nursing and Health Science

• Instructor, Nurse Practitioner Major, CNHS
• Taught various courses in the Nurse Practitioner Program: Clinical Concepts in Family Primary Care; Practicum in Adult Primary Care I and I; Clinical Laboratory Policies and Procedures, Prescriptive Authority and undergraduate Health Assessment
• Assessed nurse practitioner student’s clinical performance and evaluated clinical logs.

1991-2000 Certified Adult Nurse Practitioner, GMU Student Health Services

1993- Present Adjunct Assistant Professor of Health Care Sciences at the George Washington University School of Medicine and Health Sciences

• Assisted with evaluating nurse practitioner student’s health assessment skills

PROPOSAL/GRANT EXPERIENCE


National Nursing Quality and Safety Alliance Planning Grant, Robert Wood Johnson. Total cost $340,000, Sept. 1, 2008 – August 30, 2009 E. Dawson,


Response Emergencies and Disasters Institute (READI) Bioterrorism grant, Office of Domestic Preparedness, Department of Homeland Security. Total cost $5 million
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

(Overall Project Director READI George Washington University). GMU subcontract $179,000, September 1, 2004 – June 2005. **E. Dawson, GMU Co-I**

**Community Access Program (CAP), Department of Health and Human Services Health Resources and Services Administration (HRSA).** Total cost $901,570. (Overall Project Directors, Elita Christiansen, Inova Health Care System and JoAnne Jorgensen, Fairfax County Health Department). GMU subcontract $10,000, August 31, 2003 – December 31, 2003. **E. Dawson, GMU PI**

**Community Access Program (CAP), Department of Health and Human Services Health Resources and Services Administration (HRSA).** (Overall Project Directors, Elita Christiansen, Inova Health Care System and JoAnne Jorgensen, Fairfax County Health Department). GMU subcontract $40,000, September 1, 2002 – August 31, 2003. **E. Dawson, GMU PI**


**Advanced Education Traineeship Program, Department of Health and Human Services Health Resources and Services Administration (HRSA).** Awarded $161,035 July 1, 2002 – June 30, 2003. **E. Dawson, PI**

**Advanced Education Traineeship Program, Department of Health and Human Services Health Resources and Services Administration (HRSA).** Awarded $152,136 July 1, 2001-June 30, 2002. **E. Dawson, PI**

**Partnerships for Quality Education, Robert Wood Johnson Grant.** Awarded $30,000 August 2000 –July 2001. **E. Dawson, Program Director**

**PRESENTATIONS**

**Peer Reviewed/National**


2008  National State of the Science Congress on Nursing Research, Council for the Advancement of Nursing Science. Re-Engineering the Clinical Research
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

Enterprise: A Prototype of Interdisciplinary Research. Ailinger, R., Broadnax, P., Browning, S., Dawson, E et al. (Poster presented October 2, 2008)


APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

nurse emergency preparedness initiative (NNEPI)—Web-based training for nurses.”


2002 American Public Health Association, 130th annual Meeting and Exposition in Philadelphia, Pennsylvania, November 9-13, 2002, Poster Presentation “In their own words: Community health workers tell their stories”. (Presented with co-author from James Madison University


International

2002 Second ICN International Nurse Practitioner/Advanced Practice Nursing network Conference: Adelaide, Australia: October 31 –November 2, 2002 “Practice profiling system: An on-line interactive means to evaluate NP students' clinical experiences, progression and practice management patterns” accepted to present at the Conference. Presentation cancelled due to budget reductions @ GMU.


Regional

2004 Southern Nursing Research Society, 18th Annual Conference in Louisville, Kentucky, February 19-20, 2004. Poster Presentation “Sustainability of community education programs: From focus groups to participatory action research”.
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

Local


2005  Nurses Emergency Readiness Summit, George Mason University College of Nursing and Health Science, January 13-14, 2005. Moderator second day of summit and conducted focus group in educational session (1 of 6 focus groups) regarding undergraduate bioterrorism curriculum development


2002  George Mason University College of Nursing and Health Science Doctoral Nursing Forum 2002: Fostering research in education, administration and practice, November 7, 2002. Poster Presentation “Community outreach and education project”.

2001  George Mason University College of Nursing and Health Science Annual Research and Scholarship Day, April 20, 2001. Poster Presentation: State of the science: college age women and smoking. (Co-presented and award recipient)

PUBLICATIONS

Kurtzman, E., Dawson, E., Johnson, J., & Sheingold, B. (in press). Nursing leaders launch an alliance dedicated to quality, AJN


APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs


Dawson, E. (1995). Faculty Practice: An integrated service, research and teaching model. Dimensions College of Nursing and Health Science, George Mason University: p6

OTHER SCHOLARLY ACTIVITIES RELATED TO CLINICAL PRACTICE


Dawson, E. (1998) George Mason University student health services’ immunization compliance program: an integrated project team. Submitted by GMU for consideration for the National Associations of Colleges and University Business Officer’s (NACUBO) a Higher Education Awards Program, May 1998. Included in the NACUBO information exchange for the betterment of higher education.


Dawson, E. (1999). Strategic Plan for Integrating Continuous Quality Improvement (CQI) into the GMU Student Health Services as a component of the ambulatory accreditation process.

UNPUBLISHED RESEARCH


Patient Satisfaction Surveys. (1993-2000, Student Health Services)

Social Norm Marketing. Focus Group Research for alcohol programming. (Fall 1999)

**DOCTORAL DISSERTATION COMMITTEES**


**PROFESSIONAL ORGANIZATIONS: (Service to)**

**George Washington University**

Member, ASPP Committee (2006-present)
Member, Committee on the Status of Women and Faculty (2006-2008)
Member, Communication and Collaboration Strategy Design Team for the GWU Medical Center Strategic Planning 2005

**George Mason University Task Forces and Committees**

Member, Graduate Council, 2000-2003
Member, Graduate Steering Committee, 2000-2003
Member, Mason Enterprise Center University Advisory Board, 2000-2001
Member, Master of Social Work Graduate Program Committee, 2000-2001
Member, Student Survey Assessment Committee, 2000-2001
Member, GMU University Quality of Work/Life Initiative, 1999-2001
Member, University Life SACS Committee, 1999-2000
Member, Emergency Preparedness Task Force, 1999-2000
Chair, Student Health Advisory Board, 1993-2000
Member, GMU Sexual Assault Response Team, 1993-2000
Reviewer, GMU Human Subject Review Board, 1997-2000

1999-2000: NIH Genetic Factors Research project
1998-1999: NIH Genetic Factors Research project
1997: The Relationship between Sexual Aggressive and Moral Development in a Sample of College Males.
APPENDIX 15: Curriculum Vitae for Proposed Initial Senior Associate Dean for Academic Affairs

Member, MU Emergency Response Task Force, 1993-1999
Chair, GMU/INOVA Blood Donor Program, 1993-1995
Member, GMU Legal Task Force, 1993-1995
Member, Sexual Assault Task Force, 1993-1994
Member, GMU Space Utilization Task Force for SUB 1 and SUB 11, 1993-1994

College of Nursing and Health Science Task Forces and Committees

Member, Research Committee, 2004-2006
Member, Doctoral Advising Committee, 2002-2005
Member, Doctoral Admission Committee, 2002-2005
Reader, Doctoral Comprehensive Exams, 2002-2005
Member, Search Committee for NP Coordinator, 2002-2005
Chair, Graduate Admissions, 2000-2003
Chair, Academic Task Force, Medical Education Campus, 2000-2003
Co-chair, Accreditation Steering Committee, 2000-2003
Member, Graduate Curriculum Committee, 2000-2003
Member, Undergraduate Curriculum Committee, 2000-2003
Member, Program Evaluation, 2000-2003
Member, Alumni Committee, 2000-2003
Member, CNHS Space Task Force, 2000-2003
Member, CNHS Grievance Committee, 1999-2000
Chair, CNHS Search Committee for seven new faculty positions, 1998-1999
Chair, CNHS Search Committee for three new faculty positions, 1997-1998
Member, CNHS Search Committee, 1995-1997

Local/State/National

Member, Planning Committee, Robert Wood Johnson annual meeting for Interdisciplinary nursing quality research initiative (INQRI)
Co-Chair, Washington Nursing Research Consortium, 2007 – present
Member, Task force, APN Emergency Preparedness and All Hazards Stakeholders Panel, 2007-present
Member, Leadership Council, Fairfax County Health Department, 2005-present
Member, Medical Reserve Corp, Fairfax County, 2005-2007
Reviewer for Monster Healthcare – AACN Nursing Faculty Scholarship, October 2005:
Chair, Board of Directors, Northern Virginia Area Health Education Center (AHEC), 2004- 2005
Member, Executive Board, Statewide AHEC Advisory Committee, 2004- 2005
Member, Board of Directors, Virginia Partnership for Nursing, 2004- 2005
Treasurer and Chair, Budget Committee, Board of Directors, Northern Virginia Area Health Education Center (AHEC), 2002-2004
Member, Executive Board of Directors, Northern Virginia Area Health Education Center (AHEC), 2002-2005
Member, Community Access Project (CAP: HRSA grant) Alliance Committee,
Member, CAP Executive Committee, 2002-2004
Chair, CAP Outreach and Education Task Force, 2001-2004
Member, Commonwealth of Virginia Nursing Scholarship Advisory Committee, 1995-1997
Member, NONPF Faculty Practice Task Force, 1991-1993
# APPENDIX 16: Space Summary

## George Washington University Medical Center
### Proposed School of Nursing
#### Space Evaluation - 5 year Growth Plan

<table>
<thead>
<tr>
<th>Foggy Bottom Nursing</th>
<th>FY12</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># of Units</td>
<td>NSF Units</td>
</tr>
<tr>
<td><strong>Faculty:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shared Dean's Office</td>
<td>1</td>
<td>150</td>
</tr>
<tr>
<td>Acquaviva</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Brassard</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Bull</td>
<td>0</td>
<td>125</td>
</tr>
<tr>
<td>Falk</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Graziano</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Kopac</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Kurtzman</td>
<td></td>
<td>125</td>
</tr>
<tr>
<td>Lunsford</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Malliarakis</td>
<td>1</td>
<td>125</td>
</tr>
<tr>
<td>Pintz</td>
<td>1</td>
<td>150</td>
</tr>
<tr>
<td>Sheingold</td>
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<td>125</td>
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<tr>
<td>Wright</td>
<td>1</td>
<td>150</td>
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<tr>
<td>Part-time Faculty Offices</td>
<td>3</td>
<td>125</td>
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<tr>
<td>Research Positions</td>
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<td>125</td>
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<tr>
<td>New Faculty Recruits FY11</td>
<td>2</td>
<td>125</td>
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<tr>
<td><strong>Staff:</strong></td>
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<tr>
<td>Entity Financial Director</td>
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<td>Administrative Manager</td>
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<td>80</td>
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<td>DNP Exec Coordinator</td>
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<td>80</td>
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<td>NP Exec Coordinator</td>
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<td>80</td>
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<tr>
<td>HCQ-GMU Exec Coord</td>
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<td>80</td>
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<tr>
<td>DE Exec Coord</td>
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<td>80</td>
</tr>
<tr>
<td>DE Exec Coord</td>
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<td>80</td>
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<tr>
<td><strong>Other Space:</strong></td>
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<td></td>
</tr>
<tr>
<td>Storage/File</td>
<td>1</td>
<td>100</td>
</tr>
<tr>
<td>Conference Room</td>
<td>1</td>
<td>1500</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>28</td>
<td>4,280</td>
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<tr>
<td><strong>Circulation at 35%</strong></td>
<td></td>
<td>1,629</td>
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<tr>
<td>Total NSF</td>
<td></td>
<td>6,284</td>
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</tbody>
</table>

**TOTAL COST at $60/sqft** $377,055

Prepared by mskdas 4/13/2010
APPENDIX 16: Space Summary

George Washington University Medical Center
Proposed School of Nursing
Space Evaluation - 5 year Growth Plan

### Loudoun Nursing

<table>
<thead>
<tr>
<th>Faculty:</th>
<th>FY 12</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson/Dawson</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Brenkus</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Davis</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Kowitlawakul</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Lang</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Whitt</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>FY11 New Faculty Recruits</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>FY12 New Faculty Recruits</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>FY13 New Faculty Recruits</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>FY14 New Faculty Recruits</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>FY15 New Faculty Recruits</td>
<td>1</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Dean's Office:</th>
<th>FY 12</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Dean of School</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Sr. Assoc Dean of Academic</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Research Dean</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Executive Coordinator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Grants Manager at .5FTE</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Instructional Designer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Staff:</th>
<th>FY 12</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSN Exec Coord</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>BSN Exec Coord #2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Admissions Counselor</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Education Specialist</td>
<td>1</td>
<td>1</td>
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</table>

<table>
<thead>
<tr>
<th>Other Space:</th>
<th>FY 12</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab Space</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Lockers</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Storage</td>
<td>1</td>
<td>1</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>FY 12</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subtotal</td>
<td>28</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>5,932</td>
<td>6,432</td>
</tr>
<tr>
<td></td>
<td>6,947</td>
<td>8,587</td>
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</tbody>
</table>

| TOTAL COST at $35/sqft | $243,145 | $300,545 |

*** Loudoun space does not include circulation space @ 35% of total NSF

Prepared by msdkas 4/13/2010
## Appendix 17: Five Year Financial Forecast

### George Washington University Medical Center
Proposed School Of Nursing Projections
Income Statement Summary Overview
Actual & Projections FY10-FY15

<table>
<thead>
<tr>
<th></th>
<th>FY10 Forecast</th>
<th>FY11 Budget</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>TOTAL</th>
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</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net Student Tuition and Fees</td>
<td>2,745,381</td>
<td>4,579,302</td>
<td>7,658,968</td>
<td>9,976,305</td>
<td>11,032,285</td>
<td>11,776,460</td>
<td>47,768,701</td>
</tr>
<tr>
<td>Net Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pledge Payments</td>
<td>13,570</td>
<td>88,570</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Other Income</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>TOTAL REVENUE</strong></td>
<td>2,758,951</td>
<td>4,667,872</td>
<td>7,658,968</td>
<td>9,976,305</td>
<td>11,032,285</td>
<td>11,776,460</td>
<td>47,768,701</td>
</tr>
<tr>
<td><strong>% Change</strong></td>
<td>51.3%</td>
<td>69.2%</td>
<td>64.1%</td>
<td>30.3%</td>
<td>10.6%</td>
<td>6.7%</td>
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<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Staff Salaries</td>
<td>189,713</td>
<td>210,985</td>
<td>676,252</td>
<td>748,297</td>
<td>829,598</td>
<td>862,782</td>
<td>3,517,627</td>
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<tr>
<td>Faculty Salaries (based on 20:1 ratio)</td>
<td>1,475,598</td>
<td>1,914,736</td>
<td>3,150,560</td>
<td>3,992,666</td>
<td>4,525,062</td>
<td>4,826,714</td>
<td>19,885,336</td>
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<tr>
<td>Total Fringe Benefits</td>
<td>391,222</td>
<td>525,804</td>
<td>956,703</td>
<td>1,185,241</td>
<td>1,338,665</td>
<td>1,422,374</td>
<td>5,820,009</td>
</tr>
<tr>
<td><strong>Total Compensation</strong></td>
<td>2,056,533</td>
<td>2,651,525</td>
<td>4,783,514</td>
<td>5,926,203</td>
<td>6,693,325</td>
<td>7,111,871</td>
<td>29,222,971</td>
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<tr>
<td>% of Revenue</td>
<td>74.5%</td>
<td>56.8%</td>
<td>62.5%</td>
<td>59.4%</td>
<td>60.7%</td>
<td>60.4%</td>
<td>61.2%</td>
</tr>
<tr>
<td><strong>% Change</strong></td>
<td>68.2%</td>
<td>25.7%</td>
<td>80.4%</td>
<td>23.9%</td>
<td>17.9%</td>
<td>6.3%</td>
<td></td>
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<tr>
<td>Purchased Services</td>
<td>51,633</td>
<td>89,500</td>
<td>168,227</td>
<td>213,273</td>
<td>219,672</td>
<td>226,262</td>
<td>968,566</td>
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<tr>
<td>Total Supplies</td>
<td>23,600</td>
<td>34,900</td>
<td>45,000</td>
<td>75,000</td>
<td>77,250</td>
<td>79,568</td>
<td>335,318</td>
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<td>Total Equipment</td>
<td>25,200</td>
<td>43,700</td>
<td>55,000</td>
<td>56,650</td>
<td>58,350</td>
<td>60,100</td>
<td>298,999</td>
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<tr>
<td>Total Development Costs</td>
<td>-</td>
<td>75,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>75,000</td>
</tr>
<tr>
<td>Total Occupancy- Loudoun ($35 per sq/R * 7,962 NSF)</td>
<td>170,450</td>
<td>188,545</td>
<td>243,145</td>
<td>280,171</td>
<td>309,578</td>
<td>326,511</td>
<td>1,518,399</td>
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<tr>
<td>Total Occupancy- FB ($60 per sq/R * 6,622 NSF)</td>
<td>-</td>
<td>-</td>
<td>377,055</td>
<td>392,137</td>
<td>407,823</td>
<td>424,136</td>
<td>1,601,150</td>
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<tr>
<td>Total Scholarships &amp; Fellowships</td>
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<td>-</td>
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<td>100,000</td>
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<td>31,050</td>
<td>37,100</td>
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<td>56,000</td>
<td>60,000</td>
<td>62,000</td>
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<td>Total Travel &amp; Training</td>
<td>45,790</td>
<td>46,765</td>
<td>66,765</td>
<td>85,765</td>
<td>100,765</td>
<td>105,765</td>
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<td>Total GW Services</td>
<td>47,662</td>
<td>43,743</td>
<td>45,493</td>
<td>47,312</td>
<td>49,205</td>
<td>51,173</td>
<td>284,588</td>
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<tr>
<td>Total Other Miscellaneous</td>
<td>31,740</td>
<td>31,650</td>
<td>45,000</td>
<td>46,350</td>
<td>47,741</td>
<td>49,173</td>
<td>251,653</td>
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<tr>
<td><strong>Total Non-Compensation Expenses</strong></td>
<td>427,125</td>
<td>590,903</td>
<td>1,155,684</td>
<td>1,352,659</td>
<td>1,430,382</td>
<td>1,484,686</td>
<td>6,441,439</td>
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<tr>
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<td>4.0%</td>
<td>38.3%</td>
<td>95.6%</td>
<td>17.0%</td>
<td>5.7%</td>
<td>3.8%</td>
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<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>2,483,658</td>
<td>3,242,428</td>
<td>5,939,198</td>
<td>7,278,862</td>
<td>8,123,707</td>
<td>8,596,557</td>
<td>35,664,411</td>
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<td>% Change</td>
<td>52.4%</td>
<td>30.6%</td>
<td>82.2%</td>
<td>22.6%</td>
<td>11.6%</td>
<td>5.8%</td>
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<td>Total Capital Expenditures/Rennovations</td>
<td>(2,500)</td>
<td>(125,685)</td>
<td>(125,000)</td>
<td>(253,185)</td>
<td>(253,185)</td>
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<td>Other Changes in Net Assets</td>
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<td>(125,685)</td>
<td>(125,000)</td>
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<td><strong>Contribution Margin</strong></td>
<td>275,293</td>
<td>1,422,944</td>
<td>1,594,085</td>
<td>2,572,443</td>
<td>2,908,578</td>
<td>3,179,903</td>
<td>11,953,246</td>
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### George Washington University Medical Center

**Proposed School of Nursing Revenue Summary & Projections**

<table>
<thead>
<tr>
<th>NURSING TUITION REVENUE</th>
<th>FY 10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>% / #</td>
<td>% / #</td>
<td>% / #</td>
<td>% / #</td>
<td>% / #</td>
<td>% / #</td>
</tr>
<tr>
<td>Credit Hour Rate - Distant Undergraduate</td>
<td>$441</td>
<td>4%</td>
<td>$459</td>
<td>3%</td>
<td>$473</td>
<td>3%</td>
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<tr>
<td>Credit Hour Rate - Distant Graduate</td>
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<td>10%</td>
<td>$628</td>
<td>8%</td>
<td>$678</td>
<td>3%</td>
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<tr>
<td>Credit Hour Rate - On Campus/DE Blended Rate</td>
<td>$820</td>
<td>5%</td>
<td>$861</td>
<td>5%</td>
<td>$904</td>
<td>3%</td>
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<tr>
<td><strong>Doctor of Nursing Programs:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td># of Credits Doctor of Nursing Practice</td>
<td>861</td>
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<td>1,110</td>
<td>1,110</td>
<td>1,110</td>
<td>1,110</td>
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<tr>
<td># of Credits PhD (New in FY15)</td>
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<td>0</td>
<td>120</td>
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<td><strong>Subtotal Doctor’s</strong></td>
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<td>1,110</td>
<td>1,110</td>
<td>1,110</td>
<td>1,110</td>
<td>1,230</td>
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<tr>
<td><strong>Master’s of Nursing Programs:</strong></td>
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<tr>
<td># of Credits MSN (Includes CRA &amp; NLM)</td>
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<td>1,004</td>
<td>1,004</td>
<td>1,004</td>
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<tr>
<td># of Credits Adult NP &amp; FNP</td>
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<td>1,689</td>
<td>1,839</td>
<td>1,839</td>
<td>1,839</td>
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<tr>
<td># of Credits ANP &amp; FNP Exec Format (New in FY12)</td>
<td>0</td>
<td>480</td>
<td>240</td>
<td>720</td>
<td>720</td>
<td>720</td>
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<tr>
<td># of Credits Master’s in Quality (New in FY11)</td>
<td>180</td>
<td>270</td>
<td>450</td>
<td>300</td>
<td>750</td>
<td>750</td>
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<td># of Credits MS in Health Info Tech (New in FY12)</td>
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<td>180</td>
<td>270</td>
<td>450</td>
<td>300</td>
<td>750</td>
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<tr>
<td># of Credits MS Exec. Leadership (New in FY12)</td>
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<td>180</td>
<td>270</td>
<td>450</td>
<td>300</td>
<td>750</td>
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<tr>
<td><strong>Subtotal Master’s</strong></td>
<td>2,277</td>
<td>2,873</td>
<td>4,133</td>
<td>5,213</td>
<td>5,813</td>
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<td><strong>Bachelor’s of Nursing Programs:</strong></td>
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<td></td>
</tr>
<tr>
<td># of Credits Undergraduate BSN (New in FY10)</td>
<td>582</td>
<td>1,854</td>
<td>1,466</td>
<td>3,300</td>
<td>3,960</td>
<td>120</td>
</tr>
<tr>
<td># of Credits Assoc. to BSN (New in FY12)</td>
<td>0</td>
<td>300</td>
<td>300</td>
<td>600</td>
<td>300</td>
<td>900</td>
</tr>
<tr>
<td># of Credits Entry Level BSN (New in FY13)</td>
<td>0</td>
<td>0</td>
<td>300</td>
<td>300</td>
<td>600</td>
<td>300</td>
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<tr>
<td><strong>Subtotal Bachelor’s</strong></td>
<td>582</td>
<td>1,854</td>
<td>3,600</td>
<td>4,860</td>
<td>5,580</td>
<td>5,880</td>
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<tr>
<td><strong>Certificate of Nursing Programs:</strong></td>
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<tr>
<td># of Credits NP Cert</td>
<td>136</td>
<td>256</td>
<td>256</td>
<td>256</td>
<td>256</td>
<td>256</td>
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<tr>
<td><strong>Total Dollars - Distant Undergraduate</strong></td>
<td>$1,869,454</td>
<td>$2,661,778</td>
<td>$3,607,219</td>
<td>$4,281,292</td>
<td>$4,625,594</td>
<td>$4,764,362</td>
</tr>
<tr>
<td><strong>Total Dollars - Distant Graduate</strong></td>
<td>$477,240</td>
<td>$1,596,294</td>
<td>$3,580,038</td>
<td>$5,056,261</td>
<td>$5,898,505</td>
<td>$6,490,371</td>
</tr>
<tr>
<td><strong>Total Dollars - On Campus/DE Blended Rate</strong></td>
<td>$2,346,694</td>
<td>$4,258,072</td>
<td>$7,129,288</td>
<td>$9,629,725</td>
<td>$10,975,055</td>
<td>$11,719,680</td>
</tr>
<tr>
<td><strong>Total Tuition Revenue</strong></td>
<td>$2,346,694</td>
<td>$4,258,072</td>
<td>$7,129,288</td>
<td>$9,629,725</td>
<td>$10,975,055</td>
<td>$11,719,680</td>
</tr>
<tr>
<td><strong>Total Contract Revenue (George Mason)</strong></td>
<td>$387,899</td>
<td>$294,480</td>
<td>$294,480</td>
<td>$294,480</td>
<td>$294,480</td>
<td>$294,480</td>
</tr>
<tr>
<td><strong>Course Fees</strong></td>
<td>$10,788</td>
<td>$24,750</td>
<td>$33,400</td>
<td>$50,100</td>
<td>$56,780</td>
<td>$56,780</td>
</tr>
<tr>
<td><strong>Net Tuition Distribution</strong></td>
<td>[\text{$2,745,381 - 4,579,302}]</td>
<td>[\text{$7,658,968 - 9,976,308}]</td>
<td>[\text{$11,032,285 - 11,776,460}]</td>
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## NURSING
### FY 2011 PROPOSED TUITION & FEES

<table>
<thead>
<tr>
<th></th>
<th>FY 10</th>
<th>Proposed FY 11</th>
<th>Increase</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nursing Tuition &amp; Fees:</strong> (per credit hour)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undergraduate BSN</td>
<td>$820</td>
<td>$861</td>
<td>$41</td>
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<tr>
<td>Student Association Fee</td>
<td>$1.50</td>
<td>$1.50</td>
<td>$0</td>
<td>0.00%</td>
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<tr>
<td><strong>Distance Learning:</strong></td>
<td></td>
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<tr>
<td>Undergraduate</td>
<td>$441</td>
<td>$459</td>
<td>$18</td>
<td>4.00%</td>
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<tr>
<td>Graduate</td>
<td>$571</td>
<td>$628</td>
<td>$57</td>
<td>10.00%</td>
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APPENDIX 20: FY 2011 Budget

George Washington University Medical Center
Proposed School of Nursing
Detailed Budget
FY10 Forecast & FY11 Budget

<table>
<thead>
<tr>
<th></th>
<th>FY10 Forecast</th>
<th>FY11 Budget</th>
<th>Variance</th>
<th>Variance %</th>
</tr>
</thead>
<tbody>
<tr>
<td>REVENUES:</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Student tuition &amp; fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>41141 NORTHERN VA CAMPUS TUITION</td>
<td>477,240</td>
<td>1,596,294</td>
<td>1,119,054</td>
<td>234.5%</td>
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<tr>
<td>41151 OFF CAMPUS TUITION GROSS</td>
<td>1,497,733</td>
<td>2,183,242</td>
<td>685,509</td>
<td>45.8%</td>
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<tr>
<td>41153 OFF CAMPUS GROUP CONTRACTS</td>
<td>387,899</td>
<td>296,480</td>
<td>(91,419)</td>
<td>-23.6%</td>
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<tr>
<td>41185 SUMMER TUITION OFF-CAMPUS GR</td>
<td>371,721</td>
<td>478,536</td>
<td>106,815</td>
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<tr>
<td>41221 COURSE FEES</td>
<td>10,788</td>
<td>24,750</td>
<td>13,963</td>
<td>129.4%</td>
</tr>
<tr>
<td>Total Student tuition &amp; fees</td>
<td>2,745,381</td>
<td>4,579,302</td>
<td>1,833,922</td>
<td>66.8%</td>
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<tr>
<td>Other income</td>
<td></td>
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<td>47571 OTHER MISCELLANEOUS REVENUE</td>
<td>13,570</td>
<td>88,570</td>
<td>75,000</td>
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<td>Total Other income</td>
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<tr>
<td>TOTAL REVENUE</td>
<td>2,758,951</td>
<td>4,667,872</td>
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<td>EXPENSES:</td>
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<td>Salaries and wages</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>51111 SALARY FACULTY REGULAR FULL</td>
<td>1,154,994</td>
<td>1,644,096</td>
<td>489,102</td>
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<tr>
<td>51121 SALARY FACULTY REGULAR PART</td>
<td>170,270</td>
<td>141,040</td>
<td>(29,230)</td>
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<tr>
<td>51123 SALARY TEMPORARY PART-TIME F</td>
<td>150,333</td>
<td>129,600</td>
<td>(20,733)</td>
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<tr>
<td>51211 SALARY NON-FACULTY REGULAR F</td>
<td>182,258</td>
<td>210,985</td>
<td>28,727</td>
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<td>51221 SALARY NON-ACADEMIC REGULAR</td>
<td>7,455</td>
<td>-</td>
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<td>Total Salaries and wages</td>
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<td>2,125,721</td>
<td>460,411</td>
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<td>Fringe benefits</td>
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<td>51891 FRINGE BENEFIT ALLOCATION</td>
<td>391,222</td>
<td>525,804</td>
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<td>Total Fringe benefits</td>
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<td>TOTAL COMPENSATION</td>
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<td>2,651,525</td>
<td>594,992</td>
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<td>Purchased services</td>
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<tr>
<td>55111 CONSULTANTS</td>
<td>7,933</td>
<td>-</td>
<td>(7,933)</td>
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<td>55121 LECTURERS/HONORARIA</td>
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<td>1,100</td>
<td>500</td>
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<td>55151 ADVERTISING</td>
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<td>15,000</td>
<td>16,000</td>
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<td>55511 NON-GW PRINTING/REPRODUCTION</td>
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<td>55561 CONTRACT SERVICE-OTHER</td>
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<td>Total Purchased services</td>
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<td>89,500</td>
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<td>54111 OFFICE SUPPLIES</td>
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<td>8,700</td>
<td>100</td>
<td>1.2%</td>
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<td>10,000</td>
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<td>54141 INSTRUCTIONAL SUPPLIES</td>
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<td>52131 LEASE OFFICE EQUIPMENT</td>
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<td>52191 NON-CAPITALIZED INSTRUCTIONA</td>
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<td>13,200</td>
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<td>52196 NON-CAPITALIZED OFFICE FURNI</td>
<td>11,200</td>
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<td>-</td>
<td>75,000</td>
<td>75,000</td>
<td>0%</td>
<td>100.0%</td>
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<tr>
<td>Total Development</td>
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</table>
## APPENDIX 20: FY 2011 Budget

<table>
<thead>
<tr>
<th></th>
<th>FY10 Forecast</th>
<th>FY11 Budget</th>
<th>Variance</th>
<th>Variance %</th>
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<tbody>
<tr>
<td><strong>Occupancy</strong></td>
<td></td>
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</tr>
<tr>
<td>56311 BUILDING/ROOM/FACILITY RENTAL</td>
<td>170,450</td>
<td>188,545</td>
<td>18,095</td>
<td>10.6%</td>
</tr>
<tr>
<td><strong>Total Occupancy</strong></td>
<td>170,450</td>
<td>188,545</td>
<td>18,095</td>
<td>10.6%</td>
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<tr>
<td><strong>Communications</strong></td>
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<td></td>
</tr>
<tr>
<td>53311 TELEPHONE - DIRECT</td>
<td>350</td>
<td>350</td>
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<tr>
<td>53411 POSTAGE/EXPRESS MAIL - NON-G</td>
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<td>750</td>
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<td>7.1%</td>
</tr>
<tr>
<td>59509 TELEPHONE/TELEX EXPENSE</td>
<td>30,000</td>
<td>36,000</td>
<td>6,000</td>
<td>20.0%</td>
</tr>
<tr>
<td><strong>Total Communications</strong></td>
<td>31,050</td>
<td>37,100</td>
<td>6,050</td>
<td>19.5%</td>
</tr>
<tr>
<td><strong>Travel and training</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>53101 US AIRFARE EXPENSE</td>
<td>13,050</td>
<td>12,550</td>
<td>(500)</td>
<td>-3.8%</td>
</tr>
<tr>
<td>53102 US BUSINESS MEALS</td>
<td>3,500</td>
<td>3,725</td>
<td>225</td>
<td>6.4%</td>
</tr>
<tr>
<td>53103 US LOCAL TRANSPORTATION</td>
<td>3,000</td>
<td>3,000</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>53104 US LODGING EXPENSE</td>
<td>12,800</td>
<td>14,000</td>
<td>1,200</td>
<td>9.4%</td>
</tr>
<tr>
<td>53105 US RENTAL CAR EXPENSE</td>
<td>2,900</td>
<td>2,950</td>
<td>50</td>
<td>1.7%</td>
</tr>
<tr>
<td>53111 US OTHER TRAVEL AND RELATED</td>
<td>540</td>
<td>540</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>53251 CONFERENCE/SEMINAR/TRAINING</td>
<td>10,000</td>
<td>10,000</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Total Travel and training</strong></td>
<td>45,790</td>
<td>46,765</td>
<td>975</td>
<td>2.1%</td>
</tr>
<tr>
<td><strong>Other Miscellaneous</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>52199 NON-CAPITALIZED COMPUTER SOF</td>
<td>5,100</td>
<td>5,500</td>
<td>400</td>
<td>7.8%</td>
</tr>
<tr>
<td>52211 MEMBERSHIPS</td>
<td>6,000</td>
<td>14,500</td>
<td>8,500</td>
<td>141.7%</td>
</tr>
<tr>
<td>52231 BOOKS</td>
<td>255</td>
<td>300</td>
<td>45</td>
<td>17.6%</td>
</tr>
<tr>
<td>52422 UNCOLLECTED RETURNED CHECKS</td>
<td>135</td>
<td>-</td>
<td>(135)</td>
<td>-100.0%</td>
</tr>
<tr>
<td>52441 PERMITS LICENSES &amp; FEES</td>
<td>11,750</td>
<td>-</td>
<td>(11,750)</td>
<td>-100.0%</td>
</tr>
<tr>
<td>52612 SPECIAL EVENTS/BUSINESS RELA</td>
<td>8,500</td>
<td>11,250</td>
<td>2,750</td>
<td>32.4%</td>
</tr>
<tr>
<td>52661 OFFICE COPYING- NOT GW</td>
<td>-</td>
<td>100</td>
<td>100</td>
<td>100.0%</td>
</tr>
<tr>
<td><strong>Total Other</strong></td>
<td>31,740</td>
<td>31,650</td>
<td>(90)</td>
<td>-0.3%</td>
</tr>
<tr>
<td><strong>GW Services (Interdept. Assessments)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>59111 ALTERATIONS/IMPROVEMENTS EXP</td>
<td>500</td>
<td>500</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59115 GENERAL MAINTENANCE AND REPA</td>
<td>1,500</td>
<td>1,500</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59117 HOUSEKEEPING SERVICES EXPENS</td>
<td>500</td>
<td>500</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59131 MISCELLANEOUS SERVICES</td>
<td>50</td>
<td>50</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59135 MOVING SERVICES PROVIDED BY</td>
<td>1,000</td>
<td>1,000</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59211 DIRECT COST SHARING</td>
<td>32,637</td>
<td>31,443</td>
<td>(1,194)</td>
<td>-3.7%</td>
</tr>
<tr>
<td>59501 PRINTING AND GRAPHICS</td>
<td>3,000</td>
<td>3,000</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59503 AUDIOVISUAL SERVICES</td>
<td>3,100</td>
<td>3,200</td>
<td>100</td>
<td>3.2%</td>
</tr>
<tr>
<td>59504 COMPUTER SERVICES EXPENSE</td>
<td>500</td>
<td>1,000</td>
<td>500</td>
<td>100.0%</td>
</tr>
<tr>
<td>59505 GW PARKING</td>
<td>250</td>
<td>250</td>
<td>-</td>
<td>0.0%</td>
</tr>
<tr>
<td>59508 MAIL AND POSTAGE</td>
<td>1,100</td>
<td>1,200</td>
<td>100</td>
<td>9.1%</td>
</tr>
<tr>
<td>59521 HOUSING OFFICE</td>
<td>3,021</td>
<td>-</td>
<td>(3,021)</td>
<td>-100.0%</td>
</tr>
<tr>
<td>59522 HIMMELFARB LIBRARY CHARGE</td>
<td>120</td>
<td>100</td>
<td>(20)</td>
<td>-16.7%</td>
</tr>
<tr>
<td>59523 GW ADVERTISING EXPENSE</td>
<td>384</td>
<td>-</td>
<td>(384)</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Total GW Services (Interdept. Assessments)</strong></td>
<td>47,662</td>
<td>43,743</td>
<td>(3,919)</td>
<td>-8.2%</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>2,483,658</td>
<td>3,242,428</td>
<td>758,770</td>
<td>30.6%</td>
</tr>
</tbody>
</table>

### OTHER INCREASES (DECREASES) IN NET ASSETS

|                      |               |             |          |            |
| **Capital expenditures** |     |             |          |            |
| 58536 CAPITALIZED LABORATORY AND I | 0.00 | (2,500) | (2,500) | 100.0% |
| **Total Capital expenditures** | 0.00 | (2,500) | (2,500) | 100.0% |
| **Total other changes in net assets** | 0.00 | (2,500) | (2,500) | 100.0% |
| **Change in net assets before cumulative effect of** | 275,293 | 1,422,944 | 1,147,651 | 416.9% |
| **INCREASES (DECREASES) IN NET ASSETS** | 275,293 | 1,422,944 | 1,147,651 | 416.9% |
**APPENDIX 21: Budget Effect of Nursing Separation from Health Sciences**

**Income Statement Summary Overview**

**Health Sciences vs. Nursing Comparison**

**FY10 Forecast & FY11 Budget**

<table>
<thead>
<tr>
<th></th>
<th>Health Sciences FY10 Forecast</th>
<th>Health Sciences FY11 Budget</th>
<th>HSP FY10 w/out Nursing</th>
<th>HSP FY11 w/out Nursing</th>
<th>Nursing FY10 Forecast</th>
<th>Nursing FY11 Budget</th>
<th>% Share of HSP FY10</th>
<th>% Share of HSP FY11</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net Student Tuition and Fees</td>
<td>14,287,156</td>
<td>16,505,043</td>
<td>11,541,775</td>
<td>11,925,741</td>
<td>2,745,381</td>
<td>4,579,302</td>
<td>19.2%</td>
<td>27.7%</td>
</tr>
<tr>
<td>Net Contributions</td>
<td>36,584</td>
<td>14,000</td>
<td>36,584</td>
<td>14,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Pledge Payments</td>
<td>60,000</td>
<td>60,000</td>
<td>60,000</td>
<td>60,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Income</td>
<td>536,415</td>
<td>611,051</td>
<td>522,845</td>
<td>522,481</td>
<td>13,570</td>
<td>88,570</td>
<td>2.5%</td>
<td>14.5%</td>
</tr>
<tr>
<td><strong>TOTAL REVENUE</strong></td>
<td><strong>14,920,155</strong></td>
<td><strong>17,190,094</strong></td>
<td><strong>12,161,204</strong></td>
<td><strong>12,522,222</strong></td>
<td><strong>2,758,951</strong></td>
<td><strong>4,667,872</strong></td>
<td>18.5%</td>
<td>27.2%</td>
</tr>
<tr>
<td>% Change</td>
<td>15.2%</td>
<td>-18.5%</td>
<td>-27.2%</td>
<td>69.2%</td>
<td>46.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Salaries and Wages</td>
<td>7,221,349</td>
<td>8,160,442</td>
<td>5,556,038</td>
<td>6,034,721</td>
<td>1,665,311</td>
<td>2,125,721</td>
<td>23.1%</td>
<td>26.0%</td>
</tr>
<tr>
<td>Total Fringe Benefits</td>
<td>1,646,173</td>
<td>1,954,883</td>
<td>1,254,951</td>
<td>1,429,079</td>
<td>391,222</td>
<td>525,804</td>
<td>23.8%</td>
<td>26.9%</td>
</tr>
<tr>
<td><strong>Total Compensation</strong></td>
<td><strong>8,867,522</strong></td>
<td><strong>10,115,325</strong></td>
<td><strong>6,810,989</strong></td>
<td><strong>7,463,800</strong></td>
<td><strong>2,056,533</strong></td>
<td><strong>2,651,525</strong></td>
<td>23.2%</td>
<td>26.2%</td>
</tr>
<tr>
<td>% Change</td>
<td>14.1%</td>
<td>-27.7%</td>
<td>-26.2%</td>
<td>28.9%</td>
<td>13.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Purchased Services</strong></td>
<td>857,891</td>
<td>917,516</td>
<td>806,258</td>
<td>828,016</td>
<td>51,633</td>
<td>89,500</td>
<td>6.0%</td>
<td>9.8%</td>
</tr>
<tr>
<td><strong>Total Supplies</strong></td>
<td>152,653</td>
<td>150,477</td>
<td>129,053</td>
<td>115,577</td>
<td>23,600</td>
<td>34,900</td>
<td>15.5%</td>
<td>23.2%</td>
</tr>
<tr>
<td><strong>Total Equipment</strong></td>
<td>123,030</td>
<td>126,775</td>
<td>97,830</td>
<td>83,075</td>
<td>25,200</td>
<td>43,700</td>
<td>20.5%</td>
<td>34.5%</td>
</tr>
<tr>
<td><strong>Total Development Costs</strong></td>
<td>75,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>75,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Occupancy</strong></td>
<td>290,636</td>
<td>299,450</td>
<td>120,186</td>
<td>110,905</td>
<td>170,450</td>
<td>188,545</td>
<td>58.6%</td>
<td>63.0%</td>
</tr>
<tr>
<td><strong>Total Scholarships &amp; Fellowships</strong></td>
<td>70,000</td>
<td>70,000</td>
<td>70,000</td>
<td>70,000</td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Communications</strong></td>
<td>119,906</td>
<td>127,555</td>
<td>88,856</td>
<td>90,455</td>
<td>31,050</td>
<td>37,100</td>
<td>25.9%</td>
<td>29.1%</td>
</tr>
<tr>
<td><strong>Total Travel &amp; Training</strong></td>
<td>217,659</td>
<td>203,620</td>
<td>171,869</td>
<td>156,855</td>
<td>45,790</td>
<td>46,765</td>
<td>21.0%</td>
<td>23.0%</td>
</tr>
<tr>
<td><strong>Total GW Services</strong></td>
<td>295,882</td>
<td>277,041</td>
<td>248,220</td>
<td>233,298</td>
<td>47,662</td>
<td>43,743</td>
<td>16.1%</td>
<td>15.8%</td>
</tr>
<tr>
<td><strong>Total Other</strong></td>
<td>210,300</td>
<td>210,086</td>
<td>178,560</td>
<td>178,436</td>
<td>1,740</td>
<td>1,650</td>
<td>15.1%</td>
<td>15.1%</td>
</tr>
<tr>
<td><strong>Total Non-Compensation Expense</strong></td>
<td>2,337,957</td>
<td>2,457,520</td>
<td>1,910,832</td>
<td>1,866,617</td>
<td>427,125</td>
<td>590,903</td>
<td>18.3%</td>
<td>24.0%</td>
</tr>
<tr>
<td>% Change</td>
<td>5.1%</td>
<td>-11.4%</td>
<td>-20.2%</td>
<td>-28.3%</td>
<td>31.6%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>11,205,479</strong></td>
<td><strong>12,572,845</strong></td>
<td><strong>8,721,821</strong></td>
<td><strong>9,330,417</strong></td>
<td><strong>2,483,658</strong></td>
<td><strong>3,242,428</strong></td>
<td>22.2%</td>
<td>25.8%</td>
</tr>
<tr>
<td>% Change</td>
<td>12.2%</td>
<td>-22.2%</td>
<td>-25.8%</td>
<td>30.6%</td>
<td>16.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endowment Support</td>
<td>275,349</td>
<td>297,550</td>
<td>275,349</td>
<td>297,550</td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Expenditures</td>
<td>(22,768)</td>
<td>(2,500)</td>
<td>(22,768)</td>
<td>-</td>
<td>(2,500)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support/Investment</td>
<td>(34,930)</td>
<td>(30,720)</td>
<td>(34,930)</td>
<td>(30,720)</td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Other Changes in Net Assets</strong></td>
<td>217,651</td>
<td>264,330</td>
<td>217,651</td>
<td>266,830</td>
<td>-</td>
<td>(2,500)</td>
<td>0.0%</td>
<td>-0.9%</td>
</tr>
<tr>
<td><strong>Contribution Margin</strong></td>
<td>3,932,327</td>
<td>4,881,579</td>
<td>3,657,034</td>
<td>3,458,635</td>
<td>275,293</td>
<td>1,422,944</td>
<td>7.0%</td>
<td>29.1%</td>
</tr>
</tbody>
</table>
APPENDIX 22: Advisory Board Membership

The George Washington University
School of Medicine and Health Sciences

Department of Nursing Education

Advisory Board Membership

Rita Carty PhD, RN, FAAN
Previously the Dean of the School of Nursing at George Mason University and served as President of the American Association of Colleges of Nursing. She is a recognized national leader in nursing education.

Karen Drenkard, PhD, RN, NEA-BC, FAAN
Director of the Magnet Program for the American Nurses Credentialing Center which recognizes health care organizations that provide nursing excellence. She was also the Senior Vice President, Nursing/Chief Nursing Executive at Inova Health System and has served on numerous national committees.

Esther Emard MSN, RN, MSLIR
Chief Operating Officer of the National Committee for Quality Assurance. Prior to this, she was CEO of the Rhode Island Harvard Pilgrim Health Plan

Nellie Robinson MS, RN
Executive Vice President, Patient Services and Chief Nursing Officer at Children’s National Medical Center. She has served on many national committees and task forces and has been recognized for her vision and innovation in nursing care.

Janet Southby PhD, RN
Retired Chief Nurse of Walter Reed National Medical Center. She served in Viet Nam, has years of experience in the military health care system, and is an acknowledged leader in health care systems.

Carol Spence, PhD, RN
Director, Research National Hospice and Palliative Care Organization
The George Washington University
Department of Nursing Education
Advisory Board Minutes
January 26, 2010

Attending: Esther Emard, Col. Janet Southby, Carol Spence, Karen Drenkard, Ellen Dawson, Jean Johnson

Absent: Rita Carty

<table>
<thead>
<tr>
<th>Item</th>
<th>Discussion</th>
<th>Action/Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCNE Reception</td>
<td>The CCNE site visitors will meet with the Community of interest the first evening of the site visit.</td>
<td>February 24th in the Weingold Medical Center</td>
</tr>
<tr>
<td>School of Nursing</td>
<td>The Medical Center Executive Committee endorsed the department becoming a School of Nursing. The Advisory Board wholeheartily supported this and applauded the efforts made by the nursing leadership team. They see this next step will advance GW’s nursing leadership and research programs regionally and nationally. All offered assistance in propelling this forward as the current and expected workforce shortages affect us all. Much discussion ensued concerning external fundraising and the board strongly supports looking at the board’s make-up for potential donors and fundraisers.</td>
<td>Ellen and Jean have several presentations within the university as well as financial and SWOT analysis to do for the Faculty Senate and the Board.</td>
</tr>
<tr>
<td>Organizational Structure</td>
<td>The proposed organizational and decanal structure reviewed. Minimum discussion</td>
<td></td>
</tr>
<tr>
<td>Financial Structure</td>
<td>Jean and Ellen still working out the financials with the VP of Finance in the Medical Center</td>
<td>Jean and Ellen</td>
</tr>
<tr>
<td>Next meeting</td>
<td>After the May GW Board Meeting and vote</td>
<td>Ellen</td>
</tr>
</tbody>
</table>
### Introduction:

This SWOT analysis was requested by Chairman Ramsey. It was developed with robust faculty input, internal expertise from across the University, and external consultation. This document includes a comparison and analysis of the strengths and weaknesses and the opportunities and threats relative to establishing a School of Nursing (SON) at The George Washington University.

### SWOT Comparison:

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition revenue exists to support the move from a Department of Nursing Education (DNE) to a SON.</td>
<td>Some additional cost due to the addition of 2 decanal positions at .5 FTE (although the chair position is eliminated).</td>
</tr>
<tr>
<td>Industrious, innovative and nationally recognized faculty consider a SON essential to the continued development of academic and research excellence and are committed to the work of establishing a SON.</td>
<td>Infrastructure services (e.g. admissions, student services, etc.) need to be physically and financially separated from Health Sciences and may add costs.</td>
</tr>
<tr>
<td>60% of the regular service nursing faculty are tenured or tenure track.</td>
<td>DNE has no endowment to support faculty hires, scholarships, or new program development.</td>
</tr>
<tr>
<td>Medical Center Faculty Senate unanimously supports formation of a SON and views it as a positive addition to the Medical Center.</td>
<td>Limited pool of alumni to contribute to a development fund since programs just began in 2004.</td>
</tr>
<tr>
<td>All levels of educational programs exist – baccalaureate, graduate, and doctoral - providing the programmatic and financial basis to create a SON.</td>
<td>Few faculty members are tenured at the rank of professor (although 60% of the 17 regular service faculty are tenured or tenure track).</td>
</tr>
<tr>
<td>Nursing is the fastest growing program within the SMHS both in student numbers as well as research.</td>
<td>High tuition may limit enrolment.</td>
</tr>
<tr>
<td>Nursing programs have a strong applicant pool and enrolment history and are well positioned for growth.</td>
<td>Although DNE has foundation and federally funded research, it does not have NIH funded research.</td>
</tr>
<tr>
<td>A SON is perceived by discerning applicants, students and faculty as a sign of commitment to nursing education and research and therefore a desirable institution at which to pursue related goals.</td>
<td>Nursing could become isolated at the VSTC. Will need to address this challenge to remain integrated with the Medical Center and the medical education and health sciences programs.</td>
</tr>
<tr>
<td>Processes essential to support nursing students from application to graduation are already in place.</td>
<td>Creating a school of Nursing will require change to the Medical Center faculty organization plan, which is due for Quadrennial Review.</td>
</tr>
<tr>
<td>Nursing brought in nearly $5M in federal and foundation grants in the last 4 years.</td>
<td></td>
</tr>
</tbody>
</table>
### Opportunities

- Add $7 million in revenue without adding Foggy Bottom campus students.
- Create new donor opportunities.
- Enhance University portfolio as it prepares to embark on a major campaign.
- Expansion from 2 to 3 schools will strengthen the Medical Center position in academic health care.

### Threats

- Schools of nursing in Northern Virginia could see GW SON as a threat.
- George Mason University owns land and may develop health education programs in Loudoun, creating competition.
- Economy may make it difficult for students to afford the GW program which could hinder full development of SON.
APPENDIX 24: SWOT Analysis Detail

<table>
<thead>
<tr>
<th>Northern Virginia (Loudoun now being the wealthiest county in the US) provides an opportunity to develop an undeveloped donor base for nursing.</th>
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<tbody>
<tr>
<td>Establish an anchor school at VSTC.</td>
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<td>New linkages in Virginia could support new educational programs such as HIT.</td>
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<tr>
<td>Attract NIH funded researchers.</td>
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<td>Better position nursing at GW to compete for NIH research grants.</td>
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<td>Other SONs (both nationally and internationally) are more likely to partner with a SON than a DNE, which could lead to new grant opportunities.</td>
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<tr>
<td>SON will strengthen opportunities with clinical partners such as Inova and HCA health systems.</td>
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<td>Anticipated national shortage of nurses relative to demand, with a projected national shortage of 285,000 by 2020.</td>
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<tr>
<td>Virginia shortage of 10,000-20,000 nurses in the next ten years.</td>
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<tr>
<td>Aging population will also increase the demand for nurses.</td>
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<tr>
<td>Health care reform is expected to double the number of health care centers (from 1200 to 2500) which will result in significant need for additional nurse leaders and primary care, mental health, and specialty nurses.</td>
</tr>
<tr>
<td>Renewed regional and national interest in nursing as a well-paying profession.</td>
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<tr>
<td>Nursing is slated to add the most jobs of any occupation during the coming decade.</td>
</tr>
<tr>
<td>Graduate education is a top priority for the profession for creating new faculty, researchers, health system leaders, and primary care and specialty nurses.</td>
</tr>
</tbody>
</table>
APPENDIX 24: SWOT Analysis Detail

SWOT Analysis:

The SWOT analysis includes those strengths, weaknesses, opportunities and threats that relate specifically to launching a school of nursing and not to further developing nursing as it currently exists in the Department of Nursing Education. Primary among the strengths is the compelling support that a SON has from the faculty of the DNE, faculty in the School of Medicine and Health Sciences, the Medical Center Faculty Senate, and Medical Center and University leadership. On February 3, the Medical Center Faculty Senate voted unanimously to support the establishment of a SON to complement the two existing schools.

Schools of nursing are present in most major academic health centers across the country. Currently, the DNE is housed within the School of Medicine and Health Sciences. This is highly unusual and viewed by applicants, potential new faculty, and potential research sponsors as diminished institutional support for nursing. Faculty in the DNE have been told by other faculty and students during recruitment processes that it is important to have a school as a sign of nursing’s value within the institution and that they would not come to GW as a result of there not being a school here. Also, being a department rather than a SON makes GW less competitive for federal research grants, and especially NIH research grants.

Establishing a SON will build on the existing academic programs in the DNE, which already include baccalaureate, graduate, and doctoral programs. These programs created a strong reputation for GW in nursing education and provide a tuition base to support the evolution of the department to a school. Also, key infrastructure activities that contribute to the viability of a school are already in place. Nursing has fully accredited programs. While the official accreditation report from the latest site visit of February 26, 2010 will not be sent until October, the exit report by the site visit team indicates that all programs meet the Commission on Collegiate Nursing Education standards. Also, the range of policies and processes from marketing to graduation has been established within the department and can evolve to a SON.

Financially, the SON could add approximately $7 million dollars in revenue through expanded academic programs—and without adding Foggy Bottom campus students. However, there will be additional costs with a SON, including costs of two part-time decanal positions, with some offset from the elimination of the department chair position. There will also be additional costs associated with launching the SON in terms of publicity and public events. The DNE already provides funding for infrastructure costs including admissions and student services staff. These costs are currently integrated into the HS budgets and will need to be separated out. The weakness of the lack of an endowment to draw on in the development of the SON means the initial launch must be funded from operations. Endowment funds will continue to be limited if nursing remains at a departmental level. See attached budget.

Nursing leadership has met very aggressive goals for the development of new activities as demonstrated by initiating nursing education in 2004, creating a full complement of programs that will be fully accredited by 2010, and developing a nursing research portfolio. Within a short period of time, the DNE developed successful bachelor’s, master’s and doctoral programs; became fully accredited; and initiated a research agenda focused on improving quality of nursing care. The DNE established a solid research track record, with a federally and foundation sponsored projects portfolio of $4.9 million dollars. While this shows strength, a weakness is that none of the research is NIH funded—which is the result of having a departmental level nursing program which makes it especially challenging to attract high level nursing researchers and makes us less attractive to NIH for research grants.
Housing the majority of the SON at the VSTC will provide unique opportunities in terms of having adequate space for program development and parking for students and faculty. With lower rental costs than in downtown DC, the school will be able to invest in developing faculty and research opportunities. However, the challenge of housing the majority of activity at the VSTC is to retain nursing in the mainstream of the Medical Center and University as well as maintaining a cohesive faculty among those who are at the VSTC and those at Foggy Bottom.

Organizational changes will be necessary with a review and update of the Medical Center Organizational Plan through the Quadrennial Review Process which takes place on a periodic basis. It is time for an update, and changes related to the SON would be included. The SON would need to create bylaws that are consistent with the Faculty Code. The requirement for 75% of the regular service faculty being tenured or tenure track is manageable with the use of the special service faculty category for clinical faculty. As noted by the Executive Committee of the University Faculty Senate, this category of faculty is not counted in the ratio of tenure/tenure track to non tenure track faculty. By appointing faculty who will be primarily supervising students in clinical sites into the special service category with the title of clinical faculty and not including them in the denominator for regular service, the SON will be able to increase the current 60% ratio (which exceeds the 50% requirement for departments) to reach the 75% requirement by 2013 given the student and faculty projections. However, the issue of having a sufficient number of tenured professor faculty members is a challenge. Over the next year efforts will be made to attract faculty who could be appointed to tenured professor positions. Having school status would make this easier to accomplish.

A potential threat of launching a school is having opposition from other schools of nursing, particularly the Virginia based schools. Despite the potential opposition from other schools, the opportunities are many. According to regional and national workforce reports, the demand for nurses will remain strong for at least the next two decades and likely beyond. The aging of the population creates new demands for nursing care at all levels. The current nurse faculty shortage also presents opportunity for growing educational programs that will prepare nurses for faculty positions. With the growth and wealth of Loudoun County come opportunities to recruit students and to strengthen our partnerships with health systems dominating the region specifically, Inova and HCA, as well as the department of public health, home care agencies and nursing homes. In addition, the potential to develop a donor base given the wealth and health interest in the County is significant. Also, as nursing develops an MSN in health information technology, there is significant opportunities for innovative partnerships with IT firms in Northern Virginia.

Summary

The SWOT analysis shows there are many strengths and opportunities associated with initiating a school of nursing. While the weaknesses and threats need to be addressed, these are all manageable. The analysis indicates much can be gained by creating a school of nursing at GW, and particularly for those areas that are consonant with the direction of the University—enhancing academic programs, growing our research and donor base, and service. Nursing centers around service to the community.