



UNIVERSITY OF
SOUTH CAROLINA

Office of Institutional Research, Assessment & Analytics

December 13, 2023

Dr. Kevin Sightler, Director of Substantive Change
Commission on Colleges
Southern Association of Colleges and Schools
1866 Southern Lane
Decatur, GA 30033-4097

Dear Dr. Sightler:

The University of South Carolina Columbia is submitting the attached prospectus for approval of a new program at the current degree level that is a significant departure from current programs. The Nurse Midwife Doctor of Nursing Practice Program will be offered in Fall 2024. The program will be delivered via 100% online didactic learning. Nursing courses have didactic components online but require direct Face-to-Face clinical practice and other activities such as clinical conferencing or case-based projects along with timed on campus immersions to assess student competency.

In addition to providing notice of this new program this prospectus also provides notification of a new off-campus instructional site location where students will be able to earn below 25% of the Nurse Midwife Doctor of Nursing Practice Program. The address of the new off-campus site is: Lexington Medical Center Nursing Building, 150 Sunset Court, West Columbia, SC 29169.

The University of South Carolina has prepared a prospectus to request approval to offer the Nurse Midwife Doctor of Nursing Practice Program. Should you have any questions or require further information, please do not hesitate to contact me.

Sincerely,

Douglas Miles

Donald Miles, Executive Director OIRAA
SACSCOC Accreditation Liaison

Enclosure

Substantive Change Cover Sheet

Submit to SACSCOC,
Substantive Change, 1866
Southern Lane, Decatur, GA
30033. One copy only;
electronic media preferred.
Do not email submissions
or send copies to staff.

Note:


1. Include a completed cover sheet with each submission; please don't submit a cover sheet only.
2. Submit substantive changes as separate submissions except as permitted by policy.
3. Submit substantive changes defined in policy only; others are not reviewable.
4. For best results, download this form and complete with [Adobe Reader](#). Hover mouse over fields for guidance.

INSTITUTIONAL INFORMATION

INSTITUTION (NO ABBREVIATIONS PLEASE)

CITY + STATE/PROVINCE

SUBSTANTIVE CHANGE RESTRICTION

1. Is the institution currently on Warning, Probation, or Probation for Good Cause?	<input type="radio"/> Yes	<input type="radio"/> No
2. Was the institution placed on Warning, Probation, or Probation for Good Cause on or after September 3, 2020, and subsequently removed from sanction?	<input type="radio"/> Yes	<input type="radio"/> No
3. Is the institution currently under provisional certification for participation in federal financial aid programs?	<input type="radio"/> Yes	<input type="radio"/> No
If ANY are "Yes" the institution is on SUBSTANTIVE CHANGE RESTRICTION . Additional and/or different requirements may apply; consult policy.		

SUBMISSION INFORMATION

SUBSTANTIVE CHANGE TYPE (SELECT FROM DROP-DOWN LIST; SUBMIT ONLY TYPES DEFINED IN POLICY)

SUBMISSION DATE

SUBSTANTIVE CHANGE DESCRIPTION (BRIEF SUMMARY)

INTENDED IMPLEMENTATION

OFF-CAMPUS INSTRUCTIONAL SITES SUBMITTED IN THIS SUBSTANTIVE CHANGE

Site Name, Physical Address, City, State/Province, ZIP or Postal Code, and Country/Territory

1.	
2.	
3.	
4.	
5.	There are more than 5 sites in this submission → <input type="radio"/>

PROGRAMS SUBMITTED IN THIS SUBSTANTIVE CHANGE

Include credential AND discipline: e.g., Associate of Arts in English, Bachelor of Science in Physics, Certificate in Office Management, etc.

1.	
2.	
3.	
4.	
5.	There are more than 5 programs in submission → <input type="radio"/>

SUBMITTED

I certify the information on this form is correct and accurately represents the current status of the institution at the time of submission.

FOR OFFICE USE

SUBMITTING LIAISON or CEO NAME

EMAIL ADDRESS

Douglas Miles

Revised 04/07/2023

[Check for current version](#)

University of South Carolina - Columbia

Substantive Change Prospectus

Nursing Midwife Doctor of Nursing Practice Program

December 13, 2023

Douglas Miles

Donald Miles
Executive Director OIRAA
SACSCOC Liaison

Contact:

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ABSTRACT

The purpose of this proposed program in Nurse Midwife at the University of South Carolina (USC) College of Nursing (CON) is to promote the health of women in South Carolina. As an institution committed to optimizing health and quality of life for citizens of South Carolina, nurse-midwifery is a natural fit as nurse-midwives are primary care providers who promote the health of women and newborns.

The proposed program **Nurse Midwife Doctor of Nursing Practice Program** at the University of South Carolina, College of Nursing seeks to educate registered nurses to obtain advanced educational preparation to promote the health of women in South Carolina. The DNP will permit BSN prepared nurses to obtain a certificate to practice in less time supporting the goal of increasing postsecondary educational attainment by providing an accessible online pathway to further education of students and promoting health and equity of health care for all South Carolina citizens. As such, it is aligned with the SC Public Agenda for Higher Education's goal to increase the proportion of South Carolinians with high-quality postsecondary credentials as it provides a clear pathway to further education, employment, or both.

The projected start date for the first cohort of students is Fall 2024. The projections for the program enrollments are below:

Projected Enrollment – Nurse Midwife DNP Program									
Year	Fall Headcount			Spring Headcount			Summer Headcount		
	New	Total	Total Credit Hours	New	Total	Total Credit Hours	New	Total	Total Credit Hours
Year 1	4	4	24	0	4	24	6	10	72
Year 2	4	14	92	0	14	94	6	20	248
Year 3	4	24	240	0	24	268	6	24	428
Year 4	4	28	404	0	28	408	6	24	428
Year 5	4	28	404	0	28	408	6	24	428

Delivery Method of Program

The Nurse midwife program will be delivered via 100% online didactic learning. Nursing courses have didactic components online but require direct Face-to-face clinical practice and other activities such as clinical conferencing or case-based projects along with timed on campus immersions to assess student competency.

The Learning Management System (Blackboard) allows USC faculty to create a secure course website for class communications, posting assignments, posting readings, linking to complementary websites, administering exams, and much more. In courses that use Blackboard, the course syllabus will provide basic information about accessing Blackboard.

Program Locations- University of South Carolina Columbia

- Online / Columbia Delivery
- Immersions at Lexington Medical Center Nursing Building planned for NURS 704, 753 and 762 only. Address: 150 Sunset Court West Columbia, SC 29169

This prospectus also provides notification to SACSCOC of a new off-campus instructional site location, Lexington Medical Center Nursing Building, for the University of South Carolina Columbia where students will be able to earn below 25% of the Nurse Midwife Doctor of Nursing Practice (DNP) Program Degrees. This change is effective August 2024. The address of the new off-campus site is listed below:

Lexington Medical Center Nursing Building
150 Sunset Court West Columbia, SC 29169

The Lexington Medical Center location is not intended to be a branch campus. This location is an off campus instructional site. This site will be ongoing.

DETERMINATION OF THE NEED FOR THE CHANGE/RELATIONSHIP TO MISSION/PLANNING AND APPROVALS FOR THE CHANGE

USC's Mission Alignment

The proposed program fits with the University's mission to educate "the state's citizens through teaching, research, creative activity, and community engagement" and to lead "the way in providing all students with the highest-quality education, including the knowledge, skills, and values necessary for success and responsible citizenship in a complex and changing world." This program was developed to meet the state's need to improve access to care for women and children. In addition, the proposed program aligns with the University's recently released Strategic Plan as it will help attract and retain a diverse student body and develop impactful community partnerships as this program was developed at the request of a community partner (PRISMA).

Assessment of the Need

The need is great for nurse midwife programs across the country, but especially in SC. Currently, there are only 39 ACME-accredited DNP, MSN, and Certificate programs combined in the U.S.¹

Kentucky and North Carolina each have one program while there are two programs in Tennessee and Georgia. There are no nurse midwife programs in South Carolina.

South Carolina Labor Market/Career Placement Outlook and Salaries

Occupation	SOC Code	Source	Current Employment Totals	10 year % Growth Projections	Average Salary (O-Net data)
Nurse-Midwife	29-1161	Bureau of Labor Statistics and ONet	8,100 nationally (BLS)	BLS: 7% (from 8,100 in 2021 to 8,700 projected)	\$120,880 annual (ONet)

				for 2031 nationally) ONet: 8-10%	
Nursing Instructors and Teachers, Postsecondary	25-1072	EDEPS	Average annual openings of 110 for SC	24.4% (from 860 in SC in 2020 to 1070 projected for 2030)	\$77,280 (EDEPS)

Note – SOC Codes should closely align with the CIP code.

Certified Nurse Midwives (CNMs) have legal authority to practice in every state and can work in a variety of settings: private practices, hospitals, birth centers, health clinics, and home birth services. In a conversation with Sharon Ryan CNM, DNP, Director of Midwifery Practice, Education and Global Outreach at ACNM (January 2020), she noted the US Bureau of Labor Statistics projects a 16% increase in midwifery jobs over the next 10 years reflecting about 1000 jobs created. Growth will probably be even more since this does not take into consideration the emerging maternity care provider shortage; ACOG projects an 18% shortage of providers by 2030. In 2020, SC only had 77 certified nurse midwives and only 16 of 46 counties had a certified nurse midwife (2021 South Carolina Health Professions Data Book). Additionally, in 2020, 11 of 46 counties did not have an Obstetrician-Gynecologist (2021 South Carolina Health Professions Data Book). Additionally, about one-third of the state’s population is more than 30-40 minutes away from an obstetrician (Sexton, 2021).

Our SC affiliate is aware of several practice locations interested in employing CNMs to help meet the needs of underserved areas, though these services have not advertised for position openings. There are also positions currently filled by CNMs nearing retirement who will need replacements, and current physician practices are looking to add midwifery in the next two to four years. A search of positions on SCWorks on July 26, 2023 resulted in 17 open positions for nurse midwives.

Industry Collaboration and Feedback

The U.S. maternal mortality rate is 14 deaths per 100,000 live births and is substantially higher than in peer nations such as Canada, which has 7 maternal deaths per 100,000 live births, and the United Kingdom, which has 9 maternal deaths per 100,000 live births. The maternal mortality rate in SC is 24.7/100,000 live births. For Black women in SC, the maternal mortality rate is 46.3/100,000 and in white women, 13.7/100,000. Healthy 2020’s goal is to have a rate no higher than 11.4 deaths/100,000 live births.²

While inadequate prenatal care clearly affects women’s health, inadequate care also has adverse effects on newborns and infants. The 2019 March of Dimes Report Card³ gave South Carolina a grade of “D” for the high rate of preterm births in our state (11.3%). Only 6 other states exceed SC’s rate. According to the Charleston Post & Courier⁴, 3406 infants in SC died prior to their first birthday in 2018, for an average of 7.2/1000 infants compared with the U. S. national average of 5.9/1000, placing SC’s infant mortality rate among the 10 highest in US states. Black infants in SC die at more than twice the rate of white infants (12.2/1000 vs. 5/1000). More than 1,200 women who gave birth in SC received no prenatal care and access to care for women living in rural, underserved counties is costly on social, economic, and psychological levels. Attached are letters of support from USC School of Medicine/Prisma Health and the ACNM SC Affiliate.

Admission and Completion Requirements

Admission Criteria (Post-Master's Entry)

- Bachelor of Science in Nursing (BSN) and a Master of Science in Nursing (MSN) degree from nationally accredited programs and evidence of credentialing within the applicant's specialty.
- Preferred cumulative grade point average (GPA) of 3.0 on a 4.0 scale for graduate coursework (official transcripts for all graduate coursework are required). Applicants who attend(ed) a graduate program that issued pass or fail grades for all classes will not be considered competitive applicants.
- Preferred cumulative grade point average (GPA) of 3.0 on a 4.0 scale for undergraduate coursework (official transcripts for all nursing coursework are required). Applicants who attended a BSN or MSN program that issued pass or fail grades for all classes will not be considered competitive applicants.
- Applicants with a master's degree in nursing must be certified, licensed and practicing as an advanced practice nurse with prescriptive authority in order to proceed to the 33 credit hours DNP terminal degree unless seeking the Executive Healthcare Leadership concentration.
- Evidence of writing competence, which will be evaluated through the candidate's prepared written statement submitted with the application, as well as by written response to an essay question given during the admissions interview.
- Personal goal statement.
- Current CV or Resume (in addition to your education and professional experiences, include any certifications, leadership experiences, experiences with diverse or underserved population, paid or volunteer healthcare experiences).
- Three letters of reference that attest to the applicant's academic ability, professional competency, and personal character from individuals in the health care field.
- APRN applicants are required to have 2400 work hours within the past 24 months. Submit official Verification of Work Hours Form from employer (upload with application).
- Executive Healthcare Leadership track only - Preferred work experience: 2000 hours of experience **in a leadership role** over the last five years; applicants with a MBA, MPH, or MHA should have 4000 hours.*
- Submit official Verification of Work Hours Form ([Appendix C](#)) from employer (upload with application).
- Interview with nursing graduate faculty.
- Unencumbered, active registered nurse (RN) or advanced practice registered nurse (APRN) license in state where clinical experiences will occur.
- Current BLS certification.
- Verification of clinical hours completed during the applicant's MSN program.
- GRE not required.

Admission Criteria (BSN to DNP Entry)

- Successful completion of BSN degree from a nationally accredited program.
- Preferred cumulative grade point average (GPA) of 3.0 on a 4.0 scale for undergraduate coursework (official transcripts for all nursing coursework are required). Applicants who attended a BSN program that issued pass or fail grades for all classes will not be considered competitive applicants.
- Three letters of reference that attest to the applicant's academic ability, professional competency, and personal character from doctorly prepared individuals in the health care field.
- Personal goal statement.

- Evidence of writing competence, which will be evaluated through the candidate's prepared written statement submitted with the application, as well as by written response to an essay question given during the admissions interview.
- Current CV or Resume (in addition to your education and professional experiences, include any certifications, leadership experiences, experiences with diverse or underserved population, paid or volunteer healthcare experiences).
- Current unencumbered, active RN licensure in the state where clinical experiences will occur.
- Current BLS certification.
- Current ACLS certification (AGACNP applicants only).
- BSN to DNP applicants are required to have 2400 work hours within the past 24 months. Preferred AGACNP clinical experience in an acute care setting (ICU, critical care, medical/surgical or emergency department). Preferred FNP clinical experience includes critical care, ICU, medical/surgical or emergency department. Preferred PMHNP clinical experience includes psych or related fields.
- Executive Healthcare Leadership track only - Preferred work experience: 2400 hours of experience in a leadership role over the last five years.*
- Submit official Verification of Work Hours Form ([Appendix C](#)) from employer (upload with application).
- Interview with nursing graduate faculty.
- GRE not required.

Requirements for earning the DNP include:

1. Complete doctoral residency of at least 18 graduate hours for three consecutive semesters. Enrollment in a summer term is not required to maintain continuity, but credits earned during summer terms (including May session) will count toward the 18 hours required for Residency. The residency requirement may be met only after admission to the DNP program;
2. Complete an approved program of study;
3. Comprehensive assessment through defense of project proposal;
4. Completion of a research utilization/evidence-based project and oral defense;
5. Have a cumulative GPA of at least 3.0 and earn a 3.0 or better in all required classes and courses number 700 or higher.
6. Complete a minimum 1,100 clinical hours;

CURRICULUM

The Doctor of Nursing Practice (DNP) is a practice degree designed to prepare registered nurses as clinical practitioners/scholars to assume advanced practice clinical and leadership roles. The DNP Nurse Midwifery program has one entry point for the student holding a B.S.N. The Nurse Midwifery program prepares registered nurses to provide direct patient management in primary care and the hospital. Graduates are employed in a variety of settings including the hospital, community health clinics, birth centers, and women's health care settings.

The curriculum prepares students to take the national certification exam from the American Midwifery Certification Board (AMCB).

Learning Outcomes

At the conclusion of the program, the DNP's graduate will be able to:

- Identify direct and indirect clinical problems in women across the lifespan and work with interprofessional teams to address them.
- Differentiate theoretical knowledge as it applies to direct or indirect clinical care.
- Translate evidence to address population health problems.
- Integrate databases and information literacy in designing interventions for care of women across the lifespan.
- Execute evidence-based interventions to improve health care outcomes.

Entry

The Nurse Midwife, DNP program offers one entry point for students:

B.S.N. entry - a student must hold a Bachelor of Science in nursing degree from a program that is nationally accredited.

Requirements for earning the DNP include:

1. Complete doctoral residency of at least 18 graduate hours for three consecutive semesters. Enrollment in a summer term is not required to maintain continuity, but credits earned during summer terms (including May session) will count toward the 18 hours required for Residency. The residency requirement may be met only after admission to the DNP program;
2. Complete an approved program of study;
3. Comprehensive assessment through defense of project proposal;
4. Completion of a research utilization/evidence-based project and oral defense;
5. Complete a minimum 1,100 clinical hours;
6. Have a cumulative GPA of at least 3.0 and earn a 3.0 or better in all required classes and courses number 700 or higher.

Course Requirements (77 Hours)

Course	Title	Credits
NURS 707	Advanced Pathophysiology for Nurses	3
NURS 702	Pharmacologic Mgmt in Pediatric, Adult, & Gerontological Patients Across Hlthcare Delivery Continuum	3
NURS 704	Advanced Health Assessment and Diagnostic Reasoning ¹	3
NURS 718	Diagnostic Interpretation and Therapeutic Modalities	3
NURS 737	Foundations for DNP Development	3
NURS 789	Statistical and Research Methods for Nursing Practice	3
NURS 720	Clinical Application of Population Analysis	3
NURS 749	Foundations of Midwifery Care	2
NURS 744	Anatomy & Physiology for Midwives	3
	Nurse-Midwifery Management: Antepartum Care & Postpartum Care ²	7

	Nurse-Midwifery Management: Intrapartum Care, Immediate Postpartum, & Newborn Care ^{1,2}	7
NURS 754	Nurse-Midwifery Management: Integration ²	3
NURS 755	Professional Roles of the Nurse-Midwife	2
NURS 762	Midwifery Care in Women's Health ^{1, 2}	3
NURS 808	Advanced Nursing in Population Health	3
NURS 779	Health Policy ²	3
NURS 780	Organizational Theories and Systems in Healthcare	3
NURS 817	Application of Statistics for Evidence Based Nursing Practice	3
NURS 819	Evidence and Nursing Practice	3
NURS 781	Applied Technology in Health Care	3
NURS 783	Clinical Project Immersion & Proposal Development ²	3
NURS 805	Advanced Nursing Leadership	3
NURS 897	DNP Project Preparation ²	6
Total Credit Hours		78

1 Indicates on campus immersion course.

2 Indicates clinical course.

Curriculum Map

BSN to DNP CNM Summer Full-time (9 semesters)

Summer Start Only (May)

Year 1	Summer Semester 1	Fall Semester 2	Spring Semester 3
	NURS 720 (3 credits) ^A NURS 789 (3 credits) ^A NURS 737 (3 credits)	NURS 707 (3 credits) NURS 808 (3 credits)	NURS 702 (3 credits) NURS 779 (3 credits/40 clinical hours) * NURS 780 (3 credits)
Year 2	Summer Semester 4	Fall Semester 5	Spring Semester 6
	NURS 704 (3 credits) ⁺ NURS 817 (3 credits) NURS 819 (3 credits)	NURS 718 (3 credits) NURS 762 (3 credits) ⁺⁺ NURS 781 (3 credits) NURS 783 (3 credits/112 clinical hours) ^{**}	NURS 805 (3 credits) NURS 744 Anatomy & Physiology for Midwives (3 credits) NURS 749 Foundations of Midwifery Care (2 credits) NURS 897 (2 credits/clinical hours)*
Year 3	Summer Semester 7	Fall Semester 8	Spring Semester 9
	NURS 752 Nurse-Midwifery Management: Antepartum & Postpartum Care (7 credits)* NURS 897 (2 credits/clinical hours)*	NURS 753 Nurse-Midwifery Management: Intrapartum Care, Immediate Postpartum & Newborn Care (7 credits)**	NURS 754 Nurse Midwifery Management: Integration Practicum (3 credits)*

		NURS 897 (2 credits/clinical hours)*	NURS 755 Professional Roles of the Nurse-Midwife (2 credits)
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Total 78 credit hours, 1048 clinical hours + various hours NURS 897 (plan to be developed with the DNP chair)

- ^ course offered in A term only
- * course requires clinical hours
- + on-campus immersion

New Course
Extra offering

BSN to DNP CNM Summer Part-time (12 semesters)
Summer Start Only (May)

Year 1	Summer Semester 1	Fall Semester 2	Spring Semester 3
	NURS 789 (3 credits) ^A NURS 737 (3 credits)	NURS 720 (3 credits) ^A NURS 808 (3 credits)	NURS 779 (3 credits/40 clinical hours) * NURS 780 (3 credits)
Year 2	Summer Semester 4	Fall Semester 5	Spring Semester 6
	NURS 817 (3 credits) NURS 819 (3 credits)	NURS 707 (3 credits) NURS 781 (3 credits)	NURS 702 (3 credits) NURS 783 (3 credits/112 clinical hours) *
Year 3	Summer Semester 7	Fall Semester 8	Spring Semester 9
	NURS 704 (3 credits) ⁺ NURS 897 (3 credits/ clinical hours) *	NURS 718 (3 credits) NURS 762 (3 credits) ^{**} NURS 897 (3 credits/ clinical hours) *	NURS 805 (3 credits) NURS 744 Anatomy & Physiology for Midwives (3 credits) NURS 749 Foundations of Midwifery Care (2 credits)
Year 4	Summer Semester 10	Fall Semester 11	Spring Semester 12
	NURS 752 Nurse-Midwifery Management: Antepartum & Postpartum Care (7 credits)*	NURS 753 Nurse-Midwifery Management: Partum Care, Immediate Postpartum & Newborn Care (7 credits)**	NURS 754 Nurse Midwifery Management: Integration Practicum (3 credits)* NURS 755 Professional Roles of the Nurse-Midwife (2 credits)

Total 78 credit hours, 1048 clinical hours & + various hours NURS 897 (plan to be developed with the DNP chair)

- ^ course offered in A term only
- * course requires clinical hours
- + on-campus immersion

New Course
Extra offering

Course Descriptions

The program will include seven (7) new courses covering the essential components of Nurse Midwifery core standards. These six courses were developed and approved in Fall 2021. One course pending approval Fall 2023.

[NURS 744* \(3 credits\) Anatomy & Physiology for Certified Nurse Midwife](#) Analysis of the normal anatomy & physiologic basis for reproduction in humans that serves as the foundation for clinical assessment, decision making, and management for nurse midwives.

[NURS 749* \(2 credits\) Foundations of Midwifery](#) Analysis of both historical perspectives and current societal influences with consideration of how each has impacted the development of nurse-midwifery and the midwifery profession.

[NURS 752* \(7 credits\) Nurse-Midwifery Management: Antepartum & Postpartum Care](#) Evaluation Management of antepartum care using evidence-based practice guidelines as well as laboratory and diagnostic studies, health promotion in pregnancy and understanding of fetal evaluation.

[NURS 753* \(7 credits\) Nurse-Midwifery Management: Intrapartum, Immediate Postpartum Care & Newborn Care](#) Focuses on the management of care during physiologic childbearing including the development of clinical judgment and decision-making from concepts of physiologic birth and its variations through management of intrapartum complications.

[NURS 754* \(3 credits\) Nurse Midwifery Management: Integration Practicum](#) Integrates, applies, and reflects upon the full scope clinical midwifery experience incorporating decision-making and self-evaluation in providing holistic care to the lifespan of the woman and the newborn.

[NURS 755* \(2 credits\) Professional Roles of the Certified Nurse-Midwife](#) This course focuses on the role of the nurse midwife. Special consideration is given to business, policy, legal, cultural, and ethical issues regarding nurse midwifery.

[NURS 762* \(3 credits\) Midwifery Care in Women's Health](#) Women's health care focused on the reproductive, gynecological, and primary health care needs. Field study required. (New course pending approval Fall 2023)

The program will include sixteen (16) already approved DNP courses.

[NURS 702 \(3 credits\) Pharmacologic Management in Pediatric, Adult, & Gerontological Patients Across Healthcare Delivery Continuum](#) Pharmacologic management of acute and chronic health problems of pediatric, adult and gerontological patients across the healthcare delivery continuum.

[NURS 704 \(3 credits\) Advanced Health Assessment and Diagnostic Reasoning](#) Advanced theory and practice in critical thinking, physical assessment, diagnostic reasoning for clients across the lifespan to identify pathologic variations and initiate appropriate interventions. Didactic, lab, and field study.

[NURS 707 \(3 credits\) Advanced Pathophysiology for Nurses](#) Advanced concepts of pathophysiological functioning with application to advanced nursing practice in selected specialty areas.

[NURS 718 \(3 credits\) Diagnostic Interpretation and Therapeutic Modalities](#) Analysis of diagnostic and laboratory findings for clinical decision-making in advanced practice nursing. Course incorporates selected medical and nursing diagnostic and therapeutic modalities.

[NURS 720 \(3 credits\) Clinical Application of Population Analysis](#) Application of concepts and principles of epidemiology, genetics/genomics, health informatics, and population health assessment to support clinical decision-making skills within different practice environments and health policy development.

[NURS 737 \(3 credits\) Foundations to DNP Development](#) This course is designed to introduce students to the Doctor of Nursing Practice degree to include the roles of expert clinician, clinical scholar, policy and patient advocate and leader in healthcare.

[NURS 779 \(3 credits\) Health Policy](#) Analysis of issues and forces affecting health delivery through the public sector; major models of political decision-making; and current health legislation.

[NURS 780 \(3 credits\) Organizational Theories and Systems in Healthcare](#) Systems theories applied to complex organizations, emphasizing advanced nursing roles in strategic planning and systems thinking within current and anticipated healthcare environments.

[NURS 781 \(3 credits\) Applied Technology in Healthcare](#) Computer applications and other technological advances in nursing and health care delivery. Nursing administration, patient care management, and research applications.

[NURS 783 \(3 credits\) Clinical Project Immersion & Proposal Development](#) Provides students the opportunity to integrate nursing theory, research, and advanced nursing practice into a health care clinical project through interactive seminar format. Requires students to create a clinical project that transforms clinical practice for a selected population and incorporates process and outcome evaluations.

[NURS 789 \(3 credits\) Statistical and Research Methods for Nursing Practice](#) Exploration of research methods, including application of basic statistical principles and procedures. Evaluation of published nursing research reports.

[NURS 805 \(3 credits\) Advanced Nursing Leadership](#) Nursing leadership in complex health care organizations.

[NURS 808 \(3 credits\) Advanced Nursing in Population Health](#) Application of evidence-based nursing interventions to issues in population health.

[NURS 817 \(3 credits\) Application of Statistics for Evidence-Based Nursing Practice](#) Application of intermediate inferential statistical techniques and procedures used to build and translate evidence-based nursing practice.

[NURS 819 \(3 credits\) Evidence and Nursing Practice](#) Analysis and synthesis of evidence needed for formulating recommendations for nursing practice.

[NURS 897 \(1-6 credits\) DNP Project Preparation and Residency](#) DNP project consists of two parts; synthesis of the literature related to a practice problem and application of findings in a practice setting.

Total Credit Hours Required: 78

Objectives and Outcomes

Doctor of Nursing Practice - Midwife

The Doctor of Nursing Practice (DNP) is a practice degree designed to prepare registered nurses as clinical practitioners/scholars to assume advanced practice clinical and leadership roles. The DNP Nurse Midwifery program has one entry point for the student holding a B.S.N. The Nurse Midwifery program prepares registered nurses to provide direct patient management in primary care and the hospital. Graduates are employed in a variety of settings including the hospital, community health clinics, birth centers, and women's health care settings.

The curriculum prepares students to take the national certification exam from the American Midwifery Certification Board (AMCB).

Program Learning Outcomes

Program Learning Outcomes	
Outcome 1	Identify direct and indirect clinical problems in women across the lifespan and work with interprofessional teams to address them.
Outcome 2	Differentiate theoretical knowledge as it applies to direct or indirect clinical care.
Outcome 3	Translate evidence to address population health problems.
Outcome 4	Integrate databases and information literacy in designing interventions for care of women across the lifespan.
Outcome 5	Execute evidence-based interventions to improve health care outcomes.

Evaluation and Assessment

The chart below summarizes student learning outcomes, measures and criteria, methods of assessment and expectation of student performance.

Learning Outcomes (LOs)	Curriculum	Measures and Criteria	Methods
1. Identify direct and indirect clinical problems in women across the lifespan and work with interprofessional teams to address them.	NURS 737 NURS 897 NURS 753	<p>Assignment: NURS 737 – clinical significance paper; NURS 897 – DNP Clinical Project; NURS 774 completion of clinical experience</p> <p>Outcomes Assessed: NURS 737 – 80% of students earn a B or higher on the assignment; NURS 897 – 90% of all DNP students reaching NURS 897 will successfully complete the DNP project. NURS 753- 85% of all students successfully complete the required clinical experience.</p>	<p>Collection plan: NURS 737, NURS 897, and NURS 753 faculty will report the grades in NURS 737 and NURS 897 as well as the number of students successfully completing the clinical requirements to the DNP/MSN/CGS Evaluation committee.</p> <p>The DNP/MSN/CGS Evaluation committee will assess results and determine if results: exceed, meet, or fall below the stated benchmark.</p> <p>The DNP/MSN/CGS evaluation committee will report the results to the academic council.</p> <p>The DNP/MSN/CGS Evaluation committee and Council will work with the faculty to make changes to the course should results warrant.</p> <p>Final approval would be in DNP/MSN/CGS council.</p>
2. Differentiate theoretical knowledge as it applies to direct or indirect clinical care.	NURS 780	<p>Assignment: Two theoretical knowledge mini papers are written in this course.</p> <p>Outcome Assessed: 80% of students earn a B or higher on the assignments.</p>	<p>Collection plan: NURS 780 faculty will report the grades each time NURS 780 is taught to the DNP/MSN/CGS Evaluation committee.</p> <p>The DNP/MSN/CGS evaluation committee will assess results and determine if results: exceed, meet, or fall below the stated benchmark.</p> <p>The DNP/MSN/CGS Evaluation committee will report the results to the academic council.</p> <p>The DNP/MSN/CGS Evaluation committee and Council will work with the faculty to make changes to the course should results warrant.</p> <p>Final approval would be in DNP/MSN/CGS council.</p>
3. Translate evidence to address population health problems.	NURS 808 NURS 819	<p>Assignment: NURS 808 – Summary of Population Analysis; NURS 819 – Evidence Table, Literature Review and Synthesis</p> <p>Outcomes Assessed: 80% of students earn a B or higher on the assignment.</p>	<p>Collection plan: Course faculty for NURS 808 and NURS 819 will report grades to the MSN/CGS/DNP Evaluation committee each semester the courses are taught.</p> <p>The DNP/MSN/CGS Evaluation committee will assess results and determine if results: exceed, meet, or fall below the stated benchmark.</p> <p>The DNP/MSN/CGS Evaluation committee will report the results to the academic council.</p> <p>The DNP/MSN/CGS Evaluation committee and Council will work with the faculty to make changes to the course should results warrant.</p> <p>Final approval would be in DNP/MSN/CGS council.</p>
4. Integrate databases and information literacy in designing interventions for care of women across the lifespan.	NURS 781	<p>Assignment: Data Base Project</p> <p>Outcome Assessed: 80% of students earn a B or higher on the assignment.</p>	<p>Collection plan: Course faculty for NURS 781 will report the grades each time the course is taught to the DNP/MSN/CGS Evaluation committee.</p> <p>The DNP/MSN/CGS Evaluation committee will assess results and determine if results: exceed, meet, or fall below the stated benchmark.</p> <p>The DNP/MSN/CGS Evaluation committee will report the results to the academic council.</p> <p>The DNP/MSN/CGS Evaluation committee and Council will work with the faculty to make changes to the course should results warrant.</p> <p>Final approval would be in DNP/MSN/CGS council.</p>

5. Execute evidence-based interventions to improve health care outcomes.	NURS 897	Assignment: DNP Clinical Project Outcome Assessed: 90% of all DNP students reaching NURS 897 will successfully complete the DNP project.	Collection plan: Course faculty for NURS 897 will report student outcomes of DNP projects for student reaching NURS 897 to the DNP/MSN/CGS Evaluation committee. The DNP/MSN/CGS Evaluation committee will assess results and determine if results: exceed, meet, or fall below the stated benchmark. The DNP/MSN/CGS Evaluation committee will report the results to the academic council. The DNP/MSN/CGS Evaluation committee and Council will work with the faculty to make changes to the course should results warrant. Final approval would be in DNP/MSN/CGS council.
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Other Evaluation measure include the following:

TEQ and CEQ: Teacher and Course Evaluations. Collected each semester from MSN students by class climate online. Data collected by the Office of Research College of Nursing and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate are used to collect and store data. Assessments are used as a quality improvement process for course content, teaching strategies, and course materials as appropriate.

PAQ: Program Assessment Questionnaire of Graduating MSN students: Collected each semester from graduating NE students by class climate online. Data collected by the Office of Research College of Nursing and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate are used to collect and store data. Assessments are used as a quality improvement process for course content, program content deficits, and course materials as appropriate.

EAQ: Employer Assessment Questionnaire who employ NE graduates: Will be collected annually from employers of NE graduates by class climate online. Data collected by the Office of Research College of Nursing and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate are used to collect and store data. Assessments are used to amend the program to ensure the graduate is meeting the employer's demands and expectations.

SEP: Student Evaluation of Preceptor. Collected each semester from the NE students in the practicum course by class climate online. Data collected by the Office of Research College of Nursing and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate are used to collect and store data. Assessments are used to evaluate the effectiveness of a preceptor for the student learning environment.

FPES: Faculty/Preceptor Evaluation of the Student. Collected a minimum of two times per semester for each NE student in each practicum course. Direct observation. Hard copy tool FPES is used by the Course Faculty Member and Preceptor to evaluate the student's competency proficiencies in the specialty criterion. Evaluations are shared with students to enhance or strengthen skills and competencies.

Compliance with SACSCOC Standard 10.7

The College of Nursing follows University policies for determining the amount and level of credit awarded for its courses. Course development begins with an assigned faculty member with content expertise, with the help of the Director of Distributed Learning as applicable. Decisions regarding the number of credit hours and level of the proposed course are proposed to the Curriculum committee and voted on within the appropriate Academic Council.

Clinical course hours: credit allocation is at an 8:1 ratio. For every eight (8) clock hours of direct clinical 1 credit is awarded.

Simulation course hours: credit allocation is at a 4:1 ratio. For every four (4) clock hours of direct clinical 1 credit is awarded.

Lab course hours: credit allocation is at a 2:1 ratio. For every two (2) clock hours of direct clinical 1 credit is awarded.

Clock hours: are allocated at the 50-minute academic hour.

All courses are overseen by qualified faculty.

Administrative Resources and Oversight

Chief Nursing Administrator: Jeannette O. Andrews, PhD, RN, ANP, FAAN is the seventh Dean of the USC College of Nursing beginning January 2013. Dr. Andrews' distinguished record of leadership in education, scholarship, practice, administration, strategic planning, and development clearly demonstrates her ability to lead the College forward in the years ahead.

Chief Academic Administrator: Alicia Ribar, PhD, APRN, FNP-BC, CNE is the chief academic officer, providing leadership in the strategic development and implementation of curricula that meet the needs of a diverse undergraduate and graduate student population. She oversees the Office of Student Affairs and Clinical Simulation Center.

Program Director: A full-time certified nurse midwife will serve as the program director for the certificate, MSN, and DNP programs and also serve as a full-time program faculty member. The program director will provide day-to-day oversight of the program.

Academic Advisor: A shared professional advisor will provide student support for the program.

Shared Faculty Governance: The faculty component of the shared governance model is organized around three academic councils (BSN, DNP/ MSN/Certificate, and PhD). The DNP/ MSN/Certificate Council will provide admission, curricular, and evaluation of the Nurse Midwife Certificate, MSN, and DNP programs.

Academic Assessment & Accreditation Manager: The Academic Assessment and Accreditation Manager will work directly with the Chief Academic Administrator on all matters related to assessment and accreditation; oversee the work of the Academic Councils by supporting the council and committee

chairs in assisting with their assessment needs, conduct training, research and/or program administration.

Faculty Qualifications

The University of South Carolina Faculty Manual outlines the minimum qualifications required of teaching faculty by rank. For tenured/tenure/track appointments (e.g., Professor, Associate Professor, Assistant Professor) faculty are required to hold a terminal degree in the teaching, or in a closely related, discipline in addition to a potential, for untenured faculty, or an established scholarly presence within a disciplinary area of expertise. For Instructors, a faculty member is expected to possess a master's degree in the teaching discipline or a master's degree with a concentration in the teaching discipline. ACAF 1.20: Credentials Verification for Instructors of Record ([Appendix E](#)) requires that the credentials of all instructors of record are in compliance with accreditation requirements. For instructors of record at the graduate level, faculty must have earned a doctoral/terminal degree in the teaching discipline or related discipline. When the credentials of an instructor of record does not meet these requirements but demonstrates outstanding professional experience or contributions to the teaching discipline, the individual may be alternatively credentialed. To teach a course at the graduate level this requires that the course department explain and provide documentation of the instructor's alternative qualifications to teach a specific course, which may include research, professional licensure or qualification, professional development, or other specialized training. In addition, for graduate courses, the instructor must have, at a minimum, 18 hours of relevant graduate coursework in addition to alternative credentials. Any exceptions require approval from the Office of the Provost.

Please see ([Appendix D](#)) for the faculty roster containing information for those faculty teaching required coursework within the Nurse Midwife Doctor of Nursing Practice Program. The faculty roster includes courses taught during Spring 2023 and Fall 2023. Faculty listed in roster are the same faculty that are expected to teach when the program starts in Fall 2024.

Resources and Budget

Faculty Resources

Total FTE needed to support the proposed program:

Faculty: All courses in the DNP 78 credit hour curriculum are already being taught in the MSN/DNP programs except the Nurse Midwife specific courses totaling 27 credit hours. Each major specific course will be offered once a year. New expenses in year 1 include a faculty member who will also serve as program director and part-time staff member that will be hired during the second year of the program. The program will also share in the existing costs of an advisor, and associate deans. All courses in the program are allocated as 25% (twenty-five) percent teaching workload for the assigned faculty. Total human resources are:

Faculty: 6 FTE (1.5 new across the DNP, MSN, CGS NM Programs)

Staff: 0.25 FTE

Administration: 0.5 FTE

Non-Instructional Staff

The College of Nursing (CON) recently added an additional staff line in student services to support the growth in all the CON programs for academic advising and contracts.

All nursing courses in the DNP Program are delivered online through Blackboard. The CON employs a full-time instructional designer who has 20+ years of experience with online educational best practices and pedagogy. This individual provides support to all faculty teaching online. The College has a long, successful history of online education that meets the needs of working nurses at the graduate level.

Additionally, students can find a list of student resources in the College of Nursing Graduate Students Handbook ([Appendix F](#)).

Library and Learning Resources

The Thomas Cooper Library acquires material in a variety of formats to support current and projected curricular offerings, the needs of students, and faculty teaching and researching. Reference librarians are available during normal operating hours. Reference and literature search requests are accepted in-person, by telephone, or online. Assistance is offered in locating materials, computerized bibliographic searches, identifying authoritative web sites with quality content, using local databases, interlibrary loan requests, class presentations, and advice on library services and policies.

The Thomas Cooper Library's Research & Instruction Department offers a range of instructional services. Class-tailored sessions are offered to provide general library introductions and hands-on instruction focusing on the information needs of a particular class. Personal instruction is available at the reference desk, via email, Ask a Librarian online chat, via the telephone, and by appointment via the Library's Book a Librarian service.

The Educational Film Collection is housed in Thomas Cooper Library and provides documentary and feature films for classroom education. Collections include videotapes, 16mm films, and DVDs as well as streaming film resources that are licensed for classroom use. For example, a mediated access model is available for Kanopy, which is a streaming video platform. Faculty or instructors can request a Kanopy film license to provide required course material. The Educational Film Collection has a Film Manager, who is able to work with faculty or instructors to research options for and secure films that are required course material.

Interlibrary loan services are provided to obtain materials that are not available from University Libraries. The University Libraries provides interlibrary loan services to current students, faculty, and staff of the University of South Carolina Columbia campus free of charge. Faculty may have up to 100 active requests, staff may have up to 25 active requests, graduate students may have up to 50 active requests, and undergraduates may have up to 15 active requests. Electronic desktop delivery of book chapters and periodical articles can be requested through the Scan and Deliver link located in the library catalog or via the Scan and Deliver option in ILL Express.

Students also have access to additional library collections, databases, and resources provided by the Partnership Among South Carolina Academic Libraries (PASCAL). In addition to shared licensing of electronic resources, PASCAL Delivers enables students, faculty, and staff to request and receive print books from participating academic libraries in South Carolina. Students are made aware of library and learning information resources available to them during orientation sessions, course syllabi, and individual course orientation.

Students will utilize the online resources provided to all University of South Carolina (USC) students via Thomas Cooper Library and PASCAL. A search of the Thomas Cooper library shows 300-400 holdings

under “maternal child health/nursing.” Nursing also has several key databases available through the library:

- CINAHL Complete is coverage of the literature in nursing and allied health care areas. PubMed-Medline is the premier database of worldwide biomedical literature including research, clinical practice, administration, policy issues, and health care services.
- Joanna Briggs Institute EBP (Evidence-Based Practice) Database covers a wide range of medical, nursing, and health science specialties and includes a unique suite of information that has been analyzed, appraised, and prepared by expert reviewers at the JBI so you can integrate the world's best evidence into your research. It includes evidence summaries, evidence-based recommended practices, best practice information sheets, systematic reviews, consumer information sheets, systematic review protocols, and technical reports.

The Cochrane Library at the School of Medicine also provides reliable and up-to-date information on the effects of interventions in health care.

Equipment

The USC – Columbia campus Center for Simulation and Experiential Learning (SAEL) is clinical teaching environment designed as a hospital-like setting including beds with head wall units that house suction and oxygen, exam tables, task trainers, and high-fidelity manikins. In partnership with Lexington Medical Center, the CON broke ground on a new teaching facility in West Columbia, South Carolina. The second floor of the building will house a new state of the art 15,000-square-foot nursing simulation center and there is an open classroom area equipped with advanced audio/visual equipment for group simulation learning activities for groups of 40 students. There are eight individual simulation suites replicating hospital/clinical environments and an additional six clinical exam rooms for Simulated Participant experiences. Each room has cameras and microphones to capture simulation experiences with a web-based learning management system. Experiences can be viewed live or after it has been recorded from anywhere on campus. Students and faculty also have access to one of five rooms, all outfitted with audio/visual equipment, that can be used for debriefing simulated experiences or using those spaces for skills activities. Current equipment used for nurse practitioner education will be used for the proposed program. In December 2020, the SAEL was accredited by the Society for Simulation in Healthcare and the Council for Accreditation of Healthcare Simulation, demonstrating a high level of quality.

Facilities

The Primary CON campus is housed in Columbia on the USC campus, in a recently renovated building with private offices and computers for each faculty. The CON occupies 43,342 square feet of the Williams-Brice Building and the annex auditorium. The CON has a 7,300 square foot clinical simulation center (using about 500 for undergraduate and 525 for graduate), which is about 7.12 sq ft/student and demonstrates our compliance with simulation standards that “there is adequate space to facilitate quality educational experiences.” The simulation lab supports multiple components of clinical curricula, including graduate NP programs. Physical space expanded in 2015, with the procurement of eight additional offices. Renovations in 2015 included two new “smart classrooms”, eight new offices, two new conference and meeting rooms. In 2017, an outdated space made way for an improved computer center available for testing. Renovations in 2018 provided additional office spaces, a large multi-purpose classroom with high technology for distance broadcasting, study rooms and spaces for students.

Sources of Financing for the Program by Year												
Category	1st		2nd		3rd		4th		5th		Grand Total	
	New	Total	New	Total	New	Total	New	Total	New	Total	New	Total
Tuition Funding	\$18,874.92	\$18,874.92	\$65,021.88	\$65,021.88	\$245,124.36	\$245,124.36	\$324,737.40	\$324,737.40	\$324,737.40	\$324,737.40	\$978,495.96	\$978,495.96
Program-Specific Fees	\$8,880.00	\$8,880.00	\$29,008.00	\$29,008.00	\$59,352.00	\$59,352.00	\$74,960.00	\$74,960.00	\$72,440.00	\$72,440.00	\$244,640.00	\$244,640.00
Special State Appropriation	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-
Reallocation of Existing Funds	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-
Federal, Grant, or Other Funding	\$69,164.40	\$69,164.40	\$74,635.60	\$74,635.60	\$75,915.20	\$75,915.20	\$-	\$-	\$-	\$-	\$219,715.20	\$219,715.20
Total	\$96,919.32	\$96,919.32	\$168,665.48	\$168,665.48	\$380,391.56	\$380,391.56	\$399,697.40	\$399,697.40	\$397,177.40	\$397,177.40	\$1,442,851.16	\$1,442,851.16
Estimated Costs Associated with Implementing the Program by Year												
Category	1st		2nd		3rd		4th		5th		Grand Total	
	New	Total	New	Total	New	Total	New	Total	New	Total	New	Total
Program Administration and Faculty/Staff Salaries	\$66,000.00	\$103,350.00	\$67,980.00	\$138,985.60	\$80,099.60	\$153,235.20	\$89,222.40	\$164,552.00	\$91,899.20	\$169,488.80	\$395,201.20	\$729,611.60
Facilities, Equipment, Supplies, and Materials	\$1,600.00	\$1,600.00	\$10,800.00	\$10,800.00	\$11,124.00	\$11,124.00	\$11,457.20	\$11,457.20	\$11,801.45	\$11,801.45	\$46,783.17	\$46,783.17
Library Resources	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-
Service Support (estimated at 17%)	\$3,208.74	\$3,208.74	\$11,053.72	\$11,053.72	\$41,671.14	\$41,671.14	\$55,205.36	\$55,205.36	\$55,205.36	\$55,205.36	\$166,344.31	\$166,344.31
Other (specify)	\$7,172.47	\$7,172.47	\$24,708.31	\$24,708.31	\$93,147.26	\$93,147.26	\$123,400.21	\$123,400.21	\$123,400.21	\$123,400.21	\$371,828.46	\$371,828.46
Total	\$77,981.21	\$115,331.21	\$114,542.03	\$185,547.63	\$226,042.00	\$299,177.60	\$279,285.69	\$354,615.29	\$282,306.22	\$359,895.82	\$980,157.15	\$1,314,567.55
Net Total (Sources of Financing Minus Estimated Costs)	\$18,938.11	\$(18,411.89)	\$54,123.45	\$(16,882.15)	\$154,349.56	\$81,213.96	\$120,411.71	\$45,082.11	\$114,871.18	\$37,281.58	\$462,694.01	\$128,283.61

The College of Nursing has been provided state funding appropriations to support the start-up of this program and offset some of the initial investment associated with launching a new program. Enrollment in the program is specific and not anticipated to impact enrollments in other programs or create any negative impacts on other services, facilities, or the institution as a whole.

Midwifery Library Specific Resources

All resources will be available in person or via online text and journals to students using the USC library portal.

Resource	Associated Course/Courses
Texts	
Coad, J., Pedley, K. & Dunstall, M. (2020). <i>Anatomy and physiology for midwives</i> . Sydney, Australia: Elsevier. ISBN: 978-0702066689	NURS 744
Phillippi, J., & Kantrowitz-Gordon, I. (2023). <i>Varney's Midwifery</i> . Jones & Bartlett Learning.	NURS 749 NURS 752 NURS 753 NURS 754 NURS 755
Varney, H., & Thompson, J. B. (2016). <i>A history of midwifery in the United States: The midwife said fear not</i> . New York, NY. Springer Publishing Company. ISBN-13: 978-0826125378	NURS 749
Dutton, L. A., Densmore, J. E., & Turner, M. B. (2020). <i>A pocket guide to clinical midwifery: The efficient midwife</i> . (2 nd Ed.). Burlington, MA: Jones & Bartlett Learning. ISBN: 9781284152184	NURS 752 NURS 754
Posner, G., Black, A., Jones, G. & Dy, J. (2013). <i>Oxorn Foote Human Labor & Birth</i> (6 th Ed.). New York, NY: McGraw Hill Medical. ISBN-13: 978-0071740289	NURS 752 NURS 753
Miller, L. A., Miller, D. A., & Cypher, R. L. (2017). <i>Mosby's pocket guide to fetal monitoring: A multidisciplinary approach</i> (8 th Ed.). St. Louis, MO: Elsevier ISBN-13: 978-0323401579	NURS 752 NURS 753
Tappero, E. P., & Honeywell, M. E. (2019). <i>Physical assessment of the newborn: A comprehensive approach to the physical examination</i> (6 th Ed.). New York, NY: Springer Publishing. ISBN: 978-0826174437	NURS 753
Doughton, S., (2020). <i>Becoming a midwife: Masters at work</i> . New York, NY: Simon & Schuster. ISBN: 978-1-9821-4143-1	NURS 754
American Nurses Association. (2015). <i>Code of Ethics for Nurses with Interpretive Statements</i> . Washington: ANA Publishing.	NURS 755
Anderson, B., Rooks, J.P., & Barroso R. (2016). <i>Best practices in midwifery, 2nd ed.: Using the evidence to implement change</i> . New York, NY: Springer Publishing Company. ISBN: 978-0826131782	NURS 755
Hackley, B. K. & Kriebs, J. M. (2016). <i>Primary Care of Women: A Guide for Midwives and Women's Health Providers</i> . (2nd Ed.) Jones & Bartlett Learning. ISBN: 1284045978	NURS 762
Carcio, H.A., Secor, R. M. (2019). <i>Advanced Health Assessment of Women: Clinical Skills and Procedures</i> . (4 th Ed.). New York, NY: Springer Publishing Company. ISBN: 978-0-8261-2424-1	NURS 762

Tharpe, N. L., Farley, C. L., & Jordan, R. G. (2021). <i>Clinical practice guidelines for midwifery & women's health</i> . Jones & Bartlett Learning.	NURS 762
Journals	
Journal of Midwifery and Women's Health (Impact Factor 2.39)	NURS 744 NURS 749 NURS 752 NURS 753 NURS 754 NURS 755
Midwifery (Impact Factor 2.97)	NURS 744 NURS 749 NURS 752 NURS 753 NURS 754 NURS 755
Obstetrics and Gynecology (Impact Factor 7.62)	NURS 749 NURS 752 NURS 753 NURS 754 NURS 755
Women's Health Issues (Impact Factor 2.73)	NURS 744 NURS 749 NURS 752 NURS 753 NURS 754 NURS 755
Other	
ACNM Core Competencies for Basic Midwifery Practice	NURS 749
American College of Nurse-Midwives. (2015). Code of Ethics for Midwives with Explanatory Statements. https://www.midwife.org/acnm/files/ACNMLibraryData/UPLOADFILENAME/000000000293/Code-of-Ethics-w-Explanatory-Statements-June-2015.pdf	NURS 755

Description of Institutional Evaluation and Assessment Process for Change

The University of South Carolina, Columbia has an assessment protocol in place for all programs within academic units. The program assessment process occurs on a 2-year schedule in which programs report their assessment data as means to analyze student performance, evaluate program efficiency, and utilize results to influence program and/or assessment revisions. The program will be assessed through the standard University of South Carolina assessment software system, Assessment Plan Composer, which is used to report results on all program goals and objectives and within, or outside of, specific course assessment will occur. Assessment data will be reviewed each year by the program director,

program faculty, and department chair to determine if changes need to be made to individual courses and/or the program.

Contingency Plan Nurse Midwife Doctor of Nursing Practice Program

Most of the resources for the Nurse Midwife Doctor of Nursing Practice Program build of the existing infrastructure that is already in place at the University. Enrollment projections are very conservative based on anticipated demand and our assessment of need within the institution, state, region, and nationally. Therefore, if enrollment numbers decline, we can propose and implement a teach out plan if needed.