



**Indiana
Professional
Licensing
Agency**

Indiana State Board of Nursing
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Phone: (317) 234-2043
Website: PLA.IN.gov

Michael R. Pence, Governor

Nicholas Rhoad, Executive Director

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, 2012 through July 31, 2013. 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 2013.” 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__xx_____

Dates of Academic Reporting Year: 01/08/12 -31/7/13 _____
(Date/Month/Year) to (Date/Month/Year)

Name of School of Nursing: _University of Southern Indiana_____

Address:_8600 University Blvd., Evansville, IN 47712



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Dean/Director of Nursing Program

Name and Credentials: Ann White Ph.D., MBA, RN, NE-BC

Title: _Dean of the College of Nursing and Health Professions _____

Email; _awhite@usi.edu _____

Nursing Program Phone #: _812-465-1151

Fax: _812-465-7092 _____

Website

Address: _http://health.usi.edu _____

Social Media Information Specific to the SON Program (Twitter, Facebook, etc.): _None specific to the nursing program

Please indicate last date of NLNAC or CCNE accreditation visit, if applicable, and attach the outcome and findings of the visit: __CCNE accreditation visit February 2004. Accredited for ten years effective October 1, 2004. __CCNE visit planned for spring of 2014.

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



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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 x__ No ____
- 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 ____ No x__

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 x__ 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 x__

2B.) If **not**, explain how you assess student readiness for the NCLEX. ___ATI subject exams are administered throughout the curriculum with required review if specified benchmarks is not met. ___

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



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2D.) When in the program are comprehensive exams taken: Upon Completion _____
As part of a course _____

Ties to progression or thru curriculum __ATI subject tests administered throughout the curriculum with required review if specified benchmark is not met. _____

2E.) If taken as part of a course, please identify course(s): _____

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

A. Faculty recruitment/retention: __Recruitment of full-time faculty and adjunct clinical faculty is challenging. Faculty needs have been met for the present academic year.

B. Availability of clinical placements: _Student placements for specialty units are challenging. To date, the specialty clinical placements for students have been able to meet clinical experience requirements. _____

C. Other programmatic concerns (library resources, skills lab, sim lab, etc.): _____

4.) At what point does your program conduct a criminal background check on students?
___Entry to the nursing program _____

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

Students are informed in a letter that indicates they have been accepted into the nursing program. Admission is contingent upon satisfactory drug screen and background check. _____

SECTION 3: STUDENT INFORMATION

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

Summer _____ Fall _____ Spring _____ 110 _____

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

Summer _____ Fall _____ Spring _____ 78 _____

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 based upon CCNE definition of complaint. _____



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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: 15
4. Number of part time clinical faculty: 0
5. Number of adjunct faculty: 24*

C. Faculty education, by highest degree only:

1. Number with an earned doctoral degree: 9
2. Number with master's degree in nursing: 11
3. Number with baccalaureate degree in nursing: 0
4. Other credential(s). Please specify type and number: 0

* Increase in number of adjunct faculty was necessary for two reasons:

1. Three full-time faculty experienced prolonged illnesses that required classroom and clinical coverage.
2. The number of nursing student admissions increased in the spring of 2011 from 90 to 110 students.

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;



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The following faculty are no longer employed in USI's College of Nursing and Health Profession's undergraduate program:

- Jo Del Kostka*
*Jo experienced a major health event which resulted in the inability to continue employment.
 - Janet Oakley
2. An organizational chart for the nursing program and the parent institution.

Attached to email

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.

Ann White

9/16/13

Signature of Dean/Director of Nursing Program

Date

Ann White

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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Section I: Administration

6) Change in Program Resources/Facilities

Internal remodeling of the simulation center. The center's square footage was not changed but remodeled to create a realistic acute care setting. The previous setting was similar to a 6 bed ward setting with beds separated by curtains. The newly created center contains two acute care rooms and one "office" room. In addition, a control room was placed strategically to allow for instructor viewing and interaction while students perform with high-fidelity mannequins.

7) The Library Resources

The David L. Rice Library provides faculty and students with resources for teaching, learning and research. The library has extensive online journal databases with full text capabilities. The CNHP also has a library liaison to assist faculty on acquisition of books, journals and other learning resources specifically for the CNHP. Librarians offer orientation and classroom instruction for undergraduate students. Reference librarians are available for consultation,

In addition to the regular hours of operation, the library is also open during the evenings and on weekends. The library is accessible online and the help desk is available during operating hours to provide reference support and assistance for local and distant students. The library also facilitates the use of interlibrary loans as requested by students and faculty. The David L. Rice Library holds subscriptions to 56 electronic online databases with access to more than 14,000 full-text online journals. There are more than 2,000 online nursing and health-care journals available for enrolled students with 219 online and/or hardcopy journals dedicated to nursing. Available databases include Academic Premier, ProQuest Health and Medical Complete, First Search, Dialog, CINAHL, Eric, Books in Print, MLA International Bibliography, MEDLINE, Social Work Abstracts, ProQuest Research Library, General Science Abstracts, Health Source: Nursing/Academic Division and PsychoInfo databases. All courses contain a web link to the library to provide easier access to library services for the students.