



Evaluation Team Report on the Accreditation Review of the Baccalaureate Degree Program in Nursing at Indiana University South Bend

Commission on Collegiate Nursing Education
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Evaluation Team:

Karen Karlowicz, EdD, RN, Team Leader
Ana Maria Catanzaro, PhD, RN
Karin K. Roberts, PhD, RN, CNE

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Introduction

This report presents the findings of the evaluation team from the Commission on Collegiate Nursing Education (CCNE), the accrediting body responsible for the evaluation of baccalaureate and graduate nursing programs, regarding the Bachelor of Science in Nursing (BSN) program at Indiana University South Bend (IU South Bend) and its compliance with CCNE's standards for accreditation. The BSN program was granted continuing accreditation by CCNE in 2010 and is being reviewed for continuing accreditation.

IU South Bend is the only public bachelor's and master's degree-granting institution in north central Indiana. The first classes were held at Central High School in downtown South Bend in 1916. The campus moved to its current location along the St. Joseph River in 1961 with the completion of Northside Hall. In 1975, Indiana University purchased most of the land that created the campus of today. New facilities were added over time including the Franklin D. Schurz Library (1989), Wiekamp Hall (1997), Student Activities Center (2002), pedestrian bridge (2005), IU South Bend Elkhart Center (2007), River Crossing student housing (2007), and the Education and Arts building (2013). IU South Bend is the largest regional campus of Indiana University, with more than 5,000 students, nearly 300 full-time faculty, and more than 1,200 full- and part-time employees

IU South Bend offers academic excellence and a full collegiate experience including student housing, more than 100 degree-granting programs, 12 men's and women's conference NAIA athletics, intramural sports, and more than 100 clubs and organizations. IU South Bend enrollment is composed of 5,092 students, with 4,551 students pursuing undergraduate degrees. Of the undergraduate students, 79% are full-time and 21% are part-time; the majority of undergraduate students are female (65%), with 28% of undergraduate students from minority backgrounds.

As the comprehensive undergraduate and graduate regional campus of Indiana University in north central Indiana, IU South Bend is committed to the creation, dissemination, preservation, and application of knowledge. The campus is committed to excellence in teaching, learning, research, and creative activity; to strong liberal arts and sciences programs and professional disciplines; to acclaimed programs such as those in the arts and nursing/health professions; and to diversity, civic engagement, and a global perspective. Dedicated to the economic development of its region and state, IU South Bend fosters student-faculty collaboration in research and learning to meet the changing educational, research and cultural needs of the community it serves. IU South Bend is classified as Master's Colleges and Universities: Medium Programs according to the Carnegie Classification of Institutions of Higher Education.

The nursing program opened in 1975 with the registered nurse (RN)-BSN completion track. In 1988, the four-year traditional baccalaureate degree in nursing was established. The following year (1989), IU South Bend began offering an associate degree program that was not offered after 2001. The Master of Science in Nursing (MSN) program was established in 2008. In 2011, the RN-BSN track through the Indiana University consortium

was created, and by 2018, IU South Bend discontinued enrollments to its RN-BSN track in favor of participation in the statewide IU consortium that involves the nine campuses.

The IU South Bend School of Nursing (SON) is one of six program areas that make up the Vera Z. Dwyer College of Health Sciences (DCHS). The SON offers three nursing degree options: the traditional BSN track, the RN-BSN track through the IU consortium, and the MSN program with a family nurse practitioner track. The BSN program has full approval by the Indiana State Board of Nursing; at present, the Board of Nursing does not have immediate plans for any follow-up program review.

There are 221 students currently enrolled in SON programs, including 137 traditional BSN students, 44 RN-BSN students, and 40 MSN students. Seventeen full-time faculty are dedicated to the nursing program, with an additional six part-time adjunct faculty most semesters. These faculty teach 132 course credits in the traditional BSN track, 61 credits in the MSN program, and a fluctuating amount of overload for the RN-BSN track.

The team was afforded full cooperation in its efforts to assess the program and to confirm the self-study document. The team would like to take this opportunity to thank the program for its hospitality and consideration during the on-site evaluation.

In accordance with CCNE procedures, as part of the review, the team confirmed that the program afforded the opportunity for constituents to submit third-party comments directly to CCNE. One or more letters were received by CCNE and were considered in the evaluation of the program.

Meeting of CCNE Standards

While visiting the campus in South Bend, Indiana, the team had an opportunity to interview school and university officials; program faculty, students, and alumni; and community representatives. The team reviewed information in the self-study document and in the resource room as well as other materials provided at its request. In addition, the team observed classroom and clinical activities. The following assessments were made regarding compliance with the *CCNE Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* by the baccalaureate degree program in nursing at the institution.

Standard I Program Quality: Mission and Governance

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

This standard is met for the baccalaureate degree nursing program.

I-A. The mission, goals, and expected program outcomes are:

- congruent with those of the parent institution; and
- reviewed periodically and revised as appropriate.

Elaboration: The program's mission, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. The mission may relate to all nursing programs offered by the nursing unit, or specific programs may have separate missions. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Expected program outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

There is a defined process for periodic review and revision of program mission, goals, and expected program outcomes that has been implemented, as appropriate.

Compliance Concern?	Baccalaureate:	No
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Rationale:

The team found the program to be in compliance because the mission, goals, and expected program outcomes for the SON are congruent with the mission and goals of IU South Bend and the DCHS. These statements are accessible to students, institutional and community stakeholders, and faculty in the University Bulletin, university/school/program websites, and the SON student handbook. Interviews with nursing faculty confirmed that review of the SON's mission, goals, and expected outcomes to ensure compatibility with the university and DCHS statements occurs approximately every five years but can be initiated at any time upon faculty request. Discussion with students confirmed that they are familiar with the mission, goals, and expected outcomes of the university, DCHS, and SON. Students also stated that the diversity of students admitted to the nursing program and the strong relationships the program has with community health care partners are examples of how the SON demonstrates its congruence with the university and college mission, goals, and outcomes.

I-B. The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

Elaboration: The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:

- The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];
- The Essentials of Master's Education in Nursing (AACN, 2011);

- The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and
- Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016].

A program may select additional standards and guidelines that are current and relevant to program offerings.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the mission, goals, and expected outcomes are aligned with the American Association of Colleges of Nursing’s (AACN) *The Essentials of Baccalaureate Education for Professional Nursing Practice (Baccalaureate Essentials)* (2008) and the Quality and Safety Education for Nurses (QSEN) *Competencies*. These links are communicated in the IU South Bend SON student handbook, in all traditional BSN course syllabi in relation to leveled course learning outcomes, and in most RN-BSN course syllabi (consortium-developed courses). The program also aligns with the American Nurses Association’s (ANA) *Code of Ethics for Nurses*, which is provided in the student handbook. An interview with the BSN program director confirmed that faculty are expected to align course learning outcomes with these key documents. Interviews with students confirmed that they are aware of these documents/guidelines. They further explained how course learning outcomes linked to these guidelines help them to understand the value of content being taught and learning experiences.

I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.

Elaboration: The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are considered in the periodic review of the mission, goals, and expected program outcomes.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because IU South Bend has a strong relationship with its community of interest that encompasses a seven-county area and is inclusive of a variety of health care employers in the area. In a meeting with the community of interest/stakeholders, the team confirmed that the needs of nursing employers in relation to current and future programming by the SON are considered within the context of the mission, vision, and goals of the school. Such discussions often occur when community representatives are convened to participate in Advisory Board meetings. Representatives of the community of

interest also stated that that the mission, goals, and expected outcomes of the SON are exemplified by the dedicated faculty of the SON, who are excellent teachers and clinicians. Furthermore, the community of interest recognizes that the faculty play a key role in imparting the values of professionalism, preparedness, collegiality, and life-long learning to all students.

I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.

Elaboration: Expectations for faculty are congruent with those of the parent institution. The nursing unit's expectations for faculty, whether in teaching, scholarship, service, practice, or other areas, may vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other).

Compliance Concern? Baccalaureate: No

Rationale:

The team confirmed that the SON has clear expectations for faculty performance that are congruent with institutional expectations. The interim assistant dean and faculty confirmed that teaching load calculations are based on percentages derived from credit hours assigned to course, clinical, and lab responsibilities. Documentation provided in the resource room showed that the SON has developed criteria for appointment and promotion of lecturers/senior lecturers, clinical rank faculty, and tenure-track/tenured faculty with examples of performance for each of the evaluation criteria. A chart with a diagram of the faculty evaluation process was also provided. These guidelines are approved by the DCHS and are consistent with the policies for annual review and promotion of IU South Bend. Interviews with the faculty confirmed that they are aware of and knowledgeable about these performance expectations.

I-E. Faculty and students participate in program governance.

Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because IU South Bend faculty and students participate in program governance. The IU South Bend SON Bylaws of the Council of Nursing (provided in the resource room) identifies four standing committees: curriculum, assessment, library and information technology, and graduate faculty. For each committee identified, the bylaws define membership requirements involving faculty and students as well as committee functions and voting rights. In addition to service on school committees, faculty shared with the team that they also serve on DCHS and university committees. For example, a member of the SON faculty served on the Search Committee for the university chancellor, who was recently hired. Another

faculty member has played a key role on the Northside Hall Task Force. Students reported serving on committees such as the Dean's Council, the SON Assessment Committee, and the Shield's Lecture Committee.

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are:

- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs, and revisions are made as needed.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the Systematic Evaluation Plan (SEP) calls for academic policies to be reviewed annually at the beginning of each school year. The team confirmed through conversations with the interim assistant dean of nursing and the BSN program director that they have primary responsibility for monitoring the IU South Bend Bulletin for campus policy changes that may impact SON policies. The BSN program director, working with faculty, reviews and updates BSN policies provided in the BSN handbook prior to the start of each academic year. Participation in the DCHS leadership team meetings by the interim assistant dean of nursing also ensures that there is input by a SON representative for all DCHS policies being reviewed or created. An example of DCHS policies recently reviewed and updated include the 1) admissions, progression and graduation appeals policy; 2) reinstatement to the Vera Z, Dwyer College of Health Sciences majors policy; and 3) course grade grievance policy.

I-G. The program defines and reviews formal complaints according to established policies.

Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the program abides by established policies with respect to formal complaints. Student complaints are often associated with admission, progression, and graduation issues resulting from a course failure. Grade appeals policies/procedures were noted in the BSN student handbook and in the University Bulletin. All syllabi were also noted to provide a statement regarding

program policies relevant to BSN courses, including grievances, which directs students to full policy statements that can be found in “Canvas under course files and in Canvas under BSN Central.” The team noted that university websites for the offices of affirmative action, human resources, and student conduct also provide guidance to students and faculty with relevant policies and procedures for complaints and grievances.

I-H. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

Elaboration: References to the program’s offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.^{1,2}

If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:

“The (baccalaureate degree program in nursing/master’s degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at (institution) is accredited by the Commission on Collegiate Nursing Education (<http://www.ccneaccreditation.org>).”

“The (baccalaureate degree program in nursing/master’s degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at (institution) is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.”

¹ Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

² Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education, 2016).

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because documents and publications pertaining to the BSN program are current and accurate. Information in print materials is consistent with information on the school’s website as well as in the IU South Bend Bulletin. The statement of accreditation that appears on the SON’s website uses the approved language from CCNE. The interim assistant dean for nursing confirmed that the program communicates key programmatic changes through its website. The SON also relies on the DCHS academic advisors to convey critical information concerning program offerings, requirements, and admission procedures. Current information regarding tuition and nursing program fees is easily found on the IU South Bend website.

Standard II Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

This standard is met for the baccalaureate degree nursing program.

II-A. Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of faculty and staff.

A defined process is used for regular review of the adequacy of the program's fiscal resources. Review of fiscal resources occurs, and modifications are made as appropriate.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because reports shared by the SON show that it operates with a budget that is base-funded and generally considered to be adequate to meet its mission, goals, and expected outcomes. This is despite an allocation that has steadily declined every year for the past five years and enrollments that are growing and expected to continually increase. At present, the interim assistant dean for nursing is unable to propose specific adjustments to the SON's funding when the campus budget is developed each year. However, fiscal needs are discussed with the dean for the DCHS, who conveys these priorities to the vice chancellor for academic affairs. Conversations with the chancellor, interim vice chancellor for academic affairs, and vice chancellor for administration and finance acknowledged the need for greater input and transparency in the budget process by all campus stakeholders; the creation of a Budget Advisory Committee to include representation from all academic units is being considered.

During the past year, the interim assistant dean for nursing along with the dean for the DCHS conducted a review of nursing faculty salaries. Data shared with the team compared mean salaries for IU South Bend nursing faculty with mean salaries of nursing faculty at other IU campuses, as well as the AACN median, to determine adjustments that should be considered to retain qualified faculty at IU South Bend. Six faculty were recommended for salary adjustments in 2019 that have not yet been realized.

II-B. Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.

Elaboration: Physical space and facilities (e.g., faculty and staff work space, classrooms, meeting areas) are sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes. The program is responsible for ensuring adequate physical resources and clinical sites. Clinical sites are sufficient, appropriate, and available to achieve the program's mission, goals, and expected outcomes.

A defined process is used to determine currency, availability, accessibility, and adequacy of resources (e.g., clinical simulation, laboratory, computing, supplies, and clinical sites), and modifications are made as appropriate.

Compliance Concern? Baccalaureate: Yes

Rationale:

The team confirmed that the program has access to an adequate number of clinical sites to facilitate direct patient care experiences for students' practicum experiences. In a discussion with the team, faculty as well as chief nurse executives representing the community of interest shared that the SON maintains strong relationships with the three main hospitals in the South Bend area. One facility, Memorial Hospital, gives IU South Bend SON clinical practicum scheduling priority. Several units at this institution are designated IU South Bend dedicated education units (DEUs), and students spoke highly of the nurses with whom they work. The SON also has strong relationships with many community-based health care organizations. Faculty and students confirmed that clinical sites support the curriculum, are sufficient in number, and are appropriate to achieve the program's mission, goals, and expected outcomes. A visit to several clinical sites by the team, including hospital and community locations, confirmed the adequacy of the facilities/programs/organizations used.

However, the team did identify a compliance concern because of the deteriorating status of Northside Hall, the on-campus building that houses the program's clinical learning labs and faculty offices. The self-study document and Appendix I clearly describe the status of Northside Hall and faculty efforts to document and describe the issues for IU South Bend administration. The condition of this building and its effect on instruction and student learning dominated the discussions with all individuals and groups with whom the team met. Students describe being unable to concentrate during class sessions or exams because of extreme room temperatures often rising to 90+ degrees. They also described electrical outlets that often do not work, making it difficult to use laptop computers for notetaking or exams. Faculty described electrical problems in their offices, along with problems of building air quality that made a faculty member sick and necessitated relocation of her office to another building. The team also noted problems with electrical outlets, as some in the resource room were non-functioning. There were multiple rodent traps in the hallways and signage in the restroom advising how to flush toilets that were old and poorly functioning. A tour of the SON and its clinical lab spaces by the team indicated cramped spaces used to teach health assessment and clinical skills. Of particular concern was the simulation control desk that is in the same space as the clinical skills lab, with a curtain that separates the simulation control equipment from the six-bed clinical skills instruction area. The team witnessed a faculty member attempting to conduct a simulation exercise with a group of students, while another faculty member was teaching clinical skills to a different group in the same space at the same time

and the difficulties each had trying to minimize the distraction from the other group. The SON has one older-model SimMan; while faculty expressed the desire to enhance simulation capacity with more and newer equipment, they stated that it is not feasible given the ongoing problems with the building's electrical and heating, ventilation, and air conditioning (HVAC) systems.

The team did learn during its campus tour and confirmed during discussion with the chancellor that work is underway to update the HVAC system for a portion of Northside Hall, which may or may not improve conditions on the fourth floor where the SON is located. The chancellor, interim vice chancellor for academic affairs, vice chancellor for administration and finance, and the dean also shared that efforts are underway to develop a plan for the creation of a new interprofessional simulation space that currently involves site visits to other simulation centers within the IU system and discussions with community stakeholders. There is a goal of making some key strategic decisions regarding simulation within the next six months, but the team was not told of any plans to address the physical space issues involving faculty offices.

II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.

Elaboration: Academic support services, which may include library, technology, distance education support, research support, and admission and advising services, foster achievement of program outcomes. A defined process is used for regular review of academic support services, and improvements are made as appropriate.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because academic support services are sufficient to meet program and student needs. Meetings with staff from a sampling of academic support services including university information technology services, the Franklin D. Shurz Library, student financial aid, and DCHS academic advising revealed that SON faculty have a close working relationship with all support service personnel on the campus to ensure the success of nursing students. Support services are regularly reviewed by SON faculty who work with support service personnel to make decisions to change or enhance services/resources as needed. Given that many students admitted to IU South Bend and the nursing program come from an economically disadvantaged background, every effort is made to inform them of resources that may limit the financial burden of attending college. For example, IU South Bend informs students of discounts on computer purchases, no-cost software options, and the opportunity to apply for five named scholarships for nursing that provide funding to approximately 25 students.

II-D. The chief nurse administrator of the nursing unit:

- is a registered nurse (RN);
- holds a graduate degree in nursing;
- holds a doctoral degree if the nursing unit offers a graduate program in nursing;

- is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and
- provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is an effective leader of the nursing unit.

Compliance Concern? **Baccalaureate:** **No**

Rationale:

The chief nurse administrator holds the title of assistant dean for nursing. The SON makes up 50% of the DCHS, with the assistant dean for nursing being one of two faculty in the DCHS with the title of assistant dean that also serve on the senior leadership team for the DCHS. At present, this position is held by a member of the faculty appointed in 2019 to assume the assistant dean for nursing’s responsibilities in an interim capacity. The team found the program to be in compliance because the interim assistant dean for nursing is licensed to practice nursing in Indiana and holds a PhD in nursing. A member of the IU South Bend SON faculty since 2009, the interim assistant dean for nursing is knowledgeable of the SON and the university. The dean for the DCHS confirmed to the team that a search is underway to hire a permanent faculty member to serve as the assistant dean for nursing, with a goal to have a hiring decision by the end of the Spring 2020 semester.

In the short time she has served in the role, the interim assistant dean for nursing has conducted a faculty salary analysis, worked with faculty to implement a new BSN curriculum, and has been successful in implementing a peer mentor program in the SON. The peer mentor program provides course tutoring for nursing students who are “less prepared for the rigors of nursing” or those who are struggling with specific course content. In a meeting with students, those invited to serve as tutors in this work-study program shared how honored they were to be asked to serve in this capacity. Student participants in the peer tutoring program were extremely complimentary of the program and grateful for the assistance provided that helped them to pass a course.

II-E. Faculty are:

- sufficient in number to accomplish the mission, goals, and expected program outcomes;
- academically prepared for the areas in which they teach; and
- experientially prepared for the areas in which they teach.

Elaboration: The faculty (full-time, part-time, adjunct, tenured, non-tenured, or other) for each degree and post-graduate APRN certificate program are sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. The program defines faculty workloads. Faculty-to-student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major

concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a justification for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because faculty are sufficient in number to accomplish the mission, goals, and expected program outcomes, given the traditional BSN enrollment of 137 students and RN-BSN enrollment of 44 students. There are 17 full-time faculty with a wide range of nursing practice experience; 16 out of 17 have an earned MSN and 8 out of 17 hold a PhD/DNP. One full-time faculty member is currently enrolled in an MSN program. Faculty confirmed to the team that their teaching assignments are in keeping with their clinical area of expertise and practice/specialty interest. Professional practice and continuing education opportunities enable the faculty to remain experientially qualified for the areas in which they teach.

II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.

This key element is not applicable to a degree or certificate program that does not use preceptors.

Elaboration: The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are:

- *clearly defined and communicated to preceptors;*
- *congruent with the mission, goals, and expected student outcomes;*
- *congruent with relevant professional nursing standards and guidelines; and*
- *reviewed periodically and revised as appropriate.*

Preceptors have the expertise to support student achievement of expected outcomes. The program ensures that preceptor performance meets expectations.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the IU South Bend SON only uses preceptors (clinical instructors) in a DEU model to facilitate clinical learning for the medical-surgical nursing and nursing capstone courses. Faculty stated that every effort is made by clinical units to secure DEU preceptors that have a BSN and three years of clinical experience (a guideline established by the Indiana State Board of Nursing). In 2018, 86% of preceptors met both the education and practice requirement, but more typically and because of staff turnover at the hospitals, preceptors will have either an earned BSN or three years of practice experience. Clinical site visits by the team to hospital units hosting an IU South Bend DEU confirmed that preceptors

receive a copy of the course syllabus, are knowledgeable of clinical objectives, and are oriented to their role by program faculty. When students are on the clinical unit, program faculty are present, conduct individual student conferences, serve as a liaison/resource for preceptors, and receive feedback from preceptors to allow for ongoing student evaluation.

II-G. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (full-time, part-time, adjunct, tenured, non-tenured, or other) and in support of the mission, goals, and expected faculty outcomes.

- *Faculty have opportunities for ongoing development in teaching.*
- *If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
- *If service is an expected faculty outcome, expected service is clearly defined and supported.*
- *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence.*
- *Institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because there is institutional support for faculty development. As noted in the self-study document and confirmed in conversation with the dean, funding is available within the DCHS budget to support faculty and staff professional development. The team also learned from the interim vice chancellor for academic affairs that faculty can apply for professional development money from funds maintained by that office. The University Center for Excellence in Teaching is also a valuable resource for faculty, who confirmed use of the center staff when updating courses and transitioning courses to online delivery. The interim assistant dean for nursing and faculty confirmed that the institution does support community/professional service and maintenance of clinical practice (with approval).

Standard III

Program Quality: Curriculum and Teaching-Learning Practices

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

This standard is met for the baccalaureate degree nursing program.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that:

- are congruent with the program's mission and goals;
- are congruent with the roles for which the program is preparing its graduates; and
- consider the needs of the program-identified community of interest.

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because the traditional and RN-BSN curricula were developed in accordance with the nursing program's mission, goals, and expected student outcomes. The mission and program outcomes are the same for both BSN tracks at IU South Bend and for all nursing programs in the Indiana University system. The SON's mission is clearly stated on page 2 of the 2019-2020 BSN student handbook as follows: *"Indiana University South Bend School of Nursing prepares holistic, caring, ethical professional nurses who respect the uniqueness of each individual. Graduates of this program provide safe competent nursing care to meet the healthcare needs of the individual, family and community. Our nursing graduates function in cohesive healthcare teams using critically evaluated evidence. The School of Nursing values compassion, moral integrity, respect, inclusivity, and service to others."*

The nine BSN program outcomes are also clearly stated on page 13 of the 2019-2020 BSN student handbook. Students confirmed that they are familiar with the SON student handbook and its content, including the BSN program outcomes. Table III-A-1 of the self-study document provides evidence of how each program outcome is linked to the mission and examples of course outcomes that are directly linked to the program outcomes and the mission. The team reviewed course syllabi in the traditional and RN-BSN tracks and confirmed that course outcomes in both tracks are congruent with SON program outcomes. Course content in the traditional BSN curriculum prepares graduates to practice as generalist RNs. Course content in the RN-BSN curriculum prepares graduates to enhance the professional role of practicing RNs, prepares them for leadership roles, and prepares them for graduate study. Meetings with students, faculty, and stakeholders confirmed that IU South Bend students are well-prepared for their clinical experiences and that students transition well into practice when they are hired by employers once they graduate. Employers who attended the community of interest meeting

stated that they “are thrilled to hire IU South Bend graduates” because of their consistent high quality and professional values.

III-B. Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).

This key element is not applicable if the baccalaureate degree program is not under review for accreditation.

Elaboration: The baccalaureate degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

Compliance Concern?	Baccalaureate:	No
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Rationale:

The traditional BSN and RN-BSN curricula were recently revised and are in the process of being implemented. The team found the program to be in compliance because curricula were developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, specifically the *Baccalaureate Essentials* and the *QSEN Competencies*. All syllabi reviewed by the team clearly stated the content, knowledge, and skills taught in the course and linked them to the BSN program outcomes, the *Baccalaureate Essentials*, and/or the *QSEN Competencies* accordingly. For example, content in H355 Data Analysis in Clinical Practice and Healthcare Research links the course competency “Interpreting findings from data analysis for application to clinical practice” to BSN program outcome #1 (“A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision-making”) and Baccalaureate Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice, Baccalaureate Essential III: Scholarship for Evidence-Based Practice, and Baccalaureate Essential IV: Information Management and Application of Patient Care Technology. Content in S471 Restorative Health Related to Multi-System Failure is linked to BSN program outcome #3 (“A knowledgeable care coordinator who facilitates access to resources across the continuum of healthcare environments in order to meet the evolving healthcare needs of individuals, families, communities, and populations”), the QSEN competency of patient-centered care, and Baccalaureate Essential VII: Clinical Prevention and Population Health. Preceptors at clinical sites visited by the team confirmed that they were provided with the course syllabus and clinical skills students are expected to learn. Students confirmed that content taught in didactic courses is linked to and reinforced in clinical practice.

III-C. Master’s curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- Master’s program curricula incorporate professional standards and guidelines as appropriate.

- a. All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.
- b. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).
- Graduate-entry master's program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.

This key element is not applicable if the master's degree program is not under review for accreditation.

Elaboration: The master's degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

Master's degree APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Master's degree programs that have a direct care focus but are not APRN education programs (e.g., nurse educator and clinical nurse leader) incorporate graduate-level content addressing the APRN core. These programs are not required to offer this content as three separate courses.

Compliance Concern?	Master's:	Not Applicable
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Rationale:

This key element is not applicable, as a master's degree program is not under review.

III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- DNP program curricula incorporate professional standards and guidelines as appropriate.
 - a. All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.
 - b. All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).
- Graduate-entry DNP program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.

This key element is not applicable if the DNP program is not under review for accreditation.

Elaboration: The DNP program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

DNP APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program deems this necessary.

Compliance Concern? **DNP:** **Not Applicable**

Rationale:

This key element is not applicable, as a DNP program is not under review.

III-E. Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).

This key element is not applicable if the post-graduate APRN certificate program is not under review for accreditation.

Elaboration: The post-graduate APRN certificate program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role- and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for certificate students who have already completed such courses, unless the program deems this necessary.

Compliance Concern?

Post-graduate APRN certificate:

Not Applicable

Rationale:

This key element is not applicable, as a post-graduate APRN certificate program is not under review.

III-F. The curriculum is logically structured to achieve expected student outcomes.

- Baccalaureate curricula build on a foundation of the arts, sciences, and humanities.
- Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.
- DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.
- Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.

Elaboration: Baccalaureate degree programs demonstrate that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Graduate-entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) as well as advanced nursing knowledge.

Graduate programs are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire the baccalaureate-level knowledge and competencies delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.

DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire the doctoral-level knowledge and competencies delineated in The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006). If the program awards the master's degree as part of the DNP program, the program demonstrates how students acquire the master's-level knowledge and competencies delineated in The Essentials of Master's Education in Nursing (AACN, 2011) and, if applicable, Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).

The program provides a rationale for the sequence of the curriculum for each program.

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because BSN curricula are logically structured to achieve expected student outcomes and build on a foundation of the arts, sciences, and humanities. In the traditional BSN curriculum, students complete general education courses such as English, math, psychology, public speaking, ethics, the sciences, and art during the freshman and sophomore years. The junior and senior years focus on nursing-specific courses logically progressing from basic and fundamental concepts and content to complex concepts and content. Course content in syllabi reviewed was clearly linked to course learning outcomes and BSN program outcomes. The team reviewed a sample student degree map that confirmed the logical sequence of courses taken by students in the traditional track. Students in the RN-BSN track must have

completed all general education and prerequisite courses prior to admission. They begin with B331 Transition to Baccalaureate Nursing Practice in the first semester as a nursing major and end with R470 Clinical Baccalaureate Nursing Capstone in their last semester. The RN-BSN curriculum emphasizes content such as health policy, data analysis, evidence-based practice, management, and leadership. During the meeting with students, a student currently enrolled in the RN-BSN track confirmed that the curriculum is structured to meet the learning needs of practicing RNs, teach leadership and management skills, and promote professional growth.

III-G. Teaching-learning practices:

- support the achievement of expected student outcomes;
- consider the needs and expectations of the identified community of interest; and
- expose students to individuals with diverse life experiences, perspectives, and backgrounds.

Elaboration: Teaching-learning practices (e.g., simulation, lecture, flipped classroom, case studies) in all environments (e.g., virtual, classroom, clinical experiences, distance education, laboratory) support achievement of expected student outcomes identified in course, unit, and/or level objectives.

Teaching-learning practices are appropriate to the student population (e.g., adult learners, second-language students, students in a post-graduate APRN certificate program), consider the needs of the program-identified community of interest, and broaden student perspectives.

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because teaching-learning practices support the achievement of expected student outcomes, consider the needs and expectations of the community of interest, and expose students to individuals with diverse life experiences, perspectives, and backgrounds. The team observed groups of students from various levels in simulation experiences, didactic classes, acute care clinical experiences, and community-based clinical experiences. During an observation of a senior-level class, students were actively engaged in an assessment of vital signs, a cardio exercise, and a post-exercise assessment of vital signs. A critical thinking dialogue between faculty and students followed that addressed oxygenation and perfusion in clients with healthy hearts and clients with alterations in cardiac health. The team also observed a junior-level course in fundamentals where the faculty member used the Top Hat program to engage students in responding to questions on the reasons why some of the proposed answers were correct and others were not. Students, faculty, and the community of interest confirmed that teaching-learning practices expose students to individuals with diverse perspectives and backgrounds and broaden student perspectives.

III-H. The curriculum includes planned clinical practice experiences that:

- enable students to integrate new knowledge and demonstrate attainment of program outcomes;
- foster interprofessional collaborative practice; and
- are evaluated by faculty.

Elaboration: To prepare students for a practice profession, each track in each degree program and each track in the post-graduate APRN certificate program affords students the opportunity to develop professional competencies and to integrate new knowledge in practice settings aligned to the

educational preparation. Clinical practice experiences include opportunities for interprofessional collaboration. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences align with student and program outcomes. These experiences are planned, implemented, and evaluated to ensure students are competent to function as members of interprofessional teams at the level for which they are being prepared.

Programs that have a direct care focus (including, but not limited to, post-licensure baccalaureate and nurse educator tracks) provide direct care experiences designed to advance the knowledge and expertise of students in a clinical area of practice.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because planned clinical practice experiences were evident throughout the traditional BSN track and the RN-BSN track. Traditional BSN students described valuable learning experiences, including interprofessional simulation experiences with students from other health professions programs at the university. During the meetings with students and the community of interest, students and stakeholders enthusiastically described numerous positive experiences and outcomes as a result of clinical experiences in DEUs. RN employees and preceptors at clinical facilities provided evidence that they were given the syllabus and a list of clinical skills students were to learn in each respective clinical course. Preceptors provide feedback on student performance to faculty. Students, preceptors, and faculty confirmed that faculty conduct clinical evaluations of student performance and assign grades. In a meeting with the director of the RN-BSN track, the director described the capstone clinical course, which requires students to be precepted by a BSN-prepared nurse and design a clinical project that demonstrates achievement of the BSN program outcomes.

III-I. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because course syllabi reviewed by the team clearly described a university-wide grading standard that is consistently applied to all students in the Indiana University system. Assignments are evaluated and graded by course faculty using assignment-specific rubrics,

and clinical performance is evaluated using course-specific clinical evaluation tools. Students reported that clinical faculty use clinical evaluation tools to evaluate student progress and provide recommendations for improvement and/or remediation, if indicated. Course examinations are administered using the ExamSoft program. ExamSoft allows faculty to develop test banks and provides statistical analyses that indicate reliability and validity of test questions and exams.

III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. The curriculum is regularly evaluated by faculty and revised as appropriate.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because review of SON faculty meeting and Curriculum Committee minutes from 2015 through 2019 confirmed that the SON faculty are engaged in ongoing evaluation of the curriculum and teaching-learning practices. For example, the SON Curriculum Committee minutes of August 16, 2016 indicate a discussion on the need for upper-division nursing courses to be linked to the *Baccalaureate Essentials* and the *QSEN Competencies*. The same minutes indicate that a faculty member introduced the need for a course on communication skills for the health professional. In the SON Curriculum Committee minutes of December 6, 2018, it is noted that the committee approved changes to a genetics course. Students, faculty, and stakeholders stated that data from end-of-semester course evaluations, as well as informal feedback from students and stakeholders, are used to change and improve teaching-learning practices and courses. The interim assistant dean for nursing and the BSN program director confirmed that faculty have the liberty to design and change course assignments, as long as the assignments are clearly linked to student learning outcomes and the BSN program outcomes. Needed changes to course content, course objectives, and course descriptions are brought to the SON Curriculum Committee for discussion, development, and approval. The new traditional BSN curriculum is in the process of being implemented as the former curriculum is being phased out. The director of the RN-BSN track stated that revision of the RN-BSN curriculum involves a collaborative process by representatives from the consortium of the nine Indiana University RN-BSN programs.

Standard IV

Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

This standard is met for the baccalaureate degree nursing program.

IV-A. A systematic process is used to determine program effectiveness.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) uses a systematic process to obtain relevant data to determine program effectiveness. The process:

- *is written, is ongoing, and exists to determine achievement of program outcomes;*
- *is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; faculty outcomes; and other program outcomes);*
- *identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*
- *includes timelines for data collection, review of expected and actual outcomes, and analysis; and*
- *is periodically reviewed and revised as appropriate.*

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because IU South Bend has a comprehensive SEP that addresses the CCNE standards for accreditation. The SON Assessment Committee is responsible for execution of this document. The team met with faculty that serve on the SON Assessment Committee and confirmed that faculty representing each curriculum level serve on the SON Assessment Committee, which meets monthly. The SEP is reviewed and revised as needed every three years by the SON Assessment Committee and is subsequently approved by the Council of Nursing Faculty. The SEP defines the following: expected level of achievement; frequency of assessment; assessment methods; results of data collection and analysis; and actions for program development, maintenance, or revision. Outcomes include program completion rates, NCLEX-RN® pass rates, employment rates, and additional outcomes as determined by faculty. Timelines and data used to review expected and actual outcomes are present, and analysis of data is evident. Minutes reviewed by the team confirmed that data from multiple sources contribute to the value and significance of this document.

IV-B. Program completion rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) demonstrates achievement of required program outcomes regarding completion in any one of the following ways:

- *the completion rate for the most recent calendar year (January 1 through December 31) is 70% or higher;*
- *the completion rate is 70% or higher over the three most recent calendar years;*

- the completion rate is 70% or higher for the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education; or
- the completion rate is 70% or higher over the three most recent calendar years when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.

The program identifies the cohort(s), specifies the entry point, and defines the time period to completion, each of which may vary by track; however, the program provides the completion rate for the overall degree/certificate program. The program describes the formula it uses to calculate the completion rate. The program identifies the factors used and the number of students excluded if some students are excluded from the calculation.

Compliance Concern? Baccalaureate: No

Rationale:

IU South Bend BSN students are admitted to the program after they complete the required foundational/prerequisite courses. The traditional BSN curriculum is five semesters in length. The team found the program to be in compliance because the completion rate for traditional BSN students in 2018 was 80%, as evidenced by 37 out of 46 students graduating within five semesters after beginning the clinical nursing curriculum. The completion rate for the RN-BSN track in 2018 was 96%, as evidenced by 25 out of 26 students graduating within three years after beginning the program. The rates for 2018 were the only ones reported, and both completion rates were above the expected level of achievement of 70%.

IV-C. Licensure pass rates demonstrate program effectiveness.

This key element is not applicable to a program that does not prepare individuals for licensure examinations or does not yet have individuals who have taken licensure examinations.

Elaboration: Programs with a pre-licensure track demonstrate achievement of required program outcomes regarding licensure. The program demonstrates that it meets the licensure pass rate of 80% in any one of the following ways:

- the NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);
- the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;
- the pass rate for each campus/site and track is 80% or higher for all first-time takers over the three most recent calendar years; or
- the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.

For each campus/site and track, identify which of the above options was used to calculate the pass rate.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the first-time pass rate for traditional BSN students was 98.04% in 2018. One student out of 51 students did not pass the first time they took the test. The team

confirmed that the one student who failed did pass on the second attempt. The NCLEX-RN® pass rate for 2018 was the only year reported and was above the expected level of achievement of 80%. Students in the RN-BSN track have already taken the NCLEX-RN®, so their pass rates are not included in these data.

IV-D. Certification pass rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not prepare individuals for certification examinations or does not yet have individuals who have taken certification examinations.

Elaboration: The master's, DNP, and post-graduate APRN certificate programs demonstrate achievement of required program outcomes regarding certification. For programs that prepare students for certification, certification pass rates are obtained and reported for those completers taking each examination, even when national certification is not required to practice in a particular state.

For programs that prepare students for certification, data are provided regarding the number of completers taking each certification examination and the number that passed. A program is required to provide these data regardless of the number of test takers.

A program that prepares students for certification demonstrates that it meets the certification pass rate of 80%, for each examination, in any one of the following ways:

- *the pass rate for each certification examination is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);*
- *the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;*
- *the pass rate for each certification examination is 80% or higher for all first-time takers over the three most recent calendar years; or*
- *the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.*

The program identifies which of the above options was used to calculate the pass rate. The program provides certification pass rate data for each examination but, when calculating the pass rate described above, may combine certification pass rate data for multiple examinations relating to the same role and population.

Compliance Concern?

Baccalaureate:

Not Applicable

Rationale:

This key element is not applicable, as the BSN program does not prepare graduates for certification.

IV-E. Employment rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

- *The employment rate is provided separately for each degree program (baccalaureate, master's, and DNP) and the post-graduate APRN certificate program.*
- *Data are collected within 12 months of program completion. Specifically, employment data are collected at the time of program completion or at any time within 12 months of program completion.*

- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the employment rate for traditional BSN students was 94% in 2018. Faculty reported to the team that “graduates of IU South Bend School of Nursing are highly valued and successfully find employment where it is sought.” This sentiment was echoed to the team by the community of interest representing various local healthcare institutions and also a unit manager at a local hospital. The employment rate for 2018 was the only year reported and was above the expected level of achievement of 70%. The program has an employment rate of 100% for RN-BSN students who remained gainfully employed where they worked prior to and during the program.

IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.

This key element is applicable if one or more of the following key elements is applicable: Key Element IV-B (completion), Key Element IV-C (licensure), Key Element IV-D (certification), and Key Element IV-E (employment).

Elaboration: The program uses outcome data (completion, licensure, certification, and employment) for improvement.

- *Discrepancies between actual and CCNE expected outcomes (program completion rates 70%, licensure pass rates 80%, certification pass rates 80%, employment rates 70%) inform areas for improvement.*
- *Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because the expected levels of achievement for completion, licensure, and employment rates are met. According to the faculty, the consistently strong performance of graduates for each of these outcome measures influenced their decision to continue a content-based approach to course delivery for the newly revised 120-credit curriculum. As the new curriculum progresses, faculty and students will be collecting and reviewing course-related data every semester. Review and analysis of the data will be done by course faculty each semester and by the Curriculum Committee on an established schedule, and changes will be made as necessary. Students’ ability to meet level and course outcomes at an established benchmark will be monitored to determine program effectiveness.

IV-G. Aggregate faculty outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of expected faculty outcomes. In order to demonstrate program effectiveness, outcomes are consistent with and contribute to achievement of the

program's mission and goals and are congruent with institution and program expectations. Expected faculty outcomes:

- *are identified for the faculty as a group;*
- *specify expected levels of achievement for the faculty as a group; and*
- *reflect expectations of faculty in their roles.*

Actual faculty outcomes are compared to expected levels of achievement. Actual faculty outcomes are presented in the aggregate. If expected faculty outcomes vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other), actual faculty outcomes may be presented separately for each different group of faculty.

Compliance Concern? Baccalaureate: Yes

Rationale:

The team found a compliance concern because outcomes related to expectations of the faculty that promote personal and/or professional development and program effectiveness were not identified. Rather, data cited in the self-study document for this key element are a summary of faculty outcome activities required for promotion and tenure as well as the number of faculty by degree that was applicable primarily to tenure-track and tenured faculty, and not necessarily inclusive of all faculty. Table IV-G-4 in the self-study document offers categories of faculty outcomes, but benchmarks for each are not identified, making it difficult to determine whether the outcome reported is being met by the program. The team also noted the following statement in the self-study document: "IU South Bend does not have written aggregate benchmarks for faculty achievement." The team met with faculty who serve on the SON Assessment Committee to further explore if there were defined faculty outcomes that were being measured and confirmed that the program has no defined faculty outcomes.

IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.

Elaboration: The program uses faculty outcome data for improvement.

- *Faculty outcome data are used to promote ongoing program improvement.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to foster achievement of faculty outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

Compliance Concern? Baccalaureate: Yes

Rationale:

The team found a compliance concern because of the absence of any explicitly defined faculty outcomes and corresponding data that could be used to foster ongoing program improvement.

IV-I. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure pass rates (Key Element IV-C), certification pass rates (Key Element IV-D), employment rates (Key Element IV-E), and faculty (Key Element IV-G).

Program outcomes are defined by the program and incorporate expected levels of achievement. The program describes how outcomes are measured. Actual levels of achievement, when compared to expected levels of achievement, demonstrate that the program, overall, is achieving its outcomes. Program outcomes are appropriate and relevant to the degree and certificate programs offered.

Compliance Concern? Baccalaureate: No

Rationale:

The team found the program to be in compliance because IU South Bend has established nine program outcomes that are evaluated at the end of the program by graduating students and every three years by alumni. Graduating students in the traditional BSN track are asked to complete an exit survey that asks them to rate their nursing education related to the achievement of program outcomes and whether the program provided them with the knowledge and skills necessary to succeed. In 2018, the survey was completed by 33 of the 55 graduating students. All program outcomes had a mean that met the benchmark (greater than or equal to 3.5), ranging between 3.90 for “Politically Aware” and 4.73 for “Professional Role Model.”

Alumni complete a similar survey every three years, with the most recent alumni survey conducted in 2017. Using the same measures and benchmarks as the graduating student survey, alumni responses exceed the benchmark of greater than or equal to 3.5, with means between 4.0 for “Therapeutic/Competent Care Provider” and 5.0 for “Conscientious Practitioner.” In a meeting with the community of interest that included many IU South Bend alumni, the team confirmed that the program graduates feel they were provided a quality nursing education that offered the knowledge and skills needed to be successful as a professional nurse.

IU South Bend participates in the statewide IU Schools of Nursing RN-BSN Consortium. The RN-BSN track uses the curriculum established by the consortium and measures outcomes for students who enter the RN-BSN track through this campus. IU South Bend RN-BSN students’ performance on the program outcomes is measured with required assignments in the various courses. The benchmark for these assignments is a score of 73% or higher. During the 2017 and 2018 academic years, all benchmarks were met with the exception of the program outcome related to “Information Technology.” In a phone interview with the director of the consortium, the team confirmed that outcome data are reviewed by the Consortium Curriculum Committee in relation to data collected by all participating schools and used to ensure the continued relevance of the curriculum.

IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.

Elaboration: For program outcomes defined by the program:

- *Actual program outcomes are used to promote program improvement.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*

- *Faculty are engaged in the program improvement process.*

Compliance Concern?

Baccalaureate:

No

Rationale:

The team found the program to be in compliance because outcome data are used by the faculty to support ongoing program improvements. For example, ExamSoft data are used to evaluate student performance on faculty-developed tests given during the program in relation to the eight NCLEX-RN® categories. An aggregate benchmark of greater than or equal to 80% is required for each of these categories. In 2018, the category of “Basic Care and Comfort” scored below the benchmark for both junior- and senior-level courses at 75% and 72%, respectively. Weakness in this category was substantiated in November 2018 by students scoring lower than the national mean on the ATI Predictor Exam. These data were reported to faculty in a Council of Nursing Faculty meeting. A decision was made to include questions on course exams throughout the curriculum that address content related to basic care and comfort.

In the spring of 2019, the Admissions, Progression, and Graduation Committee identified that there were three NCLEX-RN® failures and three fourth-semester failures. An analysis of factors that could be contributing to this downturn in program completion and NCLEX-RN® pass rates yielded several possible causes. The Admissions, Progression, and Graduation Committee identified that students were coming from a weaker applicant pool in recent years, and faculty reported an increase in the number of students needing academic support. Program administration created an IU South Bend-funded student tutoring program that uses advanced semester students to mentor nursing students who need academic support. Several student mentors, as well as students who were being mentored, attended a meeting when the team met with the students. Both mentors and mentees stated a high level of satisfaction with this new program, as evidenced by their success in passing the courses in which they had been struggling.