August 5, 2013

Laura Evans, PhD, RN, APN
Dean
School of Nursing
University of Arkansas at Monticello
PO Box 3606
Monticello, AR 71656

Dear Dr. Evans:

This letter is formal notification of the action taken by the Accreditation Commission for Education in Nursing (ACEN) at its meeting on July 11-12, 2013. The Commission affirmed the continuing accreditation status of the baccalaureate nursing program following the onsite review conducted as a result of reported non-compliance with Standard 2 Faculty and Staff. The Commission affirmed the next accreditation visit for Spring 2018 with monitoring of Standard 2 Faculty and Staff and Standard 6 Outcomes.

A copy of the Focused Visit Report is enclosed. If you have questions about this action or about ACEN policies and procedures, please contact me.

Sincerely,

Sharon J. Tanner, EdD, MSN, RN
Chief Executive Officer

Enc.
FOCUSED VISIT REPORT
University of Arkansas at Monticello
Monticello, AR

Program Type: Baccalaureate
Purpose of Visit: Focused Visit
Date of Visit: April 1-2, 2013

GENERAL INFORMATION

Nursing Education Unit
School of Nursing
PO Box 3606
124 University Place
Monticello, AR 71656

Nurse Administrator
Laura Evans, PhD, RN, APN
Dean and Assistant Professor
Telephone: (870) 460-1069
Fax: (870) 460-1969
E-mail: evansl@uamont.edu

Governing Organization
University of Arkansas at Monticello
346 University Drive
Monticello, AR 71656

Chief Executive Officer
H. Jack Lassiter, EdD
Chancellor
Telephone: (870) 460-1020
Fax: (870) 460-1321
E-mail: lassiter@uamont.edu

State Board of Nursing Approval Status
Agency: Arkansas State Board of Nursing
Last Review: May 15, 2008
Outcome: Continued Approval
Next Review: September 2013

Accreditation Status (Program)
Agency: NLNAC
Last Review: Spring 2010
Outcome: Continuing Accreditation
Next Review: Spring 2018

Accreditation Status (Governing Organization)
Agency: The Higher Learning Commission
Last Review: 2004-2005
Outcome: Continued Approval
University of Arkansas at Monticello
Baccalaureate

SITE VISIT INFORMATION

I. INTRODUCTION

Site Visit Team:

Chairperson
Cordia A. Starling, EdD, MS, RN
Associate Director
National League for Nursing Accrediting Commission
3343 Peachtree Road NE, Suite 850
Atlanta, GA 30326
Telephone: (404) 975-5000
Fax: (404) 975-5020
E-mail: cstarling@nlnc.org

NLNAC Criteria Used: 2008

Program Demographics:

Year nursing program established: 1992

Faculty:
Number of faculty teaching full-time in the baccalaureate program: 8
Number of faculty teaching part-time in the baccalaureate program: 0

Students:
Total enrollment: 30
Full-time: 30
Part-time: 0

Length of program:
BSN: 120 credits; nine (9) semesters including prerequisites

Program options/tracks:
RN-to-BSN: 120 credits; seven (7) semesters including prerequisites
LPN-to-BSN: 120 credits; seven (7) semesters including prerequisites

Additional locations:
No additional locations

Interviews:
Individual Conferences
Laura Evans, PhD, RN, APN, Dean and Assistant Professor

Group Conferences
Nursing Students
Junior level students, n=16
Senior level students, n=11
University of Arkansas at Monticello
Baccalaureate

Student Services Personnel
Bobby Hoyle, MS, Information Technology
Mary Whiting, MS, Admissions
Susan Brewer, BS, Financial Aid
Sandra Campbell, MSLS, Library
Laura Hughes, MA, Student Counseling

Administrators
H. Jack Lassiter, EdD, Chancellor
Jimmie Yeiser, PhD, Provost and Vice Chancellor for Academic Affairs

Nursing Faculty
Jacqueline Bryant, MSN/ED, RN, Assistant Professor
Christine Felts, MS, RN, APN, Associate Professor
Brandy Haley, MSN, RN, Assistant Professor
Anita Shaw, MSN, RN, Associate Professor
Sharon Walters, MSN, RN, Associate Professor
Belinda Wells, MNSc, RN, APN, Associate Professor

Classes Attended:
NUR 452V Concepts and Nursing Care IV
Instructor: Jacqueline Bryant, MSN/ED, RN, Assistant Professor
Students, n=11

Documents Reviewed:
Catalogs, Handbooks, Manuals
University of Arkansas at Monticello Catalog, 2011-2013
University of Arkansas at Monticello Student Handbook, 2012
Nursing Student Handbook, 2012

External Constituencies
Arkansas State Board of Nursing Report and approval letter, 2008
Arkansas State Board of Nursing Report on licensure exam pass rates, 2011-2012
Default rate records for Title IV programs, 2013

Nursing/Governing Organization Documents
Nursing program materials, 2011-2013
Systematic Evaluation Plan with trended data, 2012
Budget and fiscal reports, 2013
Institutional and Financial Aid Audit reports, FY2010; FY2011; FY2012
Faculty policies, 2012
Student files, 2011-2013
Student financial aid records, 2012
Faculty records, 2008-2013
Written clinical agreements, 2012-2013

Nursing Unit Minutes
Faculty meeting minutes, including all committees, 2012-2013

Course Materials
Course syllabi, 2012-2013
Class schedules and clinical schedules, 2012-2013
Evaluation tools, 2012-2013
II. EVALUATION OF THE STANDARDS AND CRITERIA

STANDARD 1
Mission and Administrative Capacity

The nursing education unit’s mission reflects the governing organization’s core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.

1.1 The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.

1.2 The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.

1.3 Communities of interest have input into program processes and decision-making.

1.4 Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.

1.5 The nursing education unit is administered by a doctorally-prepared nurse.

1.6 The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.

1.7 With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity among the units of the governing organization.

1.8 Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.

1.9 Records reflect that program complaints and grievances receive due process and include evidence of resolution.

For nursing education units engaged in distance education, the additional criterion is applicable:

1.10 Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

Commentary:

The purpose of the Focused Visit was to review the University of Arkansas at Monticello baccalaureate nursing program’s compliance with the NLNAC Accreditation Standards and Criteria following verification of non-compliance with Standard 2 Faculty and Staff. According to the Annual Report submitted by the nursing program, six (6) full-time faculty members were reported as teaching in the University of Arkansas at Monticello (UAM) baccalaureate nursing program. All full-time faculty reported were credentialed with master’s degrees with a major in nursing, and one (1) faculty member held a doctorate degree. Two (2) part-time faculty were reported as being credentialed with a baccalaureate in nursing as their highest degree. A minimum of 25% of the full-time faculty did not hold earned doctorates, and all faculty were not credentialed with a minimum of a master’s degree with a major in nursing.
After review of the Annual Report, an updated faculty profile from UAM was submitted for review. The profile reported that the faculty member with the doctoral degree had been placed in an administration role as the Dean of the School of Nursing, leaving no full-time faculty credentialed at the doctoral level. The two (2) part-time faculty members were verified as holding baccalaureate degrees as their highest credential in nursing. The Board of Commissioners’ Subcommittee for Substantive Changes reviewed the program and determined the requirement of a Focused Visit.

The mission of the University includes stated goals of educating students in critical thought and providing education in a selected profession. In interviews onsite, the Provost reported that nursing is vital to the mission of the University as it is one (1) of the few programs that can lead all the way from a certificate to a baccalaureate degree and fulfill one (1) of the goals of the University to educate traditional and non-traditional students. One (1) of the goals of the baccalaureate nursing program as stated in the mission is to encourage critical thinking in the provision of nursing care. The University has an “open door” admission policy that provides all students an opportunity to accomplish their career goals.

The Dean verified upon interview that she has input into the governance of the University. The faculty also confirmed that all serve on at least one (1) University committee and have input into the Faculty Assembly, the campus-wide faculty governance organization that serves as liaison between faculty and administration. Students further described their involvement in the governance of the program as serving on various committees within the program and having student representatives that attend faculty meetings. Students also verbalized knowledge of University student governing opportunities, but also reported that personal responsibilities and the rigor of the nursing program as reasons they are not more active in College-wide activities. Students are active, however, in the Student Nurses Association (SNA) and have participated in state and national conventions. One (1) of the students is on the SNA State Board. Students also mentioned that some have served as University Ambassadors, and one (1) student in the program is on the softball team.

An Advisory Council consisting of representatives from area healthcare facilities and community healthcare services is the primary community of interest for the program. A review of Council minutes dated January 11, 2013, verified that information concerning the program was shared with the Council, and the program received input from the Council. Other meeting minutes were unavailable. The Dean reported that her predecessor met with the Council annually, but the faculty were not included in the meetings, and minutes are missing from those meetings. Her first meeting with the Council as the new Dean was held in January and attended by the faculty.

Several partnerships exist that provide opportunities for service learning for students. The SNA regularly participates in community service activities and has won state and national awards for its service projects. Currently, the SNA is implementing a grant to teach and support healthy habits in middle school students and also performing community assessments for a local hospital as part of another grant. The faculty and students also reported their participation in flu clinics and wellness fairs.

The Dean of the School of Nursing was appointed to the position in August 2012. She holds a doctoral degree and is certified as a nurse practitioner in women’s health. The Dean served as Interim Dean before official appointment as Dean and as a member of the faculty for four (4) years before her administrative role. Her curriculum vitae includes participation in numerous professional development activities and organizations along with presentations and publications.

The Dean confirmed her authority to administer the program and its budget. Review of the Dean’s job description verified that administrating and coordinating the School of Nursing; appointing and evaluating faculty; and preparing and managing the budget are a part of the responsibilities and duties. Like others in similar administrative positions at the University, the Dean teaches six (6) hours per year and advises approximately 18 students. She is supported by faculty course leaders, clinical coordinators, and an administrative assistant.
University of Arkansas at Monticello
Baccalaureate

The faculty verified that the Dean seeks input into the budget, and they have requested learning resources, equipment, and supplies that have been acquired for the program. The Dean and faculty commented that the program budget is sufficient and comparable to that of other similar programs. Review of the University budget revealed similarities in allocations for nursing and other health-related programs.

The nursing faculty are held to the same policies as all other faculty at the University. Differences are the result of Arkansas State Board of Nursing (ABON) mandates and the clinical facility requirements.

Only one (1) written complaint has been submitted since the last site visit by the NLNAC. The very recent complaint involved perceived mistreatment of a student by a faculty member and was under review at the time of the Focused Visit. The students were able to articulate the grievance policy and where the policy can be found. The Nursing Student Handbook delineates the appeals process.

At present, no nursing courses are offered through distance education. All courses are presented face-to-face and utilize Blackboard as the course management system.

Summary:

Strength:

- The local, state, and national involvement and activities of the Student Nurses Association

Compliance:

The program is in compliance with the Standard.
STANDARD 2
Faculty and Staff

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

2.1 Faculty are credentialed with a minimum of a master’s degree with a major in nursing and maintain expertise in their areas of responsibility.

2.1.1 A minimum of 25% of the full-time faculty hold earned doctorates.

2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.

2.2 Faculty (full- and part-time) credentials meet governing organization and state requirements.

2.3 Credentials of practice laboratory personnel are commensurate with their level of responsibilities.

2.4 The number and utilization of faculty (full- and part-time) ensure that program outcomes are achieved.

2.5 Faculty (full- and part-time) performance reflects scholarship and evidence-based practice.

2.6 The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.

2.7 Faculty (full- and part-time) are oriented and mentored in their areas of responsibilities.

2.8 Systematic assessment of faculty (full- and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.

2.9 Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.

For nursing education units engaged in distance education, the additional criterion is applicable:

2.10 Faculty (full- and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.

Commentary:

<table>
<thead>
<tr>
<th>Number of Faculty</th>
<th>Doctoral Nursing</th>
<th>Master’s Nursing</th>
<th>Baccalaureate Nursing</th>
<th>Associate Nursing</th>
<th>Other Non-nursing</th>
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<tr>
<td>Full-Time</td>
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<td>Part-Time</td>
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At the time of the Focused Visit, there were eight (8) full-time faculty credentialed with the minimum of a master’s degree with a major in nursing. One (1) faculty member is slated to complete a DNP degree in August 2013, and two (2) faculty were reported to be starting PhD programs in nursing in Summer 2013.
The two (2) part-time faculty credentialed with the baccalaureate in nursing as the highest degree who were reported previously are no longer utilized by the program. The Dean stated that if part-time faculty are needed and used in the future, only candidates prepared with a master’s degree in nursing will be considered and hired for the position.

As reported by the Dean and University administration, rationale for having less than 25% of the faculty credentialed with a doctorate is the scarce number of nurses in the area holding the credential and the University’s inability to attract faculty with advanced degrees to the rural area of the University. In addition, the University’s faculty salaries were reported to be non-competitive with those in nursing practice. The Dean and administration commented that they will support the faculty as much as possible in obtaining doctoral degrees. There is a tuition reduction for faculty attending other universities within the state, and there are more institutions now available that offer doctorates in nursing within Arkansas. This should provide greater access to nursing faculty members in obtaining their doctorates.

The faculty verified maintenance of expertise in their areas of responsibility by attending workshops, seminars, and conferences. According to the ABON, 12 continuing education units (CEUs) are required to renew licensure every two (2) years. Those with advanced practice certification must have 15 CEUs to maintain their licensure and certification. The faculty confirmed that textbook vendors provide webinars to help with the incorporation of web-based technologies into the classroom, and the University provides faculty development opportunities that focus on teaching. All but one (1) faculty member reported continuation of practice in the clinical area on a part-time basis.

Further, professional development is a part of the annual faculty evaluation process, and the faculty set goals related to continuing education as a part of the evaluation process. Each faculty member is allocated $300 annually for professional development.

Faculty experience with the program ranges from eight (8) months to 27 years, and faculty have expertise in adult, community/family, public, women’s, and psychiatric/mental health nursing as well as pediatric and critical care nursing. Faculty meet the University, the Arkansas Department of Higher Education Coordinating Board, and ABON credential requirements for employment as nursing faculty. Review of faculty files revealed current ABON licensure for all faculty and documentation of degrees conferred for all but two (2) faculty members. The Dean indicated that those with missing documentation were a result of the previous Dean’s record-keeping and the files would be updated to include the missing transcripts.

There are no dedicated practice laboratory personnel for the program. Full-time faculty members teach laboratory skills and simulation activities, which are integrated into each nursing course.

Faculty-to-student ratios were reported as 1:20, 1:8, and 1:6 in class, clinical, and simulation laboratory. Nursing courses that include clinical are team-taught with two (2) faculty members assigned. Courses involving only theory are taught by one (1) faculty member. According to University policy, 12 hours of teaching is considered a standard faculty workload, and class and clinical experiences constitute a contact-hour-to-workload ratio of 1:1. Ten (10) office hours are suggested for student advisement, course preparation, and management for faculty. The faculty expressed that their workload is equivalent to that of other faculty across campus even with the addition of clinical hours.

The faculty informally defined scholarship according to the University’s definition, which includes publishing and research. Faculty members commented that professional development activities, continued practice, professional organization involvement, and personal research to update their knowledge and incorporate the latest technology into their instruction resulted in their use of evidence-based teaching and clinical practices.

One (1) secretary and a student worker are utilized by the School of Nursing. Both provide clerical support to maintain the processes necessary to efficiently and effectively run the program. The Dean
clarified that the student worker does not have access to student records, files, or materials such as course examinations. The Dean and faculty verified that the number of staff was sufficient to meet the needs of the program.

The Dean and the faculty confirmed that there is a process for orienting and mentoring new full-time faculty members. There is a formal orientation provided by the University, and the School of Nursing provides mentoring through the course coordinator for the course in which the new faculty member will be teaching. However, all of the faculty and the Dean are considered mentors as needed for new faculty. A process for orienting and mentoring new part-time faculty could not be confirmed. In the present Dean’s tenure, no part-time faculty have been hired. Evidence of orientation could not be found in the faculty files for the two (2) part-time faculty members who had been employed. The Dean clarified that they had been employed for several years before their release.

An annual evaluation is conducted for all full-time faculty members. The evaluation includes student, peer, and Dean feedback related to teaching performance and review of professional development, service, and scholarship. Evidence of the evaluation process was found in faculty files reviewed onsite.

Staff members are evaluated annually by the Dean, and reportedly, the previous Dean evaluated the previous clinical staff. The current secretary and student worker began their tenure in Fall 2012, and have yet to be evaluated formally by the Dean.

**Summary:**

**Compliance:**

The program is not in compliance with the Standard as Criterion 2.1.1 is not met, as evidenced by:

- A minimum of 25% of the full-time faculty do not hold earned doctorates.

With the following area needing development:

- Ensure faculty files include documentation of academic credentials.
STANDARD 3
Students

Student policies, development, and services support the goals and outcomes of the nursing education unit.

3.1 Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the goals and outcomes of the nursing education unit.

3.2 Student services are commensurate with the needs of students pursuing or completing the baccalaureate program, including those receiving instruction using alternative methods of delivery.

3.3 Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.

3.4 Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.

3.4.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.

3.5 Integrity and consistency exist for all information intended to inform the public, including the program’s accreditation status and NLNAC contact information.

3.6 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

3.7 Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.

For nursing education units engaged in distance education, the additional criterion is applicable:

3.8 Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.

Commentary:

The nursing students are held to the same policies as those of all students attending the University. Exceptions for the nursing students are related to admission, grading, and progression policies specific to the program. There are also policies related to health, immunizations, background checks, drug screening, confidentiality, malpractice insurance, and dress imposed by the clinical affiliation agreements. Policies are outlined in the Nursing Student Handbook; forms acknowledging receipt and understanding of the Handbook are signed and maintained in student records. The students articulated the policies of the program and expressed an understanding of the differences. They verbalized that the program has a higher academic standard as nurses hold life and death in their hands and are responsible for the safe provision of patient care. They also stated that some policies are a result of clinical contracts and must be followed to attend learning experiences at the clinical facilities.

In interviews, the students and student service representatives confirmed access to services provided by the University for all students. The students indicated that they are aware of tutoring, career, disability,
and technology and technical support services and how to obtain those services if needed. These services are also outlined in the Nursing Student Handbook. Students mentioned the use of financial aid services in particular and the availability of information online or in person regarding the financial aid application process and the responsibility of student loan repayment. The students also confirmed entrance and exit counseling as a part of loan receipt.

Student records are stored in locked file cabinets in the School of Nursing main office, which is connected to the Dean’s office. Only those authorized can access the files through the secretary or Dean. Random review of student records verified files consistently contained health documentation, drug screening results, clinical evaluations, academic counseling forms, transcripts, CPR certification verification, and signed policy acknowledgement forms. Admissions and financial aid representatives verified that student academic and financial aid records are maintained according to University, state, professional, and federal standards and policies.

The financial aid representative, upon interview, verified compliance with and maintenance of compliance with the Higher Education Reauthorization Act Title IV requirements. A compliance review had been conducted a week prior to the Focused Visit based on the 2009 three-year default rate of 28.1%. Two-year default rates were 14.7%, 20.1%, and 19.7% for 2008, 2009, and 2010, respectively. According to the financial aid representative, there are plans to hire a default manager to assist in decreasing the default rate for the University.

Review of information intended to inform the public revealed consistency and accuracy of the information provided except in the number of hours required for program completion found in the University Catalog versus the nursing website and also in the NLNAC contact information. The Dean stated that the discrepancy in program completion hours of 124 in the Catalog versus 120 on the nursing website was the result of errors in the calculation of contact-to-credit-hour ratios for some courses. The hours have been corrected for future editions of the Catalog. The current University Catalog contains the wrong address for the NLNAC, and contact information is not listed in the Nursing Student Handbook or program information brochure. The Dean stated that she had sent information to those responsible for publication and display of the University Catalog, so the address would be corrected in the next edition. The Dean confirmed that the NLNAC contact information would also be placed in future publications of the Nursing Student Handbook and program information brochure.

The faculty and students verified that changes in policies, procedures, and program information are communicated through e-mail, written documents, or face-to-face in class or through student representatives. The students stated that if changes are communicated in a written document, the document is signed acknowledging receipt and returned for placement in their files.

The students confirmed that orientation to technology is available online through tutorials, and technical support is accessible when needed by e-mail, text, telephone, or in person. The Information Technology (IT) Department representative confirmed that the Department is accessible early morning to late evening Mondays through Thursdays and during regular business hours on Fridays. An e-mail work order system is utilized to provide technical support to students in a timely fashion as requested.

**Student Meeting:**
Sixteen (16) students, who were in the junior courses of the program, attended the student meeting. They expressed some concern about the Focused Visit and how it might affect the program’s accreditation status, noting that they still have a year before graduation. The students stated that they understand there are no faculty credentialed with a doctorate, and part-time faculty had been utilized who were not master’s-prepared. However, they expressed high regard for the faculty and stated that the faculty show knowledge, skill, and expertise in the classroom; this has made them feel that they are receiving a quality education. They reported that the new Dean is a strong student advocate and described the faculty as
open, approachable, and supportive of their success. Students stated that they are already seeing positive
changes in the program based on their input to the Dean.

The students indicated that they chose the program over others due to the high licensure examination pass
rates; the reputation in the hospitals and community of the program’s graduates; the high job placement
rates; and the reports from graduates that they were well-prepared, and the instructors were caring and
wanted them to succeed. They expressed that the program, for the most part, has lived up to the
reputation; they stated that they were pleased with the program.

The students reported that if they could make improvements, they would like more up-to-date technology
in the skills and simulation laboratories and would like not to have to travel so far for some of the clinical
experiences. However, they acknowledged that the Dean is working on grants to purchase more
simulation mannequins and equipment and as the program is in a rural area, it is necessary to travel to
have variety and depth in their clinical experiences.

Eleven (11) senior students attended a second student meeting. They expressed similar concerns about the
Focused Visit and the implications for the program’s accreditation status. They stated that they were
informed that the program is accredited, and the status would not change before their graduation. They
expressed the similar sentiments toward the faculty as the junior level students and described the faculty
as good teachers and role models, caring and concerned, and providers of quality education. The senior
students also complimented the new Dean and commented on the positive changes she has already made
in the program.

The students’ reasons for selecting the program over others were cited as its location, reputation,
curriculum, licensure examination pass rates, low faculty-to-student ratios, and the ability to obtain a
nursing baccalaureate degree. The students stated that the only changes that they would suggest for the
program would be in how some of the clinical and course assignments are calculated into their grades.
They reported that they would like to see a greater percentage of their grade come from some of the
clinical and course assignments that take a large amount of time to complete but count for only a small
portion or no portion of their final grades.

Summary:

Compliance:

The program is in compliance with the Standard with the following area needing development:

- Review and revise program documents (paper and electronic) to ensure information intended to
  inform the public is accurate, current, clear, and consistent, including the NLNAC information.
STANDARD 4
Curriculum

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.

4.1 The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.

4.2 The curriculum is developed by the faculty and regularly reviewed for rigor and currency.

4.3 The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.

4.4 The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.

4.5 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.

4.6 The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.

4.7 Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.

4.8 Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.

4.8.1 Student clinical experiences reflect current best practices and nationally established patient health and safety goals.

For nursing education units engaged in distance education, the additional criterion is applicable:

4.9 Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.

Commentary:

The curriculum incorporates the American Nurses Association (ANA) Standards of Clinical Nursing Practice, the ANA Code of Ethics for Nurses with Interpretive Statements, and the ANA Social Policy. The program’s philosophy is based on the major concepts of person, environment, health, professional nursing, and professional nursing education, which provides the foundation for the organizing framework, which is based on the Roy adaptation model. Strands, as termed by the philosophy, of critical thinking/nursing practice; research; nursing process, leadership; communication; and teaching/learning culminate into six (6) related student learning outcomes (SLOs). The faculty and students were able to discuss the curriculum and the strands related to the SLOs. However, the program outcomes are not clearly articulated and reflected in the curriculum.

A Curriculum Committee consisting of faculty and student representation is responsible for the total review of course evaluations, syllabi, evaluation tools, and all related data and associated components tied
to the curriculum such as the philosophy, mission, and organizing framework. The Committee reports to the faculty; makes suggestions for changes/revisions; and receives input from the faculty. The overall faculty vote to make the changes/revisions as recommended. The faculty minutes reflect review of the philosophy, mission, and organizing framework as well as review of course evaluations with decisions made for changes based on the evaluations. In the meeting with faculty, it was mentioned that Quality and Safety Education for Nurses (QSEN) and Institute of Medicine (IOM) recommendations were in the process of being incorporated into the curriculum.

Course syllabi are detailed and reflect course outcomes/objectives and clinical objectives, including rubrics for grading assignments, the grading scale, and clinical evaluation tools. There is no alignment of the SLOs to courses and unit outcomes noted in the syllabi. However, a link between student assignments and the SLOs are noted in the expected levels of achievement (ELAs) in the systematic plan for evaluation (SPE).

Although not addressed specifically in the SLOs or clinical evaluation tool, evidence of cultural, ethnic, and socially diverse concepts was noted in course syllabi as well as in the course and unit outcomes and assignments. The students confirmed incorporation of these concepts in courses through lecture, assignments, and clinical experiences.

A variety of evaluation methods are used to determine achievement of the course learning outcomes. These methods include standardized and faculty-generated tests, projects, presentations, care and teaching plans, process recordings, evidence-based practice summaries, and management journals.

According to the faculty, the course examinations are leveled from simple to complex as the curriculum progresses in complexity from the beginning to the end of the program. The faculty reported that they are in the process of mapping tests to the curriculum and the licensure examination test blueprint. All tests are peer-reviewed and evaluated to determine the quality of the questions. If 50% or more students in the course miss a test question, it is automatically reviewed by the faculty as a whole.

The clinical evaluation tools are based on performance of students in the roles as the professional and provider and coordinator of care. The tools are basically the same for each course and show little progression in knowledge and skill performance requirements from the beginning to the end of the curriculum.

The faculty reported participation in scholarly, professional renewal, and service activities that keep them abreast of the latest research and best practice standards regarding educational theory. The IT Department provides faculty with instruction and development for integration of technology into the teaching/learning process. The faculty cited the use of Internet, YouTube videos, gaming systems, and simulation as innovations to their teaching methodologies. There was no mention of interdisciplinary collaboration other than as a clinical component found in the clinical objectives and evaluation tools.

Program length inclusive of prerequisites is listed as 120 hours and nine (9) semesters for completion of the generic BSN program track. The RN-to-BSN and LPN-to-BSN program tracks can be completed in 120 hours and seven (7) semesters inclusive of prerequisites. Contact-to-credit ratios are 1:1, 1:2, and 1:3 for class, laboratory, and clinical, respectively.

The faculty verified that clinical environments provide a variety of clinical experiences that include medical-surgical, long-term care, pediatric, maternity, and psychiatric/mental and community healthcare settings. Thirty-one (31) current clinical contracts were reviewed onsite, which specified expectations for all parties involved and the protection of students. The students confirmed that practice facilities incorporate the use of electronic medical records and electronic medication administration. They also confirmed that they are oriented to the systems and utilize them in providing care to patients.
Classroom Observation:
Eleven (11) senior students were observed in NUR 452V Concepts and Nursing Care IV. The focus of the class was mood disorders; the class was presented in a lecture-style format using a PowerPoint presentation. A YouTube video clip of a person displaying a mood disorder was reviewed by the class. The students were asked to identify some of the characteristics associated with the disorder displayed by the person in the video. The students readily participated in the discussion and were engaged in the question-and-answer teaching technique utilized by the faculty member. The class atmosphere was informal; the faculty member walked around the class as she lectured and called on students by name to ask questions or share their thoughts with the class.

Summary:

Compliance:

The program is in compliance with the Standard with the following areas needing development:

- Ensure the curriculum incorporates clearly articulated program outcomes.
- Ensure the student learning outcomes are used to guide the curriculum, direct learning activities, and evaluate student progress.
- Implement strategies to ensure that evaluation methodologies reflect progression in expectations of the student, including the clinical evaluation tools.
STANDARD 5
Resources

Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

5.1 Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.

5.2 Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.

5.3 Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those engaged in alternative methods of delivery.

For nursing education units engaged in distance education, the additional criterion is applicable:

5.4 Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students and ensure that students achieve learning outcomes.

Commentary:

The University administrators confirmed that the nursing education unit receives a fair portion of the overall budget. State allocations have steadily declined in the past few years to all state-supported educational institutions; thus, appropriations to the University have decreased. The University Chancellor was attending a meeting in Little Rock at the time of the Focused Visit to advocate for University’s share of system funding for the next fiscal year. He was interviewed via conference call during the administrative meeting. One (1) of the reasons for difficulty in hiring and retaining qualified nursing faculty was cited by the administration as the inability to provide salaries commensurate with the professional market. Salaries for nursing faculty were reported to be among the highest for faculty employed by the University; this was confirmed by a review of the budget. Faculty salaries are higher for only two (2) other programs, forestry and business; forestry is considered the premier program that is unique to the University and is a nationally renowned program.

The nursing program is housed in one (1) building that includes classroom, laboratory, and office spaces. The building also provides office space for faculty in other disciplines as well as the University Personnel Department. The front entry into the building leads to the nursing reception area. A secretary is located in this area, which is connected to the Dean’s office and also connected to a conference room utilized for meetings. All full-time faculty members have private offices that contain a computer, telephone, desk and chair, and file cabinets. Offices are spacious enough to accommodate a couch, which was noted in one (1) of the offices viewed.

The first floor of the building contains a small student lounge with a refrigerator and microwave, a storage room that contains locked student file archives, and the SNA storage room. An SNA bulletin board and awards wall are located in close proximity to their storage room. A computer laboratory containing eight (8) work-stations is also on the first floor. The laboratory is accessible during business hours but can remain open later if needed by the students, but only with faculty consent. A classroom containing 30 individual desks, SMART technology for instruction, and Internet access is located on the first floor of the building as well. A vending area is located directly in front of the classroom.
The second floor contains a second classroom that accommodates 40 students with long tables and chairs. A smaller classroom that seats 20 students is also located on the floor; the classroom has a divider that can open the area to provide additional space. A medium-sized skills and simulation laboratory is also located on the second level. The laboratory is equipped with two (2) high-fidelity mannequins, two (2) medium-fidelity mannequins, and static mannequins. There are nine (9) bed areas. A mounted video camera provides taping of simulations that can be visualized by others while the scenario is in progress. There are plans to provide live video feeds to classrooms so that students can see and critique the simulations. The Dean also expressed plans to apply for grant funding of additional high-fidelity mannequins, such as NOELLE, to equip the laboratory. A storage room for equipment and supplies is also contained within the laboratory. There are tables with chairs, a TV, and two (2) computers in the area for students to access the learning resources.

The library consists of two (2) floors. The first floor contains 28 computer stations and eight (8) study stations. There is also a study area with seven (7) large tables and chairs. The second floor contains student study rooms and the reference section for nursing. There were several shelved titles with publication dates noted to be much older than five (5) years. The librarian confirmed that the nursing faculty provide input into the selection and deletion of the library learning resources.

There is a designated librarian who serves as a liaison to the nursing program. All students are oriented to the library and receive information on accessing its resources during their introductory course to nursing research. Students may also request one-on-one sessions as needed to aid in their research efforts. The library provides access to e-books and full-text journal articles through its nursing and healthcare databases; print nursing journals are also available. Online access to the library and its resources is available 24/7. The library is open early morning to late evening on Mondays through Thursdays and on Saturdays and Sundays in the late morning and afternoon hours. During the final examination period, library operating hours are extended until midnight.

**Summary:**

**Compliance:**

The program is in compliance with the Standard with the following area needing development:

- Ensure all learning resources are current and comprehensive, including those in the library.
STANDARD 6
Outcomes

Evaluation of student learning demonstrates that graduates have achieved identified competencies consistent with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.

6.1 The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.

6.2 Aggregated evaluation findings inform program decision-making and are used to maintain or improve student learning outcomes.

6.3 Evaluation findings are shared with communities of interest.

6.4 Graduates demonstrate achievement of competencies appropriate to role preparation.

6.5 The program demonstrates evidence of achievement in meeting the following program outcomes:
   - Performance on licensure exam
   - Program completion
   - Program satisfaction
   - Job placement

6.5.1 The licensure exam pass rates will be at or above the national mean.

6.5.2 Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, and program history.

6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers.

6.5.4 Job placement rates are addressed through quantified measures that reflect program demographics and history.

For nursing education units engaged in distance education, the additional criterion is applicable:

6.6 The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students.

Commentary:

The systematic plan for evaluation (SPE) includes assessment and evaluation of the learning outcomes. However, the plan as presented provides limited assessment and evaluation of the program outcomes and the NLNAC Standards and Criteria. According to the faculty, the plan was revised in 2012 and changed from being framed to reflect the NLNAC Standards and Criteria to an abbreviated format that addresses broad categories of the Standards and some of the Criteria. A program evaluation plan was reviewed that provided a month-by-month description of the SPE components that are evaluated by the various committees of the program. However, the plan is not clearly incorporated or reflected in the SPE.

Some of the expected levels of achievement (ELAs) for the various components of the plan are not measureable, and no data exist within the plan to inform decision-making or determine what actions are needed to maintain or improve the SLOs and program outcomes. The Dean and faculty reported that
program data and data analysis along with action plans are found in the annual reports submitted to the ABON. Review of these reports found that there were limited data provided for the analysis of the program outcomes. Evidence of ongoing assessment and analysis of the SLOs was confirmed by the reports as noted in the SPE.

The SPE does not indicate that data are aggregated, analyzed, and trended according to cohort and program option. There is also limited evidence of aggregation, analysis, and trending of data identified in the ABON annual reports.

Review of Advisory Board minutes verified mention of the licensure examination pass rates as being shared with the Board. However, no other mention of the program outcomes was noted in the minutes.

There is a lack of assessment of graduates’ achievement of competencies appropriate to role preparation within the SPE. Although the ELA for graduate and employer satisfaction addresses graduate skills competencies, the ELA does not specifically address the measures of the role competencies. In addition, it was noted that the data generated by these tools are based on very low response rates, so sufficiency of data could not be verified.

Licensure Examination Pass Rates
The ELA is licensure examination pass rates will equal to or be greater than the national pass rates. First-time pass rates for the program as recorded on the ABON website are 93.7%, 76%, and 96.4% for 2012, 2011, and 2010, respectively. The ELA was not met in 2011. The current SPE does not address the sharp decline in the licensure examination pass rate for 2011 or identify strategies for improvement that were implemented by the faculty to address the low rate.

Program Completion
The ELA for program completion is 80% of enrolled students graduate within two (2) years from admission into the nursing sequence. Data are not found in the SPE but were found in the 2011-2012 ABON Annual Assessment. According to the report, completion rates were 65%, 61%, and 66% for 2012, 2011, and 2010, respectively. The ELA was not met for the three (3) years reported.

Strategies for student retention are found in the ABON reports; these include engaging students in program and campus activities so students feel connected and stay in the program. There is also mention of a pilot retention plan to be implemented in the 2012-2013 academic year, which identifies at-risk students and provides remediation in the form of simulated learning activities. In the meeting with the administrators, it was noted that program completion is an area of concern, and they would like to see more students be successful in obtaining the degree. Students also commented that approximately one-half of the cohort of students that started the program will graduate.

Job Placement
The ELA for job placement is 90% of graduates seeking employment will be employed no later than September 1. No data exist in the plan or could be found in the ABON annual reports. The faculty stated that the data had not been collected in the past but were in the process of being collected for the 2012 graduates.

Graduate Satisfaction
The ELA for graduate satisfaction is 90% of graduates will be satisfied with skills and competencies one (1) year after entering the workforce. Data were not found for graduate satisfaction in the SPE or the ABON Annual Assessment. Only student satisfaction and senior satisfaction were addressed in the Annual Assessment.
Employer Satisfaction
The ELA for employer satisfaction is 100% of employers will be satisfied with graduate skills and competencies. According to the ABON Annual Assessment, a pilot survey was conducted in 2011. Thirteen (13) responses were received in 2011, and eight (8) were received in 2012. Response to three (3) areas of the survey was reported in the Annual Assessment. The three (3) areas included: provides safe and effective nursing care; has effective leadership and management skills; and demonstrates effective critical thinking and problem-solving skills. Percentages of responses to these areas ranging from unsatisfactory to outstanding were noted in the Annual Assessment. Interpretation of the response percentages and how they are aggregated to determine whether the ELA has been met is not provided in the Assessment.

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<thead>
<tr>
<th>Area</th>
<th>Expected Level of Achievement</th>
<th>Year</th>
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<tbody>
<tr>
<td>Licensure Exam Pass Rates</td>
<td>Equal to or greater than national pass rates.</td>
<td>93.7% Current Year</td>
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<td></td>
<td>76% One Year Previous</td>
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<td></td>
<td></td>
<td>96.4% Two Years Previous</td>
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<tr>
<td>Program Completion Rates</td>
<td>80% enrolled graduate within two (2) years from admission to the nursing sequence.</td>
<td>65% Current Year</td>
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<td></td>
<td>61% One Year Previous</td>
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<tr>
<td></td>
<td></td>
<td>66% Two Years Previous</td>
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<tr>
<td>Job Placement Rates</td>
<td>90% of graduates will be employed no later than 9/1.</td>
<td>No data available</td>
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<td>No data available</td>
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<tr>
<td>Graduate Satisfaction</td>
<td>90% of graduates will be satisfied with skills and competencies one (1) year after entering workforce.</td>
<td>No data available</td>
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</table>
Summary:

Compliance:

The program is not in compliance with the Standard as Criteria 6.1, 6.2, 6.4, and 6.5 are not met, as evidenced by:

- There is a lack of evidence that the systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the program outcomes of the nursing education unit and the NLNAC Standards.

- There is a lack of evidence that aggregated evaluation findings inform program decision-making and are used to maintain or improve the student learning outcomes.

- There is a lack of evidence that graduates demonstrate achievement of competencies appropriate to role preparation.

- There is a lack of evidence that the program demonstrates evidence of achievement in meeting the expected levels of achievement for program completion, satisfaction, and job placement.

- There is a lack of evidence that quantitative program satisfaction measures address graduates and their employers.

- There is a lack of evidence that job placement rates are addressed through quantified measures that reflect program demographics and history.

With the following areas needing development:

- Ensure evaluation findings are shared with the communities of interest.

- Ensure all expected levels of achievement are measureable for the components of the plan being addressed.

- Ensure data are collected, analyzed, and trended by cohort and program option before being aggregated as a whole.

- Implement strategies to increase employer satisfaction return rates to ensure data are sufficient to inform program decision-making.
III. RECOMMENDATION FOR ACCREDITATION STATUS:

Recommendation:

Affirm continuing accreditation following the onsite review conducted due to identified non-compliance with Standard 2 Faculty and Staff. Continue monitoring of Standard 2 Faculty and Staff and Standard 6 Outcomes.