Lakeview College of Nursing

Annual College Assessment Report

Academic Year 2011-2012

Prepared by:

Mindy Herrin, PhDc, RN
Director of Assessment
Table of Contents

Introduction ....................................................................................................................................... 4

Context Evaluation ............................................................................................................................ 7

Input Evaluation ............................................................................................................................... 15

Process Evaluation ............................................................................................................................ 23

Product Evaluation ............................................................................................................................ 28

Summary ........................................................................................................................................... 46

Signatures ......................................................................................................................................... 47

Appendices ....................................................................................................................................... 48

Appendix A: Listing of abbreviations, acronyms, and definitions .............................................. 48

Tables

TABLE I: PROGRAM EVALUATION MATRIX .............................................................................. 5
TABLE II: ELEMENTS OF THE EVALUATION PLAN ................................................................. 6
TABLE III: CONTEXT EVALUATION ............................................................................................ 7
TABLE IV: LCN ENROLLMENT RATES BY GENDER ................................................................. 11
TABLE V: SERVICE LEARNING ACTIVITIES ............................................................................ 13
TABLE VI: INPUT EVALUATION ................................................................................................. 15
TABLE VII: HUMAN RESOURCES ............................................................................................. 15
TABLE VIII: USE OF METI-MAN/METI-BABY BY CAMPUS .................................................. 17
TABLE IX: PROGRAM EVALUATION .......................................................................................... 23
TABLE X: MATRICULATION, ATTRITION, RETENTION, GRADUATION RATES ....................... 25
TABLE XI: LCN ENROLLMENT BY ETHNICITY ......................................................................... 27
TABLE XII: PROGRAM EVALUATION MATRIX-PRODUCT ........................................................ 28
TABLE XIII: ATI PROFICIENCY LEVELS ...................................................................................... 30
TABLE XIV: TEST PLAN PERFORMANCE SUMMARY: NCSBN REPORTING PERIOD ............ 40
TABLE XV: LCN RANK BASED ON % GRADUATES PASSING NCLEX .................................... 41
TABLE XVII: EBI EXIT ASSESSMENT RESULTS SPRING 2010 ................................................ 45

Charts and Figures

CHART I: LCN ENROLLMENT BY GENDER ................................................................................. 11
CHART II: ENROLLMENT, DEAN’S LIST STATUS ..................................................................... 12
CHART III: LCN ENROLLMENT BY ETHNICITY ......................................................................... 27
CHART IV: LCN NCLEX PASS RATE ............................................................................................ 32
CHART V: PSYCHOSOCIAL INTEGRITY/SAFETY/INFECTION CONTROL .................................. 33
CHART VI: BASIC CARE & COMFORT/HEALTH PROMOTION/MAINTANENCE ....................... 33
CHART VII: MANAGEMENT OF CARE & PHARMACOLOGICAL/PARENTERAL .................................................. 34
CHART VIII: PHYSIOLOGICAL ADAPTATION/REDUCTION OF RISK ............................................................ 34
CHART IX: NURSING PROCESS .................................................................................................................. 35
CHART X: HUMAN FUNCTIONING I ........................................................................................................... 36
CHART XI: HUMAN FUNCTIONING II ........................................................................................................ 36
CHART XII: HEALTH ALTERATIONS I ........................................................................................................ 37
CHART XIII: HEALTH ALTERATIONS II .................................................................................................... 37
CHART XIV: HEALTH ALTERATIONS III .................................................................................................... 38
CHART XV: CONTENT DIMENSION WELLNESS-ILLNESS CONTINUUM ................................................ 38
CHART XVI: CONTENT DIMENSION-STAGES OF MATURITY I ................................................................. 39
CHART XVII: CONTENT DIMENSION-STAGES OF MATURITY II ............................................................. 39
CHART XVIII: CONTENT DIMENSION-STRESS, ADAPTATION, COPING .................................................. 40
CHART XIX: TEST PLAN PERFORMANCE-EXPECTED PERCENTAGE CORRECT ..................................... 41
Introduction
The Lakeview College of Nursing (LCN) College Assessment Report (CAR) is a summary of the evaluation process outlined in the College Assessment Plan (CAP). This report reflects activity from August 1, 2011 through August 1, 2012. Copies of the annual CAR report are distributed to the LCN Board of Directors; members of the administrative team, faculty, and staff. Acronyms used in this report are summarized in Appendix A.

Context, Input, Process, and Product (CIPP) Model

LCN utilizes CIPP evaluation methods. The model allows for proactive evaluation for program improvement and retroactive evaluation to assess program quality. Evaluation is an ongoing, cyclical process.

- **Context evaluation** identifies the target population and assesses needs
- **Input evaluation** identifies and assesses system capabilities, alternate program strategies, and procedural designs for implementing strategies
- **Process evaluation** detects defects in the design, or implementation of the procedural design
- **Product evaluation** is an analysis of outcome correlated to objectives, context, input, and process information, allowing interpretation of results.

The CIPP model employs collection, organization, analysis, and reporting of information using the following criteria of adequacy:

- **Validity:** information meets needs of decision makers; right data collected.
- **Reliability:** information is reproducible
- **Timeliness:** information is available when needed
- **Pervasiveness:** information disseminated to appropriate decision makers
- **Credibility:** information is trusted by those who use it.

Accountability for Program Evaluation

Various persons are accountable for evaluation at LCN. At the curriculum level, faculty and students are involved in evaluation efforts. At the program level, accountability is mixed. The Director of Assessment coordinates overall program data collection and evaluation efforts including the Noel Levitz Student Satisfaction Survey, Educational Benchmark Inc. Exit Interview Surveys, Alumni-Employer Surveys, Assessment Technology Institute (ATI) testing at various curricular points. The Director of Assessment serves as a resource person for other evaluation efforts that occur through various college committees. The following committees provide leadership and coordination of evaluation efforts: Admissions, Administrative Team, Curriculum, Faculty committees. A *Program Evaluation Matrix*, based on the CIPP model, (see Table I) provides a visual depiction of criterion assessed, data sources, methods, accountable parties, and frequency of review.
**TABLE I: PROGRAM EVALUATION MATRIX**

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Data Source</th>
<th>Methods</th>
<th>Assigned Responsibility</th>
<th>Frequency of Review</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Context Component</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mission, Goals, &amp; Objectives</td>
<td>Faculty-Student Handbook</td>
<td>Describe community of interest, analyzing how it is congruent with the mission, philosophy, &amp; program goals.</td>
<td>Dean</td>
<td>Due for review 2015</td>
</tr>
<tr>
<td></td>
<td>Website</td>
<td></td>
<td>Faculty</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LCN strategic plan</td>
<td>Describe marketing plan that takes into account the target student population, technologies available, factors required to meet institutional goals.</td>
<td>Coordinator of Marketing, Recruiting</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LCN Board of Directors</td>
<td></td>
<td>Librarian</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Associate CEO</td>
<td></td>
</tr>
<tr>
<td><strong>Input Component</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial &amp; physical resources</td>
<td>Budget reports</td>
<td>Indicate how support for the development &amp; management of traditional &amp; electronic offerings is reflected in LCN budget.</td>
<td>Appropriate committee</td>
<td>Financial reports reviewed at board meetings.</td>
</tr>
<tr>
<td></td>
<td>LCN strategic plan</td>
<td></td>
<td>Librarian</td>
<td>Yearly budget requests reviewed every November by the Board of Directors.</td>
</tr>
<tr>
<td></td>
<td>LCN policies regarding initiation &amp; management of programs</td>
<td>Document the LCN policies concerning the establishment, organization, funding, &amp; management of traditional &amp; electronic offerings.</td>
<td>Associate CEO</td>
<td>Yearly Audit (March/April)</td>
</tr>
<tr>
<td></td>
<td>Committee minutes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Process Component</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curriculum</td>
<td>Organizing framework</td>
<td>Identify standards used to derive the curriculum</td>
<td>Curriculum Committee</td>
<td>Curriculum committee meets monthly and conducts biannual review of all courses.</td>
</tr>
<tr>
<td></td>
<td>Course approval forms</td>
<td>Explain how professional nursing standards &amp; guidelines for practice are used to make choices about curricular content</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>AACN &amp; specialty standards</td>
<td>Provide rationale for the logic &amp; sequence used in formulating the curriculum</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Biannual course review form</td>
<td>Describe how the curriculum supports the organizing framework &amp; reflects standards of the profession.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Curriculum Committee minutes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Product Component</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performance Surveys &amp; other data</td>
<td>Performance at end of program capstone</td>
<td>Describe student &amp; graduate performance measures that are used by the program to indicate success in</td>
<td>Dean</td>
<td>Annually at the end of Fall and</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Director of</td>
<td></td>
</tr>
</tbody>
</table>
sources reflect the achievement of graduates of traditional, electronically based, & hybrid programs & provide evidence of program effectiveness.

experiences
- Graduation rates
- Licensure rates
- Student, alumni, & employer surveys
- Data Action & Data Tracking Forms

meeting the program mission, goals, & objectives.

Describe how results in aggregate form are used to change or improve the program

Provide surveys & data forms

Document licensure pass rates
Document attrition & graduation rates

Assessment
Registrar
Spring semesters.


Information explaining the CAR, the CIPP model, and accountabilities for documenting and summarizing information have been previously described (see CAR 2010-2011). Accountable parties submit annual reports to the Director of Assessment. The overall goal is to capture information on an ongoing basis, dividing the gathering of information amongst appropriate staff and faculty. Reports are comprised of six chapters which contain sections written by person(s) accountable. Introduction and summary chapters are written by the Director of Assessment. The *Elements of the Evaluation Plan* is organized in Table II.

### TABLE II: ELEMENTS OF THE EVALUATION PLAN

<table>
<thead>
<tr>
<th>Context</th>
<th>Input</th>
<th>Process</th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizational structure</td>
<td>Human Resources:</td>
<td>Curriculum</td>
<td>Student</td>
</tr>
<tr>
<td>Mission, Goals</td>
<td>• Faculty</td>
<td>Students:</td>
<td>• Outcomes</td>
</tr>
<tr>
<td>Environmental Scan</td>
<td>• Students</td>
<td>• Admission</td>
<td>• Satisfaction</td>
</tr>
<tr>
<td>Bylaws</td>
<td>• Support staff</td>
<td>• Progression</td>
<td>Employer</td>
</tr>
<tr>
<td></td>
<td>Material Resources:</td>
<td>• Graduation</td>
<td>• Utilization</td>
</tr>
<tr>
<td></td>
<td>• Technology</td>
<td>• Faculty</td>
<td>• Satisfaction</td>
</tr>
<tr>
<td></td>
<td>• Library</td>
<td>• Students</td>
<td>Alumni</td>
</tr>
<tr>
<td></td>
<td>• Physical space</td>
<td>• Support staff</td>
<td>• Employment</td>
</tr>
<tr>
<td></td>
<td>• Students</td>
<td>Material Resources:</td>
<td>• Profile</td>
</tr>
<tr>
<td></td>
<td>• Fiscal resources</td>
<td>• Support systems</td>
<td>• Satisfaction</td>
</tr>
<tr>
<td></td>
<td>• Internal</td>
<td>• Students</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• External</td>
<td>• Graduation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Clinical resources</td>
<td>• Faculty</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Policies</td>
<td>• Support staff</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Data Action &amp; Data Tracking Forms</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Input from faculty, staff, and administration</td>
<td></td>
</tr>
</tbody>
</table>

Context Evaluation

This section addresses the outcomes (intended ends) of LCN. The College organizational structure, mission, goals, the environment, organizational bylaws, and relevant external factors provide direction for all LCN operations and are reviewed and approved in the fall semester of odd years by the Board of Directors, College Organization, and Faculty Organization. The mission, philosophy, goals, and objectives of the program reflect the expectations of the community of interest. Data sources used to measure Context Evaluation are: Faculty-Student handbooks, College website, LCN Strategic Plan, LCN Board of Directors. Methods include:

- Describing the community of interest, analyzing how it is congruent with the mission, philosophy, & program goals.
- Describing the marketing plan that takes into account the target student population, technologies available, factors required to meet institutional goals.

Table III summarizes criterion defining Context Evaluation, data sources, methods, persons responsible, and frequency of review for the 2011-12 CAR. Questions regarding the Context Evaluation section of this report may be directed to persons listed under Assigned Responsibility.

### TABLE III: CONTEXT EVALUATION

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Data Source</th>
<th>Methods</th>
<th>Assigned Responsibility</th>
<th>Frequency of Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Context Component</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mission, Goals, &amp; Objectives</td>
<td>Faculty-Student Handbook, Website, LCN Strategic Plan, LCN Board of Directors</td>
<td>• Describe community of interest, analyzing how it is congruent with the mission, philosophy, &amp; program goals. • Describe marketing plan that takes into account the target student population, technologies available, factors required to meet institutional goals.</td>
<td>• Dean • Faculty • Coordinator of Marketing, Recruiting • Librarian • Director of Enrollment • Associate CEO</td>
<td>Due for review 2015</td>
</tr>
</tbody>
</table>

Organizational Structure

The College Organizational Structure is a shared governance model, shared by the Board of Directors, College Organization, Faculty Organization, Student Government Association, and Alumni Association, with each entity operating under its own set of bylaws that support the concept of shared governance. This fosters an inclusive approach to decision making. Each entity will be described.

Board of Directors. The Board of Directors meet during the academic year to share information, approve College business, and to evaluate College activity and progress.
Progress: Review and approval of bylaws for the 2011-2012 academic year, by the LCN Board of Directors, is documented in meeting minutes. The Board of Directors reviewed and made revisions to the LCN Corporate Bylaws, (see meeting minutes).
Plan: The Board of Directors will review the LCN Corporate Bylaws and revise as needed Spring 2013.
Benchmark: agreement by ≥90% of board members in attendance.

College Organization. The College Organization meets during the academic year to share information, secure approval for College business, and to evaluate the effectiveness of the College Organization. College Organization activities are described in meeting minutes.

Progress: The college organization has not met as a whole during the last academic year.
Plan: The College Organization will actively participate in ongoing discussion and evaluation of the college’s overall effectiveness of achieving its purpose, goals, and objectives.
Benchmark: A strategic plan was revised and updated in 2012.

Faculty Organization. The Faculty Organization met every month during the academic year (except summer) to share information. Activities are described in meeting minutes.

Progress: Activity was documented in meeting minutes and approved, with ≥90% consensus.
Plan: continue to meet monthly during academic year.
Benchmark: agreement by ≥90% of faculty in attendance.

Mission and Goals

The LCN educational program is designed to meet the individual or diverse needs of men and women from a broad range of ages and backgrounds. A primary focus throughout the program is to promote caring attitudes and behaviors in the professional nurse. The curriculum is designed to provide a liberal and professional educational foundation essential for competent practice with ethical judgment, creative and critical thinking; for understanding a multicultural society within the context of individual needs and his/her environment; for utilizing nursing theory and research; for promoting personal and professional growth; and for enhancing motivation for continuing education.

The graduate will be prepared at the baccalaureate level in nursing to function as a generalist who is able to utilize the nursing process in caring for a diverse, multicultural society in a variety of healthcare settings. The major roles the graduate will be prepared to assume are: direct provider, planner/coordinator, manager, contributor to the nursing profession and health care team. The baccalaureate program is designed to prepare the graduate for professional nursing practice within the legal framework of the Illinois Nurse Practice Act.

Philosophy

Members of Lakeview College of Nursing faculty are committed to the following beliefs concerning: individuals, environment, health, nursing, nursing education, and caring.
**Individuals** have adaptive capabilities by which they attempt to manipulate the physical, biological, psychological, social, cultural, and spiritual resources of their internal and external environment to promote well-being. As open systems, individuals adapt and evolve in mutual interaction with other systems. Individuals relate within the context of self, family, group, community, and society; are endowed with unique qualities; and have a basic need for respect and recognition of personal worth. Individuals have the right to participate in decisions affecting their own wellness.

The **Environment** is composed of internal and external dimensions. The individual’s unique perceptions and response to this phenomenon distinguishes individuals from one another. Individuals interact with their environment in a dynamic process which requires adaptation. Interactions include regulating, promoting, modifying, maintaining, and monitoring the relationships between the individual and the environment.

**Health** is defined as a perceived state of well-being influenced by developmental and personal experience. The quality of health is contingent upon the individual’s ability to adapt to or change the internal or external environment. Well-being involves coping in ways which promote optimal growth and functioning. The individual can overcome, accept and adapt, or succumb to illness. When an individual requires assistance to support, restore, or enhance personal capabilities for living or meeting life crises, there is a legitimate need for nursing intervention.

**Nursing** is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human responses, and advocacy in the care of individuals, families, communities, and populations (ANA, 2008). Nursing is concerned with human experience, behavior, feelings, and the influence of social forces resulting from interaction with the internal and external environment. Nursing’s scope of practice encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles. The scope of practice is not limited to specific tasks, functions or responsibilities but includes direct care giving and evaluation of its impact, advocating for patients and for health, supervising and delegating to others, leading, managing, teaching, undertaking research and developing health policy for health care systems. (International Council of Nursing [http://www.icn.ch/abouticn.htm](http://www.icn.ch/abouticn.htm)).

As a discipline and a profession, nursing has a unique body of knowledge and provides a vital service for individuals and their environment. Nursing is accountable for nursing practice based on a Code of Ethics, Standards of Practice, and evidence based research. The professional nurse provides healthcare based on the problem-solving methodology of the nursing process; assumes an active role for the improvement of healthcare; and facilitates individuals, families, groups, and communities to meet their healthcare needs throughout the lifespan. Nursing activities are relational and contextual and may be structured or unstructured. These activities require clinical judgment skills; diagnostic
and monitoring skills; helping, coaching, teaching, counseling, and communication skills; and, understanding of cultural diversity. Nursing is concerned with coordinating family, group, community, and professional resources to augment healthcare of the individual (AACN, 2008).

Liberal Nursing Education is essential for the professional nurse to live a fulfilling life, act in public interest locally and globally, and contribute to the nursing profession throughout his or her career (AACN, 2008). Faculty respect and model the knowledge of a liberal education in classroom and clinical settings. The faculty believes in an atmosphere where self-awareness, critical thinking, creativity, and leadership are paramount. Each student has the opportunity to develop a professional identity and commitment to continued personal and professional growth.

Baccalaureate nursing education has its roots in the humanities and sciences as well as in nursing knowledge; combined, these serve as the basis for nursing practice. References to nursing theories and models enhance understanding of the phenomena of nursing, its nature and scope. Education is viewed as a lifelong experience and is the result of teaching and learning processes which occur in formal and informal settings. Career mobility maximizes the individual student’s potential for personal and professional growth and is facilitated through an educational process that reflects flexible programming for traditional and nontraditional students. The teaching and learning processes involve both the teacher and learner in a collaborative effort to identify learning needs and resources. The teacher facilitates the student’s search for knowledge by creating an atmosphere, which fosters critical thinking, self-awareness, creativity and leadership. The student shares an equal responsibility for his or her personal and professional growth by jointly planning goals, objectives, and evaluating outcomes. The quest for knowledge is the hallmark of the nursing profession through a commitment to research and continuing education.

Caring is the essence, the central unifying focus, that characterizes nursing. In caring the nurse demonstrates a commitment to the welfare of self, individuals, families, groups and communities in relationship with a diverse, multicultural population. Caring is viewed as attitudes, behaviors and values that take on a spiritual dimension. Caring behaviors are symbolic and have different meanings within and between different cultures.

Mission and Vision

Mission: Lakeview College of Nursing has a central focus to be a dynamic center of educational excellence where the entire College community works together with integrity and cares for others. The College will be forefront in health care trends and committed to improving nursing as a profession by preparing competent, safe, caring professional nurses for leadership roles in the health care community.

Vision: Lakeview College of Nursing aspires to be the college of choice for professional nursing in Illinois and recognized nationally for commitment to public well-being through nursing excellence.

Values
Adaptability, Caring, Excellence, Integrity, and Service are the College values. Each will be described.
Adaptability is the process of modifying behavior as indicated to changing circumstances as evidenced by flexibility and accommodation of changing, evolving and unpredictable situations involving self, individuals, families, groups, and communities. Adaptability is the ability of the nurse to respond quickly to unexpected events, utilize problem-solving, contribute to innovative solutions, and to think creatively. Adaptability is building a sense of community within and outside the College through understanding and appreciating a diverse, multicultural society.

Progress: Males, Minorities, and English as Second Language (ESL) students are represented in College enrollment. Students during the 2011-2012 year represented diverse gender, ethnic, and age groups. See Table IV and Chart I for enrollment by gender (data obtained from SonisWeb). Accurate data regarding ethnic background and ESL status has been difficult to obtain, as some students indicate “unknown” and/or or do not specify ESL status (see Product Evaluation section and Addendum for more information on ESL status at LCN).

<table>
<thead>
<tr>
<th>TABLE IV: LCN ENROLLMENT RATES BY GENDER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>SP 2009</td>
</tr>
<tr>
<td>Total Enrollment</td>
</tr>
<tr>
<td>% Male</td>
</tr>
<tr>
<td>% Female</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHART I: LCN ENROLLMENT RATES BY GENDER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

Caring as a central paradigm of nursing enables one to transcend self and serve all people. Caring considers the holistic nature of people and the complexity of the human condition. In caring, the nurse demonstrates a commitment to the welfare of self, individuals, families, groups and communities. Caring is viewed as attitudes, behaviors and values that take on a spiritual dimension. Attitudes and values that send a message of support, empathy, genuineness, and commitment to another are integral to this concept.
Excellence is the quality of being superior or very good at what one does and applying that quality in all actions to generate optimal and recognizable outcomes. Excellence is represented through implementation of quality improvement initiatives, purposeful management of resources, promotion of lifelong learning, and fostering care delivery models that raise the level of nursing practice.

Progress: Excellence is reflected in terms of the achievement of academic excellence in the quality of clinical performance and outcomes. Academic excellence is recognized by LCN in the form of honors. A student must earn a GPA of ≥ 3.6 on a 4.0 scale to qualify to be on the Dean’s List. Retrospective data indicated some students on the Dean’s List were failing NCLEX exams on first attempt.

Plan: The College will continue to monitor excellence as evidenced by student GPA, NCLEX pass rate, and Percent of Students on Dean’s List.

In fall, 2008 LCN implemented the ATI Plan for Success. At the end of every semester ATI Content Mastery tests are taken by students to determine their readiness to progress in the nursing program, as well as to determine NCLEX-RN Success.

Progress: The NCLEX pass rate for the students taking the NCLEX the first time for 2011-2012 was 88%.

Plan: Continue to implement the NCLEX-RN Plan for Success

Benchmark: All students will pass the content mastery exams with a Level 2 or 3.

Integrity is the commitment, even in the face of adversity, to five fundamental values: honesty, trust, fairness, respect, and responsibility. Integrity demonstrates trustworthiness by being honest, dependable, and reliable along with the ability to apply ethical standards of the profession.
Progress: Student integrity in classroom and clinical setting is evaluated by compliance with the College Honor Code Policy and clinical practice standards. The Honor Code Policy requires students to sign a written pledge upon admission to the nursing program to the effect that their work will be done honestly.

Plan: Faculty Organization will annually review and/or revise policies and guidelines for examination administration. The Turn-It-In Plagiarism Prevention Module (www.Turnitin.com) is used to assist faculty in assessing plagiarism on written papers. The Academic Integrity Policy, which defines plagiarism, is outlined in the Faculty-Student Handbook. Turn-It-In training videos and written materials are available for new faculty and students (see LCN website). Expectations and use of this service is outlined in course syllabi.

Benchmark: There will be no violations of the College Honor Code Policy.

Service is the process of selfless giving to others that provides benefit to individuals, families, groups, community, and society. Central to this concept is reflection on the experience which offers the opportunity to discover which practices can influence particular outcomes.

Progress: Faculty and students are encouraged to provide service to the community within the context of nursing courses or as volunteers. Courses which provide Service Learning in the 2011-2012 academic year were:

TABLE V: SERVICE LEARNING ACTIVITIES

<table>
<thead>
<tr>
<th>Course</th>
<th>Danville Campus</th>
<th>Charleston Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>N404</td>
<td>Walk To The Moon, Breakfast in the Park, Projects for the Halo Project, and multiple teaching projects within District 118.</td>
<td>EIU Health Fair, Wooly Worm Festival, Blood Drive</td>
</tr>
<tr>
<td>N405</td>
<td>QI/Change Projects</td>
<td>QI/Change Projects</td>
</tr>
<tr>
<td>N408</td>
<td>Legacy Projects: Be The Match, Walk In Their Shoes, Say Cheese-Mobile Dental Clinic, Get Fit, Project Linus, Sexual Assault Awareness, No One Dies Alone</td>
<td>Legacy Projects: Paws for A Cause, T.H.O.R.N., Walk for Alzheimer’s, Give a Hoot About Leukemia &amp; Lymphoma, Give Animals a Second Chance, Take a Stand Against Bullying, The Helping Hand, &amp; Nursing Our Nurses</td>
</tr>
</tbody>
</table>

Plan: for both campuses to be involved in Service Learning Projects

Benchmark: no designated benchmark at this time
Environmental Scan

Safety and Security. The Associate CEO monitors and reports security and safety incidents and/or issues.

**Progress:** No incidents reported for 2011-2012. A new camera was installed at the south exit in the hallway at the Danville campus.

**Plan:** Continue to monitor the security and safety of the College. Stay in compliance with state and federal guidelines.

**Benchmark:** Remain in compliance with state and federal guidelines and have no reported incidents of breaches in safety or security.

Bylaws: Updated annually and published in Faculty Handbook.

Marketing

The goal of the College marketing efforts is to reach the greatest number of people through a variety of methods in order to increase enrollment and increase awareness of Lakeview College of Nursing.

**Progress:** The marketing priorities remain in the following ranking: 1. Basic BSN program, 2. LPN-BSN track, and 3. RN-BSN track. The target market for the program/tracks remains as follows: 1. College Students, 2. LPNs, RNs, and CNAs, and 3. High School Students.

**Plan:** The marketing plan utilizes a variety of approaches to share the mission of Lakeview. Face-to-face events as well as direct mail, telemarketing, e-mail, web, and other technologies are utilized to meet institutional goals.

**Benchmark:** Continue to meet the credit hours budgeted each semester.
**Input Evaluation**

Input evaluation examines the adequacy of all LCN resources, identifying barriers and constraints to the provision of appropriate and adequate resources for the college to be effective in achieving its goals and objectives. Budget & policy statements reflect the LCN commitment to the ongoing management of traditional and electronic program offerings. Data sources for measuring *Input Evaluation* include: budget reports, LCN Strategic Plan, LCN policies regarding initiation and management of programs, and committee minutes.

Table IX summarizes criterion defining *Input Evaluation*, data sources, methods, persons responsible, and frequency of review for the 2011-12 CAR. Questions regarding the *Input Evaluation* section of this report may be directed to persons listed under *Assigned Responsibility*.

<table>
<thead>
<tr>
<th>TABLE VI: INPUT EVALUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Lakeview College of Nursing Program Evaluation Matrix</strong></td>
</tr>
<tr>
<td><strong>Criterion</strong></td>
</tr>
<tr>
<td>Input Component Financial &amp; physical resources</td>
</tr>
<tr>
<td>Budget &amp; policy statements reflect the LCN commitment to the ongoing management of traditional and electronically based program offerings.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

The information reported was obtained from the *Human Resources Reports* prepared by the Associate CEO. The fulltime faculty number does not include the LCN Dean; some faculty members teach on both campuses.

Table X depicts staffing Fall 2011 through Summer 2012 for LCN-Danville (DAN) and LCN-Charleston (CHA) campuses:

<table>
<thead>
<tr>
<th>TABLE VII:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HUMAN RESOURCES: FACULTY, STAFF, ADMINISTRATION</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Campus</th>
<th>Term</th>
<th>Full Time</th>
<th>Temp. Full Time</th>
<th>Part Time</th>
<th>Teaching &amp; Lab Assistants</th>
<th>Full Time</th>
<th>Part Time</th>
<th>Total Employees</th>
<th>Total Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAN</td>
<td>Fa2011</td>
<td>10</td>
<td>2</td>
<td>12</td>
<td>2</td>
<td>9</td>
<td>2</td>
<td>37</td>
<td>26</td>
</tr>
<tr>
<td>CHA</td>
<td>Fa2011</td>
<td>10</td>
<td>3</td>
<td>9</td>
<td>6</td>
<td>0</td>
<td>1</td>
<td>29</td>
<td>28</td>
</tr>
</tbody>
</table>
**Human Resources:** Faculty and Staff are employed to accomplish the various administrative elements of the college’s work, and are adequately prepared for their assigned duties. There is no specific benchmark with this CAP element. If it is determined that additional personnel are to be hired, the CEO and Associate CEO must approve and propose to the Board of Directors (BOD) for final approval. Interviews are arranged with an interview committee and a decision is forwarded to the Dean of Nursing, the CEO, and Associate CEO. New personnel are required to participate in a background check, sexual harassment training, and an orientation session.

**Progress:** Faculty inservices were held August 2011 and January 2012. The benchmark of student-faculty ratio in clinical settings of 1:10 was met, with most clinical groups have a 1:8 ratio as desired by the Illinois State Board of Nursing. The benchmark to have faculty expertise match classroom and/or clinical assignment was met.

**Plan:** Monitor workflow and continue to ensure that appropriate and adequate numbers of faculty are hired to meet the continuously increasing student enrollment.

**Plan a staff retreat day each academic year.**

**Benchmarks:**
1) Student-faculty ratio in clinical settings of 1:10
2) Faculty expertise matches classroom/clinical assignments.

**Material Resources (Library, Information and Instructional Technology):** Staff consists of one full-time librarian (since January 2006). The LCN Librarian is also responsible for oversight of the LCN Computer Labs and Technology.

**Progress:** The Library offers a 28-station computer lab with printing capability for students on both the Danville and Charleston campuses, availability of a computer for every faculty member office at Danville and Charleston campuses. There are 4 computers and printing capability available in the student lounge on the Charleston campus for student use. **Scholar360** serves as the electronic platform for delivery of online and hybrid courses. **NoodleTools**, a bibliographic software program, is available to students. Ongoing **SonisWeb** training (i.e., accessing student records, schedules, financial aid records) is scheduled as needed. All LCN classrooms are equipped with instructional computers, LCD and digital overhead projection capability, DVD/VCR players. The **Einstein Clicker System** is available for faculty to utilize on both campuses; software is installed on all faculty and classroom computers. Additional software is available to students and faculty, including: **SPSS** statistical software, **Professor Nightingale Study Tips**, and **NCLEX 3500software**.

**Plan:** To increase in journal, textbook, and CD/video inventory assessment, replacement, and planned purchases for the library as the budget permits.

**Benchmark:** To offer >90% of library services of similar sized private, freestanding institutions.

**College Literature:** The college website is reviewed, revised, and updated on an ongoing basis for appropriateness, adequacy, and accuracy. Administrators, staff members, and faculty contribute to this process. Staff members proof the **Student and College Handbooks** to detect errors prior to publication.
Other: LCN began using simulated learning models in academic year 2007-08.

**Progress:** Spring 2010 a faculty member on each campus receiving 4 contact hours or 96 clock hours for working with faculty and students in simulated situations. Approximately 3 faculty members per campus have received Meti training. The 2011-2012 academic year found additional courses utilizing METI-man.

**Plan:** to integrate METI MAN training as a part of faculty inservice week. Increase usage in LCN nursing courses, to maintain a log to track Meti-lab activity/use, and to develop policies and procedures for scheduling lab time.

**Benchmark:** Both campuses used the 96 clock hours for METI-Man experiences in Spring, 2010. Baby Meti was used on both campuses approximately 24 clock hours each (total=48 hours). A calendar for faculty to sign up for the use of METI-Man was created due to the increased usage of METI-Man in more courses.

**TABLE VII: USE OF METI-MAN/METI-BABY BY CAMPUS**

<table>
<thead>
<tr>
<th>Simulator</th>
<th>Danville Campus</th>
<th>Charleston Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>METI-Man</td>
<td>N210: Foundations of Nursing</td>
<td>N210: Foundations of Nursing</td>
</tr>
<tr>
<td></td>
<td>N201: Health Assessment</td>
<td>N201: Health Assessment</td>
</tr>
<tr>
<td></td>
<td>N301: Nursing Care of the Adult Client</td>
<td>N301: Nursing Care of the Adult Client</td>
</tr>
<tr>
<td></td>
<td>N305: Nursing Care of the Childbearing Family</td>
<td>N309: Nursing Care of the Gerontological Client</td>
</tr>
<tr>
<td></td>
<td>N403: Nursing Care of the Client with Complex Health Situations. N405: Leadership &amp; Management</td>
<td>N403: Nursing Care of the Client with Complex Health Situations.</td>
</tr>
<tr>
<td>METI-Baby</td>
<td>N308: Nursing Care of the Childrearing Family</td>
<td>N308: Nursing Care of the Childrearing Family</td>
</tr>
</tbody>
</table>

**Physical Space: Danville Campus Instructional Facilities and Resources.**

**Progress:** no changes reported since 2010-2011 CAR.

**Plan:** Continue to seek and use student input regarding improvements needed in campus instructional facilities and resources on both campuses.

**Benchmark:** Continued assessment of physical space every spring semester, annually.
**Fiscal Resources**

**Progress:** Required reports regarding students admitted, enrolled, and graduated were prepared by the Director of Enrollment/Registrar and submitted to the Integrated Postsecondary Education Data System (IPEDS) and the Illinois Board of Higher Education (IBHE). See Process Evaluation section of this report for more information on IPEDS. For the 2011-12 reporting year, the College established a number for **Total Credit Hours** as the benchmark for semester enrollment based upon the LCN-FY Budget, to depict a more meaningful benchmark.

**Plan:** **Total Credit Hours** is the basis for the College’s fiscal year budget, therefore, it was proposed to use this figure as a measure for meeting enrollment goals. As a long-range discussion item, annual enrollment goal (long range) is 315-320 students or 9,800-10,000 credit hours.

**Benchmark:** Benchmark for completion and submission of all Federal and State reports was met.

**Financial Aid** is available to LCN students from a variety of sources.

**Progress:** The Student Financial Aid (SFA) office has seen an increase in applicants and earlier notification of the application results (the ISIR). This progress in part is due to ongoing communication with current and prospective students by the SFA office regarding the financial aid process, student aid programs and internal policies and procedures. Students have earlier financial aid “packaging” and “secured” funding in order to plan and prepare for their academic school year and thus better prepared for successful completion.

**Plan:** Staff will continue attending training opportunities offered by the Illinois Association of Student Financial Aid Administrators and the Department of Education via on-site, Webinars, and other online offerings. Staff will prepare reports as needed for federal and state scheduled program reviews in upcoming academic year. Staff will continue to seek information about scholarship opportunities; current Federal, State, and Veteran’s Educational benefit programs as well as opportunities within the community to maximize funding possibilities for students.

**Benchmark:** Results of internal fiscal year audits, Illinois State audit, Veteran’s Administration audit, all Federal-State program standard review, and Institutional criteria for student financial aid were met. The Benchmark for accurate audits with no institutional liability and increasing volume of students who complete the FAFSA as well as increase funding sources were met.

**Financial Plan:** Increased student enrollment has enabled the college to have a balanced budget for the FY2011. Benchmark of a balanced budget has been met.

**Progress:** No changes have been reported since the 2010-11 CAR.

**Plan:** Continue to monitor the FY budget and use input from faculty and staff in all future budget preparation.
Benchmark: Continue with a balanced budget.

Compensation and Benefits: The Associate CEO prepares a salary comparison sheet to guide the update of salaries. Benefits offered to all full time faculty, staff, and administrators include: Long Term Disability insurance, Life Insurance, 80/20% pay on health and dental insurance, and a retirement package (up to 5% employee match).

Progress: The Board of Directors approved the retirement match to increase to 5% effective January 1, 2011. Additionally, a salary increase of 3.5%.
Plan: During each fiscal year during the budget preparation process, current compensation/benefits for faculty and staff are reviewed.
Benchmark: Benchmark of “in accordance with similar institutions” was met.

Grants:

Progress: FY2011 (grant period July 13, 2009 through July 12, 2014): LCN applied for and received a capital grant, Independent Colleges Capital Program (ICCAP), through Illinois Board of Higher Education to build on to the Charleston Campus. The ICCAP provides private not-for-profit colleges and universities in Illinois with financial assistance for capital projects (Public Act 96-37, Section 25). The multi-year grant used a distribution formula based entirely on the fall 2008 student enrollment numbers. LCN received $518,455.00 for Phase II of the Charleston building project. Phase II of the project will include the addition of a nursing skills lab with a specialized section for the college’s human patient simulator, a classroom, faculty offices, and a conference/reference area.
Plan: pursue grant funding for special college needs and projects as opportunities arise.
Benchmark: Reviewed spring semester, annually. Continue to assess grant opportunities.

Off Campus Instructional Facilities and Resources (Clinical) reflect adequacy to meet and achieve course objectives for students on both campuses.

Progress: Contracts with all clinical facilities meet the Health Information Portability and Accountability Act (HIPPA) privacy requirements. Ongoing evaluation from both faculty and students of the clinical facilities is both formal and informal. A clinical site evaluation tool is used and will continue to be used each semester. This tool enables faculty to make changes in facilities and clinical resources as needed.
Plan: Continue to evaluate adequacy of clinical facilities and resources each semester.

Charleston Campus Instructional Facilities and Resources

Progress: Classroom space is utilized at Sarah Bush Lincoln Health Systems (SBLHS) Educational Center and Eastern Illinois University (EIU). All classrooms (Charleston, EIU, and SBLHS) are “smart classrooms,” enabling faculty to have ready access to computers and printers, videos, CD/DVD equipment. The EIU bookstore carries LCN student textbooks, uniforms, and materials. The building addition on the Charleston campus created an
additional classroom/computer lab. Ongoing assessment of cash flow, budget, and the receipt of state grant funds determine renovations or expansions on the Charleston campus.  

**Plan:** Continue to evaluate the effectiveness of facilities and resources (facility and human) for the Charleston campus students and faculty each semester.  

**Benchmark:** Equipment updated when necessary and as the budget allows.  

*Offices and computer availability* for faculty are adequate for those on Danville and Charleston campus.  

**Progress:** New computers have been purchased on a rotating basis to replace outdated computers in both the computer lab and faculty offices. Construction in the old building created one additional office, shifting the administrative team into the newly constructed area and opened an office for another full time faculty member.  

**Plan:** The CEO, Dean, and Associate CEO will continue to assess and formulate plans to address the college’s needs, specifically for additional classroom space on Danville campus and Charleston campus.  

**Benchmark:** Assess the cash flow and budget to allow for any renovations or expansion on either campus. Continue to assess the need for purchase of new computers as budgeted each fiscal year.  

*Campus facilities maintenance components* are scheduled. Housekeeping/janitorial services are scheduled to maintain the daily, weekly, and overall cleanliness of campus facilities. Appropriate personnel/agencies perform the annual boiler inspection, elevator inspections, pest control, fire extinguishers, HVAC, copy machines, and security alarm system. Appropriate service contracts are planned for and purchased each year. Contracted grounds personnel maintain the upkeep of the College exterior grounds.  

**Progress:** Inspections are annual, or as required.  

**Plan:** The Associate CEO developed criteria by which to measure the “unforeseen maintenance expenses” element.  

**Benchmark:** Findings from inspection reports are completed within the timeline stated. The “Preventative Maintenance” budget line item is monitored and does not exceed budgeted amount for the fiscal year.  

*Support Systems:* At present time, student concerns/issues are heard and addressed by the Dean or appropriate committee/personnel on an ongoing basis. A suggestion box is available at each campus; suggestions are reviewed at Administrative Team meetings.  

**Progress:** Students can place suggestions in a suggestion box located on each campus. The suggestion boxes are checked and are reported to the appropriate personnel/department.  

**Plan:** continue to check Suggestion Box at each campus, one time per month and a log of the suggestions will be documented.  

**Benchmark:** responds to suggestions in subsequent 30 day period.
Legislative/Legal Resources. The College Board of Directors, Faculty, Staff, and Students are apprised, by legal counsel, of requirements impacting the college. The Board of Directors and/or CEO apprises State Legislators of college needs and/or concerns regarding pending legislation.

**Progress:** There was one case filed against LCN during the last academic year. This student filed with the Department of Human Rights.

**Plan:** Continue to monitor and update policies, procedures, and practices to assure compliance with all local, state, and federal laws. Information will be reported in annual CAR.

**Benchmark:** No litigation pending against LCN.

Historical Resources. The College and the Lakeview School of Nursing Alumni Organization archive the historical resources of the college. The Alumni Organization office is located on the second floor of the college.

**Progress:** The Alumni Organization continues to work on an ongoing basis to organize the items that come into the Alumni Office. Lakeview School of Nursing graduating class composites were updated to include classes from 1921, 1922, 1937-1989. Pictures of the first male graduate and first black American graduate have been added to the pictures. The first floor south and west hall and have been designated as Alumni Hall for Lakeview School of Nursing memorabilia. Student uniforms from 1894 and 1988 are on display in the entryway into the building.

**Plan:** to continue to encourage alumni to be involved in archiving historical resources; items will be accessible, as appropriate.

**Benchmark:** no benchmark established for this criteria.

Policies. College policies are reviewed and revised on an ongoing basis by the Administrative Team. A policy revision form serves to document requests and changes made. The Faculty and Student Handbook/Catalog are revised on an annual basis to incorporate any changes in the college policies. College Policies are in compliance with Family Education Right to Privacy Act (FERPA), Gramm-Leach-Bliley Act (GLB), and the Americans with Disabilities Act (ADA).

Equal Employment Opportunity (EEO) regulations. Former and current versions of policies and Student Handbook/Catalog are maintained by the Marketing and Recruitment Dept.

**Progress:** Policies were reviewed/revised in Administrative Team Meetings throughout the 2011-2012 calendar year.

**Plan:** Continue ongoing review/revision of policies.

**Benchmark:** The benchmark requiring 100% compliance with the law and regulations was met.

Faculty Policies are located in the LCN Faculty Handbook and the College Policy Manual. Faculty members review and revise policies as needed.

**Progress:** Policies were reviewed, revised on an ongoing basis 2011-2012 academic year.
**Plan:** Continue ongoing review/updating of staff policies.

**Benchmark:** The benchmark requiring 100% compliance with the law and regulations was met.

*Grievance Policies* are located in the *LCN Faculty Handbook* and the *College Policy Manual*. Faculty members review and revise policies as needed.

**Progress:** The Grievance policy for Faculty/Staff was reviewed and updated Fall 2009.

**Plan:** Continue ongoing review and revision of staff policies.

**Benchmark:** The benchmark requiring 100% compliance with the law and regulations was met.

*Staff Policies* are reviewed, revised, and/or eliminated as needed by the Administrative Team on an ongoing process.

**Progress:** Policy manual review began in Spring 2010 and is ongoing.

**Plan:** Continue ongoing review and revision of staff policies. Work with Faculty during the revision of appropriate policies.

**Benchmark:** The benchmark requiring 100% compliance with the law and regulations was met.

*Student Policies* are evaluated and updated on an ongoing basis by the Administrative Team and various college committees. All student policies are printed in the *Student Handbook*, which is reviewed, and revised as needed each year. Student Polices are in compliance with the Family Education Right to Privacy Act (FERPA), Gramm-Leach-Bliley Act (GLB), and the Americans with Disabilities Act (ADA).

**Progress:** The *Student Handbook* is available online through the LCN website.

**Plan:** Continue ongoing review and revision of student policies. Work with Faculty, as appropriate, during the revision of policies.

**Benchmark:** The benchmark requiring 100% compliance with the law and regulations was met.
**Process Evaluation**

Process evaluation examines the adequacy of the College Educational processes. Process evaluation involves the review of faculty-written evaluations of own courses that are then reviewed by the Curriculum Committee. Curriculum is based on a sequentially & logically organized plan which is internally consistent & reflects standards for professional nursing.

Table XII summarizes criterion defining *Process Evaluation*, data sources, methods, persons responsible, and frequency of review for the 2011-12 CAR. Questions regarding the *Process Evaluation* section of this report may be directed to persons listed under *Assigned Responsibility*.

**TABLE IX: PROGRAM EVALUATION**

<table>
<thead>
<tr>
<th>Process Component</th>
<th>Criterion</th>
<th>Data Source</th>
<th>Methods</th>
<th>Assigned Responsibility</th>
<th>Frequency of Review</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Curriculum</strong></td>
<td>Organizing framework</td>
<td></td>
<td>Identify standards used to derive the curriculum</td>
<td>Curriculum Committee</td>
<td>Every 2 years &amp; as the program is modified.</td>
</tr>
<tr>
<td></td>
<td>Course approval forms</td>
<td></td>
<td>Explain how professional nursing standards &amp; guidelines for practice are used to make choices about curricular content</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>AACN &amp; specialty standards</td>
<td></td>
<td>Provide rationale for the logic &amp; sequence used in formulating the curriculum</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Biannual course review form</td>
<td></td>
<td>Describe how the curriculum supports the organizing framework &amp; reflects standards of the profession.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Curriculum Committee minutes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Curriculum Evaluation**

The LCN Curriculum Committee formally evaluates the curriculum every two years. Goals of the Curriculum committee are to:

- Identify standards used to derive the curriculum
- Explain how professional nursing standards & guidelines for practice are used to make choices about curricular content
- Provide rationale for the logic & sequence used in formulating the curriculum
- Describe how the curriculum supports the organizing framework & reflects standards of the profession.

Committee activity is captured in meeting minutes. Curriculum evaluation began Spring 2007. A summary of 2011-12 activity, provided by the Curriculum Committee Chair follows:
The RN/BSN Completion Program is up and running. The committee has received feedback from the completion students. The recommendations have been taken into consideration and changes have been made to incorporate into the curriculum. The curriculum committee is working on curriculum review and revision with implementation of the revised curriculum to take place in 2013. Along with the curriculum, nursing theorist will be incorporated into conceptual framework. The top theorist/theories are: Novice to Expert, Watson, Pender, & Orlando & Roy. A community has been established on Edvance to increase communication among the committee members. The curriculum revision will be introduced to faculty in August 2012. A CNA program has been designed and approved by the State of Illinois. The program will be offered in the Summer 2012.

Respectfully submitted,
Charlotte S. Connerton, RN, MSN, Curriculum Chairperson
September 6, 2012

Student Admission, Progression, & Graduation

The LCN Admissions committee meets to discuss and evaluate admissions criteria. LCN uses the HESI A2 as a scholastic aptitude assessment as one component of the selection process for admitting students. Screening qualified candidates for college admission is crucial for best matching of available resources to individuals with a minimum level of ability relevant to program study requirements. The goal is to predict those candidates with the highest likelihood of academic success in a future area of study.

The HESI A2 consists of seven academic exams, as well as a personality profile that helps identify the individual applicant’s learning style.

- **ENGLISH**
  - Reading Comprehension
  - Vocabulary and General Knowledge
  - Grammar
- **MATH**
  - Basic Math Skills
- **SCIENCE**
  - Biology
  - Chemistry
  - Anatomy & Physiology
- **PERSONALITY STYLE**
  - Personality Profile
  - Learning Style
Integrated Post-Secondary Data System (IPEDS) Reports can be obtained from the Director of Enrollment/Registrar. The completion of all IPEDS surveys is mandatory for all institutions that participate or are applicants for participation in any Federal financial assistance program authorized by Title IV of the Higher Education Act of 1965, as amended; the completion of the surveys is mandated by 20 U.S.C. 1094, Section 487(a)(17) (NCES, 2008). Matriculation, attrition, retention, and graduation rates are depicted in Table XIII.

### TABLE X: MATRICULATION, ATTRITION, RETENTION, & GRADUATION RATES

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Matriculates</td>
<td>45</td>
<td>54</td>
<td>103</td>
<td>138</td>
<td>130</td>
<td>147</td>
<td>149</td>
<td>138</td>
<td>155</td>
<td>137</td>
</tr>
<tr>
<td>Attrition</td>
<td>10 (22%)</td>
<td>7 (13%)</td>
<td>19 (18%)</td>
<td>10 (7%)</td>
<td>17 (13%)</td>
<td>26 (18%)</td>
<td>24 (16%)</td>
<td>21 (15%)</td>
<td>32* (21%)</td>
<td>18 (13%)</td>
</tr>
<tr>
<td>Retention</td>
<td>35 (78%)</td>
<td>47 (87%)</td>
<td>84 (82%)</td>
<td>128 (93%)</td>
<td>113 (87%)</td>
<td>121 (82%)</td>
<td>125 (84%)</td>
<td>117 (85%)</td>
<td>123 (79%)</td>
<td>119 (87%)</td>
</tr>
<tr>
<td>Graduation</td>
<td>35 (78%)</td>
<td>47 (87%)</td>
<td>84 (82%)</td>
<td>128 (93%)</td>
<td>113 (87%)</td>
<td>120 (81%)</td>
<td>62 (41%)</td>
<td>116 (84%)</td>
<td>118 (76%)*</td>
<td>27 (20%)*</td>
</tr>
</tbody>
</table>

*This number is reflective of the 2010-2011 admission class and will be updated.

**Data Source:** Office of Registrar

**Progress:** Admissions Committee continues to use an Admissions Rating Scale (developed in 2007). Admission GPA remains 2.5.

**Plan:** continue to monitor progression and retention via IPEDs reporting.

**Benchmark:** Benchmark of ≥ 85% retention was not met. Retention for 2011-2012 was 80%.

**Faculty & Staff Development.** The Professional Development Committee organizes faculty development activities according to needs expressed via needs assessment.

**Progress:** The Lakeview College of Nursing Professional Development Committee encourages faculty members to participate in a lifelong learning experience. As a result, faculty members attend scheduled meetings which include teaching in-services to improve their skills in education, communication and interpersonal relationships with students and each other. Faculty members have an obligation to attend these opportunities for professional growth. They are also encouraged to seek out additional experiences that will improve the quality of teaching they provide to Lakeview students.

**Plan:** The committee works with the Dean to provide program(s) during faculty retreat weeks in fall and spring to assess faculty needs and plan programming accordingly during the 2011-12 academic year, and seeks input from Faculty Organization regarding specific development needs for upcoming academic year.

**Benchmark:** one activity per semester was met.
Evaluation of Administrators, Faculty, Staff. The Dean evaluates all faculty members with input from the faculty member being evaluated, her/his peers, and students. The CEO, Dean of Nursing, and/or Associate CEO evaluate LCN staff members.

**Progress:** All faculty and staff were evaluated during 2011-12. All student evaluations for the classroom were numerically scored to determine if LCN was meeting the benchmark of 80% students satisfaction. Faculty whose overall factor score was below 4.0 or who had specific items on the student evaluation form were contacted to make an action plan (goals and objectives) to improve their score.

**Plan:** The faculty Professional Development Committee will evaluate need for specific programming to assist faculty to improve instructional and testing techniques.

**Student Government Association (SGA):**
Charleston SGA 2011-2012

Fall 2011: Mentor/Mentee get together meetings were held 3 times during the semester. The first meeting Fall 2011, was a cookout held at the Charleston Classroom site. Mentor/Mentees were paired and exchanged emails. The second meeting was held at Midterm, a meal was prepared and students enjoyed competing using the Einstein computer program. The last meeting was held during week 14. A Taco party was held and a celebration for the seniors. SGA sold monogram clothing as a fundraiser. Monthly business meetings were held with the officers in attendance.

Spring 2012: The first meeting Spring 2012, was an Ice cream social held at the Charleston Classroom site between Foundations class and the Senior Seminar class. Mentor/Mentees were paired and exchanged emails. The second meeting was held at Midterm on the Charleston Campus the SGA served walking tacos students again talked to each other. The last meeting was held during week 14. A Pizza party was held and a celebration for the seniors. SGA sold monogram clothing as a fundraiser. Monthly business meetings were held with the officers in attendance.

Submitted by

Elaine (Bunnie)Roberts RN, MS, CNE
SGA Faculty Representative

Danville SGA 2011-2012:

New members Anita John (President); Cecelia Aragon (Vice President)
Jared Banaszak (Secretary); Jon Ohiku (Treasurer); Chelsea Lowe (Public Relations);
Laura O’Neal (Historian); and Liji Vaiaveettil (NSNA Liaison) met for the first time on January 10th of this year. On the agenda was the Chili-cook off which was held for mentor-mentee program. Other events which happened this year were: Valentine’s Day sell of candy to raise money for SGA; White Coat Ceremony held January 30th; NSNA convention in Pittsburgh in March.

March and April the students met together informally and didn’t include me. In April a meeting was held by me to inform students they needed to have a regularly scheduled SGA meeting and include
me. In May, students met to discuss T-shirt sales and new ideas for the T-shirt were discussed. Fundraiser at Wild Wings in Champaign was conducted with the students. In June, Anita, Chelsea, and Liji and I met which we didn’t have to because it was Summer session, but plans were discussed for up-coming sales of sweat pants, sweat shirts and T-shirts for the fall semester fundraisers and plans for mentor-mentee program in the Fall.

Submitted by Mary Margaret Barkley, Danville SGA Faculty Representative

**TABLE XI: LCN ENROLLMENT BY ETHNICITY**

The following data was provided by the Director of Enrollment:

<table>
<thead>
<tr>
<th>LCN ENROLLMENT BY ETHNICITY</th>
<th>SP07-08</th>
<th>F07-08</th>
<th>SP08-09</th>
<th>F08-09</th>
<th>SP09-10</th>
<th>F09-10</th>
<th>SP10-11</th>
<th>F11-12</th>
<th>Sp11-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Enrollment</td>
<td>245</td>
<td>246</td>
<td>260</td>
<td>283</td>
<td>270</td>
<td>278</td>
<td>280</td>
<td>289</td>
<td>266</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>4</td>
<td>6</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Asian</td>
<td>22</td>
<td>18</td>
<td>20</td>
<td>22</td>
<td>15</td>
<td>21</td>
<td>12</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>Black/African American</td>
<td>37</td>
<td>49</td>
<td>31</td>
<td>42</td>
<td>32</td>
<td>31</td>
<td>27</td>
<td>29</td>
<td>33</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>6</td>
<td>8</td>
<td>4</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>12</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

White                       | 179     | 168    | 202     | 212    | 210     | 215    | 219     | 228    | 206     |

*Data source: SonisWeb*
Product Evaluation

Product evaluation examines the outcomes of the nursing program, whether the program has met the needs of those it serves, and what the program has attained. This is accomplished by looking at preparation for and outcomes of the licensure examination and through surveys of graduates to obtain their views on the adequacy of their nursing education and survey of employers of graduates to obtain views on graduates’ preparation for professional nursing practice. Surveys & other data sources reflect the achievement of graduates of traditional, electronically based, & hybrid programs and provide evidence of program effectiveness. See Table XV for a description of Product Evaluation components.

<table>
<thead>
<tr>
<th>TABLE XII: PROGRAM EVALUATION MATRIX-PRODUCT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Lakeview College of Nursing Program Evaluation Matrix</strong></td>
</tr>
<tr>
<td><strong>Criterion</strong></td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td><strong>Product Component Performance</strong></td>
</tr>
<tr>
<td>Surveys &amp; other data sources reflect the achievement of graduates of traditional, electronically based, &amp; hybrid programs &amp; provide evidence of program effectiveness.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>


Student Outcomes

LCN data suggests there is a significant amount of student body diversity. While the numbers fluctuate between ethnicity, LCN consistently has a diverse student body as reflected in Table XI (page 31). Research shows that students who speak English as a Second Language (ESL) struggle through nursing programs; barriers to success include communication, writing, and test taking abilities (Guhde, 2003; Jalili-Grenier & Chase, 1997 http://www3.interscience.wiley.com/journal/119155632/abstract?CRETRY=1&SRETRY=0 - c1 ). Curriculum and retention efforts are continually reviewed to improve the LCN retention rate, while simultaneously ensuring that students are ready for the NCLEX success. LCN data suggests the majority of students who have been academically dismissed represent a high percentage of ESL students; data will be presented in this section of the report. Data reported on student outcomes was obtained through the Admission and Records Office-Office of the Registrar using data from SonisWeb.
Assessment Technologies Institute (ATI) Testing

ATI is an assessment and remediation company serving schools of nursing nationwide. LCN has utilized ATI services since December 2005. ATI specializes in Internet based, nationally standardized assessments in entrance screening, critical thinking, content mastery, and National Council Licensure Examination (NCLEX®) preparation. LCN students participate in the ATI Comprehensive Assessment and Review Program, which assesses strengths, weaknesses, and provides a customized study plan which helps increase the likelihood of successfully passing state board exams (NCLEX) on the first attempt. ATI provides tools for immediate, focused remediation and reassessment. ATI tests follow the most current NCLEX blueprint; the content and format simulates the state board exams. The ATI testing program is overseen by the Director of Assessment.

Components of the ATI Comprehensive Assessment & Review Program include:

Entrance/Orientation
- Self-Assessment Inventory
- Critical Thinking Assessment---Entrance
- Quest for Academic Success Review Guide

Content Mastery Series
- Eight proctored specialty assessments
- Clinical specialty review modules
- Internet-based, non-proctored student assessments for practice & remediation
- ATI-PLAN DVD series with 28+ hours of content review

NCLEX Preparation/Exit
- Proctored Comprehensive Predictor of NCLEX success
- Non-Proctored Comprehensive Assessment: 200 questions with 800 rationales
- Ready-Set-RN NCLEX Preparation and Review Guide
- Critical Thinking Assessment---Exit

The Lakeview College Assessment Plan (CAP) and information about ATI testing services is outlined in the Student Handbook. All Lakeview students must register and maintain an active ATI account. Timed, proctored ATI Testing is offered following these curricular points:

- Medical-Surgical Nursing
- Maternal-Newborn
- Nursing Care of Children
- Fundamentals
- Mental Health
- Pharmacology
- Community Health
- Leadership & Management

Additional testing is offered as described:

RN Comprehensive Predictor (offered as a pre-test and post-test in N408; proctored)
Critical Thinking Entrance & Exit Exams (offered in N200 & N408; proctored)
Self Assessment Inventory (offered in N206); non-proctored test. Timed, computerized testing allows students the opportunity to experience what the NCLEX exam will be like, before the actual NCLEX test. Some ATI test questions are posed in alternate item formats (e.g., multiple choice, matching, labeling drawings, etc.), similar to the NCLEX. Students are given practice codes to use prior to taking each proctored exam. Customized study plans are available for all students following each exam. Reports may be accessed by faculty members upon completion of each proctored exam. Aggregate results are evaluated and action plans developed with the Dean and course coordinators each semester. ATI uses two major frameworks for measurement: norm reference and criterion referenced approaches, which have been described in previous CARs.

Predicted Probability of Passing NCLEX tables, contained in RN Comprehensive Predictor reports, indicate a student’s likelihood of passing the NCLEX. Students are required to participate and pass a Kaplan NCLEX Review Course before graduation.

Proficiency Level: To be classified at a given proficiency level, it is necessary for a student to attain a criterion-referenced cut score associated with that level (see Student Handbook). LCN students are required to achieve proficiency level 2 or 3 to pass nursing courses requiring ATI proctored testing. ATI Proficiency Levels are described in Table XVI:

<table>
<thead>
<tr>
<th>TABLE XIII: ATI PROFICIENCY LEVELS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LEVEL 3</strong>: Performance meeting proficiency level 3 indicates student:</td>
</tr>
</tbody>
</table>
| Is very likely to exceed NCLEX standards in this content area  
Demonstrates a higher than expected level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content.  
Exceeds most expectations for performance in this content area.  
Demonstrates achievement of a level of competence needed for professional nursing practice in this content area that exceeds most expectations.  
Students are encouraged to engage in continuous focused review to maintain and improve knowledge of this content. |
| **LEVEL 2**: Performance meeting proficiency level 2 indicates student: |
| Is fairly certain to meet NCLEX-RN standards in this content area  
Demonstrates a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content.  
Exceeds minimum expectations for performance in this content area.  
Demonstrates achievement of a satisfactory level of competence needed for professional nursing practice in this content area. |
| **LEVEL 1**: Performance meeting proficiency level 1: indicates a student: |
| Is likely to just meet NCLEX-RN standards in this content area.  
Demonstrates the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content.  
Meets the absolute minimum expectations for performance in this content area.  
Demonstrates achievement of a minimal level of competence needed for professional nursing practice in this content area. |
Critical Thinking. Beginning January 2007, the College began administering the ATI Critical Thinking Entrance Exam to students enrolled in N200 (Theories and Issues in Nursing). In May 2008, the Critical Thinking Exit Exam was offered for the first time, to graduating seniors enrolled in N408 Senior Seminar. The exam assesses the following areas:

- Self-regulation
- Explanation
- Inference
- Evaluation
- Analysis
- Interpretation

Students are asked to place a copy of Critical Thinking exam scores in their student portfolio, to identify areas for improvement, and to set goals to align with each topic area. These goals are to be referred to, and updated throughout the program. The ATI Critical Thinking Exit Exam has permitted analysis of percent change in critical thinking, from entrance to exit. Entrance Exam results have been used to identify potentially at-risk students for early intervention.

Progress: Since the Critical Thinking Entrance Exam was first administered in January 2007, a total of 67 students have taken both the Critical Thinking Entrance and Exit Exam (entrance score mean: 71.9%, median 72.5%, range 50%-90.0%; exit score mean: 75%, median 75%, range 47.5%-92.5%). Thirty-nine of the 67 students (58%) showed improvement in critical thinking on the exit exam (range: 2.5%-20%), while eighteen of the 67 students (27%) showed a drop in critical thinking; ten of the 67 students (15%) showed no change in scores on exit. A table summarizing January 2007-September 2009 entrance/exit scores, and percent change was provided in the 2008-09 CAR. Since September 2009, four students completed the Critical Thinking Entrance Exam and no additional students have completed the Critical Thinking Exit Exam.

Plan: Determine reasons why the Critical Thinking Entrance and Exit Exams are not being administered and whether administration of exams should be continued.

Benchmark: The Critical Thinking Entrance and Exit Exams have not consistently been administered on either campus during the 2011-2012 academic year. Due to the faculty decision to change to the HESI Assessment products, the Critical Thinking Entrance and Exit Exams will no longer be administered.

National Council of State Boards of Nursing (NCSBN) Report
The College subscribes to NCSBN reports which are received bi-annually (reporting periods are Oct-Mar; Apr-Sep). Reports are compiled and shared with the College BOD, Administrative Team, and Faculty members.

- NCSBN reports provide descriptions of LCN graduate performance on NCLEX (1st time test takers) compared to other programs (i.e., Bachelor’s, Associate’s, and Diploma programs) regionally & nationally.
Percentile ranks compare median performance of grads with that of a comparison group. Ex: % rank of 84 means performance level of 84% of grads in reference group was ≤ to the median performance of LCN grads.

Four main sections of the NCSBN report include:

- Summary Overview
- NCLEX-RN Test Plan Report (i.e., Client Needs)
- Content Dimension Reports (i.e., Nursing Process, Categories of Human Functioning, Health Alterations, Wellness/Illness Continuum, Stages of Maturity, Stress/Adaptation/Coping)
- Test Duration-Test Plan Performance Report.

A brief summary of each section will be reported. Full NCSBN reports are available upon request from the Director of Assessment.

**NCSBN: Summary Overview**

**NCLEX-RN® Pass Rate:** The NCLEX-RN pass rate represents first-time takers and is calculated for the graduating class of students who graduated in December and May of the academic year. NCLEX-RN pass rates are used to determine areas for program improvement pertaining to admission, progression, and graduation requirements; academic advising, academic enhancement, tutoring needs (e.g. “bootcamp” lectures), and curriculum revision. NCLEX-RN pass rates, October 2006-March 2012 are summarized in Chart IV.

![Chart IV: LCN NCLEX Pass Rate](image)

*Data Source: National Council of State Boards of Nursing*
The following charts represent a comparison of LCN graduates to IL graduates in BSN programs for each specific part of the NCLEX-RN test plan.

**CHART V: PSYCHOSOCIAL INTEGRITY/SAFETY/INFECTION CONTROL**

![Bar chart showing comparison of LCN and IL graduates in Psychosocial Integrity and Safety & Infection Control](chart_v.png)

*Data Source: National Council of State Boards of Nursing*

**CHART VI: BASIC CARE & COMFORT/HEALTH PROMOTION/MAINTENANCE**

![Bar chart showing comparison of LCN and IL graduates in Basic Care & Comfort and Health Promotion & Maintenance](chart_vi.png)

*Data Source: National Council of State Boards of Nursing*
**CHART VII: MANAGEMENT OF CARE & PHARMACOLOGICAL/PARENTERAL**

*Data Source: National Council of State Boards of Nursing*

**CHART VIII: PHYSIOLOGICAL ADAPTATION/REDUCTION OF RISK**

*Data Source: National Council of State Boards of Nursing*
**NCSBN: Content Dimension Reports**

The following chart represents LCN graduates to Illinois graduates in BSN programs for nursing process reflected within the NCLEX-RN test plan.

*Content Dimension Reports* will be depicted separately, in bar charts, and will include the following topics: *Nursing Process, Human Functioning, Health Alterations, Wellness-Illness Continuum, Stages of Maturity, and Stress, Adaptation, Coping.*

**Nursing Process**

**CHART IX: NURSING PROCESS**  
**LCN GRADUATES COMPARED TO IL GRADUATES**

![Chart IX: Nursing Process](image_url)

*Data Source: National Council of State Boards of Nursing*

**Human Functioning**

The following topics pertaining to human functioning will be depicted in subsequent charts:

- Protective functioning
- Sensory-perceptual functions
- Comfort, Rest, Mobility
- Nutrition
- Growth, Development
- Fluid, Gas Transport
- Psychosocial-Cultural Functions
- Elimination

These charts are a comparison of LCN performance on each content area for each academic year, beginning in 2009 through the present.

*Data Source: for all charts: National Council of State Boards of Nursing.*
CHART X: HUMAN FUNCTIONING I

- Protective Functioning
- Sensory Perceptual Functions
- Comfort, Rest, Activity, Mobility
- Nutrition

CHART XI: HUMAN FUNCTIONING II

- Growth & Development
- Fluid-Gas Transport
- Psychosocial Cultural Functions
- Elimination
Health Alterations

**Chart XII: Health Alterations I**
Rank of LCN Graduates to IL Graduates

**Chart XIII: Health Alterations II**
Content Dimension: Wellness-Illness Continuum

The following tables represent a comparison of LCN graduates to Illinois graduates in BSN programs for each of the following content dimension areas:

CHART XV: CONTENT DIMENSION WELLNESS-ILLNESS CONTINUUM
LCN GRADUATES COMPARED TO IL GRADUATES
Content Dimension: Stages of Maturity

CHART XVI: CONTENT DIMENSION-STAGES OF MATURITY (Chart #1)
LCN GRADUATES COMPARED TO IL GRADUATES

CHART XVII: CONTENT DIMENSION-STAGES OF MATURITY (Chart #2)
**Content Dimension: Stress, Adaptation, & Coping**

**CHART XVIII: CONTENT DIMENSION-STRESS, ADAPTATION, COPING**

LCN GRADUATES COMPARED TO IL GRADUATES

*Note: data for Interdependence (April 2005-March 2006) and Role Function (October 2007-March 2008; October 2008-September 2009) not available. Due to the variable length of the examination, it is possible that not all candidates received a sufficient number of questions (at least three) to be included in each category. If fewer than ten candidates received a sufficient number of questions in a given category, the percentile rank of candidates’ performance for that category is not reported.*

**Test Duration-Test Plan Performance Report**

**TABLE XIV: TEST PLAN PERFORMANCE SUMMARY:**

NCSBN REPORTING PERIOD OCT 2009-MAR 2010

<table>
<thead>
<tr>
<th>Client Needs</th>
<th>LCN Grads</th>
<th>Passing Performance</th>
<th>% difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management of Care</td>
<td>60%</td>
<td>51%</td>
<td>9%</td>
</tr>
<tr>
<td>Safety &amp; Infection Control</td>
<td>62%</td>
<td>50%</td>
<td>12%</td>
</tr>
<tr>
<td>Health Promotion Maintenance</td>
<td>55%</td>
<td>50%</td>
<td>5%</td>
</tr>
<tr>
<td>Psychosocial Integrity</td>
<td>58%</td>
<td>50%</td>
<td>8%</td>
</tr>
<tr>
<td>Basic Care &amp; Comfort</td>
<td>52%</td>
<td>51%</td>
<td>1%</td>
</tr>
<tr>
<td>Pharmacological &amp; Parenteral Therapies</td>
<td>59%</td>
<td>50%</td>
<td>9%</td>
</tr>
<tr>
<td>Reduction of Risk Potential</td>
<td>56%</td>
<td>50%</td>
<td>6%</td>
</tr>
<tr>
<td>Physiological Adaptation</td>
<td>58%</td>
<td>50%</td>
<td>8%</td>
</tr>
</tbody>
</table>
**Plan:** Plan to continue to closely examine all ATI Assessment Scores as a way to identify at-risk students and individual courses which may need reorganization.

**Noel-Levitz Satisfaction Surveys**
The Noel-Levitz Student Satisfaction Inventory is administered biennially on even numbered years. Results are used to guide program improvement. The Faculty bylaws and College Assessment Plan guide steps for action. Complete Noel Levitz Student Satisfaction Survey results and corresponding action plans are available upon request.

**Plan:** The Noel-Levitz IPS and SSI surveys were conducted in February 2012.
Progress: During the 2011-2012 academic year, the Noel-Levitz Survey was conducted. This survey is conducted every two years and participants include staff, faculty, administration, and students. The full report is available upon request. As a result of the Noel-Levitz Survey, the administrative team adopted a quality improvement approach to further explore the results of the survey. The student satisfaction survey revealed four areas of importance to students but a decreased level of satisfaction. There four areas were identified as problematic in 2010, although comparison between 2010 and 2012 revealed that improvements were made in all four areas. The administrative team and faculty have reviewed the results and are committed to an action plan to address each component.

Item 1: The quality of instruction that I receive in most of my classes is excellent

- A retrospective study of the EBI graduate surveys revealed this to be a consistent issue
- Data collection regarding course grades, ATI scores, and graduation requirements of RN Comprehensive Predictor and Kaplan Readiness test revealed many students struggle in particular courses (Med-Surg, Patho/Pharm II specifically).
- Current assessment practices are not well supported for remediation efforts
- The NCLEX pass rate is subtly declining. In the last academic year, the number of senior students required to remediate prior to taking the NCLEX nearly doubled from nine in May 2011 to sixteen in May 2012.

Action Plan:

- Curriculum revision is a goal of the curriculum committee for 2012-2013.
- Implementation of At-Risk Student Academic Advising Program (Appendix B)
- Aggressive data collection and analysis to determine areas of weakness within the curriculum, gaps in student learning, and continual revision of the At-Risk Student Academic Advising Plan
- Revision of the NCLEX-RN Success Plan
- Peer evaluation and feedback will be strongly encouraged for all faculty during the next academic year.
- A research of assessment practices in scholarly literature revealed that the HESI product line provides the most comprehensive testing and NCLEX preparation package (Appendix C). The package is $436 per student, which is $40 more than the current ATI pricing. This package includes:
  - 10 specialty exams to use during the course of the curriculum (ATI currently has 8).
  - Over 75 case studies and patient reviews (This extensive product is not currently offered by ATI)
  - Skills modules, pharmacology module, and a drug calculation module
o RN Exit Exams (comparable to the RN Comprehensive Predictor. However, HESI RN Exit exam is supported in the literature as the superior of the two products)
o A computer adaptive test (CAT) that mirrors the NCLEX (this will allow students to take a “fake NCLEX” that has the ability to shut off after the student has successfully passed and/or failed the CAT exam)
o Online NCLEX Prep

**Item 2: Computer labs are adequate and accessible**

- This is attributed to the combined classroom/computer lab on the Charleston campus. It is anticipated that as the construction on the building progresses and an additional classroom is added that access will not be as limited as it currently as.

**Action Plan:**

- Continue to monitor the progress of the building project and access to the computer labs.

**Item 3: I feel the College administration is knowledgeable about what concerns students.**

- This was identified in 2010 as an area of concern.
- There has been a change in leadership, which could have contributed to the improvement of the comparison between 2010 and 2012

**Action Plan:**

- An open forum was held on April 13, 2012 and all students from both campuses were invited to attend. Approximately forty students attended. Dick Shockey, Sheila Mingee, Dean Steward, and Mindy Herrin were present and available to hear student concerns and offer feedback. Notes were taken at that time and student concerns were shared with faculty on May 10, 2012 during the end of the year faculty meeting.
- Open forums will be held every Spring and Fall semesters.
- Student suggestion boxes exist on both campuses and students are encouraged to use those boxes to share ideas or concerns with administration.
- All students were encouraged to follow the chain of command within the college. The administrative team also reiterated an open door policy to all students.

**Item 4: Faculty are fair and unbiased in their treatment of individual students**

- Students offered additional feedback about this statement in the open forum, and this information was shared with faculty.
- Evolving from this open forum as well as concerns shared at other times by students, a dialogue began on May 10, 2012 with faculty, led by Mindy Herrin, about the perceptions of professional behaviors. Scholarly literature was provided to the faculty for review prior to the August 2012 faculty inservice week.
**Action Plan:**

- A faculty survey is being conducted and will be compared to a similar student survey to determine perceptions of professional boundaries. This data will be used to further dialogue during the August 2012 faculty inservice.
- Faculty will create expected norms for professional boundaries. Faculty will adopt and be held accountable for these expectations. Furthermore, these expectations will be shared with students so that all faculty and students are aware of what the expected professional behaviors are.

**AACN/EBI Undergraduate Exit Assessment**

The College conducted the first online *EBI Undergraduate Exit Assessment* for all graduating seniors in December 2008 and continues to administer the survey biannually to all graduates exiting the program in April and November. Results are used to develop curriculum and improve the learning environment. Survey questions align with the *Baccalaureate Essentials* outlined by the *American Association of Colleges of Nursing* (AACN). Complete *Undergraduate Exit Assessment* results (December 2008-May 2012) are available upon request.

Of the December 2010 and May 2011 graduates (n=131), there was a response rate of 81% (n=107). Four reminder notices were emailed to graduating seniors, to encourage participation. Results from this survey are summarized below:

*How does Lakeview College of Nursing perform across all aspects of the experience?* The EBI Exit Assessment examined eleven factors:

- Overall program effectiveness
- Quality of nursing instruction
- Course lecture and interaction
- Technical skills
- Core competencies
- Professional Values
- Work and class size
- Classmates
- Facilities and administration
- Core knowledge
- Role development

On the actual survey, item results are reported using the following legend: green=this year’s question mean is statistically higher than the mean in 2010; yellow=this year’s question mean differs to the mean in 2010, but the difference is not statistical; red= this year’s question mean is statistically lower than the mean in 2010. Difference in satisfaction for 2011 vs. 2012 fell in the yellow area for the following factors:

- Work and class size
- Core Knowledge
- Technical Skills
- Course Lecture & Interaction
- Overall Program Effectiveness
Items with a question standard deviation greater than that of 1.5, which indicates a need for improvement, will be summarized. Students were asked to rate satisfaction with items listed in Table XXV: EBI Exit Assessment Results 2011-2012.

### TABLE XVI: EBI EXIT ASSESSMENT RESULTS 2011-2012

<table>
<thead>
<tr>
<th>Overall Program Satisfaction</th>
<th>Standard Deviation &amp; Change from Previous Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accessibility of faculty outside of the classroom</td>
<td>1.74 (-0.22)</td>
</tr>
<tr>
<td>Faculty Responsiveness to student concerns</td>
<td>1.71 (-0.20)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work and Class Size</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount of work required in clinical courses</td>
<td>1.57 (-0.31)</td>
</tr>
<tr>
<td>Amount of collaboration required in your courses</td>
<td>1.65 (-0.15)</td>
</tr>
<tr>
<td>Value derived from your collaboration experiences</td>
<td>1.76 (-0.18)</td>
</tr>
<tr>
<td>Amount of work required of you in your classroom courses</td>
<td>1.87 (-0.30)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course Lecture &amp; Interaction</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>How satisfied are you with the faculty’s ability to: Relate concepts to the real world</td>
<td>1.50 (-0.30)</td>
</tr>
<tr>
<td>How satisfied are you with the faculty’s ability to: Act as an effective role models in clinical practice</td>
<td>1.65 (-0.30)</td>
</tr>
<tr>
<td>How satisfied are you with the faculty’s ability to: Interact with students one on one</td>
<td>1.56 (+0.40)</td>
</tr>
<tr>
<td>How satisfied are you with the faculty’s ability to: Draw on experiences of students</td>
<td>1.52 (+0.45)</td>
</tr>
<tr>
<td>How satisfied are you with the faculty’s ability to: Effectively sequence content of courses</td>
<td>1.56 (-0.35)</td>
</tr>
<tr>
<td>How satisfied are you with the faculty’s ability to: Lecture effectively</td>
<td>1.69 (-0.39)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Technical Skills</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>To what degree did the Nursing Program teach you to: manage wounds</td>
<td>1.56 (-0.07)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Core Knowledge</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>To what degree did the Nursing Program teach you to: Assist patients to achieve a peaceful end of life</td>
<td>1.52 (-0.07)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Program Effectiveness</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Program Effectiveness-Expectations: To what extent did your Nursing Program fulfill your expectations</td>
<td>1.51 (-0.24)</td>
</tr>
<tr>
<td>Overall value: Comparing the expense to the quality of education, rate the investment made in Nursing Program</td>
<td>1.61 (-0.19)</td>
</tr>
<tr>
<td>Recommendations: How inclined are you to recommend your nursing program to a close friend</td>
<td>1.79 (-0.18)</td>
</tr>
</tbody>
</table>

In summary, the *EBI Exit Interview Survey* identified specific areas of concern for graduating seniors.
Summary
The Director of Assessment provided reports to the College Board of Directors and Faculty during the 2011-2012 academic year. Goals and Action Plans were created from analysis of the following sources of information:

- Assessment Technology Institute proctored exam results
- Admissions data (including HESI entrance exam scores)
- National Council of State Boards of Nursing (NCSBN) reports
- Educational Benchmarking Inc. (EBI) Exit Interview Surveys
- Noel-Levitz Satisfaction Surveys
- Focus groups, Survey Monkey surveys, Faculty Meeting discussions

Proctored ATI report summaries are shared with faculty, Administrative Team, and the College Board of Directors. Detailed information pertaining to the ATI program, NCSBN Reports, and Noel Levitz results may be obtained from the Director of Assessment.

The program is effective in fulfilling its mission, goals, and expected aggregate student and faculty outcomes. This achievement is evident by NCLEX-RN, retention, and graduation rates; graduate, alumni, and nurse employer satisfaction survey results; and achievements of the faculty with teaching and presentations. When actual aggregate student outcomes are not consistent with the mission, goals, and expected student outcomes, the College takes action to implement program improvements. Examples of ongoing program improvement are implementing the NCLEX Success program, maintaining NCLEX Coordinators (one per campus), creating student mentoring program, increasing tutorial services, implementation of student at-risk program, and revising curricula.

Strengths
- LCN assesses program effectiveness using a variety of measures.
- LCN is aware of strengths and areas for improvement.
- LCN is committed to ongoing program improvement.
- Curricular changes meet the College’s community of interest.
- LCN achieves program objectives and can report successful outcomes

Areas of greatest student satisfaction include:
- The school is safe and secure for all students
- My academic advisor is knowledgeable about my program requirements
- Financial aid counseling is available if I need it
- Library resources and services are adequate
- The school provides online access to services I need

Areas for Further Growth and Improvement
- Build curriculum based upon evidenced based practices.
• Conduct impact evaluations and focus groups to follow up with students, faculty, staff on Noel Levitz findings and interventions introduced.
• Evaluation of the new assessment changes and practices as LCN transitions to HESI assessment products.

The College Assessment Plan (CAP) elements have been assessed, and the results of the assessment reported in this College Assessment Report (CAR) for academic year 2011-2012. In addition, this CAR has addressed the specific areas for improvement from the 2010-2011 CAR. The 2011-2012 CAR will be reviewed by the Board of Directors and the Faculty Organization; additional recommendations may be made which will be addressed in the next annual CAR.

The Director of Assessment will use the upcoming academic year to re-evaluate both the CAP and the CAR effectiveness in addressing the identified areas for overall improvement, specifically in regards to the NCLEX preparedness of our graduates.

Submitted By: ___________________________ Date: ___________________________

Mindy Herrin, PhDc, RN Irene Steward, MSN, MSEd
Director of Assessment Dean of Nursing

Approved By: ___________________________ Date: ___________________________

David Fields
Chair, Lakeview College of Nursing
Board of Directors
# APPENDIX A
## LISTING OF ABBREVIATIONS, ACRONYMS, & DEFINITIONS USED IN REPORT

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
</tr>
<tr>
<td>ATI</td>
<td>Assessment Technologies Institute, LLC</td>
</tr>
<tr>
<td>BSN</td>
<td>Bachelor of Science in Nursing</td>
</tr>
<tr>
<td>BOD</td>
<td>Board of Directors</td>
</tr>
<tr>
<td>CAP</td>
<td>College Assessment Plan</td>
</tr>
<tr>
<td>CAR</td>
<td>College Assessment Report</td>
</tr>
<tr>
<td>CD</td>
<td>Compact Disc</td>
</tr>
<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
</tr>
<tr>
<td>CFO</td>
<td>Chief Financial Officer</td>
</tr>
<tr>
<td>CHA</td>
<td>Charleston Campus</td>
</tr>
<tr>
<td>CPR</td>
<td>Cardio-Pulmonary Resuscitation</td>
</tr>
<tr>
<td>DAN</td>
<td>Danville Campus</td>
</tr>
<tr>
<td>EEO</td>
<td>Equal Employment Opportunity</td>
</tr>
<tr>
<td>EIU</td>
<td>Eastern Illinois University</td>
</tr>
<tr>
<td>FACTS</td>
<td>Management Company: Business Solutions for Education</td>
</tr>
<tr>
<td>FERPA</td>
<td>Family Educational Rights and Privacy Act</td>
</tr>
<tr>
<td>FY</td>
<td>Fiscal Year</td>
</tr>
<tr>
<td>HESI</td>
<td>Health Education Systems, Inc.</td>
</tr>
<tr>
<td>HIPPA</td>
<td>Health Information Portability and Accountability Act</td>
</tr>
<tr>
<td>IBHE</td>
<td>Illinois Board of Higher Education</td>
</tr>
<tr>
<td>ISAC</td>
<td>Illinois State Assistance Commission</td>
</tr>
<tr>
<td>IPEDS</td>
<td>Illinois Postsecondary Education Data System</td>
</tr>
<tr>
<td>LCN</td>
<td>Lakeview College of Nursing</td>
</tr>
<tr>
<td>LCNAO</td>
<td>Lakeview College of Nursing Alumni Organization</td>
</tr>
<tr>
<td>LSN</td>
<td>Lakeview School of Nursing</td>
</tr>
<tr>
<td>LSNAO</td>
<td>Lakeview School of Nursing Alumni Organization</td>
</tr>
<tr>
<td>NCLEX</td>
<td>National Council Licensure Examination</td>
</tr>
<tr>
<td>NCSBN</td>
<td>National Council of States Boards of Nursing</td>
</tr>
<tr>
<td>NLN</td>
<td>National League for Nursing</td>
</tr>
<tr>
<td>NLNAC</td>
<td>National League for Nursing Accrediting Commission</td>
</tr>
<tr>
<td>NSNA</td>
<td>National Student Nurse Association</td>
</tr>
<tr>
<td>RN CAT</td>
<td>Registered Nurse Computer Adaptive Testing</td>
</tr>
<tr>
<td>SGA</td>
<td>Student Government Association</td>
</tr>
<tr>
<td>SNA</td>
<td>Student Nurse Association</td>
</tr>
<tr>
<td>SONIS</td>
<td>Student Online Information System</td>
</tr>
</tbody>
</table>