

GRADUATE COUNCIL: PROPOSAL FOR CHANGE IN EXISTING COURSE/PROGRAM

Originating Unit Nursing

Type of action: change in course change in program

Type of change requested:

- | | |
|---|--|
| <input type="checkbox"/> Number | <input type="checkbox"/> Course Title |
| <input type="checkbox"/> Description | <input type="checkbox"/> Prerequisite(s) Program |
| <input type="checkbox"/> Drop Course | <input type="checkbox"/> Requirements |
| <input checked="" type="checkbox"/> Drop Program* | <input type="checkbox"/> Other, please specify |

**A SACSCOC Drop Program Justification form will need to be completed*

Semester and year course/program will take effect: Fall 2023

Course instructional methodology: Web

course component types: [ugradcouncil.tcu.edu/forms/Course Component Types.pdf](http://ugradcouncil.tcu.edu/forms/Course%20Component%20Types.pdf)

Current name: Family Nurse Practitioner Certificate

Proposed name:

Appropriate computer abbreviation (30 spaces or less):

Programs Only

Current program code: NFNPCERT
(ex:EDCE-PHD)

Proposed code (list 2) _____ or _____

Current CIP code:

Does the change require a new or change in CIP code: Yes No

If yes, what is the proposed new CIP code:

*for reference please visit: nces.ed.gov/ipeds/cipcode/resources.aspx?y=56

Is the program already considered TCU STEM: Yes No

Does the change include a request to be a TCU STEM program: Yes No

Description of change (omit if dropping a course or program):

Present Catalog Copy

Proposed Catalog Copy:

Supporting evidence or justification:

The TCU NURSING FNP certificate is closed effective August 1, 2023, as a program audit has demonstrated sustained low enrollment. No students are currently enrolled in the certificate program.

Explain how the change(s) will affect the current outcomes and assessment mechanisms?

No affect

Additional resources required

Faculty:

Space:

Equipment:

Library:

Financial Aid:

Other:

Change in teaching load:

Does this change affect any other units of the University? Yes No

If yes, submit supporting statement signed by chair of affected unit.

If cross-listed, provide evidence of approval by all curriculum committees appropriate to both the originating and the cross-listed units.

Chair of Originating Unit:

Name: Suzy Lockwood

Unit: Nursing-Graduate

Signature: **Dr. Suzy Lockwood**  Digitally signed by Dr. Suzy Lockwood
Date: 2023.09.11 18:46:15 -05'00'

GRADUATE COUNCIL: SACSCOC DROP PROGRAMS JUSTIFICATION

Date of closure (date when new students will no longer be admitted)

An explanation of how affected parties (students, faculty, staff) will be informed of the impending closure.

Family Nurse Practitioner Certificate track closure was discussed and approved during regularly scheduled meetings by the Graduate Program Committee (all nursing faculty with graduate faculty status) and Nursing Faculty Assembly (all full-time faculty). The tracks do not have any associated staff. There are no students enrolled in the certificate program. TCU Nursing's accreditation agency, the Commission on Collegiate Nursing Education, has been notified of the track closures as well as our stakeholders, faculty, and staff. TCU Graduate Nursing uses the NURS CAS (Common Application System) for applications and we have already removed this program from the application portal and updated the TCU Nursing website.

An explanation of how all affected students will be helped to complete their programs of study with minimal disruption.

There are no students enrolled in the certificate program.

An indication as to whether the teach-out plan will incur additional charges/expenses to the students and, if so, how the students will be notified.

There will be no additional charges or other expenses due to the teach-out.

How faculty and staff will be redeployed or helped to find new employment.

All TCU Nursing faculty (full-time and adjunct) teach across all levels and programs. TCU has had increased enrollment in all DNP programs and the BSN program; therefore, faculty that teach in this program have the expertise/credentials to teach in other tracks/programs.

Attach copies of signed teach-out agreements with other institutions, if any.

Chair of Originating Unit:

Name: Dr. Suzy Lockwood

Unit: Nursing-Graduate

Signature: Dr. Suzy Lockwood  Digitally signed by Dr. Suzy Lockwood
Date: 2023.09.11 18:45:22 -05'00'