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Recognized by Indian Nursing Council and A.P. Nurses & Midwives Council

Affiliated to NTR University of Health Sciences, A.P. Vijayawada.

Accredited by "International Accredition Organization (IAO)"

website: www.narayananursingcollege.com || e-mail: narayana_nursing@yahoo.co.in

2.6.1 METHODS OF ASSESSMENT OF LEARNING OUTCOMES AND GRADUATE ATTRIBUTES

Narayana College of Nursing adheres to the curriculum of Dr.NTR University and the requirements of the Indian Nursing Council in its Vision, Mission, Program Outcomes (POs), and Course Outcomes (COs).

Formulation of Course Articulation Matrix

Course articulation matrix correlates the individual Course Outcomes of a course with Program Outcomes. The strength of the correlation of individual COs of a course with POs is indicated as "3" for substantial (high) correlation, "2" for moderate(medium) correlation, and "1" for slight(low) correlation.

- Narayana College of Nursing adheres to the Examination criteria of Dr.NTR University in Continuous Internal Assessment.
- The distribution of marks and weightage of all assessments given by Dr.NTR
 University is strictly adhered

Method of Assessment

Continuous internal assessment facilitates the students to develop regular reading practice during the course period. It provides them the opportunity to prove their capacity in the internal assessments and facilitates them to score good marks in the summative examination. Being a formative assessment, the students can learn and memorize one-third of the portion from the subject and ultimately it helps in the future while learning the entire subject.

- Students should obtain a minimum of 50% internal marks for each subject in theory and practical separately to be eligible to appear for the University Examination.
- Three-unit tests and two sessional exams for each subject in theory and all the students have to write all the tests given by the individual teacher.

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- Internal assessment consists of the cumulative average of all the tests given for a
 particular subject and other assignments (seminar, project, presentation) provided in a
 given subject.
- The weightage given for written examination is 75%.
- The weightage given for the assignment is 25%.
- Internal assessment for practicals constitutes continuous evaluation, other assignments like
 case studies, case presentations, drug files, patient assessment, and model practical
 examination.
- Weightage for each subject given in the course plan.
- Clinical evaluation is based on the planned criteria according to clinical objectives.
- A practical exam is given at the end of the clinical experience for each course.
- Students who have not completed the course assignments, attendance, and adequate clinical experience will not be given practical examinations.
- The candidate shall sign the internal marks before sending it to the university.
- No written assignment will be the substitute for Sessional examinations.
- Periodic evaluation (theory / practical) will be communicated to students and parents within
 2 weeks of completion of examinations.
- Assignments/projects should be submitted in time as prescribed by the teacher and delay will be a reason for the reduction of internal marks.
- Parents have been informed about the academic performance and progress of students. Due consideration should be provided by the parents for this matter.

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Academic performance of each student will be evaluated based on ongoing and continuous evaluation as specified below:

I. THEORY:

Periodic written examination (Sessional examination) distributed throughout the year. Calculation of internal marks is based on the average of three Sessional examination marks, which is planned and provided by the college, and the marks obtained in their assignments, seminars, projects, etc.

Continuous internal theory evaluation: (25 Marks)

CRITERIA	WEIGHTAGE	MARKS ROUND OFF TO 25				
Best of three Unit test marks	45%	12				
Best of two Assignment marks	25%	5				
Model /Sessional Exam	25%	6				
Attendance & Discipline	5%	2				
TOTAL	100%	25				

Note: Best of 3 unit tests, two assignments, and 2 Sessional / model exams marks have been taken for each student.

II. PRACTICAL (CLINICAL):

Aggregate of continuous evaluation during the clinical experience of the students in specific clinical areas, nursing care study, clinical presentation, and planned health teaching programme, projects are taken for the internal clinical evaluation.

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Internal marks for practicals are calculated based on the average of marks obtained in model practical examinations, continuous evaluation in specific clinical areas, and clinical assignments.

Continuous internal Practical evaluation: (100 Marks/50 Marks)

CRITERIA	WEIGHTAGE 100	MARKS ROUND OFF TO 50
Continuous Evaluation of Clinical	30%	15
Performance		
Clinical assignment	20%	10
Clinical Presentation	10%	5
Observational /field visit/ Health talk	10%	5
Model Practical Examination	30%	15
TOTAL	100%	50

Methods for assessing the knowledge:

Essay questions: Long essay questions predominantly assess the wide knowledge of a particular subject and also able to assess the way of organizing, integrating and summarising a particular topic.

Short answer questions: short answer questions are useful to assess the basic knowledge of the subject. **Objective-type questions like MCQs**: Objective type of questions assess the analytical skill, rationality and interpretative skills of the students. It can potentially assess wide content areas across different contexts in a short time.

Academic quizlets: Academic quizzes increase vocabulary and creative thinking and promote self-directed learning.



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Viva /oral: Viva /voce helps to improve communication skills and vocabulary.

Methods for assessing skills:

Physical assessment: It is integrated, in-depth assessment of clinical competence in a realistic setting. **Clinical case presentation**: Helps to develop certain skills like observational skill, interpretation and diagnostic skill and rational thinking. It helps to improve communication skills and doctor-patient relationship.

Case study: Helps to assess the assessment skills, identify the problem of the patient, write the nursing diagnoses ability to set the objectives and prioritize the nursing intervention, skill in implementation of nursing procedures and evaluation of patients outcome.

Care plan: Helps to assess the skill in assessment of patient and draw nursing care plan based on priority.

Direct observation of procedural skills: Trainee is observed by the faculty while performing the procedure independently in the hospital setup.

Logbook: Keeps the record of day-to-day clinical work. DOPS is more reliable than logbook. Multisource **Feedback:** Feedback is obtained from teachers, paramedical staff, fellow students, patients and relatives and non-clinical staff related to communication and procedural skills.

Assessment of attitudinal and communication skills: By 360-degree feedback: feedback is obtained from various stakeholders like teachers, colleagues, staff nurses, patients and relatives in relation to way of communication, method of communication and attitude towards the patients.

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A.UNDER GRADUATE

1. Bachelor of Nursing Sciences (B.Sc Nursing)

Program outcome (PO)

At the end of the 4 year of training nursing graduates of NCN Should be able to

- PO 1. Apply the preclinical, para clinical and basic sciences knowledge in all health care settings.
- o PO 2.Perform history collection and physical examination to identify the needs and problems of the patient in all health care settings.
- PO3. Provide nursing care based on steps of nursing process ùi collaboration with the Individuals and groups.
- PO4. Demonstrate critical thinking skill in making decisions in all situations in orderto provide quality care.
- o PO 5. Provide promotive, preventive and restorative health services in line with the national health policies and programmes.
- o PO 6. Practice within the framework of code of ethics and professional conduct and acceptable standards of practice within the legal boundaries.
- o O PO 7. Participate and Communicate effectively with individuals and groups and members of the health team ii order to promote effective interpersonal relationships and teamwork.
- o PO 8.Prepare the patients for various investigations and identify the abnormal findings pertaining to invasive and noninvasive diagnostic and therapeutic procedures.
- o PO 9. Demonstrate skills in teaching individuals and groups and able to incorporate the latest trends and technology in providing health care in all settings.
- o PO 10. Demonstrate leadership and managerial skills in clinical community health settings.

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- O PO 11. Conduct need based research studies in various settings <u>and</u> utilize the research findings to improve the quality of care.
- O PO 12. Demonstrate awareness, interest and contribute towards advancement of selfand of the profession.

Course (Cs)

B.Sc nursing program consists of following course. 1 Year B.Sc Nursing consists of anatomy, physiology, Nutrition, Biochemistry, Nursing Foundation, Psychology, Microbiology, English & Introduction to Computer Science; 2" Year B.Sc Nursing consists of Sociology, Medical Surgical Nursing I, Pharmacology, Pathology, Genetics and Community Health Nursing I; 3" Year B.Sc Nursing consist of Medical Surgical Nursing II, Child Health Nursing, Mental Health Nursing & Introduction to Nursing Research and Statistics; 4* Year B.Sc Nursing consists of Midwifery arid Obstetrical Nursing, Community Health Nursing II, Introduction to Nursing Services and Foundation and Communication and Educational Technology. Each course has its well defined course outcome mentioned in individual course book.

Mapping and analysis of Cs, POs

The process of attainment of Cs, POs starts from writing appropriate COs for each course in the four year degree program, which include 730 hrs of internship. As Undergraduate Nursing program is regulated by the Indian Nursing Council, COs and POs are defined by it. Based on this, course outcomes are refined by the respective faculty members of the course using action verbs of learning levels as suggested by Bloom Taxonomy. Then,a correlation is established between Cs and POs and Cs on the scale of 0 to 3 ('0'being no correlation, I being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score is calculated and Correlated with the courses as a whole not individually and 23x5 mapping matrix of Cs- POs

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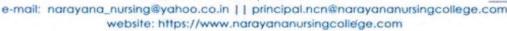


TABLE is prepared at the institute level in this regard for all courses in the program. Radar graph was plotted to find out the level of correlation between and PO-Cs (Figs).

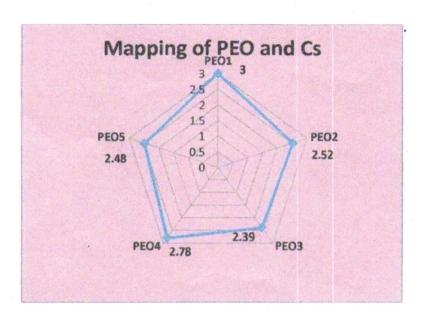


Figure . Mapping of Program objectives & course

(0 - no correlation; 1 - Low correlation; 2 - Medium correlation; 3 - High correlation)

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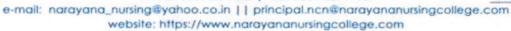


TABLE 2 Cs-PO MAPPING MATRIX

No	COURSE	PO1	PO2	PO3	PO4	PO5	PO6	PO7	PO8	PO9	PO10	PO11	PO12
1	Anatomy	3	3 ,	3	1	3	3	1	3	2	3	1	3
2	Physiology	3	3	3	1	3	3	1	3	3	2	1	3
3	Nutrition	3	3	3	2	3	2	3	2	3	3	3	3
4	Bio Chemistry	3	3	3	2	3	3	3	3	3	3	1	3
5	NF	3	3	3	2	3	3	3	2	3	3	1	3
6	Psychology	3	3	3	2	3	3	3	2	3	3	1	3
7	Microbiology	3	3	3	2	3	3	2	3	3	3	2	3
8	English	3	3	2	3	2	3	3	2	3	3	2	3
9	Computer	3	2	2	3	1	3	3	2	3	3	1	3
10	Sociology	3	3	3	3	3	2	3	2	3	3	2	3
11	MSN-I	3	3	3	3	3	3	3	3	3	3	2	3
12	Pharmacology	3	3	3	3	3	3	3	3	2	3	3	3
13	Pathology	3	3	3	3	3	3	3	3	2	3	3	2
14	Genetics	3	3	3	3	3	3	3	2	3	3	3	2
15	COM-I	3	3	3	3	3	3	3	3	1	3	3	3
16	MSN-II	3	3	3	3	3	3	3	2	3	3	3	3
17	CHN	2	3	3	3	3	3	3	1	3	2	3	2
18	MHN	3	3	3	3	3	3	3	2	1	2	3	2
19	NR&S	3	2	2	3	3	3	2	3	3	2	3	3
20	OBGI&II	3	3	3	3	3	3	3	2	1	3	2	3
21	COM-II	3	3	3	3	3	3	3	1	3	3	3	2
22	NMGT	3	3	2	3	3	3	2	2	3	3	3	3
23	NE	2	2	2	2	2	2	3	3	2	3	3	3
Ave	rge Score	2.91	2.86	2.78	2.56	2.82	2.86	2.69	2.43	2.56	2.34	2.21	2.91

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(0 - No correlation; 1 - Low correlation; 2 - Medium correlation; 3 - High correlation).

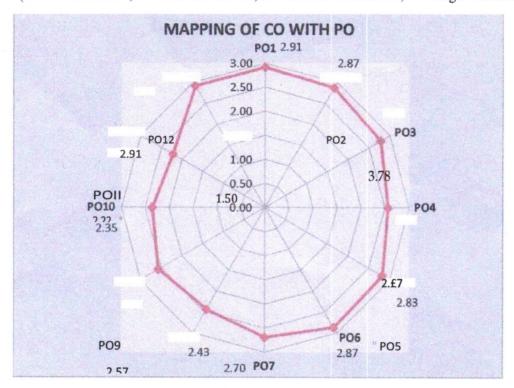


Figure 3. Mapping of Program outcome & course

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