



Indiana State Board of Nursing
402 West Washington Street, Room W072
Indianapolis, Indiana 46204

Telephone: (317) 234-2043 Fax: (317) 233-4236

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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___ Diploma X BSN___

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

Name of School of Nursing: St. Elizabeth School of Nursing

Address: 1508 Tippecanoe Street
Lafayette IN 47904

Dean/Director of Nursing Program

Name and Credentials: Deacon John R. Jezierski, MSN, RN

Title: Division Director Academic Services/Director School of Nursing

Email: john.jezierski@franciscanalliance.org

Nursing Program Phone #: (765) 423-6400 Fax: (765) 423-6383

Website Address: www.steson.org

Social Media Information Specific to the SON Program (Twitter, Facebook, etc.): None

Please indicate last date of NLNAC or CCNE accreditation visit, if applicable, and attach the outcome and findings of the visit: NLNAC: Fall 2007 to Fall 2015

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

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? Our state board scores have been fluctuating between annual scores in the sixties to high eighties. Therefore, the faculty are actively taking actions within the School Systematic Plan of Evaluation (SPE) to study and develop strategies for improvement. (See Attachment I – Summary of SPE Work Regarding State Board Pass Rate.

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

2B.) If **not**, explain how you assess student readiness for the NCLEX. _____

2C.) If **so**, which exam(s) do you require? The program has required students to pass a standardized comprehensive exam requirement for several years. The exam used prior to 2008, was a series of required standardized test from Educational Resources Inc. (ERI), however with the sale of ERI in 2008 the nursing program transitioned in 2009 from ERI to HESI. (See Attachment II – Procedure for the Assessment of Student and Graduate Competencies within the Program) This procedure lists the current requirements for completion.

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

2E.) If taken as part of a course, please identify course(s): not part of any course.

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

A. Faculty recruitment/retention: Generally there are few issues with retention, on the average the vacancy rate is least then 5% annually, however it often will take 6 months to fill the vacancy. The ability to recruit a qualified faculty has implications in order to offer courses. As a result we have developed an adjunct clinical faculty positions. The primary issue in order to fill vacancies has been salary.

B. Availability of clinical placements: Competition for clinical sites by programs continues to be increasing. Agencies are becoming reluctant to allow more than one program on a clinical site per shift, and have in some cases only allowed 5 students at a time on the unit. There are continued issues in finding acute care Pediatric sites, often the Peds sites has server limitation on what the student nurse can do or observe.

C. Other programmatic concerns (library resources, skills lab, sim lab, etc.): Given the issues of clinical placements, there has been movement into simulation labs, however the development of simulation scenarios are high cost in both human resources and equipment. This has implications as we are challenged to lower costs.

4.) At what point does your program conduct a criminal background check on students? After admission but prior to enrollment in first course. If the individual has not completed the request for a background check by the first day of enrollment, the admission to the program is withdrawn. We are not currently requesting any re-check, but are considering it. If a student's background check has a positive finding, notification of required meeting is sent. During the

meeting a discussion of finding(s) is conducted with explanation of possible implications during application to a board of nursing.

5.) At what point and in what manner are students apprised of the criminal background check for your program? The requirement is published in the catalog. Included in the admission letter, a statement regarding the requirement for background check is sent as part of the our "Disclosure Information." The student if accepting the offer of Admission, must sign and return the "Disclosure Information" with an enrollment deposit.

SECTION 3: STUDENT INFORMATION

1.) Total number of students admitted in academic reporting year: August 1, 2011 to July 31, 2012

Summer (Term 11-3) 0 Fall (Term 11-1) 91 Spring (term 11-2) 11

2.) Total number of graduates in academic reporting year: August 1, 2011 to July 31, 2012

Summer (Term 113 – July 2012) 31 Fall (Term 111 Dec 2011) 6 Spring (Term 112 May 2012) 31

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. (See Attachment III – Institutional Complaint Definition and Log 2009-2012)

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:	Tonya A. Collado, M.S.N., R.N.
Indiana License Number:	28161070A
Full or Part Time:	Full Time
Date of Appointment:	09/04/2011
Highest Degree:	M.S.N., University of Phoenix, Phoenix, AZ, 2010
Responsibilities:	Fundamental – Principle Course Instructor (theory and clinical)

Faculty Name:	Paul W. Heasty, B.S.N., R.N.
Indiana License Number:	28191329A

Full or Part Time:	Full Time
Date of Appointment:	07/24/2011
Highest Degree:	B.S.N., Saint Joseph's College Rensselaer IN, 2010; Graduate Studies, Indiana University, Indianapolis IN (Completed 18 semester hours – currently enrolled (Fall 2012) in 3semester hours.)
Responsibilities:	Mental Health (theory and clinical)

Faculty Name:	Kayla A. Miller, M.S.N., R.N.
Indiana License Number:	28173336A
Full or Part Time:	Full Time
Date of Appointment:	07/24/2011
Highest Degree:	M.S.N., Purdue University, West Lafayette IN. 2011; Certification – Adult Nurse Practitioner.
Responsibilities:	Fundamental – Adult (theory and clinical)

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

1. Number of full time faculty: 27
2. Number of part time faculty: 1
3. Number of full time clinical faculty: 0
4. Number of part time clinical faculty: 1
5. Number of adjunct faculty: 3

C. Faculty education, by highest degree only:

1. Number with an earned doctoral degree: 2
2. Number with master's degree in nursing: 24, 1 clinical adjunct.
3. Number with baccalaureate degree in nursing: 2 full-time; 2 clinical adjunct
4. Other credential(s). Please specify type and number: 1 (MSEd)

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

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

ADMINISTRATION: Yes Responses:

7: Does the program have adequate library resources? As reported in the Systematic Plan for Program Evaluation conducted in 2011-2012. The following Expected Level of Achievement has been observed.

ELA: The learning resource collection shall contain 90% of an authoritative listing (i.e. *Doody's Core Titles in the Health Sciences: 2012 Edition, specifically for Nursing*, which is divided into: Administration, Clinical Applications, Fundamentals, Research, and Theory) of recommended textbooks, journals, audiovisuals (print or electronic) ELA MET.

August 2012

In review of *Doody's Core Titles in the Health Sciences: 2012 Edition, specifically for Nursing*, which is divided into: Administration, Clinical Applications, Fundamentals, Research, and Theory. Of the 552 NURSING textbooks, our collections hold approximately 500 of them (91%). This is considering the resources available between our two medical libraries, the School of Nursing Library, our online STAT! REF eBooks collection, Mosby's Nursing Consult, and the State of Indiana's eBooks collection in INSPIRE.

ELA: The journal collection shall contain 85% of all recommended journals (i.e. Medical Library Association: Nursing and Allied Health Resources Section (NAHRS): 2012 NAHRS Selected List of Nursing Journals) on the list (print or electronic).

August 2012

Of the 216 journal titles listed in the 2012 NAHRS Selected list, our libraries hold approximately 205 of those titles (94%), represented in our print and online subscriptions via: our subscription vendor (Basch Subscriptions, Inc.), our Ovid online databases, Mosby's Nursing Consult, the State of Indiana's INSPIRE databases, and PubMed. For those journal titles for which we do not have subscriptions or online access, we are able to obtain tables of contents and requested articles from them via our DOCLINE interlibrary lending membership with the National Library of Medicine. **ELA MET.**

8 Change in clinical facilities or agencies used.

Agencies added:

Dates of Agreement	Name of Agency	Location	Course(s)	Clinical Focus
October 1, 2011-July 31, 2013	Franciscan Alliance, d/b/a Franciscan Physician Network Formally: Sigma Medical Group LLC	1701 S. Creasy Lane Lafayette, IN	NUR 324	Pediatric Physician Office and Pediatric Nurse Practitioner role
May 1, 2012 – July 31, 2015	Physicians Home Care	210 Professional Court Lafayette IN	NUR 445	Home Health Care

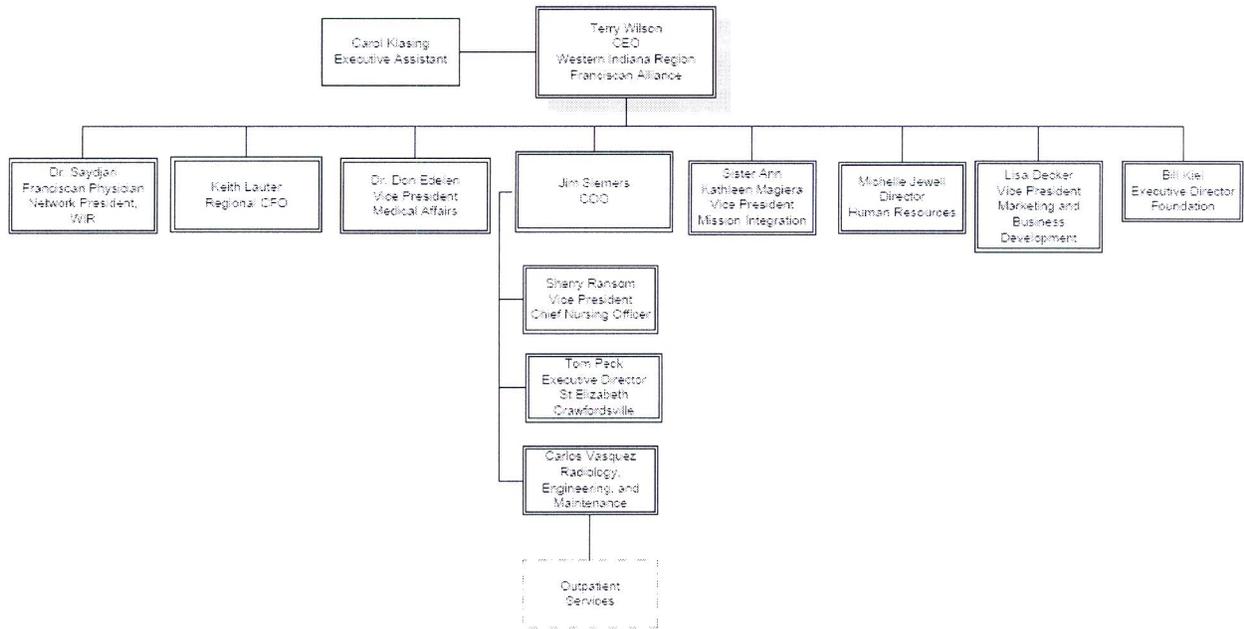
August 1, 2012 – July 31, 2015	Sycamore Springs	833 Park East Blvd Lafayette IN	NUR 221	Mental Health
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No Agencies have been deleted

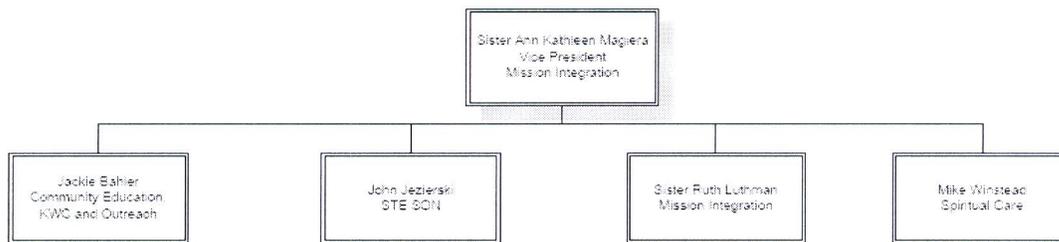
FACULTY NO LONGER EMPLOYED IN THE SCHOOL OF NURSING SINCE LAST REPORT:

Dianne Davis M.S.N., RN – Retired August 20, 2011
Stacy Eldridge, B.S.N., R.N. – Resigned effective August 04, 2012

ORANIZATION CHART: FRANCISCAN ST. ELIZABETH HEALTH

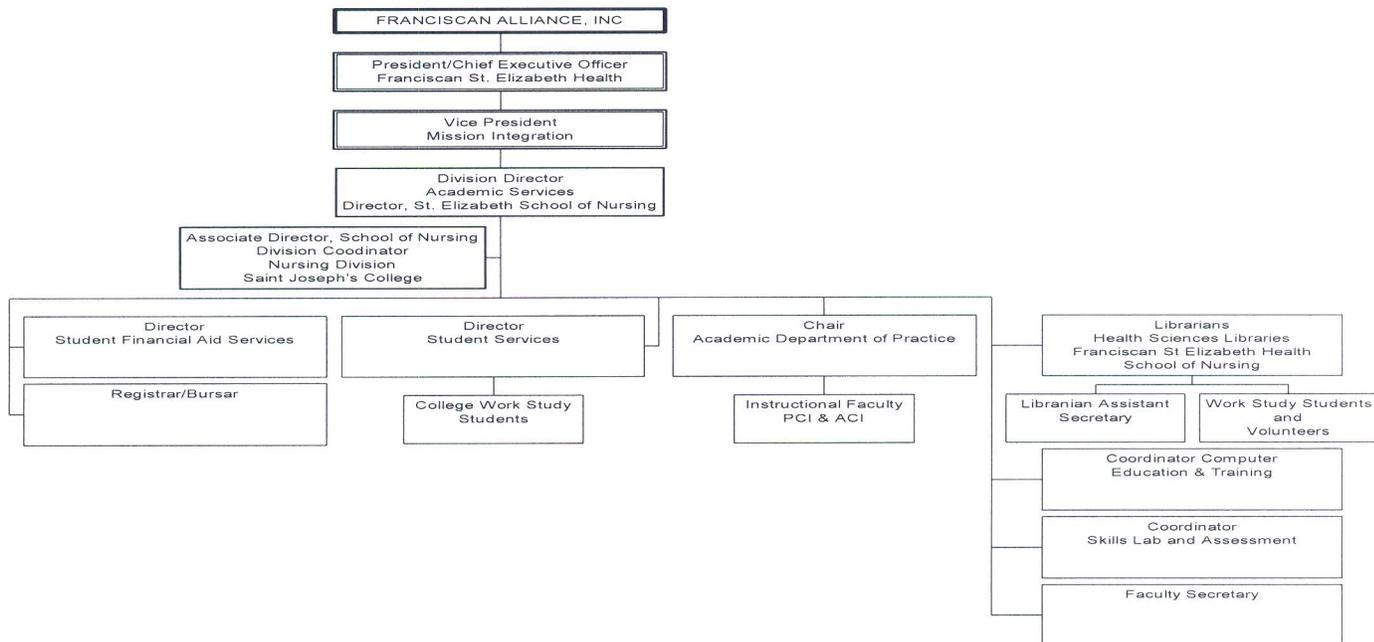


Franciscan St. Elizabeth Health – Division of Mission Integration

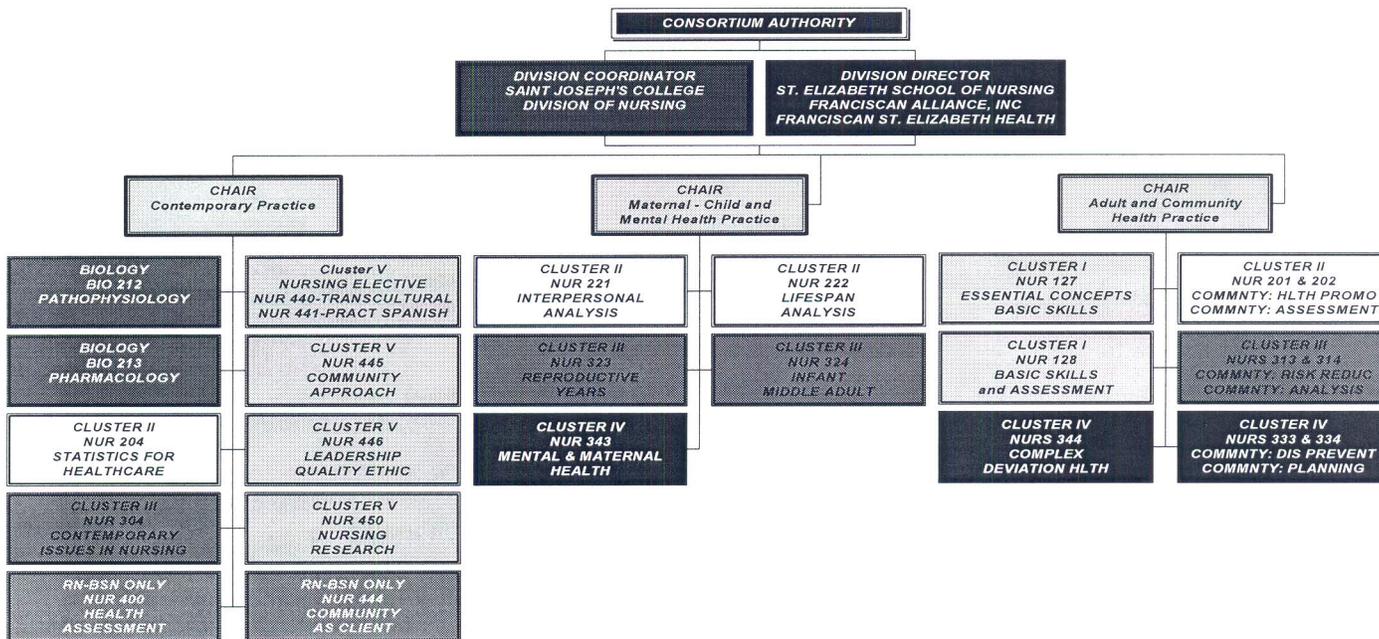


ORGANIZATIONAL CHART

St. Elizabeth School of Nursing



SAINT JOSEPH'S COLLEGE - SAINT ELIZABETH SCHOOL OF NURSING COOPERATIVE NURSING PROGRAM



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.



September 24, 2012

Signature of Dean/Director of Nursing Program

Date

Deacon John R. Jezierski, M.S.N., R.N.

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.

Attachment I – Summary of SPE Work Regarding State Board Pass Rate

ELA: The yearly pass rate of all first time NCLEX-RN test takers will be at or above the national pass rate.

In response to our 2007 results well below national pass rate, each teaching team/course and division had to complete an assessment and action plan to address the three (3) NCLEX Category of Client Need Content topics that were of most concern. These discussions and reports were submitted by March 14, 2008.

Coordinative Council reviewed the reports during their meeting on March 19, 2008. There was additional follow-up as the work and points of discussion were also incorporated into the Annual 2007-2008 Course Reports for each course.

In 2008, there was noted improvement but our 1st time pass rate was still below the national rate. Team members of each course were again asked to revisit the areas of concerns and courses documented this via completion of the 2008-2009 Annual Course Report where concepts/content areas of Health Promotion & Maintenance, Basic Care & Comfort, and Pharmacological & Parenteral Therapies were scrutinized.

In 2009, the pass rate fell below the National rate. To address this concern, courses were again asked to revisit the areas of concerns and courses documented this via completion of the 2009-2010 Annual Course Report where concepts/content areas of Health Promotion & Maintenance, Basic Care & Comfort, and Pharmacological & Parenteral Therapies were scrutinized.

In 2010, our pass rate exceeded the national rate. However, there were areas that were deemed needing assessed and addressed related to NCLEX concepts. Therefore, each course/teaching team was asked to reflect on their course and the learning activities within each course and document how the QSEN Competencies as well as The BSN Essentials. This was documented via completion of the 2010-2011 Annual Course Report.

In 2011, our pass rate dropped below the National pass rate. Therefore, each course was directed to meet as a team and discuss the NCLEX results for our school, identify areas of concern relevant to the course, and then identify an action plan to implement in response to the identified areas of concern. In addition, each course/teaching team was asked to reflect on their course and the learning activities within each course and document how their course addressed the BSN Essentials and the NCLEX test plan. This was documented via completion of the 2011-2012 Annual Course Reports.

(D) PLAN: The school's 1st Time Pass Rate will be added as a standing agenda item for the Faculty Committee meetings held every **January** (4th quarter result data from previous year), **April** (1st quarter results), **August** (2nd quarter results), and **November** (3rd quarter results). This will allow for an on-going awareness of our school's results in a timely fashion (so that our actions for improvement can be more proactive and less reactive).

In addition, the Administrative Council will continually monitor/assess our pass rate (and respond as needed based on results compared to national rate) but will formally follow-up using report cycle per frequency described above (i.e., re-assess in Academic Year 2014-2015 and report findings in October 2015).

ATTACHMENT II

NUMBER:	9732-II-100014	DATE:	July 1984
DEPARTMENT:	Curriculum Council	REVISED:	March 15, 2012
REPLACES PROCEDURE #:	S-10-691-II-0014	REVIEWED:	March 15, 2012

PROCEDURE FOR THE ASSESSMENT OF STUDENT AND GRADUATE COMPETENCIES WITHIN PROGRAM

PURPOSE:	This document establishes the procedure and responsibilities regarding the assessment methodologies and requirement for program completion and the Graduation Comprehensive Examination of a student while enrolled in the program major in nursing of the Cooperative Nursing Program (CNP) of Saint Joseph's College and St. Elizabeth School of Nursing.
GENERAL INFORMATION:	<p>The student must show evidence of reasonable professional competency in nursing as demonstrated by achieving a satisfactory reference score on nationally standardized measured exams in the content areas of the CNP and demonstrated proficiency on a Comprehensive Nursing Examination requirement or its equivalency as determined by the program nursing faculty of the major in nursing.</p> <p>A student who has been placed on a third (3rd) concurrent category of Probation while enrolled in the Nursing Program during will be dismissed from the nursing major (See DISMISSAL FROM THE COOPERATIVE NURSING PROGRAM Policy 9732-I-100015).</p>
PERSONNEL:	Academic Department of Nursing Education Administration, Affiliate College, Nursing Faculty and Students.
EQUIPMENT:	N/A
PROCEDURE:	<p>During enrollment in the Second through Fifth Clusters of the Clinical Nursing Curriculum Plan (CNCP) the student will:</p> <ol style="list-style-type: none">A. Be required to complete a series of nationally normed content examinations at specific points during the curriculum plan and a Comprehensive Examination in Nursing or its equivalency as determined by the program nursing faculty of the major in nursing. (Appendix A)B. Obtain a minimum passing reference score or equivalent grade on each exam(s) as determined by the nursing faculty of the program as the qualifier for graduation.C. Schedule and complete the required standardized exam(s) during the posted Administration Window for testing period. If a student who has taken the exam(s) but does not meet the required PASSING score on the FIRST attempt during an Administrative Testing Window, they will be allowed to register for the next semester/term without penalty in order to complete re-mediation requirements before scheduling a Remediated Competency Exam (RCE) during the next available regular Administration Testing Window.D. Failure to complete a First Attempt Competency Exam (FACE), a Remediated Competency Exam (RCE) or a Program Measurement Exam (PME) by either not scheduling the exam(s) or by not taking the exam(s) at the scheduled time without request and approval to temporarily postpone for cause will result in a REGISTRATION HOLD for ALL Nursing and Non-Nursing courses during the regular registration period. Once a REGISTRATION HOLD has been issued, the

student can remove the **HOLD** by completing the required Exam(s) (for PME exams) or completing the required Exam with a **PASSING SCORE** (for FACE and/or RCE exams) (i.e., a student who does not take the exam(s) during the designated Administration Window will be allowed to take the exam(s) during an Exam Make-up Day usually scheduled at the end of the semester). If the student taking the exam(s) during the make-up day achieves a **PASSING SCORE** on the Exam, they will be allowed to register for classes during the **LATE REGISTRATION** period provided space is available without any additional penalty.

- E. Failure to meet re-mediation requirements for a RCE by the established deadline will result in a **REGISTRATION HOLD**.
- F. Be placed on **ADMINISTRATIVE PROBATION** if the student does **NOT PASS** after being placed on **HOLD** related to either a First Attempt Competency Exam (FACE) or a Remediated Competency Exam (RCE). Administrative Probation will be issued at the end of the semester/term in which the student was delinquent or non-compliant with this procedure and will be required to meet the requirements of Probation as set out in Policy 9732-I-100015 and Procedure 9732-II-100015 and the **HOLD** will be removed on that registration period. The designation of **ADMINISTRATIVE PROBATION** shall be a Probationary status and will be reflected in the student's permanent file/transcript.
- G. Be **DISMISSED** from the nursing major/program if a second (2nd) **ADMINISTRATIVE PROBATION** is issued related to non-compliance with this procedure.
- H. Demonstrate proof of remediation in identified areas covered by the examination(s) when the observed reference score(s) is below the determined standardized score in order to progress in the CNCP or to qualify for graduation. Remediation requirements shall include but are not necessarily limited to:
 - 1. Meeting with a Faculty Academic Advisor within seven (7) days of exam.
 - 2. Developing a Personal Plan of Action (PPOA) that may include such activities as CAI enhancers, textbook readings, or other activities.
 - 3. Demonstrating compliance to remediation plan and being recommended by the Faculty Academic Advisor for a scheduled Retake of the exam.
- I. Be allowed to take Remediated Competency Exam (RCE) once (i.e., if a student takes an exam for the first time (FACE) and does not Pass, they can then remediate in order to be ready to retake the exam by week 7-9 of the following semester/term or during the next regular Administration Testing Window. If on that re-take they still did not Pass at the required score, they must again show proof of re-mediation.)
- J. Not be allowed to retake an exam unless at least thirty (30) school days have elapsed between the previous administration of the same area content exam.
- K. Be billed the posted cost for each retake of a competency exam.
- L. Be allowed to demonstrate competency, if not successful on their second attempt (first time and retake) after again showing proof of additional remediation after the retake, by successfully achieving the required Passing Score on the Comprehensive Exit Exam.
- M. Have up to four (4) chances to demonstrate a successful **PASSING SCORE** on the Comprehensive Exit Exam. A student will not be certified for NCLEX-RN by the School of Nursing in any state board jurisdiction until a Passing Score is observed on the Comprehensive Exit Exam. Failure to successfully **PASS** the Comprehensive Exit Exam on the fourth (4th) attempt will require the student/graduate to remediate by means of re-enrolling, attending and demonstrating a successful completions of a

School approved review course(s) before a Certificate of Completion will be issued by the School.

The Curriculum Council will:

- A. Determine the Comprehensive Nursing Examination Program (consisting of a nationally normed reference examination(s) with reported reliability and validity co-efficients) and the required reference score to be achieved by the student in order to be considered passing.
- B. Evaluate composite data of student performance as a measure of Systematic Program Evaluation of curriculum.
- C. Implement a Faculty Academic Advisor - Remediation Assistance Program for those students who do not meet minimum standards.

The Coordinator Advisement and Assessment or designee will:

- A. Oversee, coordinate and monitor the Comprehensive Nursing Examination Program.
- B. Assist the student's Academic Advisor in the interpretation of exam results and reports of individual student performance, provide guidance to Academic Advisor and students in remediation services, and schedule retake exam(s) at the request of the Advisor.
- C. Offer initial evaluation of exam results to student.
- D. Counsel students regarding achievement standards, remediation options, tutoring services, and Personal Plan of Action (PPOA).
- E. Compile and report composite results to faculty, Curriculum and Instruction Workgroup, and Administrative Council.
- F. Assure examination scores are placed in the student's academic file.
- G. Issue Registration Holds and Initiate Administrative Probation.

The Faculty Academic Advisor and individual faculty members will:

- A. Counsel and tutor students as needed.
- B. Assist in the interpretation of results for students.
- C. Review and approve a student's Personal Plan of Action (PPOA) for remediation.
- D. Recommend a remediated student for retake to the Coordinator Advisement and Assessment or designee, after proof of remediation has been demonstrated.
- E. Assist the Coordinator Advisement and Assessment in the scheduling and proctoring of examinations.
- F. Conduct the Formalizing and Follow-up Phases with students placed on Administrative Probation.

APPENDIX A - COMPREHENSIVE NURSING EXAMINATION PROGRAM

- I. Required for **Competency Assessment** - To be eligible for graduation the Student must have a PASSING competency score in the following areas: (1) Pharmacology, (2) Pediatric, (3) Psych-Mental Health, (4) Maternal Health, (5) Adult Care and (6) a Comprehensive Exit Exam. **SUBJECT TO CHANGE.**

Student/Graduates for Program Completion must complete the following **Competency Assessment - Standardized Examination Schedule** administered by HESI. The observed satisfactory achievement score must be equal to or greater than the scaled score of either 850 or a Conversion Score of at least 74.5% which is at the 39.50 percentile or greater. **The student must successfully Pass the Comprehensive Exit Exam in order to**

meet the Graduation Requirements and be Certified by the School of Nursing as eligible to take the NCLEX-RN.

TIMING AND PLACEMENT OF EXAMS

Cluster III

Completion of or Enrolled in:	Competency Requirement – HESI Exam	Administration Window ¹
Bio 213 – Analysis of Pharmacotherapeutics	Pharmacology	During Week 11, 12 or 13 of first course of Cluster III. Will also be required for a transfer course in Pharmacology
Nursing 324 – Planning for Nursing Care of Infants through Middle Adults	Pediatric	During Week 11,12 or 13 of course

Cluster IV

Enrolled in:	Competency Requirement – HESI Exam	Administration Window ¹
Nursing 343 – Implementation: Concepts of Mental & Maternal Health	Psych-Mental Health	During Week 11, 12 or 13 of course.
Nursing 343 – Implementation: Concepts of Mental & Maternal Health	Maternal Health	During Week 11,12 or 13 of course
Nursing 344 - Implementation: Care of Clients with Complex Deviations in Health	Medical Surgical	During Week 11,12 or 13 of course

Cluster V

Enrolled in	Competency Requirement – HESI Exam	Administration Window ¹
Both courses during the same semester: Nursing 445 – Community: a Quality of Life Approach. AND Nursing 446 – Leadership: Developing a Quality Nursing Ethic	Comprehensive RN Exit Exam	During Week 3-5 of a 16 week term OR Week 2, 3 or 4 of an 11 week Spring/Summer term

<p>Either:</p> <p>Nursing 445 – Community: a Quality of Life Approach.</p> <p>OR</p> <p>Nursing 446 – Leadership: Developing a Quality Nursing Ethic</p> <p>AS A LAST COURSE OF CLUSTER V</p>	<p>Comprehensive RN Exit Exam</p>	<p>During Week 3-5 of a 16 week term OR Week 2, 3 or 4 of an 11 week Spring/Summer term</p>
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II. PROGRAM MEASUREMENT - STANDARDIZED EXAMS

At periodic times, specific cohorts (groups) of students will be required to complete Program Measurement Standardized Exams. Like Competency Exams, failure to complete the exam during its scheduled Administration Window will result in a **REGISTRATION HOLD** until the exam is scheduled and taken. Anticipated Program Measurement Exams are: **(SUBJECT TO CHANGE)**

1. Fundamentals of Nursing – during weeks 11-13 of Cluster II course(S) following completion of Cluster I
2. Pathophysiology – **After** completion of Bio 212 – Pathophysiology or by the End of Cluster II whichever is earliest.
3. Community Health – **Before or After** mid-term of Nursing 445 – Community: A Quality of Life Approach during Cluster V. This Exam will be administered every third year to all cohorts of student who enroll in course and Cluster V during that academic year. Plan for Administration of Exam to cohorts completing in 2009-2010, 2012-2013, etc.
4. Gerontology - **Before or After** mid-term of Nursing 445 – Community: A Quality of Life Approach during Cluster V. This Exam will be administered every third year to all cohorts of student who enroll in course and Cluster V during that academic year. Plan for Administration of Exam to cohorts completing in 2011-2012, 2014-2015, etc.
5. Management – **Before or After** mid-term of Nursing 446 – Leadership: Developing a Quality Nursing Ethic during Cluster V. This Exam will be administered every third year to all cohorts of student who enroll in course and Cluster V during that academic year. Plan for Administration of Exam to cohorts completing in 2010-2011, 2013-2014, etc.

ATTACHMENT III - Institutional Complaint Definition and Log 2009-2012

Definition of Complaint: A Complaint must be written and individually signed and have a return address in order to be considered a formal complaint. The written complaint must contain specific information about the alleged violation related to the Nursing Program policy, procedure or treatment of the individual(s) involved, or related to the Indiana State Board of Nursing Rules or to the Standards for accreditation.

Responses to a complaint will be written after investigation, with a copy of the complainant's letter forwarded to any individual named in the complaint. See Procedure 9732-II-100020 - MANAGEMENT OF REPORTABLE COMPLAINTS OF THE COOPERATIVE NURSING PROGRAM.

For purpose of procedure, issues regarding grade review and/or appeal are not considered in the criteria of Reportable Complaints

Log

Year	Received	Ground(s) of Investigation	Follow-up and Reporting
2009-2010	12/11/2009	Perceived unprofessional behavior of faculty member by a student.	<p>12/15/2009 – Meeting with student to discuss issues identified in letter. Made sure student understood procedure regarding written Complaints and investigation process.</p> <p>01/06/2010 – Meeting with named faculty member to report allegations and cited examples by student of unprofessional behavior. Developed plan for correction. Discussed implications for reports of perceived retaliatory behavior in student-faculty interaction.</p> <p>01/16/2010 – Meeting with student to inform student that meeting with faculty member had occurred. Discussed need to report if perceived retaliatory behavior by faculty member occurred.</p> <p>04/29/2010 – Follow-up meeting with student for purpose of perception of faculty-student interaction during semester.</p>

	12/27/2009	Clinical complaint received by hospital which indicated a student nurse performance issue	01/07/2012 – Meeting with course PCI in order to validate if the complaint. PCI reviewed letter send by patient’s family member and although the PCI had no knowledge of the event, did validate that based on information – it could have involved a student who had graduated in December. Entered follow-up in hospital Risk Pro-monitor for Hospital Administration follow-up.
	12/29/2009	E-mail received regarding allegation of decimation due to race and course failure due to calculation of points.	<p>12/29/2009 – Although the e-mail was not sent directly to the Nursing Program but send as a “broadcast” e-mail to the distribution list. Requested an investigation to be started by the Vice-President Human Resources as per Procedure.</p> <p>01/20/2010 – Independent HR concluded investigation and presented finding and conclusions.</p> <p>02/03/2010 – Individual requested continued review of appeal.</p> <p>02/05/2010 – Response by VP of HR that the appeal process had been exhausted.</p> <p>Feb Faculty Meeting- discussed with faculty implications of how course syllabi need to explicit as to how “unannounced quizzes” are calculated in final course grade.</p>
	02/15/2010	Notification of Complaint received from the Indiana Civil Rights Commission of Allegation of Discrimination due to race. (First Student)	<p>Investigation begun</p> <p>02/11/2011 – Notice of Finding received from the Indiana Civil Rights Commission – “There is no probable cause to believe that the Indiana Civil Rights Law was violated as alleged.”</p>

	02/25/2010	Notification of Complaint received from the Indiana Civil Rights Commission of Allegation of Discrimination due to race. (Second Student)	Investigation begun. 07/26/2010 – Notification received from the Indiana Civil Rights Commission that at the written request of the Complainant the complaint was withdrawn and the complaint was dismissed without prejudice.
	07/21/2010	Request for Appeal of Faculty decision to issue course fail related unprofessional posting on a social media site	08/16/2010 – Review of Appeal by senior management concludes that procedures in due process related to probation were not implicitly followed by definition. Question about legal implication of action taken as “freedom of speech” related to social media posting since the Nursing Program did not have a published statement regarding posting on social media sites. Student reinstated, grade changed and student was allowed to complete course. Faculty developed Social media statement which was added to handbook and in course syllabi.
2010-2011		No written complaints received	
2011-2012		No written complaints received	

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.