

Indiana State University
School of Nursing

Self Study Report
October 2003

for the purpose of
Continuing Approval from the

National League *for* Nursing
Accrediting Commission, Inc.

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EXECUTIVE SUMMARY

GENERAL INFORMATION:

1. **Name, address and telephone number of the governing organization:**
Indiana State University
200 North 7th
Terre Haute, IN 47809
Telephone: (800) 742-0891
School of Nursing
749 Chestnut Street
Telephone: (812) 237-3683
2. **Regional accrediting body:**
The Higher Learning Commission of the North Central Association of Colleges and Schools.
3. **Date of most recent regional accreditation:**
February 2000; Full accreditation awarded
4. **Name, title of chief administrative officer:**
Dr. Lloyd W. Benjamin III, President
5. **Name, title of administrator of the unit in nursing:**
Dr. Bonnie Saucier, Dean
Telephone: (812) 237-2323
Fax: (812) 237-8895
Email: nusaucr@isugw.indstate.edu
6. **Program type, purpose of visit:**
Associate Degree
Baccalaureate Degree
Master's Degree
Continuing Approval-National League for Nursing Accrediting Commission
7. **Year nursing program was established:**
September 1963
8. **Length of program; Total credits required:**

Associate Degree	5 semesters	Total Credits 67-79
Baccalaureate Degree	4 years	Total Credits 125-131
Master's Degree	2 years	Total Credits 36-45
9. **Number of faculty including administrator(s) of program:**
34

10. **Current student enrollment (Spring 2003):**
 AD = 106 NND = 210 MS = 25 Total = 482
 BSN = 125
 RN-BS = 16
11. **Name of state board of nursing and approval status:**
 Health Professions Bureau
 Indiana State Board of Nursing
 Indianapolis, IN
<http://www.in.gov/hpb/boards/isbn/>
 Approval status: Full accreditation for all programs
12. **Standards and criteria used to prepare the report:**
 Accreditation Standards and Criteria for Academic Quality of Post Secondary and
 Higher Degree Programs in Nursing, 2002, National League for Nursing
 Accrediting Commission, Inc.

Introduction

Indiana State University, a public institution, was founded in 1865 as Indiana Normal School with the primary mission being preparation of teachers for Indiana's schools. The enrollment has grown from 21 students in the first class to nearly 12,000 during the 2002-2003 academic year. The University now offers over 100 majors and is accredited to confer associate, baccalaureate, master's, and doctoral degrees. The current Carnegie classification is Doctoral/Research University-Intensive.

The University is governed by a board of trustees, and administered by a president, who is the University's chief executive officer, and five vice presidents. The School of Nursing is one of seven academic divisions on campus, each of which is headed by a dean.

The University is located in Indiana's ninth largest city, Terre Haute, which is positioned at the Crossroads of America. The population of the city in 1999 was 59,614. While the median age of residents is 32.1 years, there are nearly 9,000 individuals over the age of 65. There is low ethnic diversity with approximately 90% of the population being Caucasian. The city does however, offers a variety of cultural, historic and educational enrichment opportunities to the University community.

The total student enrollment for Spring 2003 was 482. In the associate program there were 106 students, 105 were full-time and 1 was enrolled part-time. The total student enrollment for the baccalaureate program, including students classified as nursing nondesignated (NND) and the RN-BS track, was 351. Of these students, 315 students are full-time and 36 are part-time. Full-time status was calculated based on the student being enrolled in 12 credit hours or more. The graduate program had a total enrollment of 25. Seven students were classified as full-time and 18 students were considered part-time. Full-time status for graduate students was based on the student being enrolled in 9 or more graduate credit hours.

The nursing faculty, Spring 2003, for the Associate Degree Department consisted of nine (9) full-time and three (3) part-time members. The nursing faculty for the Baccalaureate and Higher Degree Department was comprised of thirteen (13) full-time and eight (8) part-time members.

History of the School of Nursing

The Indiana State University School of Nursing opened its doors to students in September 1963 and was initially fully accredited by the National League for Nursing in 1969. Upon successful completion of the four year program, students received a Bachelor of Science degree. The first class of students to enter, graduated from the ISU School of Nursing in 1967. After a series of relocations, the School of Nursing moved into the current four-story building in 1971. The building contains classrooms and a Learning Resource Center in addition to offices for faculty and administrators.

In 1969, the Indiana State University Board of Trustees created the Continuing Education in Nursing Program. The Clinical Education Building, located next to Union Hospital on 7th Street, was completed in that same year. The Clinical Education Building housed the Continuing Education Program and the Sycamore Nursing Center (nurse-managed clinic). The building also provided classroom and locker room facilities for students and faculty. This facility will no longer exist after 2003. These above mentioned programs have relocated to the new Landsbaum Center for Health Education.

Major curricular revision and innovation have taken place over the years. In response to community needs and the phase-out of local diploma programs in nursing, the first major revision occurred in fall of 1977. The four-year, generic baccalaureate nursing program was replaced with a four-year baccalaureate nursing program with the option to exit upon completion of a two-year associate degree nursing program. The first class of students

entered in 1977 and graduated in 1979. The program was initially fully accredited by the National League for Nursing in 1980.

In 1986, the School of Nursing initiated a program of graduate nursing studies leading to a Master of Science degree. The first class completed requirements in 1988. The program received full accreditation by the National League for Nursing in 1989.

In the fall of 1998, the Baccalaureate Track for Registered Nurses was initiated to meet educational needs of practicing registered nurses. In 2003, all courses in the track were delivered by distance modality.

Summary of Standards and Criteria

Standard I: Mission and Governance

Criterion 1: The mission and philosophy of the School of Nursing are congruent with the mission and purpose of Indiana State University. The School of Nursing philosophy is clearly stated and publicly accessible via the School's web page and printed materials.

Criterion 2: The School of Nursing prides itself in contributing to University governance. The School of Nursing is the smallest school on campus, yet continues to have representation on most major government committees. Participation from the School of Nursing is proportionately higher than in other schools in the institution at 84.2%. Faculty and administrators frequently assume leadership roles within University governance. Due to small number of faculty members, it is necessary for all full-time tenure and tenure-track faculty in the School, who are beyond their first year of appointment, to actively participate in the governance. The School has 100%

participation. Students have adequate opportunities to participate in governance, but representation did not meet the expected level of achievement. Efforts continue to increase student involvement.

Criterion 3: The nurse administrator holds a doctorate of philosophy with a major in Nursing Theory and Research from Texas Woman's University. She holds dual master's degrees: one in Nursing with a focus in Nursing of Children from the University of Missouri/Kansas City, and one in Education with a major in Vocational Education from the University of Missouri. The Dean is licensed as a Registered Nurse in Indiana, Illinois, Missouri, Texas, and California. More than thirty years of her career have been in the area of nursing education. She has taught at practical, associate, baccalaureate, and graduate levels of nursing education. She was appointed Dean of the School of Nursing in July 1998.

Criterion 4: Policies at Indiana State University apply to all faculty members and are published in the *Indiana State University Faculty Handbook*. Each nursing faculty member is provided with a copy of the *School of Nursing Handbook* for easy access to the policies and procedures for the School of Nursing. The only School of Nursing unofficial policy that differs for the University relates to faculty workload. The University policy defines a full-time teaching load as 12 semester credit hours. The University calculates workload clinical hours to credit hours as 2:1. The nursing faculty members are supportive of a workload policy that is based on contact hours. This is an ongoing issue that continues to be addressed in the School of Nursing and at the University level.

Standard II: Faculty

Criterion 5: One hundred percent of nursing faculty members have a current, valid license to practice nursing in the state of Indiana. In addition, preceptors and adjunct faculty teaching in clinical nursing courses are licensed to practice in their respective states. Two adjunct clinical faculty members have not completed their master's degrees; however, they are continuing coursework toward their graduate nursing degrees. As the transfer of the associate degree is completed, all faculty from the Associate Degree Department will be utilized by the Baccalaureate and Higher Degree Department. All faculty members participate in continuing education activities to maintain educational and clinical expertise.

Criterion 6: Numbers of faculty are sufficient to maintain the nursing programs. The range for faculty to classroom students for the Associate Degree Program during Fall 2002 was 1:6 to 1:58. The average faculty to student ratio in the classroom was 1:28. The range for faculty to classroom or distance students during the Fall 2002 semester in the Baccalaureate Degree Program was 1:1 to 1:89, with an average of 1:15. The range for the graduate program was 1:1 to 1:12 for classroom and distance education, the average faculty to student ratio was 1:6. The faculty to student clinical ratio did not exceed 1:10 for undergraduate education, and 1:6 for graduate education.

Criterion 7: Nursing faculty members are evaluated by students at the end of each semester. Faculty members may request an annual classroom evaluation visit by a colleague or department chairperson and are evaluated annually in a performance cycle. Evaluation for reappointment, promotion, and/or tenure is completed according to University procedures.

Criterion 8: Nursing faculty members at Indiana State University have clinical and educational expertise. Faculty members have experience in leadership and management, psychiatric/mental health nursing, rehabilitation nursing, gerontologic nursing, critical care nursing, home health care, emergency care, maternity nursing, pediatric nursing, and medical-surgical nursing. Some faculty members are nurse practitioners. Faculty members have provided evidence of professional contributions and have received University, community, and professional awards for teaching, scholarship/research, and service activities. The University has closely examined faculty productivity. The School of Nursing has met the targets for student credit hours generated. The current faculty productivity issue relates to scholarship.

Standard III: Students

Criterion 9: Students enrolled in the School of Nursing are governed by the policies of Indiana State University. Although School of Nursing policies are often more rigorous than for students in other majors, the policies are justified by the requirements for success in a professional education program. Policies are readily accessible to students and public via several formats including the web, university and school handbooks, and catalogs. The University and School of Nursing support a policy of non-discrimination.

Criterion 10: The University provides access to a wide variety of student support services for all students on-campus as well as for students enrolled in distance education. University support services are administered by qualified professionals.

Criterion 11: Policies and procedures for maintenance of student educational and financial records within the University and School of Nursing are in compliance with state and federal regulations.

Standard IV: Curriculum and Instruction

Criterion 12: The curriculum of the School of Nursing is based on the foundation of the paradigm of nursing, environment, health, and client, in conjunction with the organizing framework that articulates the role outcomes that are based on differentiated expectations of the three nursing programs. The curriculum moves from basic nursing concepts to complex nursing care. Course outcomes are linked to level outcomes and competencies in order to conceptually support end of program outcomes for the undergraduate curricula. Curriculum refinement of the graduate program was started in Spring 2003 and is still in progress. The faculty members have selected cognate courses that augment nursing knowledge. Some of the standards used in the development of the curriculum include the American Nurses Association Standards of Clinical Nursing Practice, the American Nurses Association Code for Nurses, the Indiana Code Title 25, the Educational Competencies for Graduates of Associate Degree Nursing Programs, Pew Commission Competencies for Health Care Practitioners, Essentials of Baccalaureate Education for Professional Nursing Practice, and Essentials of Master's Education for Advanced Practice Nursing.

Criterion 13: The nursing curriculum is in compliance with the standards set forth by the Indiana State Board of Nursing and the National League for Nursing Accrediting Commission. The Associate of Science Degree Program has 39 nursing credits. Total credits range from 67 to 79, depending on required general education studies and remediation courses needed for graduation. The percentage range of nursing courses is 49% to 58%. The associate degree is being transferred to the local community college system. The last class admitted to this program was Spring 2003. The Baccalaureate of

Science Degree Program has 62 nursing credits. Total credits range from 125 to 131. The percentage range for nursing courses is 47% to 49%. The majority of the nursing courses are offered during the last two years. The nursing courses in the Master's Degree Program range from 34 to 42 credit hours. This is 82% to 86% of the total course work for the master's degree. Data have been collected and trended for optional program outcomes of critical thinking, communication, and therapeutic nursing interventions. Results have been used to identify strengths and areas for improvement in the curricula of the programs.

Criterion 14: Students are provided a variety of clinical experiences and are able to meet course outcomes as outlined in the course syllabi. Both students and faculty evaluate clinical facilities each semester a course is taught. All agencies attained the benchmark of 3.5 except two mental health community group homes. The faculty members are actively working to assist the group home staff to understand the role of the students and expand the students' learning activities. Contracts are maintained for all clinical facilities.

Standard V: Resources

Criterion 15: The budget is adequate to support the functions of the School of Nursing and is comparable with other units in the University. The budget has remained reasonably flat for the last ten years. As enrollments started an upward trend for the University, simultaneously the budget of the state of Indiana experienced a growing deficit; therefore the funding for all programs has come under close scrutiny. The faculty members, Director of the Learning Resource Center, Department Chairpersons, and the Assistant Dean have input in the budget process. The Dean and the Provost negotiate the final

budget. There has been limited funding for faculty travel; however, a variety of faculty development programs are offered during the academic year and the summer. The Office of Sponsored Programs is available to assist faculty in locating and applying for grants.

Criterion 16: Administrative services are defined as university services that support the nursing unit in the areas of information technology, legal, finance, grants and contracts.

Administrative services are adequate and accessible. The School of Nursing has three full-time administrative assistants, two full-time departmental office assistants, two full-time office assistants for the Office of Student Affairs, and a varying number of part-time student workers based on available funding. The number and type of budgeted positions are adequate and comparable to other schools on campus.

Criterion 17: Instructional software and hardware are available to students in sufficient quantity and quality to support learning goals. Technical support is available to faculty and students who need additional help or who wish to expand their technical skills.

Learning resources associated with the library and Learning Resource Center are current and comprehensive. The library has adequately met the needs of the nursing unit through online reserve sources, classic and contemporary books, journals and bound periodicals, videos, CD-ROMs, and online search engines and full text electronic journals through ProQuest, EBSCOhost, and LexisNexis Academic. The nursing faculty have input into the development and maintenance of learning resources. The Director of the Learning Resource Center, the School of Nursing Technology Coordinator, and the Media Coordinator are available on a full-time bases to assist students and faculty.

Criterion 18: Physical facilities are appropriate for purposes of the School of Nursing. The School of Nursing main building is a four-story building housing classrooms,

seminar rooms, offices, lounges, simulation laboratories, and computer laboratory. Classrooms are equipped with audio-visual equipment. Additional projection units are available to each classroom per portable cart. Internet connections are also available for use in classrooms. All faculty have an office with computer, desk, and bookshelves. The Landsbaum Center for Health Education houses the Sycamore Nursing Center, Continuing Education, conference rooms, and shared classrooms. This facility is a cooperative partnership involving Union Hospital's Midwest Center for Rural Health, the Indiana University School of Medicine, and Indiana State University's School of Nursing. The Center offers unique opportunities for promoting collaboration and multidisciplinary education.

Standard VI: Integrity

Criterion 19: Information about each program is published for interested parties in a variety of formats including the web. Every effort is made to assure that published information about programs are current, accurate, clear, and consistent. Approved changes are printed in the next edition of appropriate documents. Approval in late spring of the transfer of the associate degree in nursing to Ivy Tech State College, scheduled to occur Fall 2003, did not allow a timely update of all published information for 2003-2004. The National League for Nursing Accrediting Commission is proudly published as the School of Nursing's accrediting agency.

Criterion 20: No formal complaints have been filed against Indiana State University School of Nursing since the last accreditation. The processes for informal student complaints and formal grievances are available in the *School of Nursing Undergraduate*

Student Handbook, the *Graduate Student-Advisor Handbook*, and the *Indiana State University Handbook*. These documents are also available online through the University.

Criterion 21: The University is in full compliance with the Higher Education Reauthorization Act. The institutional default rate has increased over the past three years from a 3.4% to 5.4% rate. Nursing student default rates are calculated into the institutional rates.

Standard VII: Educational Effectiveness

Criterion 22: The systematic program evaluation plan has been developed, implemented, evaluated, revised and is ongoing. Findings from the systematic evaluation process have been the foundation for most, if not all, of the program and curriculum changes we have made in the past several years. Data collection, data entry, analysis and reporting mechanisms continue to be refined over time. The implementation of the systematic program evaluation plan has become a point of excellence over the past few years. It is presented throughout the self study report.

Criterion 23: Data have been and continue to be collected, aggregated, trended and analyzed. Primary responsibility for this process rests with the Assistant Dean. Data reports are located on a password protected website which can be accessed by all faculty through the Office of the Assistant Dean web page at <http://web.indstate.edu/nurs/mary/Evalpage.htm>. The data are reviewed and reported to Evaluation/Outcome Assessment Committee, Department Chairs and program administrators on schedule according to the Master Plan for Evaluation. Students' academic achievement by program type has been evaluated by: graduation rates, licensure/certification pass rates, job placement rates, and program satisfaction.

Benchmarks have been set and evaluated on a regular basis. Review of trended data indicates the following:

- All programs are meeting the benchmarks for graduation rates.
- All programs are meeting the benchmarks for licensure/certification rates.
- All programs are meeting the benchmarks for job placement rates.
- All programs are meeting the benchmarks for program satisfaction scores.

Members of Evaluation/Outcome Assessment Committee will continue to monitor the process and review the data reports to determine the effectiveness of recent changes of programs and curricula.

Analysis and Summary of Strengths and Areas Needing Improvement

Strengths

Curricula modifications for the associate degree and baccalaureate degree nursing programs have been an intense faculty endeavor that has resulted in well designed programs. The changes have broadened the role outcomes, have more clearly defined the competencies, and strengthened the education provided for undergraduate nursing students.

The formation and function of the Evaluation/Outcomes Assessment Committee that analyzes data based on the Master Plan has developed into a unique strength of the School of Nursing. Although this assessment approach was developed over several years, the web based Master Plan, calendar of assessment activities, and relevant links makes the process of program improvement accessible and timely. This Committee, with the

support of the Assistant Dean, collects data, monitors outcomes, trends data, and informs programs of strengths and patterns of concern. When appropriate, the Committee makes recommendations to departments and/or School of Nursing committees for corrective actions.

Selected nursing faculty members have demonstrated strength in service. This is evident through their commitment and leadership in national and state professional organizations, University committees, and School of Nursing committees and within the governance system. Selected faculty have also made distinguished contributions to nursing knowledge through their publications and presentations.

The recruitment of five new faculty members in the past two years is an accomplishment. During the academic year of 2002, two doctoral candidates accepted full-time faculty positions. The 2003 search resulted in the hiring of one experienced doctoral prepared faculty member, one doctoral candidate faculty member, and one certified family nurse practitioner with clinical experience for the graduate program. Since there is a national shortage of nursing faculty, the attainment of these qualified faculty members is viewed as an achievement.

The Learning Resource Center, including the Computer Laboratory, is an excellent resource for the School of Nursing. The large number of holdings in various media formats enhances the education of nursing students through visual, auditory, and kinetic learning.

The Sycamore Nursing Center is an excellent asset of the School of Nursing for providing a variety of clinical experiences for nursing students in all three programs. The shared location of this service and Continuing Education in Nursing Program housed in the Landsbaum Center for Health Education connects students to life-long learning prior to graduation. The Landsbaum Center for Health Education is a cooperative arrangement among Union's Hospital's Midwest Center for Rural Health, the Indiana University School of Medicine, and Indiana State School of Nursing. The Continuing Education in Nursing Program also has a unique partnership with the Area Health Education Center. The above mentioned collaborative involvements allow excellent opportunities for interdisciplinary education.

Opportunities for Improvement

One of the highest priorities is the NCLEX-RN pass rate for the associate degree and the baccalaureate degree students. Although the baccalaureate degree has been offered since the founding of the program in 1963, multiple exits from the School of Nursing began in 1979. Since the last School accreditation in 1995, all nursing students have elected to take the licensure examination after completing the associate degree requirements. The most recently modified generic baccalaureate program will have a class of students graduating in May 2004. The last associate degree class will graduate in December 2004. Additional individuals in good academic standing may continue to finish the program of study until December 2005.

The recruitment and retention of qualified diverse faculty for theory and clinical education will continue to be a challenge as mature faculty reach retirement age. The strategy of identifying potential talent and growing our own for master's prepared clinical instruction is one of a number of strategies that will be employed. Recruiting doctoral candidates is another strategy that will be continued to fill tenure-track positions.

The strengthening and implementation of the Enrollment Management Plan is needed. The evaluation of the plan will serve as the basis of the revisions in conjunction with consideration of projected resources and societal needs for 2005 through 2010.

Faculty scholarship needs to be stimulated, supported, and increased. Again referring to the Boyer model of scholarship, the scholarship of discovery is the area that warrants additional faculty development. The two major roles of the Assistant Dean are to implement and maintain assessment of programs and to mentor faculty research. As program assessment has become established, the Assistant Dean's role as research mentor can be expanded. Junior tenure-track faculty members will be completing their dissertations. This group of faculty will need to be supported with the dissemination of knowledge through presentations and publications. The junior faculty will also need encouragement in the development of an ongoing program of research. Senior faculty members will be encouraged by the Department Chairpersons and the Assistant Dean to conduct research and scholarly activities related to nursing education, specialty areas of nursing, and integrated research with other disciplines. Methods of obtaining external funding will also be encouraged to increase faculty productivity in scholarly endeavors.

Student participation on School of Nursing committees needs to be improved. Based on the Self Study, strategies are being developed to increase the involvement of student representatives. During student orientation, the functions of committees will be explained. Students will be informed of the importance and purpose of student participation. During the first two weeks of class, students from all three programs will be encouraged to volunteer or be invited by faculty to serve as representatives or alternates.

I. MISSION & GOVERNANCE

There are clear and publicly stated mission and/or philosophy and purposes appropriate to postsecondary or higher education in nursing.

**Indiana State University School of Nursing
Master Plan for Program Evaluation**

This plan is a joint effort by faculty and administration to describe and guide our program evaluation activities here at the School of Nursing. The current plan was originally developed by a subcommittee of the Evaluation Outcomes Assessment Committee during the Summer of 2001. It was subsequently reviewed, edited and approved by members of EOAC November 2001, and approved by the entire nursing council as a "work in progress" (can be modified and edited by EOAC as needed, with updates posted on the internet and sent to Executive Committee) December 2001. Plan was reviewed and revised to NLNAC 2002 Standards and Criteria, 1/28/03. Plan was last reviewed and re-approved for continuation by the entire faculty at the Spring 2003 Nursing Council Meeting. The plan and schedule for review are maintained, updated and implemented by the Assistant Dean, in collaboration with members of the EOAC. The most current outcome data was added to the document July of 2003.

Standard I: MISSION AND GOVERNANCE

Program has clear and publicly stated mission and/or philosophy and purposes appropriate to postsecondary or higher education in nursing.

<p>Criterion 1: Mission and /or philosophy of the nursing education unit is congruent with that of the governing organization or differences are justified by the nursing education unit purposes.</p>		<p>Operational Definition: Mission statements are mission statements of University and School of Nursing. Philosophy is the School of Nursing Philosophy. School of Nursing Mission Statement and Philosophy are approved by the School's Executive Committee and/or Nursing Council.</p> <p>Expected Level of Achievement/Decision Rule for Action: Mission and philosophy are congruent with University Mission statement and are reflective of national standards of nursing practice and nursing education.</p> <p>Outcome: Expected level of achievement met for all programs</p>				
Process				Implementation		
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
University Mission Statement	Current catalogue University's strategic plan and University Handbook	University governance	As directed by University administration	Task forces within University review national, state, and local trends	NCA self study task forces showed need for revision of University mission and strategic plan.	New University mission statement and strategic plan published Spring 2000
School Mission Statement	Student Handbook, CAAC Minutes, EXEC and Nursing Council Minutes	CAAC initiates review	Review in April of Odd Years	National task reports and other literature reviewed	Need for revision shown based on alignment with university mission	Mission revised in AY 2000-2001 Mission revision approved Fall 2002
School of Nursing Philosophy	Student Handbook, CAAC Minutes, EXEC and Nursing Council Minutes	CAAC initiates review	Review in April of Odd Years	National task reports and other literature reviewed	Need for revision shown based on curriculum revision	Philosophy revised in AY 2000-2001 Continue to Monitor

CRITERION 1: Mission and/or philosophy of the nursing education unit is congruent with that of the governing organization, or differences are justified by the nursing education unit purposes.

EXPECTED LEVEL OF ACHIEVMENT: Mission and philosophy are congruent with University Mission statement and are reflective of national standards of nursing practice and nursing education.

Documentation confirms:

- a. philosophy / mission of the program in nursing is congruent with the mission and purposes of the governing organization.**

The official Mission for Indiana State University is published in the *Indiana State University Handbook*, 2001, p. I-2. A modified shortened version is published in the *Undergraduate Catalogue* (2003-2004) with additional information about the institutional history and setting.

The School of Nursing, in concert with the parent institution, has constructed a Vision Statement, a Mission Statement, and a Philosophy. The Vision Statement provides all members of the learning community with a core focus. The Vision Statement also serves to accentuate experiential learning. Table 1.1 provides a parallel comparison of documents.

Table 1.1 *Comparable Visions and Missions*

Indiana State University	School of Nursing
<p>In the 2001-2002 academic year, ISU engaged in its most important initiative in recent years: the development of a more distinctive identity in order to strategically position the University within Indiana and the Midwest. The result of this process was a commitment by the University to merge the academic endeavors of students with real life experiences through a variety of community engagement activities. While the University has a long and distinguished history of active student engagement in the community, the overall goal of this initiative is to develop a more coherent and meaningful set of student experiences across all curricular programs.</p>	<p><i>Vision Statement: Experience Your Future</i> Provide the best educational experiences that result in competent and caring nurses for diverse clients.</p>

<p><i>Mission Statement:</i> As a publicly-assisted institution of higher learning, Indiana State University embraces its mission to educate students to be productive citizens and enhance the quality of life of the citizens of Indiana by making the knowledge and expertise of its faculty available and accessible.</p> <p>These purposes are served when the university disseminates knowledge through instruction and extends and applies knowledge through research, creative and scholarly activities and public service.</p> <p>The University fulfills its mission statewide; however, its influence is also national and international in scope. Given its location, Indiana State University responds with particular sensitivity to the needs and interest of the citizens of west central Indiana.</p> <p>In serving its mission, the University provides quality, affordable academic programs and educational environments to foster holistic student growth and development. Undergraduate programs and specialized fields of study.</p> <p>In its role as a public institution, the University is expected to be an inclusive academic community reflective of the greater society, serving a student body diverse in academic interest, age, gender, economic status, and ethnicity. To remain vital in carrying out its institutional purposes, Indiana State University is committed to the ongoing assessment and improvement of its primary activities.</p>	<p><i>Mission Statement:</i> (Not in exact sequence) Indiana State University School of Nursing is part of a publicly-assisted opportunity institution of higher learning. The mission of the School of Nursing is to foster the development of students who will become productive citizens who function as competent nurses, and who strive to enhance the quality of life of the members of society.</p> <p>The mission of the School of Nursing is accomplished by the dissemination of knowledge through research, creative and scholarly activities, and service to the university and the public.</p> <p>This is a mission that extends beyond local and state boundaries to include a national and international scope.</p> <p>To meet the needs of a diverse society, the School of Nursing provides education at various levels using multiple delivery methods. The academic programs encompass the associate degree program and the baccalaureate and higher degree programs. As part of our dedication to life-long learning, the School of Nursing assists nurses in maintaining and developing competencies in nursing by offering continuing education programs.</p> <p>The School of Nursing is committed to being an inclusive academic community by providing a supportive environment for students who are diverse in many ways, including age, gender, economic status, and ethnicity. In the pursuit of excellence, the School of Nursing is dedicated to continuous systematic assessment for the purposes of quality improvement.</p>
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The philosophy of the School of Nursing serves as the foundation for the programs of study and articulates the faculty's beliefs related to the paradigm of nursing, nursing education, and life-long learning.

Philosophy of the Faculty

School of Nursing faculty endorse the Mission and goals of Indiana State University including the core values of access, service, success, innovation and excellence. The University Mission supports the development of associate, baccalaureate, graduate, and continuing education programs to meet learning needs of clients in a changing society. Faculty contribute to the discipline of nursing and to the University through teaching, research, and professional and community service.

Nursing is a discipline whose practice is based on nursing knowledge, the sciences, and the humanities and is guided by the ANA Code of Ethics and Standards of Practice. It also reflects mandates and nursing care standards from significant nursing education and health organizations such as the American Nurses Association, National League for Nursing, American Association of Colleges of Nursing, Indiana State Board of Nursing, and the Pew Health Professions Commission. Nurses collaborate with other members of the interdisciplinary health care team. Within a variety of roles and in multiple settings, nurses use therapeutic communication skills to assess wellness and health needs and risks of culturally diverse clients throughout the life span. Nursing care goals are mutually established with clients and include promotion of optimal health; prevention or recovery from illness; rehabilitation to maximal health status; and assurance of dignity in the process of dying. Nursing is a vital force in society whose roles affect and are affected by current and emerging health care delivery systems. Knowledge derived from research and other scholarly activities, practice, and societal trends provide direction for client education and for the evolving practice of nursing.

Nurses use therapeutic nursing interventions within the context of clinical decision-making to provide culturally sensitive, holistic care for clients. Innovative techniques and information management skills are used to provide safe and accurate care to clients. Using these skills, nurses

not only care for clients, but they also respond to the environment in which care occurs. Wellness, health needs and health risks are best understood in the context of the client's environment.

Environment is integral to the experience of health. Environment, as a dimension, influences the life and development as well as the wellness and illness of the client. Nurses interact and collaborate with clients to maintain and/or modify the environment to support optimal health. Environment also encompasses the context in which nurses learn and practice.

Health, a dynamic process, occurs in varying degrees of wellness and illness from optimal health to death. Health goals are best achieved through a client-centered, comprehensive, and accessible health care delivery system. As members of a therapeutic and caring discipline, nurses promote high quality health care and the improvement of health care delivery.

Clients are defined as individuals, families, groups, and/or communities. They have basic needs which, when met, support the potential for well-being and optimal health. Clients respond to these needs throughout the life span. Clients meet their own health needs when possible. Nurses collaborate with clients when necessary to meet client's needs. Clients interact with the health care delivery system in an effort to promote, maintain and/or restore their needs, including those through the dying process.

Life-long learning is a continuous process building on previous levels of knowledge and experience and is influenced by time, maturation, and differing interests and abilities. *Learning* is achieved through multiple approaches and is enhanced when the learner actively participates in the process. Teachers facilitate the learning process by serving as resources and foster a climate of intellectual curiosity and critical thinking in an atmosphere conducive to self-direction. Within a climate of mutual respect, students and teachers participate collaboratively in the cooperative enterprises of inquiry, learning, scholarly achievements, and service.

Nursing education provides the nurturing and facilitation of intellectual growth as well as the foundation and evaluation of interpersonal competency, technological skill, and clinical judgment. In response to community need and in support of the opportunity for life-long learning, programs at the School of Nursing allow access to educational opportunities and facilitate educational mobility. Student success is promoted by supportive faculty advisement, supplemental instruction services, and student support groups, such as the Student Nurses Association.

Associate degree education prepares technical graduates who are critical thinkers, communicators and providers and managers of care. Their clients are individuals or families. Nursing care is provided with the guidance of a professional nurse in selected settings. The associate degree graduate is also prepared as a member of the nursing profession and a life-long learner.

Baccalaureate nursing education is the minimum qualification for the first professional role in nursing. The baccalaureate nursing program prepares generalists with skills in critical thinking, clinical judgment, and ethical decision making to facilitate their work in a variety of settings including those considered nontraditional. Baccalaureate graduates are grounded in community health theory and are consumers of evidence-based practice research. Graduates practice to ensure continuity of care across systems and settings. Graduates are also prepared to assume beginning leadership roles for providing health care and to serve as educators, advocates, active health policy participants and novice health policy developers.

Graduate education provides preparation for assumption of advanced practice roles. Advanced practice includes active involvement in shaping health policy and conducting research and evidence-based clinical practice and client outcome research, proficiency in advanced clinical judgment, participation in interdependent practice, development and use of economic and quality indicators, and use of technological advances. Practice settings vary and provide local, national,

and international perspectives. Central themes of graduate education include exploring the meaning of health and illness with clients and developing and implementing more cost effective models of care. Continued competence will be assured by values of life-long learning. Advanced preparation for leadership roles in education/administration will continue to be necessary in the changing health care delivery system.

Continuing education in nursing embraces the value of life-long learning and promotes excellence in nursing practice by providing quality continuing education for nurses. The continuing education program responds to trends and changes in the health care system. The program is designed to improve health care by providing timely and informative educational activities to expand knowledge and competencies of practicing nurses. Continuing educational activities address diversity in nursing and levels of nursing practice

- b. **program purposes and objectives /competencies are:**
- **congruent with the program philosophy / mission;**
 - **clearly stated;**
 - **publicly accessible;**
 - **appropriate to legal requirements and scope of practice; and**
 - **consistent with contemporary beliefs of the profession.**

The philosophy of the School of Nursing is reviewed every other year (odd years) in the Curriculum and Academic Affairs Committee and revisions are made as needed. The latest revision was completed in April, 2001 in conjunction with the curriculum revisions. The School of Nursing philosophy is in the printed *Student Handbook*, and also available on the School's web page, from the Curriculum side bar, or directly at <http://www.indstate.edu/nurs/Philosophy.html>

The programs' outcomes and terminal competencies flow from the foundation of the general education goals, the philosophy of the School of Nursing, and the organizing framework. The complete conceptual framework is available on the School's web page at

<http://www.indstate.edu/nurs/OrganizingFramework.html> Course descriptions connect the

organizing framework to the course outcomes and competencies. The curriculum progresses from simple to complex in role expectations through and across programs. The Associate Degree program and the Baccalaureate program advance through curriculum levels leading to the completion of each program. The Baccalaureate program has a track for RN-BS completion. The graduate program does not have identified levels, but its design is based on core graduate courses, followed by the courses in the specialty concentrations.

The programs have been constructed based on regulations, recommendations, and nursing care standards from national nursing education and health organizations. Professional guidelines have been utilized from the American Nurses Association, the Indiana statutes, the expected competencies from the Indiana Deans and Directors, the Pew Commission Competencies for Health Care Practitioners, and the essentials of baccalaureate and master's education from the American Association of Colleges of Nursing. A graphic illustration of the professional guidelines that are the foundations of the programs is presented in Criterion 12.

Portions of the philosophy have been selected to compare the roles and competencies of the programs. Refer to Table 1.2.

Table 1.2 *Philosophy, Degree Role Outcomes, and Competencies*

Philosophy	Outcomes	Competencies
Associate degree education prepares technical graduates who are critical thinkers, communicators and providers and managers of care. Their clients are individuals or families. Nursing care is provided with the guidance of a professional nurse in selected settings. The associate degree graduate is also prepared as a member of the nursing	<p>Critical Thinker: A critical thinker who engages in purposeful, reflective reasoning and analysis to form beliefs and guide decision-making.</p> <p>Communicator: A communicator who makes accurate perceptions, interpretations and expressions, in a style sensitive to the purpose and context of the interactions.</p>	<ol style="list-style-type: none"> 1. Uses critical thinking when analyzing clinical decision-making. 2. Evaluates client care decision-making at each step of the nursing process. 3. Applies concepts from the sciences, humanities, and nursing in providing nursing care. <ol style="list-style-type: none"> 1. Interprets interactions collected from clients and significant support person(s). 2. Utilizes therapeutic communication skills when interacting with clients and significant support person(s). 3. Demonstrates use of multiple media to convey information in a variety of settings.

Philosophy
profession and a
life-long learner.

Outcomes

Provider of Care: A provider who meets the health needs of culturally diverse people throughout the life span.

Manager of Care: A manager of care, in collaboration with the client and members of the health care team, who utilizes resources to meet client needs and support organizational outcomes.

Member of the Nursing Profession: A member of the nursing profession who adheres to standards of professional practice and assumes accountability for his / her own behaviors.

Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and

Competencies

1. Assesses the impact of environmental, developmental, emotional, cultural, religious, and spiritual influences on the client's health status.
2. Assesses the client's health status by performing a physical, cognitive, psychosocial, and functional assessment.
3. Plans client care based on nursing diagnoses.
4. Makes clinical judgments and management decisions to provide accurate and safe nursing care.
5. Demonstrates caring behavior toward the client, significant person(s), peers, and other members of the health care team.
6. Teaches the client and significant support person(s) the information and skills needed to achieve optimal health.
7. Evaluates learning outcomes.
8. Evaluates and modifies the plan of care.

1. Prioritizes client care for multiple clients.
2. Implements nursing strategies to provide cost efficient care.
3. Delegates and evaluates the activities of assistive personnel.
4. Facilitates continuity of care within and across health care settings.
5. Collaborates creatively and openly with others to solve problems to achieve client goals and outcomes.
6. Verbalizes common types of health care delivery systems.
7. Verbalizes the nurse's role in continuous quality improvement/performance improvement activities.

1. Participates actively on the interdisciplinary health care team.
2. Practices within the ethical, legal, and regulatory frameworks of nursing, and standards of professional practice.
3. Demonstrates accountability for nursing care given by self and/or delegated to others.
4. Maintains organizational and client confidentiality.

1. Develops a plan to meet self-learning needs.
2. Evaluates the impact of historic and current economic, social, and demographic forces on the delivery of health care.

Philosophy

Baccalaureate nursing education is the minimum qualification for the first professional role in nursing. The baccalaureate nursing program prepares generalists with skills in critical thinking, clinical judgment, and ethical decision making to facilitate their work in a variety of settings including those considered nontraditional. Baccalaureate graduates are grounded in community health theory and are consumers of evidence-based practice research. Graduates practice to ensure continuity of care across systems and settings. Graduates are also prepared to assume beginning leadership roles for providing health care and to serve as educators, advocates, active health policy participants and novice health policy developers.

Outcomes

technology.

Critical Thinker: A critical thinker who demonstrates purposeful thinking, intellectual integrity, solid reasoning and creative problem solving as the basis for making decisions and clinical judgments.

Communicator: A communicator who incorporates goal-directed and focused dialogue into nurse-client interactions, demonstrates effective listening, reading, writing and speaking skills, and uses technology appropriately to facilitate management of information.

Provider of Care: A provider of care who assumes a variety of roles in the delivery of holistic, competent, and culturally sensitive nursing care in multiple settings.

Competencies

1. Demonstrates critical thinking in making decisions, clinical judgment, and in problem solving.
2. Synthesizes theoretical and empirical knowledge from the sciences, humanities, and nursing in organizing, planning, and providing care in collaboration with individuals, families, groups and communities.
3. Selects appropriate alternatives when considering solutions to identified health needs of individuals, families, groups, and communities.
4. Analyzes diverse viewpoints in the interpretation of data and in determining conclusions.

1. Incorporates therapeutic communication skills in interactions with individuals, families, groups, and communities.
2. Communicates effectively with individuals, families, groups, communities and members of the interdisciplinary health care team.
3. Demonstrates appropriate college-level writing skills consistent with published expectations and standards.
4. Utilizes technology for seeking, sorting, selecting, and presenting relevant information.

1. Assesses wellness, health needs, and risks of individuals, families, groups, and communities.
2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals, families, groups, and communities in multiple settings.
3. Educates individuals, families, groups, and communities about wellness, disease/illness, medical-technical aspects, symptom management, self-care management, resource management, and alternative methods of healing.
4. Evaluates client outcomes and the effectiveness of professional nursing practice.
5. Revises plan of care as appropriate in collaboration with individual, family, group, community, and members of the interdisciplinary health care team.

Philosophy

Outcomes

Competencies

Leader: A leader who provides responsible direction in the management of human, fiscal, and material resources necessary for achieving quality health care outcomes.

Professional: A professional who demonstrates accountability and responsibility for nursing judgments and actions within an ethical and legal framework.

Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and technology.

Advocate: An advocate for policy changes that promote health for individuals, families, and

6. Evaluates research and evidence-based information for application to nursing.

1. Assumes a leadership role in guiding members of the interdisciplinary health care team.
2. Adopts a consumer-oriented approach in the delivery of cost-effective care.
3. Prioritizes therapeutic goals for providing quality care in collaboration with individuals, families, groups, and communities.
4. Compares the connection between human, fiscal, and material resources required for providing care.
5. Delegates appropriate functions to licensed and non-licensed caregivers in a manner consistent with the Indiana Nurse Practice Act.
6. Performs selected supervision activities related to the actions of licensed and non-licensed caregivers.

1. Practices within an ethical and legal framework and standards of professional nursing practice.
2. Demonstrates accountability and responsibility for one's own actions, clinical judgments, and decision-making.
3. Demonstrates ethical and legal decision making surrounding health care dilemmas.
4. Protects client and organizational confidentiality.

1. Considers how cultural beliefs, values, and practices influence the health care of individuals, families, groups, and communities and plans accordingly.
2. Analyzes how ecological factors, economics, and the political arena shape health care policies and delivery of care.
3. Assumes responsibility to maintain current knowledge in professional nursing practice by articulating a plan for life-long learning.
4. Promotes excellence in nursing through regular attendance at educational activities designed to expand knowledge and competencies.

1. Participates in activities to improve health care practices and policies.
2. Advocates for policy changes that promote health for individuals, families,

Philosophy

Graduate education provides preparation for assumption of advanced practice roles. Advanced practice includes active involvement in shaping health policy and conducting research and evidence-based clinical practice and client outcome research, proficiency in advanced clinical judgment, participation in interdependent practice, development and use of economic and quality indicators, and use of technological advances. Practice settings vary and provide local, national, and international perspectives. Central themes of graduate education include exploring the meaning of health and illness with clients and developing and implementing more cost effective models of care. Continued competence will be assured by values of life-long learning. Advanced preparation for

Outcomes

communities.

Coordinator of Community Resources:

A coordinator who collaborates with members of the interdisciplinary health care team in multiple settings.

Critical Thinker: A critical thinker who utilizes the intellectually disciplined processes of conceptualizing, applying, analyzing, synthesizing, and evaluating information as a guide for advanced nursing practice.

Communicator: A communicator who utilizes multiple modalities strategically for the optimal transmission of messages and interaction with the intended audience.

Advanced Provider: A provider who is competent to apply advanced nursing knowledge including culturally competent care, assessment, prescriptive interventions, evaluation, collaboration, and education.

Competencies

groups, and communities.

3. Analyzes the role of the nurse policy developer in a variety of health care settings.

1. Coordinates care with members of the interdisciplinary health care team from a variety of health care settings.
2. Assists individuals, families, groups, and communities in accessing community resources to meet health needs.
3. Refers individuals, families, groups, and communities to services and programs that promote wellness.

1. Synthesizes theoretical frameworks used in the integration of knowledge from related sciences and humanities, clinical knowledge, and nursing sciences as the foundations for advanced nursing practice.
2. Analyzes the significance of advanced nursing knowledge as it relates to selected populations.

1. Communicates effectively both orally and in writing, in a manner that commands professional attention.
2. Uses technology strategically to access, organize, document, and present information.

1. Meets advanced practice competencies for selected populations.
2. Provides safe, cost-effective, and culturally competent advanced practice nursing for selected populations.
3. Evaluates outcomes of advanced practice nursing interventions, methods, or strategies.
4. Collaborates with others in the implementation of advanced practice nursing.
5. Provides expert consultation to others to resolve complex problems related to client-care situations, and /or health care delivery systems, and/or education.
6. Develops, implements, and evaluates educational programs for selected populations.

Philosophy

leadership roles in education/administration will continue to be necessary in the changing health care delivery system.

Outcomes

Leader: A leader who inspires, persuades, and mentors others in the implementation of organizational visions and missions.

Professional: A professional who is a role model through adherence to the ethical, legal, and professional standards of the discipline specialty area.

Life-long Learner: A life-long learner who incorporates new knowledge related to culture, ecology, economics, politics, science, and technology.

Advocate: An advocate who critiques, develops policies, and participates in activities that promote positive change.

Coordinator of Community Resources: A coordinator who collaborates with agencies and other providers for the most effective utilization of resources.

Knowledge Contributor: A knowledge contributor who synthesizes, designs, conducts, and implements research to bring about changes and make improvements in professional practice.

Competencies

1. Assumes a leadership role in one or more areas: health care, professional organizations, community, research, and/or education.
2. Interprets the role and functions of the nurse prepared at the master's level to clients, nurses and other health care providers, and policy-makers.
3. Works collegially to design, implement, and evaluate programs for performance improvement.

1. Models professional behavior.
2. Demonstrates accountability for advanced practice nursing decisions based on ethical and professional standards.
3. Interprets the role functions of expert clinician, educator, researcher, administrator, and consultant and implements these roles, as appropriate, based on specialty preparation.

1. Assumes responsibility to maintain current knowledge in professional nursing practice by articulating a plan for life-long learning.
2. Promotes excellence in nursing through regular attendance at educational activities designed to expand knowledge and competencies.
3. Seeks and participates in professional and personal growth promoting activities.

1. Participates in activities to improve health care practices and policies.
2. Assumes the role of policy developer.
3. Advocates for policy changes that promote health.

1. Coordinates care with others.
2. Refers individuals, families, groups, communities, students, and organizations to appropriate resources.
3. Negotiates services for selected populations.

1. Evaluates the implementation of nursing research.
2. Contributes to nursing knowledge through validation, refinement, and extension of research.
3. Applies, designs, conducts, and implements research to bring about change and make improvements in their own professional environment.

c. commitment to cultural, racial, and ethnical diversity of the community in which the institution and the nursing education unit exist.

The Office of Diversity & Affirmative Action is responsible for carrying out Indiana State University's commitment to preventing prohibited discrimination on the basis of sex, race, age, national origin, sexual orientation, religion, disability or veteran status, against any of its employees, students or invited guests. The Office provides leadership in supporting and enhancing campus diversity and an inclusive community, as well as developing, implementing and monitoring the ISU affirmative action plan and nondiscrimination policy and procedures. The Office is responsible for the oversight and investigation of complaints of harassment or discrimination prohibited under law. It also provides resources and training in diversity issues and sexual and racial harassment prevention as well as workplace and education equity. The Director of the Office of Diversity & Affirmative Action chairs the President's Commission for Enhancement of Diversity Resources and Faculty Liaisons Advocacy Group and oversees the Mentoring Assistance for Prospective Students (MAPS) program. The Office works with these and other campus groups to facilitate the creation and maintenance of an educational environment that is hospitable to students of all nationalities and a workplace that is equitable in its treatment of all employees.

The student population of Indiana State University is diverse. The diversity of the nursing program is significantly lower than that of the University. The faculty has a commitment to inclusion and diversity, however, due to the minimal implementation of recruitment and retention activities, a diverse student enrollment and minority scholars as role models in nursing education is still lacking. Refer to Table 1.3.

Table 1.3 *Diversity of State, University, and School of Nursing*

	State of Indiana 2000 Census	Indiana State University Fall 2002	AS Program Spring 2003 + NNDs*	BS Program Spring 2003 + NNDs*	RN-BS Track Spring 2003	Graduate Program Spring 2003	Total Nursing Spring 2003
Population	6,080,484	11,714	106	335	16	25	482
Gender Male Female	48.42% 50.33%	47.6% 52.4%	8.49%(9) 91.51%(97)	5.37%(18) 94.63%(317)	12.5%(2) 87.5%(14)	12%(3) 88%(22)	6.95%(32) 93.05%(450)
Full-time** Part-time**	N/A	21.39% 78.60%	99.06%(105) 0.94%(1)	93.73%(314) 6.27%(21)	6.25%(1) 93.75%(15)	28%(7) 72%(18)	85.75%(427) 14.26%(55)
Age							
< 25	Average age 35.2		40.57%(43)	88.66%(297)	31.25%(5)	12%(3)	72.2%(348)
26-30			20.74%(22)	5.67%(19)	12.5%(2)	12%(3)	9.54%(46)
31-40			21.7%(23)	3.58%(12)	31.25%(5)	32%(8)	9.96%(48)
41-50			15.09%(16)	1.49%(5)	25%(4)	36%(9)	7.05%(34)
51-60			1.89%(2)	0.30%(1)	0%(0)	12%(3)	1.25%(6)
60 plus			0%(0)	0%(0)	0%(0)	0%(0)	0%(0)
Race							
African Am	8.39%	10.42%	1.89%(2)	7.46%(25)	0%(0)	4 %(1)	5.81%(28)
Am Indian	0.3%	0.29%	0.94%(1)	0%(0)	0%(0)	0%(0)	0.21 %(1)
Asian	1%	0.76%	0.94%(1)	0%(0)	0%(0)	4%(1)	0.42%(2)
Hispanic	3.53%	1.17%	0%(0)	0.90%(3)	0%(0)	0%(0)	0.62%(3)
White	87.49%	80.9%	93.4%(99)	90.75%(304)	93.75%(15)	92%(23)	91.49%(441)
Other	1.61%	1.43%	0.94%(1)	0.30%(1)	0%(0)	0%(0)	0.42 %(2)
International		4.14%	1.89%(2)	0.60%(2)	6.25%(1)	0%(0)	1.03%(5)

* NND stands for Nursing Nondesignated which is the code for students that have declared nursing as their major but have not been accepted into a program.

** Full-time undergraduate status was determined by 12 credit hours or more; Full-time graduate status was determined by 9 credit hours or more.

d. programming for distance education is congruent with the philosophy and the purposes of the governing organization and the nursing education unit.

Both the mission and the philosophy support the School of Nursing in providing distance education. The *School of Nursing Mission* states, “To meet the needs of a diverse society, the School of Nursing provides education at various levels using multiple delivery methods.” The *Organizing Framework* supports this concept with the statement, “Learning is achieved through multiple approaches and is enhanced when the learner actively participates in the process.” The

School of Nursing has presented the Baccalaureate Track for Registered Nurses and selected graduate courses through distance media. Over the years, there has been a variety of delivery methods including video tapes sent by mail, live one-way video, live two-way video, internet electronic presentations and discussion boards, and clinical evaluators that traveled to the clinical location in Indiana. Students may enroll in a distance education course section directly through Indiana State, or enroll through the Indiana College Network. The venue of distance education will continue to be part of remote and convenience offerings for our undergraduate and graduate nursing students.

Criterion 2: Faculty, administrators, and students participate in governance as defined by the parent organization and nursing education unit.			Operational Definition: Participation is defined as membership on appropriate University and School committees and task forces Expected Level of Achievement/Decision Rule for Action: 100% of tenure/tenure track faculty will be on at least one School of Nursing Committee, 60% of tenure/tenure track faculty will be on at least one University Committee, one student from each program will be on the School SAC, CAAC, and Student Grievance Committees; and one student representative to attend Nursing Council. Outcome: Expected level of achievement met for all programs			
Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis Including actual level(s) of achievement	Actions For program Development, Maintenance, or Revision
Faculty Governance Participation	Faculty annual Activity Reports School of Nursing Committee meeting Minutes University Committee Meeting Minutes University and School Committee membership lists	Dean, FAC, Department Chairs . EOAC to evaluate results on a annual basis.	Annually in March	Compare membership lists with Minutes and Annual Activity Reports	100% of tenure/tenure track faculty are on at least one School of Nursing Committee.	Continue to Monitor
Administrators Governance Participation	Administrators files Committee Minutes Committee membership lists Faculty activity reports.	Provost, Dean, Assistant Dean, Department Chairs, Committee Chairs. EOAC evaluate.	Annually in March	Compare membership lists with Minutes and Annual Activity Reports	100% of Administrators participate in School and University governance	Continue to Monitor
Student Governance Participation	School Committee membership lists Committee Minutes	Exec, SAC	Annually in March	Compare membership lists with Minutes	Student volunteers are assigned to faculty committees as per SON statues. Student attendance was sporadic throughout 2002-2003	A concerted effort in AY 2001-2002 was made to increase student participation by giving committee sign up sheets to all faculty to distribute in classes. Continue to Monitor

CRITERION 2: Faculty, administrators, and students participate in governance of the parent organization and the nursing education unit.

EXPECTED LEVEL OF ACHIEVEMENT: 100% of tenure/tenure track faculty will be on at least one School of Nursing Committee; 60% of tenure/tenure track faculty will be on at least one University Committee; one student from each program will be on the School SAC, CAAC, and Student Grievance Committees, and one student representative to attend Nursing Council.

Documentation confirms:

a. participation in the governance of the parent organization:

Indiana State University is governed by a Board of Trustees composed of nine persons appointed by the Governor of the State of Indiana. Two of the nine are alumni of the University, and one trustee, nominated by the Student Government Association, is a full-time student at ISU. The President, who serves as the chief executive officer, reports to the Board of Trustees. There are five vice presidents who report directly to the President.

Indiana State University has seven academic divisions, including the School of Nursing, each headed by a dean who reports to the Provost and Vice President for Academic Affairs. The organizational chart for University can be found in Appendix A, and in the *Indiana State University Handbook*, I-23.

The faculty representative in University governance is the University Faculty Senate. The authority of the Senate is described in the *Indiana State University Handbook*, II-2. Forty faculty members, who have been elected from among the college and schools of the University, are voting members. Five administrators and five students also hold speaking seats. The School of Nursing is apportioned two Senate seats. In addition, faculty have opportunity for appointment, by the Executive Committee of the Senate, to various standing committees. The following table demonstrates School of Nursing participation.

Table 2.1 *Participation on University Faculty Senate Committees*

Senate/Standing Committee	Faculty/ Administrator	Term of Service
Senator	Susie Sharp	2002-2003
	Veda Gregory	
	Veda Gregory	2001-2002
	Betsy Frank	
	Betsy Frank	2000-2001
	Susie Sharp	
Administrative Affairs	Esther Acree	2002-2004
Arts Endowment	Julie Mitre	2002-2004
	Debra Luegenbiehl	2001-2003
	Julie Mitre	1999-2001
Curriculum and Academic Affairs	Betsy Frank	2001-2003
	Suzy Fletcher	2000-2002
Faculty Economic Benefits	Melody Mckinney	2001-2003
	Veda Gregory	2000-2002
	Susie Sharp	1999-2001
Faculty Affairs	Suzy Fletcher, alt.	2001-2003
	Sarah Emerson	2000-2002
	Esther Acree	1998-2002
Graduate Council	Ann Tomey	1998-2003
Student Affairs	Julie Fine	2002-2004
	Linda Harbour	1999-2001
University Research	Betsy Frank	1999-2001
University Leaves	Suzy Fletcher	2000-2002
	Betsy Frank	1999-2001
University Promotions	Marcia Miller	2001-2003
	Carolyn Fakouri	1999-2001
General Education Council	Ann Tomey	2001-2002
	Linda Harbour	1999-2001
	Lynn Foster, Ex-Officio	2001-2002
	Bonnie Saucier, Ex-Officio	1999-2002

Appointments are made to other University Committees by the President, or by the Provost and Vice President for Academic Affairs. The faculty curriculum vitae in the exhibits reflect the variety of opportunities that administrators, faculty, and professional staff have to share their

expertise and to represent the School of Nursing. The most current list for membership on University Committees can be found online at <http://www.indstate.edu/acad-aff/Greetings.html>. Hard copies of *Fall Greetings* and *Winter Greetings* for the years 1995 to 2002, which contain membership lists, are on display in the NLNAC Resource Office, School of Nursing 335.

The following table demonstrates level of achievement for School of Nursing faculty participation in University governance. The expected outcome has been exceeded in relation to participation in governance of the University.

Table 2.2 *Rates for Faculty Participation in University Governance*

Academic Year	# Tenure/ Tenure Track Faculty	# Faculty Participating on University Committees	% Faculty Participating on University Committees
2002-2003	19	16	84.2%
2001-2002	19	16	84.2%
2000-2001	21	18	85.7%

Dean Saucier serves on two committees out of the Office of Academic Affairs, the Provost's Advisory Committee and Dean's Council. The Provost's Advisory Council consists of the Academic Deans. Dean's Council is made up of the Provost's Advisory Committee, five Associate Vice Presidents, General Education Coordinator, Director of the Terre Haute Center for Medical Education, officers of the Executive Committee of Faculty Senate, and a representative of Student Government Association. Both groups are advisory to the Provost and Vice President for Academic Affairs. The Assistant Dean may be designated to attend meetings when the Dean is not available. The Dean and Assistant Dean also represent the School of Nursing on various other University committees as evidenced by their curriculum vitas.

b. participation in the governance of the nursing education unit.

In the School of Nursing, the Assistant Dean reports directly to the Dean, as do the various directors and two department chairpersons. School of Nursing faculty report directly to their

respective department chairperson. Faculty also are ex-officio members of the Community Advisory Committee, which makes recommendations to the Dean on matters related to achievement of the School's goals. The administrative organization, including the organizational chart and position descriptions, may be found in Section I of the *School of Nursing Handbook*. The organizational chart is also located in Appendix A.

School of Nursing administrators, faculty, professional staff, and students have opportunities to participate in governance at the School level. The Faculty Statutes, found in the *School of Nursing Handbook*, delineate membership on the committees of the Nursing Council, and details functions of these committees. The following table demonstrates participation for the last three consecutive academic years.

Table 2.3 *Nursing Council 2002-2003*

Committee	Member	Term on Committee
Nursing Council	Chair: V. Gregory Vice Chair: D. O'Neal Secretary: M. McKinney Voting Members: All nursing faculty who are voting members of the University Faculty Ex-Officio: B. Saucier, Dean M. Bennett, Assistant Dean All temporary faculty, professional staff A. Zeigler, Student C. Dunlany, Student Alternate	2002-2003 2002-2003 2002-2004 2002-2003 2002-2003
Executive Committee of Nursing Council	Chair: V. Gregory Vice Chair: D. O'Neal Secretary: M. McKinney Members-At-Large: D. Barnhart G. Plascak Ex-Officio: B. Saucier, Dean M. Bennett, Assistant Dean E. Acree, Department Chair K. Pickrell, Department Chair	2002-2003 2002-2003 2002-2004 2002-2004 2001-2003
Faculty Affairs	Chair: S. Sharp Vice Chair: A. Tomey Secretary: B. Frank Members: J. Fine	2001-2003 2000-2002 2001-2003 2002-2004

Committee	Member	Term on Committee
	<p>B. Frank (Leave, Sp2003) S. Fletcher M. Sample</p> <p>Ex-Officio: B. Saucier, Dean E. Acree, Department Chair K. Pickrell, Department Chair V. Gregory, Chair Nursing Council</p>	<p>2001-2003 Spring 2003 2002-2004</p>
Evaluation/ Outcomes Assessment	<p>Chair: B. Frank (Leave Spring 2003) Vice Chair: M. Bennett Secretary: J. Fine Members: M. Miller (Replace Chair, Spring 2003) K. Pickrell, Department Chair E. Acree, Department Chair</p> <p>Ex-Officio: B. Saucier, Dean M. Bennett, Assistant Dean V. Gregory, Chair Nursing Council L. Foster, Director Student Affairs R. Reed, LRC Representative M. Pantle, CE Director</p>	<p>2001-2003</p> <p>2002-2003 2002-2004</p>
Curriculum and Academic Affairs	<p>Chair: A. Tomey Vice Chair: D. Barnhart Secretary: D. O'Neal Members: M. McKinney M. Miller D. Bartnick E. Acree, Department Chair K. Pickrell, Department Chair A. Sutherland, AD Student Rep. K. Strubinger, BS Student Rep. C. Thomas, Alt. BS Student Rep. M. Placek, Graduate Student Rep.</p> <p>Ex-Officio: B. Saucier, Dean V. Gregory, Chair Nursing Council R. Reed, LRC Representative L. Foster, Director Student Affairs B. Frank, Chair EOAC</p>	<p>2001-2003 2002-2004 2002-2004 2001-2003 2002-2004 2002-2004</p> <p>2002-2003 2002-2003 2002-2003 2002-2003</p>
Student Affairs	<p>Chair: G. Plascak Vice Chair: P. Jones Secretary: Rotating Members: L. Foster, Director Student Affairs M. Pantle J. Mitre S. Fletcher D. Nelson H. Carter, AD Student Rep. M. Crowley, BS Student Rep. C. Thomas, Alt. BS Student Rep.</p> <p>Ex-Officio: B. Saucier, Dean V. Gregory, Chair Nursing Council</p>	<p>2001-2003 2001-2003</p> <p>2002-2004 2001-2003 2002--2004 2002-2004 2002-2003 2002-2003 2002-2003</p>

Committee	Member	Term on Committee
	E. Acree, Department Chair K. Pickrell, Department Chair P. Myers, LRC Representative	
Nominating Committee	Members: D. Barnhart J. Mitre A. Tomey	2002-2003 2002-2003 2002-2003
Grievance	Members J. Mitre B. Frank J. Fine S. Fletcher P. Jones Students: M. Placek , Graduate Program J. Dean, BS Program Julia Hilt, AD Program Student Alternates: A. Nossett, BS C. Dunlavey, BS T. Saur, BS D. Hamrick, AD K. Blackburn, AD H. Eaglin, AD K. Simon, AD	2002-2004 2001-2003 2002-2004 2001-2003 2001-2003 2002-2003 2002-2003

Table 2.4 demonstrates level of achievement for School of Nursing faculty participation in governance in the nursing education unit.

Table 2.4 Rates for Faculty Participation in Nursing Education Unit Governance

Academic Year	# Tenure/ Tenure Track Faculty	# Faculty (not on leave) Participating on School of Nursing Committees	% Faculty (not on leave) Participating on School of Nursing Committees
2002-2003	19	17	100% (17/17)
2001-2002	19	17	100% (17/17)
2000-2001	21	21	100% (21/21)

The expected outcome has consistently been met. This is representative of previous years.

Faculty are assigned to standing committees of Nursing Council by the Executive Committee, or are elected according to Faculty Statutes. A membership list for School of Nursing governance committees can be found in the committee annual reports.

Student Affairs Committee is responsible for coordination of the selection of student representatives for Nursing Council, Curriculum and Academic Affairs Committee, Student

Affairs Committee, Grievance Committee (elected) and others as requested. While many students eagerly volunteer for committee membership when solicited in the Fall semester, participation in governance wanes as the academic year progresses. Incompatibility of meeting times with student's class/clinical schedules, and the rigors of course requirements are cited as reasons. Student representation from each program has been difficult to provide to standing committees consistently. Students generally only volunteer for the committee in which they have specific interest. Since Fall 2000, a concerted effort has been made to recruit not only student representatives from each program, but also several alternate student representatives from each program to serve as needed. The names of those selected are included on the email distribution list for the respective committee so that notification of meetings is assured. Although this has been helpful, it has not resolved the need for continued effort to generate student involvement in governance. There are plans to have a faculty member, who is a representative of Nursing Council, speak at student orientation about opportunities for student involvement. A student representative orientation to School of Nursing governance is being planned for the Fall semester to help students understand their role, and the importance of their contributions to governance. School of Nursing standing committees are open to all students, except when student and faculty rights are protected.

Table 2.5 *Student Representation in School of Nursing Governance*

Academic Year	Student Affairs Committee-1 from each program*	Curriculum and Academic Affairs Committee-1 from each program*	Grievance Committee-1 from each program*	Nursing Council-1 student*
2002-2003	1-AD 1-BS 0-Graduate	1-AD 1-BS 1-Graduate	1-AD 1-BS 1-Graduate	1-Student
2001-2002	1-AD 1-BS 0-Graduate	1-AD 1-BS 0-Graduate	1-AD 1-BS 1-Graduate	1-Student
2000-2001	1-BS	1-AD	1-AD 1-BS 1-Graduate	0-Students

*Student representation as designated by Faculty Statutes

The Dean's Council of Students affords students opportunity to meet with the Dean in an advisory capacity in matters related to the School of Nursing. The Council meets once each semester.

Criterion 3: Nursing education unit is administered by a nurse who is academically and experientially qualified and who has authority and responsibility for development and administration of the program.			Operational Definition: Nursing unit is the School and administrator is the Dean who is doctorally prepared from a regionally accredited university, has a graduate degree in nursing and is licensed as a registered nurse in the State of Indiana and will have qualifications as outlined in job description and job search announcement. Expected Level of Achievement/Decision Rule for Action: Dean will meet all expected qualifications. Outcome: Expected level of achievement met for all programs			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Dean's qualifications	Job description Dean's personnel file in Provost's office Vita, Educational transcripts, certifications	Provost	Upon hire Annually in May	Compare vita and personnel file with job search announcement and job description by search committee and administrators. Evaluation of Dean Role during periodic Organizational Change and Function Surveys Review of credentials, academic, scholarly, service, and leadership accomplishments. Evaluation according to administrative guidelines	New dean hired in 1998. Performance reviews of dean by Provost annually. During organizational change survey (2000) faculty rated role of Dean 4.0- 4.2 on a 5 point scale.	Continue to evaluate based on University policy and guidelines.

CRITERION 3: Nursing education unit is administered by a nurse who is academically and experientially qualified, and who has authority and responsibility for development and administration of the program.

EXPECTED LEVEL OF ACHIEVEMENT: Dean will meet all expected qualifications.

Documentation confirms:

- a. **academic credentials of the nurse administrator are a graduate degree in nursing and an earned doctorate from a regionally accredited institution; explain acceptance of other graduate credentials for the nurse administrator.**

The Dean of the School is the chief administrator of the School of Nursing as indicated by the organizational chart (Appendix A.1). The Dean of the School of Nursing is fully qualified to administer the academic unit in nursing. Dr. Bonnie Saucier holds a doctorate of philosophy with a major in Nursing Theory and Research from Texas Woman's University. She holds dual master's degrees: one in Nursing with a focus in Nursing of Children from the University of Missouri/Kansas City, and one in Education with a major in Vocational Education from the University of Missouri. Her major area of study for her bachelor of arts degree was in Education from Stephens College in Columbia, Missouri. Her diploma in nursing was from St. John's Hospital School of Nursing in Springfield, Illinois.

- b. **knowledge of the program type is reflected in the experience of the nurse administrator.**

Dr. Saucier has been a nurse for over thirty-seven years. She has had a distinguished career as a nurse educator and administrator. Over thirty years of her career have been in the area of nursing education. She has taught at practical, associate, baccalaureate, and graduate levels of nursing education. A representation of courses she has taught are Maternal-child Nursing, Nursing Care of Children and Adolescents, Fundamentals of Nursing, Medical-surgical Nursing I and II, Psychiatric Nursing clinicals, Contemporary Nursing, Human Sexuality, Nursing Seminar, Health Assessment, Theoretical Foundations of Nursing Consultant, Nursing Theory, Nursing Research, Nursing British Heritage, and Nursing Management.

Dr. Saucier also has extensive administrative experience. She has served at various institutions of higher education in the positions of Curriculum Coordinator, Acting Chairperson, Chairperson, Division Director, Associate Dean, and Dean. She has been the Dean of Indiana State University School of Nursing since July 1998.

Scholarship interests of the Dean include numerous book reviews, nursing leadership and management, critical thinking, clinical reasoning, student retention, and the effects of play therapy on developmental levels of abused children. Her honors include, but are not limited to, the recognition as a Distinguished Lecturer for Sigma Theta Tau International, Mentor for the New Dean Mentoring Program sponsored by the American Association of Colleges of Nursing, and the Excellence in Nursing Leadership Award by the Lambda Sigma Chapter of Sigma Theta Tau.

c. authority and administrative responsibilities are documented within the position of the nurse administrator.

The position description for Dean includes responsibilities related to academic affairs, faculty affairs, student affairs, and general responsibilities. The Dean collaborates with the University administration, Deans of other departments, the Assistant Dean, Chairpersons, Directors, faculty and staff regarding School of Nursing matters. She facilitates the implementation of the School's vision, mission, goals, priorities, and outcomes. She upholds academic standards. In her position, she stimulates research and scholarship, instructional innovation, and professional development. She recommends faculty for hire, supports faculty for promotion, tenure, salary increases, leaves, and approves assignments. The Dean assists with the development and revision of policies. In budgetary matters, she negotiates resources, collaborates for fund raising, and supervises the expenditures of funds within the School. She is also responsible for maintaining the physical facilities and the inventory of equipment. She is accountable for the management of various reports for the School, the University, and accrediting agencies. The Dean is also the liaison to the

community, state, nation, and international arenas of nursing education (Refer to the *School of Nursing Handbook*, Section I, Position Description, Academic Dean,).

d. nurse administrator has adequate time to fulfill the role responsibilities.

The Dean's position is a full-time twelve-month administrative position. A teaching load is not customarily assigned, but the Dean has volunteered and has taught graduate courses. Selected administrative responsibilities are delegated to the Assistant Dean, which is also a full-time twelve-month position.

Department Chairpersons also have leadership and management responsibilities for their respective programs; however, these administrative positions are nine-month positions, except for the individual who holds the Baccalaureate and Higher Degree Department Chairperson position, which is served during twelve-months. This is due to her dual role as the Family Nurse Practitioner Program Coordinator. The Associate Degree Department Chairperson is given a stipend for work in the summer months. The Dean also has one full-time administrative office assistant. A periodic work-study student is assigned to the Dean as funding is available.

<p>Criterion 4: Policies of the nursing education unit are consistent with those of the governing organization, or differences are justified by nursing education purposes.</p>			<p>Operational Definition: Policies are rules and guidelines that govern faculty and student conduct in day to day activities of the nursing unit.</p> <p>Expected Level of Achievement/Decision Rule for Action: 100% of policies are consistent with the University or are justified in the written nursing unit policies</p> <p>Outcome: Expected level of achievement met for all programs</p>			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Faculty Policies	School Faculty Handbook University Handbook and SON Website	FAC, Committee Chairs, Exec, Nursing Council, University Faculty Senate, Technology Coordinator	Annually in September when reviewing Annual Reports	Executive Committee review of Handbook to verify that policy changes made during the prior year are in appropriate documents (handbooks, etc).	Editorial changes and policy updates are made annually. Updated handbook available online and new handbooks or handbook update inserts made available to faculty every fall.	FAC Committee Chair to review and analyze the congruency between SON policies and University policies. FAC to verify that policy changes made during the prior year are in appropriate documents (handbooks, etc). Continue to Monitor
Student Policies	School Student Handbook, University Student Handbook, University Catalogue and SON Website	SAC, CAAC, Exec, Nursing Council, University Faculty Senate, Technology Coordinator	Annually in September when reviewing Annual Reports	CAAC and SAC Committee Chair to review and analyze the congruency between SON policies and University And to verify that policy changes made during the prior year are in appropriate documents (handbooks, etc)	Student Handbook reviewed and revised annually by department chairs. Updated Student Handbook available online and hardcopies are made available to students during orientation.	CAAC and SAC Committee Chair to review and analyze the congruency between SON policies and University policies. CAAC and SAC to verify that policy changes made during the prior year are in appropriate documents (handbooks, etc) Continue to Monitor

CRITERION 4: Policies of the nursing unit are consistent with those of the governing organization, or differences are justified by nursing unit purposes.

EXPECTED LEVEL OF ACHIEVEMENT: 100% of policies are consistent with the University or are justified in the written nursing unit policies.

Documentation confirms:

- a. **congruency between policies affecting nursing faculty and staff and governing organization:**
- **Non-discrimination**
 - **Faculty appointment**
 - **Academic rank**
 - **Grievance procedures**
 - **Promotion**
 - **Salary and benefits**
 - **Tenure**
 - **Rights and responsibilities**
 - **Termination, and**
 - **Workload**

Policies of the School of Nursing are congruent with policies of Indiana State University. Table 4.1 lists policies regarding non-discrimination, faculty appointment, academic rank, grievance procedures, promotion, salary and benefits, tenure, rights and responsibilities, termination, and workload and the location of those policies in Indiana State University and School of Nursing documents.

Table 4.1 *Comparison of University and School of Nursing Policies*

Policies	Indiana State University Handbook (2001)	School of Nursing Faculty Handbook
Nondiscrimination	Equal Opportunity/Affirmative Action Employer, V-15-16	
Faculty Appointment	Appointments/Classifications, III-1	Guidelines for Hiring School of Nursing Faculty, Section IV
Academic Rank	Standards of Achievement by Rank, III-2	Guidelines for Hiring School of Nursing Faculty, Section IV
Grievance Procedures	University Faculty Grievances, II-14-16	Informal Grievance Process for Faculty, Section IV, Faculty Grievance Hearing Policies and Procedures, Section IV
Promotion	Criteria for Reappointment, Tenure, and Promotion, III-2-3; Policy for Promotion and Tenure Reviews, III-4-5	Procedure for Promotion, Section IV
Salary and Benefits	Staff Benefits, I-13; Section IV, Compensation and Benefits, IV-1-2, 4-1, 13	Guidelines for Hiring School of Nursing Faculty, Section IV
Tenure	Criteria for Reappointment, Tenure, and Promotion, III-2-3; Policy for Promotion and Tenure Reviews, III-4-5	Procedure for Retention and Tenure, Section IV
Rights and Responsibilities	Faculty Duties and Responsibilities, III-7-10	Orientation Guidelines for New Faculty, Section IV; Faculty Position Descriptions, Section I
Termination	Faculty Dismissal Proceedings, II-12-13	
Workload	Teaching Responsibilities, III-7; ISU Catalog,	Faculty Workload Guidelines, Section IV
Hiring	Hiring Procedures for Regular Faculty Appointments, III-2; http://web.indstate.edu/aaction/	Guidelines for Hiring School of Nursing Faculty, Section IV; Policy and Procedure for Hiring Full and Part Time Temporary Faculty, Section IV
Summer employment	Teaching Responsibilities, III-7	Guidelines for Appointment of Summer School Faculty, Section IV
Release Time	Teaching Responsibilities, III-7; Leaves of Absence, III-12-13; Sick Leave Policy, IV-14-16; Leaves, IV-16-17, Absences, IV-17-18	
Teaching and Advising	Teaching Responsibilities, III-7-11	

b. accessibility of nursing education policies.

The *Indiana State University Handbook* contains all faculty policies; the *School of Nursing Handbook* contains policies specific to School of Nursing faculty. All faculty members are

provided with University and School of Nursing Handbooks. Revised material is distributed as it is available.

c. rationale for policies that differ from governing organization.

Policies within the School of Nursing are consistent with the University. Because of the clinical education component in nursing courses, workload policies in the School of Nursing differ from University workload calculation methods. Table 4.2 shows workload differences between University and a School of Nursing policy that has not been approved at the University level. The School of Nursing Faculty Affairs Committee is refining a workload policy to parallel the University Faculty Workload Policy recently approved by Executive Committee of the University Faculty Senate. The University workload policy indicates that a standard faculty workload is equivalent to 12 semester credit hours of teaching in addition to service activities, advising, and curriculum development.

Class size is also a factor in workload calculation. The University does not have a policy regarding maximum class size. The University minimal requirement for class size indicated by administration is 15 students for 100-200 level undergraduate courses, 12 for 300-400 level undergraduate courses, and 8 for graduate courses. There has not been an enrollment minimum or maximum identified for distance education courses. If a course is offered with less than the minimal number of students, the course is listed as an Independent Study for the faculty member teaching the course. Independent Study hours are not calculated as part of the instructional teaching load of the faculty member's workload. This has been problematic for both students and faculty. A course may be cancelled due to low enrollment. At the time a faculty member is assigned to teach a course, it is assumed that minimal enrollment will be achieved. If minimal enrollment is not achieved, the faculty member could be assigned additional courses to ensure a minimum teaching load of 12 semester credit hours. If the course is not offered, the student is negatively impacted. If the faculty member has a teaching assignment that exceeds 12 semester

credit hours due to teaching an Independent Study, the faculty member's time for scholarly activities and service could be compromised. If nursing administration does not deploy faculty members for maximum productivity, a key performance indicator of student credit hours generated will be reduced. The balance of teaching load with optimal faculty deployment and student enrollment is an ongoing struggle.

A final factor in calculating faculty workload is clinical contact hours. The University has traditionally calculated a 2:1 ratio for determining clinical faculty teaching workload. The ratio for clinical hours to student credit hours is 3:1. As part of the proposed workload policy, faculty members have requested a 1:1 ratio. A pilot for Fall 2003, using a 1:1 ratio, was proposed for faculty members in the Baccalaureate and Higher Degree Nursing Department. Unfortunately, budgetary constraints prohibited the proposal from being implemented.

Table 4.2 *Comparison of University and School of Nursing Workload Policy*

University	School of Nursing
Normal teaching load: 12 semester credit hours of course work per semester.	Workload is based on a forty-hour (40) work week. Teaching comprises 14 hours of the total hours (Unofficial School of Nursing policy, 1994).
Calculation for clinical time is based on a 2:1 ratio (1 hour of credit for every 2 hours of contact).	

II.

FACULTY

There are qualified and credentialed faculty, appropriate to accomplish the nursing education unit purposes and strengthen its educational effectiveness.

Standard II: FACULTY

The program has qualified and credentialed faculty appropriate to accomplish its purposes and strengthen educational effectiveness.

<p>Criterion 5: Faculty members (full and part-time) are academically prepared and experientially qualified, and maintain expertise in their areas of responsibility.</p> <p>Operational Definition: A full time faculty member has a graduate degree(s) from a regionally accredited university, licensed in the State of Indiana as Registered Nurse and participates in all aspects of the faculty role—teaching, scholarship, and service. A part-time faculty member is master's prepared in their specialized field from a regionally accredited university, licensed in the State of Indiana, and participates in one or more aspects of the faculty role—teaching, scholarship, or service.</p>		<p>Expected Level of Achievement/Decision Rule for Action:</p> <p>Associate of Science, Nursing Program:</p> <ul style="list-style-type: none"> • 100% of nursing faculty have a minimum of a master's degree from a regionally accredited institution and are teaching in area of expertise. • 100% of faculty attend at least one educational offering or take one academic course per academic year. <p>Bachelor of Science and Master of Science, Nursing Programs:</p> <ul style="list-style-type: none"> • 100% of new faculty hired to teach in the BS and MS programs have a doctorate from a regionally accredited university, or be actively matriculating towards a doctorate. Those working towards their doctorates will meet the requirement of a doctorate within 5 years of date of hire. • 100% of nursing faculty have a graduate degree in nursing in their area of specialization from a regionally accredited institution and are teaching in area of expertise. • 100% of faculty attend at least one educational offering or take one academic course per academic year. <p>Outcome: Expected level of achievement not met for all programs. See Actions for Academic Preparation.</p>				
Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Academic Preparation and Experience	Vita, academic transcripts, certifications	Dean, Department chair, Search Committee	Upon hire and Annually in May	Hiring process	Search committee consistently applied standards during hiring process of new faculty candidates (2000-2003). Two faculty hired during 2001-2002 cycle are actively matriculating towards their doctorate. Two non-master's prepared adjuncts were hired Spring 2003 for clinical positions with written permission from ISBN.	Continue to Monitor EOAC recommendation that department chair make every attempt to hire MS prepared clinical instructors.
Maintenance of Faculty Expertise	Vita, Annual Faculty Activity Report	Dean, Department chair, FAC	Upon hire and Annually in May	Annual performance review	100% of faculty attend at least one continuing education program each year.	Continue to Monitor

CRITERION 5: Faculty members (full- and part-time) are academically and experientially qualified, and maintain expertise in their areas of responsibility.

EXPECTED LEVEL OF ACHIEVEMENT:

Associate of Science Nursing Program:

- 100% of nursing faculty have a minimum of a master's degree from a regionally accredited institution and are teaching in area of expertise.
- 100% of faculty attend at least one educational offering or take one academic course per academic year.

Bachelor of Science and Master of Science Nursing Programs:

- 100% of faculty hired to teach in the BS and MS programs have a doctorate from a regionally accredited university or must be actively matriculating towards a doctorate. Those working towards their doctorate must meet the requirement of a doctorate within 5 years of date of hire.
- 100% of nursing faculty have a minimum of a graduate degree in their area of specialization from a regionally accredited institution and are teaching in area of expertise.
- 100% of faculty will attend at least one educational offering or take one academic course per academic year.

Documentation confirms:

- nursing faculty are credentialed at a minimum with a master's in nursing degree.**
- (MS) nursing faculty are credentialed at a minimum with a master's in nursing degree with the majority holding doctorates from regionally accredited institutions.**

As of Spring 2003, 24 full-time and 9 part-time faculty members at the School of Nursing have a master's degree with a major in nursing. Nine full-time faculty members, including the Dean and Assistant Dean, have doctorates in nursing. There are eight faculty members who have graduate faculty status. Seven of these faculty members (87.5%) also have doctorates. Three full-time faculty are doctoral candidates and complete their dissertations within 5 years of the date of hire. Two part-time faculty members have completed graduate hours toward a master's degree with a major in nursing. Faculty members who teach in the advanced-practice nursing track are certified in their respective areas of expertise, such as Family Nurse Practitioner.

- rationale for acceptance of other than the minimum required graduate credential.**

It has been difficult to recruit faculty who have completed a master's in nursing degree to teach in the nursing program. In 2001 and 2002, the School of Nursing underwent two searches for

qualified faculty, but both searches failed to attract an adequate number of applicants with the appropriate credentials for the number of budgeted positions available. Two part-time faculty members were employed to teach the clinical component of nursing courses of the generic Baccalaureate Nursing Program during Spring 2003 and are enrolled in a graduate nursing program but have not completed a graduate degree. These part-time adjunct faculty members work under close supervision by tenured or tenure-track faculty to ensure the delivery of quality educational experiences. The lack of qualified faculty is considered to be an episodic concern. When the associate of science degree program is completely phased out by December 2004, due to the transfer of the program to the local community college, all masters and doctoral prepared associate degree nursing faculty will be deployed to the baccalaureate and higher degree program. The next wave of faculty shortage is projected to occur when faculty reach retirement eligibility. However, due to the sagging economy, faculty may choose to work longer than originally planned. Approximately 50% of the tenured faculty are eligible to retire in the next six years.

c. faculty credentials meet the requirements of the governing organization and any state agency, which has legal authority for educational programs in nursing.

All nursing faculty members meet requirements for employment delineated by Indiana State University. All nursing faculty are licensed in the state of Indiana; licenses are renewed biannually through the Health Professions Bureau. Current licensure is verified by each Department Chair and can be verified on the Indiana State Board of Nursing website at: <http://www.in.gov/hpb/>.

d. academic and experiential preparation and variety of faculty backgrounds (full-time and part-time) are appropriate for responsibilities of the nursing education unit.

School of Nursing faculty members are diverse academically and experientially qualified to maintain high standards of teaching, scholarly activity, and service to the School, the University, and the community (see Table 5.1). Full-time faculty members teach primarily in their area of expertise in the Associate, Baccalaureate, or Master's Degree programs.

The division of the Associate of Science and Baccalaureate programs caused a shift in the curriculum. Starting in 2000, not all required undergraduate courses were taught every semester. Faculty members have been assigned to teach in courses that they had not previously taught or had not taught for a number of years. In the associate degree program, one faculty member was cross trained by attending classroom lectures for the semester prior to the assignment from psychosocial nursing to the first course in adult health. She also attended the clinical agency with an experienced faculty member to become oriented to the facility. When this faculty member instructed in the course, she also had an experienced faculty member available for consultation in the classroom setting and at the clinical site. One additional associate degree faculty member with a degree as a Family Nurse Practitioner and a specialization in childbearing families was assigned to teach in the nursing assessment and fundamentals courses.

In the baccalaureate program, a faculty member who had expertise in nursing leadership was assigned to teach in the fundamentals and adult health courses. A faculty member with a specialization in psychiatric mental health nursing was assigned to teach fundamentals during the fall semester of 2001.

One hundred percent of all faculty attended at least one educational offering to maintain educational and clinical expertise. This criterion is addressed graphically in Criterion 7.

e. expertise of non-nurse faculty is appropriate to the area of their responsibility.

There is one non-nursing faculty who teaches in the School of Nursing. This faculty member is a pharmacist who teaches the pharmacology content to students enrolled in the Family Nurse Practitioner track of the Graduate Nursing Program.

f. (MS) maintenance of faculty expertise in their areas of responsibility: teaching, service, clinical practice, and/or scholarship.

As shown in Table 7.1, 100% of faculty who teach in the graduate program have maintained expertise in their areas of teaching responsibility and clinical practice. Faculty members have also maintained scholarship/research and service activities in their respective areas of expertise.

- g. (MS) direct coordination, role development, and/or clinical management of advanced practice program options is the responsibility of faculty certified in the respective area.**

One hundred percent of graduate faculty involved in direct coordination, role development, and/or clinical management of students are certified in their respective area. Table 7.1 shows certifications held by graduate faculty.

Table 5.1 Faculty Profiles, Spring 2003

Name	Date of Initial Appointment/ Current Rank/Status	Degree/Major	Institution	Teaching Experience		Teaching Responsibility
				Type of Program	Years	
Acree, Esther	August/70 Associate Professor FT-T	MSN/Pediatric Nursing/Teacher Education Specialist Degree/Primary Health Care BSN/Nursing	Indiana University	BS	30	Assessment FNP
			Indiana University	MS	3	
			Indiana State University			
Barnhart, Deb	August/77 Associate Professor FT-T	MSN/Mental Health Nursing/Clinical Specialty BSN/Nursing	Indiana University	BS	26	Fundamentals Mental Health Nursing Introduction to Nursing
			Indiana State University			
Bartnick, Deborah	January/97 Instructor FT-NT	MSN/Perinatal Nursing BSN/Nursing	Indiana University	BS	5.5	Maternity Nursing Pediatric Nursing Pharmacology RN Transition Nursing Assessment
			Purdue University	AD	8.5	
Bennett, Mary	January/89 Associate Professor FT/T	DNS/Medical Nursing MSN/Community Health/Education BSN/Nursing	Rush University	BS	15	Pediatric Nursing Medical-Surgical Nursing Research Culminating Projects/Thesis
			Indiana State University	MS	3	
			Indiana State University			
Connerton, Charlotte	August/02 Adjunct PT-NT	MSN/Community Health Nursing BSN/Nursing	Indiana State University Indiana State University	BS	1	Fundamentals Medical-Surgical Nursing
Crawford, Donna	August/88 Adjunct PT-NT	MSN/Medical-Surgical Critical Care Nursing BSN/Nursing	Indiana University	BS	12	Medical-Surgical Nursing Fundamentals
			Ball State University	AD	2	

Name	Date of Initial Appointment/ Current Rank/Status	Degree/Major	Institution	Teaching Experience		Teaching Responsibility
				Type of Program	Years	
Fine, Julie	August/95 Associate Professor FT-T	PhD	University of Texas- Austin	BS	9	Maternity Nursing LPN Transition Health Assessment Research Informatics
		FNP	Ball State University	AD	1	
		MSN/Perinatology	Indiana University	LPN	1	
		BSN/Nursing	University of Texas- Austin			
Fletcher, Suzy	January/84 Professor FT-T	BA/Anthropology	University of Texas- Austin			Issues and Trends Health Policy Fundamentals Assessment
		Post-doctoral 2 years	University of Pennsylvania	MS	19	
		DNS/Nursing Synthesis/Rehabilitation Counseling	Indiana University	BS	19	
		SCN/Nursing/Primary Health Care MSN/Neurosurgical Nursing BSN/Nursing	Vanderbilt University East Tennessee State University	AD	2	
Frank, Paula	August/94 Professor FT-T	PhD/Educational Administration	University of Utah	PhD	1	Fundamentals Research Nursing Theory Administration LPN Transition
		MN/Medical-Surgical Nursing	University of Washington	MS	16	
		BSN/Nursing	Ohio State University	BS	16	
				AD	3	
Gregory, Veda	January/80 Associate Professor FT-T	PhD/Educational Administration	Indiana University	BS	25	Community Health Nursing Assessment
		MSN/Nursing of Children/Teacher Education	Indiana University			
		Specialist Degree/Primary Health Care Post Graduate-Minor-Community Health Nursing	Indiana University			
		BSN/Nursing	Indiana University			
Hall, Lea	August/01 Adjunct PT-NT	MSN/FNP	Indiana State University	BS	2	Fundamentals Medical-Surgical Nursing Pharmacology
		BSN/Nursing	University of Alabama- Birmingham			

Name	Date of Initial Appointment/ Current Rank/Status	Degree/Major	Institution	Teaching Experience		Teaching Responsibility
				Type of Program	Years	
Hartman, Sarah	January/03 Adjunct PT-NT	MSN (in process) BSN/Nursing	Indiana University Indiana State University	BS	0.5	Medical-Surgical Nursing
Jones, Patrice	August/75 Assistant Professor FT-T	MSN/Adult Health Nursing/Teacher Education BSN/Nursing	Indiana University Indiana State University	BS AD	26 2	Fundamentals Medical-Surgical Nursing Pharmacology
Likens, Robin	August/02 Adjunct PT-NT	MSN BSN/Nursing	Indiana State University Indiana State University	BS	0.5	Fundamentals
Luegenbiehl, Debra	August/92 Professor FT-T	PhD MSN/Maternity Nursing/Education BSN/Nursing	Texas Woman's University Indiana University Texas Christian University	BS	11	Maternity Nursing Research Assessment
McKinney, Melody	January/88 Associate Professor FT-T	DNS/Nursing Synthesis/Education MS/Adult Health Nursing BSN/Nursing	Indiana University Indiana State University Indiana University	BS AD	13 2	Medical-Surgical Nursing
Miller, Marcia	August/99 Assistant Professor FT-TT	Doctoral candidate MSN/Mental Health Nursing MA/Psychology BSN/Nursing	Indiana State University St. Xavier University Ball State University Ball State University	BS AD	2 24	AD Role Socialization Fundamentals Mental Health Nursing Medical-Surgical Nursing
Mimms, Dorothy	August/97 Adjunct PT-NT	MSN/ BSN/Nursing	Indiana State University Purdue University	BS AD	4 2	Fundamentals Medical-Surgical Nursing
Mitre, Julie	January/75 Assistant Professor FT-T	MSN/Adult Health Nursing /Teacher Education BSN/Nursing	Indiana University Indiana State University	BS	23	Medical-Surgical Nursing Assessment

Name	Date of Initial Appointment/ Current Rank/Status	Degree/Major	Institution	Teaching Experience		Teaching Responsibility
				Type of Program	Years	
Nelson, Dianne	August/02 Assistant Professor FT-TT	Doctoral candidate MSN/Community Health Nursing BSN/Nursing	Rush University University of Central Arkansas University of Iowa	BS AD	10 12	Health Assessment Medical-Surgical Nursing
O'Neal, Dale Ann	August/75 Associate Professor FT-T	MSN/Community Mental Health Nursing/Clinical Specialty BSN/Nursing	Indiana University Indiana State University	BS	28	Mental Health Nursing
Pantle, Michele	August/92 Instructor FT-NT	MSN/Community Health BSN/Nursing	Indiana State University Indiana State University	BS	11	Medical-Surgical Nursing Community Nursing Assessment Fundamentals
Phillips, Ruth	January/03 Adjunct PT-NT	MSN BS/Nursing	Indiana State University Indiana State University	AD	1	Medical-Surgical Nursing
Pickrell, Kathleen	August/77 Associate Professor FT-T	MSN/Nursing of Children/Teacher Education BSN/Nursing	Indiana University Purdue University	BS AD	26.5 2	Pharmacology Issues and Trends Pediatric Nursing Cross-cultural Elective Health Assessment
Plascak, Gloria	August/76 Assistant Professor FT-T	MSN/Nursing of Children/Teacher Education BSN/Nursing	Indiana University Indiana State University	BS AD	25 2	Pediatric Nursing
Reed, Rhonda	August/91 Instructor FT-NT	MSN/Adult Health Nursing/Teacher Education BSN/Nursing	University of Evansville Indiana University	BS	9	Fundamentals
Riesenbeck, Virginia	August/01 Adjunct PT-NT	MSN/Community Health BSN/Nursing	Indiana State University Indiana State University	BS	3	Fundamentals Medical-Surgical
Robinson, Amy	January/03 Adjunct PT-NT	MSN (in process) BSN/Nursing	Indiana University Indiana State University	BS	0.5	Medical-Surgical

Name	Date of Initial Appointment/ Current Rank/Status	Degree/Major	Institution	Teaching Experience		Teaching Responsibility
				Type of Program	Years	
Sample, Marilyn	August/78 Assistant Professor FT-T	MSN/Psychiatric/Mental Health Nursing/Nursing Administration BSN/Nursing	University of Southern Mississippi University of Tennessee	BS AD	25 2	Mental Health Nursing Issues and Trends Fundamentals
Saucier, Bonnie	July/98 Professor FT-T	PhD MEd MSN BA	Texas Woman's University University of Missouri University of Missouri / Kansas City Stephen's College	MSN BSN AD	14 17 5	Dean
Sharp, Susan	August/75 Professor FT-T	EdD/Psychiatric Nursing/Professorial Role Med/Psychiatric Nursing/Nursing Education BSN/Nursing	Teacher's College, Columbia Teacher's College, Columbia Duke University	BS	27	Mental Health Nursing Fundamentals Research Issues and Trends
Smith, Stacy	August/01 Adjunct PT-NT	MSN/FNP BN/Nursing	University of South Florida University of South Florida	AD	2	Medical-Surgical Nursing
Tomey, Ann	July/91 Professor FT-T	PhD/Education and Business Administration MSN/Community Health /Psychology Nursing/Clinical Specialist BSN/Nursing/Psychology	University of Colorado University of Colorado University of Colorado	DNS MS BS	7 26 33	Nursing Administration Curriculum Teaching Introduction to Nursing Community Psychiatric Nursing
Vincent, Deb	August/92 Adjunct PT-NT	MSN/FNP BSN/Nursing	Indiana State University Indiana State University	BS AD	3 2	Medical-Surgical Nursing Fundamentals

FT=Full Time PT=Part Time T=Tenured TT=Tenure Track
NT=Non-Tenured

Criterion 6: Number and utilization of full and part-time faculty meet the needs of the nursing education unit to fulfill its purposes.		Operational Definition: Faculty assignments and Student/Faculty ratio in clinical area that meet State Board of Nursing, professional bodies such as NONPF (National Organization of Nurse Practitioner Faculty) and agency requirements and allow for safe supervision of students in clinical area and to staff classrooms with faculty qualified to teach classroom and clinical content.				
		Expected Level of Achievement/Decision Rule for Action: <ul style="list-style-type: none"> • 100% of faculty lines filled with full or part-time appointments • Assignments are based on education and clinical expertise • 100% pre-licensure clinical agency groups have no more than 10 students under direct supervision per faculty member. • Nurse Practitioner Faculty will be assigned to groups of 6 or fewer clinical students. • 100% of classrooms and clinical groups will have faculty qualified to teach in the specialty area. 				
		Outcome: Expected level of achievement met for all programs				
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Faculty Workload Assignments	Faculty Workload reports Faculty Assignments	Department Chair	Annually In May	Report of Faculty Lines, Faculty/Student Clinical Ratio, Faculty Contact Hours, SCH documents	<p>Awarded 3 faculty lines for 2002-2003 search cycle. One candidate has accepted position, two more candidates are in process.</p> <p>100% of faculty are teaching in their area of expertise or have been cross-trained to teach in an additional area.</p> <p>100% pre-licensure clinical agency groups have no more than 10 students under direct supervision per faculty member.</p> <p>Nurse Practitioner Faculty are assigned to groups of 6 or fewer clinical students.</p>	<p>Continue to Monitor</p> <p>Continue to Monitor</p> <p>Continue to Monitor</p>

CRITERION 6: Number and utilization of full- and part-time faculty meet the needs of the nursing education unit to fulfill its purposes.

EXPECTED LEVEL OF ACHIEVEMENT:

- 100% of faculty lines are filled with full- or part-time appointments;
- assignments are based on education and clinical expertise;
- 100% pre-licensure clinical agency groups have no more than 10 students under direct supervision per faculty member;
- Nurse Practitioner students will be assigned with a ratio of no more than 6 students per faculty; and
- 100% of classrooms and clinical groups will have faculty qualified to teach in the specialty area.

Documentation confirms:

- a. **faculty/student ratios in the classroom and supervised clinical practice are sufficient to insure adequate teaching, supervision, and evaluation.**

Nursing courses are developed and taught by full-time, tenure/tenure-track faculty or are taught by full-time, temporary faculty under the supervision of full-time faculty.

Full-time, tenure/tenure-track faculty members assume the major responsibility for classroom instruction including didactic teaching, testing, grading, counseling, and evaluating students.

Tenure/tenure-track and temporary faculty are also responsible for clinical supervision in laboratory and on-site clinical facilities. Enrollments in nursing courses may fluctuate from original cohort numbers for various reasons including loss of students due to dropping a course, withdrawal, failure, transferring to other programs or majors, or interruption of normal progression, and entry of students through transfer from other programs.

Faculty members that teach clinicals may be responsible for 1 to 4 clinical sections per semester.

The faculty to student ratio, in undergraduate clinical practice settings in which there is direct supervision, is no more than 1:10. The faculty to student ratio of graduate students in clinical settings does not exceed 1:6. All programs are in accordance with Indiana regulation governing faculty to student ratios in clinical settings. Tables 6.1 through 6.6 indicate faculty-student ratios in supervised clinical practice and those settings in which preceptors are used. In arranged

campus labs, student numbers are higher than in supervised clinical settings. In groups where students numbers are higher than 10, some students were assigned in clinical practice settings in the community where they had observational experiences on a rotational basis. At no time has the faculty-student ratio in a supervised direct client care setting been greater than 1:10. In clinical practice settings using preceptors, the preceptor-student ratio is 1:1.

- b. utilization of full- and part-time faculty is consistent with the mission/philosophy of the governing institution and purposes of the nursing education unit (teaching, scholarship, service, practice, administration).**

Faculty appointments are congruent with University policies as stated in the *Indiana State University Handbook*. The School of Nursing was allotted 3 faculty positions for which to search for the 2003-2004 academic year. Two candidates accepted and one candidate is in process. There are 18 tenured, full-time faculty members; three full-time faculty members on a tenure-track line have nine-month appointments. Full-time, temporary faculty members are hired annually for a nine-month appointment. Part-time faculty members are hired each semester. Part-time faculty are employed to fulfill the teaching responsibilities of faculty who are granted leaves, have funded grants, and have or are assigned special projects for the School or University.

- c. number and type of faculty are adequate to carry out the purposes and objectives of the program.**

Faculty numbers are sufficient to fulfill the educational purposes of the nursing programs and to maintain faculty-student ratios for undergraduates of no more than 1:10 in clinical practice settings. Some units within clinical agencies limit numbers of students that may be assigned to the area. In those situations, student numbers in the clinical practice setting may be less than 1:10; however, the 1:10 ratio meets the needs of faculty, undergraduate students, and most clinical units. Preceptors in the undergraduate program work closely with the full-time faculty coordinator of the clinical course, and must hold the minimum of a baccalaureate in nursing.

In the graduate nursing program, a 1:6 ratio or lower is maintained. Graduate students are preceptored by an experienced master's prepared advanced practice nurse on a 1:1 ratio. Distance graduate students are preceptored locally by master's prepared nurses, or by Indiana State University nursing faculty who travel to the student's location on a 1:1 ratio.

Table 6.1 *Faculty-Student Ratios, Modified Associate Degree Program, 2002-2003*

Spring 2002-Modified Associate Degree Program								
	Lecture Section				Clinical Sections			
	001	002	003	004	001	002	003	004
N151	1:42							
N152	1:10	1:10	1:7	1:7	1:10	1:10	1:7	1:7
N153	1:32				++1:8	++1:8	++1:8	++1:8
N154	1:33				++1:8	++1:8	++1:8	++1:9
Fall 2002-Modified Associate Degree Program								
	Lecture Section				Clinical Sections			
	001	002	003	004	001	002	003	004
N151	1:58							
N160	1:27				1:10	1:10	1:7	
N162	1:27				1:10	1:10	1:7	
N164	1:26							
Spring 2003-Modified Associate Degree Program								
	Lecture Section				Clinical Sections			
	001	002	003	004	001	002	003	004
N151	1:5							
N152	1:42							
N153	1:43				++1:21	++1:22		
N154	1:46				++1:21	++1:22		
N252	1:17				1:9	1:8		
N254	1:19							
N256	1:18				1:9	1:9		

*Direct clinical supervision of client care

**Indirect supervision of student observation

++Arranged campus lab

Table 6.2 Faculty-Student Ratios, Associate Degree Program, 2002-2003

Spring 2002-Associate Degree Program							
	Lecture Section	Clinical Sections					
		001	002	003	004	005	006
N150	1:1						
N115	1:34	1:9	1:6	1:10	1:9		
N205	1:21	1:10		1:11 *1:9 **1:2			
N215	1:30	1:10		1:10	1:10		
N225	1:36	1:9	1:8	1:10	1:9		
N235	1:36	1:9	1:9	1:9			1:9
N240	1:37						
Summer 2002-Associate Degree Program							
	Lecture Section	Clinical Sections					
	001	001	002	003	004		
N115	1:3	1:3					
N205	1:9	1:9					
N215	1:19	1:6	1:7	1:6			
N225	1:20	1:10	1:10				
N235	1:20	1:10	1:10				
N240	1:16						
Fall 2002-Associate Degree Program							
	Lecture Section	Clinical Sections					
		001	002	003	004	005	006
N150	1:6						
N205	1:21			1:8	1:7	1:6	
N225	1:21		1:5		1:8	1:8	
N235	1:45	1:7	1:8	1:6	1:9	1:9	1:6
N240	1:19						

*Direct clinical supervision of client care

**Indirect supervision of student observation

Table 6.3 Faculty-Student Ratio, Modified Baccalaureate Program and Tracks, 2002-2003

Spring 2002-Modified Baccalaureate Degree Program												
	Lecture Sections				Clinical Sections							
	001	002	003	004	001	002	003	004	005	006		
N104	1:19	1:11										
N106	1:44	1:52		1:42								
N224	1:36				*1:10	*1:8		*1:9		*1:9		
N226	1:36					*1:9	*1:9	*1:9	*1:9			
N228	1:36				*1:10	*1:10	*1:7	*1:9				
Summer 2002-Modified Baccalaureate Degree Program												
	Lecture Section	Clinical Section										
	001	001										
N226	1:8	*1:8										
Fall 2002-Modified Baccalaureate Degree Program												
	Lecture Section	Clinical Sections										
	001	001	002	003	004	005	006	007	008	009		
N200	1:89	1:10	1:10	1:10	1:10	1:9	1:10	1:10	1:10	1:10		
N204	1:83	1:10	1:10	1:7	1:10	1:10	1:10	1:9	1:7	1:10		
N208	1:4											
N328	1:29	1:4	1:10	1:5	1:10							
N330	1:30		1:6	1:10	1:10	1:4						
N318	1:30											
Spring 2003—Modified Baccalaureate Degree Program												
	Lecture Sections			Clinical Sections								
	001	002	003	001	002	003	004	005	006	007	008	009
N104	1:24	1:25										
N106	1:53	1:53	1:47									
N224	1:70			*1:19	*1:10	*1:10	*1:10	*1:10	*1:10	*1:6	*1:5	
N226	1:56			*1:9	*1:5	*1:7	*1:9	*1:7	*1:7	*1:6	*1:6	
N228	1:70			*1:8	*1:10	*1:8	*1:7	*1:9	*1:4	*1:10	*1:9	*1:5
N324	1:24			*1:8	*1:8	*1:8						

*Direct Supervision

(P) Preceptor Supervision

Table 6.4 Faculty-Student Ratio, Baccalaureate Program and Tracks, 2002-2003

Spring 2002-Baccalaureate Track for Registered Nurses						
	Lecture Section			Clinical Sections		
	001	301	401	001	301	401
N300		1:7				
N304		1:4			(P) 4:4	
N308		1:1				
N318		1:7				
N322		1:4				
N322			1:2			
N450	1:3	1:2		(P) 3:3	(P) 2:2	
N470	1:7	1:4		(P) 7:7		(P) 4:4
Fall 2002-Baccalaureate Track for Registered Nurses						
	Lecture Sections			Clinical Sections		
	001	301	401	001	301	401
N300		1:5				
N304		1:4	1:4		(P) 4:4	(P) 4:4
N318		1:3				
N322		1:2	1:2			
N430		1:1				
N450		1:4				
N470		1:5				
Spring 2003—Baccalaureate Track for Registered Nurses						
	Lecture Sections			Clinical Sections		
	001	301	401	001	301	
N300		1:2				
N304		1:3			(P)1:3	
N308		1:1				
N318		1:6				
N322		1:4				
N322		1:14	1:13			
N450	1:1	1:2		(P) 1:1	(P) 1:2	
N470		1:1				

*Direct Supervision

(P) Preceptor Supervision

Table 6.5 Faculty-Student Ratio, Baccalaureate Program and Tracks, 2002-2003

Spring 2002-Baccalaureate Program					
	Lecture Sections				Clinical Sections
	001	301	401	001	
N305	1:7			1:7	
N320				1:10	
N335	1:10			(P) 10:10	
N345	1:12			(P) 12:12	
N400I (IS)	1:14				
N425	1:10			(P) 10:10	
N440	1:10				
N445	1:11			(P) 11:11	
N455	1:16			(P) 16:16	
Summer 2002—Baccalaureate Program					
	Lecture Section				
N400I (IS)	1:3				
Fall 2002-Baccalaureate Program					
	Lecture Sections				Clinical Section
	001	301	401	001	
N305	1:2			1:2	
N320			1:2		
N335	1:7			1:7	
N345	1:8			1:8	
N425	1:13			(P) 13:13	
N440	1:9				
N445	1:12			(P) 12:12	
N455	1:6			1:6	
Spring 2003—Baccalaureate Program					
	Lecture Sections				Clinical Sections
	001	003	004	401	001
N335	1:3				*1:3
N345	1:2				**1:2
N400I (IS)	1:5				
N425	1:7				(P) 7:7
N440	1:6				
N445	1:6				(P) 6:6
N455	1:16				(P) 16:16

*Direct Supervision

** Indirect Supervision

(P) Preceptor Supervision

Table 6.6 Faculty-Student Ratio, Masters Program, 2002-2003

Spring 2002-Masters Program						
	Lecture Section			Clinical Sections		
	001	301	401	001	301	401
N601			1:4			
N605		1:1	1:2			
N633	1:9					
N664	2:3			(P) 2:3		
Summer 2002-Masters Program						
N664	2:3			(P) 2:3		
Fall 2002- Masters Program						
	Lecture Section			Clinical Sections		
	001	301	401	001	301	401
N601		1:2				
N605		1:3				
N621			1:1			(P) 1:1
N624	1:12			(P) 12:12		
N635	1:11					
N651	1:8					
N670				(P) 1:1		
N675	1:3					
Spring 2003—Masters Program						
	Lecture Sections			Clinical Section		
	001	301	401	001		
N601			1:9			
N633	1:8					
N664	1:13			(P) 13:13		

*Direct Supervision

(P) Preceptor Supervision

<p>Criterion 7: Faculty performance is periodically evaluated to assure ongoing development and competence.</p>		<p>Operational Definition: Annual performance review in accordance with University and School of Nursing policies</p> <p>Expected Level of Achievement/Decision Rule for Action: 100% of faculty will submit faculty activity reports and requirement materials for the annual performance review. 100% of tenure track/non-tenured faculty will have performance reviews in accordance with University and School Promotion & Tenure policies. 100% of faculty are rated as meeting or exceeding expectations on their annual performance evaluations.</p> <p>Outcome: Expected level of achievement met for all programs</p>				
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Faculty Performance Reviews	Faculty personnel files including Faculty Activity Reports, Evaluation for P & T FAC Minutes	Dean, Department Chair, FAC	Annually in May	Review of annual faculty activity reports and other materials such as student evaluations, continuing education certificates, and evidence of scholarship	100% of faculty are rated as meeting or exceeding expectations on their annual performance evaluations. 100% of faculty (with the exception of one faculty on Leave of Absence) submitted faculty activity reports for the 2002-2003 timeframe.	Continue to Monitor Continue to Monitor

CRITERION 7: Faculty performance is periodically evaluated to assure ongoing development and competence.

EXPECTED LEVEL OF ACHIEVEMENT: 100% of faculty will submit faculty activity reports and requirement materials for the annual performance review. 100% of tenure track/non-tenured faculty will have performance reviews in accordance with University and School Promotion & Tenure policies. 100% of faculty are rated as meeting or exceeding expectations on their annual performance evaluations

Documentation confirms:

a. process for faculty evaluation.

School of Nursing faculty members are evaluated annually. The evaluation process is in accordance with criteria established by the University and is stated in Section IV, in the *School of Nursing Handbook*. Performance reviews are completed yearly and on a two-year cycle for salary adjustments. Faculty members complete the Faculty Activity Report and submit a self-evaluation and supplemental materials addressing each of three areas: teaching, research, scholarship, creative activity, and service and the level achieved. A reflective statement, specifically outlining the contributions made in each area to further the department/school mission and goals during the academic year, is also included. Members of Faculty Affairs Committee and Department Chairs review faculty members' materials in relation to the established criteria. The Faculty Affairs Committee makes recommendations to the Department Chairs; Department Chairs submit reviews to the Dean. The Dean makes final recommendations to the Provost/Vice President for Academic Affairs for salary adjustments.

Another component of the process for faculty evaluation is student evaluation of classroom and clinical performance, using the form Student Instructional Report II (SIR II), along with the supplemental items for evaluation of clinical teaching. These evaluations are completed each semester and the results are compiled and reported by the University Testing. Results of the data

compiled from SIR II evaluations are given to each faculty member. Results of Department, School, and University totals are reported to each department member and stored in the Department Offices.

The system for faculty rank at Indiana State University begins at Assistant Professor and progresses to Associate Professor and Professor. The tenure process is outlined in the *School of Nursing Handbook* in Section 4. There is a formative review for tenure and promotion that occurs no later than the 3rd year of 5 years. This review is conducted by Department Chairs and Faculty Affairs Committee. In order to be tenured as a faculty member, one must meet the criteria to be promoted to the rank of Associate Professor. Information pertaining to academic rank, reappointment, tenure, and promotion is detailed in the *Indiana State University Handbook*, Section III, pages III-2 to III-6.

Faculty members applying for reappointment, promotion, and/or tenure submit materials to the Department Chair for review. The Department Chair reviews professional activities in teaching, research, scholarship, creative activity, and service and any additional materials that may have been requested by the Department Chair or Faculty Affairs Committee. The Department Chair makes a recommendation and forwards the recommendation to the Faculty Affairs Committee. Following a review of candidate's materials, Faculty Affairs Committee members make recommendations and submit a report of the review and action of the Committee to the Dean. The Dean reviews the documentation and makes recommendations to the Provost. The Provost reviews recommendations from the department level and the school level as well as the Dean's recommendations and makes recommendations for promotion and tenure to the President. This process is consistent for all faculty members.

b. evaluation of faculty includes areas such as: teaching, scholarship, service, and practice.

The annual faculty evaluation performance review process addresses teaching effectiveness, scholarship activities, professional development, and service to the School of Nursing, the University, the community, and the nursing profession. Faculty Activity Reports, submitted for annual review, are maintained in faculty folders in the Department Office.

Part-time faculty members are evaluated each semester. The evaluation process of part-time faculty has been reviewed and revised Spring 2003 by the Department Chairpersons and faculty. This improvement was initiated by data reviewed from the systemic program evaluation.

Several faculty members maintain a clinical practice in their areas of expertise that helps provide continuing professional competence. All faculty members are members of professional organizations, such as American Academy of Nursing, Indiana State Nurses Association, National League for Nursing, Indiana League of Nursing, Association of Women's Health Obstetric and Neonatal Nursing, Society of Advance Practice Nurses, Indiana Organization of Nurse Executives, and Oncology Nursing Society. Tables 7.1 and 7.2 show activities that faculty members participated in to maintain expertise through scholarship activities, certification, and professional organization membership.

Table 7.1 *Faculty Activities to Maintain Expertise
Tenure/Tenure-Track Faculty Members*

Name	Certification	Activities to Maintain Expertise
Acree, Esther	ANCC Certified Family Nursing Practitioner Prescriptive Authority	2003, Forces of Change in Nurse Practitioner Education 2003, Nursing Practitioner Faculty Advocate/Ambassador Network Meeting 2003, Bridging Cultures and Enhancing Care 2003, Pharmacology Update 2003, ISNA Legislative Conference 2002, Treatment Options for Diabetic Patients 2002, Eradication of Helicobacter pylori 2002, Pharmacological Treatments for the Patient with Influenza 2002, Irritable Bowel Syndrome 2002, Nursing Workplace Advocacy 2002, Community Acquired Pneumonia 2002, CAPNI Fall Conference 2002, Current Pharmacological Treatments for Insomnia 2002, Assessment and Treatment of Skin Disorders 2002, SSRIs-Are we prepared for the challenge? 2002, Allergy Management-Nasal Corticosteroids? 2002, Depression, OCD, Mood, Panic and Personality Disorders 2002, Neuropathic Pain Management 2002, Early Diagnosis and Treatment of Osteoporosis 2002, Shaping Paradigms in NP Education 2002, Onychomycosis and Psychosis 2002, Acute Stroke 2002, Antibiotic Treatment of Respiratory Infections 2002, Managing Hyperlipidemia 2001, Pharmacology Update 2001, National Primary Care Conference 2001, Treating the Dual Components of Asthma 2001, Treatment of the Acute Inflammatory Process 2001, Leading the Way to Safer Workplaces for Nurses 2001, Allergies: Diagnosis and Effective Treatment 2001, ISNA Legislative Conference 2001, Family Nurse Practitioner Certification Review Course

Name	Certification	Activities to Maintain Expertise
Barnhart, Deb Sigma Theta Tau, International Indiana State Nurses Association	CPR	2002, Pain: Assessment and Management 2002, IONE 2002, Indiana Rural Health Conference 2002, Anxiety and Cognitive Behavior 2001, WinterFest 2001, Community-Campus Partnerships for Health 2001, Indiana Rural Health Association Annual Conference 2001, We Band of Angels 2000, Faculty Learning Community 2000, Assessment Conference 2000, Chicken Soup for the Soul 2000, WinterFest 1999, Indiana Rural Health Conference 1999, Teaching Portfolios 1999, Effective Methods in the Classroom 1999, Classroom Assessment Techniques 1999, Course Transformation Academy
Bartnick, Deb Sigma Theta Tau, International AWHONN	CPR	2003, Perinatal Outcomes 2001, 13 th Annual Nursing Research Conference 2000, Conference of Higher Education 1999, Excel Workshop
Bennett, Mary	Trauma Nursing Core Course (TNCC), Emergency Nurses Association	2003, Sigma Theta Tau Annual Research Conference 2003, Indiana Rural Health Public Policy Forum 2003, Winterfest Teaching Conference 2002, PsychoNeuroImmunology Research, Stress and Health Care Workers 2002, Association for Applied and Therapeutic Humor Research Conference 2002, Finding Information in an Access Database 2002, Chronic Disease Management and Patient Outcomes 2002, Understanding the ISU Web Style Guide 2001, Sigma Theta Tau International Scientific Sessions 2001, Midwest Nursing Research Society 25 th Annual Research Conference 2001, CompuMaster: Access Database Development and Administration 2001, Indiana Network for Women Leaders Annual Conference: Advocacy, Activism, and Public Policy 2001, Alternate Visions: Prospects for the Bricks-and-Mortar Institution in a Virtual Age 2001, Excel Workshop: working with large spreadsheets 2000, 12th Annual Sigma Theta Tau Research Day

Name	Certification	Activities to Maintain Expertise
		2000, UAB Summer Research Institute: Physiological Workshops 2000, PsychoNeuroImmunology Research Society Int'l Annual Meeting 2000, Midwest Nursing Research Society 24th Annual Research Conference 2000, National League for Nursing Education Summit 2000 2000, CTA Update ISU Center for teaching and learning 2000, Partner to Partner ISU, Ivy Tech, Vincennes University 2000, Winterfest 2000: Teaching Conference 2000, CompuMaster Conference on Web Site Development and Design 2000, Indiana Network for Women Leaders Annual 2000, NIH Regional Seminar: Program Funding and Grants Administration 2000, Carrying It On: Mentoring Multiple Roles and Expanding Networks 2000, Soaring to New Horizons in Health Care 2000, Consortium for Assessment & Planning Support (CAPS) 1999, 11th Annual Sigma Theta Tau Nursing Research Conference 1999, International Society for Humor Studies (ISHS) Humor Conference 1999, Winterfest '99: Teaching Conference 1999, Course Info 2.0 Update 1999, Indiana State Second Annual Assessment Conference 1999, Indiana State University Conference for External Stakeholders
Fine, Julia Sigma Theta Tau, International Society of Advance Practice Nurses AWHONN National League for Nursing	FNP	2003, Perinatal Update 2003, Pharmacology Update 2003, Primary Medicine Conference 2003, Acute Migraine Pain Management 2003, Management of Bacterial Resistance 2002, Managing Migraine and Depression 2002, Women and Depression 2002, Completion of FNP courses 2002, Postpartum Mood Disorders 2002, Statin Therapy: Coronary Heart Disease 2002, Treating Overactive Bladder 2002, Current Clinical Issues in Primary Care 2002, Diagnosis and Treatment of Osteoporosis for Primary Care Physicians 2002, Diagnosis and Treatment of Patients with Emotional and Physical Symptoms of Depression 2002, Role of Primary Care Physician in Evaluating and Managing Overactive Bladder 2001, Pathophysiology for the Advanced Practice Nurse 2001, Osteoporosis

Name	Certification	Activities to Maintain Expertise
		2001, Treating the Dual Components of Asthma 2001, New Treatments in Alzheimer's Disease 2000, 12 th Annual Sigma Theta Tau Research Day 2000, Cooperative Learning: Lilly Project for Transforming the First Year Experience 2000, Pharmacology for the Advanced Practice Nurse 2000, Faculty Learning Community 2000, Challenges for the Millennium 1999, Innovations in Practice, Avenues to Nursing Knowledge for the 21 st Century 1999, Moving Forward Through Mentorship and Collaboration 1999, Evolving Professionally: High Tech-High Touch 1999, Academic and Institutional Assessment 1999, Career Gatekeepers Workshop 1999, Student Learning in an Information Age 1999, Sigma Theta Tau, Regional Conference 1999, Demystifying Managed Care 1999, Adolescent Health Care: Responding to the Needs of Youth
Fletcher, Suzy	ELNEC	2003, Indiana Rural Health Conference 2003, National Learning Communities Conference 2003, Video Instructional Design 2003, Freshman Reading Program Initiative 2003, Nursing and Health Care in Finland 2003, Partners of the Americas-Indiana Conference 2003, Lilly Project Teaching Initiatives and Workshops 2002, ELNEC Certification Course 2002, Wit 2002, Freshman Program Initiative 2002, Health Care in Brazil 2002, Indiana Rural Health Conference 2002, Course Transformation Academy 2002, Pain: Assessment and Management 2002, Partners of the Americas-Indiana Conference 2002, Lilly Project Teaching Initiatives and Workshops 2002, Relationship-centered Care 2001, We Band of Angels 2001, Freshman Reading Program Initiative 2001, Indiana Rural Health Conference

Name	Certification	Activities to Maintain Expertise
		2001, Partners of the Americas-Indiana Conference 2001, Lilly Project Teaching Initiatives and Workshops 2001, Winterfest
Frank, Paula		2002, Postpartum Depression 2002, Wound Care Management 2002, Pain Management 2002, NLN Annual Faculty Summit 2001, Eighth Nursing Administration Research Conference 2001, International Council of Nurses 2001, Sigma Theta Tau International Research Conference 2001, NLNAC Site Visitors Workshop 2000, Assessment Workshop 2000, Nurse Educator Conference 2000, Indiana League for Nursing 2000, ANA Biennial Convention 2000, Outcomes Research 1999, Nursing Administration Research Conference 1999, IPSE Workshop 1999, Center for Teaching Learning - Lilly Workshop 1999, Assessment as Learning 1999, 2001, NLN Annual Faculty Summit 1999, 2000, 2001, Legal Issues in Health Care 1999, Winterfest 1999, Sigma Theta Tau Regional Assembly 1999, NLN Biennial Convention 1999, 2001, Midwest Nursing Research Society 1999, 2001, Lambda Sigma Chapter Sigma Theta Research Day
Gregory, Veda Sigma Theta Tau, International	FNP CPR	2003, ISNA, Legislative Conference 2003, Annual Conference for Nursing Practitioners 2003, Pharmacology Update 2002, IPHA Legislative Workshop 2002, Pain: Assessment and Use of Analgesics 2002, Coalition of Advanced Practice Nurses of Indiana 2002, Magnet Nursing Service Workshop 2002, Nursing Workplace Issues 2001, National Primary Health Care Conference

Name	Certification	Activities to Maintain Expertise
		2001, Rural Health Conference 2001, Treatment of Common Skin Infections 2001, Pharmacology Update for Advanced Practice Nurses 2001, Development of Healthy Conscience in Today's Kids 2001, Shaping Community Health Infrastructure 2001, Role of Cox2 Specific Inhibitors in Arthritis Patients 2001, Treatment of Acute Inflammatory Response 2000, Overview of Outpatient Dialysis 2000, Nurses Keeping the Care in Health Care 2000, Continuity of Care Conference 2000, Indiana Public Health Conference 1999, Nursing Practitioner Simulations in Infection Management 1999, Confronting Change with Courage and Competency 1999, Chicago National Primary Care Conference 1999, Rural Health into the 21 st Century 1999, Adolescent Health Care 1999, Emerging Pathogens and Appropriate Antibiotic Usage
Jones, Patrice Sigma Theta Tau, International Counselor	CPR	2003, Sigma Theta Tau Research Conference 2003, Wound Care 2003, Virtual Instructional Designer 2002, Pain: Assessment and the Use of Analgesics 2001, 13 th Annual Sigma Theta Tau Research Day 2000, Linking Nursing Service and Practice 1999, Moving Forward Through Mentorship and Collaboration 1999, Course Transformation Academy
Luegenbiehl, Debra Sigma Theta Tau, International	CPR	1999-2003, CME Conferences, Advanced Practice Nursing 1999-2003, SOAPN Conferences, Advanced Practice Nursing 2001, AORN: Make Your Vote Count 2001, Graduate Pharmacology 2000, Japan Seminar 2000, Nurse Practitioner Associates, Primary Care Conference 2000, A Woman's Journey: Hormones Throughout the Life Cycle 1999, Nursing Research: Application to Practice 1999, 2 nd Annual Assessment Conference 1999, Career Gate Keepers Workshop
McKinney, Melody	CPR	2003, Caregiver Stress

Name	Certification	Activities to Maintain Expertise
Sigma Theta Tau, International Midwest Nursing Research Society National League for Nursing Oncology Nursing Society		2003, Cardiology Update 2003, Biologic Treatment for Colorectal Cancer 2002, Issues in Oncology Care 2002, Faculty Fall Retreat, Updates 2002, Course Transformation Academy 2002, MNRS Annual Research Conference 2002, Pain: Assessment and Use of Analgesics 2001, Understanding the University Grievance Process and Procedures 2001, Critical Thinking and Test Construction 2001, Curriculum Development and Program Evaluation/Outcomes Assessment 2001, MNRS Annual Research Conference 2001, Test Construction Workshop for NCLEX 2000, Sigma Theta Tau, Annual Research Conference 2000, Faculty Fall Retreat, Updates 2000, Creating Web Pages with Netscape 2000, MNRS Annual Research Conference 1999, Fall Faculty Retreat, Updates 1999, Sigma Theta Tau, Annual Research Conference 1999, Web Publishing with Netscape 1999, SPSS Training and Documentation Workshop 1999, ISU Assessment Conference 1999, The Teaching Portfolio 1999, Evaluating and Grading Students 1999, Effective Classroom Methods
Miller, Marcia Sigma Theta Tau, International National League for Nursing	CPR	2002, Knowing How the Law Impacts Nurses 2002, Chronic Disease Management 2002, NLNAC Self Study Forum 2001, Women in Higher Education 2001, Strategic Planning and Assessment 2001, Test Construction Workshop for NCLEX 2001, Building Learning Communities 2000, Brain and Heart=Successful Training 2000, How Cognitive Psychology Can Enhance Your Student's Learning 2000, Linking Nursing Science and Practice 2000, Ten Levers for Higher Learning 2000, Fostering Critical Thinking

Name	Certification	Activities to Maintain Expertise
		2000, Consortium for Assessment and Planning 2000, Course Transformation Academy
Mitre, Julie	Certification in Emergency Nursing (CEN) Advanced Cardiac Life Support (ACLS) Trauma Nurse Care Provider (TNCC) Emergency Nursing Pediatrics Provider (ENPC)	2003, Critical Care Update 2002, Test Item Writer, NCLEX 2001, Trauma Nurse Core Course 2001, Advanced Cardiac Life Support Recertification 2001, Emergency Nurse Pediatric Course 1999, Test Question Item Writer, Commission on Graduates of Foreign Nursing Schools 1999, Emergency Nursing Recertification 1999, Course Transformation Academy 1999, Critical Care Update
Nelson, Dianne Midwest Nursing Research Society	CPR	1999-2003, Courses for DNSc at Rush University 2003, MNRS Annual Research Conference 2003, Wound Care 2003 2002, Illinois Online Network Faculty Summer Institute 2002, Patricia Benner, Clinical Wisdom and Clinical Judgment 2002, The Research Trajectory of a Nurse Researcher 2002, Three Decades of Evaluating the Effectiveness of Cardiac Rehab 2002, Nursing Staffing and Hospital Quality 2002, Caffeine, Stress, and Hypertension in Women 2001, Research presentation, Dr. Carol Loveland-Cherry 2000, Research presentation, Dr. Sally Thorne 2000, Research presentation, Dr. Mary Nahler 2000, Research presentation, Dr. Judy McCann 2000, Research presentation, Dr. JoEllen Wilbur 2000, Research presentation, Dr. Geraldine Padilla 1999, Nursing Assessment of the Pediatric Client and the Adult Client
O'Neal Dale Ann	CPR	2002, Kids 2000 2002, Addictions 2002, Distance Education 2002, Medical Smorgasbord 2001, Medical Smorgasbord

Name	Certification	Activities to Maintain Expertise
		2001, Meds Test Construction Workshop for Nurse Educators 2000, Nursing and Health Profession Education 2000, Putting Research into Practice 2000, Kids Without Conscience 2000, When Grief is Complicated 2000, Degree Link Conference 1999, Course Transformation Academy 1999, Critical Incident Stress Management 1999, Nutrition Workshop; 1999, Assessment Conference 1999, School Violence
Pantle, Michele Sigma Theta Tau, International National League for Nursing	CPR ACLS	2003, Care of the Person with Alzheimer's Disease 2003, Perinatal Outcomes 2003, Blood Borne Pathogen Update 2002, Women and Heart Disease 2001, Critical Thinking and Test Construction 2001, End of Life Nursing Consortium (ELNEC) 2001, Genetics: Ethical Issues and Moral Responsibilities 2001, Creative Teaching for Nursing Educators 2000, National Institute of Health Stroke Guide 2000, Advances in Cardiology 2000, Creative Teaching for Nurse Educators 1999, Women and Heart Disease 1999, Course Transformation Academy 1999, Advances in Cardiology 1999, Creative Teaching for Nurse Educators
Pickrell, Kathleen Sigma Theta Tau, International Indiana State Nurses Association National League for Nursing Indiana League for Nursing	CPR	2003, The Process of Waiting 2002, Learning-centered Reform Movement 2002, Workplace Advocacy Issues 2002, Blood Borne Pathogens Update 2002, ISNA Leadership Workshop 2002, Pain: Assessment and the Use of Analgesics 2002, Assessment Strategies for Nursing Educators 2002, Pharmacologic Treatment of Otitis Media 2002, Wilderness Medicine 2001, Understanding the University Grievance Process and Procedures

Name	Certification	Activities to Maintain Expertise
		2001, Chairing the Academic Department 2001, Critical Thinking and Test Construction 2001, Genetics: Ethical Issues/Moral Responsibilities 2001, Assessing Program Outcomes 2001, We Band of Angels 2001, Meds Test Construction Workshop for Nurse Educators 2000, Health Care of Children in Finland 2000, Nurses-keeping the Care in Health Care 2000, Faculty-Student-Professional Relationships 2000, Web Site Development and Design 1999, Adult Morbidity and Mortality 1999, Genes R Us
Plascak, Gloria Sigma Theta Tau, International Indiana State Nurses Association National League for Nursing	Certified Pediatric Nurse CPR	2003, Progressive Pediatrics Conference 2003, Reshaping the Future of Overweight Kids 2002, Pediatric Environmental Health Issues 2002, Workplace Advocacy Issues 2002, Bloodborne Pathogens Update 2002, ISNA Leadership Workshop 2002, NLNAC Self Study Forum 2002, Pain: Assessment and the Use of Analgesics 2001, Pharmacology Management for Nurses 2001, The Cobra Event: A Case Study in Bioterrorism 2001, Knowing How the Law Impacts Nurses 2001, We Band of Angels 2001, PowerPoint Training 2001, Groupwise Training 2001, Meds Test Construction Workshop for Nurse Educators 2001, Suicidal Kids 2001, Genetics: Ethical Issues/Moral Responsibilities 2001, Research as Service in Service Learning 2001, Promoting Resiliency 2001, Supporting and Facilitating the Development of a Health Conscience in Today's Kids 2001, Helping Children Grieve 2001, Herbal Medications 2000, Banner Web Training Update 2000, FERPA Review

Name	Certification	Activities to Maintain Expertise
		2000, Health Care of Children in Finland 2000, The Genetic Revolution 2000, Menopause Explosion: Facts and Fallacies 2000, Advancing the Baccalaureate Nursing Curriculum 2000, The Value of the Professional Organization 2000, Pediatric Diabetes: To Insulin and Beyond 2000, Care of the Pediatric Trauma Patient 2000, General Education 2000, ISU 1999, Spreading the Word: Community Dialogue about Children's Health 1999, Genes R Us 1999, Caring for Kids in the New Millennium 1999, Adolescent Health Care: Responding to the Needs of Youth
Reed, Rhonda Sigma Theta Tau Association of Rehabilitation Nurses	CRRN	2002, Free Water Protocol 2001, Perceived vs. Actual Accessibility of Healthcare Facilities 2001, Roles of Pastor in Interdisciplinary Rehabilitation Team 2001, Encouraging Self-care of Clients in Short-Term Rehabilitation Unit 2001, Experiences of Living with Sibling with Traumatic Brain Injury 2001, Effects of Structured Education on Stroke Survivors 2001, Keys to Bowel Success 2001, Experience of Primary Support Persons of Stroke Survivors 2001, Self-Help Groups as Support Strategy in Nursing 2001, Social Support for Women with Chronic Illness 2001, Assessing Abuse of Disabled Older Adults 2001, Journal Writing as Complementary Therapy for Depression 2001, Update in Diabetes Management 2001, Cost Effective Behavioral Management 2000, Designing Classrooms for Technology Integration 2000, Nurses' Assessment of Patients' Cognitive Orientation 2000, Sexual Dysfunction in Men on Hemodialysis 2000, Interdisciplinary Approach to Rehabilitation of Open-Heart Patients 2000, Decentralized Admission Screening Protocol 2000, Post-stroke Dysphasia 2000, Job Satisfaction in Rehabilitation Nursing 2000, Mechanical Restraints, Rehabilitation Therapies, and Staffing Adequacy 2000, Home Cardiac Rehabilitation 2000, Barriers to Providing Sexuality Information in Clinical Setting

Name	Certification	Activities to Maintain Expertise
		2000, Women's Participation in Cardiac Rehabilitation 2000, Quality of Life for Family Caregivers 1999, Home Healthcare Program for Patients with Parkinson's Disease 1999, Team Building Interventions for Interdisciplinary Teams 1999, Using Nurse Case Management 1999, Psychosocial Adjustment in Coronary Artery Surgery 1999, Cardiac Rehabilitation 1999, Caregiver Burden and Self-Care Deficits 1999, Ethical Conflicts Reported by Rehabilitation Nurses 1999, Life After Stroke 1999, Follow-up Program for Rehabilitation Patients After Discharge 1999, Barriers to Wheelchair Access 1999, Attitudes Toward People with Disabilities 1999, Sociodemographic Differences in Geriatric Rehabilitation in Israel 1999, Need for Sexual Counseling in MI Patients
Sample, Marilyn Indiana State Nurses Association Sigma Theta Tau, International		2002, Gaining Knowledge About Mental Health Mediations 2002, Addiction: A New Model for the New Millennium 2000, Alcohol and Drug Abuse Seminar 2002, Aggression and Self-concept 2002, Test Construction Workshop for Nurse Educators 2001, Research as Service in Service Learning 2001, Good Grief: Helping Children Grieve 2000, Domestic Violence: How to Screen and Intervene 2000, Psychobiology of Mental Control 2000, How to Lead Others Through Complicated Loss When Grief is Complicated 2000, Alcohol and Drug Abuse Seminar 1999, Psychosocial Nursing 1999, Course Transformation Academy 1999, Violence in School and Communities
Sharp, Susan American Nurses Association Sigma Theta Tau, International American Association of University Professors	CPR	2002, Stress and Health Care Workers 2002, Addiction: A New Model for a New Millennium 2002, Fifth Annual Mental Health Symposium 2002, Indiana Conference of AAUP 2002, Trauma Reframing Therapy 2001, Treatment of Depression in Primary Care Settings 2001, Helping Children Grieve

Name	Certification	Activities to Maintain Expertise
		2001, A New Century of Mental Health 2001, Update of Treatment of Schizophrenia 2001, Indiana Conference of AAUP 2000, How to Lead Others Through Complicated Loss/Grief 2000, Psychobiology of Mental Control 2000, ANA National Convention 2000, Indiana Conference of AAUP
Tomey, Ann American Academy of Nursing Community-Campus Partnership for Health Indiana Organization of Nurse Executives Indiana State Nurses Association Indiana Public Health Association National League for Nursing Indiana Citizens League for Nursing Sigma Theta Tau, International Council on Graduate Education for Administration in Nursing Midwest Nursing Research Society New York Academy of Sciences Delta Kappa Phi Delta Kappa Sigma X, Scientific Research Society Partner of Greenleaf Center for Servant Leadership Golden Key International Honor Society	CPR Certificate in Educational Change	2003, International Academic Nursing Alliance, Arista Series 2003, Library Resources 2003, COMPASS II 2003, Learn and Serve America Program 2003, The Freedom River 2003, WinterFest 2003, ISNA Legislative Conference 2003, 2 nd Annual Student Service Learning Conference 2003, 7 th Annual Research and Health Care Issues Conference 2003, Education Summit: Nursing Education 2002, WebCT 2002, Distance Education 2002, Pain: Assessment and Use of Analgesics 2002, Terrorism 2002, Advertising and Addiction 2002, Faculty Mediation Training 2002, Leadership Skills 2002, Leading and Empowering Your Staff 2002, Quality 101 2002, Motivation Skills 2002, Creative Problem Solving 2002, Stress Management 2002, Selecting and Supervising Student Workers 2002, Teacher as Servant Leader 2002, Effective Classroom Communication 2002, American Nurses Association, Biennial Convention 2002, Preparing Teachers to Use Technology 2002, WebCT Institute 2002, Nursing Workplace Issues

Name	Certification	Activities to Maintain Expertise
		2002, MyISU Portal Update 2002, Research on Homosexuality 2002, Why Memory Fails 2002, Can You Serve and Lead? 2002, WinterFest 2002, 2 nd Annual Indiana University Scholarship of Engagement Conference 2002, 7 th National Nursing Educator Conference 2002, 10 th Annual Nursing Research Conference 2001, Appreciating Diversity in Thinking 2001, WebCT 2001, Escaping and Embracing History Through Stories 2001, Human Relations and Dispute Resolution in the Community 2001, Groupwise Update 2001, Documentation Training 2001, Human Relations and Dispute Resolution on Campuses 2001, WebCT Update 2001, Meds Test Question Construction Workshop for Nurse Educators 2001, Leading the Way to Safer Workplaces for Nurses 2001, We Band of Angels 2001, CPR Recertification 2001, Knowing How the Law Impacts Nurses 2001, The Cobra 2001, Middle Passage 2001, WinterFest 2001, Fostering Leadership for Service-Learning Sustainability 2001, Inaugural Conference on the Scholarship of Engagement 2001, Keys to the Future of Nursing Conference 2001, National Service-Learning Exchange 2001, ANA House of Delegates 2001, Indiana State Nurses Association, Biennial Convention 2001, IONE Fall Conference 2001, 6 th National Conference for Nurse Educators 2001, Sigma Theta Tau, International, 36 th Biennial Convention 2000, ISNA Legislative Workshop 2000, WinterFest 2000, Course Transformation Academy

Name	Certification	Activities to Maintain Expertise
		2000, Willey Colloquium 2000, Mentoring 2000, Claiming a Place for Women of Color 2000, Special Scholarship of Teaching 2000, Banner Web Training 2000, 4 th Annual Undergraduate/Graduate Research Showcase 2000, 3 rd Annual Nursing Research Conference 2000, Lilly Project 2000, Exploring the Connection Between Service Learning and Retention 2000, Wearing Your Rose Colored Glasses 2000, Quick Stop at the Body Shop 2000, Problem-Based Learning 2000, Faculty Fellows Retreat 2000, Evaluation Teaching 2000, Learning Community Service Learning 2000, 12 th Annual Research Day, Sigma Theta Tau, International 2000, CPR Recertification 2000, Spiritual Formation and Vocation of Teachers 2000, Nursing Research Conference 2000, 5 th National Conference for Nurse Educators 1999, CourseInfo 1999, WinterFest 1999, ISNA, Legislative Workshop 1999, Service Learning as an Institutional Strategy 1999, Academic Service Learning 1999, Building Communities Through Service 1999, Student Services for Distance and Distributed Learning 1999, Servant Leadership and Community Leadership 1999, Leadership and the National Association for Community Leadership 1999, Learning Communities 1999, Effective Methods in the Classroom 1999, Evaluating and Grading 1999, Service Learning 1999, Teaching Portfolio 1999, Assessment Conference 1999, Decades of Progress Toward a Century of Nursing

Name	Certification	Activities to Maintain Expertise
		1999, Service Learning Planning Conference 1999, Genes R Us 1999, Presentations with Microsoft PowerPoint 1999, Echoes from Auschwitz 1999, Service Learning 101 1999, Groupwise I 1999, Prostate Disease

Table 7.2 *Faculty Activities to Maintain Expertise*
Part-time Faculty Members

Name	Certification	Activities to Maintain Expertise
Connerton, Charlotte Sigma Theta Tau, International	Vision & Hearing Screening CPR/AED	2003, Protecting God's Children 2002, Weight Management 2002, Pediatric Combination Vaccines 2002, Interventions for Violence in Children & Adolescents 2002, Achieving Balance in Diabetes Management 2002, PowerPoint Workshop 2002, Microsoft Publishing Workshop 2001, School Health Days 2001, Treatment of Pediculosis 2001, Documentation Principles 2000, School Health Days 2000, Indiana Rural Health Association Annual Meeting 1999, School Health Days 1999, Comprehensive Health Conference
Crawford, Donna Sigma Theta Tau, International	AACN	2002, CPR recertification 2002, Wound Care: Use of the VAC System 2002, Sepsis 2002, Intracranial Pressure Monitoring 2002, Pain: Assessment and Use of Analgesics 2000, CPR Recertification
Hartman, Sarah	PALS	2002, Graduate studies to complete Master's Degree in Nursing, including Ethics, Legal Perspectives in Nursing, Nursing Theory, Nursing Research, Advanced Nursing Roles, Pathophysiology, Family Dynamics, Advanced Nursing Assessment 2000-2001, Pediatric Ethics, Trauma in Pediatric Patients, Medical-Surgical Nursing conference, Legal Aspects 2000-2001, Completion of Baccalaureate Degree in Nursing
Mimms, Dot Sigma Theta Tau, International	ACLS CPR	2002, Wound Care: Use of the VAC System 2002, Sepsis Early Signs of Stroke 1999-2003, Mandatory Continuing Education for Corporate Compliance

Name	Certification	Activities to Maintain Expertise
Phillips, Ruth Sigma Theta Tau, International Coalition of Advanced Practice Nurses of Indiana Society of Advanced Practice Nursing Indiana Rural Health Association		1999-2002, Graduate studies to complete Master's Degree in Nursing
Riesenbeck, Virginia American Association of Critical Care Nurses Sigma Theta Tau, International	CPR	2000, Patient Concerns: Team Approach 2000, Restraints 2000, Complementary Therapies 2000, Caring Rituals
Robinson, Amy	CPR PALS	2003, Cardiac Update 2003, Graduate studies to complete Master's Degree in Nursing 2001, Progressive Pediatrics 1999-2003, Mandatory Continuing Education for Corporate Compliance
Smith, Stacy	FNP CPR	2002, Are You at Risk for Osteoporosis 2002, 4 th Annual CAPNI Fall Conference 2001, Osteoporosis Case Studies 2001, 3 rd Annual CAPNI Fall Conference 2000, Consumer Education 2000, 2 nd Annual CAPNI Fall Conference 1999, Osteoporosis 1999, Pharmacology Update for Advanced Practice Nurses
Vincent, Deb Coalition of Advanced Practice Nurses of Indiana Society of Advanced Practice Nurses Indiana Rural Health Association Sigma Theta Tau, International Indiana State Nurses Association	FNP CPR ACLS	2003, Pharmacology Update 2002, 4 th Annual CAPNI Fall Conference 2001, Immunizations 2001, 3 rd Annual CAPNI Fall Conference 2000, 2 nd Annual CAPNI Fall Conference 1999, Pharmacology Update 1999, Society of Advanced Practice Nurses Monthly Updates 1999, CAPNI Annual APN Update 1999, Regional APN Update

<p>Criterion 8: The collective talents of the faculty reflect scholarship through teaching, application and the integration and discover of knowledge as defined by the institution and the nursing education unit.</p>			<p>Operational Definition of Scholarship: As a faculty of the whole, diversity of scholarship is represented by accomplishments in teaching, application of expertise, knowledge integration, and discovery of knowledge.</p> <p>Expected Level of Achievement/Decision Rule for Action:</p> <p>100% of faculty will report involvement in at least one of the areas of scholarship on their annual faculty activity reports.</p> <p>Outcome: Expected level of achievement met for all programs</p>			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Faculty participation in dimension of faculty role—teaching, application of knowledge, integration, and discovery	Personnel files which contain faculty annual activity reports, vitae	Dean, Department Chair, FAC	Annually for performance evaluation and at other times in accordance with P & T and other retention policies. Report to EOAC Annually in May	Review of Annual Faculty Activity Reports by Department Chair, Dean, FAC and self evaluation by faculty	100% of faculty report involvement in at least one of the areas of scholarship on their annual faculty activity reports.	Continue to Monitor

Criterion 8: The collective talents of the faculty reflect scholarship through teaching, application and the integration and discover of knowledge as defined by the Institution and the nursing education unit.			Operational Definition of Scholarship: As a faculty of the whole, diversity of scholarship is represented by accomplishments in teaching, application of expertise, knowledge integration, and discovery of knowledge.			
			Expected Level of Achievement/Decision Rule for Action: 100% of faculty will report involvement in at least one of the areas of scholarship on their annual faculty activity reports.			
			Outcome: Expected level of achievement met for all programs			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Faculty participation in dimension of faculty role— teaching, application of knowledge, integration, and discovery	Personnel files which contain faculty annual activity reports, vitae	Dean, Department Chair, FAC	Annually for performance evaluation and at other times in accordance with P & T and other retention policies. Report to EOAC Annually in May	Review of Annual Faculty Activity Reports by Department Chair, Dean, FAC and self evaluation by faculty	100% of faculty report involvement in at least one of the areas of scholarship on their annual faculty activity reports.	Continue to Monitor

CRITERION 8: The collective talents of the faculty reflect scholarship through teaching, application and the integration and discovery of knowledge as defined by the institution and nursing education unit.

EXPECTED LEVEL OF ACHIEVEMENT: 100% of faculty will report involvement in at least one of the areas of scholarship on their annual faculty activity report.

Documentation confirms:

a. scholarship is defined by the institution and the nursing education unit.

Scholarly activity encompasses multiple intellectual pursuits such as research, professional writing, and presentations for the purpose of expansion of knowledge and advancement of learning. The faculty subscribes to Ernest Boyer's four types of scholarship characteristic of the Indiana State University that include discovery, teaching, application, and integration. As described by Boyer, discovery includes the generation of new and unique knowledge-suggestive of traditional research. Teaching includes the creative building of bridges between the teacher's understanding and the students' learning. Application includes the effective movement between theory and practice, particularly in relation to solving problems in society. Integration includes the development of new relationships among disciplines. The School of Nursing faculty members function within the scope of this definition. Table 8.1 indicates that faculty members have evidenced scholarly responsibilities through the four realms of Boyer's model from the time of the last Self Study in 1995 until the spring of 2003.

b. faculty record of scholarship.

Faculty members complete their record of scholarship on the Faculty Activity Report that is maintained in the department personnel files.

Table 8.1 *Scholarship Activities for 1995 to Spring 2003*

Name	Teaching	Application	Integration	Discovery
Esther Acree	<p data-bbox="583 415 793 440"><u>Subjects Taught</u> Family Nurse Practitioner Role Development Health Assessment Management of Common Disorders in Primary Health Care</p> <p data-bbox="573 724 804 748"><u>Teaching Awards</u> Excellence in Nursing Practice, 1998 Tony & Mary Hulman Health Achievement Award in Preventive Medicine, 1997 Teaching Fellow, CTL, 1996-present Nominee, AACN Carnegie Foundation Professor of the Year Award, 1995-98</p> <p data-bbox="552 1195 804 1219"><u>Teaching Strategies</u> Case studies Journals Client encounter forms Preceptor evaluations</p>	<p data-bbox="951 415 1161 440"><u>Clinical Practice</u> Sycamore Nursing Center Preceptors in Primary Health (NPs, PAs, and Family Practice Physicians)</p>	<p data-bbox="1283 415 1549 440"><u>Course Development</u> All courses in FNP track</p>	<p data-bbox="1671 415 1919 440"><u>Publication Topics</u> Reviewer for APEA Family Nurse Practitioner Review</p> <p data-bbox="1650 594 1919 691"><u>Presentation Topics</u> Educational Issues for the Nurse Practitioner</p>
				<u>Research</u>

Name

Deborah Barnhart

Teaching

Subjects Taught

Fundamentals
Introduction to
Nursing
Mental Health
Nursing

Application

Clinical Practice

Integration

Course Development

Introduction to
nursing
Cross-cultural nursing

Discovery

Publication Topics

Group process for
nursing
Crisis intervention
Family systems

Presentation Topics

Stress and coping
Complementary
therapies
Strategies for success
Caring and healing

Teaching Awards

Teaching Strategies

Lecture
Class discussions
PowerPoint
Case studies

Research

Name	Teaching	Application	Integration	Discovery
Deborah Bartnick	<p data-bbox="583 337 793 376"><u>Subjects Taught</u></p> <p data-bbox="541 376 814 678">Issues in Nursing Pediatrics Maternity Transition to Professional Nursing Clinical Pharmacology Reflective Nursing Practice</p> <p data-bbox="571 711 802 750"><u>Teaching Awards</u></p> <p data-bbox="541 750 814 815">Excellence in Nursing Education, 2002</p> <p data-bbox="541 847 814 945">Golden Key National Honor Society Member</p> <p data-bbox="550 977 814 1016"><u>Teaching Strategies</u></p> <p data-bbox="541 1016 814 1414">Modules Case studies Web-based courses Web-Enhanced courses Online discussion board Synchronous online chat sessions Teaching projects Lecture/discussion PowerPoint</p>	<p data-bbox="949 337 1159 376"><u>Clinical Practice</u></p> <p data-bbox="919 376 1171 451">Assisting students with clinical practice</p>	<p data-bbox="1285 337 1558 376"><u>Course Development</u></p> <p data-bbox="1285 376 1558 548">Transition to Professional Nursing Maternity Reflective Nursing Practice</p>	<p data-bbox="1663 337 1915 376"><u>Publication Topics</u></p> <p data-bbox="1642 376 1915 451">Chapter, 3 Reviews, 2</p> <p data-bbox="1642 717 1915 756"><u>Presentation Topics</u></p> <p data-bbox="1642 756 1915 886">NCLEX-RN review Computer use and issues for adult learners</p> <p data-bbox="1642 1091 1768 1123"><u>Research</u></p>

Name	Teaching	Application	Integration	Discovery
Mary Bennett	<p data-bbox="590 350 789 375"><u>Subjects Taught</u></p> <p data-bbox="558 383 789 643">Pediatric Nursing Medical-Surgical Nursing I Nursing Research Topics Diagnostic Assessment Adult Health, I & II</p> <p data-bbox="579 716 800 740"><u>Teaching Awards</u></p> <p data-bbox="558 748 800 935">Excellence in Mentoring, 2001 Excellence in Research, 2000 Academic Excellence, 1999</p> <p data-bbox="558 1016 800 1040"><u>Teaching Strategies</u></p> <p data-bbox="558 1049 800 1414">Lecture/discussion Group activities Interactive web tutorials Online lecture notes Critical thinking exercises Web-based instruction Web-enhanced instruction Two-way video</p>	<p data-bbox="957 350 1157 375"><u>Clinical Practice</u></p> <p data-bbox="926 383 1167 578">Sycamore Nursing Center Volunteer Fire Department US Army Reserve Nurse Corps</p>	<p data-bbox="1304 350 1556 375"><u>Course Development</u></p> <p data-bbox="1293 383 1566 610">Medical-Surgical Nursing I Nursing Research Topics Diagnostic Assessment Adult Health I & II</p>	<p data-bbox="1692 350 1913 375"><u>Publication Topics</u></p> <p data-bbox="1661 383 1923 578">Articles (in press), 1 Articles, 8 Book reviews, 5 Abstracts, 2 Topics-See presentations</p> <p data-bbox="1671 626 1923 651"><u>Presentation Topics</u></p> <p data-bbox="1661 659 1923 1154">Effects of complementary nursing interventions on stress and immune functioning Use of complementary therapies by persons with cancer Use of web page to enhance teaching nursing research Assessing outcomes from a community based chronic disease management program</p> <p data-bbox="1734 1195 1850 1219"><u>Research</u></p> <p data-bbox="1661 1227 1923 1349">Several ongoing student-faculty and outside consulting projects</p>

Name**Julia Fine****Teaching****Subjects Taught**

Maternal-Newborn
 Research
 LPN Transition
 Nursing Assessment
 Informatics
 Information
 Technology Literacy

Application**Clinical Practice**

Medical mission, Haiti
 Consultant, Medical
 clinic, Ghana
 Maternal-newborn
 clinical

Integration**Course Development**

Information
 Technology Literacy
 LPN to BSN
 Informatics
 Childbearing Family

Discovery**Publication Topics**

Web site, 1
 Web page, 1
 Dissertation, 1
 Article, 1

Teaching Awards**Presentation Topics**

Research

Teaching Strategies

Lecture/group
 discussion
 Independent study
 Demonstration
 Clinical supervision
 Projects

Research

Clinical reasoning of
 expert labor and
 delivery nurses
 Use of nursing story
 International medical
 missions

Name**Suzy Fletcher****Teaching****Subjects Taught**

Nursing Research
 Issues and Trends
 Cross-cultural Nursing
 Health Care
 Perspectives

Application**Clinical Practice**

Caring and healing
 End-of-life

Integration**Course Development**

Nursing research
 Cross-cultural
 Health care
 perspectives
 Issues and trends

Discovery**Publication Topics**

Book reviews
 International
 Caring and healing

Presentation Topics

End of life care
 Caring and healing
 Pain management
 Alternative and
 complementary
 therapies

Teaching Awards**Teaching Strategies**

Lecture/group work
 PowerPoint
 Case studies
 Web-enhances
 Projects
 Discussion boards

Research

Name**Teaching****Application****Integration****Discovery****Betsy Frank****Subjects Taught**

Fundamentals
 LPN to RN Transition
 Transition to
 Professional Nursing
 Research
 Leadership
 Health care
 Perspectives
 Professional
 Development in
 Nursing
 Nursing Theory
 Development
 Administration

Clinical Practice

Clinical practice areas
 Nursing
 administration
 Nursing education
 consultation

Course Development

Fundamentals
 Professional
 development in
 nursing
 Nursing theory
 development

Publication Topics

Book reviews, 9
 Articles, 7
 Chapters, 3
 Book, 1

Presentation Topics

Leader as expert
 Evidence-based
 nursing
 Spirituality
 Distance learning
 Graduate education in
 nursing administration
 Community-based
 nursing education

Teaching Awards**Teaching Strategies**

Lecture
 Group projects
 Case studies
 Web-based and web-
 enhanced instruction
 Seminars
 Projects

Research

Spirituality and
 oncology
 Graduate Programs in
 Nursing
 Administration
 Supervision of Pre-
 Licensure Students in
 Community-Based
 Settings

Name

Veda Gregory

Teaching

Subjects Taught

Community Health
Nursing
Population Focused
Nursing

Application

Clinical Practice

FNP Certification
Nurse Practitioner,
Clinton Medical
Clinic

Integration

Course Development

Web-based Population
Focused Community
Nursing

Discovery

Publication Topics

Article, 1

Teaching Awards

Presentation Topics

Use of academic
nursing center for
home visit assessment

Teaching Strategies

Lecture
Group discussion
Critical thinking case
studies
Clinical presentation
Formal papers
Abstract presentation
for poster presentation

Research
Grants, 1 (not funded)

Name	Teaching	Application	Integration	Discovery
Patrice Jones	<p data-bbox="583 349 793 381"><u>Subjects Taught</u></p> <p data-bbox="548 381 758 521">Fundamentals Medical-Surgical Nursing I Pharmacology I</p>	<p data-bbox="947 349 1157 381"><u>Clinical Practice</u></p> <p data-bbox="919 381 1192 488">Long-term care facilities Medical-surgical units</p>	<p data-bbox="1283 349 1549 381"><u>Course Development</u></p> <p data-bbox="1276 381 1514 586">Fundamentals Medical-Surgical Nursing I Pharmacology Revision of clinical evaluations</p>	<p data-bbox="1661 349 1906 381"><u>Publication Topics</u></p> <p data-bbox="1654 381 1913 456">Book Reviews, 7 Multimedia Review, 2</p>
	<p data-bbox="569 683 793 716"><u>Teaching Awards</u></p> <p data-bbox="548 716 800 781">Excellence in Nursing Mentorship, 1999</p>			<p data-bbox="1654 683 1913 716"><u>Presentation Topics</u></p>
	<p data-bbox="548 1122 800 1154"><u>Teaching Strategies</u></p> <p data-bbox="548 1154 800 1359">Lecture/discussion PowerPoint Case studies Interactive questions Critical thinking exercises</p>			<p data-bbox="1724 1122 1843 1154"><u>Research</u></p>

Name	Teaching	Application	Integration	Discovery
Melody McKinney	<p data-bbox="546 349 798 454"><u>Subjects Taught</u> Medical-Surgical Nursing II</p> <p data-bbox="546 649 798 755"><u>Teaching Awards</u> Excellence in Nursing Research, 2001</p> <p data-bbox="546 1055 798 1364"><u>Teaching Strategies</u> Lecture/discussion PowerPoint Case studies Interactive questions Critical thinking exercises Reading assignments Nutrition module</p>	<p data-bbox="903 349 1197 422"><u>Clinical Practice</u> Medical-surgical units</p>	<p data-bbox="1281 349 1554 454"><u>Course Development</u> Medical-Surgical Nursing II</p>	<p data-bbox="1638 349 1932 487"><u>Publication Topics</u> Article (in process), 1 Book Reviews, 9 Abstracts, 7</p> <p data-bbox="1638 519 1932 925"><u>Presentation Topics</u> Caregiver stress and burnout Personality hardiness and threat appraisal in cancer family Comparison of caregiver emotions and perceived health status Acute/chronic renal failure</p> <p data-bbox="1638 958 1932 1421"><u>Research</u> Personality hardiness and threat appraisal in family caregivers of cancer patients Hardiness, threat appraisal, self-care capability, and caregiving characteristics as predictors of emotions and perceived health in family caregivers of cancer patients</p>

Name	Teaching	Application	Integration	Discovery
Julie Mitre	<p data-bbox="577 349 808 381"><u>Subjects Taught</u> Medical-Surgical Nursing Nursing Assessment</p> <p data-bbox="577 690 808 722"><u>Teaching Awards</u> Excellence in Writing, ISNA</p> <p data-bbox="577 1063 808 1096"><u>Teaching Strategies</u> PowerPoint Case studies Interactive participation in a play Student presentations Exams</p>	<p data-bbox="934 349 1165 381"><u>Clinical Practice</u> Medical-surgical units Emergency department Supervision, intensive care units</p>	<p data-bbox="1291 349 1564 381"><u>Course Development</u> Medical-Surgical Nursing III Acute Medical- Surgical Health Assessment</p>	<p data-bbox="1669 349 1921 381"><u>Publication Topics</u> NCLEX-RN item writer Chapter in a book, 1 Reviewer, NCLEX questions CEN item writer</p> <p data-bbox="1669 625 1921 657"><u>Presentation Topics</u> Experiences in Ospedale di Careggi and American Hospital of Paris Critical thinking assessment Critical thinking tests comparison Critical thinking: Panel discussion</p> <p data-bbox="1732 1031 1858 1063"><u>Research</u> Critical thinking data collection Union Hospital Research Committee Participant, Delphi Study to define critical thinking Pilot study: Critical thinking</p>

Name	Teaching	Application	Integration	Discovery
Marcia Miller	<p data-bbox="577 349 798 381"><u>Subjects Taught</u></p> <p data-bbox="546 381 766 552">Role AD Fundamentals Psychosocial Medical-Surgical Nursing I</p> <p data-bbox="567 722 808 755"><u>Teaching Awards</u></p> <p data-bbox="546 755 819 885">Excellence in Nursing Education, 2003 Excellence in Nursing Education, 2001</p> <p data-bbox="546 917 777 1055">Golden Key International, Honorary Membership, 2003</p> <p data-bbox="546 1193 808 1226"><u>Teaching Strategies</u></p> <p data-bbox="546 1226 808 1393">Lecture/discussion Case studies Reading assignments Web-enhancement Experiential learning</p>	<p data-bbox="945 349 1165 381"><u>Clinical Practice</u></p> <p data-bbox="913 381 1165 414">Behavioral medicine</p>	<p data-bbox="1281 349 1554 381"><u>Course Development</u></p> <p data-bbox="1270 381 1522 690">Role Socialization Medical-Surgical Nursing I Revision of AD Program Revision of clinical evaluations NLNAC Self Study co-writer, 2003</p>	<p data-bbox="1659 349 1911 381"><u>Publication Topics</u></p> <p data-bbox="1648 381 1869 454">Computer Disk, 1 Article, 2</p> <p data-bbox="1648 690 1921 722"><u>Presentation Topics</u></p> <p data-bbox="1648 722 1911 1023">Chronic disease management NCLEX-RN Review Therapeutic communication Dysfunctional grieving Multiple intelligence Role boundaries</p> <p data-bbox="1711 1128 1848 1161"><u>Research</u></p> <p data-bbox="1648 1161 1921 1299">Evaluation of Clinical Learning Chronic Disease Academic Advisement</p>

Name	Teaching	Application	Integration	Discovery
Dianne Nelson	<p><u>Subjects Taught</u> Fundamentals I/II Maternal-child Seminar Adult Health Assessment Advanced Adult Health Nursing</p> <p><u>Teaching Awards</u></p> <p><u>Teaching Strategies</u> Lecture Clinical Case studies Web-enhanced and web-based learning Web testing Web-based research Group work Discussion Clinical simulations</p>	<p><u>Clinical Practice</u></p>	<p><u>Course Development</u> Nursing Care of the Adult II</p>	<p><u>Publication Topics</u> Book review, I</p> <p><u>Presentation Topics</u> DNSc Clinical defense Exercise and arthritis Distance education Maternal concerns</p> <p><u>Research</u> Grant proposal: Arthritis Foundation Determinants of exercise adherence Mexican-American problem-solving Maternal concerns</p>

Name

Dale Ann O'Neal

Teaching

Subjects Taught

Mental Health
Nursing

Teaching Awards

Excellence in Nursing
Education, 1999

Teaching Strategies

Role-play
Case studies
Simulations
Faculty-developed
communication
exercises
Lecture
Class discussions
Script & videotape of
group process
Critical thinking
activities
Written assignments
Audio-visual projects

Application

Clinical Practice

Mental Health nursing
Individual and Family
Therapy
Crisis intervention

Integration

Course Development

Mental Health
Aspects
Psychosocial
Transition
Families in Stress and
Crisis
Professional Aspects
Group Process Theory

Discovery

Publication Topics

Group process for
nursing
Crisis intervention
Family systems

Presentation Topics

Grief and bereavement
Group
process/Distance
Education

Research

Name**Michele Pantle****Teaching****Subjects Taught**

Medical-Surgical
Nursing II
Health Assessment
Critical Care Nursing
Community Health
Nursing

Teaching Awards

Excellence in Nursing
Education, 1997
Excellence in
Mentoring, 2003

Teaching Strategies

Lecture
Case studies
PowerPoint
presentations
Group
projects/presentations
Flow charts

Application**Clinical Practice**

Emergency
Department
Critical Care
Sycamore Nursing
Center
Medical-surgical units
Vigo County schools

Integration**Course Development**

Case study
development
Study guides for
chapter content

Discovery**Publication Topics**

Book reviews

Presentation Topics**Research**

Name**Kathleen Pickrell****Teaching****Subjects Taught**

Issues and trends
 Pediatrics
 Pharmacology
 Cross-culture
 Nursing history
 Health assessment

Teaching Awards

Excellent in Nursing
 Education, 2000

Teaching Strategies

Lecture
 PowerPoint
 Case studies
 Modules
 Independent guides
 Interactive questions
 Computer/reading
 assignments

Application**Clinical Practice**

Pediatrics
 Consultation

Integration**Course Development**

Issues and Trends
 Pediatric Nursing
 Pharmacology
 Cross-culture
 Nursing History
 Health Assessment

Discovery**Publication Topics**

Book Reviews, 15
 Multimedia Reviews,
 3
 Online Continuing
 Education Reviews, 3
 Article, 1
 Chapter, 1

Presentation Topics

Nursing history, 2003
 Nursing ethics, 2001
 RSV, 1999
 Nursing Careers, 1997
 Writing a paper, 1996
 Cross-culture, 1996

Research

Grants, 1 (not funded)
 Historical research

Name

Gloria Plascak

Teaching

Subjects Taught

Pediatric Nursing
TB Update

Teaching Awards

Teaching Strategies

Lecture/discussion
Simulated practice
Critical thinking
exercises
Reading assignments

Application

Clinical Practice

Pediatric Nursing
Certified Pediatric
Nurse

Integration

Course Development

Pediatric Nursing,
AD/BS
NLNAC Self Study
co-writer, 2003

Discovery

Publication Topics

Book Reviews, 3

Presentation Topics

Update, NLNAC Self-
Study, Fall Faculty
Retreat, 2002
Pediatric Assessment
and Administration of
Injections, VNA, 2002
Message to Graduates,
1998
Basic TB and Skin
Test Course, 1995,
1996, 1997
Purposes and Lambda
Sigma Chapter
Activities, Eligibility
Luncheon, STT, 1997
Pediatric Injections,
Health Career Day,
1996, 1998

Research

Name	Teaching	Application	Integration	Discovery
Rhonda Reed	<p data-bbox="583 332 791 365"><u>Subjects Taught</u></p> <p data-bbox="554 365 726 438">Fundamentals Technology</p> <p data-bbox="573 609 804 641"><u>Teaching Awards</u></p> <p data-bbox="554 641 816 771">Extra-Mile Award, 1997 Excellence in Nursing Education, 1996</p> <p data-bbox="554 1144 808 1177"><u>Teaching Strategies</u></p> <p data-bbox="554 1177 793 1421">Lecture PowerPoint Modules Independent guides Interactive questions Computer/reading assignments</p>	<p data-bbox="949 332 1161 365"><u>Clinical Practice</u></p> <p data-bbox="919 365 1129 544">Medical Rehabilitation Certified Rehabilitation Registered Nurse</p>	<p data-bbox="1289 332 1556 365"><u>Course Development</u></p> <p data-bbox="1289 365 1472 446">Introduction to Nursing</p>	<p data-bbox="1667 332 1913 365"><u>Publication Topics</u></p> <p data-bbox="1646 365 1877 479">Book Reviews, 15 Book chapter, 1 Web pages, 415</p> <p data-bbox="1646 511 1898 576">Online Computer Guide for students, 1</p> <p data-bbox="1646 609 1898 673">Instructional Guides for students, 16</p> <p data-bbox="1646 820 1913 852"><u>Presentation Topics</u></p> <p data-bbox="1646 852 1913 1323">Multimedia Cart orientation Orientation to use of the scanner ASK Projector orientation Interactive videostation inservice Using the computer to prepare/present papers/forms Computer lab orientation for students</p> <p data-bbox="1709 1388 1835 1421"><u>Research</u></p>

Name**Marilyn Sample****Teaching****Subjects Taught**Psychiatric/Mental
Health Nursing**Teaching Awards****Teaching Strategies**Lecture/discussion
Role-play
Case studies
Self-guided workbook
Reading assignments
Videotapes**Application****Clinical Practice**Psychiatric/Mental
Health clinical with
studentsPsychiatric Mental
Health Clinical
Specialist, St. Anne's
Clinic**Integration****Course Development**Mental Health
Nursing**Discovery****Publication Topics**Book Reviews, 6
Table of content
review, 1**Presentation Topics**

NCLEX-RN Review

Research

Name

Susan Sharp

Teaching**Subjects Taught**Psychiatric/Mental
Health Nursing**Teaching Awards**2000, Excellence in
Nursing Education**Teaching Strategies**Lecture/discussion
Role-play
Case studies
Self-guided workbook
Reading assignments
Videotapes
Listening skills/test-
outs
Questions/answers
Test reviews
Active participation**Application****Clinical Practice**Psychiatric/Mental
Health clinical with
studentsVigo County Mental
Health Assoc.
volunteer**Integration****Course Development**Mental Health
Nursing
Mental Health
communication course
Nutrition integration
project**Discovery****Publication Topics**

Book Reviews, 12

Presentation TopicsNutrition
Gender equity
workload
Mood disorders
Depression in elderly
Depression
Verbal abuse
Communication skills
Psychopharmacology
Suicide intervention
Grief
Sleep
Hygiene
Anxiety**Research**

Name	Teaching	Application	Integration	Discovery
Ann Marriner Tomey	<p data-bbox="596 331 789 362"><u>Subjects Taught</u></p> <p data-bbox="554 362 806 573">Administration Leadership Management Curriculum Teaching Introduction to nursing Thesis</p> <p data-bbox="583 638 789 669"><u>Teaching Awards</u></p> <p data-bbox="548 669 814 971">2003, Caleb Mills Award 2003, Nominee, Indiana Campus Compact Award 2000, Theodore Dreiser Award 1999, President's Award 1998, Excellence in Research</p> <p data-bbox="562 1036 793 1066"><u>Teaching Strategies</u></p> <p data-bbox="541 1066 806 1370">Experiential learning Service learning Computer exercises Case studies Role-play Simulations Small group discussions A-V materials Clinical logs, journals Book, movie reviews</p>	<p data-bbox="961 331 1150 362"><u>Clinical Practice</u></p> <p data-bbox="915 362 1188 914">Clinical practice areas in area hospitals Public Health Dept. Mental Health Assoc. Visiting Nurses Assoc. Hospice March of Dimes Sycamore Nursing Center Schools Hamilton Center Clara Fairbanks Center Harborside Health Care Long-term care facilities Rehabilitation centers Head Start Lighthouse Mission Student Health Center</p>	<p data-bbox="1297 331 1545 362"><u>Course Development</u></p> <p data-bbox="1283 362 1556 613">Introduction to nursing Mental health aspects Leadership Theories of nursing administration Curriculum process Administrative practices Educational practices</p>	<p data-bbox="1682 331 1906 362"><u>Publication Topics</u></p> <p data-bbox="1646 362 1906 735">Nursing Leadership & Management Education Curriculum Evaluation Service learning Nursing theorists Distance education Case studies Conflict Nursing career choices Servant leadership</p> <p data-bbox="1667 800 1906 831"><u>Presentation Topics</u></p> <p data-bbox="1646 831 1906 1076">Distance education Service learning Leadership Conflict management Servant leadership Power Collaboration Partnerships</p> <p data-bbox="1724 1141 1839 1172"><u>Research</u></p> <p data-bbox="1646 1172 1856 1255">Distance education Service learning Stress and memory</p>

III. STUDENTS

The teaching and learning environment is conducive to student academic achievement.

Standard III: STUDENTS

The program assures teaching and learning environments conducive to student academic achievement and life long learning.

<p>Criterion 9: Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the nursing education unit's purposes.</p>					<p>Operational Definition: Student policies, including but not limited to those that govern recruitment, admission, retention, progression, and graduation are consistent with University polices. Differences in policies in effect for nursing students are justified by requirements related to the clinical practice component of the program. Policies meet external guidelines such as those imposed by federal and state government and various accreditation bodies.</p> <p>Expected Level of Achievement/Decision Rule for Action: 100% of policies are congruent with University or justified where required to maintain the integrity of the nursing program.</p> <p>Student polices are readily available to students on the School of Nursing website.</p> <p>Students will rate the item "School of Nursing Policies are adequate and sufficient information about policies was given to me in the student handbook." As a 3.5 or above on a 5.0 scale.</p> <p>Outcome: Expected level of achievement met for all programs</p>	
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Student policies	School Student Handbook, University Student Handbook, Recruitment brochures, Catalogue, Web site, Exit Surveys and Alumni Surveys.	Dean, Department Chair, Director of Student Affairs, SAC, Exec, Nursing Council	Annually in September	SAC and Director of Student Affairs review policies for congruency with University policies and justify differences where required to maintain nursing program integrity	<p>Student mean ratings over time on the nursing policy item from the program exit surveys are as follows AS 4.06 BS 3.85 RN-BS 4.32 MS 4.09</p> <p>Adherence to the written dismissal policy has been problematic. After two course failures and subsequent dismissal from the program, students frequently petition for readmission due to extenuating personal circumstances. Extenuating circumstances has not been well defined and therefore faculty felt compelled to reinstate students who claimed to have undergone stressful life events during the semester that they failed nursing coursework.</p>	<p>Continue to Monitor</p> <p>Spring 2003 a series of focus groups were conducted to discuss student admission, progression, grading retention and dismissal polices. Executive Committee has requested that SAC not to re-admit students. There was discussion on the fact that there is no written reinstatement policy. It was decided that no policy or procedure change is needed. EC has asked SAC to uphold the approved dismissal policy at this time. (EC Minutes March 2003).</p> <p>Continue to Monitor</p>

CRITERION 9: Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the nursing education unit purposes.

EXPECTED LEVEL OF ACHIEVEMENT: 100% of the policies are congruent with University or justified where required to maintain the integrity of the nursing program. Student policies are readily available to students on the School of Nursing website. Students will rate the item "School of Nursing Policies are adequate and sufficient information about the policies was given to me in the student handbook" as a 3.5 or above in a 5.0 scale.

Documentation confirms:

- a. **congruency, availability, and accessibility of student policies within the governing organization and the nursing education unit, including but not limited to :**

**non-discriminatory;
selection and admission;
student evaluation/grading
retention;
withdrawal/dismissal;
graduation requirements;
grievance/complaints and appeals procedures
financial aid;
transfer of credit;
recruitment;
health requirements; and
validation of prior learning/articulation**

Student policies at Indiana State University and the School of Nursing are publicly accessible and available. All University policies may be publicly accessed online from the University's home page, <http://www.indstate.edu>. The *Undergraduate Catalog* and *Graduate Catalog* are also published in hard copy and available upon request. Although *University Standards* (Code of Student Conduct) is published online, a hard copy is given to every student who utilizes a residence hall for housing, and a copy is mailed to the home address of all other students.

A *School of Nursing Undergraduate Student Handbook* is given to each undergraduate nursing student upon admission to either the Associate Degree or Baccalaureate Degree Nursing Programs. Policies of the School of Graduate Studies are applicable to students admitted to the Graduate Program in Nursing and may be viewed from <http://web.indstate.edu/acad-aff/catalog-g.html>. Student policies specific to each program in the School of Nursing may be viewed on the

School of Nursing home page at <http://www.indstate.edu/nurs/>. A copy of all catalogs, *University Standards*, and *School of Nursing Undergraduate Student Handbook* are available for review by the evaluators in the NLNAC Resource Room. The following table lists many of the locations of student policies.

Table 9.1 *Student Policies: Publication*

Student Policy	Publication
Non-discrimination (including ADA statements)*	http://www.indstate.edu/hres/affactdiversity/eaapolicystatement.html 2002-2003 <i>University Standards</i> , 3 2003-2004 <i>Undergraduate Catalog</i> , ii 2001-2003 <i>Graduate Catalog</i> , inside cover 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> ; inside cover, 38-39 (ADA) <i>School of Nursing Handbook</i> ; inside cover, Section V(ADA) School of Nursing Brochures for Baccalaureate Degree in Nursing Program, and Baccalaureate Track for Registered Nurses
Selection and Admission*	2003-2004 <i>Undergraduate Catalog</i> , 2-6 2001-2003 <i>Graduate Catalog</i> , 8-12 School of Nursing Brochures for Baccalaureate Degree in Nursing Program, and Baccalaureate Track for Registered Nurses <i>School of Nursing Handbook</i> , Section V
Academic Progression*	2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 24-27 <i>School of Nursing Handbook</i> , Section V
Student Evaluation and Grading*	2003-2004 <i>Undergraduate Catalog</i> , 13 2001-2003 <i>Graduate Catalog</i> , 15-16 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 22 <i>School of Nursing Handbook</i> , Section V Course syllabi
Retention*	2003-2004 <i>Undergraduate Catalog</i> , 14 2001-2003 <i>Graduate Catalog</i> , 16 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 24-27 <i>School of Nursing Handbook</i> , Section V
Withdrawal/Dismissal*	2003-2004 <i>Undergraduate Catalog</i> , 15 2001-2003 <i>Graduate Catalog</i> , 19 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 24-27
Graduation Requirements*	2003-2004 <i>Undergraduate Catalog</i> , 15-16 2001-2003 <i>Graduate Catalog</i> , 20-23
Grievance/Complaints and Appeal Process*	2001-2003 <i>Graduate Catalog</i> , 19 http://www.isu.indstate.edu/sogs/s-ahb/home.htm 2002-2003 <i>University Standards: Code of Student Conduct</i> , 6; 15 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 31-33 <i>School of Nursing Handbook</i> , Section V
Financial Aid*	2003-2004 <i>Undergraduate Catalog</i> , 7-11 2001-2003 <i>Graduate Catalog</i> , 32-41 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 27 <i>School of Nursing Handbook</i> , Section V
Transfer of Credit*	2003-2004 <i>Undergraduate Catalog</i> , 3-5 2001-2003 <i>Graduate Catalog</i> , 21 2002-2003 <i>School of Nursing Undergraduate Student Handbook</i> , 21 <i>School of Nursing Handbook</i> , Section V

Student Policy	Publication
Recruitment	2003-2004 Undergraduate Catalog, 2001-2003 Graduate Catalog,
Health Requirements*	2003-2004 Undergraduate Catalog, 2001-2003 Graduate Catalog, 2002-2003 School of Nursing Undergraduate Student Handbook, 35-37 School of Nursing Handbook, Section V http://www.indstate.edu/shc/immunization%20notice.htm
Validation of Prior Learning/Articulation*	2003-2004 Undergraduate Catalog, 3-5 School of Nursing Handbook, Section V

*School of Nursing policy which differs from University policy

b. rationale for policies that differ from the governing organization policies

Policies for graduate and undergraduate nursing students are consistent with those for students enrolled in other Schools within the University. There are, however, some School of Nursing policies that are more stringent. The University allows for variation in policies of individual academic units, if the nature of the program justifies the variation, and the variation does not create a more lenient standard. A brief discussion of School of Nursing policies that vary from the University standard follows.

Non-discrimination. Faculty and administration in the School of Nursing are committed to a policy of non-discrimination related to admission, progression, and graduation of individuals. School of Nursing policies consistent with the University's policy statement. The Americans with Disabilities Act (ADA) Policy with Core Performance Standards is utilized to guard against discriminatory practices for those who are qualified, yet need special accommodations to meet with success in a nursing major. The document is included in the *School of Nursing Undergraduate Handbook, School of Nursing Handbook*, and on the School's web page.

Selection and Admission. In order to be considered for admission to programs in the School of Nursing, applicants must first be admitted to the University. Graduate students must be accepted by the School of Graduate Studies. Guaranteed, general, and transfer admission standards may be found at <http://www.indstate.edu/nurs/>, all School of Nursing brochures, as well as the *School of*

Nursing Handbook. The School's standards are consistent with other Schools of Nursing in the nation in that they reflect requirements necessary for success in professional education.

Academic Progression and Retention. The University requires that undergraduate students maintain a cumulative grade point average of 2.0. A student who does not meet this standard will be placed on probation. Undergraduate nursing students may not progress in the major if placed on probation by the University. To remain in good standing, undergraduate nursing students must additionally achieve a grade of "B" or better in all nursing courses, as well as a satisfactory grade for the clinical component; and a grade of "C" or better in all cognate courses. Specific progression guidelines, and limitations are set forth for repeating of nursing and cognate courses. These are found in the progression and retention policies for the Associate Degree Nursing Program, Baccalaureate Degree Nursing Program, and the Baccalaureate Track of Registered Nurses.

The Graduate Program follows the progression and retention policies of the School of Graduate Studies. Graduate students must maintain a 3.0 average to continue enrollment in good standing. The Dean of the School of Graduate Studies makes determinations regarding graduate students who fall below the progression and retention standard.

Student Evaluation and Grading. The University does not prescribe a grading scale for determining course grades. The University Faculty Senate approved a proposal from the School of Nursing, March 27, 1997, to raise its passing grade for nursing courses from a "C" to a "B". In conjunction with this policy change, the minimum percent required for a "B" grade was changed from 75% to 79%. The following grading scale was implemented for all undergraduate nursing courses Fall 1997:

90% Lower limit of A
85% Lower limit of B+
79% Lower limit of B
75% Lower limit of C+
70% Lower limit of C
65% Lower limit of D+
60% Lower limit of D

The change in grade requirement for nursing courses was made in an effort to increase student achievement throughout the undergraduate programs, and to increase the potential for success on NCLEX-RN upon graduation. NCLEX-RN scores for students graduated from the Associate Degree Nursing Program have improved since implementation of the upgrade in policy. The School has full accreditation from the Indiana State Board of Nursing. It is anticipated that the policy will be as beneficial to the success of students enrolled in the baccalaureate program. Graduate students in the School of Nursing are graded according to the policies of the School of Graduate Studies.

Withdrawal/Dismissal. In Fall 2002, the University implemented a new policy related to dropping classes and withdrawals from the institution. Withdrawal procedures are initiated through the Office of Enrollment Services and can be found in the *Undergraduate Catalog*. To assist students in making informed choices that may affect their progression and retention in a nursing program, course faculty and academic advisors provide timely information and guidance to students regarding the policy, especially related to grade determination. Various strategies for disseminating the information include posting the policy on course bulletin boards, publishing critical deadline dates for dropping and withdrawing in course calendars, and counseling students who are not progressing satisfactorily or who are at risk academically.

Criteria for academic dismissal from the University pertain to those who have first been on academic probation. These students would not be continuing students in a nursing program. The dismissal policies for undergraduate programs in the School of Nursing specifically limit the

number of nursing course and cognate course repeats. Students may repeat a nursing course one time only. Failure of a nursing course the second time results in dismissal from the major. Failure of any two nursing courses results in dismissal. A failed cognate may be repeated one time. Failure of a cognate course the second time or failure of any three cognate courses will result in dismissal from the major. These policies are similar to those of schools of nursing in other institutions. The cognate policy, first implemented in 1995, pertains to courses identified as foundational to nursing education.

Graduation Requirements. Students completing an associate, baccalaureate, or master's degree from the School of Nursing must meet degree requirements for the University. Additional requirements are set forth by the respective programs or track. Upon completion of the program of studies, undergraduate students must have a cumulative grade point average of 2.0 or above. The School of Nursing requires the same minimum grade point average, but also requires a minimum grade of "B" in each nursing course, and minimum grade of "C" for each cognate course. This is consistent with requirements outlined in the *Indiana Code, IAC 1-2-21,*

Progression and Graduation, which states that graduates must have a cumulative average grade of "C" or better, and a "C" or better in each nursing course in order to be eligible for the licensure exam.

Graduation requirements for the Master's Degree in nursing exceed University requirements in terms of minimum number of earned credits. The number varies depending on the area of specialization pursued by the graduate, and whether a 6 credit hour thesis or a non-credit culminating project was completed. Clinical specialization demands adequate time for development of advanced practice skills and knowledge, thus justifying the additional credit hours required for graduation.

CRITERION 10. Students have access to support services administered by qualified individuals that include, but are not limited to: health, counseling, academic advisement, career placement, and financial aid.

EXPECTED LEVEL OF ACHIEVEMENT: Students will rate satisfaction with university support services (University and School Exit Surveys) at 3.0 or higher on 5.0 scale.*

Students will rate academic advising at a 3.5 or higher on a 5.0 scale.*

All staff and administrators will be evaluated for adequacy of performance following the University Guidelines on an annual basis.

***Distance education students are included in group data. Exit and University surveys have not previously identified students as being distance education or on campus, so it is not possible to separate out data from the DE students at this time.**

Documentation confirms:

a. availability of student support services:

Indiana State University provides a variety of support services for undergraduate and graduate students (on-campus and distance education). The following table provides a sample of the types of services available within the University, and identifies the location of information published to facilitate access to these comprehensive services. A more complete list can be accessed from the School of Nursing web page at

<http://www.indstate.edu/nurs/LRC/CampusResources.html>.

Table 10.1 *Availability of Indiana State University Student Support Services*

Name of Support Service	Services Provided	Availability of Published Information
Admissions Office	Responsible for coordination and dissemination of information about the University and its programs to prospective undergraduate students/parents. Admissions of all undergraduate students.	<i>ISU Student Handbook 2001-2003. Undergraduate Catalog 2003-2004- Admission Requirements and Regulations.</i> http://www.indstate.edu/admissions/
School of Graduate Studies	Admission of all graduate students.	<i>Graduate Catalog 2001-2003- Admission to the School of Graduate Studies.</i> http://www.indstate.edu/sogs/
Student Academic Services Center	Academic advisement for open preference freshmen, academic counseling and support for student athletes, free tutoring, supplemental instruction (SI) services, support for students with	<i>I.S.U. Student Handbook 2001-2003. Undergraduate Catalog 2003-2004- A.S.A.C.</i> http://mama.indstate.edu/sasc/index.html

Name of Support Service	Services Provided	Availability of Published Information
	disabilities, administration for University 101: Learning in the University Community	
Public Safety Department	Emergency Services Traffic and Parking Services	<i>ISU Student Handbook 2001-2003.</i> Directory. http://www.indstate.edu/pubsatery/
Office of Student Ombudsperson	Resource for questions about University policies, procedures, and/or decisions relating to students	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Student Affairs, Other University Services. http://www.indstate.edu/ombuds/
Student Financial Services	Administers a variety of financial aid programs supported through federal, state and University resources Provides information and financial assistance	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Fees, Expenses, and Financial Aid. <i>Graduate Catalog 2001-2003-</i> Financial Information. http://www.indstate.edu/finaid/
Office of Registration and Records	Registration and enrollment Maintains academic records Issues transcripts Prepares degree audits Certifies candidates for degrees Prepares diplomas Provides statistics Produces schedule of classes	<i>Undergraduate Catalog 2003-2004.</i> http://www.indstate.edu/registrar
Student Health Center	Primary Health Care Maintenance of student health records	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Student Affairs, Consultive Services. http://www.indstate.edu/shc/
Student Health Promotion (part of Student Health Center)	Le Clubs fitness facilities The Alcohol and Other Drugs (A.O.D.) Education Program Sexuality Education Programs	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Student Affairs, Consultive Services. http://www.indstate.edu/shp/
Student Counseling Center	Crisis Intervention Personal and Career Counseling	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Student Affairs, Consultive Services. http://www.indstate.edu/cns/website/Homepage2.html
Marriage and Family Counseling Clinic- Department of Counseling, School of Education	Separation and Divorce Counseling Stress Management Therapy Life Adjustment counseling	<i>ISU Student Handbook 2001-2003.</i> http://counseling.indstate.edu/common/docclinic.html
Porter School Psychology Center- School of Education	Diagnosis and treatment of learning, reading, behavioral, social and emotional problems for children and adults	<i>ISU Student Handbook 2001-2003.</i> http://www.indstate.edu/soe/edschpsy/porter.html
Rowe Center for Communication Disorders- School of Education	Audiology Clinic Speech and Language Clinic	<i>ISU Student Handbook 2001-2003.</i> http://soe.indstate.edu/soefaculty/rowe.html
Psychology Clinic	Psychotherapy Marital and Family Therapy Child Therapy	<i>ISU Student Handbook 2001-2003.</i> http://www.indstate.edu/psych/clinic.html

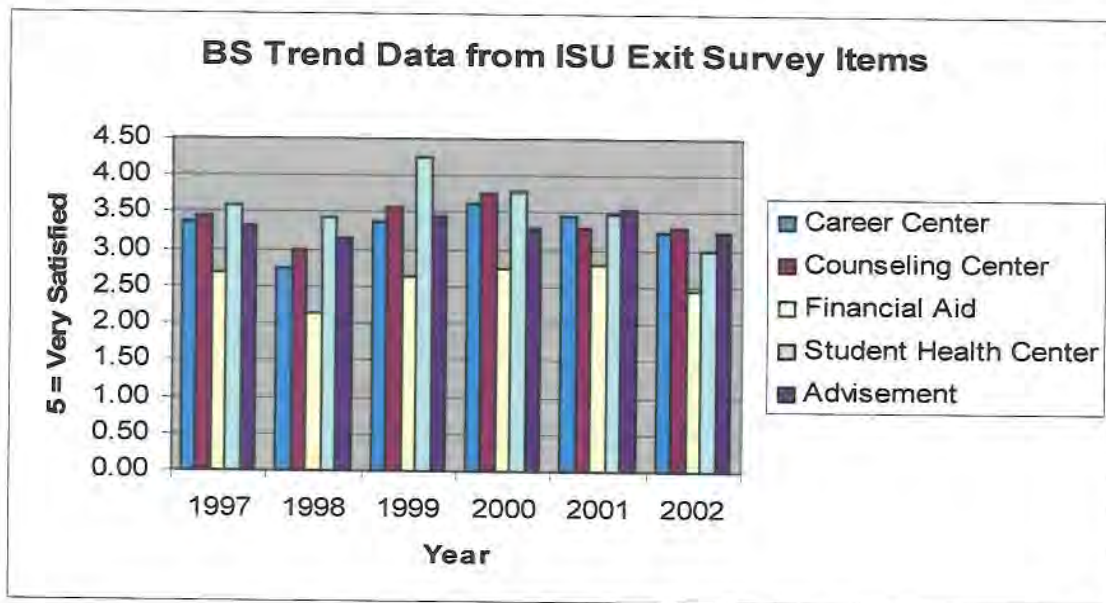
Name of Support Service	Services Provided	Availability of Published Information
	Psychological Assessment Consultation	
Early Childhood Education Center	Child Care Center/ Nursery School, provides comprehensive child services for the ISU and Terre Haute community, Provides site for academic research and training, ISU School of Education.	<i>ISU Student Handbook 2001-2003.</i> http://www.indstate.edu/childcare/
Writing Center	Assists students with writing tasks: prepare for writing, review drafts, or edit near-final copies Online Writing Center (OWL)	<i>ISU Student Handbook 2001-2003.</i> http://isu.indstate.edu/writing/
Cunningham Memorial Library	Instructional Services Electronic Data Base Searching Interlibrary Loan Services Distance Education Courses Diversity Information On-line (DIOL)	<i>ISU Student Handbook 2001-2003.</i> Directory. http://odin.indstate.edu http://odin.indstate.edu/level1.dir/dis.ed.dir/homepage.html or email libtrib@cml.indstate.edu http://cml.indstate.edu/dion/dion.html <i>Graduate Catalog 2001-2003-</i> General Information.
University Bookstore	Provides textbooks, magazines, class ring order service, general supplies, art supplies and gifts	<i>ISU Student Handbook 2001-2003.</i> http://indiana-state.bkstore.com
Career Center	Assistance with: Selecting a major, developing a resume, internships Career fairs On-campus interviews Candidate referrals	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> Consultive Services. http://career.indstate.edu/
Student Life Programs	Develops and promotes co-curricular opportunities for personal and professional development through student life programs: Campus Ministries, commuter students, fraternities and sororities, special events, Union Board, Student Government Association (S.G.A.).	<i>ISU Student Handbook 2001-2003.</i> http://web.indstate.edu/slp <i>Undergraduate Catalog 2003-2004-</i> Student Affairs, Student Activities and Centers.
Student Judicial Programs	Responsible for administering the Code of Student Conduct Assists student who believe their rights have been violated by the actions of other students	<i>ISU Student Handbook 2001-2003.</i> http://www.indstate.edu/sjp/
Diversity and Affirmative Action Office	Assistance in academic freedom and discrimination issues	<i>ISU Student Handbook 2001-2003.</i> http://www.indstate.edu/aaction/
University Testing Office	Credit by Examination Registration and information concerning institutional and national testing programs	<i>ISU Student Handbook 2001-2003.</i> http://web.indstate.edu/oirt/

Name of Support Service	Services Provided	Availability of Published Information
International Student Affairs Center	Support and Counseling for international students and scholars at ISU Activities to facilitate diverse cultural education for domestic students	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> <i>International Affairs Center.</i> http://baby.indstate.edu/iac/
Information Technology (IT) Services	Provides computing, networking, telephone, video, and audio resources	<i>ISU Student Handbook 2001-2003.</i> <i>Undergraduate Catalog 2003-2004-</i> <i>Information Services.</i> <i>Graduate Catalog 2001-2003-</i> <i>General Information.</i> http://web.indstate.edu/acns/user-serv/
Residential Life	Operation of residence halls	<i>Undergraduate Catalog 2003-2004-</i> <i>Fees, Expenses and Financial Aid.</i> http://web.indstate.edu/reslife/

University Exit Surveys were used to evaluate student satisfaction with support services.

The following table displays the survey data from baccalaureate nursing students for services selected for evaluation by the School of Nursing.

Table 10.2 *Baccalaureate Nursing Student Satisfaction with University Support Services*



The University has traditionally only surveyed graduating senior students; therefore, data have not been available for those students completing the associate degree until 2002. The mean scores reported from nursing students graduating from the AS program in 2002 for select services are as follows: Financial Aid, 2.89; Student Health, 3.63; Student Counseling, 3.5, and the Career

Center, 3.71. The overall mean for all University support services was 3.66, which exceeds the School of Nursing expected level of achievement.

The School of Nursing is committed to providing quality academic advising to its students. Nursing Non-Designated Students, those undergraduates who are beginning the program of studies in nursing, but are not yet admitted to the major, are advised by the Director of Student Affairs. Thereafter, the student is assigned by the respective Department Chairperson, to an advisor who teaches to the program in which the student is admitted. Master's degree students are assigned to faculty who teach in the area of specialization in which they are enrolled. All full-time faculty who have been in a tenure-track position for at least one-year have the responsibility to do academic advising. The responsibilities of the faculty advisor, student advisee and administration are outlined in the *Undergraduate Catalog 2003-2004*, Academic Information, p.16-17. Faculty post office hours to facilitate student access to advising services. Faculty inservice advising programs are scheduled by the Director of Student Affairs as needed. Students and their respective academic advisors have access to the Degree Audit Request System (DARS) via MyISU Portal at <http://myisu.indstate.edu>, which provides an overview of the student's achievements toward meeting degree requirements. Students have access via the web to information on general education program requirements found at <http://web.indstate.edu/gened/>, class schedules, registration, and drop/ add policies. Students may register via the web or via Indiana State University's touchtone scheduling system after seeking advisement.

Satisfaction with academic advising within the School of Nursing was evaluated using Exit surveys. The following table represents cumulative means, by program or track, for data collected over several semesters, the last being Spring 2003. More specific data may be viewed on the self-study support page at <http://web.indstate.edu/nurs/mary/nln/criterionsupport.htm>.

Table 10.3 *Nursing Student Satisfaction with Academic Advising*

Program	Advising prior to admission	Advising after admission
AD	3.53/5.0	3.65/5.0
BS	2.96/5.0	2.90/5.0
RN-BS	3.85/5.0	4.05/5.0
MS	3.46/5.0	4.17/5.0

The University has adopted several changes in its general education program over the last few years. In addition, the School of Nursing has modified its Associate Degree and Baccalaureate Programs. These changes have increased the challenge for academic advisors to stay abreast of curriculum requirements and policies. Also, the School has changed from having a few select faculty to serve as academic advisors, to including the role of advisor as a responsibility of all tenure/ tenure-track faculty (with the exception of new faculty in their first year of appointment). Many advisors are new to the role. This was done in an effort to equalize the workload, since the numbers of students in the baccalaureate program is rising.

b. academic/experiential qualifications of individuals responsible for student services.

University student support services are administered by qualified professionals.

Table 10.3 lists the qualifications of the directors for selected services. Resumes are available in the personnel files in the respective supervising Vice President's Offices, or Human Resources, and samples are located in the exhibits located in the NLNAC Resource Office of the School of Nursing.

Table 10.4 *Summary of Qualifications of Administrative Staff for University Student Services*

Student Service	Title	Name	Qualifications
Admissions Office	Director	Ronald Brown	MA, Geography/City and Urban Planning, Eastern Kentucky University. Banner 200 Student Systems Consultant. Director of Admissions and International Student Affairs, Maryville State University. Director of Admissions, Berea College.
Student Academic Services Center	Director	Catherine Baker	PhD, Secondary Education, Indiana State University. Concentration in curriculum, instruction, and reading education.

			NACADA member.
Public Safety Department	Director	William Mercier	Credentials unavailable
Office of Student Ombudsperson	Director	Michael Phillips	BS, Physical Education, 1969 Graduate student with major in College Student Personnel Director, I.S.U. Student Financial Aid, 1979-1995, Associate Dean of Students and Student Ombudsperson, ISU, 1995-2002
Student Financial Services Office	Director	Norman Hayes	Credentials unavailable
Office of Registration and Records	Registrar	Stacey Thomas	BS, Business Administration, 1992, Ohio State University Interim Registrar, ISU, 2001-2002 AACRAO
Student Health Center	Director	Fran Drake	MS, Safety Management, Indiana State University, 1994. MS, Community Health, Indiana State University, 1984. Registered Nurse, Indiana
Student Counseling Center	Director	Richard Rini	PhD, Clinical Psychology, 1984, St. John's University Specialization: Adolescent & Young Adult Treatment; Biofeedback Licensed Psychologist, IN
Marriage and Family Counseling	Director	J. Lawrence Passmore	PhD, HSPP, 1968, University of Missouri-Columbia. Psychologist Private Practice Certificate, 1976, Indiana.
Porter School Psychology Center	Director	Lisa Bischoff	Credentials unavailable
Psychology Clinic	Program Coordinator, Director of Clinical Training	Michael Murphy	PhD, 1974, Kent State University. Licensed Psychologist State of Indiana. Diplomate in Clinical Psychology, American Board of Professional Psychology. American Psychology Association Fellow
Early childhood Education Center	Director	Gail Gottschling	MA, Human Development, 1980, Pacific Oaks College, Pasadena, CA
The Writing Center	Supervisor	Peter Carino	PhD, University of Illinois, Professor of English and Associate Director of Writing Programs. Rhetoric and Composition, Modern American Fiction.
Cunningham Memorial Library	Dean of Library Services	Myrna McCallister	MLS, Library Science, 1980, University of Michigan. Course work and comprehensive exams completed for Ph.D. Library Director, University of Baltimore, 1998-2003. Library Director, Muhlenberg College, 1994-1998.
University Bookstore	Assistant Manager	Terri Lotz	BS, Business Management, Davenport College, 1986.

Career Center	Interim Director	Cathy McGregor-Foster	MS, Student Development in Higher Education, 1997, Central Connecticut State University Graduate Internships: Career Counseling for Bachelor of General Studies Students, and Academic Advising Assistant Director, Career Center, MS, College Student Personnel, 1984, Indiana State University. Graduate Certificate, Management Information Processing, 1985, Indiana State University., 1998-2002
Student Life Programs	Director	Alfred Perone	MS, College Student Personnel, 1984, Indiana State University. Graduate Certificate, Management Information Processing, 1985, Indiana State University.
Student Judicial Programs	Director	Bonita McGee	Master of Public Administration, 1990, Indiana State University. Interim Director, Affirmative Action Office, 2002-2002, Indiana State University. Assistant to the Vice President of Student Affairs, 1991-1993, Indiana State University.
Diversity and Affirmative Action Office	Executive Director	Susan Moss	PhD, Higher education Administration, University of Wisconsin-Madison. JD, Washington College of Law, American University, Washington, DC Director, Office of Diversity and Equity, San Diego State University. Vice-Chancellor of Affirmative Action and Equal Opportunity, University of Wisconsin-Whitewater.
International Student Affairs Center	Executive Director, and Associate Dean	Gaston Fernandez	PhD, Political Science, 1981, University of Wisconsin, Madison. Certification, Management Development Program, 1992 Harvard University
Information Technology (IT) Services	Associate Vice President for Academic Affairs, Chief Information Officer (CIO),	Edward R. Kinley	PhD, Educational Administration-Curriculum and Instruction, University of Nebraska, Lincoln, NE. Director of Information Technology, Eastern New Mexico State University, 1994-2002.
Residential Life	Director of Programs	Mary Ellen Linn	M., College Student Personnel Services, 1975, Indiana State University. Member, National Association of Student Personnel Administrators.

100% of administrators meet University guidelines with a minimum of a bachelor's or master's degree. Each is evaluated annually based on the job description.

c. distance education students have access to appropriate range of student services.

Indiana State University offers distance education through several formats; web, correspondence (print-based), televised (through the assistance of Indiana Higher Education Telecommunications System), and videotapes. The Office of Student Support Services provides assistance to distance students in the areas of admissions, registration, credit transfer, financial aid, as well as attaining textbooks. Additional services include a free listserv; ISU Portal for access to University records, email account, class schedules, online registration, and courses; library services; and technical support for accessing the web and televised courses. Career counseling is accessible. Students can easily link to distance education information from the ISU home page. Exit and University survey data on the evaluation of student support services by distance education students are included in group data reported above.

Criterion 11: Policies concerned with educational and financial records are established and followed.			Operational Definition: Guidelines and rules for permanent student educational and financial records Expected Level of Achievement/Decision Rule for Action: Policies related to maintenance of records will be followed. Outcome: Expected level of achievement not met for all programs, see actions.			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Educational Records	Office of Student Affairs, Registrar	Director of Student Affairs, Registrar	September of Even Years	Random sample of records to audit for compliance with policy	Random sample of student files audited by members of EOAC. Deficiencies found and noted.	Office of Student Affairs reviewed regulations from ISBN and polices from other schools of nursing. Developed a file checklist to monitor files for completeness. New office staff hired in Student Affairs Office to assist with filing process.
Financial Records	Office of Financial Aid, Bursar, Banner Computer Database	Director of Financial Aid, Bursar, Director of Student Affairs	As needed based on scholarship/funding considerations.	Review of student financial data.	Requirements related to Family Education Records and Privacy Act (FERPA) are maintained.	Continue to Monitor

CRITERION 11: Policies concerned with educational and financial records are established and followed.

EXPECTED LEVEL OF ACHIEVEMENT: Policies related to maintenance of records will be followed.

Documentation confirms:

a. procedures for maintenance of educational records.

The School of Nursing and Indiana State University are in compliance with the provisions of the Family Educational Rights and Privacy Act (FERPA) of 1974, as amended. The University policy statement may be found in *Indiana State University Handbook* (July 2001), V-15. The entire act is located on the Affirmative Action/Diversity web page at

<http://www.indstate.edu/humres/affavtdiversity/federal&indianaStatelaws.html>. Non-disclosure and confidentiality statements may also be found in the current graduate and undergraduate catalogs and the class schedules published for each term (online or hard copy). *Indiana State University 2002-2003 University Standards*, Section V, p 16-17, outlines the rights of a student under the FERPA Act. The Office of Vice President for

Student Affairs is responsible for the development of this document with input from students, faculty, staff and administration. The Office of the Registration and Records also follows the recommendations contained in the *Academic Record and Transcript Guide* (1996) published by American Association of Collegiate Registrars and Admissions Officers. Access to further information about guidelines for implementing the Act, a list of records housed on this campus, and the location and custodian for each may be found in the Office of the Vice President for Student Affairs, Parsons Hall 203.

The MyISU portal, central website for the ISU community, provides password protected access for students to personal information. Students may view or change biographical information, change passwords, view grades, schedules, holds, transcripts and account information, financial

aid status, awards and eligibility information, and view their personal DARS report (Degree Auditing and Reporting System). Access to electronic records is accessible to academic advisors, staff, and administrators on a limited basis as needed.

In addition to following federal regulations related to the maintenance of student records, the School of Nursing is guided by Indiana Code, Title 25, Nurses, 848 IAC 1-2-22 Records and School Bulletin. This rule requires a provision for safe storage of records, and indicates which documents must be maintained in the student's file. Records are stored in a secure area in the Office of Student Affairs. The Dean, Assistant Dean, Department Chairpersons, and Academic Advisors, in addition to the Director of Student Affairs and staff, have access to files on a need-to-know basis related to his/her job within the School. A procedure for signing out a file is in place. Students must show picture ID in order to access information in their personal files.

A checklist is included in each file to identify mandatory as well as optional documents. Within the School of Nursing student records are maintained for 10 years after graduation. Transcripts are maintained by the University indefinitely. The School maintains inactive files of students in good standing for 1 year, and files of dismissed students indefinitely.

b. procedures for maintenance of financial records.

Policies and procedures related to the financial records of students at Indiana State University were developed and are implemented in accordance with FERPA guidelines. The State Board of Accounts and Audits requirements for review of records is also followed.

Financial records are maintained in the Office of Student Financial Services and other offices with which the student has been involved. The University is in transition of changing from

maintaining hard copies of files, to maintaining them electronically. A password is required for access. A confidentiality statement is required to be signed by staff who have access to financial aid information in this office. Financial records are maintained for 3 years after separation of the student from the University.

IV. CURRICULUM & INSTRUCTION

**The curriculum is designed to accomplish
its educational and related purposes.**

Standard IV: CURRICULUM AND INSTRUCTION

The program accomplishes its educational and related purposes.

<p>Criterion 12: Curriculum developed by nursing faculty flows from the nursing education unit philosophy/mission through an organizing framework into a logical progression of course outcomes and learning activities to achieve desired program objections/outcomes.</p>				<p>Operational Definition: Course of study leading to an Associate of Science Degree, a Bachelor's of Science Degree or a Master's of Science Degree with a major in nursing which reflects a logical progression from program philosophy through to program outcomes.</p> <p>Expected Level of Achievement/Decision Rule for Action: Curriculum reflects program philosophy and outcomes and is presented in a logical sequence that increases in complexity. Review of core curriculum by faculty committees ensures rigor, currency and cohesiveness of nursing courses. Documentation demonstrates evidence that instruction and supervised practice follows a plan, includes learning experiences required to develop competencies needed for graduation, and is measured by appropriate evaluation tools and methods.</p> <p>Outcome: Expected level of achievement met for all programs.</p>		
Process				Implementation		
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Integrity of philosophy, organizing, framework, course outcomes, and program outcomes	CAAC, Exec, Nursing Council Minutes Course syllabi Student and Faculty Handbooks Course team Minutes and/or end of semester reports	CAAC, Exec, Nursing Council, Course teams	April of Odd years	Faculty committee review of curriculum plans, philosophy, organizing framework, program outcomes and syllabi.	Major AS curriculum modification based on evaluation data. Revised curriculum started Spring 2002. Major BS curriculum modification based on evaluation data. Latest revision started Fall 2001. Revision to RN-BS program based on student and potential student and faculty input. Revised outcomes for MS program to be more congruent with organizing framework Spring 2003.	Continue to monitor and update as needed.

CRITERION 12: Curriculum development by nursing faculty flows from the nursing education unit philosophy / mission through an organizing framework into a logical progression of course outcomes and learning activities to achieve desired program objectives / outcomes.

EXPECTED LEVEL OF ACHIEVMENT: Curriculum reflects program philosophy and outcomes and is presented in a logical sequence that increases in complexity. Review of core curriculum by faculty committees ensures rigor, currency and cohesiveness of nursing courses. Documentation demonstrates evidence that instruction and supervised practice follows a plan, includes learning experiences required to develop competencies needed for graduation, and is measured by appropriate evaluation tools and methods.

Documentation confirms:

- a. **integrity of the curriculum as evidenced by congruence among the philosophy, organizing framework, program objectives / outcomes, curriculum design, course progression, and outcome measures.**

The School of Nursing has offered the baccalaureate degree since the start of the program in 1963. The option to exit with an associate degree did not begin until 1977. The curriculum separation of a generic Baccalaureate of Science degree with a major in nursing and the stand-alone Associate of Science degree with a major in nursing occurred in 2000. The master's degree program admitted the first class in 1986. Curricula has been modified, revised, and are currently being refined as part of the systemic plan of program improvement.

The philosophy is based on the paradigm of nursing, environment, health, and client, in conjunction with the organizing framework that articulates role outcomes and is based on differentiated expectations of the three nursing programs. Considerations for differentiated education includes: the extent of general education, complexity and length of the program, concentration on nursing research, consideration of societal needs, and the legal scope of practice and essential services that the graduate safely provides. Nursing Council approved the model of Comparison Overview of Program Role Outcomes roles during the spring semester of 2003. The total integration of this model is in progress for the baccalaureate and graduate program. Refer to Table 12.1

Table 12.1 Comparison Overview of Program Role Outcomes

ASSOCIATE	BACCALAUREATE	MASTERS
Critical Thinker: A critical thinker who engages in purposeful, reflective reasoning and analysis to form beliefs and guide decision-making.	Critical Thinker: A critical thinker who demonstrates purposeful thinking, intellectual integrity, solid reasoning and creative problem solving as the basis for making decisions and clinical judgments.	Critical Thinker: A critical thinker who utilizes the intellectually disciplined processes of conceptualizing, applying, analyzing, synthesizing, and evaluating information as a guide for advanced nursing practice.
Communicator: A communicator who makes accurate perceptions, interpretations, and expressions, in a style sensitive to the purpose and context of the interactions	Communicator: A communicator who incorporates goal-directed and focused dialogue into nurse-client interactions, demonstrates effective listening, reading, writing and speaking skills, and uses technology appropriately to facilitate management of information.	Communicator: A communicator who utilizes multiple modalities strategically for the optimal transmission of messages and interaction with the intended audience.
Provider of Care: A provider who meets the health needs of culturally diverse clients throughout the life span	Provider of Care: A provider of care who assumes a variety of roles in the delivery of holistic, competent, and culturally sensitive nursing care in multiple settings.	Advanced Provider: A provider who is competent to apply advanced nursing knowledge including culturally competent care, assessment, prescriptive interventions, evaluation, collaboration, and education.
Manager of Care: A manager of care, in collaboration with the client and members of the health care team, who utilizes resources to meet client needs and support organizational outcomes.	Leader: A leader who provides responsible direction in the management of human, fiscal, and material resources necessary for achieving quality health care outcomes.	Leader: A leader who inspires, persuades, and mentors others in the implementation of organizational visions and missions.
Member of the Nursing Profession: A member of the nursing profession who adheres to standards of professional practice and assumes accountability for his/her own behaviors.	Professional: A professional who demonstrates accountability and responsibility for nursing judgments and actions within an ethical and legal framework.	Professional: A professional who is a role model through adherence to the ethical, legal, and professional standards of the discipline specialty area.
Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and technology.	Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and technology.	Life-long Learner: A life-long learner who incorporates new knowledge related to culture, ecology, economics, politics, science, and technology.
	Advocate: An advocate changes that promote health for individuals, families, and communities.	Advocate: An advocate who critiques, develops policies, and participates in activities that promotes positive change.

	Coordinator of Community Resources: A coordinator who collaborates with members of the interdisciplinary health care team in multiple settings.	Coordinator of Community Resources: A coordinator who collaborates with agencies and other providers for the most effective utilization of resources.
		Knowledge Contributor: A knowledge contributor who synthesizes, designs, conducts, and implements research to bring about changes and make improvements in professional practice.

The Curriculum Committee and Academic Affairs Committee is responsible for formulating, implementing and evaluating policies and procedures pertaining to courses and curricula.

Examples of curriculum improvements are the definition of the graduate roles and competencies, the development of baccalaureate competencies for each level, and the refinement of the associate degree course descriptions. Competencies are leveled for the AD and BS programs. The competencies are not leveled for the master's degree program. The initial core graduate courses that are required for all nursing graduate students serve as the first level and foundation for graduate studies across all majors and role concentrations. The following charts present Role Outcomes and Level Competencies for each program.

Associate Degree Nursing Program Role Outcomes and Level Competencies

Critical Thinker: A critical thinker who engages in purposeful, reflective reasoning and analysis to form beliefs and guide decision-making.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Uses elements of critical thinking when forming plans and making decisions. 2. Identifies concepts from the sciences, humanities, and nursing in providing nursing care. 	<ol style="list-style-type: none"> 1. Uses critical thinking when analyzing clinical decision-making. 2. Evaluates client care decision-making at each step of the nursing process. 3. Applies concepts from the sciences, humanities, and nursing in providing nursing care.

Communicator: A communicator who makes accurate perceptions, interpretations, and expressions, in a style sensitive to the purpose and context of the interactions.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Communicates basic information related to patient care clearly and efficiently. 2. Demonstrates text and computer documentation of selected patient care information. 	<ol style="list-style-type: none"> 1. Interprets interactions collected from clients and significant support person(s). 2. Utilizes therapeutic communication skills when interacting with clients and significant support person(s). 3. Demonstrates use of multiple media to convey information in a variety of settings.

Provider of Care: A provider who meets the health needs of culturally diverse clients throughout the life span.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Identifies the impact of environmental, developmental, emotional, cultural, religious, and spiritual influences on the client's health status. 2. Assesses the client's health status by performing a physical, cognitive, psychosocial, and functional assessment. 3. Plans client care based on selected nursing diagnoses. 4. Provides accurate and safe nursing care. 5. Demonstrates caring behavior toward the client, significant person(s), peers, and other members of the health care team. 6. Teaches the client and significant support person(s) the information and skills needed to achieve optimal health. 7. Evaluates the plan of care. 	<ol style="list-style-type: none"> 1. Assesses the impact of environmental, developmental, emotional, cultural, religious, and spiritual influences on the client's health status. 2. Assesses the client's health status by performing a physical, cognitive, psychosocial, and functional assessment. 3. Plans client care based on nursing diagnoses. 4. Makes clinical judgments and management decisions to provide accurate and safe nursing care. 5. Demonstrates caring behavior toward the client, significant person(s), peers, and other members of the health care team. 6. Teaches the client and significant support person(s) the information and skills needed to achieve optimal health. 7. Evaluates learning outcomes. 8. Evaluates and modifies the plan of care.

Manager of Care: A manager of care, in collaboration with the client and members of the health care team, who utilizes resources, to meet client needs and support organizational outcomes.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Prioritizes client care for 1 client. 2. Identifies nursing strategies that provide cost efficient care. 3. Identifies aspects of client care provided by qualified assistive personnel. 4. Interacts with others to solve problems in achieving client goals. 	<ol style="list-style-type: none"> 1. Prioritizes client care for multiple clients. 2. Implements nursing strategies to provide cost efficient care. 3. Delegates and evaluates the activities of assistive personnel. 4. Facilitates continuity of care within and across health care settings. 5. Collaborates creatively and openly with others to solve problems to achieve client goals and outcomes. 6. Verbalizes common types of health care delivery systems. 7. Verbalizes the nurse's role in continuous quality improvement/performance improvement activities.

Member of the Nursing Profession: A member of the nursing profession who adheres to standards of professional practice and assumes accountability for his/her own behaviors.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Describes the roles and responsibilities of interdisciplinary health care team members. 2. Participates as a member of the interdisciplinary health care team. 3. Practices within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice. 4. Demonstrates accountability for nursing care given by self. 5. Maintains organizational and client confidentiality. 	<ol style="list-style-type: none"> 1. Participates actively on the interdisciplinary health care team. 2. Practices within the ethical, legal, and regulatory frameworks of nursing, and standards of professional nursing practice. 3. Demonstrates accountability for nursing care given by self and/or delegated to others. 4. Maintains organizational and client confidentiality.

Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and technology.

Level One (Semester 1 & 2)	Level One (Semesters 3, 4, & 5)
<ol style="list-style-type: none"> 1. Verbalizes the value of the importance of life-long learning. 2. Recognizes the impact of historic, economic, social, and demographic forces on the delivery of health care. 	<ol style="list-style-type: none"> 1. Develops a plan to meet self-learning needs. 2. Evaluates the impact of historic and current economic, social, and demographic forces on the delivery of health care.

Baccalaureate Nursing Program Role Outcomes and Level Competencies

Critical Thinker: A critical thinker who demonstrates purposeful thinking, intellectual integrity, solid reasoning and creative problem solving as the basis for making decisions and clinical judgments.

Level One (Semesters 1&2)	Level Two (Semesters 3&4)	Level Three (Semesters 5&6)	Level Four (Semesters 7&8)
<ol style="list-style-type: none"> 1. Defines critical thinking and how it relates to nursing. 2. Acquires theoretical and empirical knowledge from the sciences and humanities. 3. Identifies that more than one alternative exists when considering solutions. 4. Identifies that data may be interpreted differently. 	<ol style="list-style-type: none"> 1. Recognizes how to apply critical thinking in making decisions, clinical judgment, and in problem solving. 2. Compares theoretical and empirical knowledge from the sciences, humanities, and nursing in organizing, planning, and providing care in collaboration with individuals and families. 3. Lists various alternatives when considering solutions to identified health needs of individuals and families. 4. Lists various viewpoints in the interpretation of data and in determining conclusions. 	<ol style="list-style-type: none"> 1. Develops skills in applying critical thinking in making decisions, clinical judgment, and in problem solving. 2. Analyzes theoretical and empirical knowledge from the sciences, humanities, and nursing in organizing, planning, and providing care in collaboration with individuals, families, and groups. 3. Compares multiple alternatives when considering solutions to identified health needs of individuals, families, and groups. 4. Compares diverse viewpoints in the interpretation of data and in determining conclusions. 	<ol style="list-style-type: none"> 1. Demonstrates critical thinking in making decisions, clinical judgment, and in problem solving. 2. Synthesizes theoretical and empirical knowledge from the sciences, humanities, and nursing in organizing, planning, and providing care in collaboration with individuals, families, groups and communities. 3. Selects appropriate alternatives when considering solutions to identified health needs of individuals, families, groups, and communities. 4. Analyzes diverse viewpoints in the interpretation of data and in determining conclusions.

Communicator: A communicator who incorporates goal-directed and focused dialogue into nurse-client interactions, demonstrates effective listening, reading, writing and speaking skills, and uses technology appropriately to facilitate management of information.

Level One (Semesters 1&2)	Level Two (Semesters 3&4)	Level Three (Semesters 5&6)	Level Four (Semesters 7&8)
1. Applies therapeutic communication skills in scenario situations.	1. Develops therapeutic communication skills in interactions with individuals and families.	1. Applies therapeutic communication skills in interactions with individuals, families, and groups.	1. Incorporates therapeutic communication skills in interactions with individuals, families, groups, and communities.
2. Communicates effectively with peers, faculty, and small groups.	2. Communicates effectively with individuals, families, and members of the interdisciplinary health care team.	2. Communicates effectively with individuals, families, groups, and members of the interdisciplinary health care team.	2. Communicates effectively with individuals, families, groups, communities and members of the interdisciplinary health care team.
3. Identifies writing skills and the use of a standard format.	3. Develops skills in college-level writing.	3. Increases in the consistent use of appropriate college-level writing skills consistent with published expectations and standards.	3. Demonstrates appropriate college-level writing skills consistent with published expectations and standards.
4. Identifies technology and resources available to obtain and present information.	4. Uses technology for obtaining and presenting information.	4. Develops skills in the use of technology for seeking, sorting, selecting, and presenting relevant information.	4. Utilizes technology for seeking, sorting, selecting, and presenting relevant information.

Provider of Care: A provider of care who assumes a variety of roles in the delivery of holistic, competent and culturally sensitive nursing care in multiple settings.

Level One (Semesters 1&2)	Level Two (Semesters 3&4)	Level Three (Semesters 5&6)	Level Four (Semesters 7&8)
1. Identifies assessment as a nursing function. 2. Provides culturally sensitive active listening during role play and structured situations.	1. Develops nursing assessment skills. 2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals and families in multiple settings.	1. Assesses wellness, health needs, and risks of individuals, families, and groups. 2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals, families, and groups in multiple settings.	1. Assesses wellness, health needs, and risks of individuals, families, groups, and communities. 2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals, families, groups, and communities in multiple settings.
3. Identifies the principles of the teaching learning process.	3. Educates individuals, families, and peers about selected topics.	3. Educates individuals, families, and groups about wellness, disease/illness, medical-technical aspects, symptom management, self-care management, resource management, and alternative methods of healing.	3. Educates individuals, families, groups, and communities about wellness, disease/illness, medical-technical aspects, symptom management, self-care management, resource management, and alternative methods of healing.
4. Identifies the evaluation of client outcomes as a nursing function.	4. Evaluates client outcomes.	4. Develops skills in evaluating client outcomes and the effectiveness of professional nursing practice.	4. Evaluates client outcomes and the effectiveness of professional nursing practice.
5. Identifies that revisions to the plan of care will occur based on individual client outcomes.	5. Revises plan of care in collaboration with individual and family.	5. Revises plan of care as appropriate in collaboration with individual, family, group, and members of the interdisciplinary health care team.	5. Revises plan of care as appropriate in collaboration with individual, family, group, community, and members of the interdisciplinary health care team.
6. Identifies sources of nursing information.	6. Identifies research and evidence-based information for application to nursing.	6. Analyzes research and evidence-based information for application to nursing.	6. Evaluates research and evidence-based information for application to nursing.

Leader: A leader who provides responsible direction in the management of human, fiscal, and material resources necessary for achieving quality health care outcomes.

Level One (Semester 1&2)		Level Two (Semesters 3&4)		Level Three (Semesters 5&6)		Level Four (Semesters 7&8)	
1.	Identifies leadership as one of the roles of the professional nurse.	1.	Identifies leadership functions in guiding members of the interdisciplinary health care team.	1.	Assumes a leadership role in selected and guided situations.	1.	Assumes a leadership role in guiding members of the interdisciplinary health care team.
2.	Identifies trends that influence the cost in health care.	2.	Identifies methods of cost savings in health care.	2.	Compares methods of cost savings in health care.	2.	Adopts a consumer-oriented approach in the delivery of cost-effective care.
3.	Identifies the importance of indicating therapeutic goals.	3.	Identifies therapeutic goals for providing quality care in collaboration with individuals and families.	3.	Prioritizes therapeutic goals for providing quality care in collaboration with individuals, families, and groups.	3.	Prioritizes therapeutic goals for providing quality care in collaboration with individuals, families, groups, and communities.
4.	Practices self-management for the achievement of academic success.	4.	Identifies management functions in the health care settings.	4.	Identifies human, fiscal, and material resources required for providing care.	4.	Compares the connection between human, fiscal, and material resources required for providing care.
5.	Identifies that each state has a nurse practice act.	5.	Identifies the steps and methods of delegation consistent with the Indiana Nurse Practice Act.	5.	Compares tasks that could be delegated to licensed and non-licensed caregivers in a manner consistent with the Indiana Nurse Practice Act.	5.	Delegates appropriate functions to licensed and non-licensed caregivers in a manner consistent with the Indiana Nurse Practice Act.
6.	Identifies the role of the supervisor in health care settings.	6.	Reports information to supervisor.	6.	Compares the methods of supervision observed in practice.	6.	Performs selected supervision activities related to the actions of licensed and non-licensed caregivers.

Professional: A professional who demonstrates accountability and responsibility for nursing judgments and actions within an ethical and legal framework.

Level One (Semester 1&2)		Level Two (Semesters 3&4)		Level Three (Semesters 5&6)		Level Four (Semesters 7&8)	
1.	Identifies the sources of legal and ethical standards in professional nursing practice.	1.	Practices within an ethical and legal framework and standards of professional nursing practice.	1.	Practices within an ethical and legal framework and standards of professional nursing practice.	1.	Practices within an ethical and legal framework and standards of professional nursing practice.
2.	Defines accountability and responsibility in professional nursing practice.	2.	Demonstrates accountability and responsibility for one's own choices and behaviors related to nursing care.	2.	Demonstrates accountability and responsibility for one's own actions, clinical judgments, and decision-making.	2.	Demonstrates accountability and responsibility for one's own actions, clinical judgments, and decision-making.
3.	Identifies ethical and legal issues surrounding health care dilemmas.	3.	Examines ethical and legal issues surrounding health care dilemmas.	3.	Compares various models for ethical and legal decision making surrounding health care dilemmas.	3.	Demonstrates ethical and legal decision making surrounding health care dilemmas.
4.	Describes client and organizational confidentiality.	4.	Implements client and organizational confidentiality.	4.	Protects client and organizational confidentiality.	4.	Protects client and organizational confidentiality.

Life-long Learner: A life-long learner who adapts to changes related to culture, ecology, economics, politics, and the expansion of scientific knowledge and technology.

Level One (Semester 1&2)		Level Two (Semesters 3&4)		Level Three (Semesters 5&6)		Level Four (Semesters 7&8)	
1.	Defines how cultural beliefs, values, and practices influence the health care.	1.	Explores how cultural beliefs, values, and practices influence the health care of individuals and families.	1.	Compares how different cultural beliefs, values, and practices influence the health care of individuals, families, and groups.	1.	Considers how cultural beliefs, values, and practices influence the health care of individuals, families, groups, and communities and plans accordingly.
2.	Identifies factors that influence health care delivery.	2.	Describes how ecological factors, economics, and the political arena shape health care policies and delivery of care.	2.	Compares how ecological factors, economics, and the political arena shape health care policies and delivery of care.	2.	Analyzes how ecological factors, economics, and the political arena shape health care policies and delivery of care.
3.	Defines life-long learning.	3.	Lists sources for continual professional development in nursing.	3.	Identifies a plan for life-long learning and attends a continuing education offering.	3.	Assumes responsibility to maintain current knowledge in professional nursing practice by articulating a plan for life-long learning.
4.	Verbalizes the value of nursing information.	4.	Recognizes the use of nursing research for standards of practice.	4.	Integrates nursing research in providing nursing care and participates in research activities as directed by others.	4.	Promotes excellence in nursing through regular attendance at educational activities designed to expand knowledge and competencies.

Advocate: An advocate for policy changes that promote health for individuals, families, and communities.			
Level One (Semester 1&2)	Level Two (Semesters 3&4)	Level Three (Semesters 5&6)	Level Four (Semesters 7&8)
1. Identifies advocacy as one of the roles of the professional nurse.	1. Recognizes activities to improve health care practices.	1. Participates in activities to improve health care practices.	1. Participates in activities to improve health care practices and policies.
2. Discusses the nurse's involvement in socio-political issues.	2. Identifies steps in the change process.	2. Identifies role of political activism.	2. Advocates for policy changes that promote health for individuals, families, groups, and communities.
3. Identifies health care issues in current events.	3. Identifies health care policies.	3. Compares health care policies in a variety of health care settings.	3. Analyzes the role of the nurse policy developer in a variety of health care settings.

Coordinator of Community Resources: A coordinator who collaborates with members of the interdisciplinary health care team in multiple settings.			
Level One (Semester 1&2)	Level Two (Semesters 3&4)	Level Three (Semesters 5&6)	Level Four (Semesters 7&8)
1. Identifies members of the interdisciplinary health care team.	1. Interacts with members of the interdisciplinary health care team.	1. Coordinates care with members of the interdisciplinary health care team.	1. Coordinates care with members of the interdisciplinary health care team from a variety of health care settings.
2. Lists community resources to meet health needs and to reduce health risks.	2. Selects appropriate community resources to meet health needs for individuals and families.	2. Develops skill in assisting individuals, families, and groups in accessing community resources to meet health needs.	2. Assists individuals, families, groups, and communities in accessing community resources to meet health needs.
3. Recognizes the value of wellness and health promotion.	3. Identifies services and programs that promote wellness.	3. Compares services and programs that promote wellness for disenfranchised and underserved populations.	3. Refers individuals, families, groups, and communities to services and programs that promote wellness.

Graduate Nursing Program Role Outcomes and Competencies

Critical Thinker: A critical thinker who utilizes the intellectually disciplined processes of conceptualizing, applying, analyzing, synthesizing, and evaluating information as a guide for advanced nursing practice.

1. Synthesizes theoretical frameworks used in the integration of knowledge from related sciences and humanities, clinical knowledge, and nursing sciences as the foundations for advanced nursing practice.
2. Analyzes the significance of advanced nursing knowledge as it relates to selected populations.

Communicator: A communicator who utilizes multiple modalities strategically for the optimal transmission of messages and interaction with the intended audience.

1. Communicates effectively both orally and in writing, in a manner that commands professional attention.
2. Uses technology strategically to access, organize, document, and present information.

Advanced Provider: A provider who is competent to apply advanced nursing knowledge including culturally adaptive care, assessment, prescriptive interventions, evaluation, collaboration, and education.

1. Meets advanced practice competencies for selected populations.
2. Provides safe, cost-effective, and culturally adaptive advanced practice nursing for special populations.
3. Evaluates outcomes of advanced practice nursing interventions, methods, or strategies.
4. Collaborates with others in the implementation of advanced practice nursing.
5. Provides expert consultation to others to resolve complex problems related to client-care situations, and /or health care delivery systems, and/or education.
6. Develops, implements, and evaluates educational programs for selected populations.

Leader: A leader who inspires, persuades, and mentors others in the implementation of organizational visions and missions.

1. Assumes a leadership role in one or more areas: health care, professional organizations, community, research, and/or education.
2. Interprets the role and functions of the nurse prepared at the master's level to clients, nurses and other health care providers, and policy-makers.
3. Works collegially to design, implement, and evaluate programs for performance improvement.

Professional: A professional who is a role model through adherence to the ethical, legal, and professional standards of the discipline specialty area.

1. Models professional behavior.
2. Demonstrates accountability for advanced practice nursing decisions based on ethical and professional standards.
3. Interprets the role functions of expert clinician, educator, researcher, administrator, and consultant and implements these roles, as appropriate, based on specialty preparation.

Life-long Learner: A life-long learner who incorporates new knowledge related to culture, ecology, economics, politics, science, and technology.

1. Assumes responsibility to maintain current knowledge in professional nursing practice by articulating a plan for life-long learning.
2. Promotes excellence in nursing through regular attendance at educational activities designed to expand knowledge and competencies.
3. Seeks and participates in professional and personal growth promoting activities.

Advocate: An advocate who critiques, develops policies, and participates in activities that promote positive change.

1. Participates in activities to improve health care practices and policies.
2. Assumes the role of policy developer.
3. Advocates for policy changes that promote health.

Coordinator of Community Resources: A coordinator who collaborates with agencies and other providers for the most effective utilization of resources.

1. Coordinates care with others.
2. Refers individuals, families, groups, communities, students, and organizations to appropriate resources.
3. Negotiates services for selected populations.

Knowledge Contributor: A knowledge contributor who synthesizes, designs, conducts, and implements research to bring about changes and make improvements in professional practice.

1. Evaluates the implementation of nursing research.
2. Contributes to nursing knowledge through validation, refinement, and extension of research.
3. Applies, designs, conducts, and implements research to bring about change and make improvements in their own professional environment.

- b. a logical, sequential curriculum plan where courses content increase in difficulty and complexity

Associate Degree Program. The five semester course progression for the AD program is listed on the School of Nursing web page, and the undergraduate catalog.

Table 12.2 *Associate Nursing Degree Program of Study*

	Credit Hours
Fall Semester	
NURS 151 <i>Role Socialization in Nursing</i>	1
Communications 101 #	3
Psychology 101+ ##	3
Life Sciences 231+ ## <i>Human Anatomy and Physiology I</i>	2
Life Sciences 231L+ ## <i>Human Anatomy and Physiology I Laboratory</i>	1
Chemistry 100+ ##	3
Chemistry 100L+ ##	1
Info Technology Requirement #	0-3
	14-17
Spring Semester	
NURS 152 <i>Introduction to Nursing Care</i>	4
NURS 153 <i>Introduction to Nursing Assessment</i>	1
NURS 154 <i>Introduction to Drug Therapy I</i>	1
English 105 or 107*+ #	3
Educational Psychology 221 or Psychology 266 or Family and Consumer Sciences 103+ ##	3
Life Sciences 241+ <i>Human Anatomy and Physiology II</i>	2
Life Sciences 241L + <i>Human Anatomy and Physiology II Laboratory</i>	1
	15
Fall Semester	
NURS 160 <i>Nursing Care of Adults with Health Alterations</i>	6
NURS 162 <i>Nursing Care of the Childbearing Family</i>	4
NURS 164 <i>Drug Therapy II</i>	1
Life Sciences 274 + <i>Introductory Microbiology</i>	2
Life Sciences 274L + <i>Introductory Microbiology Laboratory</i>	1
	14
Spring Semester	
NURS 252 <i>Nursing Care of Adults with Complex Health Alterations</i>	6
NURS 254 <i>Drug Therapy III</i>	1
NURS 256 <i>Psychosocial Nursing</i>	4
Mathematics 102 or exemption on exam #	0-3
	11-14
Fall Semester	
NURS 260 <i>Nursing Care of Children</i>	4
NURS 262 <i>Nursing Practicum</i>	4
NURS 263 <i>Role Transition in Associate Degree Nursing</i>	2
Multicultural Studies Elective##	3
	13

*Must complete English 101 and English 105 if SAT verbal is below 510 or ACT verbal is below 20. Take English 107 only if SAT verbal is 510 or ACT verbal is 20 or above.

+Cognate course (see Catalog for undergraduate policy)

Basic Studies Requirement - Writing at the 100 level, Communication, Quantitative Literacy and Information Technology Literacy

##Liberal Studies requirement - 15 credits minimum

The Associate Degree Program underwent a major curriculum revision in the spring semester of 2001 based on the student population, data of past NCLEX-RN results, alumni surveys, employer surveys, a comparison to national associate degree nursing programs, and changes in the general education requirements at Indiana State University. The Indiana State Board of Nursing had placed the Associate Degree Program on Conditional Accreditation based on NCLEX-RN pass rates below the national average from 1992 through 1997. In October 2000, the decision was made at the State level to interpret the state NCLEX-RN pass rate for nursing school accreditation as the average for all first time test takers who are graduates of nursing schools in the United States and foreign educated graduates. The State standard pass rates were then retroactively calculated back to 1998. Since this time, NCLEX-RN pass rates are considered only part of the standards for Indiana State Board of Nursing program accreditation. Full accreditation was restored to the Associate Degree Program in the fall of 2002 after a site visit by a state evaluator was conducted.

Students who are enrolled in the Associate Degree Program are mostly first generation college attendees, are nontraditional, work part-time, and who live within a fifty-mile radius of Terre Haute, Indiana. The students also have multiple family responsibilities and are planning immediate entry into the workforce. The nursing program supports the University mission as an opportunity institution for traditional and nontraditional students.

The stand-alone associate of science was analyzed by faculty to be low in the number of direct care contact clinical hours as compared to other associate degree nursing programs. The major changes in the curriculum included the addition of three one-credit hour pharmacology courses, a medical surgical course each semester, the addition of a practicum course at the end of the program, the reduction of psychosocial nursing to 4 credit hours from 5 credit hours, and the integration of a NCLEX-RN review course during the last semester. The faculty felt that a

preprofessional semester would allow the students to demonstrate ability and complete a portion of the general education credits. Acting provost, Dr. David Hopkins, voiced a commitment to strengthen the Associate Degree Program and approved funds for an outside consultant. Dr. Cynthia Swafford provided recommendations to improve the curriculum integrity of the program. To strengthen the program integrity and to support of program outcomes, course outcomes are linked to program outcomes, and unit outcomes are linked to course outcomes.

Due to the reduced number of available clients and scheduling difficulties for psychosocial clinical experiences, a pilot project will be initiated for the fall semester of 2003 in which the sequencing of N256 and N162 will be reversed. A commitment remains to monitor and provide quality education until all associate degree students complete the program. A guaranteed Teach-out Plan based on Independent Study courses and/or comparable course credit for other nursing courses is available for students who are in good academic standing but have been unable to complete the AD program of study before Spring 2005 (Exhibit: AD Teach-out Plan).

Baccalaureate Degree Program. The baccalaureate nursing degree is a four year program.

Table 12.3 *Baccalaureate Nursing Degree Program of Study*

Fall Semester	Credit Hours
<u>NURS 104</u> # <i>Introduction to Nursing</i>	2
English 101 / 107*#	3
Psychology 101*#	3
Mathematics 102 or exemption*#	0 - 3
Chemistry 101*#	3
Chemistry 101L*#	1
Info Technology requirement or elective	3
	15-18
Spring Semester	
<u>NURS 106</u> # <i>Mental Health Aspects of Nursing</i>	2
English 105*#	0 - 3
Psychology 266/Education Psychology 221/ Family and Consumer Sciences 103*#	3
Sociology 120*#	3
Life Sciences 231*# <i>Human Anatomy and Physiology I</i>	2
Life Sciences 231L*# <i>Human Anatomy and Physiology I Laboratory</i>	1
Communication 101*#	3
	14-17

Fall Semester	
NURS 200 <i>Nursing Assessment of Adults</i>	3
NURS 204 <i>Fundamentals of Nursing Practice</i>	5
Life Sciences 241* <i>Human Anatomy and Physiology II</i>	2
Life Sciences 241L* <i>Human Anatomy and Physiology II Laboratory</i>	1
Life Sciences 274* <i>Introductory Microbiology</i>	2
Life Sciences 274L* <i>Introductory Microbiology Laboratory</i>	1
Foreign Language requirement if not completed in high school	0-3
	14-17
Spring Semester	
NURS 224 <i>Nursing Care of Adults I</i>	5
NURS 226 <i>Nursing in Mental Illness</i>	3
NURS 228 <i>Clinical Pharmacology</i>	3
Literary, Artistic and Philosophical Studies	3
Foreign Language requirement if not completed in high school	0-3
	14-17
Fall Semester	
NURS 318 <i>Nursing Care of Families in Stress and Crisis</i>	3
NURS 328 <i>Nursing Care of the Child and Family</i>	4
NURS 330 <i>Nursing Care of the Childbearing Family</i>	4
Education Psychology 302 or Health and Safety 340*	3
Life Sciences 412*	3
	17
Spring Semester	
NURS 322 <i>Research/Theoretical Basis for Nursing Practice</i>	3
NURS 324 <i>Nursing Care of Adults II</i>	5
English 305* <i>Expository Writing</i>	3
Physical Education 101	2
Elective (if needed to meet graduation requirement of 124 total hours)	0 - 3
	13-16
Fall Semester	
NURS 424 <i>Nursing Care of Adults III</i>	5
NURS 450 <i>Population-Focused Community Health Nursing</i>	6
Literary, Artistic and Philosophical Studies	3
Multicultural Studies (US Diversity)	3
	17
Spring Semester	
NURS 470 <i>Nursing Leadership</i>	3
NURS 484 <i>Reflective Nursing Practice</i>	3
NURS 486+ <i>Professional Nursing Synthesis</i>	3
Historical Studies	3
Multicultural Studies (International Cultures)	3
Elective (if needed to meet graduation requirement of 124 total hours)	0 - 3
	15-18
At least 50 semester hours must be at 300 to 400 course levels	
*Cognate Course	
# Prerequisite to NURS 200 and NURS 204	
+Proposed Capstone Course	

The baccalaureate program was modified and became a generic program in 2000. The last semester of the upper division will be taught in the Fall of 2003. It is of interest to note that since 1999, there have been four different department chairpersons for the baccalaureate program: Dr. Betsy Frank, Dr. Lee Richard, Dr. Suzy Fletcher, and Professor Esther Acree. Some of these leaders had curriculum agendas and initiatives that impacted the baccalaureate curriculum. The original N206, became N106 taught in Level One, in the hope that there would be a higher persistence rate between the preprofessional year and acceptance into the major. Student admission to the BSN major was limited to the fall semester. After the transfer of the associate degree program to the Ivy Tech State College, the plan is for every undergraduate nursing course in the program of study to be offered both spring and fall semesters. Program outcomes are linked to course outcomes to demonstrate the curricular support for the outcome roles and competencies.

RN-BS. Providing quality baccalaureate nursing education is the goal of the Indiana State University School of Nursing. To accomplish this goal and respond to the educational needs of practicing registered nurses, the baccalaureate track for registered nurses was initiated in the fall of 1998. The track offers registered nurses an alternative curriculum through which they can earn the baccalaureate degree. Indiana State University's baccalaureate track for registered nurses offers the registered nurse:

- An opportunity to earn a maximum of 15 semester hours of credit through the [professional portfolio option](#)
- Nontraditional scheduling of classes
- Classes available via various distance education methodologies
- Clinical experiences with preceptors in various health care facilities, arranged collaboratively by the faculty member and the student.

Table 12.4 *RN-BS Nursing Program of Study*

Semester I	Credit Hours
NURS 300 <i>Transition to Professional Nursing Practice</i>	4
Life Sciences 412	3

Education Psychology 302 or Health and Safety 340	3
Information Technology Literacy or Elective	3
	13
Semester II	
NURS 304 *+ <i>Comprehensive Health Assessment for Nursing Practice</i>	4
NURS 318 + <i>Nursing Care of Families in Stress and Crisis</i>	3
NURS 322 + <i>Research/Theoretical Basis for Nursing Practice</i>	3
English 305 Expository Writing	3
Quantitative Literacy Requirement	0 - 3
	13-16
Summer Semester I	
Foreign Language or Elective	3
Liberal Studies	3
Summer Semester II	
Foreign Language or Elective	3
Liberal Studies	3
	12
Semester III	
NURS 450 *+ <i>Population-Focused Community Health Nursing</i>	6
NURS 470 + <i>Nursing Leadership</i>	3
Liberal Studies	3
Liberal Studies	3
	15
Semester IV	
NURS 484 * <i>Reflective Nursing Practice</i>	3
NURS 486 # <i>Professional Nursing Synthesis</i>	3
Liberal Studies	3
Physical Education 101	2
	11
Clinical nursing course	
+Partial or total credit can be earned by assessment of professional portfolio	
#Capstone course pending approval	

All of the RN-BS courses are available as distance education. This program is projected to expand through recruitment from local, regional, and national associate degree nursing programs, and through the contract with The College Network. The College Network (TCN) is a business that contracts with schools to offer programs that are of interest to consumers. They provide the general education component through study guides that allow them to challenge for credit through CLEP, Dantes, and Prometric testing programs. Indiana State University has signed a contract with TCN to allow the School of Nursing to fully place the BS Track for RNs in the national arena.

In addition, Indiana State University is a member of the Indiana College Network, or ICN, which is a consortium for distance learning opportunities provided by Indiana's colleges and universities. ICN provides access to member institutions' distance education offerings, including more than 100 degree programs and nearly 1,500 courses per year. This network has more than 70 [Learning Centers](#), and a toll-free hotline provide technology access and strong learner support. Members also include Ball State University, Independent Colleges of Indiana, Indiana University, Ivy Tech State College, Purdue University, University of Southern Indiana, and Vincennes University. The web site is www.icn.org

LPN-BS Track. Licensed Practical Nurses have been awarded advance standing in both undergraduate nursing programs. The LPN-BS Track has been designed based on the existing baccalaureate nursing courses. Final University approval for this track is pending.

Masters Degree in Nursing. The master's in nursing at Indiana State University prepares students for leadership and clinical roles in advanced practice nursing and serves as a foundation for doctoral study. Majors are offered in three areas: community health, adult health, and family nurse practitioner. Role concentrations are offered in four areas: administration, education, adult health, and family nurse practitioner. Graduates of the Family Nurse Practitioner track are eligible to apply for American Nurses Credentialing Center or American Academy of Nurse Practitioners certification.

Courses are offered both on campus and as distance courses. Course taught as distance offerings include: N601, N605, N621, N633, N641, N651, N671, and N673.

Table 12.5 Graduate Nursing Program

	Credits	Hours
Core Courses -- All majors take these courses		
NURS 601 Health Care Perspectives	3	
NURS 605 Nursing Theory Development	3	
NURS 633 Nursing Research	3	
Educational Psychology 612 or Health and Safety 604	3	
Majors		
Community Health - requires a minimum of 36 credit hours		
NURS 620* Advanced Community Health Nursing I	4	
NURS 640* Advanced Community Health Nursing II	4	
NURS 660* Advanced Community Health Nursing III	4	
<u>Guided elective</u>	3	
Adult Health - requires a minimum of 36 credit hours		
NURS 621* Advanced Adult Health I	4	
NURS 641* Advanced Adult Health II	4	
NURS 661* Advanced Adult Health III	4	
Life Sciences 633	3	
Family Nurse Practitioner - requires a minimum of 45 credit hours		
NURS 624* Health Assessment and Health Promotion for Advanced Nursing Practice	4	
NURS 644* Theoretical Foundations of Family Health Care I	7	
NURS 645 Pharmacology for Advanced Practice Nurses	3	
NURS 646* Diagnostic Laboratory for Family Nurse Practitioners	1	
NURS 664* Theoretical Foundations of Family Health Care II	8	
NURS 670* Family Nurse Practitioner Preceptorship	5	
Life Sciences 633	3	
Role Concentrations		
Administration		
NURS 651 Theories of Nursing Administration	2	
NURS 671* Administrative Practices in Nursing	4	
<u>Role Concentration elective</u>	3	
Education		
NURS 653 Curriculum Process in Nursing	2	
NURS 673* Educational Practices in Nursing	4	
<u>Role Concentration elective</u>	3	
Adult Health		
NURS 645 Pharmacology for Advanced Practice Nurses	3	
NURS 646 Diagnostic Laboratory for Family Nurse Practitioners	1	
NURS 651 Theories of Nursing Administration or NURS 653 Curriculum Process	2	
Role Concentration 3 hour elective	3	
Family Nurse Practitioner		
NURS 635 Family Nurse Practitioner Role I	1	
NURS 675 Family Nurse Practitioner Role II	1	
Graduates students must complete either a master's theses (NURS 699) or a <u>culminating project</u> .		

Five additional nursing courses are also listed in the graduate catalog. N500 Topics in Nursing is designed for special topics in nursing, such as Infomatics, and Caring and Healing Rituals. N692 Individual/Directed Study in Advanced Nursing provides opportunities for supervised/directed and independent study in selected areas of advanced nursing practice. N625, N642, and N655 were designed for nurses who already had a master's degree and could be tailored to their individual learning needs. Course descriptions are listed on the School of Nursing web page by course number.

- c. **a set of guidelines for professional nursing practice (associate, baccalaureate, master's/advanced) approved by a nursing organization are utilized.**

Table 12.6 illustrates professional standards and guidelines that have been utilized for the design of the programs' outcomes and competencies. Courses reflect these standards in the course outcomes and competencies.

Table 12.6 *Professional Standards*

Professional Guidelines	AD	BSN	MSN
American Nurses Association Standards of Clinical Nursing Practice (1998)	✓	✓	✓
American Nurses Association Code for Nurses (2001)	✓	✓	✓
Indiana Code Title 25 Article 23, Nurses	✓	✓	✓
Expected Competencies of Associate, Baccalaureate and Advanced Prepared Nurse Providers (Indiana Deans and Directors; Indiana Organization of Nurse Executives, 1998)	✓	✓	✓
Educational Competencies for Graduates of Associate Degree Nursing Programs (NLN, 2000)	✓		
PEW Commission Competencies for Health Care Practitioners: 21 Competencies for the Twenty-first Century (1998).		✓	✓
Essential of Baccalaureate Education for Professional Nursing Practice (AACN, 1998)		✓	
Essentials of Master's Education for Advance Practice Nursing (AACN, 1996)			✓
Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education, 2002)			✓

d. courses in the sciences and humanities provide the foundation for the nursing curriculum.

The undergraduate nursing curriculum has defined cognates as required nonnursing courses that are part of the program of study. Cognate courses have been intentionally selected from the sciences and the humanities to support the programs' role outcomes and competencies. These courses must be successfully completed with a "C" to progress in the programs. Students must complete all nursing and cognate courses for one level before progressing to the next level of the curriculum.

The general education requirements work in concert with the nursing curriculum. As stated in the *Undergraduate Catalog* (2003-2004, p.28), through the Basic Studies and Liberal Studies requirements, the General Education Program at Indiana State University prepares students to become active professionals and productive citizens. The Basic Studies requirements promote refinement of communication, quantitative literacy, information technology skills, encourage the study of a foreign language, and advocate physical fitness for life. The Liberal Studies requirements encourage students to understand the value of a traditional university education in the arts, humanities, and sciences and to explore the relation of a liberal education to any major course of study. All approved Liberal Studies courses promote the four Common Goals of the General Education Program:

- *Critical Thinking* - To develop students' capacities for independent thinking, critical analysis, and reasoned inquiry.
- *Communications Skills* - To enhance students' writing, speaking, reading, and listening abilities.
- *Issues of Value and Belief* - To enhance students' capacities for making informed and reasonable choices.
- *Lifelong Learning* - To help students develop the knowledge and intellectual skills that encourage participatory citizenship, acknowledge the value of learning, and facilitate adaptation to change.

General Education requirements, then, account for a significant portion of credits toward earned by all students working towards a degree at Indiana State University. Students receive academic

advising from nursing faculty after admission to the programs. Students work with their advisors to meet the general education requirements.

d. (MS) curriculum builds on knowledge and competencies of baccalaureate education.

Graduate students are admitted to Indiana State University from various undergraduate programs. The graduate program builds on science and humanities; the knowledge, skills, and values related to the nursing process; scientific inquiry and statistical concepts; nursing theory; and issues and trends in health care access and delivery. The core graduate nursing courses of Health Care Perspectives, Nursing Theory, and Nursing Research, provide a deeper exploration of nursing and serve as a unifying foundation for all graduate students.

e. interdisciplinary collaboration is evident in the curriculum.

Interdisciplinary collaboration is modeled in two arenas: the academic learning community and in health care. Faculty members serve on the General Education Council and have written grants with other academic disciplines. Dr. Susan Sharp had a grant funded in collaboration with Dr. Judy Byrne, a faculty member from Family and Consumer Science, related to nutrition untitled the “Nourishing Connections Project” (2000). The Learning Communities grant supported by the Lilly Foundation created close collaboration with faculty members from selected departments to bridge concepts related to both disciplines. Faculty members across disciplines have been open to planning and problem solving issues related to the nursing curriculum.

Clinical collaboration is evident in all three programs. Students are directed and supported to interact with pharmacy, dietary, diagnostic laboratory, and physicians. With the formal opening of the Landsbaum Center for Health Education the opportunity for interdisciplinary education and practice will be readily available.

- f. **didactic instruction and supervised practice follow a plan:**
- **documents course content and learning experiences appropriate for the development of competencies required for graduation; and**
 - **delineates instructional methods used to develop competencies.**

Each course description is available on the School of Nursing Web page and the online catalogs. The NLNAC Resource Room has, on exhibit, a binder for each course that includes the course syllabus, and supporting course documents, such as calendars and assignments. In addition, there is an example of a lesson plan and instructional methods such as Power Point presentations, overhead transparencies, critical thinking questions, or case studies. If the course is team-taught or series-taught, each faculty member who teaches in the course had provided sample materials. Examples of student papers and projects, along with examinations and clinical evaluation tools, are also displayed. Courses that have been taught as a distance education offering also have samples of distance products that represent comparable content and quality to classroom instruction.

- g. **evaluation tools and methods**
- **are consistent with course objectives / outcomes and competencies of the didactic and clinical components of the nursing program.**
 - **provide for regular feedback to students and faculty with timely indicators of student progress and academic standing;**
 - **are consistently applied; and**
 - **are written and available to students.**

Evaluation methods for the theory component of each course are consistent with course outcomes. Grading information is clearly presented to students in the syllabi. Faculty identify and counsel students who are at risk throughout the semester due to poor academic performance to assist the student to explore and implement a remediation plan.

Clinical evaluation tools are both formative and summative. Feedback is provided to students during the clinical rotation and at the completion of the clinical experience. The design of clinical experiences varies between and among courses. All three programs have a *final clinical practicum*

course to provide a transition to real world nursing practice and expectations. A clinical evaluation tool is available for student self-evaluation and are consistently applied to all students within a course.

h. technology used is appropriate to meet student learning needs, course objectives/outcomes and course requirements.

The collective nursing faculty at Indiana State University are very savvy in the use of technology to enhance the learning process. The School of Nursing has been a campus leader in the use of technology and in the expectations of students' computer competency. All students and faculty have a university e-mail address. Computer orientation starts during the first nursing course and is integrated throughout the program. A student distribution list for each course is generated every semester. MyISUPortal also provides a course message board, threaded discussion area, and class distribution list. Web sites are used for informational links, terminology lists, discussion boards, small group projects, virtual activities, and practicing content review questions. Course web pages are used for distance and campus nursing courses. Through a contractual agreement with the Microsoft Corporation, software-operating packages are available at a very minimal fee for students and faculty home use.

i. regular review of the rigor, currency, and cohesiveness of nursing courses by faculty.

The School of Nursing faculty and the Curriculum Committee are continuously evaluating the nursing curriculum. Information is collected from classroom experiences, clinical experiences, exit surveys, alumni surveys, employer surveys, advisory committee, and standardized testing results. This information is analyzed by committees or departments for trends and opportunities for improvement. Improvements range from changing student evaluation methods, strengthening specific course content, selecting different textbooks, changing test construction, and implementing different educational methods.

The curriculum committee is exploring the level of consumer interest in other graduate degree options such as a master's degree in nursing for a non-nursing BA or BS degree, a major in nursing education, and a major in nursing administration. Preliminary curriculum design and course development have also been initiated.

Criterion 13: Program design provides opportunity for students to achieve program outcomes and acquire knowledge, skills, values, and competencies necessary for nursing practice.

Operational Definition: The curriculum provides for attainment of critical thinking, therapeutic nursing interventions and communication skills in order to produce competent and caring nurses for diverse clients.

Expected Level of Achievement/Decision Rule for Action: Mean score of at least 3.5 out of 5 on the Program Outcomes Subscale of the Student Exit Surveys. For specific program results for Communication Skills, Critical Thinking and TNI see below. Mean score of at least 3.5 on the Ethical Values item of the Student Exit Surveys. Mean program completion time within 0.5 years of minimum completion time for AS program. Mean program completion time within 1 year of minimum completion time for BS and within 2 years of minimum completion time for MS program, to account for larger number of working students. Outcome: Expected level of achievement met for all programs.

Process					Implementation																
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>															
Curriculum provides for attainment of knowledge and skill sets in the current practice of nursing, theory, research, community concepts, health care policy, finance, health care delivery, critical thinking, communications, therapeutic interventions, and current trends in health care.	Curriculum Documents, Catalog, Website, CAAC minutes.	Design – CAAC Implementation – Departments Evaluation – CAAC and EOAC.	Annually in December	Curriculum Review by CAAC, Report to EOAC in December.	Program outcomes revised Fall 2002 and Spring 2003 for all programs. Results of Program Outcomes Subscale Over Time <table border="1" data-bbox="1150 764 1619 919"> <thead> <tr> <th>Program</th> <th>Spring 2003 or last dataset</th> <th>Average over Time</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.80</td> <td>3.81</td> </tr> <tr> <td>BS</td> <td>3.78</td> <td>3.63</td> </tr> <tr> <td>RN-BS</td> <td>4.38</td> <td>4.24</td> </tr> <tr> <td>MS</td> <td>3.98</td> <td>3.71</td> </tr> </tbody> </table>	Program	Spring 2003 or last dataset	Average over Time	AS	3.80	3.81	BS	3.78	3.63	RN-BS	4.38	4.24	MS	3.98	3.71	Continue to monitor and update as needed.
Program	Spring 2003 or last dataset	Average over Time																			
AS	3.80	3.81																			
BS	3.78	3.63																			
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Program leads students to develop professional ethics, values and accountability.	Curriculum Documents, Catalog, Website, CAAC minutes. Outcomes in Exit and Alumni Surveys	Design – CAAC Implementation – Departments Evaluation – Assistant Dean and EOAC.	Annually in December	Student, Alumni and Employer responses on Surveys.	Results of Item on Ethical Values by Program Over Time <table border="1" data-bbox="1150 1013 1619 1167"> <thead> <tr> <th>Program</th> <th>Spring 2003 or last dataset</th> <th>Average over Time</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.85</td> <td>3.85</td> </tr> <tr> <td>BS</td> <td>3.88</td> <td>3.65</td> </tr> <tr> <td>RN-BS</td> <td>4.67</td> <td>4.33</td> </tr> <tr> <td>MS</td> <td>3.67</td> <td>3.58</td> </tr> </tbody> </table>	Program	Spring 2003 or last dataset	Average over Time	AS	3.85	3.85	BS	3.88	3.65	RN-BS	4.67	4.33	MS	3.67	3.58	Continue to monitor
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AS	3.85	3.85																			
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Program design allows students to achieve the outcomes in the established and published program length.	Curriculum Documents, Catalog, Website, CAAC minutes. Outcomes in Exit and Alumni Surveys	Design – CAAC Implementation – Departments Evaluation – Assistant Dean and EOAC.	Annually in December	Program mean completion time	<table border="1" data-bbox="1150 1211 1619 1395"> <thead> <tr> <th>Program</th> <th>Minimum Completion Time</th> <th>Average Completion Time</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>2 years</td> <td>2.39 Years</td> </tr> <tr> <td>BS (old)</td> <td>1.5 Years</td> <td>1.9 Years</td> </tr> <tr> <td>RN-BS</td> <td>2 Years</td> <td>2.25 Years</td> </tr> <tr> <td>MS</td> <td>2 Years</td> <td>2.4 Years</td> </tr> </tbody> </table>	Program	Minimum Completion Time	Average Completion Time	AS	2 years	2.39 Years	BS (old)	1.5 Years	1.9 Years	RN-BS	2 Years	2.25 Years	MS	2 Years	2.4 Years	Students are able to complete the programs in the minimum timeframe if they take full-time work as example curriculum describes. However, many take fewer courses in order to work full or part-time. Most Master Students report working full-time while in the MS program. Continue to monitor
Program	Minimum Completion Time	Average Completion Time																			
AS	2 years	2.39 Years																			
BS (old)	1.5 Years	1.9 Years																			
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Criterion 13: Continued: Program design provides opportunity for students to achieve program outcomes and acquire knowledge, skills, values, and competencies necessary for nursing practice.

Operational Definition: The curriculum provides for attainment of critical thinking, therapeutic nursing interventions and communication skills in order to produce competent and caring nurses for diverse clients.

Expected Level of Achievement/Decision Rule for Action: Mean score of at least 3.5 out of 5 on the Program Outcomes Subscale of the Student Exit Surveys. For specific program results for Communication Skills, Critical Thinking and TNI see below. Mean score of at least 3.5 on the Ethical Values item of the Student Exit Surveys. Mean program completion time within 0.5 years of minimum completion time for AS program. Mean program completion time within 1 year of minimum completion time for BS and within 2 years of minimum completion time for MS program, to account for larger number of working students.

Process					Implementation					
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>					Actions For program Development, Maintenance, or Revision
Total credits provide a balanced distribution and within generally accepted limits.	Program Documents, Handbook, cataloger, brochures, website. Completion data, student records and graduation database.	CAAC and EOAC	Annually in December	Compare program credits with university required general education credits. Review overall credits required. Review mean program completion time for students.	Program	Nursing Credits	Other Credits	Total Credits	% Nursing	General education hours vary depending on student entry capabilities and possible need for remedial courses. New nursing curriculum in AS and BS programs have increased class and clinical hours to meet student requests for more clinical time and to improve delivery of content needed for NCLEX. New general education requirements added foreign language and information technology. Continue to Monitor
					AS Exit Option and general education requirements (prior to 2000)	31	31-34	62-65	50-48%	
					AS Modified and general education requirements	39	28-40	67-79	58%-49%	
					BS Upper Division (prior to 2000)	35	27	62 (upper division) 124-127 BS total	56% (upper division) 53-52% (AS +Upper Division BS)	
					BS (Modified generic program and general education requirements)	62	63-69	125-131	49%-47%	
					RN-BS (students may transfer in up to 28 nursing credits from AS)	29	35-38	64-67	46% overall	
					MS (Adult and Community)	28	9	34	82%	
					MS FNP	36	6	42	86%	
					Clinical ratio for all undergraduate programs is 1 credit for 3 hours of clinical/laboratory.					

<p>Criterion 13: Continued: Program design provides opportunity for students to achieve program outcomes and acquire knowledge, skills, values, and competencies necessary for nursing practice.</p>		Critical Thinking																				
		<p>Theoretical Definition: Purposeful, reflective reasoning and analysis used to form beliefs and guide decision-making Operational Definition: Scores on the California Critical Thinking Test (CCTST), The California Critical Thinking Disposition Inventory (CCTDI) and self-ratings on the Program Exit Surveys will be used to document achievement in the area of critical thinking.</p>																				
		Expected Levels of Achievement/Decision Rule for Action: Critical Thinking																				
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Program</th> <th style="width: 25%;">CCTDI (Total Mean Scores)</th> <th style="width: 25%;">CCTST Total Mean Scores</th> <th style="width: 25%;">Exit Survey Critical Thinking Item</th> </tr> </thead> <tbody> <tr> <td>Associate Degree Benchmarks</td> <td>290</td> <td>14</td> <td>Mean of 3.5 on 5.0 Scale</td> </tr> <tr> <td>Baccalaureate Degree Benchmarks</td> <td>300</td> <td>15</td> <td>Mean of 3.75 on 5.0 Scale</td> </tr> <tr> <td>Master's Degree Benchmarks</td> <td>310</td> <td>17</td> <td>Mean of 4.0 on 5.0 Scale</td> </tr> </tbody> </table>					Program	CCTDI (Total Mean Scores)	CCTST Total Mean Scores	Exit Survey Critical Thinking Item	Associate Degree Benchmarks	290	14	Mean of 3.5 on 5.0 Scale	Baccalaureate Degree Benchmarks	300	15	Mean of 3.75 on 5.0 Scale	Master's Degree Benchmarks	310	17	Mean of 4.0 on 5.0 Scale
Program	CCTDI (Total Mean Scores)	CCTST Total Mean Scores	Exit Survey Critical Thinking Item																			
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Master's Degree Benchmarks	310	17	Mean of 4.0 on 5.0 Scale																			
		Outcome: Expected level of achievement not met for all programs, see actions.																				
Process				Implementation																		
Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Degree of Reliability, Validity, Trustworthiness	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>		Actions <i>For program Development, Maintenance, or Revision</i>															
EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean	EOAC, Departments, Office of Assistant Dean	<p>Test is administered through the Assistant Dean's Office in Coordination with the Department Chair and the Exit Course Faculty.</p> <p>Tests are scored and initial data analysis and reporting are conducted by the Assistant Dean's Office.</p> <p>Evaluation of reports and recommendations concerning data are the responsibility of the EOAC</p> <p>Annually in October.</p>	<p>Standardized Exam: The California Critical Thinking Disposition Inventory (CCTDI) And the California Critical Thinking Test (CCTST) (Facione & Facione, 1992).</p> <p>Student Self – Report data from Exit Surveys</p>	<p>The Facione tests have been widely used in nursing and non-nursing programs as a measure of critical thinking. National normative data are available for comparison</p> <p>The CCTDI Measures Critical Thinking Dispositions in relation to Likert-style attitudinal prompts. Cronbach's Alpha = 0.90 overall. Cronbach's Alpha on sub-scales range: 0.72-0.80</p> <p>The CCTST is a 34-item, multiple choice test that target those core critical thinking (CT) skills regarded to be essential elements in a college education. KR-20 (internal consistency) 0.70 to 0.75</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Program</th> <th style="width: 15%;">CCTDI Benchmark</th> <th style="width: 10%;">Mean Results</th> </tr> </thead> <tbody> <tr><td>AS</td><td>290</td><td>308</td></tr> <tr><td>BS</td><td>300</td><td>302</td></tr> <tr><td>RN-BS</td><td>300</td><td>319</td></tr> <tr><td>MS</td><td>310</td><td>322</td></tr> </tbody> </table>		Program	CCTDI Benchmark	Mean Results	AS	290	308	BS	300	302	RN-BS	300	319	MS	310	322	<p>Critical thinking results and issues surrounding teaching, measuring and testing critical thinking have been a re-occurring theme over the years. Several courses have built in critical thinking case studies, assignments, and test items. We also piloted the Arnett critical thinking test for a couple of semesters and will have critical thinking integrated in our new NCLEX preparation exams (HESI) and the RN-Completion Exam for RN-BS starting with the next graduation class.</p>
					Program	CCTDI Benchmark	Mean Results															
					AS	290	308															
					BS	300	302															
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Documentation Located		Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Degree of Reliability, Validity, Trustworthiness	Results of Data Collection and Analysis Including actual level(s) of achievement			Actions For program Development, Maintenance, or Revision																																											
EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean		EOAC, Departments, Office of Assistant Dean	<p>Test is administered through the Assistant Dean's Office in Coordination with the Department Chair and the Exit Course Faculty.</p> <p>Tests are scored and initial data analysis and reporting are conducted by the Assistant Dean's Office.</p> <p>Evaluation of reports and recommendations concerning data are the responsibility of the EOAC</p> <p>Evaluation of Student Presentations by Faculty and Peers.</p> <p>EOAC Review of All Communication Data Annually in November.</p>	<p>Standardized Exam Interpersonal Communications Skills Test</p> <p>5 items from exit survey subscale which were designed to capture students self-evaluations of their adequacy in the following areas:</p> <ol style="list-style-type: none"> 1. Interpersonal Communication Skills 2. Written Communication Skills 3. Conflict management skills 4. Documentation skills 5. Computer usage skills <p>Performance Ratings on Oral Communication Skills Checklist.</p>	<p>The ICST is a 34-item inventory measuring the level of non-specific communication skills. Low scores indicate low communication skills. The test is suitable for adult and adolescent population. Cronbach's Coefficient Alpha 0.87 International (US and Canada) Norm data for Males and Females are available.</p> <p>5 items from exit survey subscale: Reliability Coefficient Alpha = .84</p> <p>ISU Oral Communication Evaluation Instrument 10 Item Peer and Instructor Evaluation of Presentation Skills Reliability Coefficient Alpha = .94</p>	<table border="1"> <thead> <tr> <th>Program</th> <th>ICST Benchmark</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>65</td> <td>66.1</td> </tr> <tr> <td>BS</td> <td>70</td> <td>65.5</td> </tr> <tr> <td>RN-BS</td> <td>70</td> <td>69.17</td> </tr> <tr> <td>MS</td> <td>75</td> <td>68.85</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Program</th> <th>OCEI</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>BS</td> <td>3.75</td> <td>4.25</td> </tr> <tr> <td>RN-BS</td> <td>3.75</td> <td>4.25</td> </tr> <tr> <td>MS</td> <td>4.0</td> <td>4.48</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Program</th> <th>Exit Survey Communication Items Benchmark</th> <th>Means</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.5</td> <td>3.83</td> </tr> <tr> <td>BS</td> <td>3.75</td> <td>3.77</td> </tr> <tr> <td>RN-BS</td> <td>3.75</td> <td>4.16</td> </tr> <tr> <td>MS</td> <td>4.0</td> <td>3.72</td> </tr> </tbody> </table>	Program	ICST Benchmark	Mean Results	AS	65	66.1	BS	70	65.5	RN-BS	70	69.17	MS	75	68.85	Program	OCEI	Mean Results	AS	N/A	N/A	BS	3.75	4.25	RN-BS	3.75	4.25	MS	4.0	4.48	Program	Exit Survey Communication Items Benchmark	Means	AS	3.5	3.83	BS	3.75	3.77	RN-BS	3.75	4.16	MS	4.0	3.72	<p>Communication Skills is another area which has stimulated much discussion and changes in teaching and testing methods over the years. A written paper requirement in most nursing courses and integrating computer skills and oral presentation skills into the BS and Higher Programs has strengthened this area in our new curriculum.</p> <p>The MS Students do not feel that they do well on this issue, perhaps in part due to the higher requirements of the MS program. They therefore score low on the two self-report instruments. However, faculty and peer ratings of their actual performance on the OCEI show they perform well. Continue to Monitor</p>
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<p>Criterion 13: Continued: Program design provides opportunity for students to achieve program outcomes and acquire knowledge, skills, values, and competencies necessary for nursing practice.</p>	Therapeutic Nursing Intervention							
	<p>Theoretical Definition: Therapeutic Nursing Interventions are defined as holistic nursing actions implemented in an accurate, safe manner according to national standards and practice guidelines. (EOAC Minutes Feb 14, 2001). Operational Definition: Scores on the Arnett (AS), HESI (BS), or ERI RN-Completion (RN-BS) and FNP Certification Exam</p>							
	Expected Levels of Achievement/Decision Rule for Action: Therapeutic Nursing Intervention							
	Program	Standardized Exam	Benchmark Scores			Exit Survey: Adequacy of Preparation Scale. Mean Score on a 5.0 Scale		
	Associate Degree	Arnett	85% of students will pass the Arnett at the .20 level or higher. (New benchmark approved EOAC 11/02)			3.5		
	Baccalaureate Degree	HESI – BS	80% of Graduates will achieve an average or higher probability score on the HESI			3.5		
RN-BS Program	ERI RN-Completion Exam	Composite percentage correct will be within 5 percent or above the National Average			3.5			
Master's Degree	FNP Certification Exam	Reported pass rates on the FNP and other certification exams (if any) will be at 85% or above			3.5			
Outcome: Expected level of achievement not met for all programs, see actions.								
Process				Implementation				
Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Degree of Reliability, Validity, Trustworthiness	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>			Actions For program Development, Maintenance, or Revision
EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean	EOAC, Departments, Office of Assistant Dean	Plan reviewed every year Evaluation of reports and recommendations concerning data are the responsibility of the EOAC Annually in February	Tests are administered through the Assistant Dean's Office in Coordination with the Department Chair and the Exit Course Faculty. Tests are scored and data initial analysis and reporting are conducted by the Assistant Dean's Office.	The Arnett, HESI and ERI are commercially developed standardized exams with national normative data for comparison use. Each has had validity validated by a panel of experts and has data on internal reliability.	Program	TNI Benchmark	Mean Results	AS results on Arnett test are reviewed on a semester by semester basis with AD department. Areas of strengths and weaknesses are noted. Efforts to increase student interest in performing at their best on this exam have been instituted by making the exam score part of their final grade for the last course in the program. Continue to Monitor
					AS	85% will pass at .20 level	82.18% Goal Not Met	
					BS	80% average or higher on HESI	No graduates from generic BS yet.	
					RN-BS	Within 5% of National Average	62 ISU 64 National Goal Met	
					MS	85% or above pass rate	91.67%	
					Program	Exit Survey TNI Benchmark	Mean Results	
					AS	3.5	3.88	
					BS	3.5	3.89	
					RN-BS	3.5	4.28	
					MS	3.5	3.71	

CRITERION 13: Program design provides opportunity for students to achieve program objectives and acquire knowledge, skills, values, and competencies necessary for nursing practice.

EXPECTED LEVEL OF ACHIEVMENT: Mean score of at least 3.5 out of 5 on the *Program Outcomes Subscale* of the Student Exit Surveys. For specific program results for Communication Skills, Critical Thinking and TNI see below. Mean score of at least 3.5 on the Ethical Values item of the Student Exit Surveys. Mean program completion time within 0.5 years of minimum completion time for AD program. Mean program completion time within 1 year of minimum completion time for BS and within 2 years of minimum completion time for MS program, to account for larger number of working students.

Documentation confirms:

- a. curriculum provides for attainment of knowledge and skill sets in the current practice of nursing, nursing theory, research, community concepts, health care policy, finance, health care delivery, critical thinking, communications, therapeutic interventions, and current trends in health care.

The above key concepts are addressed in all three nursing programs. The scope, depth, and extent of learning about key concepts differ based on the program type. The foundational course N151 in the AS program, and N104, N106 and N204 in the BS program, introduces students to terms, definitions, standards and principles related to the key concepts. Concepts are elaborated during the progression in the program through the use of multiple interactive learning methods, such as case studies, critical thinking questions and discussion, construction of care plans, diagramming concept maps, and the synthesis of evidence-based practice protocols. Graduate courses address the key concepts from multiple perspectives. .

The *Program Outcome Subscale* on the Student Exit, Alumni, and Employer Surveys for Spring 2003 and an average over time met the expected level of achievement for all nursing programs.

The lowest program on the subscale over time was the BS program with a 3.63; the highest average was the RN-BS with a 4.24. The AD and MS exceeded the benchmark with averages of 3.81 and 3.71 over time.

Key performance indicators in the areas of critical thinking, communication, and therapeutic interventions have been monitored through the use of standardized instruments as part of the end of program evaluation for each graduating class. The Evaluation Outcome Assessment Committee (EOAC) analyzes data for trends. If the identified benchmark is not met, the EOAC notifies the Executive Committee who forwards the information on for the purpose of informing or potential action to the appropriate committee, course, person, or department. The most current results are presented in the following tables.

Table 13.1 *Critical Thinking Inventory Results Graduates Spring 2002*

California Critical Thinking Disposition Inventory Results

Program	CCTDI Benchmark	Mean Results
AD	290	308
BS	300	302
RN-BS	300	319
MS	310	322

California Critical Thinking Test

Program	CCTST Benchmark	Mean Results
AD	14	16
BS	15	12
RN-BS	15	20.3
MS	17	14

The findings that the baccalaureate and the graduate students scored lower on the California Critical Thinking Test are consistent with national findings. Additional indicators such as clinical evaluations, individual and group project evaluations, along with written assignments, indicate that the baccalaureate and graduate students attain competency in critical thinking.

Table 13.2 *Communication Skills Inventory Results Graduates Spring 2002*

Interpersonal Communication Skills Test

Program	ICST Benchmark	Mean Results
AD	65	66.1
BS	70	65.5
RN-BS	70	69.17
MS	75	68.85

Oral communication Evaluation Instrument

Program	OCEI	Mean Results
AD	N/A	N/A
BS	3.75	4.25
RN-BS	3.75	4.25
MS	4.0	4.48

5 Item Communication Subscale

Program	Exit Survey Communication Items Benchmark	Mean Results
AD	3.5	3.83
BS	3.75	3.77
RN-BS	3.75	4.16
MS	4.0	3.72

A concern that has emerged about communication skills is the student's sense of self-efficacy in the area of conflict management and group interactions. This will continue to be monitored to identify a possible trend.

Table 13.3 *Therapeutic Nursing Intervention Inventory Results Spring 2002*

Program	TNI Benchmark	Mean Results
AD	85% will pass at .20 level	82.18% Goal Not Met
BS	80% average or higher on HESI	No graduates from generic BS yet.
RN-BS	Within 5% of National Average	62 ISU 64 National Goal Met
MS	85% or above pass rate	91.67%
Program	Exit Survey TNI Benchmark	Mean Results
AD	3.5	3.88
BS	3.5	3.89
RN-BS	3.5	4.28
MS	3.5	3.71

The results of the Arnett Test indicated that some AS students repeatedly pressed the same key to finish the test quickly. The Associate Degree Program Department, with the support of the Curriculum Committee and Academic Affairs Committee, has attached a score of .20 on the Arnett Test as a requirement for the last semester seminar course as a motivating factor for a realistic prelicensure assessment.

b. program leads students to develop professional ethics, values, and accountability.

The results of the trended aggregated data over time and at the most current data point of Spring 2003, indicates that the perception of the respondents is above the expected level of achievement.

Table 13.4 *Ethical Values by Program*

Program	Spring 2003	Average over Time
AD	3.85	3.85
BS	3.88	3.65
RN-BS	4.67	4.33
MS	3.67	3.58

c. students can achieve the objectives in the established and published program length.

Students are able to achieve the program objectives in the length of time advertised for the program. Prior to 2002, the length of the AS program was two years. The average AS completion

time has been 2.39 years. The current AS program is published and is offered during five semesters. Due to the transfer of the associate degree program to the local community college, students are strongly encouraged to follow the program of study. A Teach-out Plan has been arranged through Independent Study and comparable course credit for remaining students in good standing.

The BS program prior to 2000 was advertised and offered as a four year full-time program of study. The average BS completion time for the upper division course work was 1.9 years. The RN-BS track may be pursued full-time or part-time. Many students in the RN-BS also work while attending classes. The average time for completion for the RN-BS has been 2.25 years. The current generic BS program is a four years full-time program. The first graduating class from this program will be December 2003.

The graduate program can be completed during two years or less. The program length varies by the student's major, role concentration, and choice of culminating project or thesis. Part-time study is available in the graduate program. The statute of limitation for graduate programs at Indiana State University is seven years. Refer to Table 13.5

Table 13.5 Overview of Credit Hours

Program	Nursing Credits	Other Credits	Total Credits	% Nursing
AD Exit Option and general education requirements prior to 2000	31	31-34	62-65	48%-50%
AD Modified and general education requirements	39	28-40	67-79	49%-58%
BS Upper Division prior to 2000)	35	27	62 (upper division) 124-127 BS total	56% (upper division) 53-52% (AD +Upper Division BS)
BS (Modified generic program and general education requirements)	62	63-69	125-131	47%-49%
RN-BS	29 from RN-BS 28 transfer from AD	35-38	64-67	46% overall
MS (Adult and Community	28	9	34	82%
MS FNP	36	6	42	86%

Clinical ratio for all undergraduate programs is 1 credit for 3 hours of clinical/laboratory.

d. (AD) total credits provide a balanced distribution of credits with no more than 60% of the total credits allocated to nursing.

The total number of total nursing credits in the AD program is 39. The range of the percentage of nursing credits to the total program credits is 49% to 58% depending on the students general education requirements.

d. (BS) majority of course work in nursing is at the upper division level.

There are 4 nursing credit hours during the first year of the baccalaureate program, followed by 19 nursing credit hours the second year. The third year contains 19 nursing credit hours, and the fourth year has 20 nursing credit hours. Of the 62 total nursing credits, 39 credits (63%) are offered during the upper division of the program.

- d. **(MS) clock and credit hours are consistent with published guidelines for master's /advanced practice nursing curricula.**

The comparison of credit hours and clock hours with the published brochures and *Graduate Catalog* are consistent with the graduate program of study.

- e. **(AD) total credits in the curriculum are within the general accepted limits of 60-72 credits (90-108 quarter credits).**

The range for the number of credits for the AD program is from 67 to 73 depending on the student's ability to challenge for credit in information technology requirement, to qualify for placement in mathematics 102 or higher, and the need for one or two semesters of English based on SAT verbal score. Students with verbal scores below 510 will take English 101 and 105; if they are at or above 510, they will enroll in English 107.

- f. **(AD) ratio of one credit for three hours of clinical/laboratory (1:3) is the generally accepted ratio.**

The undergraduate nursing programs utilize the ratio of three clinical contact hours to one student credit hour.

<p>Criterion 14: Practice learning environments are selected and monitored by faculty and provide opportunities for a variety of learning options appropriate for contemporary nursing.</p>					<p>Operational Definition: All community-based (including acute care facilities) facilities used for student clinical experience</p> <p>Expected Level of Achievement/Decision Rule for Action: Faculty and Students will have the opportunity to provide input concerning the adequacy of clinical facilities at least once each year. Faculty and Student input will be taken into consideration when choosing clinical sites for the next year. All programs will have a mean clinical agency rating of 3.5 or above. Agencies which fall below this rating will be evaluated by faculty and department chair for opportunities to improve student clinical experiences. All agencies used will have current clinical contracts, all preceptor agreements are on file in the department office.</p> <p>Outcome: Expected level of achievement met for all programs.</p>	
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Clinical Contracts	Dean and Office of Assistant Dean	Office of Assistant Dean	Report Annually in September	Ongoing Review for currency. List of contracts and expiration dates maintained in the Office of the Assistant Dean. As contracts come up for renewal, AAI contacts faculty and agencies involved to start renewal process as indicated.	100% of agency which are in use have current contracts.	Continue to Monitor
Adequacy	EOAC and Department Minutes	EOAC, Course Faculty, Department Chair	Data collected each semester, reported to EOAC annually in September	Facility/ Agency Evaluation Tool Instrument developed by ISU SON. Cronbach's Alpha .85	Goal Met. Faculty and Student input concerning clinical agencies solicited at least once each year. Mean trend data by agency indicate that all clinical facilities were rated at a 3.5 or above by faculty. Two community agencies were rated below 3.5 by students. Due to current small numbers of DE students, no identifying information (DE versus on campus student) is on our agency evaluation tools. However with the potential for increased numbers of distance education students in clinical courses, methods to delineate data from DE students need to be developed in the future.	New instrument created and piloted Fall 2001. E-mailed to all faculty for distribution to students. Color coded hardcopies to faculty for faculty input. Department chairs asked to facilitate data collection by encouraging faculty to use new instrument. Faculty teaching in course utilizing the two lower rated clinical agencies were notified of the low ratings given by students. Faculty were aware of the issues and were looking for ways to improve the clinical agencies response to students or to develop other clinical sites. Continue to Monitor

CRITERION 14: Practice learning environments are selected and monitored by faculty and provide opportunities for a variety of learning options appropriate for contemporary nursing.

EXPECTED LEVEL OF ACHIEVMENT: Faculty and students will have the opportunity to provide input concerning the adequacy of clinical facilities at least once each year. Faculty and student input will be taken into consideration when choosing clinical sites for the next year. All programs will have a mean clinical agency rating of 3.5 or above. Agencies which fall below this rating will be evaluated by faculty and department chair for opportunities to improve student clinical experiences. All agencies used will have current clinical contracts; all preceptor agreements are on file in the department office.

Documentation confirms:

- a. **agreements and contracts with practice sites are current and specify expectations and responsibilities for all parties.**

All contracts are reviewed annually by the Assistant Dean. An annual report is scheduled to be presented to the Evaluation/Outcomes Assessment Committee (EOAC) during the September business meeting. Refer to Table 14.1 for current agency contracts. As a contract's renewal date approaches, the Administrative Assistant for the Assistant Dean contacts faculty and agencies involved to start renewal process as indicated. Two agencies added clauses to their contracts due to the Health Insurance Portability and Accountability Act of 1996 Public Law 104-191 (HIPAA).

Table 14.1 *Clinical Agency Contracts*

Agency	Courses Utilizing	Agreement
Arnett Clinic	N152,160, 162, 252, 256, 260	2/5/99
Associated Physicians & Surgeons Clinic	N162, 260, 305, 328, 345, 425, 455, 621, 641, 651, 671	4/19/98
Bethany House	N335, 445	4/17/98
Catholic Charities of Terre Haute	N445	4/17/98
Clarian Health (Methodist, IU, Riley)	N455, 470, 484	11/02/01
Clark Memorial Hospital	N300,304,318,322,328.330,400,424,425,440,445,450, 455,470,484,486	5/21/01
Clay Community Schools	N345, 445, 455, 620, 640, 660	4/17/98
Clay County Health Department	N260, 328, 345, 445,455 620, 640, 660	4/28/00
Clay County Well-Child Clinic	N260, 305, 328, 345, 445, 620, 640, 660	4/17/98
Columbia Terre Haute Regional Hospital	N152,160, 162, 252, 256, 260, 328, 335, 400, 425, 455	5/17/98
Council on Domestic Abuse(CODA)	N335, 445, 455	4/28/00
Covered Bridge Special Ed District	N328,445, 455, 620, 660	2/5/99
Crawford County Health Department	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	12/19/00
Crawford Memorial Hospital	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	1/08/03

Digital Audio Disc Corp. (DADC)	N305, 345, 400, 445, 455	3/17/00
Eli Lilly Company	N345	10/31/97
Health & Help Center	N260, 305, 328, 345, 445	6/5/98
Good Samaritan Hospital	N162, 335, 345, 455, 621, 641, 651, 661, 671, 673	4/25/00
Hamilton Center	N256, 335, 445, 455	12/5/98
Harborside Health Care	N152, 204,455	5/9/98
Head Start of Vigo County	N335, 445	2/6/98
Healthsouth Rehabilitation Hospital	N204,455	1/17/03
Hendrix County Hospital	N600	6/5/98
Hospice of the Wabash Valley	N445, 455, 620, 640, 660, 671	2/6/98
Indiana Medical Specialists, Inc.	N162, 260, 305, 328, 345, 455, 620, 640, 660	02/4/00
Lakeview Nursing and Rehab Center	N152, 256, 305, 455	7/28/98
Light House Mission	N305, 335, 345, 445, 455	10/31/98
Meadow Manors, Inc. (North)	N152, 455	10/31/02
Meadows Manor, Inc. (East)	N152, 455	10/28/02
Mental Health Association	N455	10/23/98
Porter School Psychology Center	N305, 445	2/5/99
Putnam County Health Services Clinic	N162, 260, 305, 328, 345, 455, 620, 640, 660	2/4/00
Putnam County Hospital	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	1/7/00
Rosebud Indian Health Services	N400C	7/18/97
Royal Oaks Convalescent & Rehab Center	N152, 160, 252, 256, 305, 400, 425, 455	2/4/00
Simeon House I	N305,445,455	4/7/98
Southwest Park School Corp	N300,304,318,322,328,330,400,424,425,440,445,450, 455,470,484,486	4/17/03
South Vermillion School Corp	N300,304,318,322,328,330,400,424,425,440,445,450, 455,470,484,486	3/27/03
Student Health Center-ISU	N152, 160, 455, 605	N/A
St. Vincent Clay	N160,215,345,445,455,620,640,660	3/23/00
Union Hospital	N152, 160, 162, 252, 256, 260, 328,335, 400, 425, 445, 455	8/5/98
Terre Haute Heart Center	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	5/31/98
United States Penitentiary of Terre Haute	N600	6/5/98
Vermillion County Health Department	N620, 640, 660	4/17/98
Veterans Administration Hospital	N256	11/20/99
Vigo County Health Department	N260, 305, 328, 345, 445, 455, 620, 640,660, 621, 641, 661, 671	3/17/00
Vigo County Lifeline	N335, 445	5/12/00
Vigo County School Corporation	N305, 345, 445, 455	2/6/98
Visiting Nurses Association	N305, 345, 445	6/14/02
Washington High School (A.L.L.)	N305, 335, 400, 445	8/27/01
West Central Community Hospital	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	6/26/02
West Central Indiana Economic	N152,160, 162, 252, 256, 260, 328, 335, 400, 425	10/31/98
West Vigo Community Center	N152, 160, 162, 305, 455	6/19/01
Westminister Village/Davis Gardens	N152, 204, 445, 620, 640, 660, 671	8/10/01

- Reviewed in November 2002 by Assistant Dean
- Reported to EOAC in December 2002
- Sent to Chairpersons in May 2003 for review

b. facilities used for clinical practice are adequate.

Students and faculty evaluate clinical learning environments each semester in which the clinical course is taught. Mean trend data by agency indicate that all clinical facilities were rated at a 3.5 or above by faculty. Two community group homes were rated below 3.5 by students. Faculty

teaching in courses utilizing the two lower-rated clinical agencies were notified of the low ratings given by students. Faculty were aware of the issues and are working to improve agency personnel's responses to students or to investigate alternative clinical sites.

c. clinical resources support sufficient numbers and varieties of associate, baccalaureate, and graduate level experiences.

The undergraduate clinical courses of adult health, childbearing families, psychosocial nursing, and care of the child and family are encountering increasing competition from other local nursing programs for clinical experiences. The Terre Haute area has been rich in clinical learning environments, however, there are several nursing programs vying to utilize these agencies including the Indiana programs of Ivy Tech State College Wabash Valley Region, and Ivy Tech State College Greencastle Extension. Nursing programs located in Illinois using Terre Haute facilities are Lincoln Trail College, and Lakeview College of Nursing.

In addition to competition from other nursing programs, the number of acute inpatient beds has decreased. For example, the psychiatric beds have decreased by 50% at Regional Hospital. All clinical courses have increased the student experiences in the community. These clinical experiences have helped to decrease the number of students present on the in-patient units. If this trend of declining in-patient census continues, the faculty will be challenged to arrange clinical experiences in new and different ways.

The Sycamore Nursing Center, an academic nursing center of the School of Nursing, was created in 1981 to provide clinical learning experiences for students in health assessment. It now has both ambulatory and home health programs with clients of all ages in which students throughout all programs are able to have clinical learning experiences that are community based yet owned and operated by the School of Nursing. The students are not guests in this agency but able to participate fully in its operation at whatever level they enter.

V. RESOURCES

**Resources are sufficient to
accomplish the nursing education
unit purposes.**

<p>Criterion 15: Fiscal resources are available to support the nursing education unit purposes and commensurate with the resources of the governing organization.</p>			<p>Operational Definition: Fiscal resources are available to meet the operational needs of the nursing program that include salary and wages, supplies and equipment, recruitment and marketing, building maintenance, required travel, faculty development and expenses associated with accreditation and assessment.</p> <p>Expected Level of Achievement/Decision Rule for Action: The nursing program will have adequate funding to meet its operational needs and maintain a balanced budget.</p> <p>Outcome: Expected level of achievement currently met for all programs.</p>			
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Budget Adequacy	Office of the Dean	Dean	Annually in May	Review of School of Nursing and University Budget Documents and review of equipment and staffing requests in order to request budget for next fiscal year	<p>Based on reports from Provost and Dean, the State of Indiana has decreased overall budgetary funding.</p> <p>During the 2002-2003 academic year ISU experienced the loss of 0.05% of the previous year's budget (\$391,000) and the loss of state support for computer technology.</p> <p>Were awarded three faculty tenure lines. Nursing salaries are comparable to like departments on campus.</p> <p>Funding was adequate to meet current unit purposes.</p>	<p>Continue to Monitor</p> <p>Continue to Monitor</p> <p>Continue to Monitor</p>

CRITERION 15: Fiscal resources are sufficient to support the nursing education unit purposes and commensurate with the resources of the governing organization.

EXECPTED LEVEL OF ACHIEVMENT: The nursing programs will have adequate funding to meet its operational needs and maintain a balanced budget.

Documentation confirms:

- a. **fiscal allocations from institutional funds, not including grants, gifts, and other restricted sources are:**
- **comparable with other units in the institution; and**
 - **sufficient for the program to achieve its goals and objectives.**

The budgetary process for the school of nursing is comparable to all other units in the institution. From 1995 through 2000, the process included the Dean of the school and the Provost/Vice President for Academic Affairs. The Dean would submit, in the spring of each year, a request for allocations for the coming year with rationale for increases in specific areas. A conference was held and the school at the beginning of the fiscal year received the final budget, July 1. With a new Provost/Vice President for Academic Affairs hired July 1, 2001, the process is basically the same, however, there is now more dialogue between all deans and the Provost and decisions are made collectively regarding the need for reallocation of funds, specific needs for carryover dollars or special projects necessitating additional funds. The Dean and Provost still meet on an individual basis as well to finalize requests. Budgets are distributed to the schools on July 1 of each year.

The budget has remained reasonably flat for the last ten years. The enrollments for the schools have declined during the decade of the 1990s, thus there has been adequate resources, although limited, to achieve its goals and objectives. As enrollments start the trend upwards for the University, simultaneously the budget of the state of Indiana is experiences a growing deficit, the funding for all programs has come under close scrutiny. The following Table 15.1 compares the

entire School of Nursing faculty salaries to another similar department, and the University collectivity. Table 15.2 illustrates the comparison of administrative salaries.

Table 15.1 *Comparison of Average Faculty Salaries*

	2000	2001	2002
NURSING			
Full Professor	\$63,266	\$65,614	\$66,685
Associate Professor	\$49,401	\$50,012	\$55,443
Assistant Professor	\$44,842	\$46,655	\$48,980
Instructor	\$29,527	\$32,750	-
HEALTH & PHYSICAL EDUCATION			
Full Professor	\$58,572	\$61,117	\$63,700
Associate Professor	\$50,485	\$56,879	\$54,649
Assistant Professor	\$41,917	\$43,917	\$43,849
Instructor	\$21,704	\$22,249	-
ISU OVERALL			
Full Professor	\$64,084	\$66,344	\$67,259
Associate Professor	\$50,678	\$52,578	\$53,414
Assistant Professor	\$41,830	\$44,682	\$46,882
Instructor	\$25,130	\$27,548	\$29,082

Sources: Nursing CIP 51.1601; Health and Physical Education CIP 31.05; Overall AAUP Faculty Compensation Survey 2000-2002.

Table 15.2 *Comparison of Administrative Salaries*

Administrative Rank	School of Nursing	University Range	University Mean
Dean	\$104,238	\$104,238-145,000	\$120,671
Associate Dean	---	\$74,490-102,230	\$91,895
Assistant Dean	\$67,644	\$67,644-92,572	\$83,527

(All salaries are accessible as public records and are available in the Cunningham Memorial Library)

The School of Nursing was compared to one department with a similar number and type faculty positions. Nursing salaries were higher for all three ranks. The nursing faculty salaries as compared to the mean of all University faculty was \$574 below for the rank of Full Professors, while approximately \$1000 higher at the rank of Associate Professor, and close to \$2000 higher for the rank of Assistant Professor. It is noted that there is a significant difference between administrative salaries in the School of Nursing and the means of comparable positions in the University system. The Dean and the Assistant Dean are among the lowest paid administrators in their respective positions.

The following table is a summary of the requested budgets for the last two budget cycles for the School of Nursing. The actual expenditures for the last four years are available as Exhibit: Annual Budgets, as well as the requested University capital and operating budgets.

Table 15.3 *Budget Summary Including: Supplies and Expenses, Repairs and Maintenance, Capital Equipment, and Travel*

	Budget 2001-2002	Budget 2002-2003
Instruction Total	\$51,198	\$51,198
Administrative Total	\$3,999	\$3,999
Nurse Practitioner Program	\$30,335	\$30,335
BSN and Higher Degree	\$1,117	\$1,117
AD	\$1,015	\$1,015

b. responsibility and authority of the nurse administrator and involvement of the nursing faculty in budget preparation are evident.

The process used in the school involves the faculty who make requests to their respective department chairpersons who in turn submit these requests to the Dean for budgetary approval. The Director of Learning Resource Center (LRC) also receives requests for laboratory equipment and supplies, computer and printer needs and office equipment from faculty. The requests are prioritized by the Director, who then seeks final approval from the Dean. The Dean then finalizes budget requests for the Provost with the appropriate input from all the various constituents.

c. resources that are adequate to support faculty development, research, instruction, practice activities, and community and public service.

Resources for faculty development have been limited in the last several years due to budgetary restrictions at the state level. Additional resources have been sought from foundation accounts, fundraising efforts and internal reallocations. The Provost office established one-time dollars 2 years ago to enhance faculty development funds. These allocations were based on a pro rata status and implemented by the department chairpersons. There were residual funds available at the end of each year. These funds were available 2000/01 and 2001/2002. The International Affairs office also has offered faculty development/travel funds for the last 2 years, 2000/01 and 2001/02.

These are competitive funds made available for faculty who submit a proposal for international

activities, which would enhance the mission of the University. There have been 3 faculty members from the School of Nursing who have received benefits from these funds.

Resources for instructional services have been adequate. The University provides stipends for faculty to attend the Course Transformation Academy, and sponsors an annual “Winterfest” several day faculty development program free for attendance. During the summers of 2000, 2001, and 2002 the Eli Lilly Foundation funded a series of faculty development programs. Faculty were provided a monetary stipend for attendance that was based on rank as long as the faculty member did not have a twelve month contract. Many services are available through the University’s Center of Teaching and Learning. In addition, faculty members also submit requests to department chairpersons for travel dollars to workshops/conferences. The University generally provides partial funding.

Support for faculty research is coordinated through the Office of Sponsored Programs. This comprehensive program is available to help faculty and graduate students in their pursuit of external funds for research and scholarly activity. The office has two professional positions, four support positions, two graduate students, and a faculty research fellow. The activities of this office includes recommending funding opportunities, assist with grant proposal development, step by step budget planning, informing researchers about ethics in research and the Institutional Review Board process. Staff is also available to develop and offer special workshops as requested by faculty, staff, or student groups and guest lecturing to classes on research issues.

Clinical practice activities are not funded by School of Nursing directly. However, the *Indiana State University Handbook*, indicates that one day per week is allowed for professional consultation services during the academic year. Nursing faculty members have gained administrative approval for one clinical practice day per week through this University policy that states, “activities appropriate to their academic or professional areas of competence” (p. V-13).

Community and public service on a regular basis or connected with a special volunteer program are arranged and coordinated with the department chairperson. External grants have been the major funding source for community services, such as the inoculation program for minors, provided by the Sycamore nursing Center. Nursing faculty volunteer community and public services to numerous community groups and organizations, including but not limited to, the March of Dimes, Race for the Cure, American Red Cross, Take Back the Night, local schools and community health departments, and faith based organizations. Faculty and students have also worked together to provide various service learning projects for the community as well.

<p>Criterion 16: Program support services are sufficient for the operation of the nursing education unit.</p>				<p>Operational Definition: Program support services provided by administrative and clerical staff are sufficient to operate the nursing education unit.</p> <p>Expected Level of Achievement/Decision Rule for Action: Program support staff lines are comparable with those of similar units on campus. Faculty and administrators rate administrative and clerical support services at 3.5 or higher on a 5.0 scale.</p> <p>Outcome: Expected level of achievement met for all programs.</p>		
Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis Including actual level(s) of achievement	Actions For program Development, Maintenance, or Revision
Administrative services are available as needed.			Annually in February		<p>Administrative services are adequate for support of the school of nursing mission.</p> <p>Administrative services are defined as university services that support the nursing unit in the areas of information technology, legal, finance, grants and contracts.</p>	Continue to Monitor
Clerical services are available as needed	Assistant Dean's Office	Department Chairs and Assistant Dean	Annually in February	Comparison with like units across campus and Faculty survey of adequacy of support staff services.	<p>Dean's Office has one full-time administrative assistant and one part time student worker. Assistant Dean's Office has one full-time administrative assistant and one part time student worker. Sycamore Nursing Center and the Continuing Education program share one full time administrative assistant. The school also has one full-time development officer. There are also two shared part-time graduate assistant positions to support the administrative services areas. The Associate Degree department has one full-time secretary and one part-time student service worker. The Baccalaureate and Higher Degree Department has one full-time secretary and one part-time student service worker. Student Affairs Office has two full-time office assistants and a part-time student worker.</p> <p>A 2003 Faculty Survey of satisfaction with administrative and support staff roles assigned to the school of nursing demonstrated an average rating of 3.73.</p>	<p>Survey comments indicated that some people feel the School of Nursing needed more support in some areas, while others suggested staff with different skills in the various positions. The ability to retain clerical and administrative staff is a critical issue within the school of nursing and across campus. Support staff and administrative salary increases were lobbied for and were approved by the Board of Trustees at the June 2003 meeting. In addition, the Dean of the School of Nursing has asked for increases in pay scale for key support staff positions within the school of nursing.</p> <p>Continue to Monitor</p>

CRITERION 16: Programs support services are sufficient for the operation of the nursing education unit.

EXPECTED LEVEL OF ACHIEVMENT: Program support staff lines are comparable with those of similar units on campus. Faculty and administrators rate administrative and clerical support services at 3.5 or higher on a 5.0 scale.

Documentation confirms:

a. administrative services are available as needed.

Administrative services are defined as university services that support the nursing unit in the areas of information technology, legal, finance, grants and contracts. According to the 2000 Carnegie Classification, Indiana State University is a Doctoral/Research University-Intensive. Being a midsize comprehensive state university, infrastructures for administrative services are accessible and well established.

The Office of Information Technology is under the leadership of Dr. Edward Kinley. Included in the services are User Services, Institutional Computing Services, Multimedia Support Services, Technology Infrastructure Services, and Administrative Services. Links, voice mail, and e-mail are available through the home web page

<http://web.indstate.edu/itdept/>

Legal Affairs services are provided by Melony A. Sacopulos, Executive Assistant to the President and General Counsel. The Legal Affairs office provides legal counsel and advice to the ISU Board of Trustees and to the University President and administration on institutional policies and procedures. Access an overview of services at <http://web.indstate.edu/president/legalaff/> Director of Affirmative Action/Diversity, Dr. Susan Moss, is also available for consultation about legal matters pertaining to management and personnel issues.

Finance administrative services are under the leadership of Gregg S. Floyd, Vice President for Business Affairs and Finance, and University Treasurer. Additional assistance related to the aspects of finance is available from Diann E. McKee, the Budget Officer, or Kay Greenlee, Budget Specialist. The fiduciary management of grants and contracts are handled by the Office of the Controller. The web link is Grants@indstate.edu

The School of Nursing has one full-time Director of Development for gifts and donations to the School or the University.

b. clerical services are available as needed.

Dean's Office has one full-time administrative assistant and one part time student worker. Assistant Dean's Office has one full-time administrative assistant and one part time student worker. Sycamore Nursing Center and the Continuing Education program share one full time administrative assistant. The school also has one full-time development officer. There are also two shared part-time graduate assistant positions to support the administrative services areas.

The Associate Degree Department has one full-time secretary and one part-time student service worker. The Baccalaureate and Higher Degree Department has one full-time secretary and one part-time student service worker. Student Affairs Office has two full-time office assistants and a part-time student worker.

Since the summer of 2000, there has been considerable turn-over in the administrative and clerical support staff. The wages for these positions are limited by the University pay structure. Support staff are eligible to interview for open campus positions after initial employment or employment in a current campus position for a period of six months. Due to the expectations, workload, and numerous tasks required of support staff in the School of Nursing, after the time in the position is fulfilled, staff frequently explore less demanding position at equal pay, or

opportunities for advancement within the University system. This has been difficult for everyone due to the need to provide repeated orientation, and new employees having various skill levels.

EOAC, in accordance with the Master Plan for Evaluation, conducted a survey of the administrators and faculty to measure their perception of the adequacy of the budgeted positions as compared to other educational units on campus. There were 11 respondents to the survey. An average rating of 3.73 was calculated for all support positions. This exceeded the benchmark of 3.5 listed in the Master Plan. Comments indicated that some people feel the School of Nursing needed more support in some areas, while others suggested staff with different skills in the various positions. The majority felt that the budgeted numbers of positions were adequate and comparable to other schools on campus.

Criterion 17: Learning resources are comprehensive, current, developed with nursing faculty input, and accessible to faculty and students.		Operational Definition: Learning resources include library materials, online resources available through the library, learning resource center teaching materials, and computer resources. Expected Level of Achievement/Decision Rule for Action: Graduating Students will rate the library and learning resources available to the School of Nursing at a 3.5 on a 5.0 scale. Outcome: Expected level of achievement met for all programs.																				
Process					Implementation																	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis Including actual level(s) of achievement			Actions For program Development, Maintenance, or Revision														
Library Resources	Library Homepage Department, LRC Support Staff	School of Nursing representative to the University library committee in conjunction with the Library Subject Specialist.	Annually for outdated text and media without historical significance Ongoing for new sources in subject area. December of Even Years.	School of Nursing library representative and the library Subject Specialist recommend books and media to be removed after faculty review. Subject Specialist reviews holdings, digital sources, and media on an ongoing basis for currency and scope to support the nursing programs. Recommendations are solicited from faculty, students and staff. Access to the materials is reviewed annually for convenience, interlibrary loan agreements and issues related to information technology. Library computer/Internet journal databases are available for students on and off campus. Online journals are available via ProQuest Direct. Exit survey results are reviewed for student reports of perceived adequacy.	<table border="1"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.5</td> <td>4.06</td> </tr> <tr> <td>BS</td> <td>3.5</td> <td>4.0</td> </tr> <tr> <td>RN-BS</td> <td>3.5</td> <td>4.0</td> </tr> <tr> <td>MS</td> <td>3.5</td> <td>3.83</td> </tr> </tbody> </table>	Program	Benchmark	Mean Results	AS	3.5	4.06	BS	3.5	4.0	RN-BS	3.5	4.0	MS	3.5	3.83	<p>New item concerning adequacy of library resources added to Fall 2001 exit surveys.</p> <p>Library personnel worked with Nursing to remove outdated textbooks and to make lists of items that need updated with more current editions. Stacks last reviewed by NLNAC self-study team, June 2003.</p> <p>Continue to Monitor</p>	
Program	Benchmark	Mean Results																				
AS	3.5	4.06																				
BS	3.5	4.0																				
RN-BS	3.5	4.0																				
MS	3.5	3.83																				
Learning Resource Center	LRC, SON Homepage	Director of LRC	December of Even Years.	LRC staff and faculty make recommendations for needed resources Acquisitions made on a rolling basis according to budget given School. Student Exit surveys used to judge adequacy. School as a whole has the services of one full time Technology Coordinator, one full time Media Coordinator, and one full time Director of Learning Resources Center (LRC).	<table border="1"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.5</td> <td>3.90</td> </tr> <tr> <td>BS</td> <td>3.5</td> <td>3.86</td> </tr> <tr> <td>RN-BS</td> <td>3.5</td> <td>4.13</td> </tr> <tr> <td>MS</td> <td>3.5</td> <td>3.67</td> </tr> </tbody> </table>	Program	Benchmark	Mean Results	AS	3.5	3.90	BS	3.5	3.86	RN-BS	3.5	4.13	MS	3.5	3.67	<p>Student comments on LRC surveys indicate that they appreciate the services of our LRC and computer lab, but some stated that we need more information concerning the resources during orientation. Action LRC and lab coordinator do information session during orientation.</p> <p>Continue to Monitor</p>	
Program	Benchmark	Mean Results																				
AS	3.5	3.90																				
BS	3.5	3.86																				
RN-BS	3.5	4.13																				
MS	3.5	3.67																				
Computer Resources	LRC	Director of LRC and Technology coordinator	December of Even Years	Acquisitions made according to University plan and available special technology funds. Student Exit surveys and LRC evaluation surveys used to judge adequacy. School as a whole has the services of one full time Technology Coordinator, one full time Media Coordinator.	<table border="1"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.5</td> <td>3.90</td> </tr> <tr> <td>BS</td> <td>3.5</td> <td>3.86</td> </tr> <tr> <td>RN-BS</td> <td>3.5</td> <td>4.13</td> </tr> <tr> <td>MS</td> <td>3.5</td> <td>3.67</td> </tr> </tbody> </table>	Program	Benchmark	Mean Results	AS	3.5	3.90	BS	3.5	3.86	RN-BS	3.5	4.13	MS	3.5	3.67	<p>Student comments indicate that they would like the lab to be open later in the evenings, but a previous attempt at this found that it was underused and lack of funding forced us to restrict the hours to daytime for now.</p> <p>Continue to Monitor</p>	
Program	Benchmark	Mean Results																				
AS	3.5	3.90																				
BS	3.5	3.86																				
RN-BS	3.5	4.13																				
MS	3.5	3.67																				

CRITERION 17: Learning resources are comprehensive, current, developed with nursing faculty input, and accessible to faculty and students.

EXPECTED LEVEL OF ACHIEVMENT: Graduating students will rate the library and learning resources available to the School of Nursing at a 3.5 on a 5.0 scale.

Documentation confirms:

- a. **instructional aids, technology, software and hardware, and technical support are:**
- **available in sufficient quantity and quality to be consistent with program objectives and teaching methods; and**
 - **available to assist students and faculty experiencing difficulty using technology.**

Learning Resources Center. School of Nursing Learning Resources Center (LRC) provides a quality learning environment that functions to enhance teaching and learning activities. The LRC, located on the 2nd floor of the School of Nursing, consists of a Skills Laboratory, Multimedia Laboratory, Demonstration Classroom / Lab, Video Room, undergraduate student lounge, and staff offices. The Skills Laboratory (SN 215) is equipped with 10 electric hospital bed units. A medicine room, kitchen, linen room (SN 216) and Director's office (SN 211) are located adjacent to the laboratory. The Skills laboratory also has two new up-to -date computers and printers. Email and the Internet may be accessed from these computers. Ongoing maintenance of various learning resources and equipment are provided by the staff in order to facilitate effective use of materials in the learning activities of the students and faculty in the School of Nursing.

A variety of instructional aids are available including but not limited to: manikins, simulators, equipment such as, stethoscopes, blood pressure cuffs, otoscopes, IV pump, actual and pseudo medications, and syringes. The extensive inventories of learning products also available to faculty and students that include pamphlets, videos, text material, charts, interactive laser videodisk programs, and CD-ROM are posted on the School of Nursing webpage, in the faculty mailroom bulletin board, and in the LRC Video Room, and at the computers in the Skills Lab (Exhibit: LRC Resources). This does not include the text and media holdings in the Cunningham

Memorial Library. The review of the LRC holdings included approximately: 6 disk/CIA, 9 audiotapes, 10 cards or pamphlets, 12 laser interactive videodisk programs, 24 charts, 61 CD-ROM, 66 videos, and 128 texts. The intentional adjustment to alternate starting dates of the AD and BSN programs has been in response to the need to balance the availability of resources for nursing students in fundamental skills courses requested by the LRC staff.

The student's evaluation of the Learning Resource Center is presented in Table 17.1. The benchmark has been attained for all programs.

Table 17.1 *Student Evaluation of L R C*

Program	Benchmark	Mean Results
AS	3.5	3.90
BS	3.5	3.86
RN-BS	3.5	4.13
MS	3.5	3.67

Staffing. The LRC is staffed by the Director, the LRC Technology Coordinator, and the Media Coordinator Monday through Friday 8:00 am - 4:30 pm during the academic year when classes are in session. Staffing during other times varies depending on personnel availability. The Director of the LRC (12 month appointment) is responsible for coordinating the use of the LRC facilities and for selection and purchase, storage, retrieval, utilization, security, and maintenance of lab supplies and equipment. The Technology Coordinator's (9 month appointment) primary responsibility is the technology component of the LRC. In addition, the LRC Technology Coordinator assists with the day-to-day operation of the LRC. The LRC Media Coordinator provides clerical support, maintains multimedia and electronic equipment reservations and set-up, and assists with the day-to-day operation of the LRC. A pool of Client Service Representatives (student workers trained in computer troubleshooting, provided by Information Technology) is available for computer assistance for faculty / staff on an as needed basis.

Campus technology support is available through the Office of Support Services for both faculty and distance students at <http://indstate.edu/distance>. Training for faculty and staff is available periodically throughout the year. Distance students that need additional services can also be helped directly by the library staff at <http://odin.indstate.edu> and technical services at IT-HELP@indstate.edu

- b. learning resources (library, skills laboratory, computer laboratory, etc.) are current and comprehensive to meet nursing education unit purposes.**

Library. Cunningham Memorial Library has well met the needs of the nursing unit through online reserve sources, classic and contemporary books, journals and bound periodicals, videos, CD-ROMs, and online search engines and full text electronic journals through ProQuest, EBSCOhost, and LexisNexis Academic. The main campus library building is open 100 hours per week during the regular academic year, and 71 hours during the summer terms. In addition, the *Online Catalog* provides access to the collections of St Mary-of-the-Woods and Rose-Hulman Institute of Technology Libraries. Interlibrary loans are available for books and photocopies of articles. Nursing holdings that are regarded as not having historic value are removed from the library holding with approval of the nursing faculty. A listing of new purchases for the last three years and online journals is displayed in the NLNAC Resource Room (Exhibit: Library Accquisitions).

Distance and campus students can easily access the library's online services through MyISU Portal or the library's home webpage <http://lib.indstate.edu/>

Student evaluations of the University's library resources are presented in Table 17.2. The benchmark has been attained in for all programs.

Table 17.2 *Student Evaluation of Library Resources*

Program	Benchmark	Mean Results
AD	3.5	4.06
BS	3.5	4.0
RN-BS	3.5	4.0
MS	3.5	3.83

Skills Laboratory. The Skills Laboratory (SN 215) is equipped with 10 electric hospital bed units. A permanent skills cabinet, which is organized into trays with the most frequently practiced procedures, is readily available for students and faculty to review at any time. A medicine room, kitchen, linen room (SN 216) and Director's office (SN 211) are located adjacent to the laboratory. The Skills laboratory also has two new computers and printers. Email and the Internet may be accessed from these computers.

Computer Laboratory. The School of Nursing Computer Lab (SN209) houses 28 student computer stations that were up-graded during the summer of 2003. Student consultants are available during regular hours to assist students, staff and faculty with computer related questions. Computer lab hours are available at <http://www.indstate.edu/acns/user-serv/labs/home.html> and are posted on the door of the computer lab. (Current School of Nursing hours: Monday - Thursday 9:00 am - 5:30 pm; Friday 9:00 am - 4:30 pm.) The ISU Student Computing Center and other public computer clusters are available for computing activities when the School of Nursing Computer Lab is closed. The computer lab utilizes the program configuration served to all public computer labs. Students can access a variety of programs on the University network as well as their account on MyISU Portal. These servers / software can be accessed from any public computer cluster on campus.

c. learning resources are adequate and accessible.

The Trustees of Indiana State University have permitted a technology fee to be charged to students each semester. The funds help support compensation for computer lab personnel and

printing for students. Campus computer labs are available and accessible. The Student Computing Complex (SCC) stands in the middle of 15 individual computing facilities. These facilities, with over 500 workstations, are connected through network services and are dedicated to academic endeavors. The labs are open to all Faculty, Staff and Students with valid ISU identification. The SCC has a lab that is open 24 hours a day, seven days a week (this lab closes only twice a year). All other labs have schedules that reflect the current sessions' class hours. Computer services, in conjunction with library services, have made it possible to provide excellent resources that are readily available to students and faculty.

In addition to resources maintained in Resources, Cunningham Memorial, LRC offices house numerous resources including resource texts, articles, posters, display boards, models, audio / videotapes, CD-ROMs, and other various supplies and equipment. Audiovisual resource listings are posted on the bulletin board in the copy / work room (SN 312) and can be access from the web site at http://socrates.indstate.edu/new_nursing_resources/view.asp and searched on the website at http://socrates.indstate.edu/new_nursing_resources/search.html.

Laptop Computers / Palm pda / Digital Camera: A small number of laptop computers are available from the LRC (SN 207-208) for faculty, staff use for conferences, presentations, and committee use. A small number of Palm pdas are available from the LRC (SN 207-208) for FNP student use. A portable backpack 4x4x24x CD-ReWritable Drive is available from the LRC (SN 207-208) for those faculty and staff who do not have CD-ROM drives on their office computers. A digital camera is available from the LRC (SN 207-8) for faculty and staff use. Two camcorders are available from the LRC for student use for course assignments, and for faculty and staff for university related activities. Multimedia/audiovisual equipment to be used at locations other than the ISU campus is available through Information Technology/User Services' Audio Visual Services. The School of Nursing received a base budget allocation of \$18,000 in

2001-2002 and \$8,295.00 in 2002-2003 to be used for faculty and staff equipment needs.

d. mechanisms by which nursing faculty have input into the development and maintenance of learning resources.

Faculty requests made to the LRC Director results in efficient purchasing, processing, storage, and circulation of instructional aids. The School of Nursing has an appointed faculty representative to the library. This nursing faculty member works with the liaison library staff person assigned by the dean of the library. The Evaluation Outcomes Assessment Committee (EOAC) reviews the Library report every two years for the removal list and new acquisitions.

Criterion 18: Physical facilities are appropriate to support the purposes of the nursing education unit.			Operational Definition: All office, classroom and other spaces available to the School of Nursing Expected Level of Achievement/Decision Rule for Action: Graduating students will rate the physical facilities with a mean of 3.5 on 5 point scale Outcome: Expected level of achievement met for all programs.																		
Process					Implementation																
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>															
Classroom and common space	Tour of classroom and common space and Exit Surveys	Dean, EOAC	Annually in December and as needed	Review classroom and common space configuration for adequacy and need for repair	Largest lecture hall will seat 138 students. If enrollments increase beyond this number in any given class, we will have to divide into additional sections. <table border="1" style="margin-left: 20px;"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Mean Results</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>3.5</td> <td>4.02</td> </tr> <tr> <td>BS</td> <td>3.5</td> <td>3.68</td> </tr> <tr> <td>RN-BS</td> <td>3.5</td> <td>4.67</td> </tr> <tr> <td>MS</td> <td>3.5</td> <td>3.83</td> </tr> </tbody> </table>	Program	Benchmark	Mean Results	AS	3.5	4.02	BS	3.5	3.68	RN-BS	3.5	4.67	MS	3.5	3.83	New item addressing physical facilities added to exit surveys starting Fall 2001. Continue to Monitor
Program	Benchmark	Mean Results																			
AS	3.5	4.02																			
BS	3.5	3.68																			
RN-BS	3.5	4.67																			
MS	3.5	3.83																			
Learning resource space	Tour of LRC	Dean, LRC Director	Annually and as needed	Review space for adequacy and need for repair	Learning lab can accommodate 30 students at any one time. Currently there are adequate facilities for enrollment. With increasing enrollment will have to look at creative scheduling utilizing evenings and weekends.	Stagger start time of AS and BS programs to decrease pressure on LRC resources particularly for fundamentals and assessment labs. Continue to Monitor															
Office space	Tour of offices	Dean, LRC Director	Annually and as needed	Review office assignments and need for repair	All full-time faculty have individual offices, computers and printers. Part-time adjuncts have shared office space. Long term problem with window leaks in offices.	New windows installed summer 2002 to fix leaks. Continue to Monitor															

CRITERION 18: Physical facilities are appropriate to support the purposes of the nursing education unit.

EXPECTED LEVELS OF ACHIEVMENT: Graduating students will rate the physical facilities with a mean of 3.5 on a 5 point scale.

Documentation confirms:

- a. physical facilities include classrooms, laboratories, multi-media facilities, conference rooms, and office space.**

The School of Nursing on the main campus houses classrooms, seminar rooms, an auditorium, lounges, the learning resources center and offices for nursing administrators, faculty and staff. The office suite of the Dean of the School of Nursing is located on the 4th floor and includes a private office, an administrative assistant office, a conference room, and a workroom / storage area for permanent files. Offices for the Assistant Dean, the Director of Student Affairs and the two departmental chairpersons are located on the 3rd or 4th floors and have adjoining support staff offices. All administrative and support staff offices have standard office equipment including personal computers and printers.

All tenure-line and temporary faculty and professional staff, with the exception of the Learning Resources Center Director, have private offices located on the 2nd, 3rd or 4th floors. Each private office is furnished with a desk, bookcase, file cabinet, chairs, direct dial telephone, personal computer and a printer with access to network laser printers if the individual desires. Part-time adjunct faculty, share an office on the 4th floor which is similarly equipped.

The majority of nursing classes and seminars are held in classrooms located in the SON building. Classrooms are equipped with standard classroom equipment including seats, podiums, chalkboards, an overhead projector, a projection screen, and appropriate outlets allowing use of a

multimedia projection system upon faculty request. Internet access is available in all classrooms. Two-way video access is available in SN 210, SN 302, SN 311 and SN 402.

The auditorium seats 138 persons. This room is equipped with a regular projection and a rear projection screen. A permanently installed multimedia projection system is available in SN 107. The sound system in the room allows the use of a wireless microphone or a lavalier microphone. Four television monitors are suspended from the ceiling throughout the room to afford maximum viewing.

Three classrooms on the first floor can accommodate 45 - 60 students. All classrooms on the first floor may be scheduled for use by other units on campus. ISU Distance Education classes are broadcast from SN 106. A 2-way video machine is housed in SN 106 also. SN 105 has a permanently installed multimedia projection system.

The Learning Resources Center, located on the 2nd floor of the School of Nursing, consists of a Skills Laboratory, Multimedia Laboratory, Demonstration Classroom / Lab, Video Room, Undergraduate Student Lounge, Computer Laboratory and Staff offices.

A simulated room in a home has been provided for community nursing students and is available in SN201.

The third floor features one classroom / lab that can accommodate 30-35 students. There are two seminar rooms on the 3rd floor, which seat approximately 12 persons. The classroom / lab and seminar rooms are used by nursing students and faculty only.

The Faculty / Staff Lounge is located on the 4th floor. A stove, refrigerator, and microwave are available in the lounge. There is one seminar room on the 4th floor, which seats approximately 12 persons.

Demonstration Classroom / Lab. The 50 stationary seat Demonstration Classroom / Lab (SN 210) features raised auditorium seating, one electric hospital bed unit, 4 examination tables, 1 examination bed unit, a physician's beam scale and an area for small group work. A permanently installed multimedia projection system is available in SN 210. Two mobile TV/VCRs are housed in the Demonstration Classroom.

Multimedia Lab. The School of Nursing has 3 rooms with permanently installed multimedia projection systems. Four portable systems are available for use in those rooms not fitted with a permanently installed system. The SN 201 houses 2 interactive video stations and a 2-way video system.

Computer Lab. The School of Nursing Computer Lab (SN 209) houses 28 student computer stations. Each computer has a 3 1/2-inch disk drive, a zip drive and access to a color laser printer and a black and white laser printer. The computers have CD-ROM drives with sound capability. A ceiling mounted projection system and a teaching station are available in the computer lab. An 8' x 3 1/2' dry erase wallboard and a portable (2 1/2' x 3') dry erase board is available in the Computer Lab.

Video / IHETS Room. The School of Nursing Video / Indiana Higher Education Television System (IHETS) room (SN 214) is available Monday - Friday 8:00 am - 4:30 pm when classes are in session. This room (SN 214) houses a TV/VCR, new computer, printer and armchairs for faculty and students to view / preview videos. Email and the Internet may also be accessed from the computer. Nursing programs and CD-ROM programs listed in the Skills Laboratory section are also available on / for this computer. In addition to a copy housed in Cunningham Memorial

Library, a video and written material for communicable disease education verification are available in SN 214.

Undergraduate Student Lounge. The Undergraduate Student Lounge (SN 206) is provided for undergraduate School of Nursing students for relaxation, socialization and study. Sofas, tables and chairs are available. A copy machine is housed in the Lounge. Donated professional journals and popular magazines (current to 5 years old) are for use in the Lounge. A microwave oven, coffeepot and supplies (donated by the ISU Student Nurse's Association) are available. Bulletin boards in SN 206 contain various postings on academic and scholarship information, job opportunities and other announcements. A locked storage cabinet for the Student Nurse's Association is located in SN 206.

Graduate Student Lounge. The Graduate Student Lounge, (SN 426-427) is provided for graduate School of Nursing students for relaxation, socialization and study. Sofas, tables and chairs are available. Three networked computers, two scanners and three networked laser printers for graduate student / faculty use are in a partitioned area of the lounge. A TV/VCR is available for videotape / satellite broadcast viewing. Donated professional journals and popular magazines (current to 5 years old) are available for student, faculty and staff use in the Lounge. A coffeepot and supplies are available. Bulletin boards in SN 426-427 contain various postings on academic and scholarship information, job opportunities and other announcements.

Offices / Storage. Storage for supplies, equipment and audiovisual materials and offices for LRC personnel are located in SN 207-208 and SN 211. A storage area is also available behind the permanent screen in room SN 107. Selected office rooms that lock are used to store student records on the third floor. Some instructional materials are stored in the Landsbaum Center for Health Education Building for more convenient access by faculty and students.

Lockers. A room with 20 storage lockers is adjacent to the 2nd floor men's restroom. A room with 30 storage lockers is adjacent to the 2nd floor women's restroom.

Display Cases. Under the guidance of the Dean, the LRC Director is responsible for maintaining exhibits in the locked display cases on the first floor of the School of Nursing. A permanent display of the Charter for Lambda Sigma Chapter, Sigma Theta Tau International is maintained in the case. A display of the original and current School of Nursing student uniforms is also maintained in the case.

Photo Gallery. The photo gallery on the first floor of the School of Nursing includes photos of the Dean, Assistant Dean, regular faculty, temporary faculty, professional staff, and support staff of the School of Nursing taken by ISU Photographic/Digital Imaging Services. The LRC Director is responsible for the details for updating the gallery.

TVs and VCRs are permanently mounted in SN 101, 106, 107, 109, 215, 326-7 and the Dean's Conference Room.

b. physical facilities, instructional and non-instructional are adequate for the nursing education unit at whatever site the program is offered.

The Landsbaum Center for Health Education is located at 1433 North 6 1/2 Street, Terre Haute. This exciting new facility is a cooperative partnership involving Union Hospital's Midwest Center for Rural Health, the Indiana University School of Medicine, and Indiana State University's School of Nursing. Attached to the Family Practice Residency, the new Landsbaum Center for Health Education offers unique opportunities for health improvement and team learning through partnership and multidisciplinary education. The building also houses Union Hospital's Midwest Center for Rural Health and portions of Indiana State University School of Nursing, and Indiana University School of Medicine-Terre Haute Center for Medical Education. Offices are also provided for staff of the recently funded West Central Indiana Area Health Education Center, and the Indiana Rural Health Association. The two-story, 34,000-square-foot building includes the

latest technology and is outfitted with a 150-seat lecture hall, classrooms, patient exam rooms, study areas and offices. The School of Nursing shares the common spaces of the first floor as well as rooms dedicated to the Sycamore Nursing Center. This area includes a spacious waiting room with receptionist area, 2 conferences rooms, clinical lab, 6 exam rooms, nurses' station, storage area, records area, and office.

The Sycamore Nursing Center (SNC) was founded in 1981 to offer not only service to the community but also clinical learning experiences for the Indiana State University School of Nursing Baccalaureate and Higher Degree Nursing Programs. It is an academic nursing center that is a charter member of the National League for Nursing Council of Nursing Centers and offers not only comprehensive health assessments including histories and physical examinations to all ages for a minimal fee but also free age appropriate immunizations for children 1 month to 18 years of age. The SNC has had a home health care program since 1985 when Diagnostic Related Groups decreased clients' hospital stays. The local home health care agencies were also forced to discharge clients early from home health care and yet the clients needed continued care. The SNC continues to meet those needs. The home health care program is free.

The second floor of the Landsbaum Center Health Education building has additional space for the School of Nursing, which includes 5 offices, and 1 storage room. Two conference rooms on the second floor are available for priority scheduling by the School of Nursing. When not being used by nursing students or staff, the conference rooms are available to the other health education partners. The Dean of the School of Nursing also has an office on the second floor of this location.

The Continuing Education Program in Nursing received reapproval from the American Nurses Credentialing Center's Commission on Accreditation as a provider of continuing education in

nursing through February 2005. The second floor also has the office of the Director of Continuing Education. The support staff for this program has an office on the first floor. Classrooms in the Landsbaum Center for Health Education will also be utilized for continuing education offerings.

Based on data from the most recent alumni survey students overall rated the physical facilities of the School of Nursing as 4.05 on a 5 point scale. Refer to Table 18.1

Table 18.1 *Student Rating of Physical Facilities*

Program	Benchmark	Mean Results
AD	3.5	4.02
BS	3.5	3.68
RN-BS	3.5	4.67
MS	3.5	3.83

VI. INTEGRITY

Integrity is evident in the practice and relationships of the nursing education unit.

Standard VII: INTEGRITY

The program demonstrates integrity in its practices and relationships.

<p>Criterion 19: Information about the program, intended to inform the general public, prospective students, current students, employers and other interested parties, is current, accurate, clear, and consistent.</p>					<p>Operational Definition: Print and electronic media information concerning the School of Nursing Programs is current, accurate and consistent.</p> <p>Expected Level of Achievement/Decision Rule for Action:</p> <p>There is consensus among committee chairpersons, department chairpersons, Director of Student Affairs, webmaster and executive committee that information regarding the nursing programs is current accurate and consistent.</p> <p>Outcome: Expected level of achievement not met for all programs, see actions.</p>	
Process					Implementation	
Component/ Element	Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Program Information	Catalogue, SON Web page, Recruitment Brochures, Syllabi, Student Handbook and School of Nursing Handbook	Department Chairs, Committee Chairs, Director of Student Affairs, Webmaster	Annually in September	Review of all published materials for accuracy	<p>Summer of 2002 a review of published materials revealed multiple inconsistencies between sources of information, primarily related to updates needed to the School of Nursing Handbook.</p> <p>The self-study evaluation has brought attention to the need for revisions of many of our existing policies. Changes are currently in the working stage or going through the approval process.</p>	<p>Fall 2002 Executive Committee divided responsibilities for sections of the School of Nursing Handbook to be reviewed and revised. Actual revisions to printed version ongoing.</p> <p>Revisions being considered for admission, progression, grading scale, dismissal, and re-instatement policies.</p>

Criterion 19: Information about the program, intended to inform the general public, prospective students, current students, employers and other interested parties, is current, accurate, clear, and consistent.

EXPECTED LEVEL OF ACHIEVEMENT: There is consensus among committee chairpersons, department chairpersons, Director of Student Affairs, webmaster and executive committee that information regarding the nursing programs is current, accurate and consistent.

Documentation confirms:

- a. **policies and procedures are published for all educational activities that have implications for the health and safety of clients, students and faculty.**

University Standards is published annually and distributed to all students in the University. It contains the Code of Student conduct, information regarding the Drug Free Schools and Communities Act Amendments of 1989, safety at Indiana State University, the smoking policy, and motor vehicle regulations. Health requirements and health services information for all University students may be found at <http://www.indstate.edu/shc/>.

School of Nursing policies that have implications for the health and safety of clients, students and/or faculty are published in the *School of Nursing Undergraduate Student Handbook* and/or the *School of Nursing Handbook*. Student-focused policies can be located at the School of Nursing website. The policies include:

- CPR requirements
- Injury/Illness Procedure
- Smoke Free Building
- Employment of Students in Health Agencies
- Health Policy
- Bloodborne Pathogens Policy
- Safe Practice Policy
- Peer Assistance Policy
- Latex Allergy

- b. **published documents about the program are current, accurate, clear, and consistent.**
- c. **accurate representation of the program to its public(s) and provision of sufficient information to insure accountability and consumer choice is stated in the catalog/published documents:**
 - reflecting the mission and/or philosophy and purposes of the program.**
 - providing current and accurate information about admission policies; tuition and fees; financial aid; graduation; licensing requirements; academic policies; academic calendar; student services; and program length.**
 - clearly representing the program and career opportunities through program documents and publications, advertising, website, recruitment, admission materials, and course syllabi; and**
 - providing clear statements of institutional accreditation status; name, address, and telephone number of the National League for Nursing Accrediting Commission as the accrediting agency of the nursing program.**

Information is published for the public in a variety of formats. The *Undergraduate Catalog* and *Graduate Catalog* are now published annually, rather than biennially as in the past, and may be accessed online from the University website.

Final approval by the Indiana State Board of Nursing and the respective institutions for the transfer of the Associate Degree Nursing Program at Indiana State University to the Ivy Tech State College in Terre Haute occurred near the end of the Spring Semester 2003. Although continuing students enrolled in the program will have the opportunity to complete the Associate Degree at Indiana State University, there will be no new admissions. The lateness of the decision did not permit updating of information related to the Associate Degree Nursing Program in documents such as the *Indiana State University Undergraduate Catalog 2003-2004*, which had already gone to press. Catalog changes for each program must be approved through appropriate University channels and submitted in advance of a deadline which falls in February or March each year. This was not possible. One additional inaccuracy was identified in the catalog as a result of an omission under the heading of course requirements for the BS degree. Fourth year, second semester course work, should have an elective listed for 0-3 credits (required only if needed to meet graduation requirement of at least 124 total credit hours). Other information in the University publications and website are current, accurate, clear, and consistent.

The *School of Nursing Handbook* is currently under major revision. The Executive Committee of Nursing Council has undertaken the responsibility to coordinate the review and revision which began Fall 2002. The handbook is scheduled for publication to be available Fall 2003; however, a few documents needing revision may still be in committee or in the approval process. In addition, a vacancy in a support staff position has increased the workload for the individual responsible for preparing the changes for publication and may compromise timely completion.

The School of Nursing Undergraduate Handbook is revised and printed each fall, and given to each student newly admitted to an undergraduate nursing program. Students beginning the program of studies, but not yet admitted to the program, are given a copy of the admission, progression, retention, and graduation policies as well.

The School of Nursing Web page provides internet access to information. It is maintained by the Learning Resource Center technology coordinator following University guidelines/policies, and is updated at least monthly.

Information about University and School of Nursing accreditations may be found at <http://www.indstate.edu/acad-aff/accreditation.html#School of Nursing>. This site includes a link to the NLNAC website. The *Indiana State University Undergraduate Catalog 2003-2004* and *Graduate Catalog* list the agency name; however, the address and phone number were omitted due to printing limitations. In the School of Nursing program brochures and *School of Nursing Undergraduate Student Handbook*, the NLNAC contact information is complete. The information is also posted in several locations in the School of Nursing Building.

- d. **communication of accurate and consistent information about: definition of clock time and credit hours for lecture, clinical experiences, independent study, and other activities; ratio of clock hours to credit hours; and specific credit hours required for each course.**

The ratio of clock hours to credit hours for classroom experience used throughout the University is 1:1, with the clock hour defined as a 50 minute learning experience. Students enrolled in a 1 credit hour, non-clinical/laboratory course would receive 50 minutes of instruction for each of 15 weeks in the semester.

Clinical or laboratory courses use a ratio of 3:1 for clock hour to credit hour. The School of Nursing defines an hour of clinical experience as a true hour of clock time, 60 minutes. A one-credit hour clinical experience would require a student to be in the clinical setting for three hours each week.

The total number of credit hours for each nursing course and the appropriate ratio of contact hours are listed in the *School of Nursing Handbook* and *School of Nursing Undergraduate Student Handbook* in the program of studies for each program. The information is also provided in course descriptions in the *Undergraduate Catalog* and *Graduate Catalog*, published in the Schedule of Classes on the University website, and listed in course syllabi. The information communicated is both accurate and consistent.

<p>Criterion 20: Complaints about the program are addressed and records are maintained and available for review.</p>			<p>Operational Definition: A complaint is defined as a communication that expresses a concern, problem, or injustice as perceived by a person or persons involved with the School of Nursing. Complaints issued through either the informal procedures or through the formal grievance procedures as published are documented and monitored for program improvement.</p> <p>Expected Level of Achievement/Decision Rule for Action: 100% of complaints will be documented and addressed according to established methods and policies.</p> <p>Outcome: Expected level of achievement met for all programs.</p>			
Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Complaints	Office of Dean, Office of Assistant Dean, Office of Student Affairs, Departmental Offices, Student Liaison, Office of Technology Coordinator, SAC, Exec and EOAC Minutes	Dean, Assistant Dean, Director of Student Affairs, Departmental Chairs, Student Liaison, Technology Coordinator, Committee Chairs and Grievance Committee.	Data reported annually from responsible parties to EOAC in November.	EOAC analyze complaints by type (formal or informal and by NLNAC standard) for any organizational action needed	<p>Liaison log and webpage log reviewed. 100% compliance.</p> <p>No formal complaints or grievances were documented.</p> <p>Informal concerns have been documented through a variety of mechanisms (surveys, webpage).</p>	<p>Informal concerns were referred to the responsible person or persons.</p> <p>To improve the informal documentation process the "Opportunity for Improvement" website was started as a creative method of information gathering (March 2003). Located under "contact us" on School of Nursing Homepage.</p>

CRITERION 20: Complaints about the program are addressed and records are maintained and available for review.

EXPECTED LEVEL OF ACHIEVMENT: 100% of complaints filed through the established formal or informal mechanisms will be addressed according to established policies.

A complaint is defined as a communication that expresses a concern, a problem, or an injustice as perceived by the person or persons involved with the School of Nursing. In providing a climate that is open to feedback from the public, students, parents, faculty and staff, there are two mechanisms for resolving complaints that include: informal investigations and resolutions, or formal grievance procedures. As role models of conflict management, communication with parties directly involved is encouraged first. The School of Nursing web page provides an informal method for registering compliments and concerns. There is also a link to the Ombudsman on the School of Nursing web page. Published university policies indicate procedures for the formal grievance procedures available to faculty and staff. The School of Nursing Undergraduate Student Handbook (2002-2003) provides information to guide the student through both the process of informal resolution and formal grievance procedure. The Graduate Student-Advisor Handbook (2002) available on the Graduate School web site indicates the complaints and grievance procedures for graduate students. The Indiana State University Handbook (2001) identifies the policy for faculty and staff (Student Grievance Policy and Procedure, p.33; Complaints and Grievances, p. 24; University Faculty Grievances, p. II-14; Support Staff Grievance Policy, p. VI-5). Privacy rights are respected and protected at all levels of reporting.

The Assistant Dean will solicit the identified reports related to complaints for the Evaluation/Outcome Assessment Committee (EOAC). The data are reviewed during the November meeting annually. Sources of data include:

Report from the Dean involving

- Complaint registered through external accrediting bodies (NCA; NLNAC; ISBN)
- Concerns filled by a patient cared for by a student
- Problems identified by a manager or administrator from a contractual agency

Report from Chairpersons

- Grievances filed by faculty and staff

Report from Student Affairs Committee

- Student Liaison Log

Report from the *Opportunity for Improvement* web site (New as of February, 2003)

- Collected by Technology Coordinator

Complaints will be classified as either formal or informal, and reviewed for trend analysis

according to the most relevant NLNAC (2002) standards. Recommended actions from EOAC are sent to the designated Committee, Director, Chairperson, or Dean.

Results of Data Collection and Analysis (November 1999 through November 2002)

There has been no external complaint registered during this time period. There has been no faculty grievance filed. Also, the Student Liaison has documented no student complaints.

However, there have been three informal student complaints about access to academic advising provided by the Director of Student Affairs. These complaints were received through the web page. This was during a period of support staff transition and the concerns were reported to the Dean and to the Director of Student Affairs. The action taken was to continue to monitor for students complaints and provide additional orientation to new support staff.

The web page dialogue box was established by the Learning Resource Center Technology Coordinator as a source of information to potential, new, and enrolled students. An additional link, *Opportunity for Improvement* site, was initiated as a creative action for monitoring compliments and concerns as of March 2003.

Criterion 21: Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.			Operational Definition: University compliance with Title IV regulations Expected Level of Achievement/Decision Rule for Action: 100% of nursing faculty will comply with university policies and practices regarding attendance reporting to maintain compliance with Title IV requirements. Outcome: Expected level of achievement met for all programs.			
Process				Implementation		
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Title IV Compliance	Office of Student Financial Services and Catalogue	Individual faculty members Department Chairs Director of Student Financial Services VP for Enrollment Management	Ongoing each semester at midterm and end of the semester. Department chair report to EOAC on Faculty Compliance in May Ongoing by OFA. Any issues are to be reported to EOAC on an as needed basis.	Department Chair Analysis of faculty compliance with attendance reporting as required by ISU Course cancellation records Audit of Financial Aid records for compliance	Had 100% compliance with paper and pencil method of attendance reporting. Since going to online attendance reporting which requires faculty passwords and has limited times that faculty can enter data, some faculty have been unable to report student attendance.	Chairpersons receive reports of faculty who have not recorded student attendance using the online method. Chairs e-mail faculty members asking for data to be entered in a timely fashion. Technical difficulties with online reporting mechanisms have been reported to Information Technology Services and improvements have been made. Last reporting session went more smoothly. Fewer faculty had difficulty logging in and reporting during the correct timeframe. Continue to monitor.

Criterion 21: Compliance with Higher Education Reauthorization Act Title IV eligibility and certification requirements are maintained.

EXPECTED LEVEL OF ACHIEVMENT: 100% of nursing faculty will comply with university policies and practices regarding attendance reporting to maintain compliance with Title IV requirements.

The Indiana State University, Office of Student Financial Services (OSFS), also known as the Financial Aid Office is a fully accredited participant in the Federal Title IV programs. The Office of Student Financial Services complies with documentation, monitoring and loan repayment policies. The Office of Student Financial Services is located in Tirey Hall, room 150 in the University Pavilion area on Seventh Street.

Student Loan Information Governance

- a. a written, comprehensive student loan repayment program that addresses student loan information, counseling, monitoring, and cooperation with lenders.**

Student loan information including Affirmative Action, application, processing, eligibility, budgeting and awarding processes, ethical responsibilities, documentation, types of financial aid, appeals, class attendance, satisfactory progress, Return of Title IV Federal Aid Policy, and reporting are mandated and available to graduate and undergraduate students. Student loan information is located in the *Financial Services Handbook* or on the website:

www.indstate.edu/finaid/handbook/cap.htm.

Other resource listings provided by the OSFS on the website include:

www.petersons.com
www.collegeboard.org
www.fastweb.com and
www.sai.com/adjunct.

The Office of Student Financial Services has twenty-four (24) employees, under the supervision of a qualified Director. Other personnel include the Senior Associate Director, Associate Director, Assistant Director, and four Financial Aid Counselors, including a host of Data Entry

personnel, Assistants, Secretaries, and Consultants for provision of services to students in various loan programs.

Beginning in the Fall of 2000 Indiana State University was required to have a process by which it could document that Title IV recipients attended class during the semester for which they received aid. This process is part of a larger policy called the Return of Title IV Aid Policy.

This policy was put into effect as a result of the Higher Education Amendments of 1998 (HEA 98) and affects financial aid recipients who completely withdraw from all their classes. The goal of the Federal Return of Title IV Funds policy is to accurately determine the amount of federal assistance the student is eligible for at the time of his/her withdrawal from the university. It does not apply to financial aid recipients who drop from some, but not all of their classes within the semester. The Federal Title IV programs covered under this policy include *Federal Pell Grant*, *Federal Supplemental Education Opportunity Grant (SEOG)*, *Federal Perkins*, *Federal Stafford* and *Federal PLUS*.

Monitoring of attendance, grading verification, and withdrawals are reported in collaboration with the Office of the Registrar, the Office of Student Financial Services, and the faculty. The Financial Aid Class Attendance Policy monitoring system states:

Recipients of federal funds who have registered for classes **must attend** those classes if they wish to keep their financial assistance. Failure to do so could result in, the cancellation of [aid], owing money back to the university, owing money back to the federal programs, and losing [eligibility] for future federal financial assistance (*Financial Services Handbook*, 2001).

One hundred percent of tenure and tenure track faculty in the School of Nursing participate in monitoring class attendance by submitting electronic reports every third and tenth week of each semester. There has been a problem with adjunct faculty not reporting clinical sections. As an opportunity for improvement, attendance and midterm reporting will become part of new faculty

orientation provided by Department. Also, the Chairpersons will notify all faculty, including adjuncts, to report attendance during the reporting dates.

Midterm academic grades are also reported for full time first semester freshmen and students on academic probation. Only midterm deficiencies are reported for all students. This information is administered by the Office of the Registrar and monitored by the School of Nursing Department Chairpersons. The Department Chairpersons receive via e-mail reminder notices from the Office of the Registrar if nursing faculty have not submitted the electronic attendance reporting.

The Office of the Registrar distributes to the School of Nursing, through Office of Student Affairs, a ten day student enrollment roster. The roster is a paper based listing of potential and nursing student enrollments received after registration each semester, including summer sessions. Individual course rosters are updated in the University computer system that are accessible to each faculty instructor. Paper based format for individual course rosters are received by the Office of Student Affairs in the School of Nursing, which include first and ten day enrollments. These rosters are distributed to Department Chairpersons and faculty.

For financial assistance purposes if students must withdraw from all classes, there are two ways in which a student completes this process from Indiana State University:

- *Official withdrawal process* initiated by the student in cooperation with the Office of Admissions for undergraduates or the School of Graduate Studies for graduate students.
- *Unofficial withdrawal process* when students cease to attend all classes and fail to initiate the *Official Withdrawal Process*. The students in this category will receive a grade of “WF” as an indication of all courses failed at the end of the term. In addition, the OSFS must determine the official last day of attendance to determine the amount of financial assistance the student may be eligible to receive (earned) or the amount they are no longer eligible (unearned) to receive financial aid.

ISU currently has a “preferred lender list” of fourteen participants. In addition, the Indiana State University Office of Student Financial Services will work with any lender. There are over 500 optional lenders available throughout the country, which participate in FFELP for Stafford Loans.

The Office of Student Affairs receives a listing of nursing students eligible for financial aid from the Office of Student Financial Services. A newly implemented read only data screen accessibility was incorporated spring 2003 for the Director of the Office of Student Affairs. The School of Nursing Student Affairs Committee utilizes the information provided by the Office of Student Financial Services for assistance in selection of possible nursing scholarship recipients. Nursing Scholarship recipient recommendations are forwarded to the Foundations Office that collaborate efforts with the Office of Student Financial Services for approval of scholarship recipients.

Indiana State University participates in the Federal Perkins Loan Program. The Office of the Controller administers this program, although the Office of Student Financial Services completes the initial awarding of the loan. All entrance information, Master Promissory Notes (MPN) for undergraduate and graduate students for Exit Loan activities are monitored by the Office of the Controller.

When a student graduates, falls below six credit hours, or leaves the institution, the lender is notified. The student is asked to complete an Exit Counseling session. During the Exit Counseling session, conducted by the Associate Director of Student Financial Services, the student is given information regarding repayment and responsibilities. The lender follows the borrower carefully during the grace period and in repayment to attempt to assist the borrower to remain in good standing. Even if a student becomes unemployed, the lender will attempt to assist the borrower

through forbearances and economic deferments. It is the borrower's responsibility to keep the lender informed of any change in circumstances.

b. students are informed of their ethical responsibilities regarding financial assistance.

The Indiana State University Office of Student Financial Services participates in the Federal Family of Educational Loans Program (FFELP). FFELP is a partnership between the student, a lending institution and the University. A borrower's responsibilities are discussed on the reverse of the application, as well as in the required Entrance Counseling sessions, and available on the website generally completed by the Associate Director. Individual student sessions are also provided with a video (*Managing Your Student Loans: Turning Your Investment Into Success, SALLIE MAE*).

Return of Title IV Federal Aid Policy affect financial aid recipients who completely withdraw from all classes in a semester/summer session. When students withdraw, the Indiana State University OSFS is required to determine if the students are a Title IV recipient of earned and unearned financial aid funds.

Default situations do occur; however, this is rare among Indiana State University students. The institutional default rate has increased over the past three (3) years from a 3.4% to 5.4% rate.

Nursing student default rates are calculated into the institutional rates. However, the main reason why defaults have increased is due to the national economic situation. A comparison of the tuition rates of Indiana State and other regional institutions is presented in Table 21.1.

The Office of Student Affairs and faculty are not directly involved with the financial aid processing of students. However, the School of Nursing faculty are fully compliant in monitoring and reporting grades and attendance in classes. These required reports are completed in a timely

fashion to the Office of Student Financial Services, the Office of the Registrar, and the Office of the Controller. The Exhibit: Financial Resources has samples of financial aid packets.

Table 21.1 *Comparison of Tuition Fees by Institution, Excluding Additional Fees 2002-2003*

College or University	Resident Undergraduate Per Credit Hour	Nonresident Undergraduate Per Credit Hour	Resident Graduate Per Credit Hour	Nonresident Graduate Per Credit Hour
Indiana State University*	1-11.5=\$148 12-18 =\$2,058 > 18 =\$2,479	1-11.5=\$361 12-18 =\$5,138 > 18 =\$6,172	1= \$162.00	1= \$369.00
IUPUI Indiana University Purdue University Indianapolis	1=\$127.95 3-5=\$383.85 6-11=\$767.70 12-14=\$1,535.40 > 15=\$1,919.25	1= \$1,194.00 3-5=\$2,388.00 6-11=\$2,388.00 12-14=\$4,776.00 > 15=\$5,970.00	1= \$171.25	1= \$494.15
University of Southern Indiana	1=\$113.00	1=\$276.25	1=\$166.25	1=\$333.25
Eastern Illinois University	1=\$108.45	1=\$325.35	1=\$114.20	1=\$342.60
Ivy Tech State College (2 year only)	1 = \$73.80	1 = \$148.75	N/A	N/A
Vincennes University (2 year only)	1 = \$91.55 >15=\$1,373.25	1 = \$228.50	N/A	N/A

(Examples of additional fees not included in the fee table are Technology, New Student, Laboratory, Supplies, Parking, and Activities)

* Indiana State University has approved a \$1,000.00 new student fee and an increase of 5% for the 2003-2004 academic year.

VII. EDUCATIONAL EFFECTIVENESS

There is an identified plan for systemic evaluation including assessment of student academic achievement.

Standard VI: EDUCATIONAL EFFECTIVENESS

There is an identified plan for systematic evaluation including assessment of student academic achievement.

<p>Criterion 22: There is a written plan for systematic program evaluation that is used for continuous program improvement.</p>	<p>Operational Definition: Written plan which directs program evaluation process.</p> <p>Expected Level of Achievement/Decision Rule for Action: Plan is reviewed in its entirety by nursing council every year at the annual spring meeting and as needed. Each criterion and its benchmark are reviewed by EOAC when the data for that criterion are reviewed. Plan is updated by EOAC at the time of each criterion review if needed. Updated version of Master Plan is kept posted on Evaluation website for faculty access. Data are collected, analyzed and reviewed as directed by plan. Recommendations for changes are made based on evaluation data.</p> <p>Outcome: Expected level of achievement met for all programs.</p>
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Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Comprehensive Evaluation Plan	EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean	EOAC, Exec, Office of Assistant Dean, Nursing Council	Plan incrementally critiqued and updated as needed during benchmark review by EOAC. Overall Plan reviewed every year by Nursing Council at annual Spring meeting.	Check to see if data are collected, analyzed, reported and acted upon as directed by plan. Evaluate if plan needs to be modified in order to be congruent with national accreditation and University requirements	Plan and program data reviewed as required. Master plan did not reflect latest wording and numbering of 2002 NLNAC criteria.	Due to change of standards, plan was reviewed and revised during the 2002-2003 academic year to match NLNAC 2002 criteria. Schedule of criterion review reordered to more equitably distribute workload over the academic year 2002-2003. New items added to program exit surveys as needed to obtain data on criteria which were not well covered in earlier surveys 2001-ongoing. Data and benchmarks for individual criterion reviewed and revised by EOAC on monthly schedule. Most current data added to plan and footnotes updated July 2003. Continue to Monitor.

CRITERION 22: There is a written plan for systemic program evaluation that is used for continuous program improvement.

EXPECTED LEVEL OF ACHIEVMENT: Plan is reviewed in its entirety by nursing council every year at the annual spring meeting and as needed. Each criterion and its benchmark are reviewed by EOAC when the data for that criterion are reviewed. Plan is updated by EOAC at the time of each criterion review if needed. Updated version of Master Plan is kept posted on Evaluation website for faculty access. Data are collected, analyzed and reviewed as directed by plan. Recommendations for changes are made based on evaluation data.

- a. **program evaluation of the nursing unit, as defined by the institution and the unit, demonstrates how and to what extent the program is attaining NLNAC standards and criteria.**

During the last self-study for NLN accreditation (1995), the School of Nursing faculty identified that improved program evaluation was a challenge for future improvement. In order to better meet the needs for program evaluation, a subcommittee of the Curriculum and Academic Affairs Committee was originally formed to consider issues related to evaluation. This evolved into a joint faculty and administrative task force, and from this the Evaluation Outcomes Assessment Committee (EOAC) evolved. EOAC is currently a full governance committee and oversees the development and implementation of the Master Plan for Evaluation. The Master Plan continues to be reviewed and further refined on a monthly basis as individual criterion and the data related to that criterion are reviewed. The plan has been through several revisions at this point in time. Once each year the entire plan is reviewed and evaluated for effectiveness and any implementation issues are addressed by EOAC (Refer to Exhibit: Evaluation of Master Plan). The updated plan is then presented for review and approval to the full Nursing Council at the spring meeting. The plan and program outcome data are accessible to faculty through the password protected evaluation website.

- b. **plan contains, at a minimum: expected levels of achievement, time frames, and methods for assessment.**

The ISU School of Nursing Master Plan for Evaluation has benchmarks for each criterion for all programs. Time frames and a schedule for review have been established by EOAC and continue

to be reviewed and revised as needed in an attempt to evenly divide the workload through out the course of the academic year (see exhibit Master Plan Schedule for Review). For each criterion, a method of assessment has been established. Whenever possible, objective standardized testing with national reference values is used. If an established test is not available, the School has undergone instrument development to measure specific program outcomes (such as program satisfaction), has piloted the instruments, has revised the instruments, and has documented internal reliability data on the revised instruments. As better instruments become available and as the Board of Trustee's approval for standardized testing fees is obtained, EOAC will add additional outcome measures to better document our student achievement outcomes.

c. data are collected, aggregated, trended and analyzed.

Data collection has included surveys of current students, alumni, and employers, demographic data, student, peer, faculty and community based performance evaluations, graduation and placement rates, standardized testing with national comparison data, and external outcomes measures of performance (NCLEX-RN and Certification Exams). Data are trended whenever possible (whenever consistent data are available over time). Data are reported to EOAC, Department Chairs and Program Administrators on a regular schedule as outlined in the Master Plan for Evaluation. Data reports are also available to faculty members from the password protected evaluation website (password is isunlnac)

<http://www.indstate.edu/nurs/mary/Evalpage.html>

d. evaluation findings are used for decision making for program improvement.

The School of Nursing is in the process of continual quality improvement using findings from the systematic plan for evaluation. Findings from the systematic evaluation process have been the foundation for most, if not all, of the program and curriculum changes made in the past several years. Change is always slow and difficult in a large system such as a university, but the changes have been implemented over time, and now are in the process of being evaluated to determine effectiveness and the need for any further changes.

- e. **strategies are taken or will be taken to address the area(s) identified as needing improvement.**

If the data indicates that any given program is not meeting the benchmarks, EOAC notifies the appropriate Department Chairperson and provides the data which details the issues involved.

Faculty in the department are advised of the issues during regular departmental meetings by the department chair, in conjunction with the Assistant Dean/Vice Chair of EOAC. If there is a trend noted, the chair of EOAC requests that the department provide EOAC a plan of action outlining steps to correct the situation. Changes that require faculty governance vote are referred to the School of Nursing Executive Committee for review and assignment to the appropriate faculty committee. Evaluation findings have been and continue to be a key component in any discussion of program and curriculum changes or additions.

<p>Criterion 23: Student academic achievement by program type is evaluated by: graduation rate, licensure/certification pass rates, job placement rates and program satisfaction.</p>		<p style="text-align: center;">Graduation Rates Expected Level of Achievement/Decision Rule for Action for Graduation Rate</p> <p>Associate of Science Program : 56% of students admitted to the Associate of Science program in a given semester will complete program requirements within 4 years. Old Upper Division (Levels 3-4 of Old BS track); – 63% of students who enroll in the first clinical course of the upper division (N305) will complete the upper division within 6 years. New RN-BS Completion track: 63% of students who enroll in the first clinical course (N304) will complete the track within 6 Years. Modified BS Program (Generic): 56% of students admitted to the first clinical nursing course (N204) will complete the generic BS program within 6 years. Masters Program: 64% of students who enroll in the Master's of Science program will graduate in 5 years. Outcome: Expected level of achievement for graduation rates met for all programs which have been in place long enough to produce graduates. See Additional Criterion II: Enrollment Management for Admission and Persistence Rates for the modified AD and BS programs.</p>						
Process				Implementation				
Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>				Actions <i>For program Development, Maintenance, or Revision</i>
EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean	Director of Student Affairs, EOAC, Departments	Plan reviewed every year and aggregate data reviewed Annually in January	Office of Student Affairs reviews student records to determine percentage of students who graduate from each program within the targeted time frame. Report to EOAC on an annual basis. Review of Course Non-Progression data to determine why students are not successful.	Program	Benchmark	Means across cohorts	Mean Extended Retention Rate	EOAC action forwarded to Administration. Retention plan needs reviewed and updated in light of national data for AS and BS graduation rates. New Benchmarks approved for Master Plan of Evaluation by EOAC 1/27/03. See January 2003 Minutes. Benchmarks updated to match numbers in Enrollment management plan, April, 2003. See Nursing Council review. See Enrollment Management Plan http://web.indstate.edu/nurs/mary/NLN/enrollman.doc
				AS Graduation Rate	56%	57.24%	64.2%	
				BS (old upper division) Graduation Rate	63%	85%	95%	
				RN-BS Graduation Rate	63%	68.18%	74.22%	
				MS Graduation Rate	64%	66.99%	71.5%	

Criterion 23: Student academic achievement by program type is evaluated by: graduation rate, licensure/certification pass rates, job placement rates and program satisfaction.	Performance on the NCLEX Exam and other Certification Exams Operational Definition: Percentage of graduates who pass the NCLEX-RN examination or other certification exam upon first time taking the examination.																
	Program	Standardized Exam	Benchmark Scores														
	Associate Degree	NCELX-RN	Pass rate will be at or above the national total percentage passing (for all first time takers), and not less than 85%														
	Baccalaureate Degree	NCLEX-RN	Pass rate will be at or above the national total percentage passing (for all first time takers), and not less than 85%														
Master's Degree	FNP National Certification Exams	Reported pass rates on the FNP and other certification exams (if any) will be at 85% or above															
Outcome: Expected level of achievement met for all programs.																	
Process			Implementation														
Documentation Located	Who Has Responsibility	Time/ Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>			Actions <i>For program Development, Maintenance, or Revision</i>										
EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean	EOAC, Departments, Office of Assistant Dean Director FNP Program	Plan reviewed every year and aggregate data reviewed Semi-Annually In March and October	Analysis of data for graduating classes and comparison with national level pass rate.	<table border="1"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Mean Performance over time.</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>85% and National Average</td> <td>86.64% At or Above National Average since 1996.</td> </tr> <tr> <td>New BS</td> <td>85% and National Average</td> <td>N/A</td> </tr> <tr> <td>MS</td> <td>85% or above</td> <td>91.67%</td> </tr> </tbody> </table>	Program	Benchmark	Mean Performance over time.	AS	85% and National Average	86.64% At or Above National Average since 1996.	New BS	85% and National Average	N/A	MS	85% or above	91.67%	<p>During timeframes when the AS NCLEX pass rate falls below either the national average and/or the 85% benchmark, the chair of the AD department works with faculty to develop and enact a plan of correction to address NCLEX preparation. Based on this data, changes have been made to requirements within the AS program, including requiring students to pass a set of computerized NCLEX preparation questions as part of course requirements, and adding a requirement that students achieve a .20 level or higher score on the Arnett NCLEX preparation exam.</p> <p>No students from new BS have graduated or taken NCLEX exam, benchmark not possible to evaluate.</p> <p>Information from our alumni indicates that 91.67 percent of the MS FNP respondents have successfully passed the certification exam. Data reported by ANCC indicates that FNP students have had a mean score above the national average, with pass rates ranging from 60-80%. However, ANCC only reports for periods in which 5 or more of our students have taken the exam at one time. We have had many more graduate and pass the exam, but not in large enough groups to receive reporting data from the ANCC.</p> <p>Continue to Monitor</p>
Program	Benchmark	Mean Performance over time.															
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EOAC, EXEC, Nursing Council Minutes, Office of Assistant Dean		EOAC, Departments, Office of Assistant Dean	Plan reviewed every year and aggregate data reviewed Annually in December	<p>Surveys are administered through the Assistant Dean's Office in Coordination with the Department Chair and the Exit Course Faculty.</p> <p>Surveys are scored and initial data analysis and reporting are conducted by the Assistant Dean's Office.</p> <p>Evaluation of reports and recommendations concerning data are the responsibility of the EOAC</p>	<table border="1"> <thead> <tr> <th>Program</th> <th>Benchmark</th> <th>Employed</th> <th>Continuing Student</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>AS</td> <td>50%</td> <td>45.6%</td> <td>4.5%</td> <td>51%</td> </tr> <tr> <td>BS and RN-BS (old upper division)</td> <td>75%</td> <td>93.9%</td> <td>0%</td> <td>93.9%</td> </tr> <tr> <td>MS</td> <td>80%</td> <td>91.6%</td> <td>0%</td> <td>91.6%</td> </tr> </tbody> </table>	Program	Benchmark	Employed	Continuing Student	Total	AS	50%	45.6%	4.5%	51%	BS and RN-BS (old upper division)	75%	93.9%	0%	93.9%	MS	80%	91.6%	0%	91.6%					<p>Because of the low response rates on alumni surveys, we added an item concerning employment to the school of nursing exit surveys starting with the Spring 2001 graduating class. We usually obtain an excellent response rate on this survey from AS students in particular. This allows us to capture information from students who have obtained employment in nursing or have accepted employment in nursing for immediately after graduation. The chair of the AS program also conducted phone surveys during 2002 to determine employment rates following graduation. See data in last row of results table.</p>
Program	Benchmark	Employed	Continuing Student	Total																										
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AS Phone Survey Data 2002 Percentage of respondents who were employed in nursing at the time of the survey																														
Semester	Spring 2002	Summer 2002	Fall 2002	Mean																										
Cohort N	33	18	16	22.33																										
Response Rate	84.8%	88.88%	87.5%	87%																										
Percent employed	100%	100%	86%	95%																										

<p>Criterion 23: Student academic achievement by program type is evaluated by: graduation rate, licensure/certification pass rates, job placement rates and program satisfaction.</p>		<p>Program Satisfaction</p>																																						
		<p>Operational Definition: Degree to which student is satisfied with curriculum, learning resources, student-student and student-faculty interactions, and School of Nursing policies..</p>																																						
		<p>Expected Levels of Achievement/Decision Rule for Action: Program Satisfaction</p>																																						
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University Means	N/A	4.16																																						

CRITERION 23: Students' academic achievement by program type is evaluated by: graduation rates, licensure/certification pass rates, job placement rates, and program satisfaction.

EXPECTED LEVEL OF ACHIEVMENT:

Associate Degree Program: 56% of students admitted to the Associate of Science program in a given semester will complete program requirements within 4 years.

Old Upper Division (Levels 3-4 of Old BS track): – 63% of students who enroll in the first clinical course of the upper division (N305) will complete the upper division within 6 years.

New RN-BS Completion track: 63% of students who enroll in the first clinical course (N304) will complete the track within 6 Years.

Modified BS Program (Generic): 56% of students admitted to the first clinical nursing course (N204) will complete the generic BS program within 6 years.

Masters Program: 64% of students who enroll in the Master's of Science program will graduate in 5 years.

- a. **measurement by graduation rates of students who complete the programs within a defined period of time.**

Background: Graduation and retention benchmarks for each program were set using the Enrollment Management Plan, which was developed through the School of Nursing Executive Committee (<http://www.indstate.edu/nurs/mary/NLN/enrollman.doc>). The Enrollment Management Plan outlines admission, persistence, retention and graduation goals for each program. For example, the AD program goals are as follows:

Associate of Science Program

- | | |
|--------------|---|
| Admission: | 75% of students completing preclinical courses as NNDs will enroll in the first clinical nursing course. |
| Persistence: | 75% of students enrolled in the first clinical nursing course will be enrolled in the second clinical nursing course. |
| Retention: | 75% of students enrolled in the second clinical nursing course will graduate. |
| Graduation: | Overall graduation rate for the cohort will be at least 56%. Fifty-six percent of students admitted to the major will graduate in four years. |

The graduation rate benchmark for each program was a mathematical calculation based on the admission, persistence and retention goals from the Enrollment Management Plan. For the AS program, if 100 students enroll in the first clinical nursing course, 75% (75) are expected to enroll in the second course. Of that number 75% (56) are expected to graduate. This produces a graduation rate of 56% (56 of the original 100 in the starting cohort). The next section reviews data by program.

Program: Associate of Science

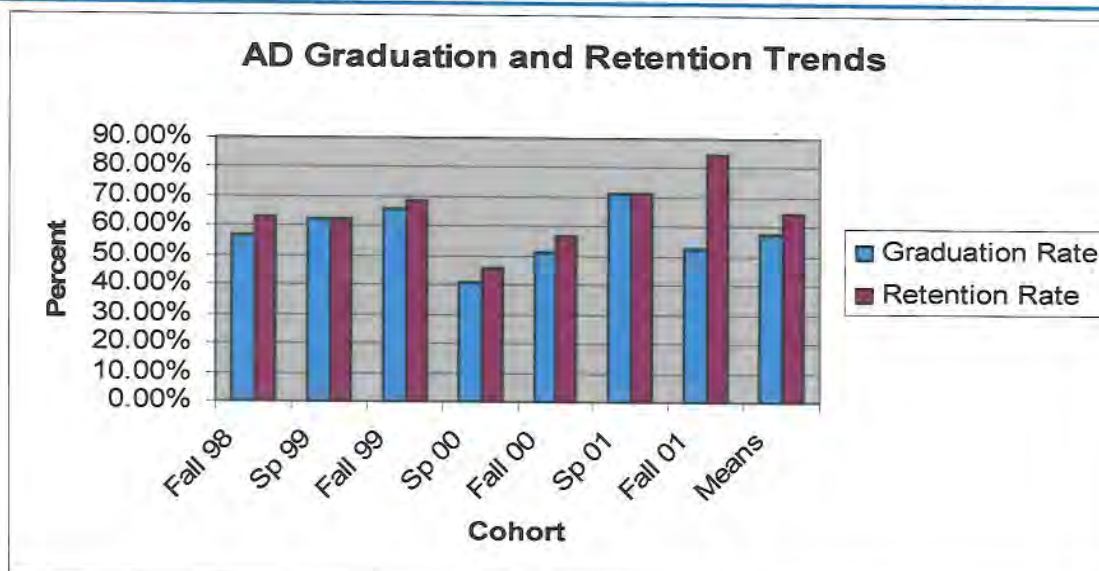
Benchmark: 56% of students admitted to the Associate of Science program in a given semester will complete program requirements within 4 years.

Outcome: Goal met.

AD Data as of Spring 2003: Four year Associate Degree cohort graduation rates ranged from 41-71%, with a mean of 57.24%. This data includes cohorts that still have some years remaining in which to graduate additional students, so the actual graduation rates for these cohorts will most likely increase. Overall cohort retention rates (those graduated and those still progressing in program) for the Associate Degree Program ranged from 45.9-81.58%, with a mean of 64.2%. Average time from entering the Associate Degree Program to program completion was 2.39 years. See Table 23:1 for details.

Table 23:1 Associate Degree Program Graduation and Retention Data

Cohort	# Enrolled	# Graduated	Graduation Rate	Progressing as of SP 2003	Retention Rate	Years Remaining towards benchmark	Cohort Mean Years to Completion
Fall 98	60	34	56.67%	4	63.33%	0	2.77
Sp 99	45	28	62.22%	0	62.22%	0	2.55
Fall 99	79	52	65.82%	2	68.35%	0	2.5
Sp 00	61	25	40.98%	3	45.90%	0.5	2.28
Fall 00	53	27	50.94%	3	56.60%	1	2.3
Sp 01	21	15	71.43%	0	71.43%	2	2.07
Fall 01	38	20	52.63%	12	84.21%	2.5	2.23
Means	51.00	28.71	57.24%	3.29	64.20%	N/A	2.39



Program: BS- Former Upper Division Track

Benchmark: – 63% of students who enroll in the first clinical course of the upper division (N305) will complete the upper division within 6 years

Outcome: Goal met.

BS- Former Upper Division Track Data as of Spring 2003:

Six year graduation rates for BS upper division cohorts ranged from 62.5% to 100%, with a mean of 85.85%. This data includes cohorts that still have some years remaining in which to graduate

additional students, so the actual graduation rate for these cohorts will most likely increase.

Cohort retention rates ranged from 62.5%-100%, with a mean of 95.09%. Mean time for track completion is 1.9 academic years. See Table 23:2.

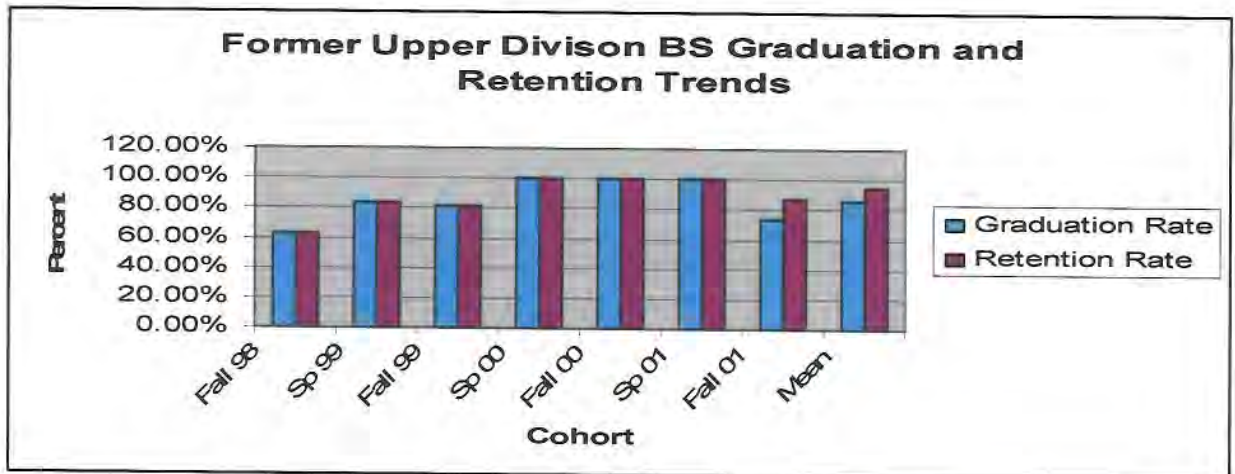


Table 23:2 Former Upper Division BS Degree Program Graduation and Retention Data

Cohort	# Enrolled	# Graduated	Percent	Progressing as of SP 2003	Retention Rate	Years Remaining Towards Benchmark	Cohort Mean Years to Completion
Fall 98	16	10	62.50%	0	62.50%	1	2.1
Sp 99	6	5	83.33%	0	83.33%	1.5	1.5
Fall 99	22	18	81.82%	0	81.82%	2	2.19
Sp 00	5	5	100.00%	0	100.00%	2.5	1.9
Fall 00	13	13	100.00%	0	100.00%	3	2.04
Sp 01	9	9	100.00%	0	100.00%	3.5	1.78
Fall 01	15	11	73.33%	2	86.67%	4	1.91
Mean	10.67	10.14	85.85%	N/A	95.09%	N/A	1.92

Program: BS: RN-BS Track

Benchmark: – 63% of students who enroll in the first clinical course of the upper division (N304)

will complete the track within 6 years

Outcome: Goal met thus far.

RN-BS Track Data as of Spring 2003:

Six year cohort graduation rates for the RN-BS track ranged from 36-100% thus far, with a mean of 68.18%. However, due to its recent inception and the part-time nature of this program, only 2 RN-BS cohorts have produced any graduates at this time, and all of the cohorts reported on have at least 3 years left in which to graduate additional students to meet the benchmark . Mean time for RN-BS track completion is 2.25 years thus far. Cohort retention rates ranged from 45-100%, with a mean of 74.22%. Numbers are widely varied due to small cohort sizes. See Table 23:3 for details.

Table 23:3 *RN BS Track Graduation and Retention Data*

Cohort	# Enrolled	# Graduated	Percent	Progressing as of SP 2003	Retention Rate	Years Remaining Towards Benchmark
Fall 2000	11	4	36.36%	1	45.45%	3
Sp 2001	1	1	100.00%	0	100.00%	3.5
Sp 2002	5	N/A	N/A	4	80.00%	4.5
Fall 2002	7	N/A	N/A	5	71.43%	5
Mean	N/A	N/A	68.18%	N/A	74.22%	N/A

Program: MS- All Tracks

Benchmark: – 64% of students who enroll in the Masters of Science program will graduate within 5 years.

Outcome: Goal Met.

MS Program Data as of Spring 2003:

Five year graduation rates for MS program cohorts ranged from 33% to 100%, with a mean of 66.99%. Of course, this data includes cohorts that still have some years remaining in which to graduate additional students. Cohort retention rates ranged from 33%-100%, with a mean of 71.5%. Mean time for program completion is 2.4 years. Numbers are widely varied due to small cohort sizes. See Table 23:4 for details.

Table 23:4 *Master of Science Graduation and Retention Data*

Cohort	# Enrolled	# Graduated	Percent	Progressing as of SP 2003	Retention Rate	Years Remaining Towards Benchmark
Fall 98	13	11	84.62%	0	84.62%	0
Sp 99	3	1	33.33%	0	33.33%	0.5
Fall 99	6	3	50.00%	1	66.67%	1.5
Sp 00	2	2	100.00%	0	100%	2
Fall 00	3	N/A	N/A	2	66.67%	2.5
Fall 01	8	N/A	N/A	6	75.00%	3.5
Means	5.83	4.25	66.99%	N/A	71.5%	N/A

b. measurement by performance on licensure examinations/certification examinations of programs graduates.

Background: Unlike the vast majority of other states in the US, Indiana is one of three states that is not using a standard required pass rate for NCLEX-RN. Instead, the major outcome criterion indicating a program's successful attainment of state standards is the first-time candidate's successful completion of the National Council Licensure Examination. If a school's annual rate of successful completion of the National Council Licensure Examination is lower than the national total percentage passing (for all first-time takers) the second consecutive year, the school shall submit a report to the Indiana State Board of Nursing (ISBN) outlining the following:

- (1) Results of the faculty's review of factors that may have contributed to the low pass rate, including, but not limited to, the following:
 - (A) Curriculum content.
 - (B) Curriculum design.
 - (C) Outcome evaluation.
 - (D) Admission.
 - (E) Progression.
 - (F) Graduation policies.
- (2) The faculty's plan for correcting any problems identified.

If the program's annual rate of successful completion of the National Council Licensure Examination is lower than the national total percentage passing for the third consecutive year, ISBN shall send a surveyor to review the program's ability to comply with this article (State of

Indiana Nursing Licensure Laws and Regulations, 2002). Because of this requirement, the benchmark for pre-licensure programs is set for at or above the national total percentage passing (for all first-time takers), with an additional benchmark of 85%. For further clarification, see Exhibit: ISBN Correspondence.

Program: Associate of Science

Benchmark: Pass rate will be at or above the national total percentage passing for first time takers, and not less than 85%

Outcome: Goal met at this time

AS Program Data: The last NLN self study was conducted in 1995. As described in the background information above, schools of nursing in Indiana are compared to the national NCLEX-RN pass rate and are placed on probationary status if their pass rates fall below this number for three consecutive years. According to the Indiana State Board of Nursing, schools of nursing in Indiana were compared to the national average pass rate for US educated first time takers, prior to 1998. From 1998 onward, schools of nursing pass rates are to be compared to the total national average pass rate for first time NCLEX-RN takers, which includes foreign and US educated nurses. To help clarify the different pass rates, Chart 23:1 displays a graphical comparison of ISU pass rates, national pass rates for US educated first time takers, and national pass rates for foreign and US educated first time takers. Table 23:5 displays the same information in table format.

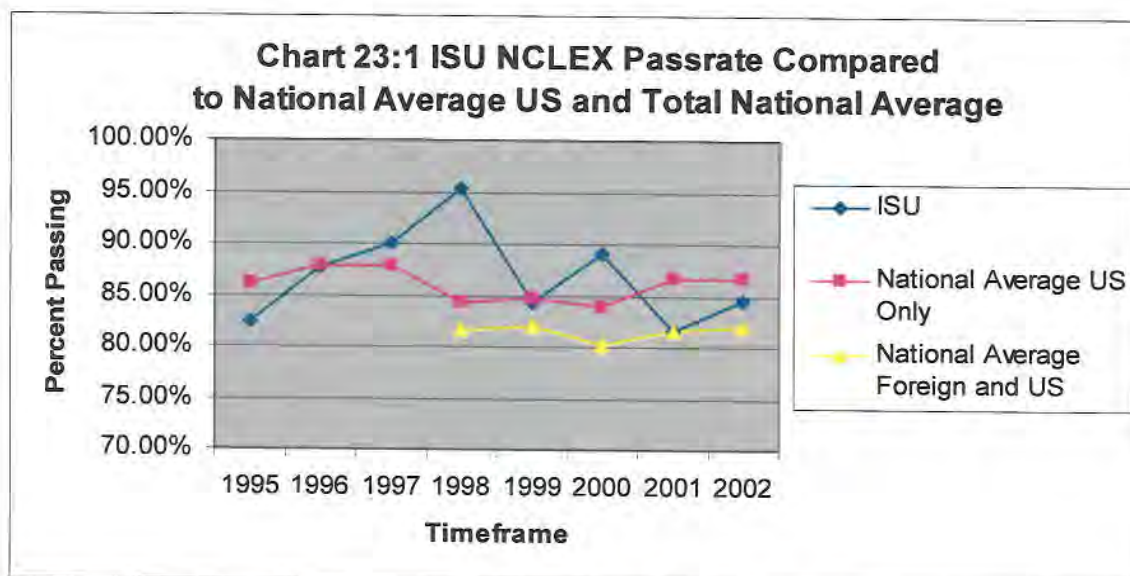


Table 23:5 ISU NCLEX Pass rate Comparison First Time Candidates

Year	1995	1996	1997	1998	1999	2000	2001	2002	Mean
ISU AS Pass Rate	82.44%	87.59%	90%	95.30%	84.40%	89%	81.50%	84.51%	86.84%
National Average US Only	86.00%	87.79%	87.94%	84.27%	84.77%	83.89%	86.74%	86.70%	86.01%
National Average Foreign and US	N/A	N/A	N/A	81.50%	81.90%	80.10%	81.57%	81.90%	81.39%

The Associate Degree Program NCLEX-RN pass rates fell below the approved national standard (US prior to 1998, Combined Foreign and US Since 1998) in 1995 and 1996. Corrections were implemented at that time. Since that time ISU NCLEX-RN pass rates have not been below the approved comparative national average for more than two consecutive years. This is a situation that EOAC and administration continues to monitor closely. Data from the NCLEX-RN program reports are analyzed and reported to the Associate Degree Department each year. Any problem areas are noted and a plan of correction is enacted by the Associate Degree Department. During timeframes when the NCLEX-RN pass rate falls below either the national average and/or the 85% benchmark, the Chairperson of the Associate Degree Department works with faculty to develop

and enact a plan of correction to address NCLEX-RN preparation. Based on this data, changes have been made to requirements within the AS program, including requiring students to pass a set of computerized NCLEX-RN preparation questions as part of course requirements, and adding a requirement that students achieve a 0.20 level or higher score on the Arnett NCLEX-RN preparation exam. This last requirement was recently implemented, because data indicated that a 0.20 level score on the Arnett was most closely correlated with students' NCLEX-RN performance (Pearson $r = .484$, $p = .036$).

Program: Baccalaureate of Science

Benchmark: Pass rate will be at or above the national total percentage passing (for all first time takers), and not less than 85%

Outcome: Can not be evaluated at this time.

Data: Since the inception of the associate degree exit option in 1977, almost all students have taken the NCLEX-RN at the associate degree level. Because of this option to exit, none of the students graduating from the former upper division BS program are pre-licensure students. Students in the RN-BS track are also post licensure. The only pre-licensure students in our BS program today are those in the modified BS track, which does not include the option to exit at the AS level. The first class of students will graduate from the modified BS track in Spring 2004. Thus, there is no licensure data to report for the BS program at this time. However, based on experiences with the AS program, members of CAAC and faculty in the BS department have built NCLEX-RN practice questions into the new BS curriculum, and will be using the HESI NCLEX-RN preparation and diagnostic exam for students exiting from the generic BS program. Students will be required to achieve a probability score of 75 or above. Students will be allowed multiple opportunities to pass the exam, starting in the first semester of the senior year, with remediation as needed to assist them in successful completion of the requirement. See the following website for details <http://www.indstate.edu/nurs/mary/Hesifaq.html>

Program: Masters of Science

Benchmark: Reported pass rates on the Family Nurse Practitioner (FNP) and other certification exams (if any) will be at 85% or above.

Outcome: Goal met

Data: Information from the alumni follow-up surveys and post card surveys indicates that 91.67 percent of the respondents have successfully passed the certification exam.

Table 23:6 FNP Certification Data	N	Percentage
ANCC Certified	20	83.33
AANP Certified	2	8.33
Not Certified at this time	1	4.17
Total Certified at this time	22	91.67

Additional data reported by ANCC indicates that for the three time periods data are available from, ISU FNP students have had a mean score above the national average, with pass rates ranging from 60-80%. However, ANCC only reports for periods in which 5 or more students have taken the exam at one time. Many more have graduated and passed the exam, but not in large enough groups to receive reporting data from the ANCC. The accreditation agency acknowledges that this is a problem. Hopefully it will be corrected in the future as ANCC becomes more accustomed to tracking and reporting this data.

c. measurement by job placement rates by programs of degree graduates within one year after graduation.

Background: Over the past several years, members of EOAC have noted that data concerning student employment rates has been a difficult item to obtain. Alumni survey response rates have been poor, due to students changing addresses and not returning surveys etc. While the University surveys students on exit concerning employment and employment plans for the following year, this survey is only administered to seniors. This left the AS students without a data collection point. In an effort to collect some data before students were out of contact with the School, an item was added concerning employment to the school of nursing exit surveys starting with the

Spring 2001 graduating class. The response rate for the Associate Degree Program exit survey is usually excellent and the addition of this item provides information from students who have obtained employment in nursing or have accepted employment in nursing for immediately after graduation. However, some members of EOAC still felt the need to do a follow up of some type within a year of graduation, as many pre-licensure Associate Degree Program students and pre-certification FNP students do not seek employment in health care prior to graduation. The Chairperson for the Associate Degree Program made follow-up phone calls for students from the Associate Degree Program, while the MS students were sent a post-card survey to ask concerning certification and employment in advanced practice nursing. The next section reviews each program employment rate benchmark, outcomes and data.

Program: Associate of Science

Benchmark: 50% of graduates will report being employed, having accepted employment following graduation, or planning to continue as a full time student on the program exit surveys.

Note: This benchmark was based on the exit survey data and set low to allow for students who elected not to seek employment until after passing NCLEX-RN.

Outcome: Goal met

Data: Trended data from the AS program exit surveys show that an average of 45.6% of Associate Degree Program students either already have a job or have accepted a job offer prior to graduation, while 4.5% were planning on continuing straight into the BS program as full-time students, for a mean of 51%. An additional 17.8% reported having a job offer prior to graduation, but had not yet accepted an offer. In addition, a 2002 follow-up departmental phone survey of Associate Degree graduates demonstrated that a mean of 95% of Associate Degree Program graduates were employed in nursing at the time of the survey, with an 85% student response rate.

Program: Baccalaureate Degree (upper division) and RN-BSN

Benchmark: 75% of graduates will report being employed, having accepted employment following graduation, or planning to continue as a full time student on the program exit surveys.

Outcome: Goal met

Data: Trended data from the BS and RN-BS program exit surveys show that an average of 55.5% of BS graduates have a job at graduation and plan to stay with the same employer. An additional 34.8% have a job at graduation, but plan to change to a different job after graduation. This gives a mean total employment rate of 93.9% for BS students at the time of graduation. Note: these figures are for the old BS upper division and the RN-BS completion program. All students in these programs held licenses to practice as an RN at the time of graduation.

Program: Masters of Science

Benchmark: 80% of graduates will report being employed, having accepted employment following graduation, or planning to continue as a full time student on the program exit surveys.

Outcome: Goal Met

Data:

Data from the MS student postcard follow-up survey indicated that over 91% of the respondents were employed in advance practice nursing positions at the time of the survey. Forty-one percent of the respondents reporting working in rural or underserved areas. Most reported having prescriptive privileges; about half had applied for and received hospital privileges (FNP graduates).

<i>Table 23:7 MS Employment Data</i>	N	Percent
Employed as an Advanced Practice Nurse	22	91.67
Full-time	17	70.83
Part-time	5	20.83
Seeking employment	1	4.17
Have Prescriptive authority	19	79.17
Have hospital privileges	11	45.83
Named as a Provider on managed care plans	5	20.83
Work in rural or underserved area	10	41.67

A comparison of nursing student employment with other students at ISU demonstrates that nursing students have higher levels of employment in a job related to their major than students from other majors. See the Table 23:8 to compare nursing student plans for the next year with those of other graduating ISU students.

<i>Table 23:8 Comparison of Student Responses on School of Nursing Exit Surveys (mean data over time) compared with overall ISU student responses on ISU Senior Survey 2002 *</i>	AS	BS	MS	ISU Students Overall
Plan to remain with current employer in a job related to major	28.77%	55.53%	16.7%	19%
Have a job related to major but plan to change jobs following graduation	16.8%	38.4%	33%	N/A
Plan to remain in non-major related job while looking for work	N/A	N/A	N/A	11%
Have a job offer related to major following graduation but have not accepted yet.	17.77%	0%	0%	N/A
Looking for employment in major	5.10%	0%	33%	55%
Plan to continue my education	4.5%	0%	0%	18%
Have not applied for a job related to major	25%	6.7%	16.7%	N/A
Other	5.67%	0%	0%	9%
Total employed in major at graduation	45.57%	93.9%	49.7%	19%
Total employed in major or plan to continue education	51.24%	93.9%	49.7%	37%

*Note: Some items were on only one of the two surveys, making comparison difficult. In these cases, items which are only on one survey or the other will have cells labeled N/A, indicating that data are not available for that item.

a. measurement by program satisfaction as determined by graduates and/or employers.

Background: Currently, program exit surveys include a 13 item, 5 point Likert response program satisfaction subscale. New items have been added to the scale over the years, to determine student satisfaction with physical facilities, library facilities, student to student interactions, etc. Older data does not include these new items. Data for some years were on a 3 point scale, so it was not possible to include all of this data in trend analysis. The current program satisfaction subscale has an internal reliability of .88 (mean Cronbach's alpha 2001- Sp 2003).

Program: Associate of Science

Benchmark: 3.5 out of 5.0 Mean Scores on the Program Satisfaction Subscale of the Program Exit Surveys

Outcomes: Goal met

Data:

<i>Table 23:9 AS Program Satisfaction Scale</i>	Item Mean (F 1996-S 2003)
Program curriculum was adequate to meet my educational needs	3.81
Adequate learning resources were available	3.90
The physical facilities were adequate	4.02
Library facilities and resources were adequate	4.06
School of Nursing Policies were adequate and sufficient information about policies was given to me in the student handbook.	4.06
Learning experiences were sufficiently flexible to permit students to develop in accordance with individual talents and needs.	3.54
Academic advisement prior to admission to the program was adequate	3.53
Academic advisement by my faculty advisor was adequate	3.65
Student to student interactions were satisfactory	4.16
Nursing faculty were supportive and interested in student welfare.	3.76
I would recommend ISU School of Nursing to others	3.18
If I had it to do over, I would enter ISU School of Nursing	3.11
Overall, I am satisfied with my nursing education at ISU	3.11
Overall Combined Mean for AS Program Satisfaction	3.68

Items which fell below the 3.5 benchmark were the last 3 items, all of which were more global satisfaction items. Student comments on the exit surveys were analyzed to determine themes. The

felt need for increased clinical hours, a separate pharmacology course, and moving the assessment course from the upper division into the Associate Degree Program level were common themes over time. All of these issues were addressed in the new generic BS curriculum and in the new modified Associate Degree Program curriculum. However, curriculum change takes time and while the new curriculum is now in place, there are no graduates from the updated curriculums to report exit survey data on at this time.

Program: BS – Former upper division track

Benchmark: 3.5 out of 5.0 Mean Scores on the Program Satisfaction Subscale of the Program

Exit Surveys

Outcomes: Goal met

Data:

<i>Table 23:10 BS Program Satisfaction Scale</i>	Item Mean
Program curriculum was adequate to meet my educational needs	3.62
Adequate learning resources were available	3.86
The physical facilities were adequate	3.68
Library facilities and resources were adequate	4.00
School of Nursing Policies were adequate and sufficient information about policies was given to me in the student handbook.	3.85
Learning experiences were sufficiently flexible to permit students to develop in accordance with individual talents and needs.	3.53
Academic advisement prior to admission to the program was adequate	2.86
Academic advisement by my faculty advisor was adequate	2.96
Student to student interactions were satisfactory	4.28
Nursing faculty were supportive and interested in student welfare.	3.50
I would recommend ISU School of Nursing to others	3.09
If I had it to do over, I would enter ISU School of Nursing	3.08
Overall, I am satisfied with my nursing education at ISU	3.34
Overall Combined Mean for BS Program Satisfaction	3.51

For students in the BS program, advisement prior to admission and following admission were the main issues. Student advisement prior to admission is done by professional staff in the Student Affairs Office. Advisement after admission is done by individual faculty members who are assigned to do advisement within the BS department. Several years ago the School of Nursing

piloted a selected advisors method, which allowed specific faculty to be advisors and receive additional training in advisement, while other faculty were not assigned as advisors. However, as student numbers in the BS program increased, it was necessary to utilize all available faculty as advisors. Additionally, student advisement has become much more cumbersome with the need to use the University database (Banner) to view student records, obtain student PIN numbers and for other advisement information. As of this past year only a few hard copies of course catalogs and schedules are printed, thus requiring faculty and students to go online for course information. All of these changes have contributed to the felt need for easier and better advisement processes, from both the faculty and the students' points of view. In addition, similar to the AS program, the last three global items were lower scoring items. Student comments were analyzed to determine what underlying themes could be behind the lower scores on the more global items. The same themes seen in the AS program were relayed here in the last two years of the BS program; need for more clinical time, a separate pharmacology course, and move the assessment class to a point earlier in the curriculum. As noted in the AS section, these changes have been incorporated in our new curriculum design for both programs.

Program: Baccalaureate of Science, RN-BS Track

Benchmark: 3.5 out of 5.0 Mean Scores on the Program Satisfaction Subscale of the Program

Exit Surveys

Outcomes: Goal met

Data:

Table 23:11 RN- BS Program Satisfaction Scale	Item Mean
Program curriculum was adequate to meet my educational needs.	4.01
Adequate learning resources were available	4.13
The physical facilities were adequate	4.67
Library facilities and resources were adequate	4.0
School of Nursing Policies were adequate and sufficient information about policies was given to me in the student handbook.	4.32
Learning experiences were sufficiently flexible to permit students to develop in accordance with individual talents and needs.	4.24
Academic advisement prior to admission to the program was adequate	3.85
Academic advisement by my faculty advisor was adequate	4.05
Student to student interactions were satisfactory	4.45
Nursing faculty were supportive and interested in student welfare.	4.61
I would recommend ISU School of Nursing to others	4.30
If I had it to do over, I would enter ISU School of Nursing	4.22
Overall, I am satisfied with my nursing education at ISU	4.22
Overall Combined Mean for RN-BS Program Satisfaction	4.23

Program: Masters of Science Program

Benchmark: 3.5 out of 5.0 Mean Scores on the Program Satisfaction Subscale of the Program

Exit Surveys

Outcomes: Goal met

Data:

Table 23:12 MS Program Satisfaction Scale	Item Mean
Program curriculum was adequate to meet my educational needs	3.67
Adequate learning resources were available	3.67
The physical facilities were adequate	3.83
Library facilities and resources were adequate	3.83
School of Nursing Policies were adequate and sufficient information about policies was given to me in the handbook.	4.09
Learning experiences were sufficiently flexible to permit students to develop in accordance with individual talents and needs.	4.25
Academic advisement prior to admission to the program was adequate	3.46
Academic advisement by my faculty advisor was adequate	4.17
Student to student interactions were satisfactory	3.67
Nursing faculty were supportive and interested in student welfare.	4.29
I would recommend ISU School of Nursing to others	3.96
If I had it to do over, I would enter ISU School of Nursing	3.92
Overall, I am satisfied with my nursing education at ISU	3.50
Overall Combined Mean for MS Program Satisfaction	3.87

Students in the graduate program were mostly satisfied with their experiences. The only item which fell below 3.5 was advisement prior to admission.

- d. data are collected, aggregated, trended and analyzed.**
- e. evaluation findings are used for decision making for program improvement.**
- f. strategies are taken or will be taken to address the area(s) identified as needing improvement.**

Data Collection and Analysis Process. As demonstrated above, data have been and continue to be collected, aggregated, trended and analyzed. Primary responsibility for this process rests with the Assistant Dean. The data are reviewed and reported to EOAC, Department Chairs and program administrators on schedule according to the Master Plan for Evaluation. Data reports are included as attachments to the EOAC minutes and are sent to all faculty along with the EOAC minutes.

Data reports are also located on a password protected website which can be accessed by all faculty through the Evaluation webpage <http://www.indstate.edu/nurs/mary/Evalpage.html>

Data that needs further discussion for program changes is referred to the appropriate department for review and discussion. Changes in curriculum or other programmatic changes are brought through the departments and the faculty governance system for approval. Data collection, data entry, analysis and reporting mechanisms continue to be refined over time. However, the continual process of improvement makes it difficult to trend data, as new items are added to surveys and old ones are improved. For example, subscales on the exit surveys were changed from a three point Likert scale to a 5 point Likert scale, based on the need for more variability within the dataset. Items have also been added to the exit surveys to capture student input on adequacy of physical facilities and library resources. New or revised instruments are examined for internal reliability using Cronbach's alpha.

Changes brought about through the evaluation process. Over the past several years major changes have been made in our programs. These changes have been based on data from the various evaluation mechanisms. In particular, EOAC recommendations concerning NCLEX program reports and pass rates have been implemented. In addition, student data from the exit

surveys and employer data from the employer survey have led to changes in the AS and BS curriculum to increase clinical time, to add a separate pharmacology course, to add a separate assessment course earlier in the curriculum and to decrease the number of community health nursing classes. Graduate student comments concerning the graduate level pharmacology course and the laboratory diagnostic course have led to changes in the course design and in course faculty. Student responses on the program exit surveys indicate that they feel that faculty are supportive of them and listen to them.

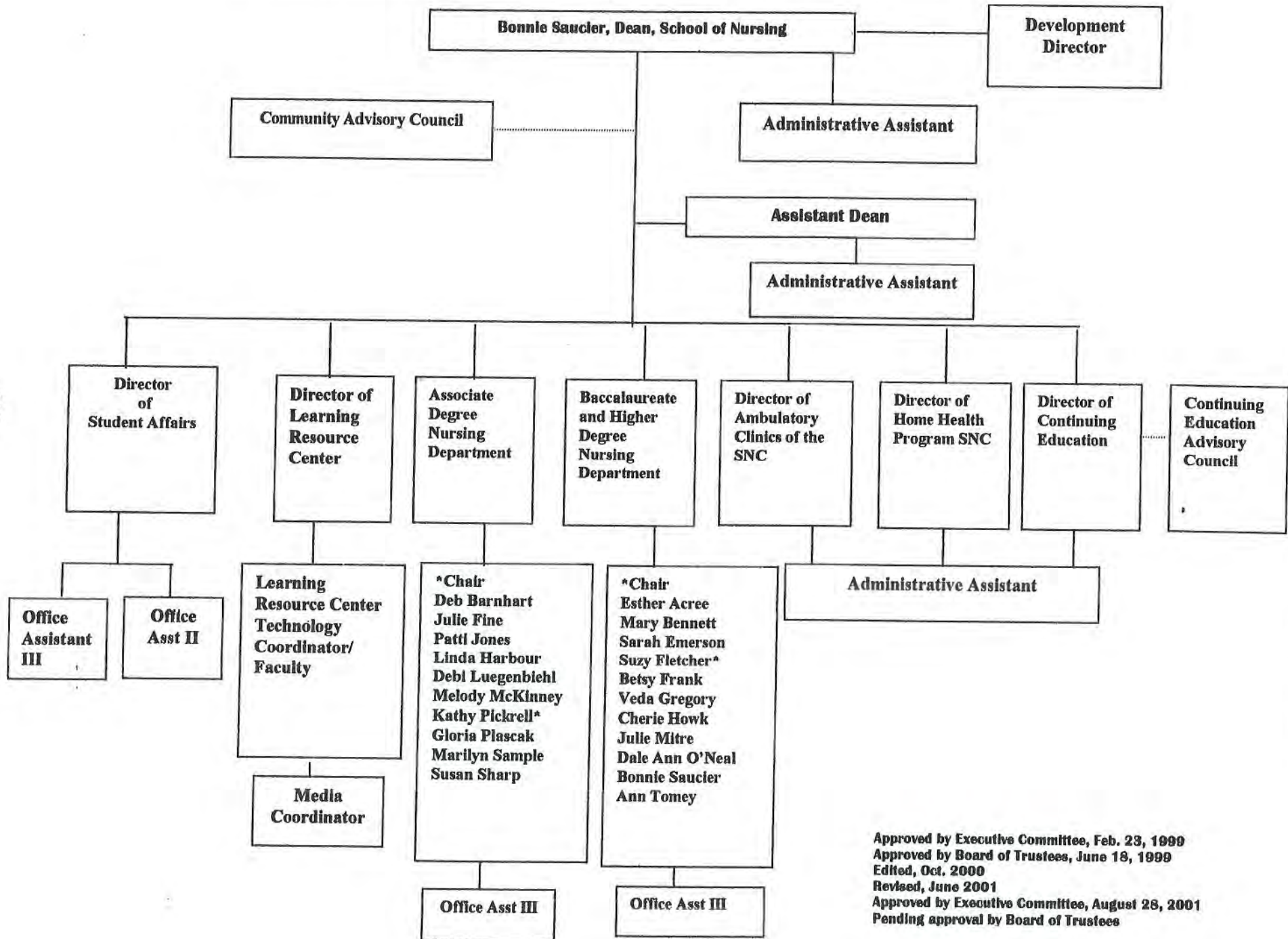
Evaluation Challenges and Strategies. A number of people and committees have been responsible for the data collection instruments and the process of data collection and analysis over the years, which lead to inconsistencies in the data available for analysis. This has improved by revising the job description of the Assistant Dean to include primary responsibility for program evaluation and data analysis, and by placing oversight responsibility in the hands of a specialized faculty governance committee (EOAC). There has also been some miscommunication concerning faculty roles in collection of data and lack of support from department chairs for the process of data collection. This issue has been mostly resolved with the current department chairs and the process of data collection, analysis and reporting has improved. There are still a few students who do not understand the need for participation in program evaluation, particularly when required to participate in standardized testing, such as critical thinking and the NCLEX-RN preparation testing. This is being addressed by stressing the need for program evaluation with students starting in new student orientation and with reminders of student expectations for continued participation in testing and surveys throughout the program. Courses which have standardized testing built into the course requirements have this information in the course syllabus, including the required score needed to pass the exam (if any), and any costs related to standardized testing that the students will be expected to pay. This has decreased student concerns and increased student performance on some standardized exams, as students now realize that their score is

important and that they should not just “hit any key” on the computerized exams in an attempt to hurry through the testing requirement. Another issue is the complexity of the evaluation process itself. With multiple outcome criteria for program needs, accreditation needs and university requirements, the need for data and data reporting has greatly increased over time. In addition, curriculum changes have led to several parallel curriculums that are currently ongoing at the same time. Students who entered under the former curriculums are in the process of completing their program of studies, while entering students are starting in the revised curriculums. The addition of distance education modalities will also add the need for separate analysis of a subset of students in some programs. All of this makes the evaluation process more difficult. This process will continue to be a concern for students and faculty alike and good communication with all involved parties is still needed to avert difficulties in this area.

Additional Criteria I: Safety and Risk Management		Operational Definition: Policies, Procedures and Actions taken to increase faculty, staff and student safety and decrease risk associated with SON learning activities. Expected Level of Achievement/Decision Rule for Action: <ol style="list-style-type: none"> 1. School of Nursing will maintain liability insurance to cover faculty and students while in practice settings. 2. School of Nursing will maintain records of any incidents which document lapses in safety or safety concerns 3. Evaluation committee will review any incidents which occur over a one year period and make recommendations for any changes needed. 				
Process					Implementation	
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>	Actions <i>For program Development, Maintenance, or Revision</i>
Safety and Risk Management	LRC office – (Sharps Log) Risk Management Log – Student Affairs Office with backup in Assistant Dean's Office.	Individual faculty members, department chairs, Student Affairs Office and Administration. EOAC to conduct yearly review of logs.	Ongoing by Department Chairs. Incidents are to be reported to Administration on an as needed basis. EOAC to review records in February.	Log review for trend analysis.	University maintains liability insurance. Logbook of sharps related incidents maintained by LRC staff. Risk Management log database created by Assistant Dean and maintained by Student Affairs Office. Four risk management related incidents thus far. No trends noted at this time.	Continue to Monitor.

Additional Criteria II: Enrollment Management New Criteria draft added April 2003.				<p>Operational Definitions from Enrollment Management Plan: Admission: Percentage of Students who are admitted to nursing from the pre-nursing (nursing non-designate) cohort. Persistence: Percentage of Students who progress from admission to the next level clinical nursing courses. Retention: Percentage of Students who move from the last level of the program to graduation. Graduation: Percentage of Cohort who graduate within the selected time period (See Criterion 23). Expected Level of Achievement/Decision Rule for Action: 1. Student enrollment in courses in all programs will meet university minimum standards 2. Enrollment Management Plan Benchmarks for Admission, Retention, Persistence and Graduation will be met for all programs.</p> <p>Outcome: First benchmark not met for selected BS and MS courses. Expected level of achievement for graduation rate met for programs which have been in place long enough to produce graduates. New programs which have not had time to produce graduates were evaluated for admission and persistence. Expected level of admission and persistence not met for modified BS program. Expected level of admission not met for modified AD program See actions below.</p>				
Process					Implementation			
Component/Element	Documentation Located	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method	Results of Data Collection and Analysis <i>Including actual level(s) of achievement</i>			Actions For program Development, Maintenance, or Revision
Course Enrollment	Department Office and Student Affairs Office	Department Chairperson	Annually in January	Review of numbers of students in courses compared to university minimum standards	We are currently offering sections to small numbers of students who have started in the RN-BS and MS programs and who need classes to finish their degree. We will also be offering small classes to accommodate students finishing out the Associate Degree program. All small classes are being offered to meet the needs of currently enrolled students. To avoid this situation in the future, enrollment management plans include requiring a minimum number of students to start a cohort in any given program or track.			Continue to Monitor
Enrollment Management Plan Benchmarks for Admission, Persistence, Retention and Graduation	Department Office and Student Affairs Office	Director, Student Affairs Office	Annually in January	Comparison of rates by cohort.	Program	Benchmark	Means across cohorts	Continue to monitor graduation rates. Concerns about persistence rates in modified programs and suggestions for corrections referred to department chairs.
					AS (old program) Graduation Rate	56%	57.24%	
					BS (old upper division) Graduation Rate	63%	85%	
					RN-BS Graduation Rate	63%	68.18%	
					MS Graduation Rate	64%	66.99%	
					New AS Admission	75%	70%	
					New AS Persistence	75%	78%	
					New BS Admission	60	51%	
New BS Persistence	70%	61%						

APPENDICES



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Approved by Executive Committee, Feb. 23, 1999
 Approved by Board of Trustees, June 18, 1999
 Edited, Oct. 2000
 Revised, June 2001
 Approved by Executive Committee, August 28, 2001
 Pending approval by Board of Trustees

Appendix A.1

