

Michael R. Pence, Governor

Nicholas Rhoad, Executive Director

Social Media Information Specific to the SON Program (Twitter, Facebook, etc) N/A

Please indicate last date of ACEN or CCNE accreditation visit, if applicable, and attach the outcome and findings of the visit: NLNAC (ACEN) 2010—please see attached notification of outcomes and findings, ACEN follow-up report letter.

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 X _____
- 2) Change in mission or program objectives Yes _____ No X _____
- 3) Change in credentials of Dean or Director Yes _____ No X _____
- 4) Change in Dean or Director Yes _____ No X _____
- 5) Change in the responsibilities of Dean or Director Yes _____ No X _____
- 6) Change in program resources/facilities Yes _____ No X _____
- 7) Does the program have adequate library resources? Yes X _____ No _____
- 8) Change in clinical facilities or agencies used (list both additions and deletions on attachment) Yes _____ No X _____
- 9) Major changes in curriculum (list if positive response) Yes X _____ No _____

Curriculum Revision 2013 Course Comparison

***Curriculum changes were approved by the ISBN on March 21, 2013; implemented Fall 2013**



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Current Curriculum			Credit Hrs	Curriculum Revision			Credit Hrs
NRSG	104	Introduction to Pharmacology	1	NRSG	106	Pharmacology (Deleted NRSNG 104 & 107 and added NRSNG 106) to both PN and ASN	3
NRSG	107	Advanced Pharmacology	2			(see above)	
NRSG	126	Mental Health Nursing	2			Deleted from PN only	
NRSG	127	Mental Health Nursing Clinical	1			Deleted from PN only	
NRSG	130	Health Promotion Across the Life Span	1			Deleted from ASN	

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. _____

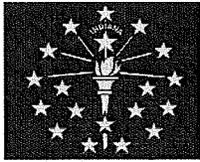
2C.) If **so**, which exam(s) do you require? ATI Comprehensive Predictor Examination

2D.) When in the program are comprehensive exams taken: Upon Completion _____
As part of a course Tied to progression or thru curriculum _____

2E.) If taken as part of a course, please identify course(s): NRSG 128 Practice Issues for Practical Nursing

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

A. Faculty recruitment/retention: Finding credentialed faculty remains a challenge _____



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- B. Availability of clinical placements No issues
- C. Other programmatic concerns (library resources, skills lab, sim lab, etc.): None

4.) At what point does your program conduct a criminal background check on students?

Criminal background checks, through Certified Background.com may be done either before enrollment in the professional courses or just prior to the first day of clinical. Students who are not continuously enrolled in a program until completion may be required to complete additional checks upon re-entry to a program or admission to a different nursing program. Clinical sites or the College may request additional background checks or drug screenings at their discretion.

5.) At what point and in what manner are students apprised of the criminal background check for your program?_

Students receive results online by directly accessing through Certified Background.com using a password assigned by the background search company. They have full access to data within the website and are encouraged to review the background search finding and appeal any issues that they determine are incorrect.

SECTION 3: STUDENT INFORMATION

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

Summer 0 Fall 0 Spring 17

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

Summer 0 Fall 18 (1 from previous cohort) Spring 0

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.

No complaints were processed

4.) Indicate the type of program delivery system:

Semesters X Quarters _____ Other (specify): _____



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SECTION 4: FACULTY INFORMATION

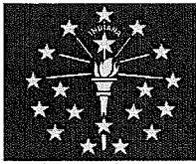
A. Provide the following information for **all faculty new** to your program in the academic reporting year (attach additional pages if necessary):

Faculty Name:	Sarah Toebbe
Indiana License Number:	28180133A
Full or Part Time:	FT
Date of Appointment:	Jan 7, 2012
Highest Degree:	MSN
Responsibilities:	Pediatric content

Faculty Name:	Susan Bryant
Indiana License Number:	28113067A
Full or Part Time:	FT
Date of Appointment:	August 13, 2012
Highest Degree:	MSN
Responsibilities:	Fundamentals, beginning med-surg

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

1. Number of full time faculty: 10
2. Number of part time faculty: 3
3. Number of full time clinical faculty: 10 of 10 full-time faculty teach clinical courses in



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addition to lecture and lab

4. Number of part time clinical faculty: 3 of 3 part-time faculty teach clinical courses

5. Number of adjunct faculty: _____ 0 _____

C. Faculty education, by highest degree only:

1. Number with an earned doctoral degree: _____ 0 _____

2. Number with master's degree in nursing: _____ 13 _____

3. Number with baccalaureate degree in nursing: _____ 0 _____

4. Other credential(s). Please specify type and number: _____

D. Given this information, does your program meet the criteria outlined in **848 IAC 1-2-13 or 848 IAC 1-2-14?**

Yes X 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;

Name	Credentials	Full-time (X)	Part-time (X)
Elizabeth Jones	MSN	X	
Valerie Titus	MSN	X	

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

See attachment



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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.

Karen L. Dolk

September 23, 2013

Signature of Dean/Director of Nursing Program

Date

Karen L. Dolk

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.



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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.



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NLNAC

National League for Nursing Accrediting Commission, Inc.

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March 24, 2011

Gail Sprigler, MSN, RN
Assistant Vice Provost for Nursing Education
Associate of Science in Nursing/Practical Nursing
Ivy Tech Community College of Indiana
50 West Fall Creek Parkway North Drive
Indianapolis, IN 46202

Dear Ms. Sprigler:

This letter is formal notification of the action taken by the National League for Nursing Accrediting Commission (NLNAC) at its meeting on March 3-4, 2011. The Board of Commissioners granted the associate nursing program continuing accreditation with the condition that your program submit a Follow-Up Report in 2 years. If the Follow-Up Report is accepted by the Commission, the next evaluation visit will be scheduled for Fall 2016. The Board of Commissioners granted the practical nursing program continuing accreditation and scheduled the next evaluation visit for Fall 2018.

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

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

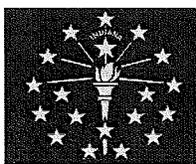
Evidence of Non-Compliance by Accreditation Standard and Criterion

Standard 2 Faculty and Staff, Criterion 2.1

- All full-time faculty are not credentialed with a minimum of a master's degree with a major in nursing. (A)

Ivy Tech Community College of Indiana

Page 1



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Areas of Strength by Accreditation Standard

Standard 1 Mission and Administrative Capacity

- Strong institutional, faculty, and student support for the role of the Vice Provost for Nursing Education through the restructuring of the School of Nursing. (A/P)

Areas Needing Development by Accreditation Standard

Standard 1 Mission and Administrative Capacity

- Provide mechanisms to ensure comprehensive representation of students in program and College governance. (A/P)

Standard 2 Faculty and Staff

- Ensure support for continued achievement of a master's degree with a major in nursing for the full- and part-time faculty. (A/P)
- Provide for sufficient numbers and utilization of program support staff to achieve the program goals and outcomes. (A/P)

Standard 3 Students

- Review and revise public documents (paper and electronic) to ensure that information intended to inform the public is current, clear, accurate, and consistent, including NLNAC contact information. (A)

Standard 4 Curriculum

- Ensure the incorporation of professional standards, guidelines, and competencies throughout the curriculum. (A/P)

Standard 5 Resources

- Implement strategies to ensure the equitable state-wide distribution of learning resources, office facilities, and equipment to meet faculty and student needs. (A/P)

Standard 6 Outcomes

- Implement strategies to ensure local campus and faculty engagement in the implementation of the evaluation plan. (A/P)
- Improve the processes for analysis and dissemination of program- and campus-specific data in order to facilitate the accomplishment of strategic initiatives and ongoing program improvement. (A/P)
- Continue to monitor and respond to licensure exam pass rates that are below the national mean. (A/P)
- Ensure ongoing and systematic evaluation of outcomes, particularly graduate satisfaction and job placement. (A/P)
- Identify and assess specific graduate competencies for role preparation. (A)

A Follow-Up Report requires the nursing education unit to demonstrate compliance with a specific Accreditation Standard or Standards. The Follow-Up Report for the associate program is to address Standard 2 Faculty and Staff. The report is to be submitted to NLNAC in the Spring 2013 Cycle by February 15, 2013. At the time of its review of the Follow-Up Report, the Commission will either affirm the time of the next evaluation visit or deny continuing accreditation and remove the nursing program from the list of accredited programs. We recommend contacting a member of the NLNAC professional staff after reviewing this decision letter.



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On behalf of the Commission, we thank you and your colleagues for your commitment to quality nursing education. If you have questions about this action or about Commission policies and procedures, please write or call me or a member of the professional staff.

Sincerely,

Sharon J. Tanner, EdD, RN
Chief Executive Officer

cc: Marilyn Smidt, Program Evaluator
Jo Ann Baker, Program Evaluator
Nancy Becker, Program Evaluator
Martha Ann Hofmann, Program Evaluator
Joan Becker, Program Evaluator
Reitha Cabaniss, Program Evaluator
Mary Sharon Boni, Program Evaluator
Colleen Burgess, Program Evaluator
Anita Pavlidis, Program Evaluator
Debbie C. Lyles, Program Evaluator
Kay Tupala, Program Evaluator
Shawn P. McNamara, Program Evaluator
Yvonne VanDyke, Program Evaluator

Enc. Summary of Deliberations of the Evaluation Review Panel



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Harris Beach, PLLC
Buffalo, New York

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August 2, 2013

Thomas Snyder, MBA
President
Ivy Tech Community College of Indiana
50 West Fall Creek Parkway North Drive
Indianapolis, IN 46202

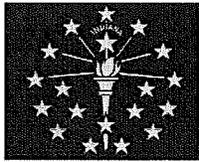
Dear Mr. Snyder:

This letter is formal notification of the action taken by the Accreditation Commission for Education in Nursing (ACEN) at its meeting on July 11-12, 2013. The Board of Commissioners received, reviewed, and accepted the Follow-Up Report of the associate nursing program and affirmed the next visit for Fall 2018. The details of the decision put forth by the Commission have been sent to the program's nurse administrator.

On behalf of the Commission, we thank you and your colleagues for your commitment to quality nursing education. If you have questions about this action or about ACEN policies and procedures, please contact me.

Sincerely,

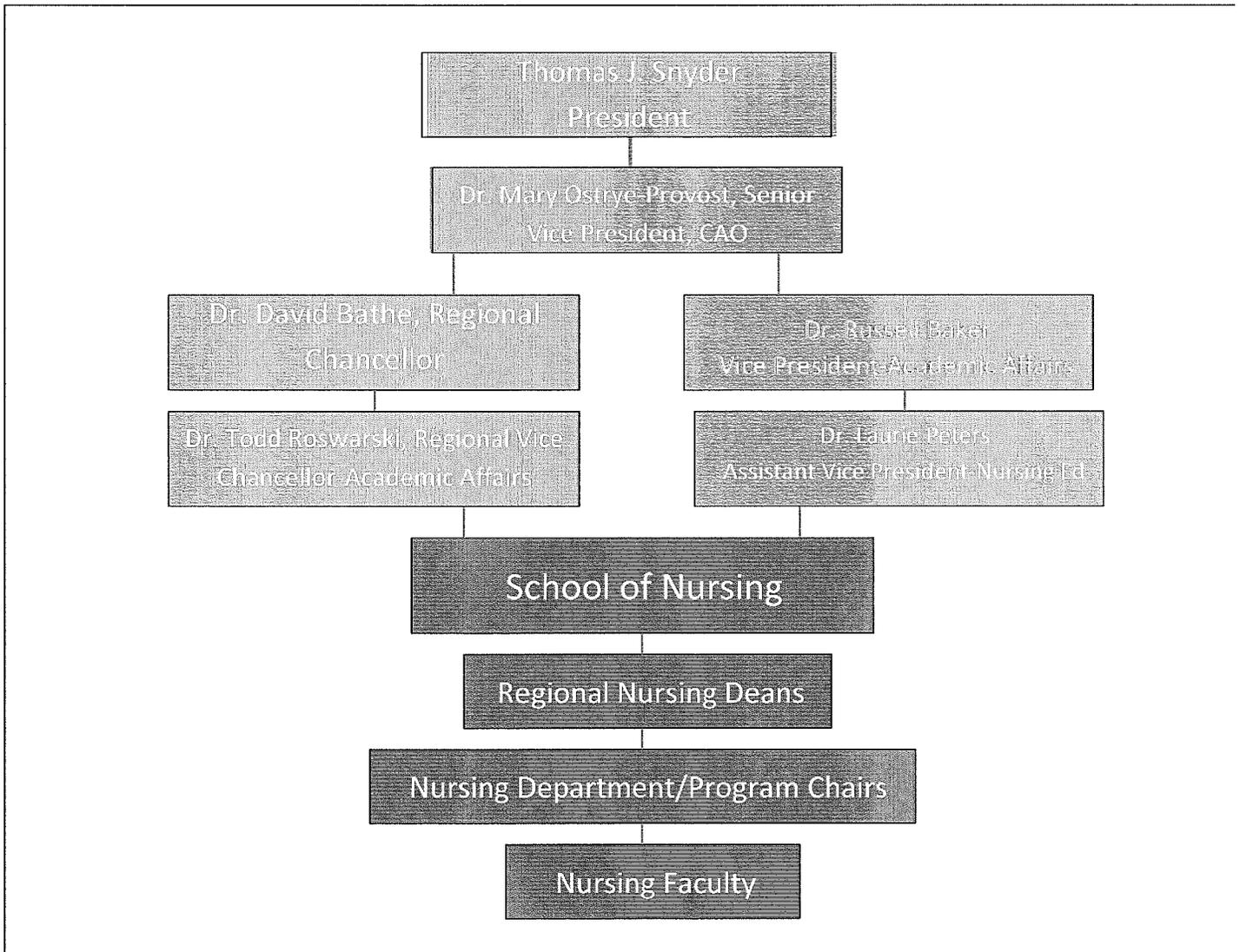
Sharon J. Tanner, EdD, MSN, RN
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Statewide School of Nursing Organizational Chart

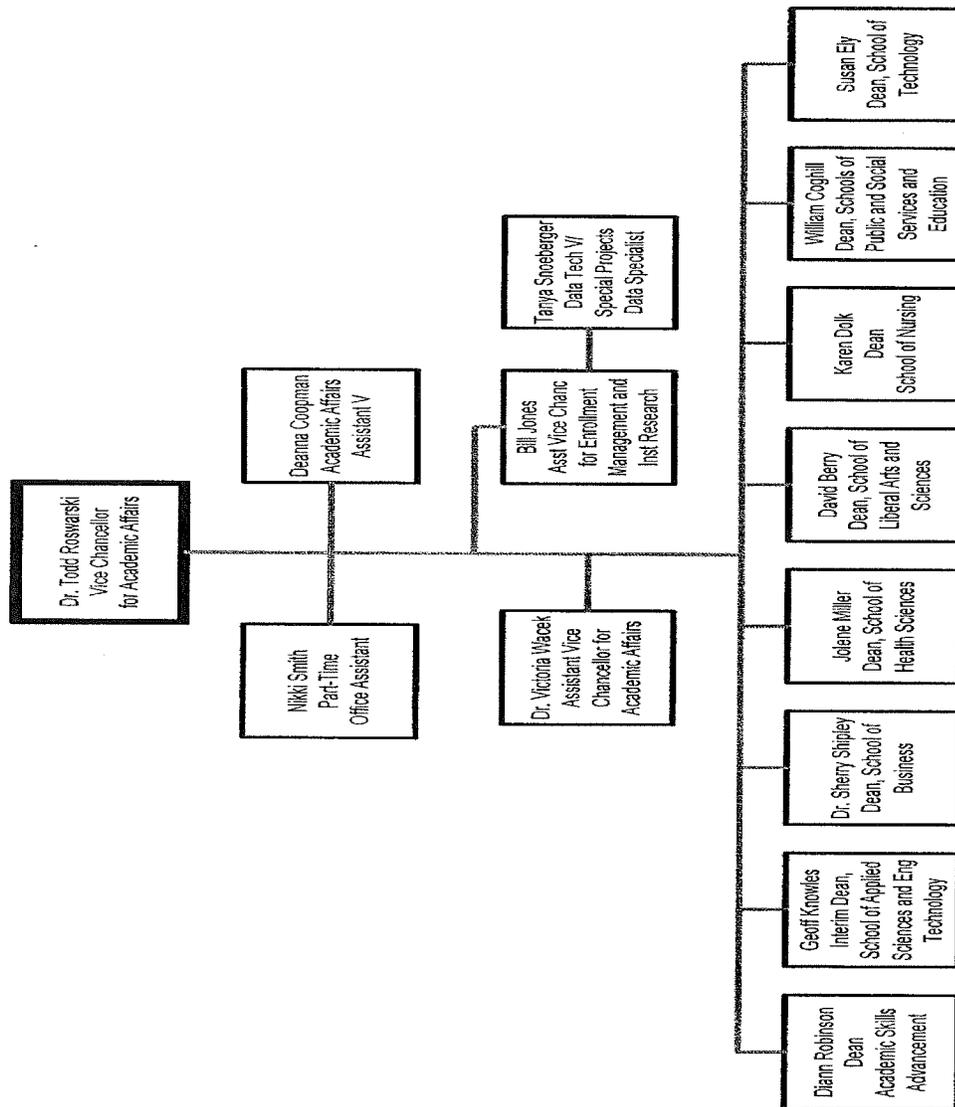




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Academic Affairs
Administration
Page 1





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**Academic Affairs
School of Nursing**

