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March 23, 2012

Marcia Miller, PhD, MSN, MA, RN
Associate Dean/Executive Director for Nursing
Indiana State University
749 Chestnut Street
Terre Haute, IN 47809

Dear Dr. Miller:

This letter is formal notification of the action taken by the National League for Nursing Accrediting Commission (NLNAC) at its meeting on March 1-2, 2012. The Board of Commissioners granted the master's nursing program, including the post-master's certificate, continuing accreditation with the condition that the program submit a Follow-Up Report in two (2) years. If the Follow-Up Report is accepted by the Board of Commissioners, the next evaluation visit will be scheduled for Fall 2019. The Board of Commissioners granted the baccalaureate nursing program continuing accreditation, placed the program on warning, and scheduled the next evaluation visit for Spring 2014.

Deliberations centered on the Self-Study Report, the School Catalog, the Site Visitors' Report, and the recommendation for accreditation proposed by the Program Evaluators and the Evaluation Review Panel. (See Summary of Deliberations and Recommendation of the Evaluation Review Panel.)

The Board of Commissioners identified the following evidence of non-compliance and areas needing development:

Evidence of Non-Compliance by Accreditation Standard and Criterion

Standard 1 Mission and Administrative Capacity, Criterion 1.5 (M/PMC); Criterion 1.6 (B)

- The decentralized structure of the nursing unit results in the Executive Director of Nursing not having the responsibility and authority over the nursing unit nor adequate time and resources to fulfill the role responsibilities. (M/PMC/B)

Evidence of Non-Compliance by Accreditation Standard and Criterion (continued)

Standard 2 Faculty and Staff, Criterion 2.3 (M/PMC)

Criteria 2.1.1 and 2.2 (B)

- Preceptor-to-student ratios do not meet the recommendations of the 2008 NONPF Criteria for Evaluation of Nurse Practitioner Programs. (M/PMC)
- The faculty-to-student ratios in clinical courses exceed the ratios recommended in the 2008 NONPF Criteria for Evaluation of Nurse Practitioner Programs. (M/PMC)
- The number and utilization of faculty are not adequate to monitor clinical experiences of students in the nurse practitioner track to ensure program outcomes can be achieved. (M/PMC)
- Workload standards in the University do not support accomplishment of faculty-to-student ratios. (M/PMC)
- Less than 25% of the full-time faculty hold earned doctorates. (B)
- There is no evidence to confirm that all faculty are licensed as registered nurses. (B)
- There is no evidence to confirm the educational credentials of all faculty. (B)

Standard 6 Outcomes, Criteria 6.5.1, 6.5.2, and 6.5.3 (B)

- Licensure exam pass rates did not meet requirements set by the State Board of Nursing and were below the national average for three consecutive years. (B)
- No data are available for program completion rates after 2008. (B)
- Data for employer satisfaction are available only for 2010. (B)

Areas Needing Development by Accreditation Standard

Standard 1 Mission and Administrative Capacity

- Continue to develop and implement methods to ensure student participation in the governance of the nursing unit. (M/PMC/B)
- Clarify structure for governance that clarifies and supports the leadership roles. (M/PMC/B)

Standard 2 Faculty and Staff

- Ensure that faculty files contain evidence of license/certification status and educational preparation. (M/PMC/B)
- Consider the addition of a faculty member certified in nursing administration to lead the nurse administrator track. (M/PMC)
- Continue efforts to support faculty who are pursuing the doctorate degree. (B)
- Investigate ways to increase faculty scholarship activities. (B)

Standard 3 Students

- Develop a method to ensure that students who are in the advanced practice nursing programs hold current RN licensure. (M/PMC)

Areas Needing Development by Accreditation Standard (continued)

Standard 4 Curriculum

- Ensure that regular review of the curriculum is conducted and includes documentation with rationale for maintenance of or changes in curriculum. (M/PMC)
- Incorporate NONPF criteria in the development and delivery of the FNP curriculum. (M/PMC)
- Refine the student learning outcomes and establish a correlation between the baccalaureate and master's program outcomes and objectives. (M/PMC)
- Document the process and outcomes of the faculty and student evaluation of clinical sites. (M/PMC)
- Ensure that faculty directly assess students in the clinical setting using technology if necessary. (M/PMC)
- Ensure that faculty regularly review the curriculum and document rationale for maintenance of or changes in the curriculum. (B)
- Review the newly revised baccalaureate student learning outcomes to ensure their consistency with the expectations of baccalaureate level competencies and that they are consistent among baccalaureate options. (B)

Standard 6 Outcomes

- Ensure implementation of the new plan including qualitative and quantitative course-specific measures of assessing outcomes and competencies for each of the seven (7) program goals. (M/PMC)
- Strengthen the mechanism for reporting outcome performance on certification examinations, including the number of students graduating along with the number of students who pass or fail the certification examination. (M/PMC)
- Develop and implement a procedure for tracking program completion rates. (M/PMC)
- Ensure that the plan for obtaining data on employer satisfaction is fully implemented. (M/PMC)
- Ensure that the systematic plan for evaluation meets the NONPF evaluation criteria. (M/PMC)
- Improve the consistency and rigor of the data collection methods for all program outcomes. (B)
- Improve the consistency and rigor of the data collection methods for all student learning outcomes. (B)
- Ensure that the systematic plan is implemented completely and reflects the curriculum revisions. (B)

Master's /PMC

A Follow-Up Report requires the nursing education unit to demonstrate compliance with a specific Accreditation Standard or Standards. The Follow-Up Report for the master's program, including the post-master's certificate, is to address Standard 1 Mission and Administrative Capacity and Standard 2 Faculty and Staff. The Report is to be submitted to NLNAC in the Spring 2014 Accreditation Cycle by February 15, 2014. At the time of its review of the Follow-Up Report, the Board of Commissioners will either affirm the next evaluation visit or deny continuing accreditation and remove the nursing program from the list of accredited programs.

Baccalaureate

When a program has been placed on warning, a new Self-Study Report is required, and an accreditation site visit is scheduled in two (2) years. If the areas of non-compliance are not resolved, the nursing program will be denied continuing accreditation and removed from the list of accredited programs.

If you have questions about this action or about Commission policies and procedures, please contact me.

Sincerely,



Sharon J. Tanner, EdD, RN
Chief Executive Officer

cc: Mary Lou Rusin, Program Evaluator
Patricia Hoyson, Program Evaluator
Antionette Rawls, Program Evaluator
Vivian Schrader, Program Evaluator
Francene Weatherby, Program Evaluator
Jessica Estes, Program Evaluator

Enc. Summary of Deliberations of the Evaluation Review Panel