



Indiana State Board of Nursing

402 West Washington Street, Room W072

Indianapolis, Indiana 46204

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Governor Mitchell E. Daniels, Jr.

ANNUAL REPORT FOR PROGRAMS IN NURSING

Guidelines: An Annual Report, prepared and submitted by the faculty of the school of nursing, will provide the Indiana State Board of Nursing with a clear picture of how the nursing program is currently operating and its compliance with the regulations governing the professional and/or practical nurse education program(s) in the State of Indiana. The Annual Report is intended to inform the Education Subcommittee and the Indiana State Board of Nursing of program operations during the academic reporting year. This information will be posted on the Board's website and will be available for public viewing.

Purpose: To provide a mechanism to provide consumers with information regarding nursing programs in Indiana and monitor complaints essential to the maintenance of a quality nursing education program.

Directions: To complete the Annual Report form attached, use data from your academic reporting year unless otherwise indicated. An example of an academic reporting year may be: August 1, 2011 through July 31, 2012. Academic reporting years may vary among institutions based on a number of factors including budget year, type of program delivery system, etc. Once your program specifies its academic reporting year, the program must utilize this same date range for each consecutive academic reporting year to insure no gaps in reporting. You must complete a **SEPARATE report** for each PN, ASN and BSN program.

This form is due to the Indiana Professional Licensing Agency by the close of business on October 1st each year. The form must be electronically submitted with the original signature of the Dean or Director to: PLA2@PLA.IN.GOV. Please place in the subject line "Annual Report (Insert School Name) (Insert Type of Program) (Insert Academic Reporting Year). For example, "Annual Report ABC School of Nursing ASN Program 2011." The Board may also request your most recent school catalog, student handbook, nursing school brochures or other documentation as it sees fit. It is the program's responsibility to keep these documents on file and to provide them to the Board in a timely manner if requested.

Indicate Type of Nursing Program for this Report: PN _____ ASN _____ BSN X _____

Dates of Academic Reporting Year: August 1, 2011 to July 31, 2012
(Date/Month/Year) to (Date/Month/Year)

Name of School of Nursing: Indiana University South Bend School of Nursing

Address: 1700 Mishawka Ave, PO Box 7111, NS460, South Bend IN 46634

Dean/Director of Nursing Program

Name and Credentials: Marta Makielski RN MN

Title: Director Email: mmakiels@iusb.edu

Nursing Program Phone #: 574-520-4382 Fax: 574-520-4461

Website Address: https://www.iusb.edu/nursing/index.php

Social Media Information Specific to the SON Program (Twitter, Facebook, etc.): _____

Facebook: IUSB School of Nursing

Please indicate last date of NLNAC or CCNE accreditation visit, if applicable, and attach the outcome and findings of the visit: March 2010, finding submitted in 2010 Annual Report; next visit will be in 2020.

If you are not accredited by NLNAC or CCNE where are you at in the process? _____

SECTION 1: ADMINISTRATION

Using an "X" indicate whether you have made any of the following changes during the preceding academic year. For all "yes" responses you must attach an explanation or description.

- | | |
|---|-----------------------|
| 1) Change in ownership, legal status or form of control | Yes _____ No <u>√</u> |
| 2) Change in mission or program objectives | Yes <u>√</u> No _____ |
| 3) Change in credentials of Dean or Director | Yes <u>√</u> No _____ |
| 4) Change in Dean or Director | Yes <u>√</u> No _____ |
| 5) Change in the responsibilities of Dean or Director | Yes <u>√</u> No _____ |
| 6) Change in program resources/facilities | Yes _____ No <u>√</u> |
| 7) Does the program have adequate library resources? | Yes <u>√</u> No _____ |
| 8) Change in clinical facilities or agencies used (list both additions and deletions on attachment) | Yes <u>√</u> No _____ |
| 9) Major changes in curriculum (list if positive response) | Yes _____ No <u>√</u> |

Explanations:

2). New Program Outcomes developed and adopted by all campuses of the Indiana University Schools of Nursing in May 2012. Outcomes are similar to previous outcomes but are updated to current initiatives for nursing programs. Curriculum evaluation against the updated outcomes will come in the next year to 18 months and will be campus specific.



INDIANA UNIVERSITY
SOUTH BEND

BSN Program Outcomes-Comparison of New (2012)and Previous

Updated 2012 Version	2003-2011 Version
1. A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.	1. Critical thinker who is able to demonstrate intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems.
2. A culturally sensitive individual who provides holistic individual, family, community, and population-centered nursing care.	2. Culturally competent person who provides holistic nursing care to a variety of individuals, families, and communities.
3. A knowledgeable care coordinator who facilitates access to resources across the continuum of health care environments in order to meet the evolving health care needs of individuals, families, communities, and populations.	3. Knowledgeable care coordinator who facilitates access to resources necessary to meet the health care needs of individuals, families, and communities
4. An individual who understands and considers the impact of health care policy, finance, and regulatory environments on care delivery.	4. An individual who understands the political dynamics in various settings and participates in the change process to shape health care policy
5. An individual who embodies the professional identity of the nurse and who translates the inherent values of the nursing profession into the ethical and legal practice of nursing.	5. An individual who practices within an ethical and legal framework for the nursing profession and demonstrates ethical behavior related to the privacy, security, and confidentiality of patient information.
6. An effective communicator who collaborates with interprofessional team members, patients, and their support systems for improved health outcomes.	6. Effective communicator who is able to share accurate information.
7. A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.	7. Competent provider of nursing care who functions in various professional nurse roles in structured and semi-structured health care settings
8. An accountable leader and manager who applies principles of systems and organizational processes and who balances resources to promote quality care and patient safety.	9. A responsible manager who balances human, fiscal, and material resources to achieve quality health care outcomes
9. An individual who embraces and employs innovations in information management and technology in the delivery of quality patient care.	8. Professional role model who promotes a positive public image of nursing. (now in 5)

Explanations continued:

3,4, 5). In October 2011 Dean Mary Jo Regan Kubinski, Dean of the College of Health Sciences and the School of Nursing, passed away unexpectedly. The Board approved Marta Makielski as Director and Chief Administrator of the School of Nursing. Marta served previously as Director of the Undergraduate Nursing Program. Doug McMillen Ph.D. and previously Associate Dean of the College of Liberal Arts and Sciences was appointed as interim Dean of the College of Health Sciences on January 1, 2012. Doug and Marta remain in these capacities while a search for a permanent Dean of the College is underway. Dr. McMillen is not a nurse but has significant administrative experience at Indiana University South Bend.

8). Clinical Agency Changes:

Additions: (all for Community Health Placements)

- A Rosie Place Hospital
- Bremen Elementary School
- Elkhart Community Schools
- Goodwill Industries
- Harbor Light Hospice
- Healthwin Specialized Care
- Maple Leaf Commons
- Oakhaven Community
- Southern Care Hospice

Removals:

Indiana Health Centers, Inc. - Project Homecoming

Name Changes:

Madison Center--Purchased by Memorial Health System, now called Epworth
VNA--now referred to as Trinity Home Health Services as part of Trinity Health
Triumph Our Lady of Peace now Kindred Hospital of Northern Indiana

SECTION 2: PROGRAM

1A.) How would you characterize your program's performance on the NCLEX for the most recent academic year as compared to previous years? Increasing Stable Declining

1B.) If you identified your performance as declining, what steps is the program taking to address this issue?

2A.) Do you require students to pass a standardized comprehensive exam before taking the NCLEX?
Yes No

2B.) If **not**, explain how you assess student readiness for the NCLEX. We use the ATI Comprehensive Predictor to determine NCLEX readiness but it is used purely as a guide to assist the student to prepare for the exam and is not attached to a grade in the course not as stipulation for program completion

2C.) If so, which exam(s) do you require?

2D.) When in the program are comprehensive exams taken: Upon Completion_____

As part of a course √ Ties to progression or thru curriculum_____

E.) If taken as part of a course, please identify course(s): NURS S 483 Practice Capstone (In last semester of program, usually about 5 weeks prior to completion)

3.) Describe any challenges/parameters on the capacity of your program below:

A. Faculty recruitment/retention: Finding PhD prepared nurses for Tenure track positions; finding certain specialties with MSN's in Psychiatric/Mental Health nursing and Medical-Surgical Nursing. Impending retirements. Clinical faculties are hard to find and change often because of the other positions they hold and schedule needs and demands.

B. Availability of clinical placements: We are fortunate to get many of the sites we request but one issue is low census in certain areas in certain facilities, such as Pediatrics and Psych. This limits the experiences students receive or we have to have smaller clinical groups to comply with unit requirements (good for students and faculty, unit but less cost effective). We have chosen smaller groups sizes in lieu of increased observations.

C. Other programmatic concerns (library resources, skills lab, sim lab, etc.): Our Sim experiences have increased and we are buying upgrades in 2012 but faculty development and resources are a challenge. We would like to see more of the Lab Coordinator position be dedicated to SimLab experiences. We are very proud of what we have accomplished with our Simulation Education

4.) At what point does your program conduct a criminal background check on students?
Criminal background checks are conducted at the point of application for the clinical program, normally second semester of sophomore year, and then again prior to the start of 7th semester (senior year) and placement into our Health of the Community classes.

5.) At what point and in what manner are students apprised of the criminal background check for your program?
Students are informed at the start of their pre-nursing studies of the criminal background check requirement for our program. Academic Advisors review this policy with the student in a one-to-one registration appointment. Students are also given a hard copy of the online catalog department description for the nursing program. In this copy is a heading titled Criminal Checks. All new students pre-nursing must meet with an advisor for registration

SECTION 3: STUDENT INFORMATION

1.) Total number of students admitted in academic reporting year:

Summer 15 Fall 28 Spring 24

2.) Total number of graduates in academic reporting year:

Summer 12 Fall 27 Spring 20

3.) Please attach a brief description of all complaints about the program, and include how they were addressed or resolved. For the purposes of illustration only, the CCNE definition of complaint is included at the end of the report.

4.) Indicate the type of program delivery system:

Semesters Quarters _____ Other (specify): _____

SECTION 4: FACULTY INFORMATION

A. Provide the following information for **all faculty new** to your program in the academic reporting year (attach additional pages if necessary):

Faculty Name:	Rebecca Allen-Legault
Indiana License Number:	28127563A
Full or Part Time:	Full time (Oct 2011-July 30 2012)
Date of Appointment:	October 15, 2011
Highest Degree:	MSN
Responsibilities:	Psychiatric-Mental Health

Faculty Name:	Joyce Palmateer
Indiana License Number:	28156667A
Full or Part Time:	Full-time
Date of Appointment:	August 1, 2011
Highest Degree:	MSN
Responsibilities:	Community Health, Assessment, FNP Program

Faculty Name:	Judy Bellville
Indiana License Number:	28142185A
Full or Part Time:	Part-time
Date of Appointment:	August 1, 2011
Highest Degree:	MSN
Responsibilities:	Psychiatric Mental Health Nursing Clinicals

Faculty Name:	Rita Goff
Indiana License Number:	28071339A
Full or Part Time:	Part-time
Date of Appointment:	November 1, 2011
Highest Degree:	Master's in Education
Responsibilities:	Medical-surgical nursing clinicals

Faculty Name:	Amy Murray
Indiana License Number:	28178429A
Full or Part Time:	Part-time
Date of Appointment:	January 2, 2012
Highest Degree:	BSN
Responsibilities:	Obstetrical Nursing Clinicals

Faculty Name:	Sandria Nixon
Indiana License Number:	28144026A
Full or Part Time:	Part-time
Date of Appointment:	August 1, 2011
Highest Degree:	DNP
Responsibilities:	Family Nurse Practitioner Clinicals, Health & Wellness

Faculty Name:	Kathy Oliver
Indiana License Number:	28086397A
Full or Part Time:	Part-time
Date of Appointment:	March 15, 2012
Highest Degree:	MSN
Responsibilities:	Medical-surgical nursing clinicals

Faculty Name:	LaToya Parhm
Indiana License Number:	28151559A
Full or Part Time:	Part-time
Date of Appointment:	January 2, 2012
Highest Degree:	BSN
Responsibilities:	Obstetrical Nursing Clinicals

B. Total faculty teaching in your program in the academic reporting year:

1. Number of full time faculty: 20
2. Number of part time faculty: 0
3. Number of full time clinical faculty: 0
4. Number of part time clinical faculty: 11
5. Number of adjunct faculty: 2 (Statistics and Chinese Medicine Elective Teacher)

C. Faculty education, by highest degree only:

1. Number with an earned doctoral degree: 4 PhD, 2 DNP
2. Number with master's degree in nursing: 14
3. Number with baccalaureate degree in nursing: 0
4. Other credential(s). Please specify type and number: For Part-time clinical faculty we have one with a DNP, 5 with MSN's and 4 with BSN's. Of those 4 two are in MSN programs. We have one faculty member we use for one rotation per year who is an RN with a BS in Health Administration and a Master's in Education; she has 35 years of Medical-Surgical nursing experience

D. Given this information, does your program meet the criteria outlined in **848 IAC 1-2-13**?

Yes √ No _____

E. Please attach the following documents to the Annual Report in compliance with **848 IAC 1-2-23**:

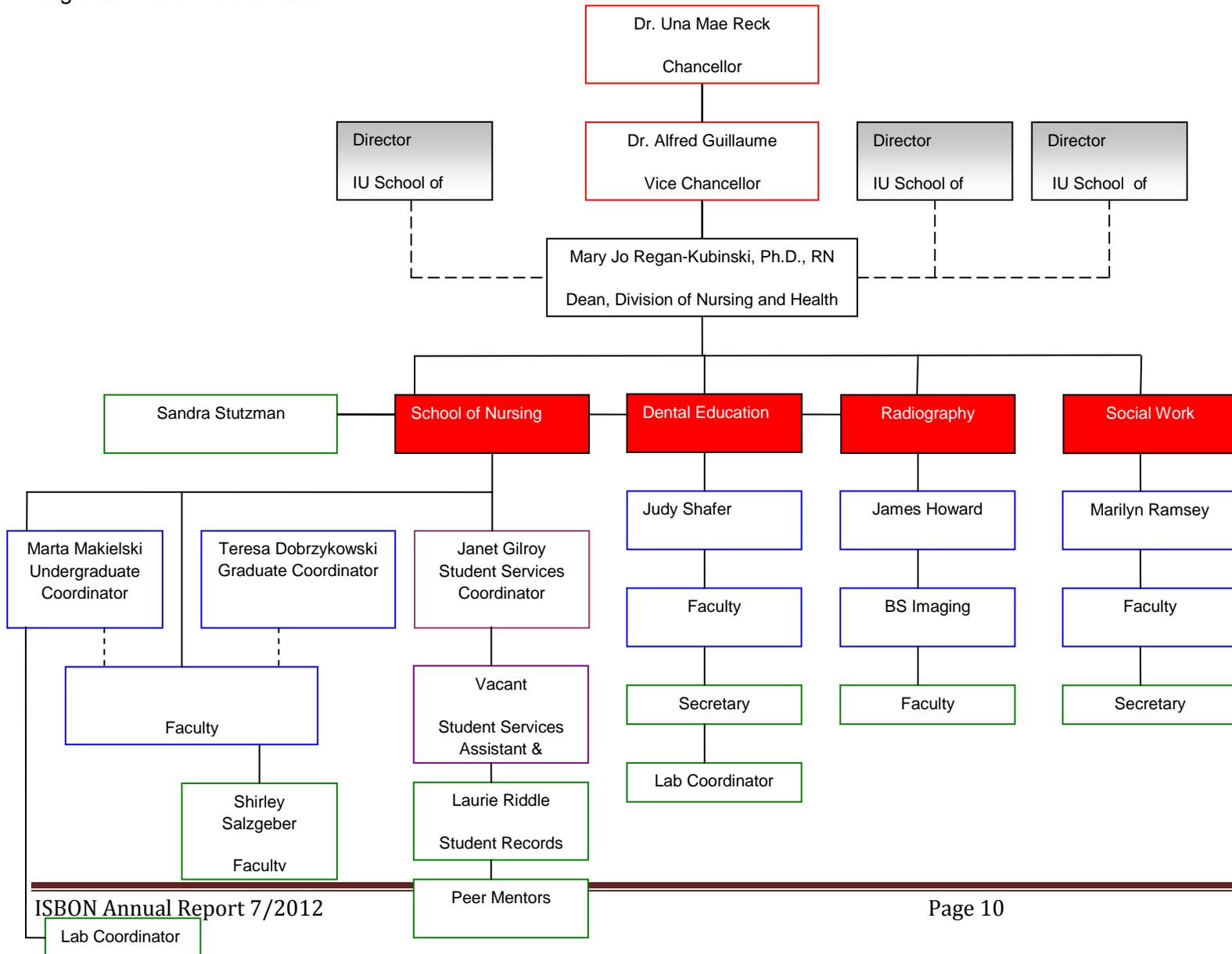
1. A list of faculty no longer employed by the institution since the last Annual Report;

Full-time: Mary Basolo-Kunzer, retired; Mary Jo Regan-Kubinski, deceased; Laura Hieronymus changed to adjunct status from Full time.

Part-time/Clinical: Ivelisse Campos, Ashley Evans, Loretta Schmidt, Beverly Sedlacek, Tara Stokes, Jennifer Teasley

2. An organizational chart for the nursing program and the parent institution. (attached)

Indiana University South Bend – College of Health Sciences
 Organizational Chart 2012/2013



I hereby attest that the information given in this Annual Report is true and complete to the best of my knowledge. This form **must** be signed by the Dean or Director. No stamps or delegation of signature will be accepted.

Marta Makielski

September 12, 2012

Signature of Dean/Director of Nursing Program

Date

Marta Makielski RN MN

Printed Name of Dean/Director of Nursing Program

Please note: Your comments and suggestions are welcomed by the Board. Please feel free to attach these to your report.

Definitions from CCNE:

Potential Complainants

A complaint regarding an accredited program may be submitted by any individual who is directly affected by the actions or policies of the program. This may include students, faculty, staff, administrators, nurses, patients, employees, or the public.

Guidelines for the Complainant

The CCNE Board considers formal requests for implementation of the complaint process provided that the complainant: a) illustrates the full nature of the complaint in writing, describing how CCNE standards or procedures have been violated, and b) indicates his/her willingness to allow CCNE to notify the program and the parent institution of the exact nature of the complaint, including the identity of the originator of the complaint.

The Board may take whatever action it deems appropriate regarding verbal complaints, complaints that are submitted anonymously, or complaints in which the complainant has not given consent to being identified.