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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

College of Nursing, Health, and Human Services
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:**
March 2011; Full accreditation awarded
- 4. Name, title of chief administrative officer:**
Dr. Daniel J. Bradley, Professor and President
Indiana State University

Dr. C. Jack Maynard, Professor and Provost
Vice President of Academic Affairs

Dr. Richard “Biff” Williams, Professor and Dean
College of Nursing, Health, and Human Services
- 5. Name, title of administrator of the unit in nursing:**

Dr. Marcia Miller, Associate Professor and Associate Dean of Academics
Executive Director of Nursing
College of Nursing, Health, and Human Services
- 6. Program type, purpose of visit:**
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:**
 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:**
 Administrators = 4
 Faculty and Instructors (Full-time) = 27
 Faculty (Part-time) = 24
- 10. Current student enrollment (Spring 2011):**
 NND = 226
 BN = 268
 BNC = 122 (RNs); 204 (LPNs)
 APN = 372
- 11. Name of state board of nursing and approval status:**
 Health Professions Bureau
 Indiana State Board of Nursing
 Indianapolis, IN
<http://www.in.gov/pla/nursing.htm>
 Approval status: Full accreditation for all programs
- 12. Standards and criteria used to prepare the report:**
 National League for Nursing Accrediting Commission. (2011). *Accreditation Standards and Criteria for Academic Quality of Postsecondary and Higher Degree Programs in Nursing* (2008 ed.). Atlanta GA: National League for Nursing Accrediting Commission.

Introduction

Indiana State University (ISU) is located in Terre Haute, Indiana's tenth largest city, which is located at the Crossroads of America. The population of the city in 2009 was 59,614; early results from Census 2010 indicate that the population of the city is now 60,785. While the median age of residents is 32.1 years, there are approximately 8800 (14.9%) individuals who are over the age of 65 years. Ethnic diversity is low with approximately 82% of the population being Caucasian. Terre Haute offers a variety of cultural, historic, and educational enrichment opportunities to the University community.

ISU, a public institution, was founded in 1865 as Indiana Normal School with the primary mission being to prepare teachers for Indiana's schools. Enrollment has increased from 21 students in the first class to nearly 11,000 during the 2010-2011 academic year.

ISU has six (6) academic divisions, each headed by a dean who reports to the Provost and Vice President for Academic Affairs. The divisions include the Colleges of Arts and Sciences; Business; Education; Nursing, Health, and Human Services; Technology; and the College of Graduate and Professional Studies.

ISU offers associate, baccalaureate, masters, specialist, and doctoral degrees. The University is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools, <http://www.ncahigherlearningcommission.org>. The University received a ten-year reaccreditation in 2011. Academic programs across the colleges are accredited by more than 30 different agencies. In addition, the University holds institutional membership in at least ten major national associations.

The basic Carnegie classification for ISU is Doctoral/Research Intensive University. Institutions with this label offer a wide range of baccalaureate programs and are committed to graduate education through both masters and doctoral degrees. Indiana State University offers over 80 majors in a variety of areas including arts and sciences, business, criminology and criminal justice, education, nursing, health, and human services, and technology.

The University is governed by a board of trustees, and administered by a president, who is the University's chief executive officer. The University is organized into the following major functional areas: Academic Affairs; Business Affairs and Finance; Enrollment Management, Marketing and Communications; Student Affairs. The University President delegates the administration of each of these functional units to a vice president. Each of the functional areas is organized into related administrative divisions, departments, units, and offices.

Total student enrollment for spring 2011 in the Department of Baccalaureate Nursing was 419 (NND) and 273 (in the major); in the Department of Baccalaureate Nursing Completion it was 166 (RNs) and 310 (LPNs). The Department of Advanced Practice Nursing had a total enrollment of 337.

The Department of Baccalaureate Nursing is comprised of four (4) full-time, tenured faculty, four (4) full-time, tenure-track faculty, and seven (7) instructors. The Department of Baccalaureate Nursing Completion is comprised of three (3) full-time, tenured faculty, one (1) full-time, tenure-track faculty, and three (3) instructors. There are five (5) full-time, tenured faculty and four (4) full-time faculty members in the Department of Advanced Practice Nursing.

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 no longer exists. These above mentioned programs have relocated to the new Landsbaum Center for Health Education.

Major curricular revisions and innovations 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. The associate degree nursing program closed in 2005.

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. By 2000, all courses in the track were delivered by distance modality. The Baccalaureate Track for Licensed Vocational or Licensed Practical Nurses began in fall 2003. All courses in these tracks are delivered online.

In 2006, the Provost of the University charged a task force with developing a more comprehensive college focused on programs and services in the health related area. In its 2007 report to the Provost, the task force found that other universities were successful in forming colleges of health that strengthened and supported training in health professions. As a result, the Provost recommended that the College of Nursing, Health, and Human Services be created from the College of Nursing and the College of Health and Human Performance. Approval was received from the Indiana Commission on Higher Education in 2007.

In 2008, departments within the College of Nursing, Health, and Human Services were established. Nursing transitioned from the Baccalaureate and Higher Degree Department into the Department of Baccalaureate Nursing, Department of Baccalaureate Nursing Completion, and the Department of Advanced Practice Nursing.

Summary of Standards and Criteria

Standard 1: Mission and Administrative Capacity

The mission and philosophy of all nursing departments in the College of Nursing, Health, and Human Services are congruent with the mission and purpose of Indiana State University. Table 1.10.1 indicates the alignment of the mission statement and philosophy between the governing organization and the nursing education unit. The University is governed by a Board of Trustees whose members are governor-appointed and who work closely with administrators and faculty to implement the mission of the University and the College. Faculty, administrators, students, staff, and the public have access to the Board of Trustees and may communicate with members by written communication (email and letters) through the Board Liaison. Administrators and faculty have authority to implement the nursing programs and achieve student learning outcomes.

The organizational structure of the University and the College of Nursing, Health, and Human Services allows for faculty and students to participate in the governance process. Faculty, students, and nursing department chairpersons are represented on University and College standing committees and participate in governance processes. 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 nursing departments, who are beyond their first year of appointment, to actively participate in the governance within the departments. Each nursing department has 100% participation on standing nursing committees. Students have adequate opportunities to participate in governance, but representation did not meet the expected

level of achievement. Efforts continue to increase student involvement in governance with the use of technology.

Communities of interest and the public participate in program processes through the Advisory Committee and department committees. The input received from Advisory Committee members is highly valued and is used for program and course decision-making. Program partnerships help to promote excellence in nursing education by providing valuable and diverse clinical experiences for students' learning. Some partnerships also enhance students' learning and mobility through the nursing program through different modalities of delivery.

The Executive Director of Nursing is qualified and authorized to administer the nursing programs. The Executive Director has many years of experience in health care and nursing education and meets the academic qualifications. The Executive Director is licensed as a Registered Nurse in the state of Indiana. She has taught at associate, baccalaureate, and graduate levels of nursing education. She was appointed Executive Director of Nursing in November 2008. She has the authority and responsibility for administering the programs; she also facilitates program operations and prepares the budget with collaboration from the nursing department chairs.

Policies at Indiana State University apply to all faculty members and are published in the *Indiana State University Handbook*. Policies of the College of Nursing, Health, and Human Services nursing department are congruent with the University except where they

relate 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. Nursing faculty members are supported by a workload policy that is based on course and clinical contact hours. For campus faculty, a formula for calculating workload is based on contact hours; for distance education faculty, the workload is based on the number of clinical hours in a given course.

A policy is in place that addresses grievances. There is also a mechanism for students to register compliments, concerns, and complaints. A record of student complaints and resolution is reviewed annually by department chairs and the Executive Director for trends. A record of grievances and resolution is maintained.

Standard 2: Faculty and Staff

Faculty credentials meet the University and Indiana State Board of Nursing requirements. One faculty member is not currently licensed as a Registered Nurse in the state of Indiana where he teaches. In addition, preceptors and adjunct faculty teaching in distance education clinical nursing courses are licensed to practice in their respective states. All faculty and instructors meet the requirement of a minimum of a master's degree with a major in nursing. All departments meet the minimum requirement for faculty and instructors who hold earned doctorates. Credentials of lab personnel are commensurate with their level of responsibilities. Lab personnel hold a current, valid Registered Nurse license in the state of Indiana and have a master's degree in nursing.

There are sufficient numbers of faculty, instructors, preceptors, and staff to ensure that program outcomes are achieved. The *Faculty Workload Policy* establishes a reasonable teaching load that supports faculty teaching responsibilities, scholarship activities, and service to the University and the community.

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, gerontology 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. Faculty members are actively engaged in endeavors that substantiate and reflect the scholarship of discovery, teaching, integration, and application.

There are no non-nurse faculty. There are sufficient numbers of staff members to achieve program outcomes. The Testing Coordinator has been instrumental in achievement of student learning outcomes through the use of assessment, coordination of testing schedules, and reporting results using the Assessment Technologies Institute® (ATI) package.

Faculty and instructors are oriented and mentored to the role by faculty and chairpersons. A formal college orientation plan is being developed for newly hired faculty and instructors. 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. Staff members' performance is reviewed annually according to University policy. Faculty teaching distance education courses engage in developmental activities that augment instructional methods and evaluation of distance education modalities. All faculty receive technological support.

Standard 3: Students

Students enrolled in the College of Nursing, Health, and Human Services are governed by the policies of Indiana State University and the College. Nursing policies are congruent with those of the University except as they apply to and are justified by the requirements for success in a professional education program. Policies are readily accessible to students and public, non-discriminatory, and consistently applied.

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. Student success is supported by the availability and quality of these services and the qualified professionals who direct student support services.

Policies and procedures for maintenance of student educational and financial records within the University and the college are in compliance with state and federal regulations.

The University has a written, comprehensive student loan repayment program and

students are notified of their financial obligations and ethical responsibilities at the time of receiving financial assistance.

Integrity, accuracy, and consistency exist for all information published for the public. Information intended for public knowledge is monitored closely. Changes in policies, procedures, and program information are communicated to students in a variety of ways and in a timely manner.

Orientation to technology is provided for all faculty using web-enhanced or web-based technology in their courses. Support is available for technological services for all students, including those receiving instruction using alternative methods of delivery. Information related to technology requirements and policies for students enrolled in distance education courses is clear, accurate, consistent, and accessible.

Standard 4: Curriculum

The nursing curriculum is organized from basic nursing concepts to complex nursing care and integrates professional standards, competencies, and state and national guidelines. Course outcomes are linked to level outcomes and competencies in order to conceptually support end of program outcomes for undergraduate tracks and graduate concentrations. Faculty develop, refine, and review curriculum for rigor and currency. Curriculum decisions are based on the review of literature, current health trends, and feedback from faculty, students, and communities of interest. Through the most recent review process and program assessment, faculty initiated an accelerated undergraduate track for second degree students. Some of the standards used in the development of all nursing curricula include the competencies as identified by the National League for Nursing (NLN),

American Nurses Association Standards, the American Nurses Association Code for Nurses, the Indiana Code Title 25, Essentials of Baccalaureate Education for Professional Nursing Practice, and Essentials of Master's Education for Advanced Practice Nursing. Curricular revisions also incorporate the Institute of Medicine (IOM) recommendations for core knowledge required of all health care professionals.

Student learning outcomes direct the current and revised curricula of the undergraduate program and the current graduate program in nursing. Student achievement of measurable outcomes is accomplished through the curricula. Integrated throughout undergraduate and graduate courses are cultural, ethnic, and socially diverse concepts. Foundational studies courses address and augment the curriculum in areas of ways of knowing, ethics and social responsibility, and global perspectives. Clinical experiences incorporate regional, national, or global perspectives of care.

Faculty use a variety of evaluation methods based on student learning and program outcomes. Student learning and program outcomes are measurable and reflect established professional and practice competencies. 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. Clinical experiences are selected for student learning and support the achievement of outcomes. Contracts are maintained for all clinical facilities. The curriculum includes best practice standards and is guided by educational theory, interdisciplinary collaboration, and research. Program length is congruent with the attainment of program outcomes and

consistent with University policies. Learning activities, instructional materials, and evaluation methods are appropriate for distance education and consistent with learning outcomes.

Standard 5: Resources

The budget is adequate to support the achievement of student learning outcomes of the College of Nursing, Health, and Human Services and is comparable with other units in the University. The budget has remained reasonably flat for the last eight (8) years. As enrollments started an upward trend for the University, concurrently the state budget experienced a growing deficit; therefore, funding for all programs has come under close scrutiny. Faculty members, Director of the Learning Resource Center, Department Chairpersons, and the Executive Director 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.

Physical facilities are appropriate and sufficient to meet the needs of faculty, staff, and students. The Nursing Building is a four-story structure housing classrooms, seminar rooms, offices, lounges, and simulation laboratories. Classrooms are equipped with audio-visual equipment. Internet connections are also available for use in classrooms. All faculty have office space with a computer, desk, file cabinet, and bookshelves. The Landsbaum Center for Health Education houses the Department of Advanced Practice Nursing, the Sycamore Nursing Center, Continuing Education Program, 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. The Center offers unique opportunities for promoting collaboration and multidisciplinary education. All of these physical resources support the achievement of student learning outcomes.

Learning resources, such as instructional software and hardware, are current, comprehensive, and available to students in sufficient quantity and quality to support learning outcomes. Simulation activities are designed and based on best practices. 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. Nursing faculty have input into the selection, development, and maintenance of learning resources. The Director of the Learning Resource Center and the Technology Coordinator, are available on a full-time basis to assist students and faculty.

For distance education, fiscal, physical, technological, and learning resources are adequate for achieving students learning outcomes. Faculty needs are adequately met as well by these resources.

Standard 6: Outcomes

The systematic plan for program evaluation has been developed, implemented, evaluated, and revised by the faculty. The plan provides a comprehensive systematic assessment and evaluation of the program, faculty, the curricula, students, resources, and outcomes. Standards and criteria established by the National League for Nursing Accrediting Commission (NLNAC) and the Institute of Medicine (IOM) are included in the plan. Findings from the evaluation process have been foundational for most, if not all, of the program and curriculum changes made in the past several years. Data collection, data entry, analysis, and reporting mechanisms continue to be refined over time. These plans and the corresponding data, as well as proposed improvements, are stored centrally in a university server through a software program entitled TaskStream. Implementation of the systematic plan for program evaluation has become a point of excellence over the past few years. Findings from the process are presented throughout this self study report. The plan includes the expected level of achievement (benchmark), frequency of assessment, assessment method, results of data collection, analysis of data, and actions for program development, maintenance, or revision. Components in which the level of achievement is not met are discussed in department meetings and curriculum meetings to determine strategies for program improvement and positive outcomes of student learning. Evaluation findings are shared with communities of interest in an annual meeting; information is disseminated by formal written reports, verbal and written communication, and through the internet.

Students' academic achievement by program type has been evaluated by: performance on licensure examination, program completion, program satisfaction (by graduates and employers), and graduation rates. Benchmarks have been set and evaluated on a regular basis. Review of trended data indicates the following:

- The baccalaureate nursing program has failed to meet the benchmark for licensure/certification rates for the past three (3) years. The baccalaureate nursing program is meeting the benchmark; the graduate nursing program is meeting its benchmark for certification exam pass rates.
- All programs are meeting the benchmarks for program completion (graduation) rates.
- All programs are meeting the benchmarks for program satisfaction scores.
- All programs are meeting the benchmarks for job placement rates.

Analysis and Summary of Strengths and Areas Needing Improvement

Strengths

Curriculum modifications for the baccalaureate degree nursing program 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.

Faculty scholarship has increased since the NLNAC accreditation visit in 2003. All faculty are engaged in scholarship activities. Senior faculty have mentored junior faculty in this process.

Program assessment and evaluation, through each department's Systematic Plan of Program Evaluation, has been strengthened to make the process of program improvement accessible and timely. Faculty are utilizing data to make improvements in course and curriculum design.

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

The recruitment of new faculty members has strengthened the nursing programs. Since there is a national shortage of nursing faculty, the attainment of qualified and diverse faculty members is viewed as an achievement.

The Learning Resource Center is an excellent resource for the nursing departments. The large number of holdings in various media formats enhances the education of nursing students through visual, auditory, and kinetic learning. An interprofessional simulation lab is an excellent addition to nursing resources.

The Sycamore Nursing Center is an excellent asset of the College of Nursing, Health, and Human Services for providing a variety of clinical experiences for nursing students in all

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 Hospital's Midwest Center for Rural Health, the Indiana University School of Medicine, and Indiana State University College of Nursing, Health, and Human Services. The Continuing Education in Nursing Program also has a unique partnership with the Area Health Education Center. The above mentioned collaborative partnerships allow excellent opportunities for interdisciplinary education.

Opportunities for Improvement

One of the highest priorities is the NCLEX-RN pass rate for baccalaureate nursing students. Since 2008, NCLEX-RN pass rates have declined below state levels and for the past two (2) years, have not reached national levels. *A Comprehensive Plan to Improve the Quality of Undergraduate Nursing Education, 2010-2013* has been developed and implemented.

Issues have occurred with data collection and analysis over the past 3 years. During the transition process from school of nursing to college, faculty and staff changes have resulted in some data related to clinical evaluations not being collected or stored. Data collection and storage have been discussed in departments and faculty have been oriented to correct procedures for collecting and storing data from clinical evaluations.

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 continues as a strategy to fill tenure-track positions.

Student participation on College and nursing department committees needs to be improved. Based on evaluation, 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 early weeks of each semester, students will be encouraged to volunteer or be invited by faculty to serve as representatives or alternates. Another strategy that is being used is to include committee minutes on course Blackboard sites and invite students to provide feedback with their representatives about ongoing issues.

CRITERION 1.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.

The Mission and Values Statements for Indiana State University are published in the Indiana State University Handbook available online at <http://www.indstate.edu/adminaff/policyindex.htm> (Section 200, Governance). The previous web address also contains additional information about the institutional history and setting as well.

In addition, the Mission and Value statements are published in the Undergraduate Catalog (2010-2011). The College, of Nursing, Health, and Human Services has listed Core Values. Nursing faculty, in the College of Nursing, Health, and Human Services, in concert with the parent institution, has one Philosophy and a Mission Statement for each department. Table 1.1.1 shows congruency of these statements.

Table 1.1.1 *Comparison of Mission and Values Statements between University, College, and Departments*

Indiana State University	College of Nursing, Health, and Human Services	Nursing Departments
<p>Mission statement: Indiana State University combines a tradition of strong undergraduate and graduate education with a focus on community and public service. We integrate teaching, research, and creative activity in an engaging, challenging, and supportive learning environment to prepare productive citizens for Indiana and the world.</p>	<p>Mission statement: We are committed to providing our students with a supportive learning environment that is progressive, challenging, and creative. Our students have the opportunity to obtain the necessary skills and credentials to become competent practicing professionals.</p>	<p>Mission statements: Baccalaureate Nursing: The mission of the Department of Baccalaureate Nursing is to develop students who are competent, caring nursing professionals and productive citizens. This mission is accomplished through innovative teaching, experiential learning, research, and community and public service in the traditional and non-traditional campus-based setting.</p>
<p>Values: We value high standards for learning,</p>	<p>Values: Our programs focus around our core values of compassion,</p>	<p>Baccalaureate Nursing Completion: The mission of the Department of Baccalaureate Completion Nursing for LPN/LVNs</p>

Indiana State University	College of Nursing, Health, and Human Services	Nursing Departments
<p>teaching, and inquiry. We provide a well-rounded education that integrates professional preparation and study in the arts and sciences with co-curricular involvement. We demonstrate integrity through honesty, civility, and fairness. We embrace the diversity of individuals, ideas, and expressions. We foster personal growth within an environment in which every individual matters. We uphold the responsibility of University citizenship. We exercise stewardship of our global community.</p>	<p>health, integrity, respect, and performance with the vision of becoming eminent in providing qualified professionals serving diverse populations through learning, leadership, scholarship, innovation, and community engagement.</p>	<p>and RNs is to develop competent, caring professionals and productive citizens. This mission is accomplished through distance teaching modalities, experiential learning at the local level, research, and community and public service.</p> <p>Advanced Practice Nursing: The mission of the Department of Advanced Practice Nursing is to develop competent, caring nursing professionals and productive citizens practicing in advanced nursing roles in clinical care, education, and leadership. This mission is accomplished through a variety of teaching modalities, experiential learning, research and/or the application of research findings, and community and public service.</p>

The *Philosophy of the Nursing Faculty* serves as the foundation for the programs of study and articulates the faculty’s beliefs about nursing, nursing education, and continuous quality improvement in instruction, nursing care, and academic performance.

Philosophy of the Nursing Faculty

Nursing faculty endorse the mission and values of Indiana State University, the College of Nursing, Health, and Human Services, and the missions within each of the nursing departments. This philosophy articulates the faculty’s beliefs about nursing practice, nursing education, continuous quality improvement and also serves as a guide for all functions within the scope of nursing education at Indiana State University. The philosophical beliefs of the faculty result in the development of competent, caring nursing professionals and productive citizens.

Nursing¹ is viewed as a professional practice discipline. The body of nursing knowledge is derived from research and scholarly inquiry within the sciences and humanities. Nurses implement evidence-based practice from a holistic, caring framework in a multicultural, complex environment in an effort to provide safe, high quality care. The concepts of health promotion and wellness, risk reduction, disease management, and palliative care are emphasized across the lifespan within the nurse-patient relationship. Nurses provide care to patients, families, groups, and communities with an emphasis on health care that includes rural and underserved populations. To this end nurses embrace technology and informatics to increase care efficiencies. Nurses participate as members of the interprofessional team and demonstrate professional behaviors. Leadership is expressed in a variety of venues including clinical, educational, administrative, and political.

Faculty promote excellence in nursing practice via nursing education ranging from baccalaureate to clinical doctoral education and through professional continuing nursing education. All levels of nursing education are provided by supportive faculty who are experts in teaching, scholarship, and who provide service to the University, the community, and the profession of nursing. Program outcomes are achieved through student-centered, active learning in an environment that values mutual respect, diversity, experiential learning,

¹ The profession is guided by the American Nurses Association Code of Ethics and Standards of Practice and also reflects mandates and nursing care standards from significant nursing and health education organizations such as the National League for Nursing, American Nurses Association, National League for Nursing, American Association of Colleges of Nursing, Indiana State Board of Nursing, and the Pew Health Professions Commission.

community engagement, and a wide range of teaching methods. Nursing education is accomplished through on-campus classes, clinical experiences, and distance modalities. Nursing faculty maintain academic integrity and high standards that promote student accountability and personal growth.

Nursing faculty, in their pursuit of program excellence, are dedicated to systematic assessment through data collection and analysis for the purposes of continuous quality improvement. The dimensions by which programs are evaluated include students, faculty, administrators, community stakeholders, teaching/evaluation methods, resources, curricula, and program outcomes. The evaluation of these dimensions allows for opportunities to improve student learning and celebrate successes.

The *Philosophy of the Nursing Faculty* is reviewed in odd numbered years by Departments and revisions are made, as needed. The latest revision was completed in May, 2010 in conjunction with curriculum revisions.

The programs' outcomes flow from the *Philosophy of the Nursing Faculty* and are augmented by the learning outcomes of the foundational studies program. Course descriptions connect course outcomes and competencies to program outcomes. The curriculum progresses from simple to complex through those outcomes and competencies. Currently, the curriculum is in transition; a curriculum revision has been completed that focuses on a more contemporary core competencies model. As the

revised curriculum is being offered, both curricula and Systematic Plans for Program Evaluation will exist simultaneously. The undergraduate teach-out plan will take three additional years. A course crosswalk will be provided for students who have encountered a delay in completing their program of study. The Department of Baccalaureate Nursing 2001- 2010 role outcomes include critical thinker, communicator, provider of care, leader, professional, life-long learner, advocate, and coordinator of community resources. The Department of Baccalaureate Degree Completion includes the same roles in the RN-BS completion and LPN-BS completion tracks. The Department of Advanced Practice Nursing 2001-2010 program includes the roles of critical thinker, communicator, advanced provider, leader, professional, lifelong learner, advocate, coordinator of community resources, and knowledge contributor.

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 Indiana Deans and Directors, the Pew Commission Competencies for Health Care Practitioners, National League for Nursing core competencies, and the essentials of baccalaureate and master's education from the American Association of Colleges of Nursing. Refer to Table 1.1.2 to compare the missions, student learning outcomes, and competencies of the nursing programs.

Table 1.1.2 *Nursing Departments Student Learning Outcomes 2001-2011*

<p align="center">Undergraduate Departments 2001-2011 Student Learning Outcomes</p>	<p align="center">Graduate Department 2001 Student Learning Outcomes</p>
<p>Critical Thinker: A critical thinker who thinking, intellectual integrity, solid reasoning and creative problem solving as the basis for making decisions and clinical judgments.</p>	<p>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.</p>
<p>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.</p>	<p>Communicator: A communicator who utilizes multiple modalities strategically for the optimal transmission of messages and interaction with the intended audience.</p>
<p>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.</p>	<p>Advanced Provider: A provider who is competent to apply advanced nursing knowledge including culturally competent care, assessment, prescriptive interventions, evaluation, collaboration, and education.</p>
<p>Leader: A leader who provides responsible direction in the management of human, fiscal, and material resources necessary for achieving quality health care outcomes.</p>	<p>Leader: A leader who inspires, persuades, and mentors others in the implementation of organizational visions and missions.</p>
<p>Professional: A professional who demonstrates accountability and responsibility for nursing judgments and actions within an ethical and legal framework.</p>	<p>Professional: A professional who is a role model through adherence to the ethical, legal, and professional standards of the discipline specialty area.</p>
<p>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.</p>	<p>Life-long Learner: A life-long learner who incorporates new knowledge related to culture, ecology, economics, politics, science, and technology.</p>
<p>Advocate: An advocate for policy changes that promote health for individuals, families, and communities.</p>	<p>Advocate: An advocate who critiques, develops policies, and participates in activities that promote positive change.</p>
<p>Coordinator of Community Resources: A coordinator who collaborates with members of the interdisciplinary health care team in multiple settings.</p>	<p>Coordinator of Community Resources: A coordinator who collaborates with agencies and other providers for the most effective utilization of resources.</p>
	<p>Knowledge Contributor: A knowledge contributor who synthesizes, designs, conducts, and implements research to bring about changes and make improvements in professional practice.</p>

The 2011 student learning outcomes reflect the contemporary standards of the National League for Nursing core competencies, the Institute of Medicine healthcare competencies, and the American Association of Colleges of Nursing essentials.

Table 1.1.3 *Undergraduate Student Learning Outcomes-Summer 2011 (for Accelerated and Revised Traditional Baccalaureate Nursing Program)*

-
1. The baccalaureate prepared student will provide safe and holistic patient-centered care.
 2. The baccalaureate prepared student will work in interprofessional teams.
 3. The baccalaureate prepared student will employ evidence-based practice.
 4. The baccalaureate prepared student will apply quality improvement.
 5. The baccalaureate prepared student will utilize informatics
 6. The baccalaureate prepared student will demonstrate leadership skills.
 7. The baccalaureate prepared student will demonstrate health promotion.
 8. The baccalaureate prepared student will display professional behaviors.
-

As the three nursing departments become more autonomous, so does the sophistication of the student learning outcomes of the graduate concentrations. The graduate department student learning outcomes are in the process of transforming from generic role outcomes to concentration-specific student learning outcomes.

The *Philosophy of the Nursing Faculty* supports distance education as a method of delivery. *The Philosophy of the Nursing Faculty* supports this belief by stating, “Nursing education is accomplished through on-campus classes, clinical experiences, and distance modalities” (§ 3).

Nursing courses in the Baccalaureate Tracks for students who are licensed as Registered Nurses, Licensed Practical Nurses, or Licensed Vocational Nurses and all graduate courses in the Department of Advanced Practice Nursing are delivered through distance media including electronic platforms. Students may enroll in a distance education course section directly through Indiana State University. Other distance education courses, such

as cognate courses, foundational studies courses, and electives are available through Indiana State University or other accredited institutions of higher education. Nursing distance education courses are reserved for students in the distance education program of studies. Individual exceptions to this policy have been made for students in active military service or those with health issues that prevent them from attending campus classes.

CRITERION 1.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.

Indiana State University (ISU) 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 five academic divisions, including the College of Nursing, Health, and Human Services, each headed by a dean who reports to the Provost and Vice President for Academic Affairs. The organizational chart for the University can be found in Appendix A, and in the *Indiana State University Handbook*, Organization Chart Reporting Lines, available online at <http://www.indstate.edu/adminaff/docs/OLD%20Documents/Aug08OrgChart.pdf> .

The College of Nursing, Health, and Human Services organizational chart follows in Figure 1.2.1. Organizational charts for each nursing department are located in Figures 1.2.2, 1.2.3, 1.2.4.

Figure 1.2.1 *College of Nursing, Health, and Human Services Organizational Chart*

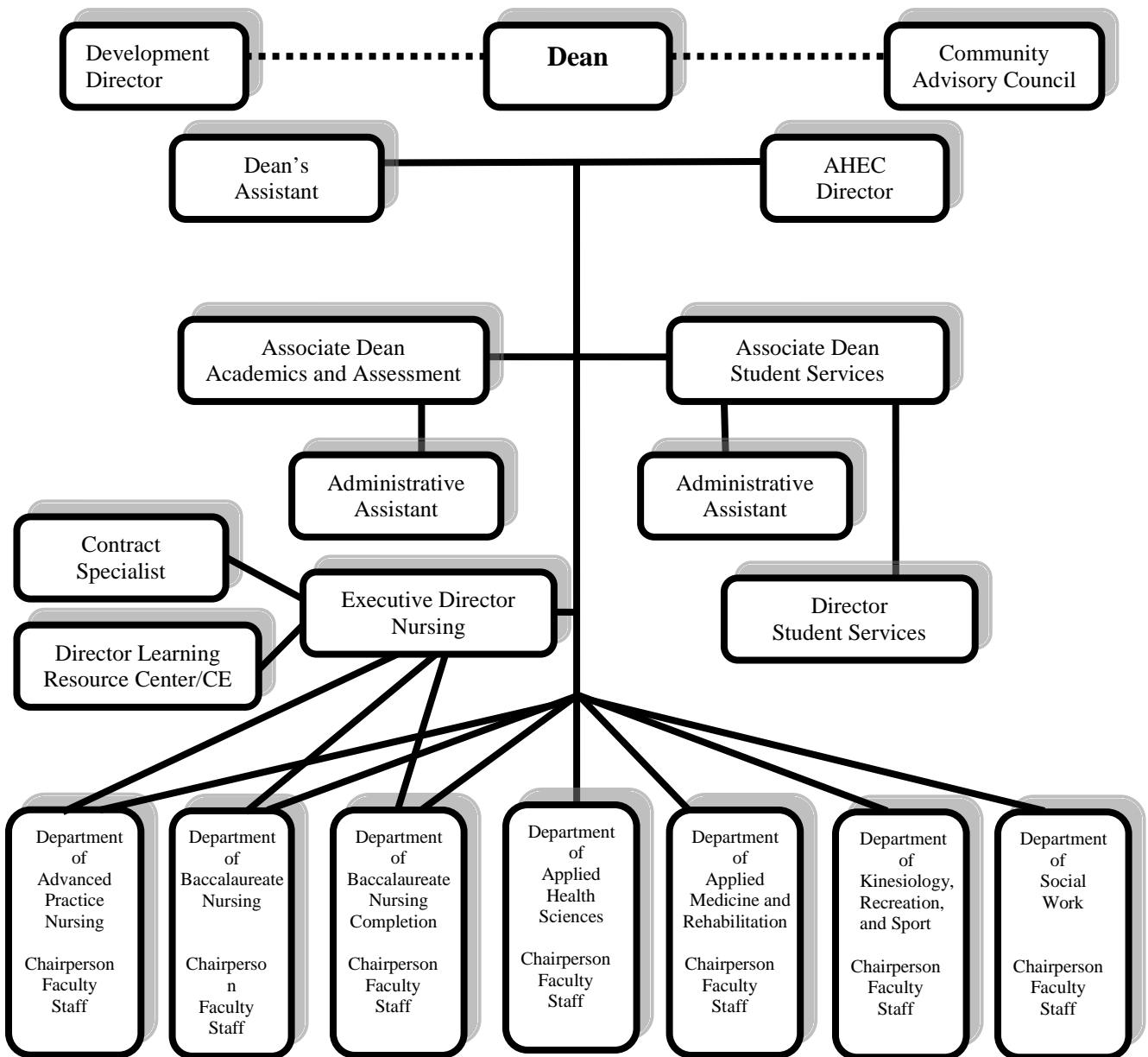


Figure 1.2.2 *Department of Baccalaureate Nursing Organizational Chart*

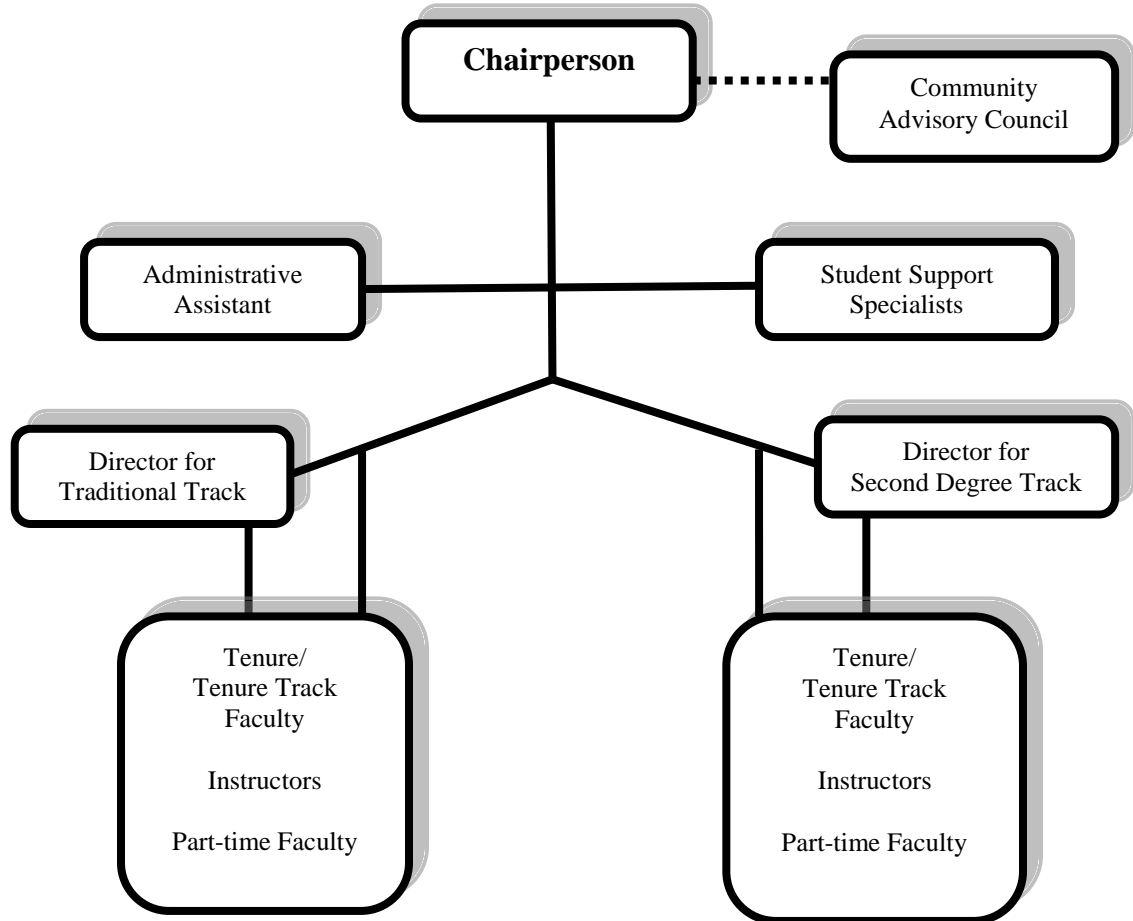


Figure 1.2.3 *Department of Baccalaureate Nursing Completion Organizational Chart*

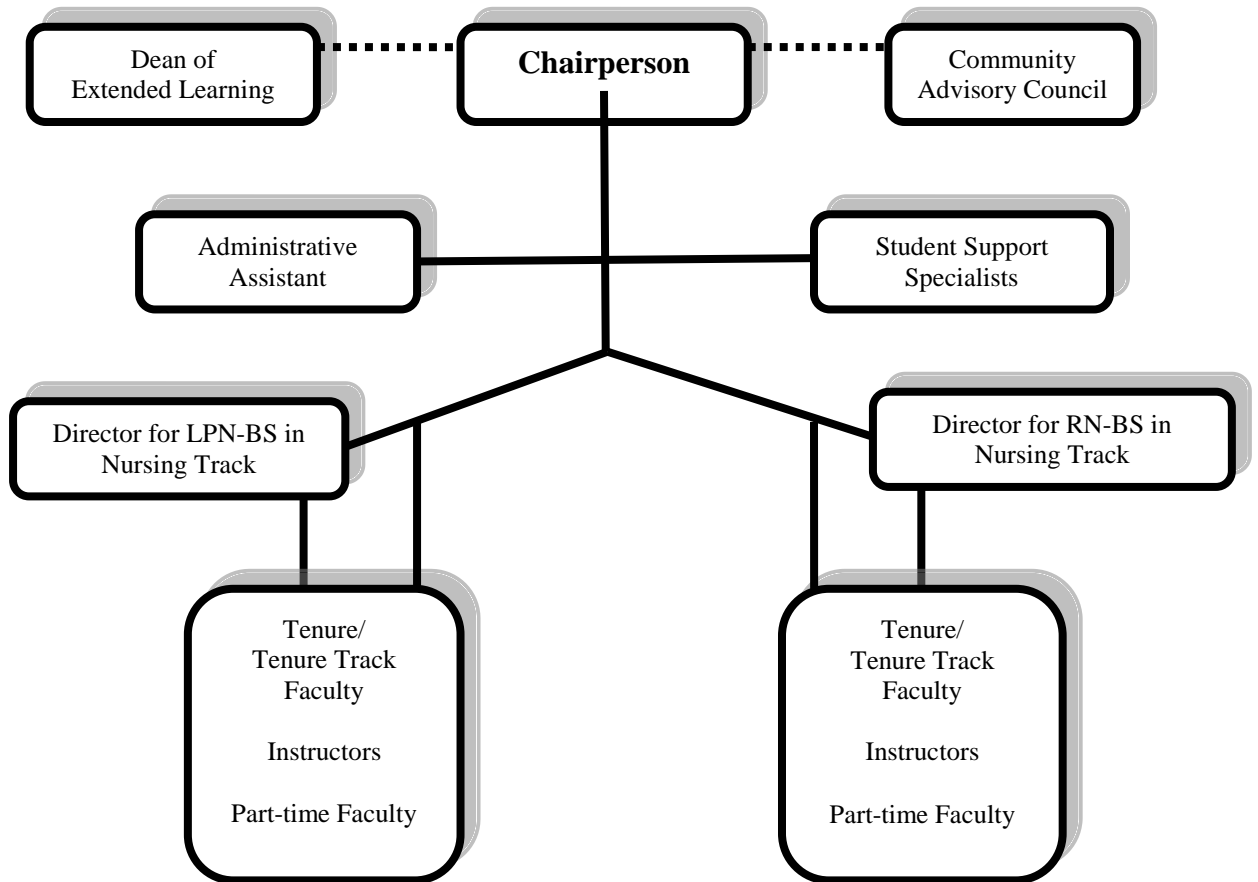
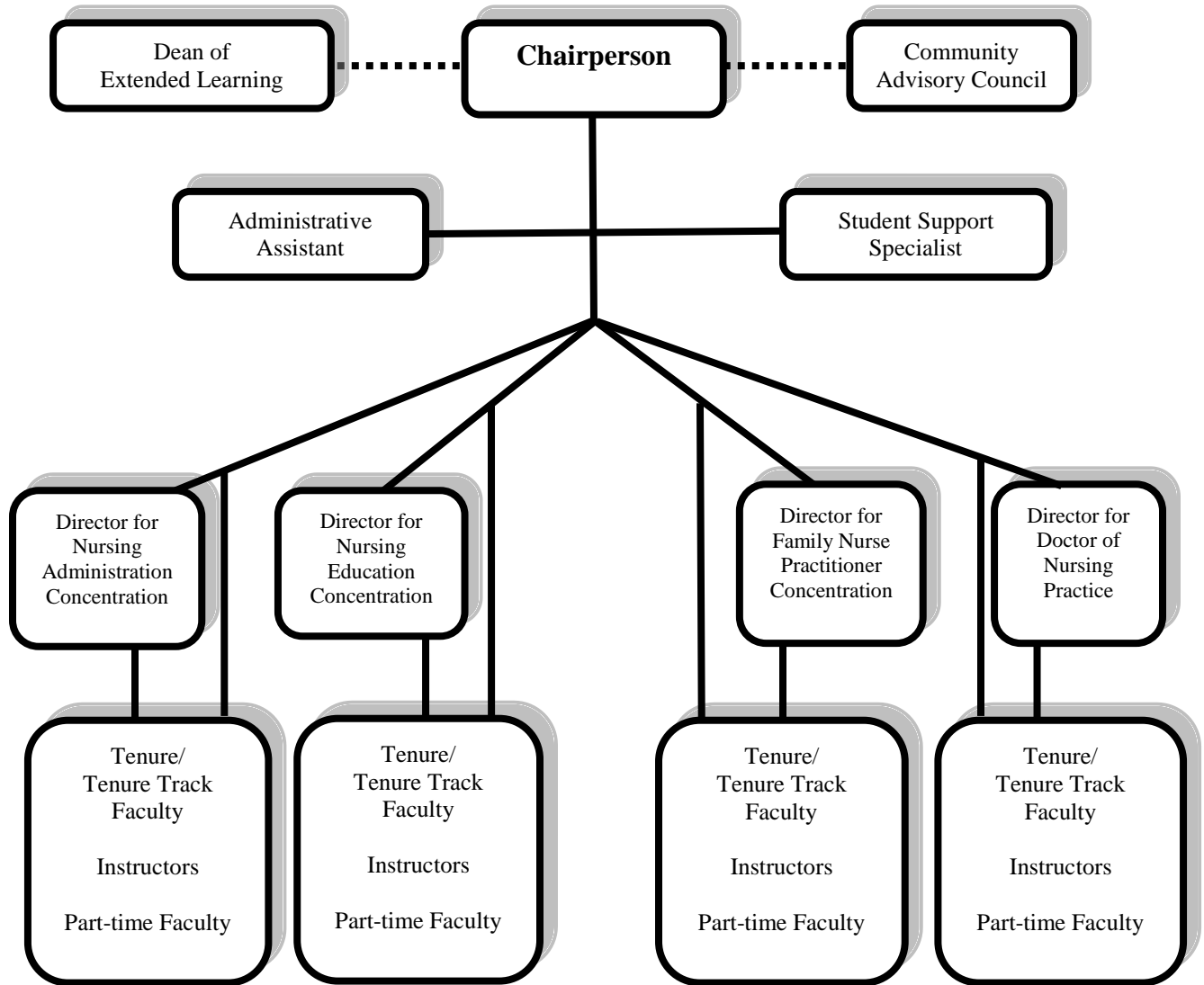


Figure 1.2.4 *Department of Advanced Practice Nursing Organizational Chart*



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. Thirty-four (34) faculty members, who have been elected from among the colleges of the University, are voting members. Five administrators and five students also hold speaking seats. The College of Nursing, Health, and Human Services is apportioned Senate seats according to a representation formula located at <http://www.indstate.edu/adminaff/docs/245%20Constitution%20of%20the%20Faculty%20of%20ISU.pdf#245.3> . In addition, faculty have opportunity for appointment, by the Executive Committee of the Senate, to various standing committees. Students are represented in University Senate by the President of the Student Government Association, three (3) students elected by the Student Government Association Senate, and the President of the Graduate Student Association. Table 1.2.1 demonstrates nursing faculty participation on Senate and Standing University committees and Table 1.2.2 lists nursing faculty appointed to University Appointed Committees.

Table 1.2.1 *Nursing Faculty Participation on Senate and Standing University Committees*

Senate/Standing Committee	Faculty/Administrator	Term of Service
Administrative Affairs		
Arts Endowment	Esther Acree	2009-2010
Curriculum and Academic Affairs		
Faculty Affairs		
Faculty Economic Benefits	Susan Eley	2008-2009
Faculty Senate	Patrice Jones Julie Fine Lea Hall	2008-2009 2008-2010 2010-2011
Faculty Senate Executive Committee	Julie Fine	2008-2010
Graduate Council	Betsy Frank	2008-2009
Student Affairs	Patrice Jones	2008-2009
University Research	Betsy Frank	2010-2011

Table 1.2.2 *Nursing Faculty Participation on University Appointed Committees*

Appointed University Committee	Faculty/Administrator	Term of Service
Assessment Council		
Foundational Studies		
Post-Graduation Assessment	Marcia Miller	2011
Strategic Planning	Marcia Miller	2010-present
University Leaves Oversight	Julie Fine	2008-2011

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 College at the University level. The most current list of faculty membership on University Committees can be found online at

<http://www.indstate.edu/facsenate/senatecommittee.htm>.

Currently, the Executive Director for Nursing also serves as the Associate Dean for Academics; the role includes curriculum proposals and academic program assessments.

Table 1.2.3 indicates committee activities for this role.

Table 1.2.3 *Executive Director Committee Participation*

Committee	Ex-officio Speaking Seat	Voting Member
Indiana Deans and Directors		X
Indiana Education Sub-Committee ISBN		X
University Curriculum and Academic Affairs	X	
University Graduate Council	X	
University Foundational Studies	X	
University Associate Dean's Council		X
College Leadership Team		X
College Deans Meeting		X
College Assessment Council	X	
College Curriculum and Academic Affairs Committee	X	
Nursing Executive Council		X

The Executive Director also serves on Search Committees, such as the one for the Assistant Director for Curriculum, Instruction, Research, and Technology (Fall 2009), and the Dean for Extended Studies (Spring 2010).

The authority of the Faculty Council to participate in the governance of the College shall be within the limitations of the statutes and by-laws of the faculty of Indiana State University. Administrators, faculty, professional staff members, and students have opportunities to participate in governance activities within the College and are actively involved. Department by-laws delineate membership on committees within the 3 departments of nursing and detail functions of these committees. By-laws specific to each department are found at the following locations:

Department of Baccalaureate Nursing: <http://www.indstate.edu/bacc-nursing/pdfs/bacc-by-laws.pdf>

Department of Baccalaureate Nursing Completion: <http://www.indstate.edu/bacc-comp-nsg/pdfs/bnc-by-laws.pdf>

Department of Advanced Practice Nursing: <http://www.indstate.edu/apn/pdfs/apn-by-laws.pdf>

Table 1.2.4 lists nursing faculty members on College of Nursing, Health, and Human Services committees; and Table 1.2.5 lists nursing faculty members of Nursing Department committees.

Table 1.2.4 *Nursing Faculty Participation on College of Nursing, Health, and Human Services (CNHHS) Committees*

CNHHS Committee	Faculty Member (Nursing Department)	Term on Committee
Assessment Council	Cha-Nam Shin (BN) Marcee Everly (BN) Tennyson Mgutshini (BNC) Andreas Kummerow (BNC) Cherie Howk (APN) Susan Eley (APN) Lea Hall (APN)	2010-2011 2010-2011 2010-2011 2010-2011 2010-2011 2010-2011 2010-2011
Curriculum and Academic Affairs	Catherine Gosse (BN) Tennyson Mgutshini (BNC) Lucy White (APN)	2008-2009, 2010-2013 2010-2011 2010-2013
Diversity Committee	Cha-Nam Shin (BN) Tennyson Mgutshini (BNC) Susan Eley (APN)	2010-2011 2010-2011 2010-2011
Executive Committee	Marilyn Sample (BN) Veda Gregory (BNC) Cherie Howk (APN) Lea Hall (APN)	2009-2012 2009-2012 2009-2010 2010-2012
Faculty Affairs	Patti Jones (BN) Esther Acree (BNC) Betsy Frank (BNC) Julie Fine (APN)	2008-2013 2011-2012 2008-2011 2008-2013
Student Affairs	Marcee Everly (BN) Melody McKinney (BNC) Tennyson Mgutshini (BNC) Lea Hall (APN) Debra Mallory (APN)	2008-2013 2008-2010 2011-2012 2008-2010 2010-2012

Table 1.2.5 *Nursing Faculty Participation on Nursing Department Committees*

Nursing Department Committee	Faculty Member (Nursing Department)	Term on Committee
Assessment Council	Tenure/tenure track faculty representatives and Instructors from all Nursing Departments	2008-2011
Curriculum and Academic Affairs	Tenure/tenure track faculty and Instructors from all Nursing Departments	2008-2011
Library Liaison	Lisa Bozarth (BN) Betsy Frank (BNC) Deb Vincent (APN)	2010-2013 2008-2011 2010-2013
Student Scholarship Awards	Marcee Everly (BN) Veda Gregory (BNC) Lea Hall (APN)	2009-2011 2009-2011 2009-2011

Faculty are elected to standing committees within the College by department. A membership list for College governance committees can be found at

<http://www.indstate.edu/nhhs/organization/governance.htm>.

Students may self-select their membership on nursing education unit committees. In the past, several students volunteered for committee membership when solicited through their respective nursing courses; however, participation in governance declined as the academic year progressed. Incompatibility of meeting times with students' class/clinical schedules and the rigors of course requirements have been cited as reasons for this decline. Several mechanisms for recruitment have been proposed and tried with similar results. Another issue to be addressed is the increasing number of distance education students. There are plans to post agenda and minutes of committee meetings on the website in order to generate interest from the distance education students as well as on-campus students. Committee meetings might also be broadcast through video conferencing, such as Elluminate! in the Blackboard Learning platform. Table 1.2.6 indicates student representation on the nursing education unit governance.

Table 1.2.6 *Student Representation on Nursing Governance*

Academic Year	Committee	Number of Students
2010-2011	College of Nursing, Health, and Human Services, Student Affairs Committee	Laura Dulin (BNC) Robert Owegi (APN)
	College of Nursing, Health, and Human Services, Curriculum Committee	Jessica Balvich (BN)
	Department of Baccalaureate Nursing, Curriculum Committee	Debra Boling (BN)

CRITERION 1.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Communities of interest have input into program processes and decision making.

Members of the Advisory Committee are based on the identification of stakeholders in the nursing programs. Stakeholders include, but are not limited to, employers, alumni, students, nurses from long-term care, acute care, school systems, and community health focused organizations. A representative from the local Area Health Education Committee (AHEC) is included as a member of each Advisory Committee.

Each nursing department has an Advisory Committee that meets yearly to discuss curricula program outcomes, student enrollment, continuing education offerings, and simulation training with students and health care professionals. Advisory Committee membership reflects the Department's unique student populations and programs.

Members may be part of the meeting through video and telephone conferencing.

Members of the Advisory Committee are also asked to respond to changes related to philosophy, student learning outcomes, and policies related to admission, progression, and graduation. Nurses from staff development are also asked to serve on committees such as Department Curriculum Committees, Program Assessment Committees, Faculty and Leadership Search Committees, and Department Strategic Planning feedback sessions.

Surveys are also used to solicit input from communities of interest related to new program offerings, such as the Accelerated Second Degree Option, workforce development grant opportunities, and collaborative staff development offerings. The

most recent survey was conducted by Dr. Roseanne Fairchild in spring 2010 to determine staff development needs of rural health care professionals.

CRITERION 1.4 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.

Clinical agencies are selected with input from faculty and students. Partnership agreements exist between the College and clinical agencies and are reviewed yearly by the Contract Coordinator as part of the nursing board reports for each state used. As a contract's renewal date approaches, the Contract Coordinator contacts agency personnel responsible for contracts. Contracts are then continued or terminated. Contracts are terminated when they either expire or the agency requests termination. A list of agencies that have current contracts with the College is located at <http://www.indstate.edu/nhhs/contracts/agencylist-complete.asp>.

In the Department of Advanced Practice Nursing, contracts are completed with clinical agencies only if the clinical agency requires them. Otherwise, preceptor agreements are submitted and approved by faculty as an appropriate site.

Clinical agencies benefit the program by providing students with valuable, diverse clinical learning environments conducive to learning, thus enhancing the transition from theory to practice. The nursing programs are enhanced because of the availability of clinical learning environments in which students can practice their skills.

Students and faculty evaluate clinical learning environments each semester in which the clinical course is taught. When mean data fall below the benchmark of 3.5/5, the Department Chair, in whose department the clinical agency is used, is notified. In situations in which the agency will be used by future students, the concerns are shared with the agency to see if changes can be made to provide an adequate learning environment. In cases where changes cannot be made in a timely manner, the clinical agency will not be used. A list of agencies that receive less than the benchmark is communicated to the Contract Coordinator so that future student placements are not initiated.

In the Department of Advanced Practice Nursing, all clinical learning sites are evaluated by students and faculty; however, the evaluation tool does not have a scale. If a clinical site is deemed inappropriate by faculty or student, the director of the concentration is notified and the site is removed as a viable placement.

Indiana State University has a partnership with The College Network (TCN) for students in the Department of Baccalaureate Nursing Completion. TCN provides the general education component as well as four Indiana State University nursing courses through study guides that allow students to test for credit. Testing products include the College-Level Examination Program (CLEP), Dantes Standardized Subject Tests (DSST), and Excelsior College. The number of students in the Baccalaureate Nursing Completion program has increased through recruitment at local, regional, and national levels.

Indiana State University is a member of the Indiana College Network (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 1500 courses per year. ICN is located at <http://www.icn.org/>.

CRITERION 1.5 (Baccalaureate Nursing, Baccalaureate Completion Nursing): The nursing education unit is administered by a doctorally prepared nurse.

There are three decentralized nursing units that are all led by a doctorally prepared nurse. The Executive Director for Nursing is Dr. Marcia Ann Miller. She has held this appointment since November 1, 2008. Dr. Miller graduated from Ball State University with a B.S.N in 1974. In 1976, she completed a master's degree in counseling psychology with a focus in family therapy. She received her master's in nursing from St. Xavier College in Chicago as a Psychiatric Clinical Nurse Specialist in 1990. She completed her Ph.D. in Higher Education Administration and Leadership at Indiana State University in 2004.

Prior to her appointment as the Executive Director for Nursing in November, 2008, she served as the Coordinator for Distance Education for undergraduate nursing from 2005 until 2007. She was promoted to Assistant Dean for Nursing and served in this role from 2007 to 2008, and was Interim Dean for the College of Graduate Studies from July 1, 2008 until August 15, 2008.

The Executive Director serves as the leader for the nursing units in fostering a shared vision, working for the realization of the strategic plans, orchestrating faculty

development, influencing academic policies, and serving as the liaison with external institutions and regulatory agencies. The Executive Director is responsible for nurturing a climate that supports diversity, risk-taking, and change. Operational nursing administration is shared between the Executive Director for Nursing and the Department Chairpersons. The Executive Director has responsibility for budgetary issues that impact all nursing departments, including simulation, Learning Resource Center, continuing education, Contract Coordinator, and the Testing Coordinator. Resources include the publications account, state appropriations to nursing, and limited foundation funds. The Executive Director reports to the Dean of the College.

Dr. Miller currently holds a dual position as Executive Director for Nursing and Associate Dean for Academics for the College of Nursing, Health, and Human Resources. As Associate Dean she is responsible for coordination of curriculum and academic program assessment for the College.

CRITERION 1.5 (Advanced Practice Nursing): The nursing education unit is administered by a doctorally prepared nurse who has authority and responsibility over the unit and advocates for equity between the unit and other institutional units.

The Executive Director has authority and responsibility to ensure that policies of the nursing units are upheld including curriculum, program assessment, students' admission, progression, graduation, and dismissal. The Executive Director serves as an advocate for nursing and reports to the Dean of the College regarding external accreditations, budgets, personnel, and student issues. The Department of Advanced Practice Nursing is led by

an academic chairperson who has leadership over the department regarding budget, personnel, promotions, and student issues.

CRITERION 1.6 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The nursing administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.

The Departments of Baccalaureate Nursing and Baccalaureate Nursing Completion each have a professional nurse without a terminal degree as the Chairperson. Administration is working toward filling these positions with Chairs who have the terminal degree in nursing. New Chairs have been appointed and will be in their positions by July 1.

The Chairs have a dual reporting role to the Executive Director of Nursing for matters related to nursing and to the Dean of the College for college and University matters. Each Chairperson is responsible for the day-to-day operations of the department including strategic planning, department policies, budget preparation, orientation of new faculty, evaluating faculty, selection of new students, resolving student issues, processing curriculum changes, evaluating program outcomes, and supporting scholarship and grant writing. The chairpersons have a half-time teaching load of six (6) contact hours.

As part of succession planning, the two departments are in the process of placing Directors for the program and tracks. The Department of Baccalaureate Nursing will have two directors including a Director for the traditional campus track and the accelerated second degree track. The Department of Baccalaureate Nursing Completion

will have two directors including the Director of the LVN/LPN to BS track and the Director of the RN to BS track.

Resources are determined by state appropriations, Clinical Education and Faculty Fees, and, for the online programs, a portion of the distance education fee. The nursing programs are expected to cover the cost for some of the Instructors and adjunct part-time nursing faculty. Resources are adequate for the traditional campus program due to a \$300 Clinical Education and Faculty Fee, marginal for the undergraduate completion tracks due to increased enrollment, and strong for the graduate concentrations due to the graduate Program Fee of \$500 per clinical and scholarly project course.

CRITERION 1.6: (Advanced Practice Nursing) Nursing program coordinators and lead faculty for program tracks are academically qualified, meet national guideline criteria, and have authority and responsibility over the program / track.

The Advanced Practice Nursing Department (APN) Chair has doctoral preparation and is board certificated as a Family Nurse Practitioner (FNP). Each program concentration director also has doctoral preparation. Each concentration director is the leader in the development of curriculum, in advising of students, and in the evaluation process. Directors for each concentration develop and monitor the assessment plan in place for each concentration.

CRITERION 1.7 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity among the units of the governing organization.

Capital expense items are determined by the Executive Director with input from the Chairs and faculty. Fees for consumable supplies are determined by the Executive Director and the Director of the Learning Resource Center with input from faculty and Chairs.

Department Chairpersons, in consultation with the Executive Director of Nursing, project enrollment patterns, and plan for faculty needs. Course coordinators collaborate with the Chairperson to determine the type and level of faculty needs. Chairs also determine the allocation of travel money for faculty in their department.

CRITERION 1.8 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.

CRITERION 1.7 (Advanced Practice Nursing): Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.

Policies of the Nursing Departments are congruent with policies of Indiana State University. Table 1.8.1 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 these policies in Indiana State University. Policies are reviewed during new faculty orientation. The Indiana State

University Handbook contains all faculty policies and is located at

<http://www.indstate.edu/adminaff/policyindex.htm>.

Table 1.8.1 *University Policies Regarding Faculty and Staff*

Policy	Indiana State University Handbook (2008)
Non-discrimination	http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.1 p. 3
Faculty Appointment	http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.1 p. 1
Academic Rank	http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.1 p. 5
Grievance Procedures	http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.8 p. 10
Promotion and Tenure	http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.1 p. 5-10
Salary	http://www.indstate.edu/adminaff/docs/505%20Compensation.pdf#505.1 p. 1
Benefits	http://www.indstate.edu/adminaff/docs/510%20Staff%20Benefits.pdf#510.1 p. 1
Duties and Responsibilities	http://www.indstate.edu/adminaff/docs/310%20Faculty%20Duties%20and%20Responsibilities.pdf#310.1 p. 1-9
Teaching Load	http://www.indstate.edu/adminaff/docs/310%20Faculty%20Duties%20and%20Responsibilities.pdf#310.1 p. 1
Release Time	http://www.indstate.edu/adminaff/docs/335%20Sabbatical%20Leaves.pdf#335.1 p. 1-5
Teaching and Advising	http://www.indstate.edu/adminaff/docs/310%20Faculty%20Duties%20and%20Responsibilities.pdf#310.1 p. 1-9

Workload guidelines used by the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing are consistent with University policy in that the normal teaching load is 24 semester credit hours over an academic year.

Any teaching load greater than 13 hours per semester is considered an overload.

Teaching assignments will not exceed 16 credit hours per semester. The calculation of clinical teaching load is discussed in Standard 2, Criterion 2.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion), Criterion 2.4 (Advanced Practice Nursing).

University faculty duties and responsibilities with regard to teaching load is located at: <http://www.indstate.edu/adminaff/docs/310%20Faculty%20Duties%20and%20Responsibilities.pdf#310.1>).

The College Faculty Workload Policy applies to tenure/tenure-track faculty and instructors in the Nursing Departments. The faculty support the mission of the University and the College of Nursing, Health, and Human Services that defines the main activities of faculty as teaching, scholarly activities, and service. Curriculum development, supervision of undergraduate and graduate student research, assistance in academic administration, research, publication and other academic commitments that contribute to the overall enrichment of the faculty members, students, and University community are recognized. Professional responsibilities may also include committee service, continuing education, and other service to the University and to the profession of nursing.

Based on University guidelines, the normal teaching load is 24 semester credit hours over an academic year. Any teaching load greater than 13 hours per semester is considered an overload. Teaching assignments will not exceed 16-credit hours per semester. For didactic courses or the theory component of a clinical nursing course, one credit hour is equal to one contact hour (regardless of delivery method). The workload for faculty teaching in the nursing departments is decided in a collaborative process with the Department Chair. Faculty workload is discussed in Standard 2, Criterion 2.4; all faculty meet workload policy guidelines. The Faculty Workload Policy is located at

<http://www.indstate.edu/nursing/pdfs/handbook-personnel-docs/faculty-workload-nursing.pdf>.

CRITERION 1.9 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Records reflect that program complaints and grievances receive due process and include evidence of resolution.

CRITERION 1.8 (Advanced Practice Nursing): Records reflect that program complaints and grievances receive due process and include evidence of resolution.

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 College of Nursing, Health, and Human Services. In providing a climate that is open to feedback from the public, students, parents, faculty and staff, there are two mechanisms for resolving complaints: informal investigations and resolutions or formal grievance procedures. As role models of conflict management, communication with parties directly involved is encouraged first.

Comments, compliments, concerns, and complaints about the nursing program are submitted through the Opportunity for Improvement form located at http://indstate.qualtrics.com/SE/?SID=SV_1TE9z7kMhB8g7c0&SVID=Prod. Students submit information about the issue, have input as to a satisfactory resolution, and have an opportunity to be informed of the resolution of the matter. Students may also submit information anonymously. Students also complete exit surveys and Qualtrix surveys and evaluations for courses and programs that allow them to make comments. Forms are reviewed by the Technology Coordinator who submits a report to the appropriate

Department Chair, Director, or Administrator and the Associate Dean of Student Services. Privacy rights are respected and protected at all levels of reporting.

Comments, compliments, concerns, and complaints about students, faculty, and nursing programs have also been sent directly to the President of the University, the Dean, the Executive Director for Nursing, and/or Department Chairs. These have been processed and resolved in a similar fashion.

Since fall 2008, there have been 42 complaints from students or members of the community filed through the Opportunity for Improvement form. These complaints include faculty-student relationship issues, problems with registration schedules and advising, testing issues, and requests for admission and summer courses in the nursing programs. All complaints were forwarded to the appropriate Department Chair for review and action. A copy of the complaints is sent to the Executive Director for review as well.

Another type of student complaint relates to grades. The University Grade Appeal Policy is located at <http://www.indstate.edu/nhhs/student-services/handbook-student.htm>.

During the 2010-2011 academic year, there were no grade appeals in the Department of Baccalaureate Nursing. In the same time period, there were 2 grade appeals in the Department of Baccalaureate Nursing Completion. There have been 2 grade appeals filed; both from the Department of Baccalaureate Nursing Completion. Both of these appeals were denied and the grades were upheld. The Department of Advanced Practice

Nursing reports that there was 1 grade appeal filed during the academic year 2010-2011. In this appeal, the student's grade was changed due to vague information in the syllabus. The syllabus was rewritten using clearer language.

Published university policies indicate procedures for the formal grievance procedures available to faculty and staff. The Indiana State University Handbook (2010) identifies the policy for faculty and staff and is located at <http://www.indstate.edu/adminaff/docs/246%20Bylaws%20to%20the%20Faculty%20Constitution.pdf#246.14>, beginning on page 13.

When a Student has a grievance or believes that his/her rights are being impinged upon, there is a course of action recommended. In a situation where a student of the College of Nursing, Health, and Human Services (CNHHS) believes he or she has been discriminated against based on the basis of sex, sexual orientation, race, religion, age, disability, or national origin, the student is advised to contact the University Affirmative Action Office at <http://www.indstate.edu/aa/>.

In other situations, student grievances could arise from, but are not limited to, Faculty/Staff to student interactions in class, conferences, student club/association events, office hours, field trips, and community engagement/service learning projects. If the grievance involves distance students, meetings can be scheduled via web-based meetings or teleconferences. In these situations, the informal process and/or formal hearing process are available to students (Student Grievance Procedures, Section II, Steps 1-8)

located at <http://www.indstate.edu/nhhs/pdfs/governance/governance-docs/student-docs/student-grievance-procedures.pdf>.

Results of data collection during the period, September 2008 through May 2010, indicate that there have been no informal student or faculty grievances filed. For the same time period, there were three (3) formal student grievances filed, all of which have been resolved. There have been no formal faculty grievances filed.

The University has a policy for grade appeals; the grade appeals process/policy is located on the nursing website at <http://www.indstate.edu/bacc-nursing/student-handbook/student-handbook.htm>.

CRITERION 1.10 (Baccalaureate Nursing Completion): Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

CRITERION 1.9 (Advanced Practice Nursing): Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

The mission and philosophy of faculty in the Departments of Baccalaureate Nursing Completion and Advanced Practice Nursing include the belief that distance education is one modality in which the mission of the University can be addressed. In a supportive, distance learning environment that includes mutual respect, diversity, experiential learning, and community engagement, students can achieve a solid nursing education.

Table 1.10.1 shows congruency between the mission of the University and

mission/philosophy of the Departments of Baccalaureate Nursing Completion and Advanced Practice Nursing.

Table 1.10.1 *Comparison of University Mission Statement, Nursing Department Mission Statements, and Philosophy of the Nursing Faculty*

Indiana State University	Nursing Departments	Philosophy of the Nursing Faculty
<p>Mission statement: Indiana State University combines a tradition of strong undergraduate and graduate education with a focus on community and public service. We integrate teaching, research, and creative activity in an engaging, challenging, and supportive learning environment to prepare productive citizens for Indiana and the world.</p>	<p>Mission statements:</p> <p>Baccalaureate Nursing Completion: The mission of the Department of Baccalaureate Completion Nursing for LPN/LVNs and RNs is to develop competent, caring professionals and productive citizens. This mission is accomplished through distance teaching modalities, experiential learning at the local level, research, and community and public service.</p> <p>Advanced Practice Nursing: The mission of the Department of Advanced Practice Nursing is to develop competent, caring nursing professionals and productive citizens practicing in advanced nursing roles in clinical care, education, and leadership. This mission is accomplished through a variety of teaching modalities, experiential learning, research and/or the application of research findings, and community and public service.</p>	<p>Program outcomes are achieved through student-centered, active learning in an environment that values mutual respect, diversity, experiential learning, community engagement, and a wide range of teaching methods. Nursing education is accomplished through on-campus classes, clinical experiences, and distance modalities (§ 3).</p>

CRITERION 2.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.

Documentation confirms:

2.1.1 That a minimum of 25% of the full-time faculty hold earned doctorates.

The Department of Baccalaureate Nursing is comprised of four (4) full-time, tenured faculty, four (4) full-time, tenure-track faculty, and seven (7) instructors. The Department of Baccalaureate Nursing Completion is comprised of three (3) full-time, tenured faculty, one (1) full-time, tenure-track faculty, and three (3) instructors. Instructors are full-time, temporary faculty members with one-year renewable appointments who are not in a tenure-track position.

All faculty have preparation at the master's degree level in nursing or hold a doctorate in nursing or a related field. As of spring 2011, 100% of the faculty in both departments have a master's degree with a major in nursing or hold a doctorate in nursing or a related field. Four (4) full-time faculty members (26.7%) in the Department of Baccalaureate Nursing have earned doctorates. One (1) full-time, tenured faculty member, one (1) full-time tenure-track faculty member, and one (1) instructor (43%) in the Department of Baccalaureate Nursing Completion have earned doctorates.

Periodically, faculty who have not completed a master's degree have been employed as part-time, temporary faculty in clinical agencies; this is in compliance with the Indiana State Board of Nursing.

2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.

All full-time faculty members meet the required educational standards. In the past, temporary faculty who held baccalaureate degrees with a minimum of three (3) years of experience were hired during the time that they were enrolled in and completing graduate degrees in nursing. Temporary faculty members teach under the supervision of master's- and doctorally-prepared educators. Previously, the decision to hire faculty who had not completed the graduate degree resulted from having two (2) tenure-track faculty resignations. University administration granted permission to hire part-time baccalaureate-prepared faculty for a temporary period until a decision was made regarding the retention of faculty lines. At that same time as these temporary hirings, deep budgetary cuts at the state level forced the Department of Baccalaureate Nursing to forgo a national search for a tenure/tenure-track position.

Socioeconomic factors combined with the national nursing faculty shortage, creates a situation where it is difficult to attract qualified faculty to this area. Several excellent graduate students, with a dedication to both Indiana State University and to the nurse educator role, have been hired. They have been mentored through their graduate education in teacher education practica and as novice clinical instructors under the close supervision of experienced master's and doctorally-prepared faculty. These graduate students have been hired in instructor positions when the advanced degree was completed.

CRITERION 2.1 (Advanced Practice Nursing): Faculty are academically and experientially qualified; the majority of faculty hold earned doctorates.

In the Department of Advanced Practice Nursing, faculty are academically and experientially qualified. There are five (5) full-time, tenured faculty and four (4) full-time faculty members. One (1) faculty member has completed doctoral course work and is conducting research for the dissertation. Eighty-nine percent (89%) of faculty in the Department of Advanced Practice Nursing have earned doctorates.

Tables 2.1.1 through 2.1.3 indicate the academic and experiential qualifications of full-time faculty and instructor by department. Tables 2.1.4 through 2.1.6 indicate the academic and experiential qualifications of part-time faculty by department.

Table 2.1.1 *Faculty Profiles, Department of Baccalaureate Nursing Spring 2011*

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Plascak, Gloria	August 1975	Associate Professor	Indiana State University (BS)	Indiana University (MSN)		Nursing of Children/Teacher Education	Nursing Care of Children	Chair, Department of Baccalaureate Nursing
Barnhart, Deb	August 1977	Associate Professor	Indiana State University (BS)	Indiana University (MSN)		Mental Health	Fundamentals Mental Health Nursing Introduction to Nursing	
Bauer, Renee	August 2010	Instructor	Indiana Wesleyan University (BS)	Indiana State University (MS)		Teacher Education	Mental Health Nursing	
Bozarth, Lisa	August, 2009	Assistant Professor	St. Joseph University (BS-Health Administration)	Case Western Reserve (MSN)	Case Western Reserve (DNP)	Certified Nurse Midwife (CNM)	Assessment of Adults Maternity Nursing	
Crawford, Donna	August 1986-1988, 2000-2007 August 2007	Instructor	Ball State University (BS)	Indiana University (MSN)		Medical-Surgical Critical Care	Medical-Surgical Nursing Fundamentals Pharmacology	

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Everly, Marcee	August 2007	Assistant Professor	University of Nevada, Las Vegas (BS)	University of Colorado (MSN)	University of Colorado (ND)	Certified Nurse Midwife Women's Health Maternity Care	Maternity Nursing	
Gosse, Sue	August 2007	Assistant Professor	Bob Jones University (BS)	Ball State University (MS)	The Ohio State University (PhD)	Medical-Surgical Critical Care Operating Room	Medical-Surgical	
Jones, Patrice	August 1975	Assistant Professor	Indiana State University (BS)	Indiana University (MSN)		Adult Health Nursing/Teacher Education	Fundamentals Medical-Surgical Nursing Pharmacology	
Holbert, Amy	January 2011	Instructor	Indiana State University (BS)	Indiana State University (MS)		Medical-Surgical Nursing Emergency Medicine/trauma Certified Family Nurse Practitioner	Medical-Surgical Nursing Community Health Nursing	
Owegi, Robert	January 2011	Instructor	Indiana State University (BS)	Indiana State University (MS)		Nursing Education Medical-Surgical Nursing	Medical-Surgical Nursing Community Health Nursing	

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Pirtle, Kathy	January 2011	Instructor	Indiana University (BSN)	Walden University (MSN)		Medical Surgical Nursing Obstetrics Education	Medical Surgical Nursing Maternity Nursing	
Sample, Marilyn	August 1978	Assistant Professor	University of Tennessee (BSN)	University of Southern Mississippi (MSN)		Psychiatric/Mental Health Nursing	Mental Health Nursing	
Shin, Cha-Nam	August 2008	Assistant Professor	Korea National Open University (BSN)	Han Yang University (MPA Nursing)	Saint Louis University (PhD)	Medical-Surgical Nursing Critical Care Nursing	Fundamentals Mental Health Nursing Issues and Trends	
Thomas, Constance	January 2004	Instructor	Indiana State University (BS)	University of Southern Indiana		Medical-Surgical Nursing	Introduction to Nursing Fundamentals Medical-Surgical Nursing	
Walters, Linda	August 2009	Instructor	Indiana State University (BS)	Indiana State University (MS)		Nursing of Children Maternal-Newborn Nursing Medical-Surgical Nursing	Nursing Care of Children	

Table 2.1.2 *Faculty Profiles, Department of Baccalaureate Nursing Completion, Spring 2011*

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Acree, Esther	August 1970	Associate Professor	Indiana State University (BS)	Indiana University (MSN) Indiana University (Specialist Degree)		Nursing of Children/Teacher Education Primary Health Care	Assessment Family Nurse Practitioner	Chair, Department of Baccalaureate Nursing Completion
Frank, Betsy	August 1994	Professor	Ohio State University (BSN)	University of Washington (MN)	University of Utah (PhD)	Educational Administration Medical-Surgical Nursing	Undergraduate Research RN-BSN Transition Nursing Leadership Healthcare-Finance Administrative Practices in Healthcare	
Gregory, Veda	January 1980	Associate Professor	Indiana University (BSN)	Indiana University (MSN) Indiana University (Specialist Degree)		Nursing of Children/Teacher Education Primary Health Care	Community Health Nursing	

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
				Indiana University (Post Graduate)		Community Health Nursing		
Huun, Kathleen	August 2010	Instructor	Old Dominion University (BSN) University of California at Davis (BS)	University of California at Davis (MS) Indiana State University (MS)	Florida State University (PhD)	Critical Care Medical-Surgical Nursing	Critical Care Medical-Surgical Nursing	
Kummerow, Andreas	August 2009	Instructor	Indiana State University (BS)	Indiana State University (MS)		Psychiatric Nursing/Teacher Education	Mental Health Nursing	
Mgutshini, Tennyson	August 2008	Associate Professor	Southbank University UK (BSN) Brunel University UK (BSN-Hons)	Brunel University UK (MS) Brunel University UK (Post-graduate Diploma)	Brunel University UK (PhD)	Community Mental Health Nursing Specialist Practitioner-Community Health Nursing Education Psychiatric Recidivism	Leadership and Management Evidence-based Practice Psychiatric Nursing	
Reed, Rhonda	August 1991	Instructor	Indiana University (BSN)	University of Evansville (MSN)		Medical-Surgical Nursing Adult Health Nursing/Teacher Education	Fundamentals Medical-Surgical Information Technology	

Table 2.1.3 *Faculty Profiles, Department of Advanced Practice Nursing, Spring 2011*

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Howk, Cherie	August 1991- August 2002 July 2007	Assistant Professor	Indiana State University (BS)	Indiana State University (MS)	Rush University (PhD)	Family Nurse Practitioner Psychiatric Nursing Primary Health Care	Assessment Research Mental Health Nursing Medical Management	Chair, Department of Advanced Practice Nursing
Eley, Susan	July 2005	Associate Professor	Southern Illinois University (BSN)	University of Illinois (MSN)	Indiana State University (PhD)	Family Practice Urgent Care	Evidence-based Practice Assessment and Evaluation Foundations of Family Health Medical Management	Director, DNP
Fairchild, Roseanne	June 2009	Assistant Professor	Butler University (BSN)	Indiana University (MSN)	Indiana University (DNS)	Emergency Care Oncology Nursing	Informatics Education Administration	Director, Education and Administration
Fine, Julia	August 1995	Associate Professor	University of Texas-Austin (BA) University of	Indiana University (MSN) Ball State	University of Texas-Austin (PhD)	Family Nurse Practitioner Perinatology	FNP Role FNP Foundations of Family Health	

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
			Texas-Austin (BSN)	University (FNP)			Care	
Hall, Lea	July 2001- July 2007 July 2007	Instructor Assistant Professor	University of Alabama Birmingham (BSN)	Indiana State University (MS)	Indiana State University (PhD)	Family Nurse Practitioner Diabetes Nursing	Assessment Medical Management	Director, Family Nurse Practitioner
Mallory, Debra	July 1992	Professor	Texas Christian University (BSN)	Indiana University (MSN)	Texas Woman's University (PhD)	Women's Health Care Nurse Practitioner	Education Maternity /Gynecologic Nursing Research Health Assessment	
Miller, Marcia	August 1999	Associate Professor	Ball State University (BSN)	Ball State University (MA) St. Xavier University (MSN)	Indiana State University (PhD)	Psychiatric Clinical Nurse Specialist Psychology Mental Health Nursing Leadership	Education Mental Health Nursing Issues/Trends Fundamentals Leadership	Executive Director for Nursing Associate Dean for Academics
Vincent,	August	Assistant	Indiana State	Indiana State		Family Nurse	Medical-	

Faculty Name	Date Initial Appt.	Rank	BS Institution	MS Institution	Doctoral Institution	Clinical Expertise	Academic (T)	Other (O)
Debra	2010	Professor	University (BS)	University (MS)		Practitioner Medical-Surgical Nursing	Surgical Nursing	
White, Lucy	August 2003	Associate Professor	Indiana State University (BS)	Indiana State University (MS)	Indiana University (PhD)	Medical Surgical Nursing Emergency Care	Pharmacology Medical Surgical Nursing	Director, Education

CRITERION 2.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Faculty (full- and part-time) credentials meet governing organization and state requirements.

All full-time and part-time nursing faculty members meet requirements for employment delineated by Indiana State University. Currently, all but one member of the nursing faculty are licensed in the State of Indiana; licenses are renewed biannually through the Health Professions Bureaus. Current licensure is verified by each Department Chair on the Indiana State Board of Nursing website at <http://www.in.gov/hpb/>.

The unlicensed faculty member will be taking the NCLEX-RN examination in summer of 2011. This member did not complete his education in the U.S.; he holds a terminal degree in nursing.

CRITERION 2.2 (Advanced Practice Nursing): Faculty credentials reflect appropriate advanced practice certifications and expertise in their area(s) of teaching.

Faculty teaching in the Department of Advanced Practice Nursing maintain expertise in their area(s) of teaching. Eighty-nine percent of faculty members in the Department of Advanced Practice Nursing are doctorally-prepared and experientially qualified.

Appropriate advanced practice certifications are held by faculty teaching in the Family Nurse Practitioner concentration. Faculty members who do not currently hold advanced practice certifications in their area of teaching are strongly encouraged to fulfill this credential. Full-time practicing master's-prepared Family Nurse Practitioners (FNPs)

from the community are utilized as part-time, temporary clinical faculty in order to provide students with the most up-to-date clinical information and feedback.

Tables 2.2.1 through 2.2.3 indicate faculty certifications, faculty practice, and activities to maintain expertise in all departments.

Table 2.2.1 *Faculty Activities to Maintain Expertise-Department of Baccalaureate Nursing*

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
Plascak, Gloria Chair	Certified Pediatric Nurse (CPN), Pediatric Nursing Certification Board	Pediatric Clinics, Sycamore Nursing Center Terre Haute, IN	2010	Progressive Pediatrics: Care of Children and Their Health Care Providers, Clarian Health Care Partners	6.83
			2010	Seizure Precautions for Pediatric Bedside Nurses, Anthony J. Jannetti, Inc.	1.2
			2010	Bereavement Debriefing Sessions: An Intervention to Support Health Care Professionals in Managing Their Grief after the Death of a Patient, Anthony J. Jannetti, Inc.	1.3
Barnhart, Deb			2011	Putting the Pieces Together: Integrating Mental Health in the Acute Care Environment, Hamilton Center	4.0
			2011	Advising at Risk Students, Indiana State University, College of Education	
			2011	The Basics of Advising, Indiana State University	
Bauer, Renee			2011	Putting the Pieces Together : Integrating Mental Health in the Acute Care Environment	5.0
			2011	Wound Care in Long Term Care Focus on Infectious Complications/Surgical Site Infections: Where are we today?	1.5
			2010	ELAF 687 – Higher Education in the United States	3 credit hours
Bozarth, Lisa	Nurse Practitioner, NAACOG Certification Certified Nurse-Midwife, ACNM Certification Council		2011	Continuing Research Education Credit Program	12.0
			2010	Fundamentals of Chronic Wound Care, National Healing Corporation	1.0
			2010	Integrating Care of Older Adults in Student Clinical Rotations in Hospitals: Resources for Clinical Faculty, AACN Webinar	1.0

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
			2010	Cultivating and Using Clinical Preceptors, AACN Webinar	1.0
Crawford, Donna	Certified Nurse Educator (CNE)		2010	Pharmacology Update for Advanced Practice Nurses University of Southern Indiana	5.75
			2010	Statistical Inference EPSY 712	3 credit hours
			2010	Advanced Instructional Design CIMT 720	3 credit hours
Everly, Marcee	Certified Nurse Midwife (CNM)	Healthnet Indianapolis, IN	2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2010	Continuing Education, American College of Nurse Midwives 55 th Annual Meeting	8.0
			2010	First Annual Nursing Education Retreat, Indiana State University, CNHHS	3.25
Gosse, Sue			2010	Health Information Technology: Meaningful Uses in Nursing Education, National League for Nursing	12.0
			2011	Scholarly Writing Retreat, National League for Nursing	17.0
			2011	The Global Impact of Nursing Research, Indiana State University, Sigma Theta Tau, Lambda Sigma Chapter	5.0
Holbert, Amy	Nurse Practitioner (NP), American Academy of Nurse Practitioners, (AANP) Advanced Cardiac Life Support (ACLS)	FNP-Emergency Medicine	2011	Coalition of Advanced Practice Nurses of Indiana Annual Spring Conference	7.0
			2010	National Conference for Nurse Practitioners	17.0
			2010	Family Nurse Practitioner Certification Review Course and Clinical Update	17.25

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
	Emergency Nurse Pediatric Course (ENPC) Trauma Nurse Core Course (TNCC)				
Jones, Patrice			2010	First Annual Nursing Education Retreat, Indiana State University, CNHHS	3.25 CEUs
			2010	Celebrating Nursing: Recipes for Success, Indiana State University, CNHHS	2.75 CEUs
			2010	Nursing Documentation: Legally-Proven Strategies to Keep You Out of the Courtroom, PESI Healthcare	6.3 CEUs
Owegi, Robert			2011	The Global Impact of Nursing Research Conference, Sigma Theta Tau International (Lambda Sigma Chapter), Indiana State University	5.0
			2010	First Annual Education Retreat, Indiana State University, CNHHS	3.25 CEUs
			2010	N698R Culminating Project	3 credit hours
Pirtle, Kathleen			2011	BIO633 Advanced Pathophysiology, Indiana State University	3 credits
			2010	Review of AACN's Essentials of Master's Education in Nursing (5 th draft)	1.0
			2010	NURS6510 Capstone Practicum in Nursing, Walden University	3 credits

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
Sample, Marilyn			2011	Recruiting a Racially Diverse, Culturally Competent Faculty, Magna Online Seminars	1.5
			2010	First Annual Nursing Education Retreat, Indiana State University, CNHHS	3.25 CEUs
			2010	Using Wikis and Blogs to Augment Instruction, AACN Webinar	1.0
Shin, Cha-Nam			2011	Integrating Evidence-based Practice in Your Curriculum, AACN Webinar	1.0
			2011	Developing Multiple Choice Test Items, AACN Webinar	1.0
			2011	Nursing Homes as Clinical Placement Sites: Nursing Home Preparation/Readiness as a Clinical Site, AACN Webinar	1.0
Thomas, Constance			2011	Integrating Evidence-based Practice in Your Curriculum, AACN Webinar	1.0
			2011	Wound Care in Long Term Care: Focus on Infectious Complications/Surgical Site Infections, Vermont State Nurses Association	1.5 CEUs
			2010	ED8119 Advanced Practicum in Research Design, Capella University	4 quarter credits
Walters, Linda		Pediatric Clinics, Sycamore Nursing Center Terre Haute, IN	2011	Curriculum, Media Technology 620 – Instructional Design	3 credit hours
			2011	Curriculum, Media Technology 611 – Assessment and Measurements	3 credit hours
			2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0

Table 2.2.2 *Faculty Activities to Maintain Expertise-Department of Baccalaureate Nursing Completion*

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
Acree, Esther Chair	Family Nurse Practitioner (FNP), American Nurses Credentialing Center	Johnson-Nichols Community Health Clinic, Spencer, IN Sycamore Nursing Center Landsbaum Center Terre Haute, IN	2011	Pharmacology Update 2011	8.0
			2011	Protecting our Youth: Mandatory Reporting Laws for Minors-Indiana	1.0
			2011	AAP Issues Guidelines on Limiting Sun Exposure in Children	0.5
Frank, Betsy			2010	NLN Faculty Summit	14.0
			2010	Summer Institute on Evidence-Based Practice	22.91
			2010	Cultural and Social Literacy	
Gregory, Veda	Family Nurse Practitioner (FNP), American Nurses Credentialing Center	Clinton Medical Clinic, Clinton, IN	2011	Coalition of Advanced Practice Nurses of Indiana	7.0
			2010	2010 National Conference for Nurse Practitioners	19.0
			2010	9 th Annual Conference on Cultural Competency	6.25
Huun, Kathleen		Genstler Eye Center, Surgery Center, Albany OR	2011	Integrating Evidenced-based practice in Your Curriculum	1.0
			2011	Interpreting Test and Item Analysis Data	1.0
			2010	Cultivating and Using Clinical Preceptors	1.0
Kummerow, Andreas			2011	Grant Writing, Indiana State University	
			2010	23 Practical Strategies to help New Faculty Thrive	1.0
			2010	Cultivating and Using Clinical Preceptors, AACN Webinar	1.0
Mgutshini, Tennyson			2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2011	Integrating Evidence-based Practice in Your Curriculum,	1.0

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
				AACN Webinar	
			2011	Developing Multiple Choice Test Items, AACN Webinar	1.0
Reed, Rhonda	Certified Rehabilitation Registered Nurse (CRRN)	PRN Staff Nurse, Medical Rehabilitation Union Hospital Terre Haute, IN	2011	Creating Real Student Relationships in the Online Environment, CIRT-OIT, Indiana State University, Terre Haute, IN	
			2011	Teaching Students How to Teach Patients, AACN Webinar	1.0
			2011	Mentoring I: What you need to know. What you need to do, AACN Webinar	1.0

Table 2.2.3 *Faculty Activities to Maintain Expertise-Department of Advanced Practice Nursing*

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
Howk, Cherie, Chair	Family Nurse Practitioner (FNP), American Nurses Credentialing Center	Center for Occupational Health, Union Hospital, Terre Haute, IN	2011	AACN Three Part Webinar: DNP Education	8.0
			2011	National Nurse Practitioner Faculty Conference	14.0
			2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
Eley, Susan	Family Nurse Practitioner (FNP), American Nurses Credentialing Center	Veterans Administration one day per week	2011	National Nurse Practitioner Faculty Conference	14.0
		Internal Medicine weekend call PRN	2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2010	Primary Medicine Conference	16.0
Fairchild, Roseanne	Teaching in Nursing	Course service learning projects in 6 regional rural	2011	Health Information Technology Scholars Faculty Empowerment Program and Workshops (6) + On-site	32.0

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
	Certificate, Indiana University	hospitals and the Richard Luger Center for Rural Health		Continuing Education Conference in HIT/Nursing Informatics, HITS Project Management Webinars/Teleconferences	
			2011	Integrating Evidence-Based Practice into Your Curriculum, American Association of Colleges of Nursing	3.25
			2011	Annual Conference in Rural Health: Update on Critical Access Hospitals, Indiana Rural Health Association, Plainfield, IN	17.5
Fine, Julie	FNP Board Certification, American Academy of Nurse Practitioners (AANP)	Johnson-Nichols Community Health Clinic, Spencer, IN Minute Clinic Diagnostics of Indiana, LLC, Indianapolis, IN Union Hospital Maternal Health Clinic, Terre Haute, IN Saint Ann Medical Clinic, Terre Haute, IN	2011	Pharmacology Update	8.0
			2011	Global Health and Humanitarian Conference	Not CME
			2011	Putting the Pieces Together: Integrating Mental Health in the Acute Care Environment	3.25
			2011	Coalition of Advanced Practice Nurses of Indiana	7.0
Hall, Lea	Family Nurse Practitioner (FNP), American Nurses Credentialing Center	HPW Center for Diabetes	2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2010	NLN Summit, National League for Nursing	12.0
			2009	AANP Conference	18.0
Mallory, Deb	Family Nurse Practitioner (FNP), American Nurses	Naval Operational Support Center Augusta, GA	2010	Primary Medicine Conference, Chicago, IL	16.0
			2010	Primary Medicine Conference, Indianapolis, IN	8.0

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
	Credentialing Center NCC Certification, Women's Health NP		2009	Drexel University DNP Conference	10.0
Miller, Marcia			2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2011	General Education and Assessment, Association of American Colleges and Universities, Chicago, IL	15
			2011	AACN 2001 Doctoral Education Conference, Innovations and Challenges in Doctoral Nursing Education, American Association of Colleges of Nursing (AACN), San Diego, CA	9.5
Vincent, Debra	Family Nurse Practitioner (FNP), American Nurses Credentialing Center Advanced Cardiac Life Support (ACLS) BLS Healthcare Providers Certification Advanced Burn Life Support (ABLS)	Office of Dr. Greg Brock, Terre Haute, IN	2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0
			2011	Pharmacology Update for Advanced Practice Clinicians Contemporary Forums, Washington, DC	45.0
			2011	CAPELLA 9923 Dissertation Research	4 quarter hours

Name	Certification	Faculty Practice	Activities to Maintain Expertise		
			Year	Program/Activity	Contact Hours
White, Lucy	FNP Board Certification, American Academy of Nurse Practitioners (AANP) Acute Cardiac Life Support (ACLS) Basic Life Support (BLS) Instructor TB Instructor	St. Ann Medical Clinic, Terre Haute, IN	2011	Pharmacology Update, 2011	8.0
			2011	Putting the Pieces Together : Integrating Mental Health in the Acute Care Environment	3.25
			2011	Global Impact of Nursing Research, Lambda Sigma, Sigma Theta Tau, Int., Indiana State University	5.0

**CRITERION 2.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion):
 Credentials of practice laboratory personnel are commensurate with their level of responsibilities.**

Currently, there are 2 practice laboratory personnel for the Nursing programs, the Director of the Learning Resources Center (LRC) and Coordinator for Simulation Activities for Nursing. There is also a Technology Coordinator who works with the Director of LRC. Their credentials are commensurate with their level of responsibilities as shown in Table 2.3.1.

Table 2.3.1 *Credentials of Practice Laboratory Personnel*

Faculty Name	Date Initial Appt.	BS Institution	MS Institution	Doctoral Institution	Responsibilities
Bartnick, Deborah	October 2009	Purdue University (BSN)	Indiana University (MSN)		Coordinator, Simulation Activities for Nursing; coordinates with faculty the use of simulation activities in the nursing programs
Myers, Peg	August 1975	Indiana State University (BS)	Indiana State University (MS)		Director, Learning Resources Center; coordinates the use of Learning Resources Center
Reed, Rhonda	August 1991	Indiana University (BSN)	University of Evansville (MSN)		Technology Coordinator; provides technical assistance to faculty, staff, and students; assists in the operations of LRC

The Coordinator for Simulation Activities for Nursing is responsible for selecting, maintaining and updating simulation equipment, developing policies and procedures for simulation equipment, scheduling/coordinating simulation activities with nursing faculty, and monitors, documents, and reports simulation. The Coordinator also develops simulation teaching documents and participates in simulation activities.

The Director of the Learning Resources Center (LRC) is responsible for coordinating the use of the LRC facilities and for selection and purchase, storage, retrieval, utilization, security, and maintenance of practice lab supplies and equipment. The Director also manages fiscal affairs of the LRC and coordinates responsibilities for the Nursing building and for Emergency Preparedness. The Director does not provide direct supervision of students during the practice experiences.

The Technology Coordinator's primary responsibility is the technology component of the LRC including providing technology assistance to faculty, staff, and students; maintaining multimedia and electronic equipment; and managing reservations for the nursing building. In addition, the Technology Coordinator assists with the day-to-day operation of the LRC.

CRITERION 2.4 (Baccalaureate, Baccalaureate Nursing Completion): The number and utilization of faculty (full- and part-time) ensure that program outcomes are achieved.

CRITERION 2.3 (Advanced Practice Nursing): The number and utilization of faculty (full- and part-time) ensure that program outcomes are achieved.

Student ratios for clinical groups in undergraduate clinical courses are established by the Indiana State Board of Nursing as a maximum of 10 students (Indiana Nursing Licensure Stats and Rules: 848IAC1-2-19 clinical experiences for all programs, section 19d).

Faculty numbers are sufficient to ensure that undergraduate nursing program outcomes are achieved and to maintain faculty-student ratios as established. Lower student ratios

are established when safety, low patient census, and patient acuity justify a reduced number (a collegial decision between faculty and chairperson).

Preceptors in the Department of Baccalaureate Nursing Completion work closely with the full-time faculty coordinator of the clinical course to supervise students on a one-to-one basis. The Indiana Administrative Code requires that preceptors hold a current registered nurse license and have 3 years of experience as a registered nurse. A minimum of a baccalaureate degree in nursing is preferred.

Workload guidelines used by the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing are consistent with University policy in that the normal teaching load is 24 semester credit hours over an academic year. Any teaching load greater than 13 hours per semester is considered an overload. Teaching assignments will not exceed 16 credit hours per semester.

For non-clinical courses or the theory component of a clinical nursing course, one credit hour is equal to one contact hour, whether online or face-to-face, for the purpose of workload calculation. The workload for faculty teaching in the Nursing Departments is decided in a collaborative process with the department chair.

In an effort to support faculty engagement in scholarly and service pursuits and to promote balance in the distribution of clinical teaching responsibilities for tenure/tenure-track faculty, the following guidelines have been established:

- Direct clinical supervision in on-campus labs and in an agency will generate one contact hour of faculty workload for each clinical contact hour with students.
- Indirect clinical supervision of campus students and online/distance students through preceptors will generate:
 - 0.5 contact hours for faculty workload calculation per each contact hour with students where the required student clinical contact for the course is 3-12 hours/week.
 - 0.25 contact hours for faculty workload calculation per each contact hour with students where the required student clinical contact for the course is greater than 12 hours/week.
- The maximum clinical teaching load for undergraduate tenure/tenure-track faculty is 12 clinical contact hours per week.
- Clinical groups taught in the college laboratory may have faculty/student ratios greater than 10 students per group, commensurate with the teaching-learning environment of the course; these numbers are negotiated between faculty and chairperson.
- Undergraduate clinical groups requiring indirect supervision (including arranging for preceptors, evaluation of students' papers, occasional site visits, consultation with clinical agency personnel, students, and preceptors) will consist of no more than 10 students at any time.
- In extraordinary situations, an extra clinical group (overload) may be assigned to the faculty member and will be compensated at an established rate per semester hour or the faculty member may be assigned a compensatory load the following

semester. It is the faculty member's prerogative to accept a clinical overload in lieu of other assignments.

Students in the Department of Advanced Practice Nursing (APN) have clinical preceptors who are experienced master's-prepared, advanced practice nurses, including Nurse Managers and Nurse Administrators for the Nursing Administration concentration, Nurse Educators for the Nursing Education concentration, and Family Nurse Practitioners (FNPs), Nurse Practitioners (NPs), Physician's Assistants (PAs), Medical Doctors (MDs), or Indiana State University nursing faculty (who travel to the student's location) for the Family Nurse Practitioner concentration. All clinical preceptors function based on a 1:1 ratio. Clinical faculty teaching didactic courses online have a 10:1 ratio in multiple sections.

CRITERION 2.5 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Faculty (full- and part-time) performance reflects scholarship and evidence-based practice.

CRITERION 2.4 (Advanced Practice Nursing): Faculty (full- and part-time) performance reflects scholarship and evidence-based practice.

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 Boyer's* (1990) four types of scholarship 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 annual faculty evaluation performance review process addresses scholarship activities and evidence-based practice. Tables 2.5.1 through 2.5.3 indicate that faculty members have evidence of scholarship activities through the four realms of Boyer's model.

*Boyer, E. (1990). *Scholarship reconsidered: Priorities for the professoriate*. Princeton, NJ: The Carnegie Foundation for the Advancement of Teaching.

Table 2.5.1 *Scholarship in Nursing-Department of Baccalaureate Nursing*

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Plascak, Gloria, Chair:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Plascak, G. L., & Pickrell, K. (2011). Nursing care of the child and family (2nd ed.) Manuscript in progress</p> <p>Plascak, G. L., & Pickrell, K. (2006). Nursing care of the child and family. Indianapolis, IN: The College Network.</p> <p>Grants: Acree, E., & Plascak, G. Lead Screening offered by the Sycamore Nursing Center As community outreach for nursing students in Nursing 328: Nursing care of the childrearing family. At target areas known for High Lead Levels. Focus Indiana, for 2011-2013 \$8,000 Funded.</p>			X	X	X
<p><u>Barnhart, Deb:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Advisor for McNair Scholar presentation: The educational profiles of African-Americans admitted as undergraduate non-designated nursing students during 2005-2009, 2009-2010.</p>		X	X		
<p><u>Bauer, Renee:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Eley, S., DeYoung, J., Bracy, C., & Bauer, R. (2011) Controlling blood glucose levels in hospital patients: Current recommendations. Manuscript submitted for publication to and provisionally accepted by <i>American Nurse Today</i>.</p> <p>Presentations: Bauer, R., Brady, C., DeYoung, J., & Eley, S. (2011). Weight-based correction insulin: Time to lose the sliding scale. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Sample, M., & Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p>		X	X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Bozarth, Lisa:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p> <p>Presentations: Poster presentation: <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p>		X	X		
<p><u>Crawford, Donna:</u> Publications: Crawford, D. (In press). To half or to hold: Is tablet-splitting safe practice? <i>Nursing Made Incredibly Easy</i>.</p> <p>Contributor, NLNAC Self-Study Report. (2011).</p>			X	X	
<p><u>Everly, Marcee:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Sample, M., & Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p> <p>Everly, M. (2011). Decision making in nurse midwives: Exploring factors. Manuscript submitted for publication to and provisionally accepted by <i>Journal of Midwifery & Women's Health</i>.</p> <p>Everly, M. (2011). Application of knowledge in the classroom: Evaluation of a change in pedagogy. Manuscript submitted for publication to and in review by <i>Journal of Nursing Education</i>.</p> <p>Presentations: Everly, M. (2011). Decision making of nurse midwives. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Everly, M. (2010). Decision making of nurse midwives: Does location have an effect? <i>American College of Nurse-Midwives, 55th Annual Meeting and Exposition</i>, Washington, DC.</p>		X	X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Gosse, Sue:</u> Publications: Gosse, S. (2010). Self-regulation and glycemic control in women with type 2 diabetes. <i>Western Journal of Nursing Research</i>. Submitted – Decision Pending.</p> <p>Presentations: Poster presentation: Gosse, S., Kidd-Marshall, R., & Vincent, D. (2010). Using Simulation to Build Nursing Skills Across Three Medical-Surgical Courses, National League for Nursing, Research Day.</p> <p>Peterson, Y., Hutchins, M., & Gosse, S. (2011, April) <i>Interprofessional Collaboration: Health Sciences and Nursing</i>. Presented at Joint Indiana National Public Health Week Conference, Indianapolis, IN.</p>		X		X	
<p><u>Jones, Patti:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Principle investigator at the Indiana State University site for the ANA/NIOSH national research project entitled, “Effectiveness of an Evidence-Based Curriculum Module in Nursing Schools Targeting Safe Patient Handling and Movement,” 2005-2006.</p> <p>Presentations: Effectiveness of an evidence-based curriculum module in nursing schools targeting safe patient handling and movement, Sigma Theta Tau International, Lambda Sigma Chapter, 2008.</p>		X	X		X
<p><u>Owegi, Robert:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Owegi, R. O., & Johnson, M. T. (2006). Localized pulsed magnetic fields for tendinitis therapy. <i>Biomedical Sciences Instrumentation</i>, 42, 428-433.</p> <p>Presentations. Effects of social networks on patient healthcare behaviors. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Localized pulsed magnetic fields for tendinitis therapy. Presented at 43rd Annual Rocky Mountain Bioengineering Symposium. 2006.</p>		X	X		X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Pirtle, Kathleen:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Presentations: Culminating project completed in partial fulfillment of credits for Masters of Science degree, Indiana State University, 2010.</p>		X	X		
<p><u>Sample, Marilyn:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Sample, M., & Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p> <p>Presentations: Sample, M., Stevens, R., Turner, J., Hilton, D., & John, M. (March, 2011). Putting the pieces together: Integrating mental health in the acute care environment. Terre Haute, IN</p> <p>Drug policy development, College of Nursing, Health, and Human Services.</p>			X X		X X
<p><u>Shin, Cha-Nam:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Shin, C.-N., & Lach, H. (2011). Nutritional issues of Korean Americans. <i>Clinical Nursing Research</i>, 20(2), 162-180.</p> <p>Presentations: Shin, C.-N. (2011). <i>Acculturation matters on health across the aging continuum</i>. Presented at the 35th Midwest Nursing Research Society (MNRS) Annual Conference, Columbus, OH.</p> <p>Shin, C.-N., & Fine, J. (2011). Cultural sensitivity of nursing faculty in clinical courses. Poster presentation, Midwest Nursing Research Society (MNRS) Annual Research Conference, Columbus, OH.</p> <p>Grants: Charlotte Zietlow Endowment Women Faculty Research Grant, Indiana State University, 2011</p> <p>Charlotte Zietlow Endowment Women Faculty Research Grant, Indiana State University, 2010</p>		X X X X	X		

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
Program Assessment Grant, Indiana State University, 2010.			X		
<p><u>Thomas, Constance:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Comprehensive literature review preparation for doctoral dissertation. Capella University.</p> <p>Drug policy development, College of Nursing, Health, and Human Services.</p>			X		X X
<p><u>Walters, Linda:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Walters, L., & Eley, S. (2010). Robotic-assisted surgery and the need for standardized pathways and clinical guidelines. <i>Association of PeriOperative Registered Nurses (AORN)</i>, 93, 455-463.</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Sample, M., & Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p> <p><u>Presentations:</u> Walters, L., & Crawford, D. (2011). Poster: Larry stopped breathing: A simulation. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Interprofessional Education: Preparation for 21st century health care. Interdisciplinary Committee to plan, implement, and evaluate interprofessional learning day.</p>		X	X X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>Frank, B. (2010). [Review of the Book: <i>Evaluation and testing in nursing education</i> (3rd ed.)]. <i>Nursing Education Perspectives</i>, 31, 400.</p> <p>Frank, B. (2010). Critical thinking and decision making. In D. Huber (Ed.). <i>Leadership and nursing care management</i> (4th ed.).</p> <p>Presentations: Frank, B. The Scholarship of integration: Advancing the science of nursing education. Speech given in conjunction with Advancement of the Science of Nursing Education award from MNRS Nursing Education Research Section 2010</p> <p>Frank, B., Ratanaamorn, P., Chaiphibalsarisdi, P., & Lucke, L. (2010). Faculty exchanges: Bring the global to the local. Presented at GANES, Washington, DC.</p> <p>Grants: Use of Macromedia Breeze for Defense of Master's Culminating Projects and Theses, IRTS. \$5000, Co-investigators Lea Hall and Susan Eley, 2005-2007.</p>			X	X	X
<p><u>Gregory, Veda:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Grants: Gregory, V., Kummerow, A. M., & Krockenberger, L. Meeting community health needs of the homeless and at risk populations with a focus on women's health. Terre Haute, IN, Focus Indiana Grant, 2010-present \$7500 funded.</p>			X	X	
<p><u>Huun, Kathleen:</u> Publications: Huun, K., & Weddle, M. (2011). Impact of charter school curriculum on academic performance in diverse middle school children: Enrolled versus waitlisted students. Data Collection in progress.</p> <p>Huun, K. (December, 2010). www.Twas.com. <i>American Nurse Today</i> (online edition).</p> <p>Huun, K., Decourville, C., & Howk, C. (2010). Depression and glycemic control in Korean Americans diagnosed with type II diabetes: A correlational study. Research in progress per IRB extension approval, Indiana State University.</p> <p>Huun, K. (2008). The ubiquitous necktie: Style, symbolism, and signification through transitions in masculinity. In A. Reilly & S. Cosbey (Eds.), <i>Men's Fashion Reader</i>. (33-51). New York, NY: Fairchild.</p>		X		X	X

Boyer Model Applied to Nursing	Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Kummerow, Andreas:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Virtual artifacts to enhance student learning. Article preparation for future publication. L. White, R. Reed, and A. Kummerow.</p> <p>Miller, M. A., Kummerow, A. M., & Mgutshini, T. (submitted August 2009, accepted March 2010). Othello syndrome: Preventing a tragedy when treating patients with delusional disorders. <i>The Journal of Psychosocial Nursing and Mental Health Services</i>. 48(8), 20-27.</p> <p>Kummerow, A. (2009). A preliminary comparison of student outcomes between distance education modalities and traditional campus-based education (Master's thesis). Available from ProQuest Dissertations and Theses database. (UMI No. 1471965)</p> <p>Kummerow, A. M., Miller, M. A., Reed, R. J. (Submitted February 2011; in review process). A comparison of student learning outcomes between LVN/LPN to baccalaureate and traditional baccalaureate campus-based nursing students. <i>American Journal of Distance Education</i>.</p> <p>Grants/Awards: Gregory, V., Kummerow, A. M., & Krockenberger, L. Meeting community health needs of the homeless and at risk populations with a focus on women's health. Terre Haute, IN, Focus Indiana Grant, 2010-present \$7500 funded.</p>		X	X		
<p><u>Mgutshini, Tennvson:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Miller, A., Kummerow, A., & Mgutshini, T. (2010). Othello Syndrome: Preventing a tragedy when treating patients with delusional disorders <i>The Journal of Psychosocial Nursing and Mental Health Services</i>. 48(8), 20-27.</p> <p>Mgutshini, T. (2010). Mental health and vulnerability in working with vulnerable adults. In M. Greenfields & A. Fanning (Eds.). London, UK: The Open University Publishing House. (Book release due December 2010).</p> <p>Presentations: Mgutshini, T. (2011). The Relapse Identification Model – Applying R.I.M. to a psychiatric relapse cohort: A case-by-case review of 7000 revolving door patients in Brazil. Presentation to the Sao Paulo University Medical School Expert panel on Hospitalization behavior.</p> <p>Grants: Mgutshini, T. & Shin, C. (2010). Application to Institute of Educational Sciences. Exploring factors associated with course completion, attrition and NCLEX-RN pass rates in nursing programs at ISU (Started – August 2009). (Pending \$200 000 grant application. Decision due April 2011).</p>		X	X		X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
	Mgutshini, T., & Frank, P. (2009). Evaluating a change in teaching methods in an online evidence-based practice course: Insights into students' perspectives about the achievement of course-specific learning outcomes. Co-Principal Investigator. Indiana State University.		X		
<p>Reed, Rhonda: Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Virtual artifacts to enhance student learning. Article preparation for future publication. L. White, R. Reed, and A. Kummerow.</p> <p>Reed, R. J. (2010-2011). [Review of the Book: <i>Medical terminology: A student-centered approach</i> (2nd ed.), by M.A. Moio & E.W. Moio]. Clifton Park, NY: Delmar Cengage Learning. 2008.</p> <p>Reed R. J. (2010-2011). [Review of the Book: <i>Grammar & writing skills for the health professional</i> (2nd ed), by D. Villemare & L. Villemare]. Clifton Park, NY: Delmar Cengage Learning. 2005.</p> <p>Kummerow, A. M., Miller, M. A., Reed, R. J. (Submitted February 2011; in review process). A comparison of student learning outcomes between LVN/LPN to baccalaureate and traditional baccalaureate campus-based nursing students. <i>American Journal of Distance Education</i>.</p> <p>Presentations: Reed, R. J. (2010) Using the computer to present an Assessment form, Care Plan and Documentation form for N204. Presented February 15 and 17, for N204 students, Indiana State University, Terre Haute, IN</p> <p>Reed, R. J. (2009) How to use Sharepoint sites – What can you do? Presented for Nursing Administration team, Indiana State University, Terre Haute, IN</p> <p>Reed, R. J. (2009) Using the Computer to present an Assessment form, Care Plan and Documentation form for N204. Presented September 21 and 23, for N204 students, Indiana State University, Terre Haute, IN</p>		X	X		X

Table 2.5.3 *Scholarship in Nursing-Department of Advanced Practice Nursing*

Boyer Model Applied to Nursing	Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>Howk, Cherie, Chair:</p> <p>Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Howk, C., & Bennett, M. (2010). Immune function and health outcomes in women with depression. <i>BioPsychoSocial Medicine</i>, 4, 3.</p> <p>Howk, C. (2008). [Review of the Book: Disaster nursing and emergency preparedness, by T. Veenema]. New York, NY: Springer Publishing.</p> <p>Review of books for Doody Publishing (4 books).</p> <p>Howk, C. (2009). [Review of the Book: Disaster preparedness and management, by Beach].</p> <p>Presentations: Bioterrorism and primary care providers' response. Indiana Rural Health Association, Indianapolis, IN. 2009).</p> <p>Research: Member, Interdisciplinary Research Team: Tai Chi and Diabetes, with Dr. R. Gieb and members of the Life Science Department and School of Medicine faculty, Indiana University.</p> <p>Howk, C. (Principal Investigator). Project Title: [226328-1], Exploration of the effect of Tai Chi practice on blood cytokine gene expression.</p> <p>Grants: HRSA Grant: Advanced Education Nursing Professional Nurse Traineeship Program (2009-2011). Awarded 2010-2011. Awaiting award notification 2011.</p> <p>Advising/mentoring graduate students.</p> <p>Mentor, Doctoral student scholarly project.</p>			X		
<p>Eley, Susan:</p> <p>Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Eley, S., DeYoung, J., Bracy, C., & Bauer, R. (2011) Controlling blood glucose levels in hospital patients: Current recommendations. Manuscript</p>		X	X		

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>submitted for publication to and provisionally accepted by <i>American Nurse Today</i>.</p> <p>Walters, L., & Eley, S. (2010). The effects of Da Vinci robotic surgeries vs. traditional open surgeries on patient outcomes: A review of the literature. <i>Association of PeriOperative Registered Nurses (AORN)</i>, 93(4), 455-463.</p> <p>Presentations: Bauer, R., Brady, C., DeYoung, J., & Eley, S. (2011). Weight-based correction insulin: Time to lose the sliding scale. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Frank, B., Eley, S., & Hall, L. Use of Macromedia Breeze for defense of Master's culminating projects and theses, AACN, Albuquerque, NM, 2007. (Also to be presented at NLN Faculty Summit in Phoenix and Sigma ThetaTau in Baltimore, MD).</p> <p>Grants: Use of Macromedia Breeze for Defense of Master's Culminating Projects and Theses, IRTS. \$5000, Co-investigators Lea Hall and Susan Eley, 2005-2007.</p> <p>Advising/mentoring graduate students.</p>			X	X	X
<p><u>Fairchild, Roseanne:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Fairchild, R., Everly, M., Bozarth, L., Walters, L., Bauer, R., Laws, S., Anderson, L., Bartnick, D., Sample, M., & Acree, E. (2011). Initiating a community-based academy-practice partnership: A comprehensive mixed methods study of nurses' continuing education needs in a rural setting. <i>Journal of Continuing Education in Nursing</i> (In-work with editor).</p> <p>Fairchild, R. M. (2010). West Central Indiana-Area Health Education Center (WCI-AHEC) Needs Assessment Study Report on the Continuing Education Needs of Nursing Staff in the WCI-AHEC Region. Terre Haute, IN, Report #102-2010, 1-58.</p> <p>Fairchild, R. Hold that tiger! Outcomes of an academy-practice pilot partnership to promote the TIGER informatics initiative in rural Indiana hospitals. <i>Journal of Nursing Education</i> (In-work with editor).</p> <p>Fairchild, R. (2010). Practical ethical theory for nurses responding to complexity in care. <i>Nursing Ethics</i>, 17(3), 353-362.</p> <p>McCarthy, R., Adedokun, C. W., & Fairchild, R. (2009). Preventing falls in the elderly long term care facilities. <i>RNJournal Online</i>, available at: http://www.rnjournal.com/journal_of_nursing/preventing_falls_in_the_elderly_long_term_care_facilities.htm</p>		X	X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>Presentations: Collaborative research opportunities in rural health. Indiana Rural Health Association, Spring Into Quality Conference, Plainfield, IN, March 4, 2010.</p> <p>HOLD THAT TIGER! Actualizing the TIGER HIT initiative via service learning. International Nursing Administration Research Conference, Denver, Colorado, October 13-16, 2011 [Submitted].</p> <p>Continuing education needs of professional nurses and nursing staff in rural healthcare facilities: From CE to IPE! Annual Conference of the Indiana Rural Health Association (IRHA), Marriott Conference Center North, Indianapolis, Indiana, June 7, 2011 [Accepted].</p> <p>NLN Health Information Technology (HIT) Scholars 2011-2012 Faculty Empowerment Program and Workshops (6) + On-site Continuing Education Conference in HIT/Nursing Informatics, March 17-19, 2011. HITS Project Management Webinars/Teleconferences through January, 2012.</p> <p>Creating a culture of excellence: Enhancing use of medication EMR in a rural Indiana hospital, Tenth Annual Conference on Nursing Education, University of Southern Indiana, October 20, 2010 (Manjeet Kaur).</p> <p>West Central Indiana-Area Health Care Education Committee (WCI-AHEC): Facilitating a formal research working group with ISU-AHEC faculty and staff to promote and support the continuing education needs of healthcare providers in Central Indiana (work ongoing).</p> <p>Grants/Awards: Zietlow Faculty Scholar Award from the Charlotte Zietlow Endowment and Indiana State University, 2010.</p>		X	X	X	X
<p><u>Fine, Julie:</u> Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Presentations: Shin, C.-N., & Fine, J. (2011). Cultural sensitivity of nursing faculty in clinical courses. Poster presentation, Midwest Nursing Research Society (MNRS) Annual Research Conference, Columbus, OH.</p> <p>Applied Nutrition Workshop, Coronary Health Improvement Project; CHIP Pilot Project; CHIP #2, CHIP #3 class series.</p> <p>Review of Modules: American Association of Nurse Practitioners Modules.</p> <p>Nurses for the Nations, Assessment of Dalit Tribal members for future outreach missions.</p>		X	X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
Mentor, Students enrolled in NURS697.			X		
<p>Hall, Lea: Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Eley, S., Sybert, J., & Hall, L. (2010). Insulin resistance in sleep apnea. <i>Advance</i>, 18, 33-34.</p> <p>Hall, L. (2010). Perceptions of faculty caring: Comparison of distance and traditional graduate nursing students. Unpublished doctoral dissertation.</p> <p>Review of books for Doody Publishing (7 books). 2006-2011.</p> <p>Presentations: Hall, L., Williams, B., Clyatt, L., & Eley, S. (2009). Hip-Hop Sex-ed: Teenage pregnancy among American adolescents. Poster presentation, Sigma Theta Tau International, 40th Biennial Convention, Poster presentation.</p> <p>Interdisciplinary Day (2010).</p> <p>Presenter, Diabetes Updates, MiniMed School, Terre Haute, IN.</p> <p>Advising/Mentoring: Advising/mentoring graduate students.</p> <p>Mentor, Evidence-based Practice student projects.</p> <p>Grants: Mini-Grant: Mobile e-learning option of MeLO: Meeting the challenge of the net generation, ISU Information Technology, funded 2007.</p>		X	X	X	X

Boyer Model Applied to Nursing	Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>Miller, Marcia: Publications: Contributor, NLNAC Self-Study Report. (2011).</p> <p>Kummerow, A. M., Miller, M. A., Reed, R. J. (Submitted February 2011; in review process). A comparison of student learning outcomes between LVN/LPN to baccalaureate and traditional baccalaureate campus-based nursing students. <i>American Journal of Distance Education</i>.</p> <p>Miller, M., Kummerow, A., & Mgutshini, T. (2010). Othello syndrome: Preventing a tragedy when dealing with delusional disorders. <i>The Journal of Psychosocial Nursing and Mental Health Services</i>. 48(8), 20-27. Selected for 4 CEUs</p> <p>Miller, M. (Ed.). (2008). <i>Psychiatric nursing</i>. Indianapolis, IN: The College Network. Book developed for Angelo State University TX.</p> <p>Presentations: Othello Syndrome: Preventing a tragedy. <i>The Global Impact of Nursing Research</i>, Sigma Theta Tau International, Lambda Sigma Chapter, Terre Haute, IN.</p> <p>Panel presenter: Stories of Assessment: Barriers and Benefits.. Assess for Success Indiana State Assessment Day Indiana State University, Terre Haute IN. 2011.</p> <p>The engaged lecture: A shift in pedagogy. Third Annual Nursing Education Retreat, Indiana State University, Terre Haute IN. 2011.</p>		X	X	X	X
<p>Debra Mallory: Publications: Carter, C., Stratton, C., & Mallory, D. (in press). Yoga as therapy for non-specific chronic low back pain. <i>AWOHN Journal</i>.</p>		X			

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p><u>Vincent, Debra:</u> Publications: Contributor, NLNAC Self-Study Report. (2011). Comprehensive literature review preparation for doctoral dissertation. Review of books for Doody Health Sciences.</p> <p>Presentations: Poster presentation: Gosse, S., Kidd-Marshall, R., & Vincent, D. (2010). Using Simulation to Build Nursing Skills Across Three Medical-Surgical Courses, National League for Nursing, Research Day.</p> <p>Grants: Charlotte Zietlow Endowment Women Faculty Research Grant, unfunded.</p> <p>Advising/Mentoring: Mentorship: J. Moore, junior colleague, in scholarship. Advising/mentoring graduate students. Progress towards Doctor of Philosophy at Capella University, completion date, March 2012.</p>		X	X	X	X
<p><u>White, Lucy:</u> Publications: Contributor, NLNAC Self-Study Report. (2011). Uncaring: Application of concept to professional socialization of nursing students and future concept development. L. White (primary); M. Sample, M. Draper, M. Bennett, and C. Burns (co-researchers). Virtual artifacts to enhance student learning. Article preparation for future publication. L. White, R. Reed, and A. Kummerow. White, L.L. (2006). Preparing for clinical: Just-in-time. <i>Nurse Educator</i> 31(2), 57-60. Reviewer for Doody Enterprises, 20 book reviews completed.</p>		X	X	X	X

Boyer Model Applied to Nursing	<i>Scholarship in nursing can be defined as those activities that systematically advance the teaching, research, and practice of nursing through rigorous inquiry that 1) is significant to the profession, 2) is creative, 3) can be documented, 4) can be replicated or elaborated, and 5) can be peer-reviewed through various methods. This definition is applied in the following standards that describe scholarship in nursing (American Association of Colleges of Nursing, 1998, p.1).</i>	Scholarship of Discovery	Scholarship of Teaching	Scholarship of Application	Scholarship of Integration
<p>Grants: Information Technology Innovations Mini-grant. (March 2, 2006). <i>Education and information access of clinical nursing students: Impact of PDAs</i>. Recipients: D. Nelson & L. White.</p> <p>Advising/Mentoring: Mentoring ISU faculty member C. Thomas in research and writing a dissertation for completion of a doctorate degree from Capella university (current and ongoing).</p> <p>Mentoring 6 students in N697 Evidence-Based Practice course to prepare a manuscript suitable for publication and to submit the manuscript in the format required by the publisher. (Spring, 2011)</p> <p>Mentored 9 students in N697 Evidence-Based Practice course to prepare a manuscript suitable for publication and to submit the manuscript in the format required by the publisher. (Fall, 2010)</p> <p>Interdisciplinary research group member, primary investigator. (current)</p>		X	X	X	X

CRITERION 2.6 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.

CRITERION 2.5 (Advanced Practice Nursing): The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.

The Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing have no non-nurse faculty. There are 5 Administrative Assistant (AA) positions in the Nursing Departments, one (1) AA for each nursing department.

There are 3 Student Support Specialist positions, one (1) for each nursing department. Student Support Specialists are academic advisers who review applications for the nursing major, ensure that students meet admission requirements, ensure that students enroll in the correct sequence with all course pre-requisites completed before progressing to the next course, ensure that students complete Foundational Studies courses, and help students request formal transcripts for awarding transfer credit. Graduation audits are also conducted by the Student Support Specialist.

One position that has recently been added in support of faculty and students is the Testing Coordinator. The Testing Coordinator is responsible for coordinating the testing program using the Assessment Technologies Institute® (ATI) package, maintaining testing schedules, reviewing student progress, coordinating the needs of students according to

the baccalaureate nursing departments' ATI policy, and reporting results to faculty and department chairs.

**CRITERION 2.7 (Baccalaureate Nursing, Baccalaureate Nursing Completion):
Faculty (full- and part-time) are oriented and mentored in their areas of
responsibilities.**

New tenure-track faculty are encouraged to participate in the University New Faculty Orientation provided each fall, a program designed specifically for faculty in tenure-track positions. Its purpose is to support faculty's integration and engagement into the ISU community and enhance their role as a teacher and researcher. They meet once a week over the course of the first semester. Faculty members who participate are given funds to support their teaching and scholarship needs as they progress toward tenure.

Within the Departments of Baccalaureate Nursing and Baccalaureate Nursing Completion, new faculty members are assigned mentors to facilitate success in the new environment. The new faculty member teaches alongside a more experienced faculty mentor. When co-teaching is not possible, the new faculty member may teach a course alone. In this arrangement, the mentor works closely with the new faculty member to ensure that course integrity is preserved.

A formal department faculty orientation has been developed to meet the needs of tenure-track faculty members and is the responsibility of the Chair from the respective department. In collaboration with other colleagues, selected topics are discussed including but not limited to, faculty appraisal, governance, mission and philosophy,

workload, curriculum, student policies, and tips for managing a course. The first department orientation since the formation of the reorganized department was offered for the 2008-2009 academic year.

One area that has been identified as needing further development is an orientation for new instructors. Instructors have been assigned course mentors, but have not had formal orientation to the department. One of the College initiatives for 2010-2011 was to form a Mentorship Task Force for all levels of College faculty and staff. The College Mentorship Program is currently being developed and will start initial implementation in fall 2011. This will include staff, adjunct faculty, instructors, and tenure/tenure track faculty.

Part-time, temporary faculty may supervise students during clinical experiences. Part-time faculty work closely with full-time faculty within the course and are oriented to their responsibilities in the clinical area.

All full-time faculty in the Department of Baccalaureate Nursing participate in academic advising of students after their first semester of teaching. An orientation for academic advisors is provided by the department at least once per year. Faculty new to advising, as well as experienced advisors, are invited to attend the sessions. The University also provides open sessions for academic advising training. Topics have included use of the Degree Audit Reporting System (DARS), advising at-risk students, advising transfer

students, learning about legal issues relative to advising, and learning to handle difficult advising conversations.

Faculty in the Department of Baccalaureate Nursing Completion participate in formal academic advising of distance undergraduate nursing students. In addition, a Student Support Specialist is also assigned to all distance undergraduate students to ensure that students enroll in the correct sequence with all course pre-requisites completed before progressing to the next course, to ensure that students complete Foundational Studies courses, and to help students request formal transcripts for awarding transfer credit.

Graduation audits are also conducted by the Student Support Specialist.

CRITERION 2.8 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Systematic assessment of faculty (full- and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.

CRITERION 2.6 (Advanced Practice Nursing): Systematic assessment of faculty (full- and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.

Full-time, tenure-track faculty, instructors, and part-time temporary faculty are evaluated at least annually based on University, College, and Department criteria. The University is currently developing a biennial faculty performance evaluation model for post-tenure review. Faculty performance guidelines focus on teaching, research and scholarly activity, and service. The timing of systematic appraisal is determined by the Office of Academic Affairs. A Calendar of Key Activities is published for each academic year with the timeline for the appraisal of faculty at each rank.

All full-time faculty, instructors, and part-time temporary faculty are evaluated by an elected department peer review committee, the respective Chair, the Executive Director for Nursing, the Dean of the College, the Provost, and the Vice President for Academic Affairs. University policies related to appointment, retention, promotion, and tenure, are located in the Indiana State University Handbook, Section 305.1 at <http://www.indstate.edu/adminaff/docs/305%20Faculty%20Appointment,%20Promotion,%20and%20Tenure%20Policies%20.pdf#305.1>. Evaluation materials include an annual report submitted by the faculty member to the respective Department Chair, student evaluations, and peer evaluations. All faculty in each department are evaluated by students within their respective courses at the conclusion of each semester. Students evaluate faculty based on course and program goals and outcomes.

CRITERION 2.9 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.

CRITERION 2.7 (Advanced Practice Nursing): Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.

Staff performance is reviewed annually in accordance with University policy located at <http://www.indstate.edu/adminaff/docs/560%20Support%20Staff%20Policies.pdf#560.2>, page 2. Chairs, Deans, the Vice President, and the President are involved in the process. Instructions for completing review forms are located at <http://www.indstate.edu/humres/EvaluationInstructions.htm>.

CRITERION 2.10 (Baccalaureate Nursing Completion): Faculty (full- and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.

CRITERION 2.8 (Advanced Practice Nursing): Faculty (full- and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.

Faculty in the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion and Advanced Practice Nursing receive orientation, ongoing development, and support for distance education courses. The Center for Instruction, Research, and Technology (CIRT) assigns an Instructional Designer to help in the development and delivery of online teaching modalities and utilization of Blackboard. CIRT offers ongoing faculty development workshops and support in the use of Blackboard, Tegrity, Lectora, and other instructional programs, as well as new technological methods and modalities for distance education courses. Faculty also have access to webinars and other workshops presented online by AACN.

Faculty support is also received from other faculty who are teaching in the online environment. Faculty are mentored by those who have taught and are currently teaching in the online environment. The Department Chair assigns faculty mentors for this purpose.

CRITERION 3.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): 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 goals and outcomes of the nursing education unit.

Student policies of the Nursing Departments are congruent with policies of Indiana State University, and are publicly accessible, non-discriminatory, and consistently applied. In addition, student policies of the Department of Advanced Practice Nursing are congruent with those of the College of Graduate and Professional Studies.

Student policies at Indiana State University and the College of Nursing, Health, and Human Services are publicly accessible and available. All University policies may be publicly accessed online from the University's home page, <http://www.indstate.edu>.

Policies of the College of Graduate and Professional Studies are applicable to students admitted to the Graduate Program in Nursing and may be viewed from <http://www.indstate.edu/sogs/Students.htm>. Student policies specific to Nursing may be viewed at <http://www.indstate.edu/nursing/students/handbook/student-handbook.htm>.

Table 3.1.1 lists policies regarding non-discrimination, selection and admission, student evaluation/grading, retention, withdrawal/dismissal, graduation requirements, grievances, complaints, appeals procedures, financial aid, transfer of credit, recruitment, health requirements, and validation of prior learning/articulation for undergraduate and graduate students.

Table 3.1.1 *Student Policies and Publication Location*

Student Policy	Publication
Non-discrimination (including ADA statements)*	Affirmative Action: http://www.indstate.edu/aao/ http://www.indstate.edu/aao/facultyhiring.htm http://www.indstate.edu/aao/equaloppstmnt.htm http://www.indstate.edu/aao/disablty-accmmpolicy.htm Student Academic Services Center: http://www.indstate.edu/sasc/programs/dss/services.htm
Selection and Admission*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=223 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read College of Nursing, Health, and Human Services-Graduate Handbook: http://www.indstate.edu/apn/handbook/student-handbook.htm College of Graduate and Professional Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#admi_scho_grad
Academic Progression*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read Sycamore Express: http://www.indstate.edu/express/ College of Nursing, Health, and Human Services- Campus BS Handbook: http://www.indstate.edu/nursing-basic/pdfs/admission-progression-graduation-requirements-traditional.pdf College of Nursing, Health, and Human Services- Distance BS Handbook: http://www.indstate.edu/bacc-comp-nsg/student-handbook/student-handbook.htm College of Nursing, Health, and Human Services-Graduate Handbook: http://catalog.indstate.edu/content.php?catoid=12&navoid=251
Student Evaluation and Grading*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read College of Graduate and Professional Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#grading Course syllabi
Retention*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read

Student Policy	Publication
	<p>College of Nursing, Health, and Human Services- Campus BS Handbook: http://www.indstate.edu/nursing-basic/pdfs/admission-progression-graduation-requirements-traditional.pdf</p> <p>College of Nursing, Health, and Human Services- Revised Campus BS Handbook: http://www.indstate.edu/nursing-basic/aprdg.htm</p> <p>College of Nursing, Health, and Human Services- Campus BS 2nd Degree Handbook: http://www.indstate.edu/nursing-2nd-degree/pdfs/admission-progression-retention-dismissal-graduation-2nd-degree-bs.pdf</p> <p>College of Nursing, Health, and Human Services- Distance BS Handbook: http://www.indstate.edu/bacc-comp-nsg/student-handbook/student-handbook.htm</p> <p>College of Nursing, Health, and Human Services-Graduate Handbook: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#rete</p> <p>College of Professional and Graduate Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#rete</p>
Withdrawal/Dismissal*	<p>2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ</p> <p>2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read</p> <p>Sycamore Express: http://www.indstate.edu/express/</p> <p>College of Nursing, Health, and Human Services- Campus BS Handbook: http://www.indstate.edu/nursing-basic/pdfs/admission-progression-graduation-requirements-traditional.pdf</p> <p>College of Nursing, Health, and Human Services- Revised Campus BS Handbook: http://www.indstate.edu/nursing-basic/aprdg.htm</p> <p>College of Nursing, Health, and Human Services- Campus BS 2nd Degree Handbook: http://www.indstate.edu/nursing-2nd-degree/pdfs/admission-progression-retention-dismissal-graduation-2nd-degree-bs.pdf</p> <p>College of Nursing, Health, and Human Services- Distance BS Handbook: http://www.indstate.edu/bacc-comp-nsg/student-handbook/student-handbook.htm</p>
Graduation Requirements*	<p>2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ</p> <p>2010-2011 Graduate Catalog http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read</p> <p>Sycamore Express: http://www.indstate.edu/express/</p> <p>College of Nursing, Health, and Human Services- Campus BS Handbook:</p>

Student Policy	Publication
	<p>http://www.indstate.edu/nursing-basic/pdfs/admission-progression-graduation-requirements-traditional.pdf</p> <p>College of Nursing, Health, and Human Services- Revised Campus BS Handbook: http://www.indstate.edu/nursing-basic/aprdg.htm</p> <p>College of Nursing, Health, and Human Services- Campus BS 2nd Degree Handbook: http://www.indstate.edu/nursing-2nd-degree/pdfs/admission-progression-retention-dismissal-graduation-2nd-degree-bs.pdf</p> <p>College of Nursing, Health, and Human Services- Distance BS Handbook: http://www.indstate.edu/bacc-comp-nsg/student-handbook/student-handbook.htm</p> <p>College of Graduate and Professional Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#two_degrees</p>
Grievance/Complaints and Appeal Process*	<p>2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=225#acad_stand_requ</p> <p>2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read</p> <p>College of Nursing, Health, and Human Services-Graduate Handbook: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#Grade_Appeal</p> <p>College of Nursing, Health, and Human Services website: http://www.indstate.edu/nhhs/pdfs/governance/governance-docs/student-docs/student-grievance-procedures.pdf</p> <p>College of Graduate and Professional Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#Grade_Appeal</p>
Financial Aid	<p>2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=224#stud_fina_aid</p> <p>2010-2011 Graduate Catalog: http://www.indstate.edu/sogs/Students.htm</p> <p>Sycamore Express: http://www.indstate.edu/express/</p>
Transfer of Credit	<p>2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=223</p> <p>2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read</p> <p>Sycamore Express: http://www.indstate.edu/express/</p> <p>College of Graduate and Professional Studies website: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#trans_cred</p>
Recruitment	<p>2010-2011 Undergraduate Catalog 2010-2011 Graduate Catalog</p>

Student Policy	Publication
	Admissions: http://www.indstate.edu/admissions/
Health Requirements*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=223 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read Student Health Center: http://www.indstate.edu/shc/Required.html Student Nurse Health Policy: http://www.indstate.edu/nursing/pdfs/handbook-docs/student-health-policy-under.pdf Department of Advanced Practice Nursing: http://www.indstate.edu/nursing/pdfs/handbook-docs/dtudent-health-policy.pdf Nursing Program-Immunization Record: http://www.indstate.edu/nursing/pdfs/handbook-docs/immunization-record.pdf
Validation of Prior Learning/Articulation*	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/content.php?catoid=10&navoid=223 2010-2011 Graduate Catalog: http://catalog.indstate.edu/content.php?catoid=12&navoid=251#cont_enro_read College of Nursing, Health, and Human Services-Department of Baccalaureate Nursing Completion: http://www.indstate.edu/rn-bs/portfolio/portfolio-review.htm
Personal Wireless Communication Device Usage*	College of Nursing, Health, and Human Services-(link for students in all nursing programs): http://www.indstate.edu/nursing/pdfs/handbook-docs/pwcd-usage-policy.pdf

*Department policies that differ from University policy

Policies for graduate and undergraduate nursing students are consistent with those for students enrolled in other Colleges within the University. There are, however, some Nursing program 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 Nursing program policies that vary from the University standard follows.

Non-discrimination. Faculty and administration in the College of Nursing, Health, and Human Services are committed to a policy of non-discrimination related to admission, progression, and graduation of individuals. 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 ADA policy is located at <http://www.indstate.edu/sasc/programs/dss/services.htm>. The ADA document with core standards is linked on the College web page at <http://www.indstate.edu/aao/disability-acemmpolicy.htm>.

Selection and Admission. In order to be considered for admission to a nursing program, applicants must first be admitted to the University. Graduate students must be accepted by the College of Graduate and Professional Studies. Application for admission with links to admission criteria is found at <http://www.indstate.edu/nursing/>. Standards within the Nursing departments are consistent with other nursing programs 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 2.25. 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 “C” 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 to ensure progression.

The Department of Advanced Practice Nursing follows the progression and retention policies of the College of Graduate and Professional Studies. Graduate students must obtain an 83% (B) in all clinical courses and concentration-specific courses and maintain a 3.0 average to continue enrollment in good standing. The Dean of the College of Graduate and Professional Studies, in consultation with the Chairperson for Advanced Practice Nursing and the Executive Director for Nursing, 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. A grading policy for undergraduate nursing students was approved in the (then) College of Nursing in spring 2004 that changed the required minimum letter grade to pass a nursing course from B to C, with the lower limit of the passing grade remaining at 75%. The following grading scale was implemented for all undergraduate and graduate nursing courses in fall 2009:

98-100%	A+	75-77%	C
93-97%	A	70-74%	C-
90-92%	A-	68-69%	D+
87-89%	B+	65-67%	D
83-86%	B	60-64%	D-
80-82%	B-	<60%	F
78-79%	C+		

Differences exist between the undergraduate and graduate grading scale. No D grades are issued for graduate courses; an F is assigned to any work that earns less than 70%. The change in grade requirement for nursing courses was made in an effort to increase student achievement throughout the nursing programs. Graduate students in the College are graded according to the policies of the College of Graduate and Professional Studies and must maintain a 3.0 average.

Withdrawal/Dismissal. For undergraduate students, withdrawal from enrollment must be initiated in the Office of Registration and Records, Parsons Hall. Students seeking to withdraw are interviewed by a professional staff person and complete a [withdrawal authorization form](#). Undergraduate and graduate distance students may request to withdraw via email or telephone contact. They must complete a withdrawal authorization form as well.

Withdrawals require the terminations of all courses and may occur anytime during the semester prior to the fifteenth week. Questions concerning withdrawal from enrollment should be directed to the Office of Registration and Records. 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, especially related to grade determination. Various strategies for disseminating information include posting the policy on course bulletin boards and Blackboard sites, 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.

Students who are on academic probation from the University are not eligible to take nursing courses. Dismissal policies for the undergraduate and graduate nursing programs specifically limit the number of nursing course and cognate course repeats. Students may repeat a nursing course one time only. Failure of a repeated nursing course or failure of any two nursing courses results in dismissal from the nursing major. A failed cognate (a course identified as foundational to nursing education) may be repeated one time. Failure of a cognate course the second time or failure of any three separate cognate courses will result in dismissal from the nursing major.

Graduation Requirements. Students completing a baccalaureate or master's degree from the College of Nursing, Health, and Human Services must meet degree requirements for the University. Additional requirements are set forth by the respective nursing programs or concentrations. Upon completion of the program of studies, undergraduate students must have a cumulative grade point average of 2.25 or above. The College requires the same minimum grade point average, but also requires a minimum grade of "C" 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 (Indiana Administrative Code, p. 18).

Graduation requirements for students in Advanced Practice Nursing meet or exceed the 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, a culminating project, or an evidence-based practice 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.

Grievance Complaints/Appeals Process. Any student at Indiana State University may register complaints with Student Judicial Programs regarding violation of the Code of Student Conduct. The code and rights of students are outlined in the *Code of Student Conduct*. This publication also contains the appeals process for decisions of the hearing body.

For grievances based on possible discrimination based on sex, sexual orientation, race, religion, age, disability or national origin, the student is advised to contact the University Affirmative Action Office, Parsons Hall, or <http://www.indstate.edu/aa/>.

The College of Nursing, Health, and Human Services' student grievance policy was written to ensure consistency with requirements outlined by the National Student Nurses Association and Bill of Rights and Responsibilities for Students of Nursing. The policy applies to any situation in which a student "has a grievance or believes that his/her rights are being impinged upon" (*Student Grievance Procedure*, ¶ 1). The procedures for

informal and formal grievances are available to students on the web at <http://www.indstate.edu/nhhs/pdfs/governance/governance-docs/student-docs/student-grievance-procedures.pdf>. Currently, the only similar informal or formal policy for all University students is the Student Grade Appeal Policy located at <http://www.indstate.edu/academicaffairs/miscellaneous.htm>.

A function of the College of Nursing, Health, and Human Services Student Affairs Committee, as stated in the College by-laws, is to hear and act upon student petitions regarding student policies. Some students have alleged that problems with academic success have arisen, at least in part, from exceptional personal circumstances. The committee has given some weight to these claims when the circumstances relate to a catastrophic event; a previously undiagnosed learning disability; a medical emergency involving the student or immediate family member, providing that documentation in support of the claim was presented; or, in a case where the student has demonstrated previous academic success. While reinstatement decisions were based upon criteria that are consistent with policies of other nursing programs and reflect a well-intended, humanistic attitude, some problems have been recognized. It is difficult for committee members to be objective and completely non-discriminatory in hearing appeals that are often emotionally charged. In light of the difficulty the undergraduate nursing program has experienced in reaching its expected level of achievement on NCLEX-RN, there is concern regarding the impact reinstatements have made over the past several years. A faculty decision was made in Nursing Council at the end of spring 2003 to suspend further reinstatements. The focus of the decision was to maintain the integrity of the

undergraduate programs and to avoid circumstances that might lead to discriminatory practices.

Financial Aid. Financial Aid Policies in effect for other students in the University also apply to students in the College. A listing of nursing scholarships is available through the Foundation Office. The procedure for application, and a list of nursing scholarships and criteria, may be found online at <http://indstate.edu/nursing/financial/scholarships.htm>.

Applications are received yearly for consideration for the following academic year. The selection process for scholarships is conducted by nursing faculty from each department.

Transfer of Credit. Standards for transferability of credit for general education courses taken from other accredited institutions are the same for all students at Indiana State University. The standards are written to be consistent with the admission, progression, and retention standards for each nursing program. Determination of equivalency for a course being transferred to Indiana State University is made by the respective department in which an equivalent course is taught in the University. Specific undergraduate courses have been preapproved for equivalency through the Indiana College Network.

Recruitment. Faculty in the College of Nursing, Health, and Human Services have developed a recruitment and retention plan as part of the College Strategic Plan. Faculty in each Nursing Department has then constructed a recruitment and retention plan as part of the Department Strategic Plan. All nursing programs have met or exceeded their enrollment benchmarks with the exception of the Accelerated Second Degree

Baccalaureate Nursing track. The Accelerated Second Degree track was approved late in the 2011 academic year with only weeks of advertising prior to starting May, 2011 dates; however, 12 students enrolled in the first cohort which had a maximum capacity of 30 students.

Finally, the responsibility for monitoring the student recruitment and retention plan rests with Department Chairs. Instructional resources, including faculty lines, are determined by enrollment growth and clinical fees.

Health Requirements. All students enrolled in a nursing program must meet health requirements as outlined by the University and are governed by the laws of the State of Indiana for post-secondary institutions. The College of Nursing, Health, and Human Services has additional health requirements that must be met in order for the student to be eligible for clinical experiences. These requirements are necessary to protect the student and clients and to meet the terms of contractual agreements with clinical agencies.

Validation of Prior Learning/Articulation. Validation of prior learning has been approved for Licensed Vocational/Practical Nurses (LVN/LPNs) and Registered Nurses (RNs) entering the LPN-BS track or RN-BS track and are consistent with University advanced placement policies.

Advanced standing is earned by LPN/LVNs through credit transfer and credit by examination. For RNs, advanced standing may be earned through credit transfer, credit

by examination, and professional portfolio review. Guidelines for advanced standing are located at <http://www.indstate.edu/lpn-bs/advanced-standing.htm> (for RNs) and <http://www.indstate.edu/lpn-bs/advanced-standing.htm> (for LVN/LPNs).

The purpose of the portfolio evaluation is to provide experienced registered nurses an opportunity to earn either total or partial credit for nursing courses by demonstrating successful attainment of specific course objectives. The portfolio evaluation option is available for all courses in the track except NURS 300, Transition to Professional Nursing Practice, NURS 450 Population-based Community Health Nursing, and N486, Professional Nursing Synthesis.

There are several types of articulation agreements through the University that facilitate degree-completion for students. The Indiana College Network has identified numerous courses from various accredited state and private institutions as equivalent to facilitate transfer of credits among institutions. DegreeLink is a University program that enables students to transfer credit from Ivy Tech State College, Vincennes University, and other accredited institutions to Indiana State University and complete one of several baccalaureate degrees, including nursing.

Personal Wireless Communication Device Usage (PWCD). Guidelines for use of cell phones and PWCD usage are intended to promote academic and professional integrity, professional communication, and a safe effective learning environment. The PWCD policy is consistent with the ISU Code of Student Conduct and the National Student

Nurse Association (NSNA) Code of Student Conduct. Violation of this policy may create a situation that could lead to failure of a course, dismissal from the nursing program or University, or criminal charges. Such actions could become part of the individual's future criminal background check and jeopardize a student's future employment.

CRITERION 3.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Student services are commensurate with the needs of students pursuing or completing the baccalaureate or master's program, including those receiving instruction using alternative methods of delivery.

Indiana State University provides a variety of support services for undergraduate (on-campus and distance education) and graduate students. Table 3.2.1 provides a sample of the types of services available within the University and identifies the location of information published to facilitate access to these services.

Table 3.2.1 *Indiana State University Student Support Services*

Support Service	Services Provided	Availability of Published Information
Admissions Office Richard Toomey, Executive Director (Undergraduate)	Responsible for coordination and dissemination of information about the University and its programs to prospective undergraduate students/parents. Admission of undergraduate students.	2010-2011 Undergraduate Catalog: http://catalog.indstate.edu/index.php?catid=10 Admission Requirements and Regulations http://www.indstate.edu/admissions/
College of Graduate and Professional Studies Jay Gattrell, Dean	Facilitates student and faculty teaching, research, scholarship, creativity, and community engagement. Provides leadership in quality graduate program development and the recruitment, education, and professional preparation of students throughout Indiana and the world. Admission of all graduate students.	2010-2011 Graduate Catalog: http://catalog.indstate.edu/index.php?catid=12 College of Graduate and Professional Studies website: http://www.indstate.edu/sogs/
Student Academic Services Center	Provides support services (academic preparation, advisement, counseling, classroom instruction, tutoring, mentoring, disability services, first year seminars, and learning communities).	University website: http://www.indstate.edu/sasc/
Public Safety Department	Exercise full police authority and enforce federal and state laws, as well as University	University website: http://www.indstate.edu/pubsafety/

Support Service	Services Provided	Availability of Published Information
William Mercier, Chief	policies. Officers also have arrest powers, on any property owned, leased, or used by Indiana State University.	
Office of Student Financial Aid Kim Donat, Director	Guides and assists students in fulfilling their academic aspirations through the highest quality service and with the effective and efficient delivery of aid.	University website: http://www.indstate.edu/finaid/
Office of Registration and Records April Hay, Registrar	Registration and enrollment Maintains academic records Issues transcripts Prepares degree audits Certifies candidates for degrees Prepares diplomas Provides statistics Produces schedule of classes	University website: http://www.indstate.edu/registrar
UAP Clinic-ISU Health Center	Provides a variety of services at the health center, including immunizations, health assessments and treatments, men's and women's health services, educational materials, STD screenings/counseling, prepackaged medications, laboratory testing, diagnostic x-rays of bone or soft tissue injuries.	University website: http://www.indstate.edu/shc/
Student Health Promotion (part of ISU Health Center) Aimee Janssen-Robinson, Educator	Increase students' knowledge about and awareness of positive and negative health behaviors and how this may impact long-term well-being. Offer prevention and educational services to address a variety of health issues including nutrition, stress and time management, sexual health, alcohol and other drugs, and relationships.	University website: http://www.indstate.edu/shp/
Student Counseling Center L. Kenneth Chew, Director	Offers counseling services for issues such as depression, anxiety, difficulties with relationships, feelings of inadequacy, sexuality issues, identity problems, substance abuse issues, and problems interfering with academic functioning. Distance education students can telephone for a consultation with referral to a service provider near the student's home.	University website: http://www.indstate.edu/cns/
Porter School Psychology Center-College of Education Michele Boyer, Department Chair	Promotes the general welfare of children, their families, and adults by providing educational, psychological, and behavioral evaluations and interventions.	University website: http://coe.indstate.edu/cdcsep/edpsych/porterpracticum.htm
Rowe Center for Communication Disorders-College of Education	Offers assessment and treatment for communication disorders.	University website: http://coe.indstate.edu/rowe/index.htm

Support Service	Services Provided	Availability of Published Information
Amanda Solesky, Clinic Coordinator		
Psychology Clinic- College of Arts and Sciences Michael Murphy, Director	Psychotherapy Marital and Family Therapy Child Therapy Psychological Assessment Consultation	University website: http://www.indstate.edu/psychology/
Early Childhood Education Center Gail Gottschling, Director	Child Care Center/ Nursery School, provides comprehensive child services for the ISU and Terre Haute community, Provides site for academic research and training, ISU College of Education.	University website: http://www.indstate.edu/ecec/
Writing Center Barbara Cox, Interim Writing Center Coordinator	Assists students with writing tasks: prepare for writing, review drafts, or edit near-final copies Online Writing Center (OWL)	University website: http://isu.indstate.edu/writing/
Cunningham Memorial Library Alberta Comer, Dean, Library Services	Instructional Services Electronic Data Base Searching Interlibrary Loan Services Distance Education Courses	University website: http://lib.indstate.edu/
University Bookstore	Provides textbooks, magazines, class ring order service, general supplies, art supplies and gifts	University website: http://indiana-state.bncollege.com/
Career Center Roy Boissy	Assistance with: Selecting a major, developing a resume, internships Career fairs On-campus interviews Candidate referrals	University website: http://www.indstate.edu/carcen/
Student Activities and Organizations Nolan Davis, Interim Director	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.).	University website: http://www.indstate.edu/sao/
Student Judicial Programs Bonita McGee, Director	Responsible for administering the Code of Student Conduct Assists student who believe their rights have been violated by actions of other students	University website: http://www.indstate.edu/sjp/
Diversity and Affirmative Action Office Mary Ferguson, University Diversity Officer	Assistance in academic freedom and discrimination issues	University website: http://www.indstate.edu/diversity/ http://www.indstate.edu/diversitycouncil/ http://www.indstate.edu/aao/

Support Service	Services Provided	Availability of Published Information
Sheila Johnson, Director, Affirmative Action		
University Testing Office Salatha Willis, Director	Credit by Examination Registration and information concerning institutional and national testing programs	University website: http://web.indstate.edu/oirt/
International Programs and Services Jacques Fuqua, Jr., Director	Support and Counseling for international students and scholars at ISU Activities to facilitate diverse cultural education for domestic students	University website: http://www.indstate.edu/ips/
Information Technology (IT) Services Robert Barley, Director	Provides computing, networking, telephone, video, and audio resources	University website: http://www.indstate.edu/oit1/
Residential Life	Operation of residence halls	University website: http://www.indstate.edu/reslife/

Support services for students in distance education include: admission-graduate and undergraduate services, advisors, University Bookstore, Career Center, computer support including IT services, financial aid, library services, MyISU Portal, obtaining a student ID card, veterans' services, and the Writing Center. Distance education students who live in the Terre Haute region may take advantage of other services available to campus students.

Since the Baccalaureate Nursing Completion program partnered with The College Network (TCN) in 2004, the program has been steadily growing. The program was available first for RNs and then LVN/LPNs who wanted to achieve a Bachelor of Science degree with a major in Nursing. The TCN is an educational services and eLearning

provider that enables students to obtain a college degree from established partner universities.

Faculty prepared and designed Customized Study Materials (CSMs) for the purpose of verifying the knowledge level and competencies of the nursing student based on previous learning and clinical experience for content included in four nursing courses (NURS106, NURS224, NURS328, and NURS330) that the LPN or LVN student may challenge.

CSMs are published and distributed by The College Network.

The Department of Baccalaureate Nursing Completion has one Student Services Specialist (SSS) who advises LVN/LPNs after they are admitted to the program.

Currently, faculty who teach in the nursing program are assigned to advise RNs. The Contract Coordinator works collaboratively with faculty and individual students to meet the overall clinical needs of distance students.

In the Department of Advanced Practice Nursing, faculty and staff collaborate and communicate with students via email, telephone, or in person. Individual students' needs are managed by faculty or staff and channeled to specific University services as indicated by the need. An SSS is also available to advise graduate students once they are admitted to the program.

CRITERION 3.3 (Baccalaureate, Baccalaureate Nursing Completion, Advanced Practice Nursing): Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.

The College of Nursing, Health, and Human Services 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* (March 2011) at <http://www.indstate.edu/adminaff/policyindex.htm> . The complete act is referenced through the Indiana State University Student Judicial Programs at <http://www.indstate.edu/sjp/legislation.htm> . In addition to being in compliance with FERPA, the Office of the Registration and Records also follows recommendations contained in the *Academic Record and Transcript Guide* (2010) published by American Association of Collegiate Registrars and Admissions Officers.

Non-disclosure and confidentiality statements may also be found in the current graduate and undergraduate catalogs and the class schedules published for each term. *Indiana State University Code of Student Conduct*, Section IV, pp. 19-22 (<http://www.indstate.edu/sjp/docs/code.pdf>), outlines the rights of a student under the FERPA Act with regard to student records. The Office of Vice President for Student Affairs, Parsons Hall, Room 203, is responsible for receiving complaints in the case of non-compliance with the FERPA Act. Access to further information about guidelines for implementing the FERPA Act is through Student Judicial Programs at the link shown above.

The MyISU portal, central website for the ISU community, provides password-protected access to personal information for students. 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 Degree Auditing and Reporting System (DARS) report. Access to electronic records is available 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 College of Nursing, Health, and Human Services is guided by Indiana Code, Title 25, Nurses, 848 IAC 1-2-22 Records and School Bulletin (reaffirmed 2001). This rule requires a provision for safe storage of records and indicates which documents must be maintained in the student's file. Undergraduate on-campus student records are stored in a secure area in the Office of Student Affairs (NB 328); undergraduate distance student records are stored in a secure area in Room 315, Nursing Building; graduate student records are stored securely in Room 223, Landsbaum Building. The Dean, Executive Director, Department Chairpersons, and Academic Advisors, the Director of Student Affairs and staff, and Student Support Specialists have access to files on a need-to-know basis related to his/her job within the College. A procedure for signing out a file is in place. Students must show their 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 College of Nursing, Health, and Human Services, nursing student records are maintained for 10 years after graduation. Transcripts are maintained by the University indefinitely. Nursing departments maintain inactive files of students in good standing for 2 years; files of dismissed and ineligible students are kept electronically indefinitely.

CRITERION 3.4 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.

For the Baccalaureate Nursing, Baccalaureate Nursing Completion programs and Advanced Practice Nursing programs, documentation confirms that:

3.4.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

The primary lender for Indiana State University is the United States Department of Education. Loan repayment information is located at <https://studentloans.gov/myDirectLoan/index.action>. Information about calculating repayment is located at this site as well. Entrance and exit counseling are performed with students when they enter the website. They are required to take an examination from the website regarding student financial assistance. Students have access and monitor their loan information at http://www.nslds.ed.gov/nslds_SA/.

3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.

Students are counseled when they apply for a loan and when they exit the University regarding their responsibilities for loan repayment and financial assistance. Exit counseling information is located at http://www.nslds.ed.gov/nslds_SA/.

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. A confidentiality statement is required to be signed by staff members 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.

CRITERION 3.5 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Integrity and consistency exist for all information intended to inform the public, including the program’s accreditation status and NLNAC contact information.

Accreditation information is available linked from all nursing web pages on the left navigation menu. NLNAC contact information is included on the linked page at <http://www.indstate.edu/nursing/structure/accreditation.htm>.

Information about the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing is consistently presented in the online University Catalog, nursing web sites, and brochures distributed for public information. Information is reviewed annually and updated, as needed, with changes posted to the website. University web guidelines indicate that web sites “Do not duplicate information on another website, but rather link to the official webpage of the responsible

(authoritative) office, program or department”

(<http://www.indstate.edu/webguide/content-guidelines.htm>).

The Catalog of Indiana State University is the document of authority for all students. Requirements given in the catalog supersede information issued by any academic department, program, college, or school. The University reserves the right to change requirements at any time. When a change is approved mid-cycle of Catalog revision, updates are posted on the appropriate Nursing Catalog Updates web page and then removed the following July when the updated Catalog information is available at <http://www.indstate.edu/academics/catalogs.htm>.

CRITERION 3.6 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

Changes in all policies, procedures, and program information are posted on the applicable web page(s) when the updated information is provided to the Technology Coordinator by the person (or designee) responsible for a particular page/site. Prior policies are available at <http://www.indstate.edu/nursing/archives/archived-documents.htm>.

Changes in policies, procedures, and program information are also communicated to on-campus students via course faculty in the classroom, email, and the course Blackboard sites. Students are also given updated information during their orientation. Distance students in the Departments of Baccalaureate Nursing Completion and Advanced Practice

Nursing receive information about changes via email, postal mail, and/or course Blackboard sites.

Faculty recognize the need to develop a more efficient method for ensuring that all students receive information. One suggestion has been to add a button to each course Blackboard menu to convey changes that are made. The Advanced Practice Nursing Department is piloting this suggestion. A button is placed on all Blackboard courses labeled “APN Connection.” In this area, student representatives will be provided with any changes or updates to policy. There is a student discussion board where the student representatives present and discuss the changes with their peers/classmates and communicate student feedback to faculty. In addition, the APN Connection will contain important program and University information, changes, and updates.

CRITERION 3.7 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.

Orientation and technological support are available to students in the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing through a variety of methods, including course Blackboard Learn sites, Blackboard Tutorials for Students at <http://www.indstate.edu/cirt/facdev/blackboard/blackboard9student/index.htm> , a variety of links to resources from the Office of Information Technology (IT) at <http://www.indstate.edu/oit1/>, and the OIT Help Desk

(<http://www.indstate.edu/oit1/userservices/ithelp/>) which is open 7 days a week and accessible via local telephone at 812-237-8439 (Main Office), 812-237-2910 (Help Desk) or toll free phone number at 888-818-5465. The Technology Coordinator for the Nursing Departments is also available via email and phone for technology assistance for all nursing students.

The Center for Instruction, Research and Technology's (CIRT) Student IT Training Program at <http://www.indstate.edu/cirt/student/training.html>, as well as Institutional Support Links at <http://www.indstate.edu/cirt/facdev/blackboard/de-links.html>, provide assistance for nursing students. A Computer Guide for Nursing Students located at <http://www.indstate.edu/nursing/lrc/computer-guide/lrc-computer-guide.htm> and multiple Library Guides at <http://libguides.indstate.edu/index.php> provide additional help.

Students who are on campus have access to the Computer Store, a retail store that sells software, peripherals, computers, and other hardware for students to use. The Computer Support Center (one division of the Help Desk) is a walk-in service for students who need hardware maintenance, software support, and help with viruses and internet issues.

The Testing Office, which oversees ATI testing, has a link to the Nursing web page outlining technology requirements needed for proficiency testing. Hard copy handouts with technology requirements are also provided in courses in which ATI exams are required.

CRITERION 3.8 (Baccalaureate Nursing Completion, Advanced Practice Nursing): Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.

Technology requirements for students entering the Baccalaureate Nursing Completion tracks and Advanced Practice Nursing program are located at http://www.indstate.edu/distance/computer_req.html. In addition, technology needs for undergraduate students in the nursing tracks are listed on the Admission Application Process web page for each track (<http://www.indstate.edu/rn-bs/rn-bs-application-process.htm> and <http://www.indstate.edu/lpn-bs/application-process.htm>) as well as the “Must Read” page at <http://www.indstate.edu/bacc-comp-nsg/undergraduate-distance-info.htm>.

The Distance Learning site for undergraduate students, DegreeLink, at http://www.indstate.edu/degreeLink/computer_req.html, is an Indiana State University program that enables individuals to transfer credit and complete bachelor degrees via distance learning.

Potential LPN-BS students are informed that an information technology literacy course is required for admission in the initial contact information sent to them via email by nursing distance education personnel. The course is listed on the advising worksheet at <http://www.indstate.edu/bacc-comp-nsg/pdfs/advising-worksheets/advising-worksheet-lpn-bs.pdf>, the application form at <http://www.indstate.edu/bacc-comp-nsg/pdfs/application-forms/bs9322-lpn-bs-nursing-admission-application.doc>, and

brochures about the Baccalaureate Nursing Completion track that are distributed at recruitment events.

Policies specific to distance education students in the Baccalaureate Nursing Completion tracks are clear, accurate, consistent with University requirements, and accessible at <http://www.indstate.edu/bacc-comp-nsg/student-handbook/student-handbook.htm>. In the Department of Advanced Practice Nursing, policies for distance education students are located at <http://www.indstate.edu/apn/handbook/student-handbook.htm>.

Available resources and services for APN distance students are located on the APN website at http://www.indstate.edu/distance/student_serv.html. Each concentration in the APN department has a website that provides all the general information for distance students in the concentration. Individual Blackboard sites and course syllabi provide specific information and requirements.

CRITERION 4.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.

CRITERION 4.1 (Advanced Practice Nursing): Program outcomes are congruent with established professional standards, curriculum guidelines, and advanced nursing practice competencies as applicable.

The current Baccalaureate Nursing curriculum was implemented in 2001 and meets professional standards, guidelines, and competencies that were established at that time. Following a faculty review based on collected data (discussed in Criterion 4.2), a track for the undergraduate baccalaureate curriculum was developed to be implemented in summer 2011 for an accelerated second degree option and a revised curriculum will begin in the fall for the traditional campus track. A revision of the online undergraduate tracks in the Department of Baccalaureate Nursing Completion will be implemented fall of 2012.

The revised nursing curriculum structure, content, and processes support and incorporate established professional standards, guidelines, and competencies as identified by the National League for Nursing (NLN), the Institute of Medicine (IOM) recommendations for core knowledge required of all health care professionals and the American Association of Colleges of Nursing (AACN) essentials of baccalaureate education in nursing. Competencies developed for the revised curriculum improve patient safety and support safe, quality health care delivery in the 21st century. Roles and leveled student learning outcomes in the current and revised Baccalaureate Nursing Program are shown in Tables 4.1.1 and 4.1.2. Leveled competencies refer to progression of achievement within each role. Initial competencies are those that are achieved in beginning nursing

courses; intermediate competencies are outcomes that are met within courses taught at the junior level in the traditional track and in the end and 3rd semesters of the 4-semester accelerated second degree track; terminal competencies are those that are met within courses taught in the senior year.

Table 4.1.1 *Roles and Leveled Student Learning Outcomes in the Current Baccalaureate Nursing Program*

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

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

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

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)
<p>1. Identifies assessment as a nursing function.</p> <p>2. Provides culturally sensitive active listening during role play and structured situations.</p> <p>3. Identifies the principles of the teaching learning process.</p> <p>4. Identifies the evaluation of client outcomes as a nursing function.</p> <p>5. Identifies that revisions to the plan of care will occur based on individual client outcomes.</p> <p>6. Identifies sources of nursing information.</p>	<p>1. Develops nursing assessment skills.</p> <p>2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals and families in multiple settings.</p> <p>3. Educates individuals, families, and peers about selected topics.</p> <p>4. Evaluates client outcomes.</p> <p>5. Revises plan of care in collaboration with individual and family.</p> <p>6. Identifies research and evidence-based information for application to nursing.</p>	<p>1. Assesses wellness, health needs, and risks of individuals, families, and groups.</p> <p>2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals, families, and groups in multiple settings.</p> <p>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.</p> <p>4. Develops skills in evaluating client outcomes and the effectiveness of professional nursing practice.</p> <p>5. Revises plan of care as appropriate in collaboration with individual, family, group, and members of the interdisciplinary health care team.</p> <p>6. Analyzes research and evidence-based information for application to nursing.</p>	<p>1. Assesses wellness, health needs, and risks of individuals, families, groups, and communities.</p> <p>2. Provides holistic, culturally sensitive, safe, and effective therapeutic nursing interventions in collaboration with individuals, families, groups, and communities in multiple settings.</p> <p>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.</p> <p>4. Evaluates client outcomes and the effectiveness of professional nursing practice.</p> <p>5. Revises plan of care as appropriate in collaboration with individual, family, group, community, and members of the interdisciplinary health care team.</p> <p>6. Evaluates research and evidence-based information for application to nursing.</p>

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 (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. Identifies leadership as one of the roles of the professional nurse. 2. Identifies trends that influence the cost in health care. 3. Identifies the importance of indicating therapeutic goals. 4. Practices self-management for the achievement of academic success. 5. Identifies that each state has a nurse practice act. 6. Identifies the role of the supervisor in health care settings. 	<ol style="list-style-type: none"> 1. Identifies leadership functions in guiding members of the interdisciplinary health care team. 2. Identifies methods of cost savings in health care. 3. Identifies therapeutic goals for providing quality care in collaboration with individuals and families. 4. Identifies management functions in the health care settings. 5. Identifies the steps and methods of delegation consistent with the Indiana Nurse Practice Act. 6. Reports information to supervisor. 	<ol style="list-style-type: none"> 1. Assumes a leadership role in selected and guided situations. 2. Compares methods of cost savings in health care. 3. Prioritizes therapeutic goals for providing quality care in collaboration with individuals, families, and groups. 4. Identifies human, fiscal, and material resources required for providing care. 5. Compares tasks that could be delegated to licensed and non-licensed caregivers in a manner consistent with the Indiana Nurse Practice Act. 6. Compares the methods of supervision observed in practice. 	<ol style="list-style-type: none"> 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.

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

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. Identifies advocacy as one of the roles of the professional nurse. 2. Discusses the nurse's involvement in socio-political issues. 3. Identifies health care issues in current events. 	<ol style="list-style-type: none"> 1. Recognizes activities to improve health care practices. 2. Identifies steps in the change process. 3. Identifies health care policies. 	<ol style="list-style-type: none"> 1. Participates in activities to improve health care practices. 2. Identifies role of political activism. 3. Compares health care policies in a variety of health care settings. 	<ol style="list-style-type: none"> 1. Participates in activities to improve health care practices and policies. 2. Advocates for policy changes that promote health for individuals, families, groups, and communities. 3. Analyzes the role of the nurse policy developer in a variety of health care settings.

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

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

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

Table 4.1.2 *Leveled Student Learning Outcomes for the Revised Baccalaureate Nursing Program. (Revised Traditional track beginning fall 2011 and Accelerated Baccalaureate Nursing track beginning summer 2011)*

1. The baccalaureate prepared student will provide safe and holistic patient centered care.		
Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
<p>1.1i Recognize patients' differences, values preferences, and expressed needs with an awareness of how personal values and beliefs can impact care delivery.</p> <p>1.2i Conduct defined bio-psychosocial and environmental assessments of health and illness in selected settings.</p> <p>1.3i Formulate plans of care for selected populations.</p> <p>1.4i Communicate effectively with patients and families in select settings.</p> <p>1.5 Recognize patient teaching needs in the plan of care.</p>	<p>1.1m Evaluate patients' differences, values preferences, and expressed needs with an awareness of how personal values and beliefs can impact care delivery.</p> <p>1.2m Conduct complex bio-psychosocial and environmental assessments of health and illness in multiple settings.</p> <p>1.3m Formulate plans of care for selected populations across the health care continuum.</p> <p>1.4m Communicate effectively with patients, families, and groups in select settings.</p> <p>1.5m Develop patient teaching that reflects holistic patient needs and fosters the informed engagement in care.</p>	<p>1.1f Integrate patients' differences, values preferences, and expressed needs with an awareness of how personal values and beliefs can impact care delivery.</p> <p>1.2f Conduct comprehensive and focused bio-psychosocial and environmental assessments of health and illness in diverse settings.</p> <p>1.3f Formulate plans of care for diverse populations across the health care continuum.</p> <p>1.4f Communicate effectively with patients, families, groups, and communities.</p> <p>1.5f Demonstrate appropriate patient teaching that reflects holistic patient preferences and fosters the informed engagement in care.</p>

2. The baccalaureate prepared student will work effectively in interprofessional teams.		
Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
<p>2.1i Identify roles for various members of the health team.</p> <p>2.2i Demonstrate appropriate team building and collaborative strategies when working with peers and other members of the health care team.</p>	<p>2.1m Use effective interprofessional communication and collaborative skills to deliver evidence-based, patient-centered care.</p> <p>2.2m Advocate for high quality and safe patient care as a member of the interprofessional team.</p>	<p>2.1f Contribute the unique nursing perspective to interprofessional teams to enhance patient outcomes.</p> <p>2.2f Incorporate effective interprofessional communication, negotiation, and conflict resolution to deliver evidence-based and patient-centered care.</p>

3. The baccalaureate prepared student will employ evidence-based practice.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
3.1i Discuss research findings related to safe patient care.	3.1m Investigate research findings and clinical experiences supporting safe patient care in multiple settings.	3.1f Integrate best research with clinical expertise and patient values for optimum safe care.
3.2i Identify and locate evidenced-based materials related to patient care.	3.2m Participate in retrieval, appraisal, and synthesis of evidenced-based activities related to improved outcomes.	3.2f Implement methods of retrieval, appraisal, and synthesis of evidence-based learning and research activities to improve patient outcomes.
3.3i Describe possible sources of discrepancies found between standards and practice.	3.3m Examine discrepancies between best practice standards and existing practices impacting patient outcomes.	3.3f Propose mechanisms to resolve identified discrepancies between standards and practices that impact patient outcomes.

4. The baccalaureate prepared student will apply quality improvement principles.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
4.1i List methods to identify potential hazards and to record variances in health care.	4.1m Distinguish the roles of nurses working within an interprofessional team to improve patient safety.	4.1f Demonstrate leadership skills to effectively implement patient safety in the identification of variances and hazards in health care.
4.2i Identify the steps in the quality improvement process.	4.2m Examine a quality improvement process that plans, collects data, and conducts analysis.	4.2f Analyze quality improvement processes and safety design principles such as standardization and simplification.
4.3i Describe the structure, process, and outcomes related to patient care.	4.3m Construct methods of analysis including root cause, trended data, and workflow in relation to patient care.	4.3f Evaluate quality of care in terms of structure, process, and outcomes in relation to patient and community needs.
4.4i List types of quality improvement activities and measures used to determine patient outcomes.	4.4m Compare targeted changes based on data analysis and best practices.	4.4f Design interventions to change the processes and system of care with the objective of improving quality.

5. The baccalaureate prepared student will utilize Informatics.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
5.1i Distinguish information systems, communication, and technology methods in the management of safe nursing practice.	5.1m Apply information systems, communication, and technology methods in the management of safe nursing practice.	5.1f Integrate information systems, communication, and technology methods in the management of safe nursing practice.
5.2i Evaluate data from selected relevant sources, including technology, to deliver care.	5.2m Use data from multiple relevant sources, including technology, to deliver care.	5.2f Evaluate data from all relevant sources, including technology, to deliver care.
5.3i Describe ethical principles related to patient information.	5.3m Demonstrate ethical principles related to patient information and patient care technologies.	5.3f Uphold ethical principles when using patient care technologies.

6. The baccalaureate prepared student will demonstrate leadership skills.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
6.1i Discuss implications of health care policies and organizational mission and vision statements.	6.1m Examine implications of health care policies and organizational mission, vision, and value statements.	6.1f Appraise the impact of health care policies, including financial, regulatory, and organizational mission, vision, and value statements.
6.2i Examine characteristics and qualities of current and historical nurse leaders.	6.2m Demonstrate leadership skills in providing high quality safe nursing care.	6.2f Apply leadership concepts, skills, and decision-making in the provision of high quality safe nursing care and emergency preparedness.
6.3i Identify change agents and discuss approaches to enable change within healthcare.	6.3m Examine and propose methods to put into practice.	6.3f Participate in the development and implementation of imaginative and creative strategies to enable systems to change.
6.4i List characteristics of a nurse leader.	6.4m Examine the roles of an effective nurse leader.	6.4f Discuss the role of the nurse as a leader in the delivery of safe and effective healthcare.

7. The baccalaureate prepared student will demonstrate health promotion.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
7.1i Identify need for health promotion and disease prevention for individual and selected populations to promote healthy lifestyles.	7.1m Construct health promotion and disease prevention models to improve the health and wellness and promotion of healthy lifestyles in multiple settings.	7.1f Advocate for health promotion and disease prevention at the individual and population level necessary to improve population health, wellness, and the promotion of healthy lifestyles.
7.2i Identify own spiritual and cultural values and those of selected populations related to health promotion.	7.2m Investigate aspects of nursing care to appropriately provide for spiritual and cultural competent health promotion.	7.2f Collaborate with other healthcare professionals and patients to provide spiritual and cultural appropriate health promotion.

8. The baccalaureate prepared student will display professional behaviors.

Initial Program Competencies	Intermediate Program Competencies	Terminal Program Competencies
8.1i List the nursing values.	8.1m Discuss the application of nursing values in patient care.	8.1f Incorporate nursing values into daily practice.
8.2i Define personal accountability for civility, honesty, and fairness in academic, professional, and public behavior.	8.2m Demonstrate the principles of professional conduct in academic, professional and public behavior.	8.2f Demonstrate accountability and responsibility for one's own academic, professional, and public actions.
8.3i Identify the legal scope and ethical principles of nursing.	8.3m Apply ethical and legal principles to patient care situations.	8.3f Demonstrate ethical and legal decisions surrounding health care dilemmas.
8.4i Identify the expectations of the role of the professional nurse.	8.4m Discuss trends and issues that apply to the nursing profession.	8.4f Serve as an advocate for the nursing profession.

Student learning and program outcomes for the baccalaureate nursing program tracks are clearly articulated in student-friendly language; all aspects of the curriculum emphasize key competencies and practice standards identified within key practice guidelines. The competencies include holistic, safe, quality patient care, interprofessional practice, evidence-based practice, technology and informatics, leadership, professionalism, health promotion, disease management, and palliative care across the life-span. Settings for nursing practice range from complex healthcare environments to multicultural communities.

Professional competency-based student learning outcomes in the Advanced Practice Nursing program are derived for advanced nursing roles in clinical care, education, and leadership. Each role concentration has an intentional link between the student learning outcomes and the following professional organizations: American Academy of Colleges of Nursing Master's Essentials (all concentrations), the National Organization for Nurse Practitioner Faculties core competencies for nurse practitioners (Family Nurse Practitioner Concentration), the National League for Nursing's eight core competencies for nurse educators (Nursing Education Concentration), the American Organization of Nurse Executives' core competencies for nurse administrators and the Essentials of Master's level Education for Nursing Administration (Nursing Administration Concentration).

CRITERION 4.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): The curriculum is developed by the faculty and regularly reviewed for rigor and currency.

The curriculum was developed by faculty and is regularly reviewed for academic rigor, student-centeredness, and currency. Faculty meet weekly within the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing to address department issues. Although it may not occur on a weekly basis, assessment and evaluation of courses within each program or a review of changes that reflect current nursing practice occur during these meetings. Assessment and evaluation of courses and the curriculum is based on feedback from course-level evaluations, departments, and college-wide review processes. These processes form the basis of an annual progress report that identifies strengths, areas for improvement, and a plan of correction for the curriculum.

In order to review the curriculum in each department, data are collected from student learning outcomes, classroom evaluations/student focus groups, clinical evaluations, exit surveys, alumni surveys, employer surveys, advisory committee discussions, and standardized proficiency testing results for each course, licensing pass rates, and certification examinations. These data are reviewed each semester by faculty and the Department Chairperson for strengths and opportunities for improvement. Assessment of curriculum is also guided by researching current nursing and health related literature, participating in local, regional, national, and international conferences, using established professional standards, and collaborating with health care agencies about best practices.

To promote greater rigor, departments are part of a college-wide standardized curriculum review strategy, in which college departments are required to intensively review program outcomes annually. Faculty from each department are subsequently required to report their progress to a college-wide curriculum review group for critical evaluation. The review process ensures that course and program outcomes are aligned with Goal 1 of the College- and University-wide strategic plan for student success (i.e. increase the number of students taking advantage of the educational opportunities at Indiana State University and assist all those attending to realize their educational goals).

The most recent major review of a curriculum, completed in October 2009 and to be implemented in fall 2011, resulted in the development of a revised baccalaureate nursing curriculum designed to address the following goals:

1. Improving students' experiences as part of a wider focus on improving success in achieving their educational goals.
2. Improving NCLEX-RN licensing examination pass rates.
3. Modernizing the curriculum in line with NLN core competencies, IOM core competencies, and AACN recommendations on the essentials of baccalaureate nursing.

The revised undergraduate (traditional campus track) nursing curriculum addresses the need to improve student success by organizing courses to show progression, especially in the medical-surgical nursing courses. There is also a decreased emphasis on specialty areas (nursing of children, maternity nursing, and mental health nursing) to better align

with the NCLEX-RN test plan. In addition to consolidated hours, there is a reduced number of mental health nursing courses. In the current curriculum, there are three (3) mental health nursing courses and the revised curriculum has one (1). A separate nutrition course has been added to strengthen concepts from the test plan and pharmacology concepts, including pharmotherapeutics, are reinforced in each of the nursing courses.

The revised curriculum also addresses the declining NCLEX-RN licensing examination pass rates. Changes include admitting students to the nursing major later in the program, during the second half of the second year, moving cognates into the first 3 semesters from later semesters, thus freeing the later semesters to include more nursing courses and fewer cognates, and concentrating nursing content closer to the time that graduates actually take the licensing examination. Structuring the program in this manner supports students' retention and helps them to be successful.

Using the NLN core competencies, IOM core competencies, and AACN recommendations on the Essentials of Baccalaureate Nursing to guide curriculum revision helps to achieve the third goal by providing a more contemporary education for students. Changes that have occurred in the core competencies have been incorporated in order to prepare graduates for contemporary practice.

Faculty in the Departments of Baccalaureate Nursing and Baccalaureate Nursing Completion collaborated on revisions to the baccalaureate nursing curriculum and

revisions of the RN-BS and LVN/LPN-BS tracks are ongoing. Following implementation of the revised program and tracks, faculty will evaluate for rigor and consistency. Summative and formative methods of evaluation will be used to determine if the goals of the curriculum are being met.

In addition to a revision of the current baccalaureate program, an accelerated second degree baccalaureate nursing track has been designed and will be implemented in summer 2011. The development of this track is consistent with and was directed by Goal 1 of the University's strategic plan focusing on student success. The focus of Goal 1 is to increase the number of students taking advantage of the educational opportunities at Indiana State University and assist all those attending to realize their educational goals.

The impetus for the development of the track is based on inquiries over a period of years from students with a baccalaureate degree in another field requesting an accelerated nursing track. There have also been students with a previous degree who enrolled in the baccalaureate nursing program. Although these students completed the nursing program, they did not have to repeat cognate or foundational studies courses if they had taken them in the previous degree. Student numbers increased over time ensuring that the new track would have sufficient numbers.

The accelerated track also helps to address the nursing shortage by allowing students to complete courses in a shorter period of time. The accelerated track helps to educate those

who have been displaced from jobs in other disciplines, thus providing economic benefits, as well.

There will be a change in pedagogy for all curriculum revisions using more student-centered learning, problem-based learning, simulation, and the most current Web-based technologies, such as Tegrity and Captivate. Nursing courses will focus on core content and help students think critically and make sound clinical judgments so that their probability for success on the NCLEX-RN licensing examination will be enhanced and they will be safe and effective in care delivery upon graduation. NURS 490 Licensure Preparation has been added to help students prepare for the NCLEX-RN licensure examination.

In the Department of Advanced Practice Nursing, the curriculum is developed by faculty within each concentration and individual sections are reviewed monthly during the evaluation process. At the end of each semester, the curriculum is evaluated for thoroughness and to ensure that it is contemporary. The eight (8) members of the department serve as the Curriculum Committee and evaluate the entire curriculum each month during department meetings. Evidence of curriculum discussion can be found in department meeting minutes.

Faculty in the Department of Advanced Practice Nursing regularly plan and conduct ongoing reviews of courses in the three advanced practice concentrations. Courses are developed utilizing evidence from clinical guidelines and core competencies developed by accrediting and certifying bodies. Student learning outcomes are utilized to organize

the curriculum. Faculty who have responsibility for the courses in each concentration or program discuss plans and outlines for current courses and submit syllabi for annual review during designated departmental meetings prior to the semester in which the course is offered. Discussion among faculty is held as to whether changes and/or updating may be needed in each of the concentrations' courses at these departmental meetings and suggestions are documented in the meeting minutes and taken into consideration as courses are updated and/or revised by faculty. Faculty bring details of any course updates or revisions to subsequent departmental meetings as determined by the Chair, so that input and feedback may be received, and to ensure that the proposed changes are in alignment with the overall program goals and objectives for each APN concentration.

For the Family Nurse Practitioner concentration, current clinical guidelines are utilized to assure that students are provided with the most current guidance and clinical evaluation and exam scores reinforce the rigor. In addition, graduates' ability to pass certification examination supports ongoing evaluations. Preceptor evaluations identify students' abilities to utilize current clinical guidelines. Evidence of the use of current clinical guidelines is shown in submitted expanded SOAP notes that are required four (4) times during the semesters in which students are enrolled in clinical nursing courses.

Nursing Education courses are developed and reviewed assuring that the NLN core competencies for nurse educators are updated and followed. Evidence-based assessments and evaluation strategies are utilized to ensure currency and maintain relevance. Students in the Nursing Education concentration work toward actively participating in student

teaching and demonstrating evidence-based course updates and/or revisions under the guidance of their educator preceptor and faculty. Evaluations of the culminating project and evidence of application of the educational process are completed by preceptors, faculty, and students' self-evaluations.

Administration courses are developed and reviewed based on core competencies that support exemplary practice as a Nurse Administrator. The Nursing Administration concentration practicum includes the implementation of an evidence-based service learning project to address a clinical practice issue in a healthcare setting under the direction of a nursing leader or manager. Evaluation of this project by faculty and nurse leader preceptors provides evidence of student success and outcome attainment. As all concentrations are taught in an online environment, onsite clinical preceptor evaluations are utilized for face-to-face evaluations.

CRITERION 4.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.

The design and organization of the curriculum, including the teaching delivery modes utilized within the curriculum, have been developed to specifically facilitate the achievement student learning outcomes. The Baccalaureate Nursing and Baccalaureate Nursing Completion program is designed to prepare graduates to function as novice staff nurses who participate as members of an interprofessional team, who demonstrate professional behaviors, and deliver safe, high-quality, patient-centered nursing care.

To guide the curriculum design, faculty focused on the National League for Nursing (NLN) core competencies, American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education for Professional Nursing Practice, the American Nurses Association Standards of Clinical Nursing Practice, the American Nurses Associate Code for Nurses, the Institute of Medicine (IOM) Core Healthcare Professional Competencies, and the Indiana Code for Nurses (IC-25-23).

Student success is measured by three separate, interrelated components that include student achievement of all identified student learning outcomes and terminal clinical competencies for the program, program completion, NCLEX-RN licensure examination pass rates, student satisfaction, and job placement.

All didactic and clinical nursing courses in the Baccalaureate Nursing and Baccalaureate Nursing Completion program have been designed to demonstrate achievement of identified program student learning outcomes at three competency levels: Initial Program Competencies, Intermediate Program Competencies, and Terminal Program Competencies. Evaluation of student progress in each course is assessed on this continuum and on how well students meet the learning outcomes that are appropriate to their progression level in the program. Faculty acknowledge that assessment is most effective when it reflects an understanding of learning as multidimensional, integrated, and revealed in performance over time. Student learning outcomes serve as a basis for the accomplishment of all other program-related performance measures and also serve as the basis for approaches to teaching and evaluation.

CRITERION 4.3 (Advanced Practice Nursing): The curriculum is designed to prepare graduates to be information literate and to practice from an evidence-based approach in their advanced practice role.

Faculty in the Department of Advanced Practice Nursing have developed a curriculum that flows from the student learning outcomes to include emphasis on evidence-based practice. Instruction is provided on the importance of utilizing evidence for advanced practice. Assignments are structured to include the use of evidence in clinical practice, nursing education, and nursing administration. Table 4.3.1 illustrates an example of the relationship between student learning outcomes and assignments.

Table 4.3.1 *Relationship of Select Student Learning Outcomes, Course Outcomes, Assignments, and Evaluation*

Student Learning Outcome	Course	Course Outcome	Assignment	Evaluation
A critical thinker who utilizes the intellectually disciplined processes of conceptualizing, applying, analyzing, synthesizing, and evaluating information as a guide for advanced nursing practice:	644 664 670	Validate and extend relevant theory and research findings in the management of common chronic and acute health problems of individuals/families across the lifespan.	Short and expanded SOAP notes Written clinical objectives and self -evaluation	Short and Expanded Soap Notes grading rubric
	697	Critically read a research study to identify its purpose and design, determine whether the components meet generally accepted standards, and evaluate the conclusions.	Translate research to clinical practice	Develop manuscript
An independent provider who is competent to apply evidence-based advanced nursing knowledge, including culturally adaptive care, assessment, prescriptive interventions, evaluation, collaboration, and education	644 664 670	Validate and extend relevant theory and research findings in the management of common chronic and acute health problems of individuals/families across the lifespan.	Short and expanded SOAP notes Written clinical outcomes and self-evaluation	Score on Individual SOAP notes
	697	Work collaboratively with classmates and faculty to develop an evidence based practice guideline for clinical practice.	Evidence-Based Practice Project Manuscript Power Point Presentation of Project	Submission of manuscript for publication Grade on final submission

The culmination of course work involves an evidence-based project. Students completing their concentrations may choose from one (1) of three (3) culminating experiences: completion of an evidence-based project, a thesis, or a culminating project.

To support higher levels of student learning, such as application, analysis, and synthesis of content, faculty strive to move students beyond passive involvement in coursework, such as academic papers and online participation in discussion boards. Students in the Nursing Administration concentration complete a community service learning project in health information technology for a rural hospital or clinic. Students completing the project are encouraged and supported in working individually or collaboratively on peer teams with other healthcare providers on this project. Students completing the Family Nurse Practitioner concentration engage in clinical practice under the auspices of a mentor for a medically-underserved population. Students completing the Nursing Education concentration engage in student teaching in nursing in the classroom or on a clinical unit with a mentor.

Students in an online environment become computer literate, which augments the objective of increasing information literacy. A proactive approach to teaching-learning methods has had positive effects for students in the Department of Advanced Practice Nursing, as evidenced by summative course and program evaluations. In addition, all students in the program have the opportunity to enroll in Nursing Informatics (required for students in the Nursing Administration concentration).

Faculty also discuss student issues and academic progress as part of the ongoing agenda for each departmental meeting and take action to be responsive to students' learning needs based on

feedback and advice from the Chair and faculty colleagues. As part of the ongoing assessment of the curriculum in the Department of Advanced Practice Nursing, student progress is assessed and evaluated in alignment with the competencies for each concentration in the University's Taskstream software program.

CRITERION 4.4 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, and global perspectives.

Corresponding to the increasing social diversity of the United States, faculty at Indiana State University are committed to related health care needs of a multicultural population. Concepts of culture, such as cultural competence, race/ethnicity, gender, spirituality/religion, and social diversity are integrated throughout.

All university students are required to enroll in one Foundational Studies course that focuses on global perspective and cultural diversity and they must demonstrate an understanding of diverse cultures within and across societies. In the Baccalaureate Nursing and Baccalaureate Nursing Completion program, each course integrates content related specifically to ethnicity, cultural concepts, and social diversity as shown in Table 4.4.1. Table 4.4.2 shows cultural concepts for the accelerated second degree track of the Baccalaureate Nursing program.

Table 4.4.1 *Integration of Cultural, Ethnic, and Socially Diverse Concepts within Courses of the Baccalaureate nursing Program and Tracks (including traditional, on-campus and distance education courses)*

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
NURS 104	Nurse's role in a diverse society Definition of terms: culture, diversity, ethnicity	Discussion of terminology-culture and diversity. Reading: <i>Tending Lives</i> by Echo Heron.

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
		Reading: <i>We Band of Angels</i> by Elizabeth Norman.
NURS 106	Cultural competence Ethnocentrism Cultural barriers	Classroom presentation: cultural concepts and overcoming cultural barriers. Reading: cultural variations in grieving. Students from various cultures are asked to share information about their cultural practices and beliefs.
NURS 200	Culture theory Barriers to cultural care Definitions of cultural concepts	Student presentation: information about various cultures related to health assessment. Assignment: cultural paper.
NURS 204	Nutritional customs and practices Interactions with other cultural groups	Culture and nutrition presentation assignment designed to enhance students' knowledge of nutritional customs and beliefs of diverse cultural groups of people and possible nutritional deficiencies.
NURS 208	Cultural differences Cultural competence	Required reading: cultural differences and cultural competence.
NURS 226	Delivery of culturally-sensitive care to patients experiencing mental illness	Required reading: Cultural and Spiritual Issues related to Mental Health Care. Attend a 12-step recovery program meeting and participate in a Community Support Group meeting. Lecture: Introduction to Mental Health/Mental Illness includes cultural competence. Quiz includes cultural concepts.
NURS 228	Cultural differences in responses to medication Cultural factors in relation to blood administration	Lecture: discussion of physiological responses to specific medications, such as avoiding rosuvastatin (Crestor) in those of Asian descent due to increased risk of myopathy. Lecture: discussion of religious beliefs that may prevent the administration of blood and blood products, such as Jehovah's Witness.
NURS 224	Culture factors affecting basic care. Cultural and ethnicity related to medical-surgical health risks.	Case studies: relate cultural and other environmental factors that affect basic care; overview of differences and similarities between and among cultures.
NURS 300	Cultural competence Spirituality/assessment of spirituality	Discussion Board forums related to cultural concepts, including definition of cultural competence. Students discuss how they demonstrate cultural competence in clinical practice. Discussion of how students assess patient's spiritual needs and interventions to meet those needs.

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
		Selected internet readings about cultural competency and spirituality.
NURS 304	Cultural competence Culture and health beliefs	Discussion of personal family's health-related beliefs and practices. Heritage assessment of person from another culture. Immigrant interview including health-related beliefs and practices. Comparison of personal health-related beliefs and practices with those from the interview. Origin of personal and immigrant health-related beliefs and practices with categorizations and rationale.
NURS 324	Cultural factors that affect basic care Provide culturally competent care for the patients with disease processes	Required reading: a recent research article on the topic in question as it references a selected ethnic/gender group. Students are to summarize the important aspects of the journal article and explain how the information provided will serve them/others in their nursing practice. Required reading: assigned readings from the text about cultural and ethnic health disparities. Case studies: cultural factors related to disease processes female with breast cancer or cancers of female reproductive system; men with male reproductive issues; person with HIV/AIDS; management and identification of risk factors for coronary artery disease; discussing similarities and differences among cultures.
NURS 328	Cultural beliefs of families and children Age-specific, culturally sensitive interactions with children	Required reading: cultural concepts in caring for children, in didactic and lab unit readings. Assessment of the hospitalized child who may be from another culture; individualization of care pathway. Assessment of child in day care setting from another culture.
NURS 330	Culturally sensitive care to childbearing woman and family	Case studies: care of Muslim woman (protecting modesty, female caregiver) and woman with female castration. Required reading: textbook topics including multiple cultural beliefs regarding pregnancy and childbirth.
NURS 424	Assessing risk factors and care as they pertain to selected ethnic/gender/age groups.	Case studies: risk factors and care relating to selected ethnic/gender/age groups.
NURS 450	Understand culture, ethnicity, and social diversity	Interview a person from another culture focusing on history of ethnic/racial origin, values orientation, cultural sanctions/restrictions, communication, health-related beliefs and practices, nutrition, and

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
		<p>socioeconomic considerations. Compare and contrast with students' cultural beliefs, values, and practices.</p> <p>Clinical practice experiences in other countries.</p>
NURS 470	<p>Cultural care for individuals, families, and groups</p> <p>Cultural care across the life span</p> <p>Social, economic, legal, ethical concepts</p> <p>Organizational culture</p>	<p>Case studies: ethical issues in working with individuals who have diverse sexual preferences.</p> <p>Discussion of affirmative action issues.</p> <p>Assessment of organizational culture in the workplace. Discussion of questions related to organizational culture.</p> <p>Class debate: Comparison of the U.S. health care system with health care systems of seven other developed world countries.</p> <p>Class debate: Health care access rights for immigrant populations living in the U.S.</p>
NURS 484	<p>Cultural diversity</p> <p>Holistic self-care</p> <p>Holistic practices</p>	<p>Written assignment: Written paper "Through My Eyes" in which students synthesize concepts from practicum experiences (i.e., critical thinking, levels of practice, application of theory to practice, application of research to practice, cultural diversity, caring strategies, holistic self-care, and role definition) into a new, holistic/reflective view of practice.</p>
NURS 486	<p>Traditional healing practices</p> <p>Complementary and alternative medicine therapies</p> <p>Definition: worldview, spirituality, religion</p>	<p>Lecture and discussion related to worldview, culture, and spirituality.</p> <p>Selected textbook and online readings related to culture, spirituality, and worldview.</p> <p>Discussion board topics and questions related to cultural concepts.</p> <p>Group presentation: "Religion and Health Care."</p> <p>Individual presentation: Culture/Spirituality (presentation of another culture including health care beliefs and practices, culturally-sensitive nursing care interventions, spirituality/religious beliefs, and specific cultural practices.</p>

Table 4.4.2 *Integration of Cultural, Ethnic, and Socially Diverse Concepts within Courses of the Baccalaureate Nursing Program and Tracks (accelerated second degree track)*

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
NURS 207	<p>How nurses can help clients clarify their values to facilitate ethical decision making.</p> <p>Identify the moral principles</p>	<p>Lectures, case studies, group discussion</p>

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
	<p>involved in ethical decision making.</p> <p>Concept analysis related to cultural diversity in nursing.</p> <p>Assess clients from a cultural perspective.</p> <p>Plan culturally competent care.</p>	
NURS 209	<p>Culture and nutrition</p> <p>Cultural assessment of patients</p>	<p>Group presentations: assigned groups prepare a class presentation in which nutrition is examined in relation to the assigned cultural group.</p> <p>During patient care, part of the assessment to be turned in relates to a cultural assessment of the assigned patient.</p>
NURS 218	<p>Definitions-ethnopharmacology</p> <p>Transcultural assessment</p> <p>Cultural and pharmacogenetic</p>	<p>Discussion of <i>ethnopharmacology</i>: the study of drug responses that may be unique to those of various cultures.</p> <p>Discussion: Transcultural Assessment Model (Giger & Davidhizar, 2008).</p> <p>Required reading: Cultural and Pharmacogenetic Considerations.</p>
NURS 309	<p>Culture theory</p> <p>Barriers to cultural care</p> <p>Definitions of cultural concepts</p>	<p>Student presentation: information about various cultures related to health assessment.</p> <p>Assignment: cultural paper.</p>
NURS 338	<p>Cultural assessment</p>	<p>Workbook assignments, examination questions, class discussion, and case studies.</p>
NURS 470	<p>Cultural care for individuals, families, and groups</p> <p>Cultural care across the life span</p> <p>Social, economic, legal, ethical concepts</p> <p>Organizational culture</p>	<p>Case studies: ethical issues in working with individuals who have diverse sexual preferences.</p> <p>Discussion of affirmative action issues.</p> <p>Assessment of organizational culture in the workplace. Discussion of questions related to organizational culture.</p> <p>Class debate: Comparison of the U.S. health care system with health care systems of seven other developed world countries.</p> <p>Class debate: Health care access rights for immigrant populations living in the U.S.</p>
NURS 350	<p>Culture factors affecting basic care.</p> <p>Cultural and ethnicity related to</p>	<p>Case studies: relate cultural and other environmental factors that affect basic care; overview of differences and similarities between and among cultures.</p>

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
	medical-surgical health risks.	
NURS 380	<p>Cultural factors that affect basic care</p> <p>Provide culturally competent care for the patients with disease processes</p>	<p>Required reading: a recent research article on the topic in question as it references a selected ethnic/gender group. Students are to summarize the important aspects of the journal article and explain how the information provided will serve them/others in their nursing practice.</p> <p>Required reading: assigned readings from the text about cultural and ethnic health disparities.</p> <p>Case studies: cultural factors related to disease processes.</p>
NURS 364	Legal, ethical, social, and diverse concepts associated with maternal and child health nursing.	<p>Experiential learning activities integrated such as role playing, simulations, small group work, direct patient care, video situations, and community-based observational activities.</p> <p>Identify, analyze, and assess a family for sociocultural influences that might influence their response to childbearing/childrearing.</p> <p>Develop a nursing care plan that implements sociocultural needs and wishes of the families to function within their community.</p>
NURS 444	<p>Cultural diversity</p> <p>Transcultural nursing</p> <p>Culture and socioeconomic factors, culture and nutrition, culture and religion, culture and aging health-related beliefs and practices</p> <p>Role of CHN in improving culturally diverse people, resources for minority health.</p>	Health-related interview with a client from a different culture than the student.
NURS 484	<p>Cultural diversity</p> <p>Holistic self-care</p> <p>Holistic practices</p>	Written assignment: Written paper "Through My Eyes" in which students synthesize concepts from practicum experiences (i.e., critical thinking, levels of practice, application of theory to practice, application of research to practice, cultural diversity, caring strategies, holistic self-care, and role definition) into a new, holistic/reflective view of practice.
NURS 486	<p>Traditional healing practices</p> <p>Complementary and alternative medicine therapies</p> <p>Definition: worldview, spirituality, religion</p>	<p>Lecture and discussion related to worldview, culture, and spirituality.</p> <p>Selected textbook and online readings related to culture, spirituality, and worldview.</p> <p>Discussion board topics and questions related to</p>

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
		<p>cultural concepts.</p> <p>Group presentation: “Religion and Health Care.”</p> <p>Multiple choice examinations related to nursing and culturally competent care.</p> <p>Individual presentation: Culture/Spirituality (presentation of another culture including health care beliefs and practices, culturally-sensitive nursing care interventions, spirituality/religious beliefs, and specific cultural practices.</p>
NURS 490	Review of definitions: cultural assimilation, cultural competence, diversity, dominant culture, ethnicity, ethnocentrism, minority group, race, stereotyping, subculture, values	Review of cultural diversity and health practices as part of NCLEX-RN review.

Student learning opportunities have extended beyond the campus classroom. In fall of 2009, one student who was enrolled in NURS 450 completed 9 weeks of clinical experiences in Finland. The faculty member teaching in NURS 450 traveled to Finland to visit the clinical areas where the student was placed and met with Finnish students who were going to visit the U.S. in spring 2010 in order to establish goals for their visit.

In the spring semester of 2010, students enrolled in the community nursing course from Lappeenranta, Finland spent 8 weeks at ISU and were involved in both classroom and clinical experiences of NURS 450. There was continuous dialogue regarding similarities and differences between health care in the U.S. and Finland during the fall 2009 and spring 2010.

In NURS 300, RN to BS students at ISU and Finnish students discussed health care delivery similarities and differences. In fall 2008, one Finnish student spent time on campus in NURS 300.

Criterion 4.4 (Advanced Practice Nursing): The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.

The curriculum in the Department of Advanced Practice Nursing includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives. The program has a special focus on rural and underserved populations and students are encouraged to seek clinical sites that encompass these populations.

One example of a clinical site that students utilize is St. Ann Clinic in Terre Haute, IN. St. Ann Clinic provides primary health care services and referrals to low-income individuals and families who live at or below the national poverty level, do not have a private physician, and do not have medical insurance, Medicaid, or Medicare.

The clinic is staffed by health care professionals who volunteer their time to the ministry. Area hospitals, medical laboratories, medical testing facilities, and colleges also contribute time and services. The clinic collaborates with pharmaceutical companies to help patients obtain physician-prescribed medications.

Table 4.4.3 *Integration of Cultural, Ethnic, and Socially Diverse Concepts within Courses of the Advanced Practice Nursing Curriculum*

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
NURS 601	Cultural diversity	Module: Human Diversity and Social Issues
NURS 605	Transculturalism Purnell model of cultural competence	Required reading: Fadiman, A. (1997). <i>The spirit catches you and you fall down</i> . New York, NY: Farrer, Straus, and Giroux.

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
		<p>Purnell, L. (2002). The Purnell model for cultural competence. <i>Journal of Transcultural Nursing</i>, 13(3), 193-196.</p> <p>Camposino, M. (2008). Beyond transculturalism: Critiques of cultural education in nursing. <i>Journal of Nursing Education</i>, 4(7), 298-304.</p>
NURS 624	Cultural, nutritional, and developmental considerations when evaluating clients	<p>Module: Introduction to health promotion and prevention.</p> <p>Lecture: Culture and Nursing Care</p> <p>PowerPoint: Cultural/Spiritual Assessment</p>
NURS 644	Improving cultural competence	<p>Module: The Journey to Cultural Competence</p> <p>Module: Poverty</p> <p>Develop a plan for improving cultural competence</p> <p>Select strategies you can use to help overcome the impact poverty have on the health of your patients.</p> <p>Assignment: Expanded notes to include ethical consideration</p>
NURS 645	Pharmacological effectiveness, financial considerations with clients in poverty	Lecture/PowerPoint: Pharmacology
NURS 664	Culturally competent care Theoretical basis of culturally competent care	<p>Lecture/PowerPoint: Culturally Competent Care</p> <p>Describe how your own cultural background influences the care you provide.</p> <p>Identify cultural considerations in the population that is the recipient of care.</p> <p>Assignment: Expanded notes to include ethical consideration</p>
NURS 670	Impact of culture and environment on health seeking	Lecture/PowerPoint: Medical Management

Nursing Course	Cultural, Ethnic, and Socially Diverse Concepts	Examples of Student Learning Activities
	behaviors	Assignment: Expanded notes to include ethical consideration
NURS 635 NURS 675	Four paradigms of nursing: environment, nursing, health, client/recipient of care	635: Assignment: Personal Practice Framework Paper development 675: Assignment: Revision of Personal Practice Framework Paper
NURS 662	Assessment and measurement of learning outcomes for cultural and/or generational diverse population and for selected populations	Lecture/PowerPoint: Educational Measurement and Assessment
NURS 673	Age, gender, culture	Assignment: Assessment of Student Learning Styles, Age, Gender, and Culture Lecture/PowerPoint: Educational Practices

CRITERION 4.5 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.

A variety of evaluation methodologies have been developed to measure student learning and program outcomes and include both formative and summative assessment techniques for all courses and programs. Evaluation methods are consistent with course outcomes and reflect professional and practice competencies. Students' performances are evaluated in the didactic and clinical components of each course. Learning outcomes are presented

in syllabi along with unit outcomes; these are based on outcomes presented in Table 4.1.1 in Criterion 4.1.

Grading is consistent within levels and across programs. While the University does not prescribe a grading scale for determining course grades, faculty in the Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing have approved a grading scale. Students receive a letter grade at the end of each semester that corresponds to the percentage earned. The following grading scale was implemented for all undergraduate and graduate nursing courses in fall 2000:

98-100%	A+	75-77%	C
93-97%	A	70-74%	C-
90-92%	A-	68-69%	D+
87-89%	B+	65-67%	D
83-86%	B	60-64%	D-
80-82%	B-	<60%	F
78-79%	C		

Differences exist between the undergraduate and graduate grading scale. No D grades are issued for graduate courses; an F is assigned to any work that earns less than 70%. The change in grade requirement for nursing courses was made in an effort to increase student achievement throughout the nursing programs.

Students in the baccalaureate nursing program and baccalaureate nursing completion tracks must achieve a minimum grade of C (75%), as well as a satisfactory performance for the clinical component in each nursing course. A failed nursing course may be repeated only one time; failure of any nursing course for a second time will result in dismissal from the program.

A failed cognate course in the baccalaureate nursing curriculum may be repeated only one time. A cognate course is one that is allied with, and provides support for, nursing courses. Failure of any cognate for a second time will result in dismissal from the program. Failure of any three (3) cognate courses will result in dismissal from the program. Failed cognate science courses, and their laboratory, count as one course. Students dismissed from the nursing program will not be considered for readmission for a period of five (5) years.

Evaluation methods used to measure both student learning and program outcomes in didactic courses are varied. These methods include the use of multiple choice exams to reflect NCLEX-style questions, a commercially available assessment package from Assessment Technologies Institute® (ATI), case studies, concept mapping, discussion board participation, group projects, oral presentations, debates, and individual written assignments. Assignments are developed to facilitate achievement of program and course outcomes and to develop professional skills such as public speaking and writing. The most recent edition of the Publication Manual of the American Psychological Association (APA) is required for completing written assignments. Information about this resource is available to students on the nursing and course websites.

Beginning in 2008, the faculty chose ATI products to help students with course content and as an evaluation tool. Faculty had assessed a decline in NCLEX-RN licensure examination pass rates and wanted a standardized product to evaluate students' performances in nursing courses. Faculty believe that the materials (books, DVDs, and online practice and proctored testing covering major content areas in nursing) are

relevant, current, and provide an excellent means for students to understand content areas. ATI products help provide students with the means for individual remediation. Faculty can track students' progress through ATI results. Students can use the focused remediation to review content areas needing improvement.

Once students are admitted to the nursing major, their performance is tracked in the following courses with the appropriate ATI content mastery exam:

- NURS 204 Fundamentals of Nursing Practice (Critical Thinking Entrance)
- NURS 224 Nursing Care of Adults I (Fundamentals)
- NURS 226 Nursing in Mental Illness (Mental Health)
- NURS 328 Nursing Care of Children and Families (Nursing Care of Children)
- NURS 330 Nursing Care of the Childbearing Family (Maternal Newborn)
- NURS 424 Nursing Care of Adults III (Pharmacology, Adult Medical-Surgical)
- NURS 450 Nursing Care in the Community (Community Health)
- NURS 470 Nursing Leadership (Leadership)
- NURS 486 Professional Nursing Synthesis (Critical Thinking Exit, RN Comprehensive Predictor)

The Nutrition exam was added to NURS 450 beginning in fall 2010; it has since been moved to NURS 324. The ATI policy is located at

<http://www.indstate.edu/nursing/programs/testing/ati-exams.htm>.

Students are notified at midterm if their grades are less than satisfactory, either in the didactic or clinical portion of the course. At any time during the semester, faculty counsel students whose grades are below passing to assist them in developing and implementing a remediation plan.

Clinical evaluation tools are utilized in courses with a clinical component and are based on student learning outcomes and specific performance criteria by which students are evaluated. Feedback is provided consistently to students during the clinical rotation at midterm and at the completion of the clinical experience. The grading on the evaluation tool is either a “satisfactory” or “unsatisfactory” rating in the criteria of the outcomes. Guidelines for what constitutes the two ratings are included in the tool and explained to the students at the start of the each course. If a student demonstrates unsafe practice during the clinical experience, the instructor will provide appropriate teaching, counseling, and feedback. The design of clinical experiences varies between and among nursing courses. The baccalaureate nursing program has a final clinical practicum course to provide a transition to real world nursing practice and expectations.

Advanced Practice students utilize a diverse mix of evaluation methodologies in the didactic and clinical settings in order to assess student learning and program outcomes. Among the assessment tools used are multiple choice exams, discussion board participation, case studies, SOAP notes, clinical logs, group projects, individual writing assignments, evidence based practice projects and portfolios. Additional assignments are developed in order to facilitate achievement of course outcomes. All testing is completed online.

In an effort to prepare them for the national certification examination, students in the Family Nurse Practitioner track are required to take two purchased examinations provided by Advanced Practice Education Associates (APEA). These examinations are administered in the last semester of study, one at the beginning of the semester and one at

the end of the semester. Results from the APEA examinations are used to determine any gaps that may exist in the curriculum and to provide a guide for improvement of outcomes. In the clinical setting, clinical evaluation tools are used in order to determine the effectiveness of the clinical learning environment and are based on the student learning outcomes. These tools reflect an evolution in skills and knowledge obtained as the student progresses through the program of study.

Students in Advanced Practice Nursing are graded according to the policies of the College of Graduate and Professional Studies and must maintain a 3.0 average. Academic policies, grievance policies, and academic integrity policies have been discussed in Standard 3.

CRITERION 4.6 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.

The learning theories that provide the foundation for curriculum and instructional processes revolve around cognitive and ethical development, adult learning theory, and experiential learning. Although faculty are not limited in their theoretical underpinnings, they are oriented to the major principles of William Perry's (1970) Scheme of Intellectual and Ethical Development, Malcolm Knowles's (1973) Principles of Adult Learning, and David Kolb's (1984) Experiential Learning Cycle.

The application of Perry's Scheme of Intellectual and Ethical Development helps students move through four (4) positions; the first position, dualism, is one in which

students believe that knowledge is certain and unambiguous and that there is a right or wrong answer to every question. In the second position, multiplicity, students believe that knowledge is subjective. In the third position, contextual-relativism, students recognize that, even when knowledge is uncertain, they must apply critical thinking skills. In the last position, context-appropriate decisions, students construct knowledge by learning from others with personal experience and through reflection. Perry's theory supports the development of the student's clinical reasoning and critical thinking skills.

Knowles's adult learning model provides the nurse educator with a deeper appreciation of the learning needs of the non-traditional student and is useful for both undergraduate and graduate students. Providing these learners with self-directed activities and using life experiences that focus learning on goal-oriented, relevancy-oriented, and practical knowledge and skills will support student success and respect.

Kolb's model supports clinical education based on doing or watching and engaging in transforming experiences that result in reflective feeling and thinking. Kolb's theory also provides a model for learning styles and learning preferences. Teaching that incorporates various learning styles maximizes student success in mastering content and achieving student learning outcomes.

Interprofessional learning is valued by the College of Nursing, Health, and Human Services. Collaboration is structured into interprofessional simulation activities, foundational studies courses, such as biomedical ethics, and shared faculty meetings to

strengthen student learning outcomes through cognate courses such as chemistry, microbiology, anatomy, and physiology. Faculty in the Department of Advanced Practice Nursing collaborate through non-nursing courses such as epidemiology and statistics and open the nursing courses of informatics and cultural competencies to all graduate healthcare majors.

Educational research and best practice standards in education are drawn from journals, conferences, and national organizations. The free online in-service education offerings from the American Association of Colleges of Nursing have been a source of current educational best practice standards and innovative faculty discussions. In addition, the regional accreditation body, the Higher Learning Commission of the North Central Association, has also adapted best practice standards in distance education and this information is used as a guide in evaluation of online offerings.

At the beginning of each course, faculty review the syllabus, including methods of instruction, students responsibilities, evaluation methods, course and unit outcomes, and course supplemental materials with students. Each faculty member uses a variety of teaching/learning methods. For courses with a clinical component, faculty review the clinical expectations within that course with students. Faculty are committed to providing students with the necessary skills to deliver safe, patient-centered care in response to established professional competencies and standards. Best nursing practices, taught by faculty, also guide lecture, lab, and clinical activities.

Faculty stay current on best practice standards through library resources, attendance at local, regional, national, and international nursing conferences, enrollment in formal courses, and journal subscriptions. In the lecture setting, faculty integrate information about best practices. Students learn from lectures, readings, and the use of case studies. Some faculty members require library and internet searches for related evidence-based research.

Faculty integrate technology into the classroom with the use of the Blackboard Learn platform, simulated electronic medical records, as well as other alternate methods of instructional delivery. The use of Blackboard Learn and other technologies is an integral part of the delivery methods. Faculty continue to move from teaching content to providing learning experiences that move the student from a passive to a more active role in the learning process. Because students cannot memorize the entire body of nursing knowledge, faculty focus efforts on integrating methods of delivering content with learning activities to promote critical thinking, sound reasoning, and decision making skills. Content delivery, both in the classroom or online, is consistent with various learning styles including visual and auditory styles.

Students practice in clinical settings under the supervision and guidance of faculty members or clinical preceptors. Practice settings allow students to incorporate activities learned in the classroom and laboratory settings into situations in which they are assigned patient care.

Students in the Department of Baccalaureate Nursing Completion and Department of Advanced Practice Nursing are adult learners who are highly motivated and focused on furthering their knowledge and expertise. The online delivery design allows students to be flexible in degree attainment that they might not otherwise achieve due to other responsibilities. Faculty support students through continuous advising in attaining their educational goals while recognizing other role conflicts.

As a result of their learning styles and non-traditional roles, graduate students are seeking different ways of meeting their educational pursuits. Faculty help students achieve their needs through a variety of teaching/learning methods that are incorporated from distance education pedagogical principles.

Faculty in the Department of Advanced Practice Nursing utilize Chickering and Gamson's (1987) work on the best practices in nursing education and apply it to online education. These seven principles of good practice standards promote student-faculty contact, cooperation among students, prompt feedback, active learning, time on task, high expectations, and respect diverse talents and ways of learning. Courses are currently self-evaluated for effective use of these principles. The self-evaluations are then discussed with other department faculty in an effort to ensure that these principles are met in all online graduate courses. Technological advances support implementation of the best practices by allowing faculty to have different avenues by which to present and evaluate content and student learning outcomes.

As a part of an interdisciplinary team, APN faculty developed and moderated case studies for an interdisciplinary seminar for students in the department as well as other students in all areas of health care studies. The purpose of this experience was to provide students from all disciplines with the opportunity to interact and actively engage in discussions related to a particular patient case. The interdisciplinary seminar was met with enthusiasm from students and will undoubtedly be repeated annually. A faculty from the department will represent the advanced practice nurse's role on the planning committee.

Evidence-based practice and research are essential elements to students in all concentrations in the Department of Advanced Practice Nursing. NURS 697, Evidence Based Practice for Advanced Practice Nursing, is offered as a culminating experience and is designed to prepare students to base clinical decision making on current research. Problem-based learning is used to examine clinical research, develop evidence-based guidelines based on that research, and design an evaluation plan to determine the effectiveness of the guidelines. Students disseminate their work through a professional podium and/or poster presentation or publication in a peer-reviewed journal.

CRITERION 4.7 (Baccalaureate Nursing, Baccalaureate Nursing Completion): Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.

The undergraduate program length is congruent with program outcomes. The Baccalaureate Nursing Program has 124 credit hours, consistent with the policies of the University, Indiana and national standards, and best practices. Tables 4.7.1, 4.7.2, and

4.7.3 illustrate the programs of study for the current traditional baccalaureate nursing track, the revised traditional baccalaureate nursing track, and the second degree accelerated baccalaureate nursing track, respectively. Both the traditional campus track and the revised campus track are designed to be completed in an eight semester full-time program of study. The second degree accelerated campus track is designed to be completed in four full-time semesters, but extends over fifteen consecutive months.

The undergraduate baccalaureate degree completion tracks consist of a six (6) semester full-time program of study for the LVN/LPN to BS in nursing and a four (4) semester full-time program of student for the RN to BS in nursing. All undergraduate programs may be completed on a full-time or part-time schedule.

Table 4.7.1 *Baccalaureate Degree in Nursing Traditional Campus Track (2001-Spring 2011)*

First Year					
First Semester (18 credits)			Second Semester (17 credits)		
NURS 104	Introduction to Professional Nursing	2	NURS 106	Mental Health Aspects of Nursing	2
BIO 231	Human Anatomy	2	BIO 241	Human Physiology	2
	BIO 231L Human Anatomy Lab	1		BIO 241L Human Physiology Lab	1
<i>or</i>			<i>or</i>		
ATTR 210	Human Anatomy for Allied Health Professions		PE 220	Human Physiology for Allied Health Professions	
	ATTR 210L Human Anatomy Lab			PE 220L Human Physiology Lab	
ENG 107	Rhetoric and Writing	3	BIO 274	Intro to Microbiology	2
COMM 101	Intro to Speech Communications	3		BIO 274L Microbiology Lab	1
PSY 101	General Psychology: Understanding Human Behavior	3	Math or QL (1 course)		
CHEM 100	Chemistry: Reactions and Reasons	3	Health & Wellness (1 course)		
	CHEM 100L Chemistry Lab	1	Literary Studies (1 course)		
Second Year					
First Semester (14-17 credits)			Second Semester (14-17 credits)		
NURS 200	Assessment of the Adult	3	NURS 224	Nursing Care of Adults I	5
NURS 204	Fundamentals of Nursing Practice	5	NURS 226	Nursing in Mental Illness	3
NURS 228	Clinical Pharmacology	3	EPSY 221 <i>or</i> PSY 266	Developmental Psychology	3
SOC 101	Intro to Sociology	3	Historical Studies (1 course)		
Non-Native Language (1 course) <i>if needed</i>			Non-Native Language (1 course) <i>if needed</i>		
Third Year					
First Semester (17 credits)			Second Semester (17 credits)		
NURS 318	Nursing Care of Families in Stress and Crisis	3	NURS 322	Research: Theoretical Basis for Nursing Practice	3
NURS 328	Nursing Care of Children and Families	4	NURS 324	Nursing Care of Adults II	5
NURS 330	Nursing Care of the Childbearing Family	4	Junior Composition (1 course)		
BIO 412	Pathophysiology	3	Ethics & Social Responsibility (1 course)		
HLTH 340	Health Biostatistics	3	Upper-Division Integrative Elective (1 st of 3)		
<i>or</i>					
EPSY 302	Introduction to Applied Psychological Statistics	3			
Fourth Year					
First Semester (14 credits)			Second Semester (15 credits)		
NURS 424	Nursing Care of Adults III	5	NURS 470	Nursing Leadership	3
NURS 450	Nursing Care in the Community	6	NURS 484	Reflective Nursing Practice	3
Upper-Division Integrative Elective (2 nd of 3)			NURS 486	Professional Nursing Synthesis-Approved as Upper-Division Integrative Elective (3 rd of 3)	3
			Global Perspectives & Cultural Diversity (1 course)		
			Fine & Performing Arts (1 course)		

Table 4.7.2 *Baccalaureate Degree in Nursing Traditional Campus Track (Fall 2011)*

First Year					
First Semester (18 credits)			Second Semester (15-18 credits)		
NURS 104	Introduction to Professional Nursing	2	SOC 101	Introduction to Sociology	3
BIO 231	Human Anatomy	2	BIO 241	Human Physiology	2
	BIO 231L Human Anatomy Lab	1		BIO 241L Human Physiology Lab	1
<i>or</i>			<i>or</i>		
ATTR 210	Human Anatomy for Allied Health Professions		PE 220	Human Physiology for Allied Health Professions	
	ATTR 210L Human Anatomy Lab			PE 220L Human Physiology Lab	
ENG 101 or 107	Rhetoric and Writing (based on SAT/ACT scores)	3	BIO 274	Intro to Microbiology	2
COMM 101	Intro to Speech Communications	3		BIO 274L Microbiology Lab	1
PSY 101	General Psychology: Understanding Human Behavior	3	Math or QL (1course)		
CHEM 100	Chemistry: Reactions and Reasons	3	Health & Wellness (1 course)		
	CHEM 100L Chemistry Lab	1	ENG 105 (if ENG 101 taken first semester)		
Second Year					
First Semester (12-15 credits)			Second Semester (15-18 credits)		
FCS 201	Fundamentals of Nutrition	3	NURS 207	Nursing Perspectives	3
HLTH 340	Health Biostatistics	3	NURS 209	Essentials of Nursing Practice	5
<i>or</i>			NURS 218	Pharmacotherapeutics	4
EPSY 302	Introduction to Applied Psychological Statistics		Fine and Performing Arts (1 course)		
Literary Studies (1 course)			Non-Native Language (1 course) <i>if needed</i>		
Historical Studies (1 course)					
Non-Native Language (1 course) <i>if needed</i>					
Admission to the Nursing Major					
Third Year					
First Semester (17 credits)			Second Semester (17 credits)		
NURS 224	Nursing Care of Adults I	5	NURS 364	Maternal and Child Health Nursing	6
NURS 338	Mental Health Nursing	4	NURS 324	Nursing Care of Adults II	5
NURS 309	Adult Assessment	2	NURS 470	Nursing Leadership	3
NURS 322	Research: Theoretical Basis for Nursing Practice	3	ENG 305 or 305T		
EPSY 221 <i>or</i> PSY 266	Developmental Psychology	3			
Fourth Year					
First Semester (15 credits)			Second Semester (14 credits)		
NURS 424	Nursing Care of Adults III	5	NURS 484	Reflective Nursing Practice	3
NURS 444	Community Health Nursing	4	NURS 486	Professional Nursing Synthesis-Approved as Upper-Division Integrative Elective (2 nd of 3)	3
Upper-Division Integrative Elective (1 st of 3)			NURS 490 Licensure Preparation Course		
Ethics and Social Responsibility (1 course)			Upper-Division Integrative Elective (3 rd of 3)		
			Global Perspectives and Cultural Diversity (1 course)		

Table 4.7.3 *Baccalaureate Degree in Nursing–Accelerated Second Degree Track (Summer 2011)*

(Pre-nursing Requirements)			First Semester (Summer)		
ATTR 210	Human Anatomy for Allied Health Professions	2	NURS 207	Nursing Perspectives	3
	ATTR 210L Human Anatomy Lab	1	NURS 209	Essential Nursing Practice	5
	<i>or</i>				
BIO 231	Human Anatomy		NURS 218	Pharmacotherapeutics	4
	BIO 231L Human Anatomy Lab		NURS 322	Research: Theoretical Basis for Nursing Practice	3
			Second Semester (Fall)		
PE 220	Human Physiology for Allied Health Professionals	2	NURS 309	Adult Assessment	2
	PE 220 Human Physiology Lab	1	NURS 338	Mental Health Nursing	4
	<i>or</i>				
BIO 241	Human Physiology		NURS 470	Nursing Leadership	3
	BIO 241L Human Physiology Lab		NURS 350	Adult Health I	6
			Third Semester (Spring)		
BIO 274	Intro to Microbiology	2	NURS 380	Adult Health II	9
	BIO 274L Microbiology Lab	1	NURS 364	Maternal and Child Nursing Care	6
			Fourth Semester (Summer)		
CHEM 100	Chemistry: Reactions and Reasons	3			
	CHEM 100L Chemistry Lab	1	NURS 444	Community Health Nursing	4
PSY 101	General Psychology: Understanding Human Behavior	3	NURS 484	Reflective Nursing Practice	3
FCS 201	Fundamentals of Nutrition	3	NURS 486	Professional Nursing Synthesis	3
EPSY 221 <i>or</i> PSY 266	Developmental Psychology	3	NURS 490	Licensure Preparatory Course	2
HLTH 340	Health Biostatistics	3			
	<i>or</i>				
EPSY 302	Introduction to Applied Psychological Statistics				

Undergraduate students in the Departments of Baccalaureate Nursing and Baccalaureate Nursing Completion complete courses from Foundational Studies as required by the University. There are thirteen (13) categories of courses in the Foundational Studies: composition, communication, quantitative literacy/mathematics, non-native language, health and wellness, science and laboratory, social and behavioral sciences, literary studies, fine and performing arts, historical studies, global perspective and cultural diversity, ethics and social responsibility, and integrative and upper division electives.

One nursing course, NURS 486 Professional Nursing Synthesis, is approved as an integrative and upper division elective for students in the nursing major. Learning outcomes for each of the courses in the Foundational Studies program evolve from its program outcomes:

1. Locate, critically read, and evaluate information to solve problems.
2. Critically evaluate the ideas of others.
3. Apply knowledge and skills within and across the fundamental ways of knowing (natural sciences, social and behavioral sciences, arts and humanities, mathematics, and history).
4. Demonstrate an appreciation of human expression through literature and fine and performing arts.
5. Demonstrate the skills for effective citizenship and stewardship.
6. Demonstrate an understanding of diverse cultures within and across societies.
7. Demonstrate the skills to place their current and local experience in a global, cultural, and historical context.
8. Demonstrate an understanding of the ethical implications of decisions and actions.
9. Apply principles of physical and emotional health to wellness.
10. Express themselves effectively, professionally, and persuasively both orally and in writing.

In addition, cognate courses (those courses that are allied with and provide support for nursing courses) for the nursing program must be completed. Table 4.7.4 lists cognate courses and their contribution to the nursing program.

Table 4.7.4 *Cognate Courses and Their Contribution to the Baccalaureate Nursing, Baccalaureate Second-degree Accelerated, and Baccalaureate Nursing Completion Program*

Course	Contribution
ENG 107 Rhetoric and Writing	Writing documented papers, synthesizing information from several different sources, application of rhetorical principles to critical reading and effective writing.
ENG 305 Advanced Expository Writing <i>or</i> ENG 305T Technical Writing	Writing reports, proposals, reviews, and papers in styles appropriate to various professional and academic activities, with emphasis on discovering arguments and arranging material. Writing in conventions, formats, and styles applicable to internal, world-of-work settings.
COMM 101 Introduction to Speech Communication	Basic principles and practices of oral communication.
SOC 101 Introduction to Sociology	History of sociology, the work of its early and contemporary contributors, essential concepts, research methods, theory, and applications.
PSY 101 General Psychology: Understanding Human Behavior	Selective study of how heredity and the environment affect human thought, emotion, and actions.
PSY 266 Developmental Psychology <i>or</i> EPSY 221 Developmental Psychology	Overview of human development through the life span and comprehensive coverage of basic developmental concepts and principles. Research methods and application of research findings will be discussed. Overview of human development from conception to death. Analysis and application of research to further understandings of physiological and psychological factors affecting individual development and adjustment throughout life.
FCS 201 Fundamentals of Nutrition (not required in current BS program)	Principles of nutrition; scientific basis for determination of nutrient requirements and interrelationships of nutrients; application to personal and family health, national and international health issues.
HLTH 340 Health Biostatistics <i>or</i> EPSY 302 Introduction to Applied Psychological Statistics	Introduction to statistical methods as applied to the study of health and safety risk evaluation; census and vital data; human mortality, morbidity, and natality. Topics include measures of central tendency, variability, displays of data, selected sampling distributions probability, hypothesis testing, correlation, and regression. Organization and presentation of data, measures of central tendency and variability, correlation and probability, and statistical inference including simple analysis of variance.
CHEM 100/L Chemistry: Reactions and Reasons/Lab <i>or</i> Higher level chemistry course	Enhances scientific literacy by providing a basic understanding of scientific principles with an emphasis on chemistry and biochemistry as well as their application to current topics, including atmospheric ozone depletion, water pollution, nutrition, pharmaceuticals, and others.
BIO 231/L Human Anatomy/Lab <i>or</i> ATTR 210/L Human Anatomy for Allied Health Professionals/Lab	The skeletal, muscular, nervous, circulatory, respiratory, excretory, digestive, reproductive, and endocrine systems of human beings are studied in relation to their anatomy and histology. The study of human tissues, organs, and systems and how they relate to concepts in physical medicine, physical activity, and health.
BIO 241/L Human Physiology <i>or</i> PE 220 Human Physiology for Allied Health Professionals/Lab	The skeletal, muscular, nervous, circulatory, respiratory, excretory, digestive, reproductive, and endocrine systems of human beings are studied in relation to their physiology. Human physiological systems will be studied as they relate to normal body functioning at rest and during exercise.
BIO 274/L Introductory Microbiology/L	The study of the structure and physiology of microorganisms and their relation to health, sanitation, agriculture, and industry. A general course for students majoring in areas other than life sciences.

Remaining Foundational Studies courses not included in the list of cognates for the major range from 24-30 credits. These courses include non-native language (0-2 courses), literary studies (1 course), fine and performing arts (1 course), historical studies (1 course), global perspective and cultural diversity (1 course), ethics and social responsibility (1 course), and integrative and upper division electives (3 courses, one of which is NURS 486, Professional Nursing Synthesis).

The RN to BS track builds on knowledge gained through liberal studies and foundational nursing courses in an associate degree or diploma program. The track offers registered nurses an alternative curriculum through which they can earn the baccalaureate degree. All courses in this track are offered in the online modality.

Registered nurses who wish to gain admission to the baccalaureate degree program must have earned an associate degree with a major in nursing from a program accredited by the National League for Nursing Accrediting Commission (NLNAC) in an accredited collegiate institution. Application of a graduate from a diploma program or an associate degree program that is not accredited will be evaluated through an Admission Portfolio review.

Students in the RN to BS track of the baccalaureate nursing program also complete 124 credit hours. The track consists of 29 credit hours of required nursing courses and nine (9) additional credit hours of required support courses. Once students are admitted to the University, they may transfer as many as 94 credit hours (36 credit hours are transferred with an Associate of Science with a major in nursing). Students who have earned an

associate degree at an accredited regional campus or at Indiana State University have met all of the requirements of the Foundational Studies courses except for Junior level composition (1 course), Ethics and Social Responsibility (1 course), and Integrative Upper Division Electives (3 courses or other permitted substitutions). Students must complete 50 hours of 300/400 level courses to meet University requirements for graduation. Table 4.7.5 illustrates the RN-BS track of the baccalaureate nursing program of study.

Table 4.7.5 *RN-BS Track of the Baccalaureate Nursing Program of Study*

First Year					
First Semester (14 credits)			Second Semester (12 credits)		
BIO 412	Pathophysiology	3	ENG 305	Advanced Expository Writing <i>or</i>	3
NURS 300	Transition to Professional Nursing Practice	4	ENG 305T	Technical Writing	
NURS 304	Comprehensive Health Assessment for Nursing Practice	4	NURS 318	Nursing Care of Families in Stress and Crisis	3
EPSY 302	Introduction to Applied Psychological Statistics <i>or</i>	3	NURS 322	Research/Theoretical Basis for Nursing Practice	3
HLTH 340	Health Biostatistics		Literacy Studies Course		
Second Year					
First Semester (15 credits)			Second Semester (15 credits)		
NURS 450	Population-Based Community Health Nursing	6	NURS 470	Nursing Leadership	3
Fine and Performing Arts Elective			NURS 484	Reflective Nursing Practice	3
Ethics and Social Responsibility Elective			NURS 486	Professional Nursing Synthesis- Approved as Upper-Division Integrative Elective	3
Junior/Senior (300/400) Level elective if needed		3	Historical Studies Elective		
Integrative Upper-Division Electives (need 3 throughout the program of study)			Global Perspectives and Cultural Diversity Elective		

Students in the LVN/LPN to BS track of the baccalaureate nursing program complete 124 credit hours. The LVN/LPN to BS track is a means through which LVN/LPNs may complete a baccalaureate degree with a major in nursing and achieve eligibility to apply

to take the NCLEX-RN licensure examination. After students have enrolled and completed challenge exams, the track consists of 41 credit hours of nursing courses and 15 credit hours of required support courses. Once students are admitted to the University, they must meet prerequisite requirements in nursing and support courses.

Nursing courses that must be successfully challenged prior to admission include: NURS 106, Mental Health Aspects of Nursing Practice (2 credits); NURS 224, Nursing Care of Adults (5 credits); NURS 328, Nursing Care of the Child and Family (4 credits); and NURS 330, Nursing Care of the Childbearing Family (4 credits). Customized study materials (CSMs) have been prepared for these courses by faculty and are available through The College Network (800-395-3276). Nursing challenge exam instructions are available at <http://www.indstate.edu/nursing/pdfs/testing-program-docs/nursing-challenge-exam-instructions.pdf>. Students complete the proctored exams online through the ISU Blackboard Learn website.

Prerequisite support courses must be successfully completed and may be taken in a community college or university setting or credit may be obtained through credit by examination through testing services at Indiana State University Testing. Testing products include the College-Level Examination Program (CLEP), Dantes Standardized Subject Tests (DSST), and Excelsior College. Table 4.7.6 lists the prerequisite courses and testing product. General education modules from The College Network are American Council on Education (ACE) accredited. Table 4.7.7 illustrates the LVN/LPN-BS track of the baccalaureate nursing program of study.

Table 4.7.6 *Testing Service and Prerequisite Courses in Which Students Can Receive Credit by Examination*

Testing Service	Prerequisite Course	
College-Level Examination Program (CLEP)	CHEM 100/L ENG 101	MATH PSY 101
Dantes Standardized Subject Tests (DSST)	COMM 101 ENG 105 (prerequisite waived if student completes ENG 305) ENG 305	CS 101
Excelsior College	BIO 231/L BIO 241/L BIO 274/L	

Table 4.7.7 *LVN/LPN-BS Track of the Baccalaureate Nursing Program of Study*

First Year					
First Semester (13 credits)			Second Semester (9 credits)		
NURS 208	Transition from LVN/LPN to BS in Nursing	3	BIO 412	Pathophysiology	3
NURS 304	Comprehensive Health Assessment for Nursing Practice	4	NURS 226	Nursing in Mental Illness	3
SOC 101	Introduction to Sociology	3	EPSY 302	Introduction to Applied Psychological Statistics <i>or</i>	3
EPSY 221	Development Psychology <i>or</i>	3	HLTH 340	Health Biostatistics	
FCS 103	Human Development with the Family Context <i>or</i>				
PSY 266	Developmental Psychology				
Second Year					
First Semester (15 credits)			Second Semester (14 credits)		
ENG 305	Advanced Expository Writing <i>or</i>	3	NURS 322	Research/Theoretical Basis for Nursing Practice	3
ENG 305T	Technical Writing		NURS 324	Nursing Care of Adults II	5
NURS 318	Nursing Care of Families in Stress and Crises	3	Fine and Performing Arts Elective		
PE 101	Fitness for Life	2	Ethics and Social Responsibility Elective		
PE101L	Fitness for Life Laboratory	1	Integrative Upper-Division Electives (need 3 throughout the program of study)		
Literacy Studies elective					
300/400 Level Elective		3			
Third Year					
First Semester (14 credits)			Second Semester (12 credits)		
NURS 424	Nursing Care of Adults III	5	NURS 470	Nursing Leadership	3
NURS 450	Population-Based Community Health Nursing	6	NURS 484	Reflective Nursing Practice	3
Global Perspectives and Cultural Diversity Elective			NURS 486	Professional Nursing Synthesis-Approved as Integrative Upper-Division Elective	3
			Historical Studies Elective		

CRITERION 4.7 (Advanced Practice Nursing): Program length is congruent with the attainment of outcomes.

Program length for all master's degree concentrations range from two to three years, depending on the concentration selected. Students may attend either full-time or part-time, depending on their preference and the availability of clinical start dates with the majority of students attending on a part-time basis. All courses in the Advanced Practice Nursing program are delivered online.

All concentrations in the program have the following core courses: NURS 601, NURS 605, and Graduate statistics for a total of 9 credit hours with an additional 3 credit hours for Research. These courses serve as the foundation to the specialty concentration of choice: Family Nurse Practitioner, Nursing Education, or Nursing Administration.

Family Nurse Practitioner concentration: This concentration is comprised of a total of 48-51 credit hours, including 12 credit hours for core courses, 3-6 credit hours for the culminating experience, and 33 credit hours for concentration-specific courses as well as role-specific courses.

Nursing Administration concentration: A total of 32-38 credit hours are required for the nursing administration concentration. In addition to the core courses and culminating experience, students in this track take 6 credit hours of guided elective, and the remaining credit hours are concentration-specific.

Nursing Education concentration: Along with the core courses and culminating experience, students in the nursing education concentration take 14 credit hours that are concentration-specific and 6 credit hours of guided electives for a total of 34-37 hours.

Students in all concentrations are required to complete a culminating experience.

Students may choose from one (1) of three (3) culminating experiences: completion of an evidence-based project, a thesis, or a culminating project. The culminating experience varies from 3-6 credit hours.

Tables 4.7.8, 4.7.9, 4.7.10 illustrate the program of study for the Family Nursing Practitioner concentration, the Nursing Administration concentration, and the Nursing Education concentration, respectively.

Table 4.7.8 *Family Nurse Practitioner Concentration*

First Year					
First Semester (9 credits)			Second Semester (9 credits)		
NURS 601	Health Care Perspectives	3	BIO 633	Advanced Pathophysiology	3
NURS 605	Nursing Theory Development	3	NURS 633	Nursing Research	3
EPSY 612	Statistical Methods	3	NURS 645	Pharmacology for Family Nurse Practitioners	3
or HLTH 604	Research Design and Data Analysis in Health and Human Performances				
Second Year					
First Semester (5 credits)			Second Semester (8 credits)		
NURS 624	Health Assessment & Health Promotion for Advanced Nursing Practice	4	NURS 644	Theoretical Foundations of Family Health Care: Management of Common Chronic and Acute Health Problems I	7
NURS 635	Family Nurse Practitioner Role I	1	NURS 646	Diagnostic Lab for Family Nurse Practitioners	1
Third Year					
First Semester (8 credits)			Second Semester (9 credits)		
NURS 664	Theoretical Foundations of Family Health Care: Management of Common Chronic and Acute Health Problems II	8	NURS 670	Family Nurse Practitioner Preceptorship	5
			NURS 675	Family Nurse Practitioner Role II	1
			NURS 697	Evidence-Based Practice <i>or</i>	3
			NURS 698	Culminating Project <i>or</i>	
			NURS 699	Master's Thesis	

Table 4.7.9 *Nursing Administration Concentration*

First Year					
First Semester (6 credits)			Second Semester (6 credits)		
NURS 601	Health Care Perspectives	3	NURS 633	Nursing Research	3
NURS 605	Nursing Theory Development	3	EPSY 612	Statistical Methods	3
			or HLTH 604	Research Design and Data Analysis in Health and Human Performances	
Second Year					
First Semester (12 credits)			Second Semester (10 credits)		
NURS 651 (Fall only)	Theories of Health Care Administration	3	NURS 671 (Spring only)	Administrative Practices in Health Care	4
NURS 652 (Fall only)	Financial Management for Health Care Managers	3	NURS 690 (Spring only)	Nursing Informatics	3
Guided Electives (Select two with advisement)		6	NURS 697	Evidence-Based Practice <i>or</i>	3
			NURS 698	Culminating Project <i>or</i>	
			NURS 699	Master's Thesis	

Table 4.7.10 *Nursing Education Concentration*

First Year					
First Semester (9 credits)			Second Semester (9 credits)		
NURS 601	Health Care Perspectives	3	NURS 633	Nursing Research	3
NURS 605	Nursing Theory Development	3	EPSY 612	Statistical Methods	3
				or	
			HLTH 604	Research Design and Data Analysis in Health and Human Performances	
NURS 653 (Fall only)	Nursing Education Curriculum: Curriculum Process in Nursing	3	NURS 662 (Spring only)	Measurement and Assessment in Nursing	3
Second Year					
First Semester (10 credits)			Second Semester (7 credits)		
Guided Electives (Select two with advisement)	Physical Assessment Pathophysiology Pharmacology	6	NURS 697	Evidence-Based Practice	or
			NURS 698	Culminating Project	or
			NURS 699	Master's Thesis	
NURS 683 (Fall only)	Advanced Clinical Concepts in Nursing Education	4	NURS 673	Educational Practices in Nursing	4

Post-Master's certificate options are available for students in the Family Nurse Practitioner and Nursing Education tracks. Recent changes to the Post-Master's Family Nurse Practitioner curriculum reduced the total credit hours to 27, thus making it more congruent with other state and national certificate programs. Courses that were once required in the Post-Master's Family Nurse Practitioner certificate program are now prerequisite to that program. The Post-Master's Nursing Education certificate track consists of 14 credit hours of course work.

CRITERION 4.8 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.

4.8.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion) Student clinical experiences reflect current best practices and nationally established patient health and safety goals.

Practice learning environments are selected based on the appropriate health focus in each clinical nursing course and to support the achievement of student learning and program outcomes. The following factors are used by faculty when selecting clinical agencies in which students complete their clinical experiences: appropriate state or national accreditation, variety and sufficient number of patients for students to achieve learning outcomes, appropriate clinical experiences and opportunities for student learning, interaction between agency contact personnel and College administration/faculty, and a signed contract between the agency and the University/College.

In the interest of positive relationships between the agency, faculty, and students, there should be compatibility between the mission of the agency and the university, access by students and faculty to the agency and its resources, ongoing collaboration between agency personnel, faculty, and administration of the College, and a climate of mutual receptivity between agency personnel, students, faculty, and administrators. Selected clinical agencies should have physical characteristics that provide safe environments for students' clinical practice.

Clinical contracts are on file in the Nursing Building and are the responsibility of the Contract Coordinator for currency. The Contract Coordinator works with the agency and students to verify that students are in compliance with agency requirements, such as health requirements, thus assuring student and patient protection and safety. Clinical contracts are also located at

<http://www.indstate.edu/nhhs/contracts/agencylist.asp#current-contracts>.

4.8.1 (Advanced Practice Nursing) Student clinical experiences are evidence-based and reflect contemporary practice.

Preceptor agreements are established with participating preceptors to facilitate faculty supervision of students in sites that are appropriate for the clinical education of the students. Each participating preceptor has an identified faculty member to serve as a contact person. The contact information facilitates communication with faculty about student issues and promotes positive school/agency relationships. Lead faculty in clinical courses serve as a point of contact with the agency to prevent disruption and miscommunications. Preceptor agreements list expectations for faculty, students, and the agency or preceptor.

Clinical experiences are arranged by students in the student's geographical area. Student requests for clinical placement assistance is provided by supervising faculty utilizing existing preceptor database. The written preceptor agreements indicate purposes, roles, and responsibilities of preceptors. The faculty review and update agreements as necessary and no less than annually. The language of agreements allows for preceptors to choose

the length of the agreements, whether for one semester or multiple semesters.

All preceptors are provided with a Preceptor Packet. The packets are tailored for the clinical experience in the designated concentration in administration, education, and family nursing practitioner. All packets include a Preceptor's Professional Profile that documents biographical information, educational preparation, licensure, and employment history. The packet also contains documents that define appropriate preceptor credentials and patient or student populations for preceptored experiences are located on the APN Department website and on course sites for all clinical courses or courses in which a preceptor is needed.

The diversity and number of clinical practice sites facilitates the achievement of student learning for all concentrations in the graduate program. Nursing education students have access to their local, as well as ISU undergraduate, courses for the completion of the education practicum. Ample areas are available for administrative residencies, especially with the emphasis on rural hospitals and health care in this concentration.

Clinical sites are chosen based on professional guidelines and standards. For example, the FNP concentration requires that clinical hours are only counted when direct clinical care is provided to primary care populations. Clinical experiences, and time spent in each clinical experience, are varied and arranged so that the APN graduate is prepared to care for all populations and so that the experience aligns with established student learning outcomes of each individual concentration.

Each course in the program is carefully constructed to develop the student's mastery of the curriculum threads. Course syllabi demonstrate in detail the content, instructional methods, and learning experiences. The clinical component of each course is planned to allow for the development of increasingly sophisticated knowledge, judgment, and skill. Faculty in the Department of Advanced Practice Nursing encourage the utilization of a great variety of agencies through collaborative partnerships that expose students to urban, teaching, community, and age-related settings.

The patient population and the level of the student are taken into consideration when reviewing the preceptor request from each student. It should be noted that the negotiation process for student use of clinical sites has become increasingly complicated. Facilities are inundated with requests from schools of nursing and students in the APN Department must actively pursue agreements with some these agencies. The Advanced Practice Nursing Advisory Committee has been consulted on the adequacy of certain facilities and makes suggestions for additional clinical sites. The Indiana Rural Health Area Health Education Centers have provided assistance with rural placement of students in Indiana. Based on this information and always trusting in the instinct of the faculty, clinical sites are selected and maintained.

Criteria for selecting clinical sites include the following:

- The ability of the clinical site to meet course and clinical outcomes
- Patient census, population, and level of patient acuity
- Quality of learning environment
- Student and faculty evaluation of the clinical site
- Use of unit by other health care programs

- Strong and effective staffing patterns/role modeling of staff
- Agency compliance with state and federal regulatory bodies related to patient health and safety standards

Facilities that offer the widest range learning opportunities for a particular level of student are selected. At the end of each semester, the student and faculty analyze the experience offered by the clinical facilities used. The process of selecting adequate clinical sites is continuous and challenging. Based on the evaluation by the student and faculty, any review of clinical sites that prove not to meet inclusion criteria is noted and students are not given permission to use that site. Currently, faculty are satisfied with the high quality and diverse experiences at affiliating agencies.

CRITERION 4.9 (Baccalaureate Nursing Completion): Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.

Students in clinical courses of the baccalaureate nursing completion tracks are expected to demonstrate, through clinical journals, how clinical activities are meeting learning outcomes for each course. They develop care plans and concept maps to provide care to patients in the community. They provide patient education in population-based environments.

Students are also expected to utilize course concepts when providing care during the clinical experience. For example, after studying populations from a different culture, students have a clinical assignment that involves interviewing a person(s) from a culture that is different from theirs to gain knowledge about health-related beliefs and practices,

health care, nutrition, and dietary practices. Students then compare and contrast their own cultural concepts with the patient's.

Instructional materials have been designed, based on best practices, for distance students. Faculty who teach online courses have been oriented to and have received instruction about methods of delivery in the online environment from the Center for Instruction, Research, and Technology (CIRT). Instructional designers are also available to assist with online course development and support, to instruct new faculty how to teach in the online environment, and to help faculty on an individual basis.

Faculty can select several options when incorporating technology into the teaching and learning process. Current instructional technologies that are supported by the University include Blackboard and technology-enhanced classrooms. Within the Blackboard Learn environment, faculty can select several tools for creating remote presentations and training material including Adobe Connect (Breeze), Tegrity, Captivate, and Lectora. Blackboard also permits faculty to videoconference, share applications, and chat using FlashPlayer and Elluminate.

The Blackboard Learn environment allows for the provision of content in a variety of media to align with students' learning styles. The discussion board provides a forum for students to discuss current issues in nursing, apply problem-based learning, and engage actively in the learning process. Students are required to cite scholarly sources to support their responses and use evidence-based practice in problem-solving.

Course theory is evaluated through critical thinking examinations, professional papers, and discussion board participation. Students' learning is evaluated by multiple choice examinations that may be time-limited and/or proctored. Professional papers, as well as other assignments, are required in most online courses. Students are also required to make online presentations using a slide presentation program, such as PowerPoint, with the addition of student audio. Digital video is also used for demonstrating students' understanding of learned material.

Students self-evaluate their clinical performance in collaboration with the clinical preceptor and/or clinical instructor. The self-evaluation allows students the opportunity to actively participate in the evaluation process and to learn the importance of specific documentation supporting the achievement of learning outcomes.

Criterion 4.9 (Advanced Practice Nursing): Post-Master's certificate programs follow national standards and guidelines and demonstrate that students have sufficient didactic and clinical experiences to meet role expectations and certification requirements.

Post-Master's certificates for Family Nurse Practitioner (FNP) and Nursing Education tracks are currently offered to students with a completed master's degree in nursing from another concentration or university. The Post-Master's FNP certificate consists of 27 credit hours and includes all clinical courses and role courses from the Master's degree program. As of fall 2011, Advanced Pathophysiology and Advanced Pharmacology were eliminated as part of the program of study and were added as pre-requisites for admission to the certificate program. Students who have not completed these courses within the

specified time frame are required to do so before they are admitted to the certificate program. Eliminating Advanced Pathophysiology and Advanced Pharmacology reduced the program of study by 6 credit hours thereby making the Post-Master's FNP certificate more consistent with other programs offered throughout the state and nation. Students who already have certification as an advanced practice nurse can be given credit for up to 220 clinical hours from their previous degree. A minimum of 500 clinical hours must be completed in order to earn the Post-Master's FNP certificate. Students who complete the certificate are eligible to sit for the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP) certification exams.

A Post-Master's certificate in Nursing Education is also offered and consists of 14 credit hours. All education concentration courses are taken as part of the certificate program. Several students complete this certificate in conjunction with the Master's degree FNP concentration. As a result, many of these students teach at the community college level or in undergraduate nursing programs as adjunct faculty members.

Criterion 4.10 (Advanced Practice Nursing): Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.

Learning activities are developed in coordination with student learning outcomes and are based on best practices for distance education. Students demonstrate how they meet the course learning outcomes through a variety of activities. Online faculty members have had training opportunities from the Center for Instruction, Research, and Technology (CIRT) that emphasize online pedagogical principles. Instructional designers are also available for individual faculty consultation. Faculty members have several options for

content delivery that are supported by the University including Adobe Connect (Breeze), Tegrity, and Elluminate. The learning space allows faculty to provide content in a variety of media to align with students' learning styles. The discussion board provides for the application of problem-based learning and student-student and student-faculty engagement.

Theory content of nursing courses is evaluated through a variety of methods including formal papers, problem-based learning assignments, critical appraisal of nursing research, documentation of assessment findings, SOAP notes, multiple choice examinations, simulated prescription orders, case studies, and peer presentations. Discussion board topics provide faculty with the opportunity to evaluate integration of evidence-based practice.

Students are actively involved when evaluating their clinical performance with the clinical preceptor and/or clinical instructor. Students have the opportunity to evaluate their performance and to learn the importance of specific documentation supporting the achievement of learning outcomes.

The culminating experience includes a choice of one of three options: a research thesis, an individual or group culminating project, or an evidence-based paper for publication. The research thesis, under the supervision of a committee, is a 2-semester project resulting in the completion of an electronic document to expand the body of knowledge in nursing.

The individual or group culminating project is a 1-semester project resulting in a product that is mutually-agreed upon between the supervising faculty member and the student.

An example of a culminating project is the instrument developed for the employer satisfaction survey used to collect data for this self-study. The third option, an evidence-based paper for publication results in a manuscript for publication.

CRITERION 5.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.

There are adequate fiscal resources to meet the goals and objectives for the nursing unit available from three sources. The predominant source of financial support to the nursing departments is provided by Indiana State University. The University receives approximately 36.8% of operational costs from the state budget appropriation.

Additional funds are provided from tuition, financial aid, contract services, sporting events, and fees. Funds are used for salaries, benefits, and travel monies for personnel in administrative positions, tenure/tenure track positions, special purpose faculty positions, and support staff positions.

In 2009, the Board of Trustees at Indiana State University approved a Clinical Education and Faculty Fee for all nursing clinical courses. The fee for undergraduates is \$300 per clinical course. Ten-percent of the money from these fees is allocated for consumables and software (for example, tutorials) for campus students. Another 10% of the money from these fees is returned to the University general fund for defaulted student debt. The remaining monies are used by departments for adjunct and special purpose faculty salaries. Fees from distance education courses are used for lab products, such as EDGT tutorials and Picasso access.

The fee for graduate clinical nursing courses is \$500 per course; this fee, the Clinical Education and Faculty fee (<http://www.indstate.edu/bursar/coursefees.htm>), is consistent

in title and scope with all other graduate clinical programs in the College and is used for adjunct faculty, faculty development, and technical support. Five-percent of this fee is returned to the University general fund for students' defaulted debt.

A third source of revenue for the departments are internal and external grants, royalties from publications, and foundation funding. Grants include international travel grants, equipment grants, and assessment grants. A portion of royalties from The College Network content study modules is used for support staff in the undergraduate distance education Department of Baccalaureate Nursing Completion.

The final funding source is a special state appropriation. Indiana legislators voted in 2007 to create an annual line item allocation of \$250,000 to Indiana State University dedicated specifically to nursing education. The first appropriation was received in 2008 followed by a second appropriation in 2009. During the next two years, 2010 and 2011, the appropriation was reduced to \$240,000 annually. The biennial state budget for 2012-2014 has not yet been determined. Funds from this appropriation have been used to pay for special purpose faculty salaries, adjunct faculty salaries, travel expenses for junior tenure track faculty, curriculum revision expenses, and faculty development speakers.

The comparison of actual expenditures of state allocations for Fiscal Year 2008-2009 between all departments within the College of Nursing, Health, and Human Services is shown in Table 5.1.1. Within the eight units of the college, finances for personal service (includes wages), supplies and expense (such as postage, telephone, printing, and office supplies), repairs and maintenance (general building and equipment repairs and

maintenance), and capital equipment (includes office furniture and equipment and computer hardware and software) expenses are shown.

Table 5.1.1 *Budget Comparison between Departments within the College*

Departments	Personal Service	Supplies and Expense	Repairs and Maintenance	Capital Equipment
FY 2008-2009				
Baccalaureate Nursing	\$1,884,477	\$280	\$0	\$0
Baccalaureate Nursing Completion	\$39,186	\$1,387	\$0	\$0
Advance Practice Nursing	\$54,135	\$4558	\$0	\$0
Department of Applied Medicine and Rehabilitation	\$631,638	\$37,078	\$155	\$6518
Physical Education	\$1,053,162	\$29,652	\$5,504	\$7,431
Social Work	\$245,939	\$12,070	\$0	\$0
Health and Safety, and Environmental Health Science	\$736,317	\$25,861	\$543	\$3,541
Recreational and Sport Management	\$543,637	\$17,871	\$994	\$100

CRITERION 5.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.

The Nursing Building on the main campus houses classrooms, an auditorium, lounges, 2 small conference rooms, the Learning Resources Center, and offices for nursing administrators, faculty, and staff. The office suite of the Dean of the College of Nursing, Health, and Human Services is located on the 4th floor and includes a private office and an administrative assistant office. The office for the Associate Dean for Academics/ Executive Director of Nursing Programs is on the 4th floor. The office of the chairperson of the Department of Baccalaureate Nursing is located on the 4th floor and has an adjoining support staff office.

The chairperson of the Department of Baccalaureate Nursing Completion is located on the 3rd floor and has an adjoining support staff office. The offices of the chairperson of the Department of Advanced Practice Nursing and faculty members are located at the Landsbaum Center for Health Education. The office of the Director of Student Affairs is located on the 3rd floor. All administrative and support staff offices have standard office equipment including personal computers and printers.

All tenure track faculty and professional staff have private offices located on the 2nd, 3rd, or 4th floors. All special purpose faculty have double occupancy. Each office is furnished with a desk, bookcase, file cabinet, chairs, direct dial telephone, and a desktop or laptop computer with access to networked copiers/printers.

The Contract Coordinator serves as the Building Coordinator and is responsible for: managing all signage; providing limited new employee orientation with office setup; coordinating building repairs and renovation; elevator management; custodial services and grounds management; consulting with campus and community contacts; managing vending machines; contacting and directing movers; Central Receiving personnel; and recycling. In addition, the Contract Coordinator is also the emergency contact person in the building, monitoring emergency alarms, ensuring that the emergency plan is current, and maintaining a list of building occupants who are CPR / AED / First Aid certified.

All faculty in the Department of Advanced Practice Nursing share offices (2 per office). As students are all online, provisions are made for privacy when calls are made to students. In addition, a room is made available for any video conferencing. All faculty that share offices have locking files to store any student information.

Classrooms. Nursing classes are held in classrooms located in the Nursing building. Classrooms are equipped with seats, podium, chalkboard, multimedia projection system, and a projection screen. Internet access is available in all classrooms and includes wireless internet access throughout the building. The auditorium seats 124 persons and is equipped with a multimedia projection system and 4 plasma screen TVs suspended from the ceiling throughout the room for maximum viewing. The sound system in the room allows for the use of a wireless microphone and is Tegrity capable.

The three classrooms on the first floor can accommodate 45 - 50 students, are equipped with permanently installed multimedia systems, and may be scheduled for use by other units on campus. The third floor features one classroom / lab that can accommodate 25 - 30 students. The lab houses a hospital crib along with other pediatric equipment and a wall-mounted computer charting system. One room on the 4th floor is the Testing Office.

Library. Cunningham Memorial Library has met the information needs of the nursing unit through online and print reserve sources, classic and contemporary books, periodicals, videos, CD-ROMs, databases, and search engines. The library building is open 108.5 hours per week during the regular academic year, and 88 hours during the summer terms. The *Online Catalog* provides access to the collections of St. Mary-of-the-Woods College Library, the Rose-Hulman Institute of Technology Library, and the Vigo County Public Library. Pertinent articles and publications may be identified through databases such as the Cochrane Library, ProQuest, EBSCOhost (including CINAHL and MEDLINE), and LexisNexis Academic. Interlibrary loans are available to obtain books and photocopies of articles not held by the library. Nursing faculty participate in the selection of library materials. Nursing holdings that are regarded as not having historic value are removed from the library holdings with approval of the nursing faculty. Students can learn about the library research process through online interactive library tutorials and research guides.

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

Guides at <http://libguides.indstate.edu/>. Students may receive individualized instruction focused on their specific research needs by contacting the nursing librarian, especially during her weekly office hours in the Nursing Building. Help with library and information needs is available by phone, e-mail, chat reference, Blackboard classes, and from the Reference Desk. A weekly Online Reference Session allows distance learners to receive demonstrations of search strategy and database use by sharing the librarian's computer screen.

Learning Resources Center. The Nursing Learning Resources Center (LRC) provides a quality learning environment that functions to enhance teaching and learning activities. The LRC is staffed by the Director and the Technology 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 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 including providing technology assistance to faculty, staff, and students; maintaining multimedia and electronic equipment; and managing reservations for the nursing building.

The LRC, located (primarily) on the 2nd floor of the Nursing building, consists of a Skills Laboratory, Multimedia Laboratory, Demonstration Classroom/Lab, Printing Area, Student Lounge, 3 Auxiliary Skills Labs, and staff offices. The Skills Laboratory (NB 215) is equipped with 10 electric hospital bed units and 9 wall-mounted computer charting systems. A kitchen, linen room (NB 216), and Director's office (NB 211) are located adjacent to the laboratory. Study carrels and a cabinet of drawers (bins), which holds various types of skills equipment for independent student use, is located in the Skills Laboratory. A TV/VCR unit is permanently mounted in NB 215.

Skills Labs. A skills lab (NB106) that can accommodate 10 -15 students is located on the 1st floor. The lab houses 1 electric hospital bed with headwall unit, a crash cart, 2 medication carts, a permanently- installed multimedia system, a wall-mounted computer charting system, 2 lockable storage cabinets, and several tables for small group work/skills demonstration / practice.

Demonstration Classroom / Lab. The 50-stationary seat Demonstration Classroom/Lab (NB 210) features raised auditorium seating, one electric hospital bed unit, a physician's beam scale, and an area for small group work. A permanently installed multimedia projection system and a wall-mounted computer charting system are available in NB 210. A mobile TV/VCR is housed in the Demonstration Classroom; the MedDispense medication system is housed in NB 209.

Auxiliary Skills Lab. The lab can accommodate 20 students. The lab (NB 209) houses 2 electric hospital bed with 2 headwall units, a permanently installed multimedia system, 2 wall-mounted computer charting systems and x-ray viewer, and several tables for small group work/skills demonstration / practice.

Multimedia Lab. NB 201 houses a TV/VCR unit, a document camera, patient safety transfer equipment, an exam table, a wall-mounted computer charting system, and an area for small group work. A computer for the custodian is also housed in this lab.

Printing Area. A printing area (NB 214) with 2 laser printers (1 black & white, 1 color) is available for wireless printing Monday – Friday 8:00 am – 4:30 pm when classes are in session.

Simulation Lab. Indiana State University is a partner in the Rural Health Innovation Collaborative (RHIC). One of the major goals of the RHIC is interprofessional education. Nursing students participate in team training with students from medicine, social work, athletic training, and the physician assistant program. Available human simulators include one adult, one birthing, and two infants. The RHIC is in the process of raising funds for a pediatric simulator.

Faculty schedule simulation exercises to introduce new skills, to evaluate previously learned skills, and to augment course content. The interprofessional scenario day is scheduled during fall semester.

Student Lounge. The Student Lounge (NB 206) is available to 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 Nurses Association) are available. Bulletin boards in NB 206 contain various postings on academic and scholarship information, job opportunities, and other announcements. A locked storage cabinet for the Student Nurses Association is located in NB 206.

Offices/Storage. Storage for supplies, equipment and audiovisual materials, and offices for LRC personnel are located in NB 210, 207-208, NB 211, 213, and 216. Two mobile TV/VCR combination units and a portable multimedia cart are housed in NB 207-208. A storage area (NB 108) is also available behind the permanent screen in NB 107. A locked storage room is used to store student records on the 4th floor (NB 426a).

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.

The Faculty/Staff Lounge is located on the 4th floor (NB 416). A stove, refrigerator, and microwave are available in the lounge. There are two small conference rooms, which seat approximately 10 persons each; one is located on the 4th floor (NB 427) and the other is located on the 3rd floor (NB 328B).

Simulation equipment is located in the Rural Health Innovation Collaborative (RHIC) center located on the second floor of Union Hospital in a retrofitted previous intensive care unit. The RHIC is a partnership between Indiana State University, Union Hospital, and Ivy Tech State College. Each partner provides contributions to the operation of the simulation center.

Landsbaum Center for Health Education. The Landsbaum Center for Health Education is located at 1433 North 6 1/2 Street, Terre Haute. 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 College of Nursing, Health, and Human Services. The entire Department of Advance Practice Nursing is located at this site. Since all nursing graduate courses are offered online, this arrangement allows department cohesion and workflow for graduate faculty and staff.

Attached to the Family Practice Residency program, the Landsbaum Center for Health Education offers unique opportunities for health improvement and team learning through partnership and interprofessional education. The building also houses Union Hospital's Midwest Center for Rural Health and portions of Indiana State University College of Nursing, Health, and Human Services, 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 College of Nursing, Health, and Human Services shares the common spaces of the first floor as well as rooms dedicated to the Sycamore Nursing Center. The Sycamore Nursing Center (SNC) includes a spacious waiting room with receptionist area, 2 conferences rooms, a clinical lab, 6 exam rooms, a nurses' station, storage area, records area, and office.

The SNC was founded in 1981 to offer service to the community and provide clinical learning experiences for students in the Indiana State University College of Nursing, Health, and Human Services Baccalaureate Nursing Program. It is an academic nursing center that is a charter member of the National League for Nursing Council of Nursing Centers and offers comprehensive health assessments including histories and physical examinations to all persons of all ages, for a minimal fee, and age-appropriate immunizations for children ages 1 month to 18 years. The SNC has had a home health care program since 1985 when Diagnostic Related Groups decreased clients' hospital stays. Local home health care agencies were also forced to discharge clients early from home health care even though the clients needed continued care. The SNC continues to meet those needs and the home health care program is free.

The second floor of the Landsbaum Center Health Education building has additional space for the College of Nursing, Health, and Human Services that includes 6 offices and 1 storage room. One conference room on the second floor is available for priority

scheduling by the nursing faculty. When not being used by nursing students or staff, the conference rooms are available to the other health education partners.

The Indiana State University, College of Nursing, Health, and Human Services, Continuing Nursing Education Program received accreditation as a provider of Continuing Nursing Education through March 2015 from the American Nurses Credentialing Center's Commission on Accreditation. The charting room on the first floor also houses 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.

CRITERION 5.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those engaged in alternative methods of delivery.

Faculty requests made to the LRC Director result in efficient purchasing, processing, storage, and circulation of instructional aids. Ongoing maintenance of various learning resources and equipment is provided by the staff in order to facilitate effective use of materials in the learning activities of the students and faculty in the nursing program. The College of Nursing, Health, and Human Services requests for faculty equipment needs are made through the designated Department Chair, proceed to the Executive Director for review and if supported, are presented to the Dean. The Dean then adds the request to the annual equipment budget request to the Provost.

There are three nursing faculty representatives to the library, one from each nursing department. These faculty representatives work with the liaison library staff person assigned by the Dean of the library to review library holdings every two years for currency and historical relevance. Electronic journal access is supported by a portion of the Distance Education course fee.

In addition to resources maintained in Cunningham Memorial Library, LRC offices house numerous resources including resource texts, articles, posters, display boards, models, audio/videotapes, CD-ROMs, DVD-ROMs, and other various supplies and equipment. The review of the LRC holdings included approximately 3 audiotapes, 90 cards or pamphlets, 89 charts, 5 flipcharts, 10 display boards, 30 posters, 80 CD-ROM, 17 DVD-ROM, 214 videos, and 340 texts. Audiovisual resource listings can be accessed (viewed and searched) from the web at <http://www.indstate.edu/nursing/lrc/lrc-nursing-media.htm>. Available instructional aids include, but are not limited to, manikins, simulators, wall-mounted computer charting stations, patient moving safety equipment, a training defibrillator, a medication administration system, and other equipment such as, stethoscopes, sphygmomanometers, otoscopes, IV pump, pseudo-medications, and medication administration supplies. Online tutorials available for student use are accessible from the web at <http://www.indstate.edu/nursing/lrc/computer-guide/lrc-online-tutorial.htm>.

Laptop Computers/Camcorders: Two pool laptop computers from the OIT-leased laptop program are available from the LRC (NB 207-208) for faculty use. Two camcorders are

available from the LRC for student use for course assignments and for faculty and staff use 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.

In 2007, the strategic plan for the campus included a Laptop Initiative. Every new student was required to purchase a laptop during orientation. Students who earned a minimum GPA of 3.00 in high school and committed to attend Indiana State received a free laptop. One campus Student Computing Complex (SCC) is available and accessible 24 hours a day seven days a week for computing activities. The SCC is 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). Computer services, in conjunction with library services, have made it possible to provide excellent resources that are readily available to students and faculty.

**CRITERION 5.4 (Baccalaureate Nursing Completion, Advanced Practice Nursing):
Fiscal, physical, technological, and learning resources are sufficient to meet the
needs of faculty and students and ensure that students achieve learning outcomes.**

There is sufficient fiscal, physical, and technological support and learning resources for distance education. To help maintain an adequate operating structure, the distance programs are located in separate academic departments. This allows for fiscal appropriations for salaries, operating expenses, travel, and equipment needs. Distance education faculty, who are not located in the Terre Haute area, are provided with a university computer and technical support. Technology support is available through the

Office of Information Technology for both faculty and students at <http://www.indstate.edu/oit1/>. Training for faculty and staff is available periodically throughout the year from the Center for Instruction, Research and Technology (<http://www.indstate.edu/cirt/>).

The department structure also ensures dedicated Student Support Specialists to assist with admission, registration, and academic advising. Other support services for distance students include the Writing Center and library support. Distance students who need additional services can also be helped directly by the library staff at <http://lib.indstate.edu/index.html> and by Information Technology personnel at <http://www.indstate.edu/oit1/userservices/ithelp/>.

Online tutorials about computer use at ISU and in the nursing programs are available for student use and are accessible from the web at <http://www.indstate.edu/nursing/lrc/computer-guide/lrc-computer-guide.htm>.

CRITERION 6.1 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.

The University has a strong commitment to systematic program assessment in accordance with the Higher Learning Commission (HLC) of the North Central Association of Colleges and Schools (NCA) for regional accreditation. The College supports this effort with the College Assessment Committee, which is comprised of the chairpersons and a representative from each program. Each Department has developed a systematic plan for assessing program outcomes. Standards and criteria established by the National League for Nursing Accrediting Commission (NLNAC) and the Institute of Medicine (IOM) are included in each plan. These plans and the corresponding data, as well as proposed improvements, are stored centrally on a University server through a software program entitled TaskStream. Each nursing department has dedicated time each month to discuss one or two selected outcomes, methods of data collection, and analysis of findings. Improvements are implemented at appropriate times in the academic cycle and new faculty are oriented to improvement efforts. All full-time tenure/tenure track faculty and instructors within each nursing department serve as the Assessment Committee for that department. Special assessment meetings may be called to discuss important findings such as NLCEX-RN pass rates.

Assessment plans indicate the benchmark, method of data collection, and frequency of collection. Methods to collect data include Assessment Technology Institute (ATI) commercial testing products, embedded assignments, clinical evaluation tools, formal

papers, presentations, and assignment audits. Course grades are used for selected program outcomes. Assessment methods have improved as faculty become more comfortable with, and knowledgeable about, the process. An example of improvement of assessment is the modification of directions for a course assignment to demonstrate the value of life-long learning for undergraduate students.

The behavior component to demonstrate the value of life-long learning was that the students attend an in-service program that was not a course requirement. However, directions for the embedded course assessment had not included that students write about attending a program that increases knowledge without a corresponding grade. By asking students to document the activity, it became easy to verify the student behavior.

Each department also has a hard copy binder of its Assessment Plan, methods of data collection and results, and improvement actions. These binders are maintained by the Assessment Representative for the program.

TaskStream is accessible by the Executive Director for all College programs, the chairs for their department, and the representative for their program. The University provides an Assessment Coordinator and graduate students to assist with the process, training, and technical support of data collection and storage.

CRITERION 6.1 (Advanced Practice Nursing): Program assessment is ongoing and findings demonstrate the achievement of the student learning and program outcomes of the nursing education unit and NLNAC standards.

The Department of Advanced Practice Nursing is currently maintaining their assessment plan based on the general graduate role outcomes and competencies. However, each concentration also integrates the specialization competencies as a base for its assessment plan. Each concentration has a systematic plan for assessment in TaskStream. Due to the small number of faculty in the specialty areas, the Assessment Committee is comprised of the entire department faculty. Each concentration has a director that guides the assessment process and helps gather needed data for entry into TaskStream. Meeting time and minutes reflect that program outcomes are addressed for the graduate students. Data collection methods include an operational definition, an expected level of achievement, assessment data location, faculty members responsible for data collection, frequency of data collection, assessment method, results and analysis of assessment data collection, and a plan of action for improvement based on the results and analysis of data.

The roles on which the graduate program outcomes and competencies are based as noted in Standard 4, Criterion 3, Table 4.3.1 include critical thinker, communicator, advanced provider, leader, professional, life-long learner, advocate, coordinator of community resources, and knowledge contributor. The following summarizes each program outcome with definition, methods of assessment data utilized, and overall results of analysis for all concentrations in the MS program. The systematic plans for evaluation containing specific assessment results for each concentration are provided as exhibits.

The program outcome of critical thinker is: *a critical thinker who utilizes the intellectually disciplined processes to conceptualizing, applying, analyzing, synthesizing, and evaluating information as a guide for advanced nursing practice.* Data come from course grades and specific assignments. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of communicator is: *a communicator who utilizes multiple modalities strategically for the optimal transmission of messages and interaction with the intended audience.* Data come from course grades and clinical evaluation tools. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of advanced provider is: *an independent provider who is competent to apply evidence-based advanced nursing knowledge including culturally adaptive care, assessment, prescriptive interventions, evaluation, collaboration, and education.* Data result from analysis of course grades and specific course assignments. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of leader is: *a leader who inspires, persuades, and mentors others in the implementation of organizational visions and missions.* The goal of leader is assessed as a result from analysis of course grades and preceptor evaluations. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of professional is: *a professional who is a role model through adherence to the ethical, legal, and professional standards of the discipline specialty*

area. Data result from analysis of course grades and specific course assignments. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of life-long learner is: *a life-long learner who incorporates new knowledge related to culture, ecology, economics, politics, science, and technology.* The goal of life-long learner is assessed as a result from analysis of course grades and preceptor evaluations. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of advocate is: *an advocate who critiques and develops policies, and participates in activities that promote positive change.* Data are assessed as a result from analysis of course grades and preceptor evaluations. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of coordinator of community resources is: *a coordinator who collaborates with agencies and other providers for the most effective utilization of resources.* Data come from analysis of course grades and preceptor evaluations. The expected level of achievement has been met or is ongoing for all concentrations.

The program outcome of knowledge contributor is: *a knowledge contributor who synthesizes, designs, conducts, and implements research to bring about changes and make improvements in professional practice.* Course grades are used to assess the goal of knowledge contributor. The expected level of achievement has been met or is ongoing for all concentrations.

CRITERION 6.2 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Aggregated evaluation findings inform program decision making and are used to maintain or improve student learning outcomes.

Faculty in each nursing department collect and aggregate data from a variety of sources

including but not limited to:

- Results from the assessment of program outcomes and faculty analysis
- Exit surveys from students at the time of program completion
- Comments from distance students
- Comments from campus students attending focus groups
- Evaluations about clinical agencies
- Feedback from preceptors
- Faculty evaluations of students, clinical agencies, and courses
- Feedback from student teas with the Executive Director of Nursing
- Discussion with, and comments from, members of the Advisory Committees
- Informal and email comments from students, agencies, and stakeholders
- Feedback from Employer Surveys
- Retention, progression, and graduation data
- Licensure and certification pass rates
- Feedback from academic advisors
- Feedback from faculty teaching cognate and Foundational Studies courses

Information collected is used to improve the curriculum, the selection of cognate courses, teaching/learning methods, use of educational technology, student assessments, individual or group faculty development, textbook selections, and nursing department policies.

The central focus for the Department of Baccalaureate Nursing for the past three years has been the need to improve NCLEX-RN pass rates. A broad analysis of people, policies, resources, and practices was conducted in combination with relevant assessment

data. These data were then utilized to develop the *Plan of Correction*. Table 6.2.1 illustrates examples of improvements based on aggregated assessment data for the undergraduate program; Table 6.2.2 lists examples of improvements for each concentration in the graduate program.

Table 6.2.1 *Undergraduate Improvements Initiated from Aggregated Assessment Data*

Department	Assessment Data	Improvement
BN	Lowest average group score in the pharmacology section of the ATI RN Comprehensive Predictor Fall 2008-Spring 2010	<ul style="list-style-type: none"> • Integrate the top 100 medications into each course. • Assign relevant ATI pharmacology readings in each clinical course. • Increase percentage of pharmacology questions in each clinical course to 20%. • Assign all pharmacology-related practice questions from Saunders <i>Comprehensive Review for the NCLEX-RN Examination</i> textbook to students in NURS 486. • Adopt <i>Saunders Comprehensive Review for the NCLEX-RN Examination</i> for appropriate courses in the nursing program (spring 2011). • Add <i>ATI Pharmacology Made Easy</i> and <i>Dosage Calculation and Safe Medication Administration</i> modules to the ATI package for students admitted to the major beginning fall 2011.
BN	Low average group score in Basic Care and Comfort section of ATI RN Comprehensive Predictor related to nutrition (2010)	<ul style="list-style-type: none"> • Add cognate requirement of FCS 201 Fundamentals of Nutrition to the revised traditional and accelerated second degree tracks. • Add the nutrition Content Mastery Review Module to the ATI package for all students. • Add ATI Nutrition Content Mastery examination to NURS 450 Population-Focused Community Health Nursing course (2010-2011); then change placement to NURS 324 Nursing Care of Adults II. • Integrate reading from the nutrition text adopted by NURS 204 Fundamentals of Nursing into other appropriate courses.
BN	Low pass rates on NCLEX-RN (2008)	<ul style="list-style-type: none"> • Offer live three day NCLEX-RN content review before first ATI RN Comprehensive Predictor in culminating course (Spring 2010). • Add comprehensive medical-surgical content review prior to ATI Adult Medical-Surgical

Department	Assessment Data	Improvement
		<p>Content Mastery proctored exam in NURS 424 Nursing Care of Adults III. (Spring 2011)</p> <ul style="list-style-type: none"> • Create a cognitive test plan for use in test development for all courses in the traditional track to increase the cognitive level of the exams. (Spring 2009) • Revised curriculum to reflect current trends and content
BN & BNC	Low pass rates on NCLEX-RN (2008)	<ul style="list-style-type: none"> • Change ATI policy: Content Mastery exams will count as 10% of course grade in respective courses. • Change ATI policy: RN Comprehensive Predictor examination will count as 30% of course grade in NURS 486.
BNC	Low pass rates on NCLEX-RN (2010)	<ul style="list-style-type: none"> • Require all courses to require <i>Saunders Comprehensive Review for the NCLEX-RN Examination</i> for fall, 2011. • Increase NCLEX type questions in every course

Table 6.2.2 Graduate Improvements Initiated from Assessment Findings

Concentration	Assessment Data	Improvement
FNP	Aggregated comments from Distance Students desired increased courses offerings and flexibility per exit survey as well as stakeholder demands to increase # of graduates to fill need for APNs.	<ul style="list-style-type: none"> • Now start clinical courses both fall and spring semesters.
FNP	Aggregated comments from Distance Students requesting more course feedback.	<ul style="list-style-type: none"> • Added adjunct faculty to all clinical courses to supplement regular faculty and to provide clinical feedback.
FNP	Aggregated comments from Distance Students requesting more audio/video components to courses.	<ul style="list-style-type: none"> • Faculty have attended training sessions offered by CIRT. Purchased modules to add to NURS 645 Pharmacology to enhance audiovisual component.
FNP	Course evaluations did not reflect clinical progression/mastery.	<ul style="list-style-type: none"> • Revised all course evaluation tools to reflect student

		learning outcomes/mastery.
FNP	Drop in certification pass rates	<ul style="list-style-type: none"> • Changed primary texts in the FNP program.
Education	Students requesting education projects as an option for culminating project (2009)	<ul style="list-style-type: none"> • NURS 698 was activated as option for Nursing Education or other concentration as a scholarly project.
Administration	Increased clinical hours in Nursing Administration	<ul style="list-style-type: none"> • NURS 671 to include 135 clinical hours
Administration	Increase the EMR/HIT components of Nursing Informatics	<ul style="list-style-type: none"> • NURS 690 included electronic medical records healthcare information technology.

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CRITERION 6.3 (Baccalaureate Nursing, Baccalaureate Nursing Completion, Advanced Practice Nursing): Evaluation findings are shared with communities of interest.

The Departments of Baccalaureate Nursing, Baccalaureate Nursing Completion, and Advanced Practice Nursing have recently begun meeting with communities of interest since the transition to the College of Nursing, Health, and Human Services occurred. Department Chairs share information about the College, the Departments, the program and tracks, and evaluation findings with these communities. Department faculty inform students, and personnel in agencies where students complete their clinical experiences, about undergraduate and graduate programs and policies and procedures that directly affect students or the clinical agencies.

Meetings are planned to be held annually to maintain interactions between communities of interest and department faculty; if necessary, meetings may be held more frequently.

During these meetings, all attendees are asked for feedback about the programs and are provided with the most current information and data.

Information that directly affects students, including changes in all policies, procedures, and program information, is provided by the faculty in nursing courses, on the Blackboard course site for each nursing course, and on the College of Nursing, Health, and Human Services website. Information is disseminated through meetings, focus groups, letters, email, student handbooks, and University catalogs. All information is accessible and is intended to inform students, faculty, alumni, clinical agencies, and all interested parties about the program's accreditation status and NLNAC contact information.

The discussion of informing students about changes in policies, procedures, and program information has been previously discussed in Standard 3, Criterion 3.6. The discussion also included developing a more efficient method for assuring that all students receive the most current information. Faculty in the Department of Advanced Practice Nursing piloted a method on all course Blackboard sites this past spring and will review subjective and objective data that will help them to determine the success of this method.

Data received during the process of evaluating students, courses, programs and tracks, and clinical agencies are shared with those who participated in or are affected by such evaluations. The integrity and consistency of all data collected, reviewed, and shared are maintained.

**CRITERION 6.4 (Baccalaureate Nursing, Baccalaureate Nursing Completion):
Graduates demonstrate achievement of competencies appropriate to role
preparation.**

Faculty in the Departments of Baccalaureate Nursing and Baccalaureate Nursing Completion utilize a variety of assessment methods to determine achievement of student learning outcomes. The Assessment Committee of the Department of Baccalaureate Nursing is responsible for evaluating student learning outcomes. The committee is comprised of members of the department faculty who meet regularly with all department faculty to discuss assessment findings and develop a plan of action for improvement of meeting student learning outcomes.

The Assessment Committee of the Department of Baccalaureate Nursing Completion is comprised of selected faculty charged with gathering assessment data in conjunction with faculty from the entire department. In addition to meeting regularly with department members, the members of the Assessment Committees from the Department of Baccalaureate Nursing and the Department of Baccalaureate Nursing Completion meet regularly to maintain congruency of assessment methods and student learning outcomes between the two departments.

The eight program outcomes are designed to reflect program competencies or goals and are leveled within the semesters as presented in Standard 4, Criterion 1, Table 4.1.1. Assessment Committee members developed a data collection method to demonstrate achievement of terminal competencies as described in the terminal student learning outcomes. These data collection methods include an operational definition, an expected

level of achievement, assessment data location, faculty members responsible for data collection, frequency of data collection, assessment method, results and analysis of assessment data collection, and a plan of action for improvement based on the results and analysis of data. Assessment data are collected from a variety of sources including completed written and oral student assignments, clinical performance evaluations, scores from the Assessment Technologies Institute (ATI) Content Mastery Series and RN Comprehensive Predictor examination, as well as a student exit survey.

Data for both the RN to BS and the LVN/LPN to BS tracks were collected and reported jointly. As there has been significant growth in both of these tracks, findings from the assessment data indicate that it has become necessary for data for these two tracks to be collected separately. Collecting data separately ensures that terminal outcomes are being investigated independently thus allowing that necessary improvements can be made separately to each track based on the corresponding assessment findings.

The roles on which the terminal student learning outcomes are based, as indicated in Table 4.1.1, include critical thinker, communicator, professional, provider of care, leader, advocate, life-long learner, and coordinator of community resources. The following summarizes the achievement of competencies based on these roles and the terminal student learning outcomes based on these roles.

The terminal program outcome for critical thinker is: *The student will demonstrate purposeful thinking, intellectual integrity, solid reasoning, and creative problem solving*

as the basis for making decisions and clinical judgments. Assessment data come from the ATI Critical Thinking Exit examination and the student exit survey.

The expected level of achievement is for the group composite score of all students to meet or exceed the Group Mean-Program on the ATI Critical Thinking Exit examination. For the Department of Baccalaureate Nursing, the expected level of achievement was partially met. Scores on the ATI Critical Thinking Exit examination for the Department of Baccalaureate Nursing were 70% (Fall 2008), 72% (Summer 2009), 73% (Fall 2009), 74.9% (Spring 2010), 66.2% (Summer 2010), and 69.5% (Fall 2010). The Group Mean-Program for those semesters is 73.0%.

For the Department of Baccalaureate Nursing Completion, the expected level of achievement was met. Scores on the ATI Critical Thinking Exit examination were 74.2% (Fall 2009), 74.4% (Spring 2010), 73.3% (Fall 2010), and 77.3% (Spring 2011). The Group Mean-Program for those semesters is 73.0%. The expected level of achievement was met. A recommendation has been approved to change the expected level of achievement from using the group composite score to meet or exceed the Group Mean-Program to 90% of students meet or exceed the Group Mean-Program.

Results from the exit survey indicate that both departments have met the expected level of achievement. The expected level of achievement is a mean group score of 3.75 or higher (on a 1-5 Likert scale) of student self-perception as a critical thinker on the

Adequacy of Preparation exit survey. Mean group scores have consistently been above 3.75 for the past five (5) semesters.

The student exit survey was revised in spring 2010 due to an error in the survey tool. A revision was also implemented that separates data collected from students enrolled in the RN to BS track from students enrolled in the LVN/LPN to BS track. Faculty will continue to review current and future data and make recommendations.

The goal for critical thinker was partially met in the Department of Baccalaureate Nursing; the group composite score of all students did not meet or exceed the Group Mean-Program on the ATI Critical Thinking Exit examination. They did achieve the expectation for the student exit survey.

Faculty's plans for improvement include: scheduling the ATI Critical Thinking Exit examination to an earlier time so as not to conflict with final examinations (when it has been traditionally scheduled), increasing the use of active-learning activities in nursing courses, helping to improve students' critical thinking skills through faculty discussion/shared ideas; including at least one (1) simulated learning experience for each clinical nursing course, and revising the curriculum to include a Nursing Perspectives course with content related to critical thinking.

The goal for critical thinker was met in the Department of Baccalaureate Nursing Completion; the group composite score of all students did meet or exceed the Group

Mean-Program on the ATI Critical Thinking Exit examination and the student exit survey.

The terminal program outcome for communicator is: *The student will be a communicator who incorporates goal-directed and focused dialogue into nurse-client interaction, demonstrates effective listening, reading, writing, and speaking skills, and uses technology appropriately to facilitate management of information.* Assessment data derive from an evidence-based paper in the Leadership course, a paper in the Professional Nursing Synthesis course, an oral presentation in the Professional Nursing Synthesis course, and the student exit survey.

The expected level of achievement is 85% of students will score at or above 75% on the evidence-based paper in the Leadership course. This benchmark has been met; at least 85% of the students have scored 75% or higher on the evidence-based paper. A recommendation was made to increase the benchmark to 90% to be in alignment with benchmarks in the other competencies.

The expected level of achievement for the final paper and the oral presentation in Professional Nursing Synthesis is that 90% of students will score above 75%. Analysis of the data indicates that the expected level of achievement has been met. More than 90% of the students completing these assignments have achieved 75% over the past five (5) semesters.

An additional assessment method has been recommended in which a minimum of 90% of the students will correctly answer the ATI Therapeutic Communication questions that are part of the ATI RN Comprehensive Predictor examination Psychosocial Integrity sub-score. Data collection will begin in fall 2011.

The expected level of achievement on the student exit survey is that the student mean group score will be 3.75 or higher (on a 1-5 Likert scale) of student self-perception as a communicator on the Adequacy of Preparation exit survey. Results from the exit survey indicate that both departments have met the expected outcomes. Mean group scores have exceeded 3.75.

The goal of communicator has been met in both departments. All expected levels of achievement have been met or exceeded.

The terminal program goal for provider of care is: *The student will be a provider of care who assumes a variety of roles in the delivery of holistic, competent, and culturally sensitive nursing care in multiple settings.* Assessment data comes from the ATI RN Comprehensive Predictor examination, clinical evaluations from the senior reflective nursing course, and the student exit survey.

The expected level of achievement on the ATI RN Comprehensive Predictor examination is that 90% of students will attain an Adjusted Individual Total Score of 74% prior to spring 2001 and 72% for spring 2011 corresponding to a 94% predictability of passing

the NCLEX-RN. Data analysis indicates that the expected level of achievement has not been met in either department.

Data on the 8 sub-scores of the ATI RN Comprehensive Predictor examination are analyzed to determine those content areas in which students need to improve and those in which the students are more knowledgeable. A corresponding level of achievement in all sub-scores of 74% is expected. Three (3) sub-scores, Basic Care and Comfort, Pharmacological and Parenteral Therapies, and Physiological Adaptation, have been below the 74% benchmark for fall 2008 through fall 2010 and the 72% for spring 2011 benchmark since fall 2008 for the Department of Baccalaureate Nursing. See Table 6.4.1 Group Scores (Traditional Baccalaureate Track) on ATI RN Comprehensive Predictor Examination sub-scores (2007 Form B)-Fall 2008 through Fall 2010 and Table 6.4.2 Group Scores (Traditional Campus) on ATI RN Comprehensive Predictor Examination sub-scores (2010 Form B)-Spring 2011.

Table 6.4.1 *Group Scores (Traditional Baccalaureate Track) on ATI RN Comprehensive Predictor Examination Sub-scores (2007 Form B)-Fall 2008 through Fall 2010*

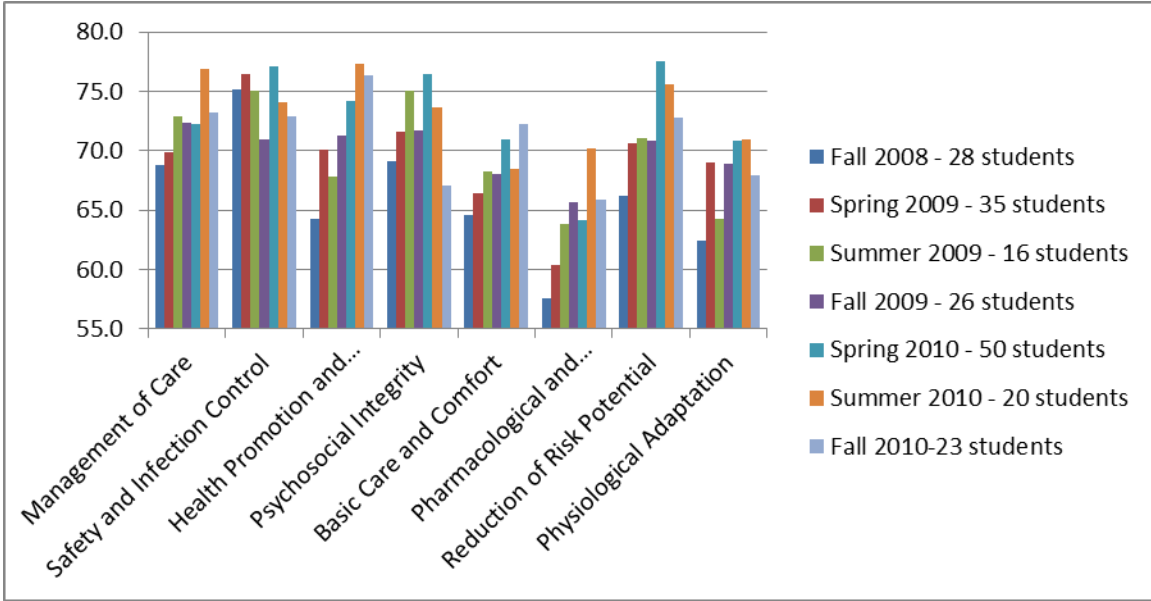
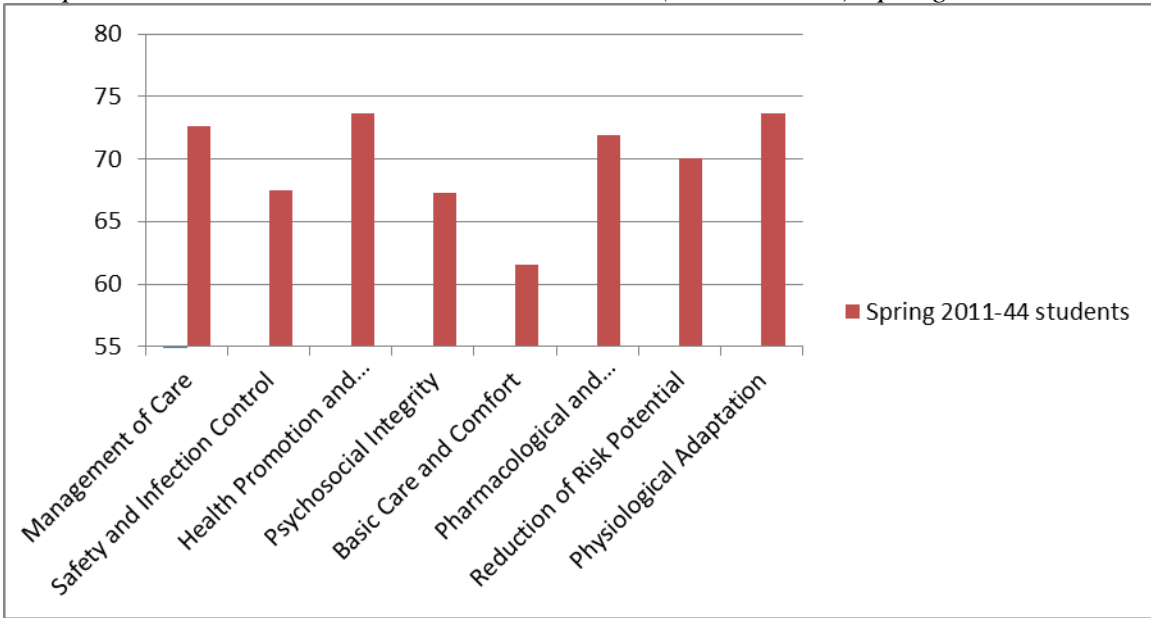


Table 6.4.2 *Group Scores (Traditional Baccalaureate Track) on ATI RN Comprehensive Predictor Examination Sub-scores (2010 Form B)-Spring 2011*



In the Department of Baccalaureate Nursing, a remediation plan based on these findings includes revising the curriculum, utilizing standardized test plans in all courses to increase the use of application-type questions on all examinations, providing more focused reviews and practice questions at the senior level, and developing a plan of correction for the pre-licensure program. The plan of correction has been submitted to the Indiana State Board of Nursing.

In the Department of Baccalaureate Nursing Completion, there has been steady improvement in the scores on the ATI RN Comprehensive Predictor examination over the last three (3) semesters. As of spring 2011, 87.5% of students have achieved Adjusted Individual Total Score of 74%, indicating a 94% probability of passing the NCLEX-RN licensure examination on the first attempt. Additionally, 100% of the students have scored at a level indicating a 90% probability of passing the NCLEX-RN licensure examination suggesting that faculty should continue to monitor these results with only minor curriculum changes.

One recommendation is to assess data based on the Predicted Probability of Passing instead of the Adjusted Individual Total Score to evaluate the expected level of achievement. Evaluating the Predicted Probability of Passing would accommodate changes in the examination and account for differences in individual adjusted scores. In spring 2011 with the administration of the 2010 version of the ATI RN Comprehensive Predictor examination, the benchmark of 94% Predicted Probability of Passing was used; this corresponds to 72% Adjusted Individual Total Score.

Assessment data on the 8 sub-scores of the ATI RN Comprehensive Predictor examination indicate that the expected outcome for the Department of Baccalaureate Nursing Completion has been partially met with students achieving the benchmark of 74% on four (4) of the sub-scores for the fall 2010 and the current 72% benchmark on six (6) out of the eight (8) sub-scores. See Table 6.4.3 Group Scores (LPN Distance) on ATI RN Comprehensive Predictor Examination sub-scores (2007 Form B)-fall 2008-fall 2010 and Table 6.4.4 Group Scores (LPN Distance) on ATI RN Comprehensive Predictor Examination sub-scores (2010 Form B)-spring 2011 reflecting the change of 72% adjusted individual score which corresponds to the 94% probability of passing the NCLEX-RN.

Table 6.4.3 *Group Scores (LPN Distance) on ATI RN Comprehensive Predictor Examination Sub-scores (2007 Form B)-Fall 2008-Fall 2010*

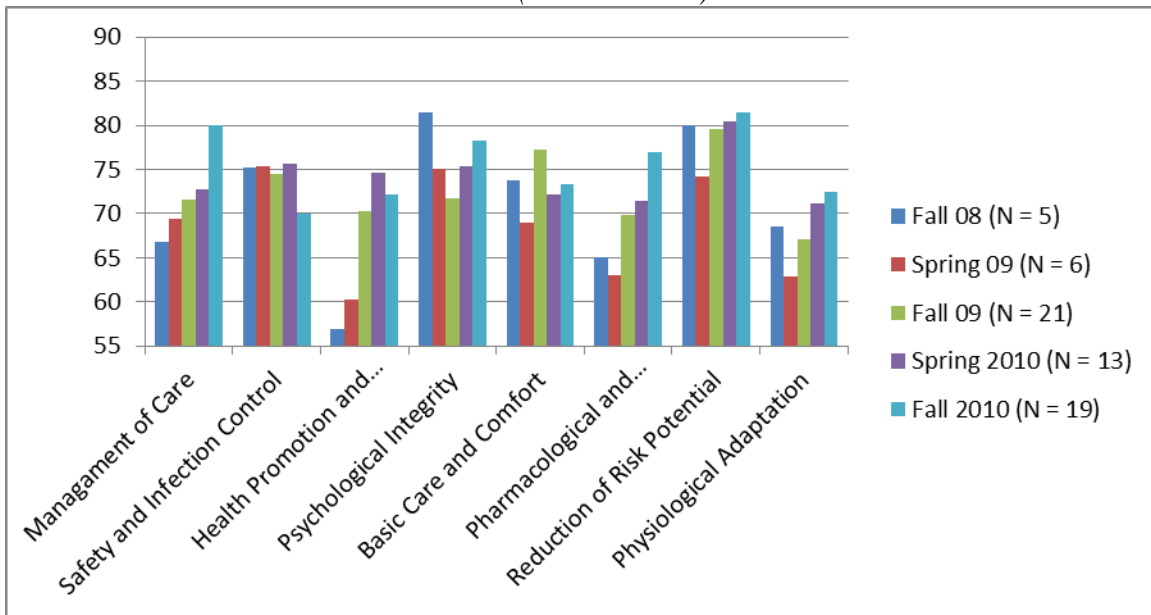
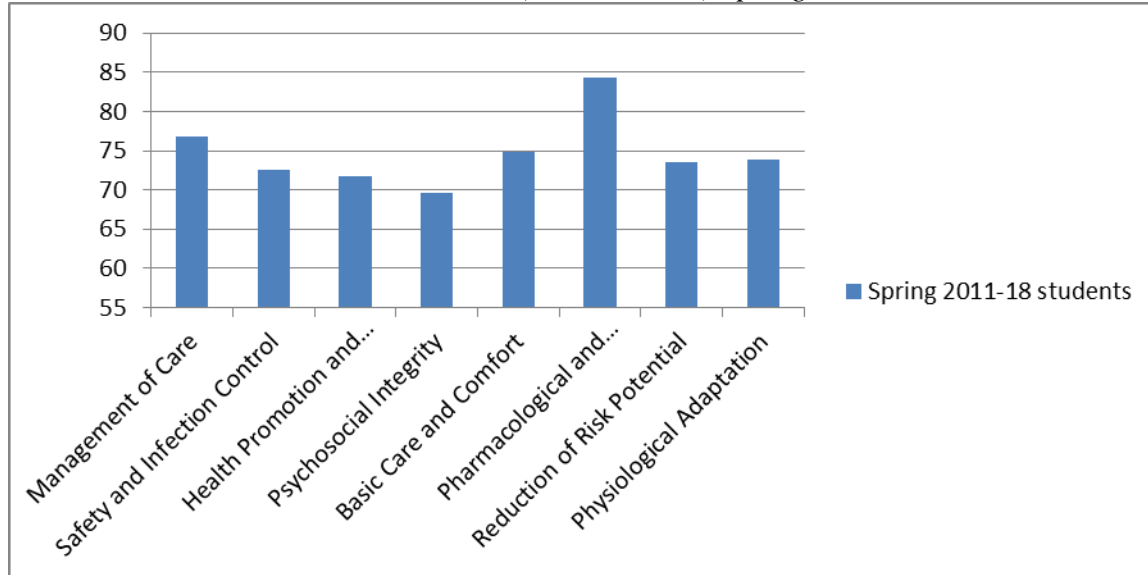


Table 6.4.4 *Group Scores (LPN Distance) on ATI RN Comprehensive Predictor Examination Sub-scores (2010 Form B)-Spring 2011*



Analyzing data from clinical evaluations from the senior reflective nursing course indicate that the level of achievement is being met in the Department of Baccalaureate Nursing and not met in the Department of Baccalaureate Nursing Completion. The benchmark for clinical evaluations is that 100% of students will have a satisfactory or higher score on the clinical evaluation tool.

In the Department of Baccalaureate Nursing Completion, a random sampling of clinical evaluations of students was not attainable due to incomplete or missing evaluations. Faculty verbally indicated that students' clinical performances have been satisfactory. Course instructors will collaborate with clinical instructors and preceptors in order to assure that students apply and demonstrate nursing knowledge in clinical settings. Faculty will also work with clinical instructors and preceptors to improve completion and submission of evaluation of students' clinical performances.

Student exit survey results for provider of care in both departments have been above 4.0 for the past four (4) semesters. The expected level of achievement has been met.

The goal of provider of care has been only partially met in both departments. Ninety percent (90%) of the students have not attained the expected level of achievement on either the ATI RN Comprehensive Predictor examination or the sub-scores. Clinical evaluations for students in the Department of Baccalaureate Nursing have achieved the benchmark; however, those in the Department of Baccalaureate Nursing Completion have either been incomplete or missing. The process of compiling and collecting clinical evaluation tools and storage of these documents has been clarified with faculty to correct this error. Both departments have achieved the goal based on student exit survey results.

The terminal program goal for leader is: *The student will provide responsible direction in the management of human, fiscal, and material resources necessary for achieving quality health care outcomes.* Data come from scores on the ATI RN Leadership examination, scores on the Management of Care sub-score on the ATI RN Comprehensive Predictor examination, and the student exit survey. The expected level of achievement for the ATI RN Leadership examination is that 90% of the students completing this examination will score at or above a Proficiency Level 2 on the first attempt.

Based on the assessment data, this level of achievement has not been met in either department. During spring 2010 only 75.5% of students in the Department of

Baccalaureate Nursing achieved Proficiency Level 2 on the first attempt of the ATI RN Leadership examination; only 80.6% of LVN/LPNs in the Department of Baccalaureate Nursing achieved Proficiency Level 2 on the first attempt. Management of Care sub-scores range from 69.9% to 76.9% in the traditional baccalaureate track; for the LVN/LPN to BS track, sub-scores have ranged from 71.6% to 80% for the past four (4) semesters.

Plans for improvement include a curriculum revision that introduces the leadership course earlier in the Department of Baccalaureate Nursing traditional track. Content will be strengthened by including ATI material into weekly quizzes. A recommendation has been made to revise the expected level of achievement to align with program mean for this examination. The revised expected level of achievement would be 90% of the students completing this examination will score at or above the mean program on the first attempt.

The expected level of achievement on the student exit survey is a mean score of student self-perception as a leader on the Adequacy of Preparation of 3.75 or higher (on a 1-5 Likert scale). Results from the student exit survey indicate that both departments have achieved the benchmark. Students' scores are generally higher than 4.0.

Based on attainment of expected levels of achievement, the goal of leader has only been partially met in both departments. Less than 90% of the students have attained the expected level of achievement on the ATI RN Leadership examination and the

Management of Care sub-score. The expected level of achievement on the student exit survey has been attained.

The terminal program goal for professional is: *The student will demonstrate accountability and responsibility for nursing judgments and actions within an ethical and legal framework.* The evaluation data comes from the Management of Care sub-score on the ATI RN Comprehensive Predictor exam, the clinical evaluation from the senior reflective practice course, and from the student exit survey.

Expected level of achievement is that the group score on Management of Care sub-scores on the first attempt of the ATI RN Comprehensive Predictor examination will meet or exceed the national program mean score. The goal has been met in both departments. Analyzing data from clinical evaluations from the senior reflective nursing course indicate that the expected level of achievement is being met in the Department of Baccalaureate Nursing and not met in the Department of Baccalaureate Nursing Completion. The benchmark for clinical evaluations is that 100% of students will have a satisfactory or higher score on the clinical evaluation tool.

In the Department of Baccalaureate Nursing Completion, a random sampling of clinical evaluations of students was not attainable due to incomplete or missing evaluations. Faculty verbally indicated that students' clinical performances have been satisfactory. The process of completing and collecting clinical evaluation tools and storage of these documents has been clarified with faculty to correct this error.

The expected level of achievement on the student exit survey is that the mean score of student self-perception as a professional on the Adequacy of Preparation exit survey will be 3.75 or higher (on a 1-5 Likert scale). Results from students' scores in the traditional baccalaureate track indicate that the expected level of achievement has been attained; scores from LVN/LPNs have been greater than 4.0 for the past four (4) semesters.

Results of the Management of Care sub-score on the ATI RN Comprehensive Predictor exam, the clinical evaluation from the senior reflective practice course, and from the student exit survey indicate the goal of professional has been met in the Department of Baccalaureate Nursing. The goal has only been partially met in the Department of Baccalaureate Nursing Completion has only been partially met due to incomplete or missing data from the clinical evaluation tool.

The terminal program goal for life-long learner is: *The student will adapt to changes related to culture, ecology, economics, politics and the expansion of scientific knowledge and technology.* Evaluation data comes from a written paper and an oral presentation in the professional nursing synthesis course that evolves from Foundational Studies outcomes, a life-long learning assignment from the professional nursing synthesis course, a student self-evaluation of a personal life-long learning plan in the community health nursing course, and the student exit survey.

The expected level of achievement for the written paper in the professional nursing synthesis course is that students will complete a paper analyzing how ecological,

economical, and political arenas shape health care policies with a score of 75% or higher. This outcome has been met in both departments for the past four (4) semesters. For the oral presentation the expected level of achievement is that students will complete a culture presentation. One-hundred (100%) percent of students have completed the oral presentation in both department courses.

Random sampling of the life-long learning assignment in the professional nursing synthesis course indicates that students score at 75% or higher to meet the expected level of achievement. In the Department of Baccalaureate Nursing Completion, the assignment was changed to a survey to reflect a change in the Foundational Studies outcomes. The survey was not graded after fall 2010; however, an assessment rubric indicated that 100% of students who completed the survey in fall 2010 and spring 2010 stated that they plan to continue the learning process either formally or informally.

The expected level of achievement for the self-evaluation of a personal life-long learning plan in the community health nursing course is that 100% of three (3) randomly selected Clinical Evaluation Tools will show that students have completed this assignment. This goal was met for the Department of Baccalaureate Nursing. Since fall 2009, in the Department of Baccalaureate Nursing Completion, this benchmark has not been met. In spring 2010, only one (1) Clinical Evaluation Tool could be located; in fall 2010, no Clinical Evaluation Tools were located. Faculty discussed this issue and have addressed it as discussed in the provider of care and professional role sections.

The expected level of achievement on the student exit survey is that the mean score of student self-perception as a life-long learner on the Adequacy of Preparation exit survey will be 3.75 or higher (on a 1-5 Likert scale). Results from students' scores in the traditional baccalaureate track indicate that the benchmark has been met; scores from LVN/LPNs have been greater than 4.0 for the past four (4) semesters.

Results from the written paper and an oral presentation in the professional nursing synthesis course, the life-long learning assignment from the professional nursing synthesis course, a student self-evaluation of a personal life-long learning plan in the community health nursing course, and the student exit survey show that the goal of life-long learner has been met in the Department of Baccalaureate Nursing. The goal of life-long learner has only partially met in the Department of Baccalaureate Nursing Completion due to the incomplete or missing student self-evaluation of a personal life-long learning plan in the community health nursing course.

The terminal program goal of advocate is: *The student will promote health care policy, finance, and regulatory environments for individuals, families, and communities.*

Evaluation data comes from policy analysis paper in the community health course and the student exit survey. Expected level of achievement is that 100% of the students completing a paper in which they analyze the role of the nurse policy developer in the community health course will receive a score of 75% or higher. This benchmark has not been met in either department; 100% of students did not achieve a score of 75% or higher.

A mean score of students' self-perception as an advocate on the Adequacy of Preparation section of the student exit survey will be 3.75 or higher (on a 1-5 Likert scale). This benchmark has been met in both departments with mean scores greater than 4.0 for the past four (4) semesters.

The goal of advocate has only been partially met in either department. The evaluation data from the policy analysis paper indicate that the benchmark has not been met; data from the student exit survey show that the benchmark is met.

The terminal program goal of coordinator of community resources is: *The student will collaborate with members of the interdisciplinary healthcare team in multiple settings.*

The evaluation data comes from the ATI RN Community Health exam, clinical evaluations from the community health course, and the student exit survey. The expected level of achievement is that 90% of students will score at or above Proficiency Level 2 on the first attempt of the ATI RN Community Health examination. The goal has been met for both departments. In the past four (4) semesters, 90.5% to 100% of students who have taken the ATI RN Community Health examination have scored at Proficiency Level 2 or higher.

The expected level of achievement for students' evaluation on the clinical evaluation tool will be a score of 3.0 or higher. This benchmark has been met only in the Department of Baccalaureate Nursing. In the Department of Baccalaureate Nursing Completion, the benchmark has not been met due to incomplete or missing clinical evaluation tools. This situation has already been addressed.

A mean score of students' self-perception as an coordinator of community services on the Adequacy of Preparation section of the student exit survey will be 3.75 or higher (on a 1-5 Likert scale). This benchmark has been met in both departments with mean scores greater than 4.0 for the past four (4) semesters.

Results of assessment data indicate that the goal of coordinator of community resources has been met in the Department of Baccalaureate Nursing and partially met in the Department of Baccalaureate Nursing Completion. Students in both departments have achieved the expected level for the ATI RN Community Health examination and the student exit survey. Clinical evaluations of students in the Department of Baccalaureate Nursing indicate that the benchmark has been met; however, due to incomplete or missing data in the community health nursing course in the Department of Baccalaureate Nursing Completion, the benchmark was not met.

CRITERION 6.4 (Advanced Practice Nursing): The program demonstrates evidence of achievement in meeting the following program outcomes:

- **Performance on licensure exam**
- **Performance on certification exams**
- **Program completion**
- **Program satisfaction**
- **Professional/job placement**

Documentation confirms:

6.4.1 The program demonstrates evidence of achievement in meeting the outcome-performance on licensure exam.

Expected Level of Achievement: For entry-level master's programs, the program licensure exam pass rates will be at or above the national mean. Not applicable. One admission requirement for the master's program is current RN licensure.

6.4.2 The program demonstrates evidence in meeting the outcome-performance on certification exams.

Expected Level of Achievement: Eighty-percent (80%) of first-time candidates for certification exams will pass the certification examinations. Graduates of the Family Nurse Practitioner concentration self-report certification results to the faculty or program director. Those results are entered into a database for comparison with results sent from both certifying bodies. Graduates of the Nursing Education concentration are eligible by preparation to take the Certified Nurse Educator exam; however, they must have at minimum 2 years of full-time employment prior to sitting for the examination. As of spring 2011, no graduates have reported taking the exam.

Actual Level of Achievement: Table 6.4.2 sets forth self-reported Family Nurse Practitioner certification pass rates for the period beginning fall 2005 to fall 2009. These data reflect that the self-reported student pass rates have exceeded 80%.

Table 6.4.2 *FNP Certification Self-reported Pass Rates*

Semester	Total # Of Students Taking Certification	Total # Of Failures	Pass Rate
Fall 2009	38	4	89.5%
Fall 2008	35	2	94%
Fall 2007	36	4 results unknown	88.9%
Fall 2006	12	1	92%
Fall 2005	7	0	100%

Action Taken/Time Frame: No action required. However, in an effort to continue to ensure complete and accurate results, students will be contacted via telephone and/or electronic mail by the program director 6 months post-graduation to determine pass rates.

6.4.3 The program demonstrates evidence in meeting the outcome-program completion.

Expected Level of Achievement: Eighty percent (80%) of students will graduate from the program within 1 ½ times the length of the program. All concentrations in the master’s program are designed for part-time (3 years or longer) or full-time (2 years) study.

However, a large majority of students attend part-time. The FNP concentration consists of 48-51 credit hours, while Nursing Education and Nursing Administration are comprised of 35-38 and 32-38 credit hours, respectively. According to the College of Graduate and Professional Studies, all students have seven years to complete their Master’s degree.

Actual Level of Achievement: Table 6.4.3 depicts the graduation and retention rates beginning fall 2004 to fall 2008.

Table 6.4.3 *Graduation Rates and Retention Rates for MS Students, all concentrations, Fall 2004-Fall 2008*

Semester	Cohort	Graduated	Percent Graduated	Still in Progress	Retention Rate
Fall 2004	19	13	68%	3	84%
Spring 2005	20	25	75%	2	85%
Fall 2005	40	30	75%	3	83%
Spring 2006	29	19	66%	1	69%
Fall 2006	56	41	73%	1	75%
Spring 2007	56	39	70%	8	84%
Fall 2007	54	35	65%	14	91%
Spring 2008	34	12	35%	20	94%
Fall 2008	49	19	39%	27	94%

Action Taken/Time Frame: Specific data related to time of program completion have not historically been maintained by the University or APN Department. A new database has been developed, and is currently in use, that includes program start and completion dates. These data will indicate the amount of time taken to complete the program of study and will be maintained by the APN Department Student Support Specialist. In addition, the APN Department has developed a Recruitment and Retention plan.

6.4.4 The program demonstrates evidence in meeting the outcome-program satisfaction.

Expected Level of Achievement: Eighty percent (80%) of graduates and their employers will express satisfaction with the program. MS students are surveyed upon exiting the program regarding their satisfaction with the program. Program satisfaction is assessed

by means of a Qualtrics exit survey (qualitative and quantitative measures). Data from these results are reflected in Table 6.4.4a.

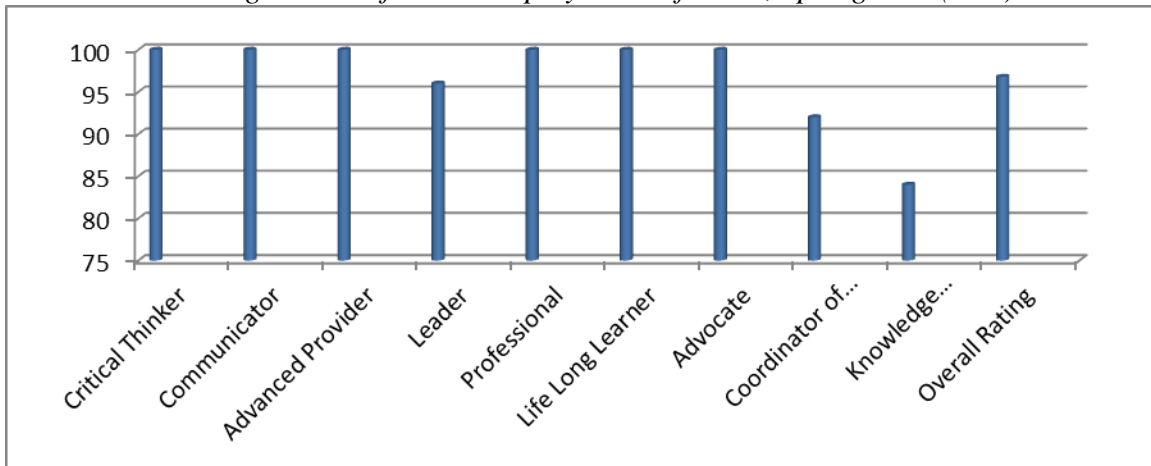
Actual Level of Achievement: As noted below, aside from one semester, more than 80% of students consistently report being satisfied with their program.

Table 6.4.4a *Program Satisfaction – MS Students, Fall 2009 to Spring 2011*

Semester	Mean Satisfaction (1-5 Likert scale)	Percentage Satisfaction	Number of Graduates
Fall 2009	4.67	93%	38
Spring 2010	3.80	76%	11
Fall 2010	4.30	86%	49
Spring 2011	5.00	100%	17

Employer satisfaction is assessed every 3 years with the last assessment occurring in spring 2011. Previous data results were unattainable. Results from that survey are reported in Table 6.4.3b. Overall, 96.8% of employers were satisfied with our graduates. Program outcomes were used as the evaluation criteria.

Table 6.4.3b *Program Satisfaction-Employer Satisfaction, Spring 2011(n=5)*



Action Taken/Time Frame: No action required. However, in an effort to increase response rate, the APN Department will send out the Student Exit Survey upon graduation, as well as the Alumni Survey at six months and twelve months post-graduation beginning with fall 2010 graduates.

6.4.5 The program demonstrates evidence in meeting the outcome-professional/job placement.

Expected Level of Achievement: Eighty percent (80%) of those seeking employment will be involved in role-related professional practice at one year post-graduation.

Actual Level of Achievement: Table 6.4.5 displays job placement rates for graduates of the master’s program in the Department of Advanced Practice Nursing. Job placement rates are determined as a result of the student exit survey administered at the time of graduation as well as from a database kept in the department reflecting self-reported job placement. Data are reflective of those students who volunteer to report that they found a position involving role-related professional practice. As the table below indicates, the APN Department consistently exceeded 80% on job placement rates.

Table 6.4.5 *Job Placement Rates, MS Students, Fall 2007 to Fall 2010*

Academic Year	Number of Graduates Reporting	Percentage Employed
2007-2008	36	97.2%
2008-2009	30	93.3%
2009-2010	24	95.8%

Action Taken/Time Frame: Upon review of data received from the College, it became apparent that the results did not coincide with self-reported data obtained by the department. To better track and reflect actual employment data, the APN Department plans to send out the Student Exit Survey upon graduation, as well as the Alumni Survey at six months and twelve months post-graduation beginning with fall 2010 graduates.

CRITERION 6.5 (Baccalaureate Nursing, Baccalaureate Nursing Completion): The program demonstrates evidence of achievement in meeting the following program outcomes:

- **Performance on licensure exam**
- **Program completion**
- **Program satisfaction**
- **Job placement**

Documentation confirms:

6.5.1 The licensure exam pass rates will be at or above the national mean.

The licensure pass rate for graduates from the Baccalaureate Nursing and Baccalaureate Nursing Completion program has fluctuated in the past 7 years. One requirement for maintaining Indiana State Board accreditation is that programs must demonstrate that they are preparing their students adequately so as to be successful on their pre-licensure examinations. If a program posts 3 or more consecutive years of having first-time graduate pass rates less than one standard deviation below the national average, the program is required to present and implement a corrective action plan. Failure to improve the school pass rates to meet the Board's accreditation requirements can ultimately result in the program's loss of Board accreditation and program closure.

As a result of failure to meet the Indiana State Board accreditation requirements for achieving national benchmarks, the Board has required that a plan of correction be written. The full plan of correction is located as an exhibit for this report.

Tables 6.5.1a, 6.5.1b, and 6.5.1c show RN licensure pass rates for graduates of the traditional Baccalaureate nursing program, the LVN/LPN to BS track, and a combined pass rate respectively.

Table 6.5.1a *RN Licensure Pass Rates for Baccalaureate Nursing (traditional program) Graduates (in percentages)*

	2004	2005	2006	2007	2008	2009	2010
ISU	73.91**	89.13	89.66	87.93	86.11*	71.43**	80.68**
Indiana	74.1	76.49	75.25	74.84	86.10	87.80	86.8
National	84.79	87.29	88.11	85.50	86.73	88.40	87.4

*Below national benchmark passing rates

**Below state and national benchmark passing rates

Table 6.5.1.b *RN Licensure Pass Rates for Baccalaureate Nursing (LVN/LPN to BS track) Graduates (in percentages)*

	2007§	2008	2009	2010
ISU	71.43*	100.00	81.82**	82.35**
Indiana	74.84	86.10	87.80	86.8
National	85.50	86.73	88.40	87.4

§ First cohort

*Below national benchmark passing rates

**Below state and national benchmark passing rates

Table 6.5.1c *RN Licensure Pass Rate for Baccalaureate Nursing Graduates Combined (in percentages)*

	2007	2008	2009	2010
ISU	86.15	86.49*	72.72**	81.15**
Indiana	74.84	86.10	87.80	86.8
National	85.50	86.73	88.40	87.4

*Below national benchmark passing rates

**Below state and national benchmark passing rates

6.5.2 Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, and program history.

The baccalaureate nursing curriculum is developed to be completed within eight (8) semesters or four (4) academic years of full-time study. Based on trended data, a benchmark for the traditional baccalaureate nursing curriculum of 70% graduation rate is the expected level of achievement.

The RN to BS track can be completed in four (4) semesters or two (2) years of full-time study following admission. The LVN/LPN to BS track can be completed in six (6) semesters or three (3) years of full-time study. Both tracks are designed for part-time study of the working adult student. Based on trended data, a benchmark for the online tracks of the baccalaureate nursing curriculum of 50% graduation rate is the expected level of achievement.

Table 6.5.2 indicates the percentage of students who have graduated from the baccalaureate nursing program over a five-and-one-half (5.5) year period of time. The benchmark for Indiana State University is that by 2014, there will be an increase in the four-year graduation rate to 26%, with the long-range goal being 30% and by 2014, there will be an increase in the six-year graduation rate to 46%, with the long-range goal being 55%.

Table 6.5.2 *Graduation Rates for Traditional Baccalaureate Students, RN to BS Students, and LVN/LPN Students, Fall 2004-Fall 2008*

Semester	Traditional			RN to BS			LVN/LPN to BS		
	Cohort	Graduated	Percent	Cohort	Graduated	Percent	Cohort	Graduated	Percent
Fall 2004	82	55	67%	5	5	100%	NA	NA	NA
Spring 2005	35	25	71%	9	7	78%	3	3	100%
Fall 2005	81	57	70%	13	8	62%	9	7	78%
Spring 2006	36	27	75%	17	12	71%	8	5	63%
Fall 2006	57	44	77%	28	12	43%	24	15	63%
Spring 2007	42	31	74%	43	20	47%	17	9	53%
Fall 2007	58	54	93%	23	7	30%	27	15	56%
Spring 2008	42	34	81%	15	3	20%	48	19	40%
Fall 2008	49	33	67%	33	8	24%	37	14	38%

6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers.

Program Satisfaction. One-hundred percent (100%) of students who respond to questions about program satisfaction are satisfied with the nursing program. Program satisfaction is assessed by means of a Qualtrics exit survey (qualitative and quantitative measures) and focus groups. Students are asked the following 3 questions relating to satisfaction with the program:

- *I would recommend this program to others.*
- *If I had to do it over, I would enter this program at ISU.*
- *Overall, I am satisfied with my education at ISU.*

Program satisfaction is assessed at the time of graduation using a 1-5 Likert scale where 1=Strongly Disagree to 5=Strongly Agree; alumni are also assessed at 6 months by means of an email request. Because there have been changes in the type of survey, the questions asked, and data storage, results from prior to fall 2009 are difficult to retrieve.

The survey has 10 additional questions that ask students to indicate their satisfaction in other areas. A recommendation has been made to utilize these data in order to evaluate other aspects of the program such as learning experiences, classrooms and/or online environments, new student orientation, advising, student-to-student interactions, faculty, foundational studies requirements, experiential learning experiences, and community service. Some of these aspects are evaluated in course evaluations; however, the student has an opportunity on the student exit survey to provide an overall response in these areas.

Results indicate that graduates who respond to the student exit survey are satisfied with the nursing curriculum and program. Table 6.5.3a summarizes program satisfaction results from traditional baccalaureate graduates (campus); Table 6.5.3b summarizes program satisfaction results from RN to BS graduates and LVN/LPN graduates (online).

Table 6.5.3a *Program Satisfaction – Traditional Baccalaureate Graduates (Campus), Fall 2009 to Spring 2011*

Program Satisfaction	Traditional (Campus) Baccalaureate Graduates			
	Fall 2009	Spring 2010	Fall 2010	Spring 2011
Mean score	4.02	3.71	3.63	3.37
Number of respondents	n=26	n=50	n=22	n=44

Table 6.5.3b *Program Satisfaction – RN to BS and LVN/LPN to BS Graduates, Fall 2009 to Spring 2011*

Program Satisfaction	RN to BS and LVN/LPN to BS Baccalaureate Graduates							
	Fall 2009		Spring 2010		Fall 2010		Spring 2011	
	RN	LVN/LPN	RN	LVN/LPN	RN	LVN/LPN	RN	LVN/LPN
Mean score	4.06	3.72	4.00	4.01	3.71	4.18	3.41	4.60
Number of respondents	n=15	n=20	n=7	n=13	n=15	N=25	n=8	n=11

Qualitative themes emerging from responses to program satisfaction relate to curriculum, faculty, and resources.

Curriculum:

- Undergraduate
 - “The strong focus on knowledge base.”
 - “The theory aspect of this program is excellent.”
 - “Need more clinical time.”
 - “Need a nutrition course.”

- Graduate
 - “Greatest strength-curriculum.”
 - “Classes/Focused Subjects.”
 - “The flexibility of the program for those who are working through the duration of the program.”
 - “Course requirements not always clear.”
 - “The students have to find their own clinical sites.”

Faculty:

- Undergraduate
 - “Professor involvement and encouragement.”
 - “The instructors are fabulous.”
 - “The instructors and the content they teach.”
 - “The faculty teaches on the level that they have to. Only a couple of instructors went beyond this to teach us and make us learn what we needed to in order to be good nurses.”
 - “A lot of the vital information wasn’t lectured enough, so I had to learn a lot of my own.”

- Graduate
 - “The flexibility and the wonderful instructors.”

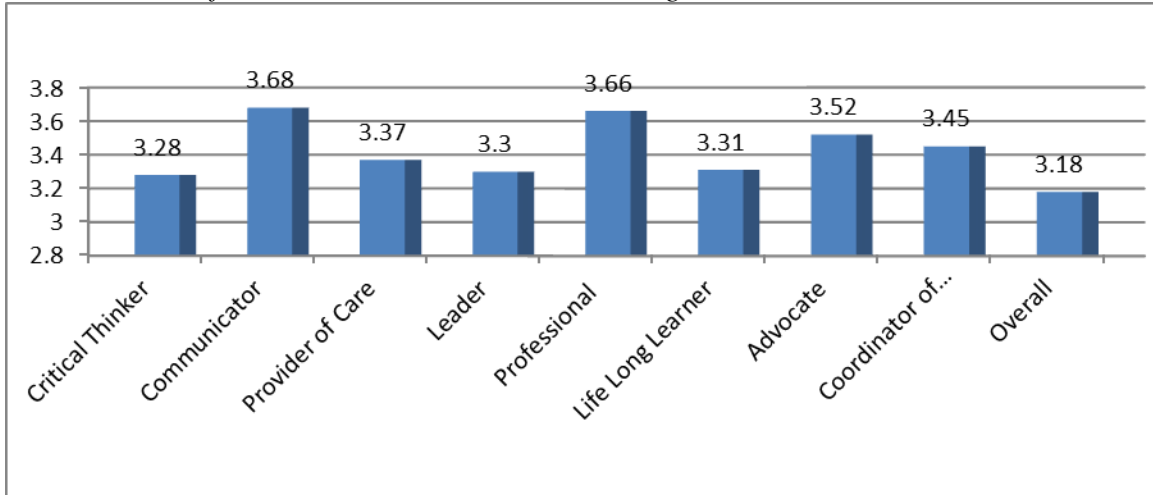
- “Nursing instructors; I felt very fortunate to have such a wonderful group of instructors.”
- “Enthusiasm of instructors and flexibility of learning experiences.”

Resources:

- Undergraduate
 - “The rate at which you can complete coursework and terrific advising.”
 - “Learning how to use computer to do different assignments.”
 - “The diversity of clinical settings.”
 - “Lack of clinical sites.”
- Graduate
 - “Blackboard.”
 - “Amount of clinical hours.”
 - “24 hour-7day per week access to online educational materials.”
 - “It would have been nice to have had lectures via video rather than just PowerPoints. The videos should not read the power points to us, but lecture using the PowerPoints, adding in some examples.”
 - “Having to find own clinical sites.”

Employer Satisfaction. Feedback from students on the student exit survey and employers on the employer survey confirm that graduates are competent and prepared for entry level, contemporary nursing positions. The benchmark for the employer satisfaction survey is that 100% of employers who complete the survey will rate their satisfaction with graduates at 3.75 (on a 1-5 Likert scale). Employers are surveyed every three (3) years. The employer satisfaction survey asks employers to rate satisfaction with graduates using the 8 role outcomes of the nursing program. Table 6.5.3c indicates the results of the spring 2011 survey.

Table 6.5.3c *Results from Employer Satisfaction Survey of Satisfaction with Graduates of Traditional Baccalaureate Nursing Track*



Results show that employers were satisfied in 3 of the 8 role categories, Communicator, Professional, and Advocate. Overall, employers rated their satisfaction of graduates from the traditional baccalaureate nursing track as 3.18, which does not meet the benchmark of 3.75.

Several comments from the Employer Satisfaction Survey follow:

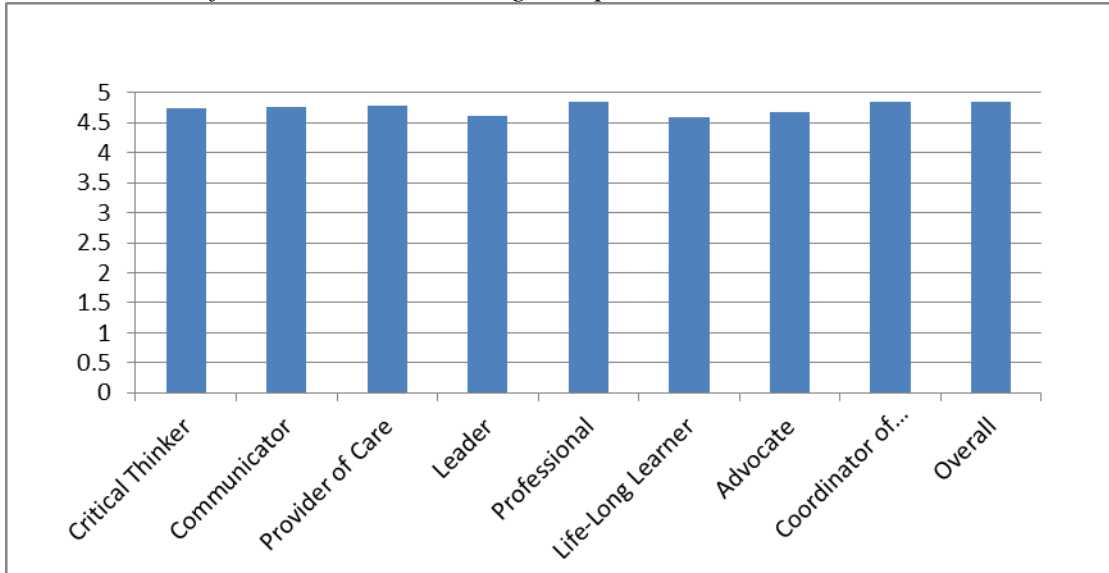
“There has been a noticeable improvement in the overall quality, preparedness, and professionalism of ISU grads over the last 5-6 years. I don’t know if that’s attributable to the change from an Associate’s focus to a Bachelor’s focus or for some other reason, but it has been noticeable.”

“New grads tend to be task-focused and unable to look at the ‘big picture.’ I think critical thinking skills are something that comes with time and experience and not an indication of a program deficiency.”

“Most of the nursing staff post-graduation are clinically sound, need more focus on giving back to community.”

Table 6.5.3d shows the results of employer satisfaction results for spring 2011 for the distance education tracks.

Table 6.5.3c *Results from Employer Satisfaction Survey of Satisfaction with Graduates of Baccalaureate Nursing Completion Tracks*



Results show that employers were satisfied in all role categories. Overall, employers rated their satisfaction of graduates from the baccalaureate nursing completion tracks as 4.85, which exceeds the benchmark of 3.75.

6.5.4 Job placement rates are addressed through quantified measures that reflect program demographics and history.

Employment rates are determined as a result of the Exit Survey administered at the time of graduation. A follow-up alumni survey at 6 months after graduation is administered as well. One-hundred percent of graduates of the traditional campus, RN to BS, and LVN/LPN to BS tracks of the baccalaureate program who volunteered to report indicated that they found employment in a nurse generalist role for which they have been prepared.

Recently, graduates have reported increasing difficulty in finding jobs; however, this seems to be indicative of the region in which they live.

There are 7 questions that pertain to job placement, (a) have made no efforts to obtain a job, (b) have applied, but have not had any offers, (c) have applied, but have not accepted any position yet, (d) have applied and accepted a position, (e) have a current degree-related position, but will probably change employers following graduation, (f) have a position but not related to my degree, (g) no job but plan to continue as a student. Only those students who answered question (d) were included in determining job placement rates. Table 6.5.4 shows job placement rates for graduates of the baccalaureate program.

Table 6.5.4 *Job Placement Rates for Traditional, RN to BS, and LVN/LPN Graduates, Fall 2007 to Spring 2011*

Graduating Semester	Job Placement Rates		
	Traditional	RN to BS	LVN/LPN to BS
Fall 2007	100% (n=17)	100% (n=3)	100% (n=2)
Spring 2008	100% (n=1)	100% (n=9)	100% (n=2)
Summer 2008	100% (n=13)	n/a	n/a
Fall 2008	100% (n=22)	100% (n=7)	100% (n=4)
Spring 2009	100% (n=25)	100% (n=23)	100% (n=8)
Summer 2009	100% (n=11)	n/a	n/a
Fall 2009	No report	100% (n=15)	100% (n=20)
Spring 2010	100% (n=29)	100% (n=7)	100% (n=13)
Summer 2010	100% (n=7)	n/a	n/a
Fall 2010	100% (n=4)	100% (n=15)	100% (n=25)
Spring 2011	No report	100% (n=5)	100% (n=11)

n/a=Summer courses were not offered to these groups.

CRITERION 6.5 (Advanced Practice Nursing): The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that students learning and program outcomes are comparable for all students.

All graduate courses are offered through online modalities. Occasionally, a campus section will be arranged for an international student who may be limited in the number of online credits that may be earned in a semester. Assessment of program outcomes indicates that students are mastering the graduate competencies in all three of the concentrations.

CRITERION 6.6 (Baccalaureate Nursing Completion): The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that students learning and program outcomes are comparable for all students.

As identified in Standard 6, Criterion 1, each department has a well-constructed Assessment Plan to evaluate program outcomes. The undergraduate nursing tracks intentionally selected valid and reliable commercial testing products to ensure comparable attainment of student learning in campus and online courses. ATI content mastery scores and aggregate data provide faculty with a rapid review and a platform for scholarly activities in the area of teaching and learning. For example, one thesis has been completed with a publication (in press) that compares scores of LVN/LPN to BS students and the traditional campus students in the content area of mental health. The results indicate that there is not a statistically significant difference between the two groups in the student's educational attainment.

The ATI RN Comprehensive Predictor Examination also provides an overall assessment of students' strengths and areas for improvement. An Academic Profile of all students is

generated at the beginning of their senior year. These data are used by the nursing faculty who conduct the mid-semester content review before the ATI RN Comprehensive Predictor Examination is administered. Trended data over time have been helpful in assessing curriculum strengths and weaknesses in all undergraduate tracks.