

# LAKEVIEW COLLEGE OF NURSING

## College Assessment Report 2016-2020



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## **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, 2016 through August 1, 2020. A tremendous amount of work occurred in 2016 through 2019 to improve the NCLEX-RN pass rates and meet accreditation standards.

To ensure program effectiveness, all areas of the campus community must work together. Some of the work that was accomplished through the Higher Learning Commission Assessment Academy, the Illinois Department of Professional (IDFPR) Remediation Strategies, and College Assessment Days. In 2016-2017 the Administrative Team made student learning and institutional quality improvement the focus of assessment.

During this assessment cycle, the College went through a comprehensive accreditation review by the Higher Learning Commission (HLC) which followed the successful completion of the HLC Quality Initiative Project (Assessment Academy). In the Fall of 2020, Commission of Collegiate Nursing Education will conduct an accreditation site for the nursing program.

To keep the CAR at a respective length, additional reports are available to document quality improvement over the past academic years, Appendices A through E. Appendix A informed the Board of the 2015-2016 accomplishments and action plan for NCLEX Success. The action plan and continued efforts were updated in the 5-year CCNE Continuous Improvement Progress Report (CIPR) and Appendix B the College's compliance with the Illinois Department of Nursing's Remediation Plan. Finally, Appendix C describes the quality improvement activities and the oversight and feedback of the Higher Learning Commission's Assessment Academy, the HLC report of visit and the HLC Interim Monitoring Report, Appendix D. Appendix E is the College Assessment Report (CAR) summary and action plan that represents a gap year between the 2019-2019 CAP and the 2020-2023 CAP.

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## **Mission, Vision, & Values**

The College Assessment Plan aligns with the mission and goals of Lakeview College of Nursing.

### **Mission and Goals**

The Lakeview College of Nursing 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 can utilize the nursing process in caring for a diverse, multicultural society in a variety of healthcare settings. The graduate will be prepared to assume the responsibilities of a direct provider, planner/coordinator, manager, a 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 the 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 wellness.

The *Environment* is composed of internal and external dimensions. The individual's unique perceptions and response to this phenomenon distinguish 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 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>).

As a discipline and 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 the classroom and clinical settings. The faculty believes in an atmosphere where self-awareness, critical thinking, creativity, and leadership are paramount. Each student can 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 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, which characterizes nursing. In caring the nurse demonstrates a commitment to the welfare of self, individuals, families, groups, and communities in a 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.

### **Values**

Adaptability, Caring, Excellence, Integrity, and Service are the College values.

*Adaptability* is the process of modifying behavior as indicated by 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.

*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 the

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.

*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.

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

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## **Create an environment where the entire college community works together to create an institution of educational excellence.**

### **Shared Governance**

The College operates within a commitment to shared governance framework to strive for educational excellence. Faculty, staff, students, administrators, Board, and community members are involved in the College decision-making process and ongoing quality improvement efforts.

### **Committees Level**

Faculty, staff, students, administration, and Board engage in decision-making actions through their active participation on College committees. Committee members vote to revise, rescind, or adopt new policies.

### **Department Level**

Each department contributes to the development of the annual budget through the submission of a budget proposal. The budget proposals include prioritized requests that become a part of the annual budget.

### **Individual Level**

Faculty and students provide individual feedback to improve teaching and learning. At the end of each semester, faculty assesses their course outcomes and resources through course evaluations. The faculty make recommendations for improvement or address needs for additional resources.

Students provide input through multiple avenues, including the Student Government Association, Student Forums, surveys, and course evaluations. The information gathered is provided to the Curriculum and Professional Development committees, who in turn, aggregate the information to determine a need to address gaps in curriculum, revise policies, or to provide additional professional development opportunities. The Dean of Nursing uses the input for budget development and faculty evaluation.

### **College Assessment Plan**

The College Assessment Plan (CAP) is developed and designed to ensure ongoing quality improvement and alignment of the program and organizational mission. Assessment is conducted in the following areas: mission/vision, institutional commitment and resources, educational quality and effectiveness, and program effectiveness.

**Lakeview College of Nursing's mission is understood and communicated.**

**[Strategic Plan; HLC Criterion: 1.A., 1.B. CCNE:]**

**Nursing program will achieve the Lakeview College of Nursing mission and vision.**

**[LCN Strategic Plan: Goal #1, CCNE Standard: I-A., HLC Criterion: 1. A, 1.B]**

In 2016, during the strategic planning process, the input gathered from students, faculty, staff, alumni, and external constituents, it was recommended to the Board of Directors to maintain the current mission, vision, and values. The Board of Directors (BOD) concurred.

In 2019, a part of the three-year strategic planning cycle and the Diversity, Equity, and Inclusion (DEI) Plan, the Lakeview community reviewed the mission statement January 4, 2019, in the college-wide DEI in-service led by President Sheila Mingee and Dr. Mabel Smith DEI a nurse consultant. Throughout 2019, The Board of Directors, administration, faculty, staff, students, and constituents assessed the current mission for its adequacy in reflecting the central role of diversity, equity, and inclusion in nursing and healthcare.

*Refer to the Higher Learning Commission Interim Monitoring Report, the Report was accepted by HLC in 2020. Appendix D.*

A revised mission statement was developed with the input of all of the constituencies. In the spring of 2020, students, faculty, staff, administration, and the Board of Directors voted on and approved the revisions to the mission.

*Lakeview College of Nursing has a central focus to be a dynamic center of educational excellence as a diverse and inclusive College community that works together, exemplifying adaptability, integrity, and caring. The College will be forefront to the trends in health care and committed to nursing as a profession by preparing safe, competent, patient-centered, caring professional nurses for leadership, service, and practice for the advancement of the nursing profession.*

The mission statement is communicated through the Lakeview College of Nursing website [www.lakeviewcol.edu](http://www.lakeviewcol.edu), faculty and staff handbooks, and other communication materials.

**Plan:** The faculty, staff, administration, and Board of Directors will continue to review the mission statement. Any changes to the mission will be communicated to the college community. Next review of mission, vision, and values statement will be reviewed in 2023.

**The Board is knowledgeable about the college and works to enhance the institution without conflicts of interest and operates with integrity.**

**[LCN Strategic Plan: Goal #; CCNE Standard: I-B., Federal Compliance, HLC Criterion: 1.C., 1.D., 2. C, 5.B]**

The governing authority is vested in the Board of Directors as designated by the College's bylaws. The Lakeview Policy Manual contains policies on the Duality of Interests and Code of Ethics, which details the expectations for BOD members' performance. All incoming BOD members sign a Duality of Interest form acknowledging potential conflicts of interest. The Duality of Interest survey describes areas of conflict and must refrain from voting on decisions involving personal or financial interest.

The BOD bylaws spell out the role of the BOD, the President, and faculty within the organization. The President, as delegated by the BOD, is to ensure daily operations reflect fairness, integrity, and ethics. The BOD authorizes the President to implement established policies, administer and manage day-to-day operations,



personnel for two campus locations, maintain compliance, develop the strategic plan and annual operational budget, and maintain ongoing communication with the BOD.

The BOD delegates to the Dean and faculty the responsibility to adopt rules and regulations governing the academic requirements of the student body that aligns with the LCN mission, vision, and values. The BOD tasks the Dean and faculty with setting standards for admission of students, defining good standing, curriculum, class attendance, grade reports, and the recommending students for degrees. Also, the BOD authorizes the Dean and faculty to supervise student welfare, disciplinary actions, and student activities.

**Fiscal and physical resources are sufficient to enable the college to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically, and resources are modified as needed. Fiscal procedures will and operates with integrity.**

**[LCN Strategic Plan Goal # 2,4; CCNE Standard: II-A.; HLC Criterion: 1, 2, 5,]**

In keeping with the mission, goals, and expected outcomes, the College believes in an educational environment that supports it with the necessary resources – human, financial, physical, and technological to support its operations and expected outcomes. Through the strategic planning process, the development of the enrollment management plan, the college assessment plan, and the budget formulation, resources are identified to support the College and nursing program to ensure it fulfills its mission.

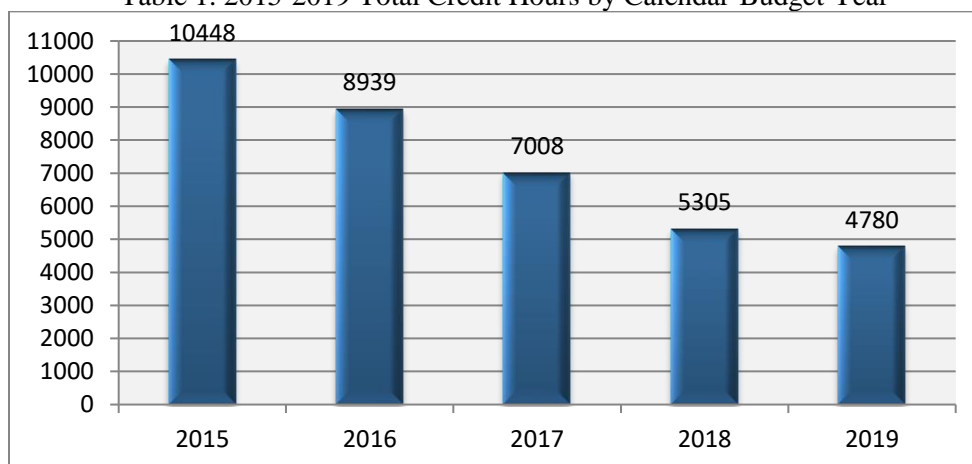
### **Fiscal Resources**

The primary financial resource comes from students' tuition and fees. Other revenue sources include the ability to use, if necessary, interest from the College's endowment funds. For the past ten years, except for 2019, balanced budgets have been approved by the Board of Directors. The 2019 budget was presented as a deficit with interest from the Endowment and Auxiliary accounts. Due to the balance in the operating fund, a transfer of the allowed interest was *not* conducted at the end of 2019.

On strengthening the College's financial viability, the College has worked diligently to increase its total net assets over the past ten years through various targeted mechanisms. During this time, those net assets grew by 78% from \$11,827,089 to \$21,092,641. Unfortunately, during this assessment cycle, the College experienced NCLEX-RN pass rate issues and was placed on probation in 2015-2019 by the Illinois Board of Nursing (IL-BON). As a condition of this probation, the IL-BON required Lakeview to address remediation strategies identified by the Remediation Strategies for Illinois Programs with less than 75% NCLEX-RN Pass Rates (Appendix B: IDFP State Remediation Strategies).

Over the four years, a 50% reduction in admissions as dictated by the state's remediation strategies. Table 1. shows the decrease in total credit hours by the calendar-budget year.

Table 1. 2015-2019 Total Credit Hours by Calendar-Budget Year



The major cut for the 2018 budget was the suspension of the 100% tuition reimbursement. However, during the period of probation by the IDFP, the College maintained financial resources necessary to support the remediation strategies. The fiscal support allowed for a full curriculum review, expansion of academic support services, hiring of consultants, purchasing new simulators, updating equipment, providing faculty professional development through on-site workshops/in-services, decreasing the faculty to student ratio, including increasing the number of clinical faculty, expanded tutoring services, and implementing assessment testing. This financial support was a true testament to modifying the budget based on emergent needs to support the College's mission.

To better gauge enrollments in specific Lakeview courses, the Director of Enrollment/Registrar adopted a new process during the 2017 budget planning, to better predict overall enrollment numbers and individual course size. As the College moves off probation, discussions have ensued regarding increasing enrollment and having faculty and clinical resources sufficient for enrollment growth.

**Plan:** Total Credit Hours is the basis for the College's fiscal year budget; therefore, credit hours are used as a measure for meeting enrollment goals. Continue to review and revise the Strategic Enrollment Management Plan with a focus on recruitment. Continue to monitor budgeted processes and requests.

### Endowment Funds

The Endowment Portfolio consists of four different funds – Endowment Fund, two Scholarship Funds (restricted and unrestricted), and the Auxiliary Fund accounts. The overall Endowment Fund is a significant advantage to the College's future financial base and solvency. Private donors and institutional restrictions stipulate the use of endowment and restricted scholarship funds. Over the past three years, the total funds of the four different funds grew 67% from \$8,792,697 to \$14,700,384.

Ending December 31, 2019:

\$9,291,180	Endowment Fund
\$2,748,621	Restricted Scholarship
\$1,833,052	Unrestricted Scholarship
\$ 827,531	Auxiliary Fund

**Plan:** Continue to review investment policies for future growth.

### Grant Funding

From 2018-2020, Lakeview College of Nursing has received a total of \$92,818.35 in five (5) grants = four (4) from the Illinois Board of Higher Education (IBHE), and one (1) from the Illinois Nurses Foundation.

\$ 2,820.00	Illinois Nurses Foundation Grant Academic-Practice partnerships in nursing to local public health and community health nurses in practice and public health nurse faculty.
\$20,000.00	Illinois Board of Higher Education (IBHE) Nurse Educator Fellowship Grant Two Faculty Members (\$10,000/each) The purpose of the Nurse Educator Fellowship Program is to ensure the retention of well-qualified nursing faculty at institutions of higher learning that award degrees in nursing. Awards are to be used to supplement the salary of the nursing faculty member.
\$34,998.35	IBHE Nursing School Grant program
\$35,000.00	The goal of both grants is to increase the number of nurse graduates from Illinois institutions of higher learning who prepare registered nurses. This grant is based on improving student performance or expanding high-quality programs. Lakeview College of Nursing has used or is using the grant funds for a faculty development program [Champions of Teaching Excellence Program] designed to improve teaching effectiveness.

**Plan:** Continue to seek grant funding.

### Physical Resources

Lakeview College of Nursing has the physical infrastructure to support current operations adequately. The college's main campus is located in Danville, Illinois, with an additional location in Charleston, Illinois. Both the Danville and Charleston facilities are well maintained, which plays a crucial role in supporting the mission of the college and in the years to come. The College maintains a technology and facilities management plan to ensure adequate resources are available.

In December 2016, the adult meti-simulators were replaced with new Apollo high-fidelity simulators. In late 2017, 4 new hospital beds were purchased to replace broken beds in the nursing labs. In 2018, two birthing simulators were purchased, one for each campus.

**Plan: Continue to review technology, lab equipment, and supplies during the annual budget review.**

### Faculty and Staff

LCN employs the necessary number of faculty and academic staff to support the program's mission, goals, and expected outcomes.

**Plan:** Faculty needs are reviewed annually by the Dean of Nursing and proposed for the next operating budget. LCN continues to advertise to generate a pool of qualified faculty for clinical and didactic teaching. The President reviews all personnel needs. Continue to monitor staff needs.

### Salary Increases

LCN has been able to provide salary increases over several years ranging from 2-3%. The below displays the increases in salaries as well as adjunct and overload rates.

**Table 2. Faculty Salary Increases  
2016-2020**

Salary Increase	2016	2017	2018	2019	2020
Full-time Staff	3%	2%	2%	2.5%	2.5%
Full-time Faculty	3%	2%	2%	2.5%	2.5%
Adjunct Rate/Overload Rate	\$890	\$900	\$910	\$920	\$930

### Benefits

Lakeview provides medical, dental, and vision. The College pays 80% of the employee's premium, and the employee pays 20%. The College matches up to 5% of the employee's contribution to a vesting schedule of 6-year graded for 100%. The College pays 100% of long-term disability and premium for life insurance. Supplemental life insurance is also available for employees.

### Tuition Reimbursement

Tuition reimbursement of 100% is available to employees pursuing higher degrees or specializations. LCN expended \$58,645 for 2016 and \$57,384 for 2017 in tuition reimbursement for three faculty and one staff member pursuing doctoral degrees. Effective, January 1, 2018, the 100% Tuition Reimbursement was suspended due to the enrollment numbers decreasing.

**Plan: Continue to monitor the operational budget for a competitive salary and benefits package.**

## **Federal Compliance**

### **Compliance with the Higher Education Reauthorization Act and Federal Compliance**

**[LCN Strategic Plan: Goal #6; CCNE Standard: I- A., Federal Compliance, HLC Criterion: 1.E.]**

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

**[LCN Strategic Plan Goal # 1, 3, 6; CCNE Standard: I-E.; HLC Criterion: 1.B, 1.E., 2.B]**

***Student Educational records are in compliance with policies of governing organization and state and federal guidelines***

[LCN Strategic Plan: Goal #6; CCNE Standard: I-A., Federal Compliance, HLC Criterion: 4.A]

During the 2018 Higher Learning Commission visit, the HLC team evaluated several documents to ensure the College was compliant to fulfill the Criteria for Accreditation, Title IV eligibility, and consumer information.

The evaluation components included:

- Assignment of Credit Hours, Program Length, and Tuition Calendar, Term Length, and Type of Credit
- Institutional Records and Complaints
- Publication of Transfer Policies
- Practices for Verification of Student Identity
- Title IV Program Responsibilities  
(General program requirements; financial responsibility requirements; default rates; campus crime, financial aid, and related disclosures; student right to know, satisfactory academic progress and attendance policies; and contractual relationships)
- Required Information for Students and the Public
- Advertising and Recruitment Materials and Other Public Information
- Student Outcome Data/Published (matriculation, retention, graduation, employment, and licensing examination pass rates)

In 2019, the institution was recertified for Title IV participation and met the definition of an eligible institution under the Higher Education Act of 1965, as amended by HEA. The next reapplication date is December 31, 2024.

In late 2019, a thorough Program Review was conducted from the Illinois Student Assistance Commission (ISAC). This review generated two minor findings with no financial liabilities as the MAP eligibilities would not have been impacted, and the MAP title in Sonis has been renamed.

2016 – 2019 annual audits have been clean with no findings or risks noted.

**Plan:** Continue to maintain Federal Compliance, have clean audits, and ensure publications are consistent and made available to the public. Continue compliance with state and federal regulations. Continue to review and update handbooks as needed.

***The nursing program will align with national nursing standards.***

**[LCN Strategic Plan: Goal #2, 5; CCNE Standard: I-A., HLC Criterion: 4.A ]**

The Dean of Nursing, Director of Assessment, and faculty members attend several conferences, workshops, and webinars to align the curriculum with national nursing standards. Conferences attended are NCLEX-RN, baccalaureate essentials, Quality and Safety Education for Nurses (QSEN), assessment of student learning, NurseTim, and Assessment Technologies Institute (ATI).

The review process for new courses or course revisions requires the Curriculum Committee and the Faculty Organization Committee's approval. The Curriculum Committee and the Director of Assessment are resources for faculty when developing course maps, linking course outcomes with student learning outcomes, assignments, and evaluation of expected program outcomes. All courses are evaluated every three years to ensure continued relevancy and optimize curricular alignment with expected program outcomes and current national standards. In addition to standardized review timeframes, the Curriculum Committee completes a review of national standards if changes have been completed. Last review took place in 2018 where the program outcomes were aligned with BSN essentials, QSEN competencies, and the NCLEX test plan.

**Plan:** There is a plan to attend the yearly conferences and host professional development activities in addition to assessment days. The curriculum will be updated with the any updates of the BSN essentials, QSEN competencies, or with the new NCLEX-RN test plan.

***Stakeholders will give input into program processes and decision making.***

**[LCN Strategic Plan Goal #1, 2, 3, 4 ,5,6; CCNE Standard: I-B., HLC Criterion: 2.A 2.B, 5.B]**

***Faculty and students will participate in shared governance.***

**[LCN Strategic Plan Goal # 6; Standard: I-D.; HLC Criterion: 2. A, 2.D, 3.B, 5.B]**

The stakeholders consists of current and prospective students, the Student Government Association (SGA), faculty, staff, alumni, the Board of directors, clinical agency partners, preceptors, and employers of our graduates. Multiple strategies have been initiated to gain input from these individuals/groups to inform the nursing program's mission, vision, goals, curriculum, and expected program outcomes.

Embedded within the organizational structure is a system of shared governance that provides a framework for equity in the College's decision-making. Shared governance is an important aspect of LCN on all levels: student, faculty, administration, staff, and Board of Directors. Strategies for gathering information include the strategic planning process (SWOT), open student forums, faculty and staff meetings, and tea with the Dean, suggestions boxes, and surveys are some of the primary ways for input.

**Plan:** The Dean of Nursing will hold Tea with the Dean in the Fall 2020 and Spring 2021 semesters. The Director of Assessment will conduct and develop action plans for Skyfactor Fall 2020 and Spring 2021 survey, the Noel Levitz Fall 2020 survey and the NESSE 2021 survey. The SGA faculty representatives will complete and develop a sign-up sheet to increase SGA representatives for college committees. The Curriculum Committee will host the Spring 2021 Stakeholder meeting.

Continue to host stakeholders' meetings annually. Continue to review survey results for quality improvement. Continue to review recommendations for policy change by each committee structure. Continue to review and make action plans as needed.

The President will conduct a SWOT analysis for students, faculty, staff, Board members, and external constituents to complete. The President will develop a new strategic plan.

**Expected faculty outcomes are clearly identified by the program, are written and communicated to the faculty, and are congruent with institutional expectations**

**[LCN Strategic Plan Goal #1, 2, 3, 6; CCNE Standard: I-C.; HLC Criterion: 2. A, 2.D]**

### 2016 Faculty Outcomes

Faculty outcomes in teaching, scholarship, and service are consistent with the nursing program's accomplishment of its mission, vision, goals, and student learning outcomes. The overall aggregation of the data of the faculty benchmarks would conclude that collectively from 2015-2016, faculty was unable to meet all the benchmarks. Gaps in this data are present as not all the faculty members responded to the survey. Currently, Lakeview College of Nursing has 18 full-time faculty members and 8-part time faculty members for 26 total faculty members. 19 out of the 26 faculty members did respond; this is a response rate of 73.07% completion. Faculty achieved the CEU benchmark, stating: "100% of faculty will complete six or more hours of CEU's every semester," based on the data gathered from the 2016 faculty survey. Achievement of the CEU benchmark are congruent and consistent with the College's mission and goals as well as congruent with the College's expectations for faculty, as stated within the faculty handbook. There may be some misrepresentation in this achievement, due to the faculty response rate of 73.07%.

Table 3. 2016 Faculty Outcomes

Benchmark	2016 *13 responses
30% of full time and 20% of part-time faculty will hold a CNE	FT: 10% PT: 0% <i>No response from part-time faculty to survey question</i>
100% of faculty will use two or more teaching methods per unit	100%
100% of faculty will engage in scholarship activities Grant activities, Presentations, Enrolled in a doctoral program	15.38%
100% of faculty will complete 6 or more hours of CEU's each semester.	100%
75% of full time and 100% of part-time faculty will maintain clinical practice	FT: 62.5% PT: 33%
100% of faculty will be active in one or more: professional organization membership, external organization committee work, community health fairs	84.6%
75% of students will evaluate faculty teaching as satisfactory or extremely satisfactory on course evaluations	87% Fall 2016

2017, the College continued to sponsor and provide resources to faculty to achieve completion of at least 6 hours of CEU's. Areas that faculty outcomes were improved upon was to foster program effectiveness and included both full time and part-time faculty members being more involved within one or more professional organization. Improvements were made by taking the aggregated data and further analyzing the data and surveying faculty to identified barriers to meeting the faculty benchmarks. As discovered within the faculty survey, 62.5% of full-time faculty and 33% of part-time faculty maintain clinical practice outside of the College. Faculty have identified that there were several different types of trainings offered to faculty in 2016 through an external College Consultant hired by the College. Faculty achieved the benchmark of utilizing more than two or more teaching methods within each unit. Survey results yielded, 100% of faculty are using two or more teaching methods. This benchmark was attainable; faculty lesson plans in individual courses were examined to determine if the aggregate data supported the individual data. Student satisfaction with faculty performance was also evaluated by using the end of the course evaluations, Skyfactor (EBI), and Noel Levitz surveys.

### 2017/18-2019/20 Faculty Outcomes

In 2017-2019, faculty outcomes demonstrated that expected faculty performance outcomes were met. Data is collected annually during performance evaluations with the expectation that all faculty meet or exceed the faculty outcomes and CAR report published expectations. Moreover, LCN faculty members consistently demonstrate additional scholarly productivity through article reviews or serving on advisory boards such as the QSEN taskforce. Several faculty members serve in leadership roles on national committees and state initiatives.

Table 4. Academic Years 2017/18 through 2019/20 Faculty Outcomes

<b>Benchmark</b>	<b>AY 2017- 2018 Total faculty=37</b>	<b>AY 2018-2019 Total faculty=30</b>	<b>AY 2019-2020 Total faculty=31</b>
50% of faculty will hold the Certified Nurse Educator (CNE)	0.05% 2 faculty member hold the CNE/ 37 faculty	0.06% 2 faculty members hold the CNE/30 faculty	0.09% 3 faculty members hold the CNE/31 faculty
100% of faculty will use two or more teaching methods per unit	100% (37/37)	100% (30/30)	100% (31/31)
100% of Full-time faculty will engage in scholarship activities. [grant writing, presentations, enrolled in a doctoral program]	100% (37/37)	100% (30/30)	100% (31/31)
100% of faculty (Full-time and Part-time) will engage in 10 professional development activities each academic year	100% (37/37)	100% (30/30)	100% (31/31)
90% of Full Time and 90% of Part Time faculty will stay current in practice (Specialty conferences, practicum hours, bedside nursing, certifications)	100% (37/37)	100% (30/30)	100% (31/31)
100% of faculty will be active in one or more: professional organization membership, external organization committee work, community health fairs] related to their specialization	100% (37/37)	100% (30/30)	100% (31/31)
100% faculty will serve on at least one College committee.	100% (37/37)	100% (30/30)	100% (31/31)
70% of students will evaluate the instructor as demonstrating a strong teaching effectiveness by indicating they agree or strongly agree.	77%	51%	80.8%
SKYfactor Benchworks™ Quality of Nursing Instruction	Achieved: 3.92 Expected: 4.5	Achieved: 4.91 Expected: 4.5	Achieved: 4.26 Expected: 4.5
SKYfactor Benchworks™ Course Lecture and Interaction	Achieved: 5.01 Expected: 4.5	Achieved: 5.49 Expected: 4.5	Achieved: 4.85 Expected: 4.5

**Outcomes areas for improvement:**

The two faculty outcome benchmarks not met were 50%:

- Faculty will hold a CNE certification
- 70% of students will evaluate the instructor as demonstrating strong teaching effectiveness by indicating they agree or strongly agree.

Professional Development activities were implemented.

**Teaching Effectiveness:** Actual outcome: For the 2018-2019 academic year, this benchmark was not met.

In 2019, Lakeview was awarded the Illinois Board of Higher Education Nursing School Grant for \$34,998.35. The goal of the grants was to increase the number of nurse graduates from Illinois Institutions of Higher Learning who prepare registered nurses. This grant is based on improving student performance or expanding high-quality programs. Lakeview College of Nursing used the grant funds for a faculty development program *Champions of Teaching Excellence Program* to enhance teaching effectiveness. Workshop content focused on CNE certification, classroom management, classroom activities, technology, and more. An annual Champions of Teaching Excellence workshop has been created and presented to all nurse educators teaching in the nursing program led by the nurse educator champions.

All newly hired faculty are paired with a faculty mentor. The mentorship program has been developed to support new faculty in standard orientation content and based on its needs. The mentorship program is reviewed regularly by Professional Development for quality improvement purposes. Additional support is provided to faculty through professional development efforts.

**Plan:** The Dean, the Professional Development and Faculty Organization committees will review the student evaluations associated with faculty teaching. The Dean will continue to observe the faculty's instruction to provide peer reviews. Continuation of the IBHE grant will be applied for in late 2019. The mentorship program for new faculty members will be continued. The Professional Development Committee will complete updates and edits to the mentorship program for faculty. Faculty will continue to review outcomes to ensure they align with best practices—reviewing faculty bylaws, faculty handbook, and faculty job descriptions. The Dean will develop an action plan to increase certifications.

**Academic policies are published, accessible and reviewed and revised as necessary to foster program improvement**

**[LCN Strategic Plan Goal #6, CCNE Standard: I-F.; HLC Criterion: 1.B, 2.A., 2.B.]**

**Academic policies support the mission and are fair and equitable.**

**[LCN Strategic Plan Goal# 6; CCNE Standard: I-F.; HLC Criterion: 2.A.]**

The Student Handbook published on the LCN website is reviewed and updated annually by faculty and staff. Anyone recommending a new policy or revisions to existing policies in the Student Handbook must submit a Policy Recommendation Form. The Policy Initiation, Revision, and Approval Decision Tree describe the approval process for proposed policy recommendations. The Student Handbook makes evident the expectation of ethics and integrity in the learning environment. Faculty provides clear expectations for students within the Student Code of Conduct and in policies on testing, grading and grade appeals, academic progression, and graduation standards, and clinical preparation. The Student Handbook also includes Copyright and Technology policies directing students on the ethical use of academic resources.

In the Student Handbook, the College makes transparent institutional processes for application, admission, tuition, fees, materials, financial aid guidelines, and withdrawal. The College's commitment to accountability is reflected and documented by the Student Bill of Rights and Rights and Responsibilities, and policies on Family Education Rights to Privacy Act (FERPA), Title IX, VAWA, ADA, Formal Complaints, and the Campus Safety Plan.



Upon enrollment, students receive a link to a form to acknowledge they receive all policies, procedures, and information contained within the Student Handbook/College Catalog. LCN highly values a safe environment for learning on one which is free of discrimination and harassment. Incoming students receive information on the LCN nondiscrimination policy and the procedures for reporting such offenses. The Student Handbook contains the Policy and Grievance Procedures. At the New Student Orientation, students receive a brief overview of the policies and their locations in the Student Handbook, which is published on the website. New students receive a link to access the webinar *Preventing Discrimination and Sexual Violence: Title IX VAWA and Clery Act for Illinois Undergrads, Graduate Students*. This webinar provides information and direct links to LCN's policies, Grievance Procedures, and the Title IX contact found in the Student Handbook.

Dr. Mabel Smith, a nurse consultant, conducted an external review of the student handbook, recommendations were made accordingly.

**Plan:** Continue to monitor and update policies, procedures, practices and handbooks to assure compliance with all local, state, and federal laws. Monitor complaints and grievances.

**Academic support services are sufficient to ensure quality and are evaluated regularly to meet program and student needs.**

**[LCN Strategic Plan Goal #1, 2, 6, CCNE Standard: II-B.; HLC Criterion: 2.E, 3.C.]**

Disability Services: Information on obtaining disability service is available to the public on the LCN website, along with contact name, phone number, and email. Students with disabilities may request services at any time. At the New Student Orientation, all students receive information on the process to disclose a disability and request academic accommodations. Also, faculty include a statement on the process within course syllabi.

Measured Triennial:

2016-2017 – 100% of students were satisfied with the process for requesting accommodations.

2016-2017 – 83% of students were satisfied with discussing accommodations.

Tutoring: Tutoring is conducted on both campus locations by a full-time, master-level nursing faculty. Students unavailable to attend open tutoring sessions may schedule individual sessions with the tutor or email questions. Documentation formats were reviewed with the tutors for consistency and data gathering. Tutors and the Director of Assessment reviewed tutoring logs and modified the documents for standardization. Tutors are to continue using an adapted tutoring log to gather more accurate data. The Danville tutor stated that the increase in students requesting tutoring was substantial and could require a modification in the Danville tutors' work schedule to increase students' availability throughout the week.

Measured Triennial:

2016-2017 - Noel Levitz gap of .68 down from the 2014 gap of 2.01.

2017-2018 – Measure from Noel-Levitz indicates a high level of students' satisfaction with tutoring.

Advising: Advisors support student success. Full-faculty members serve as the program's academic advisors. Advisors are assigned to a student at the start of the program. Advisors maintain updates on student performance by the Academic Improvement Plan (AIP). If a student receives an examination grade below 77%, demonstrates poor performance in clinical, or behaves in an unprofessional manner, the faculty member will develop an individualized AIP that addresses the student's performance and sends a copy to the student advisor.

Measured Biennial:

2017-2018 – Measures from Noel-Levitz and Skyfactor indicate a high level of satisfaction with advising. Noel Levitz gap remained under 1.0.

Support Services: Tutoring, academic advisors, student mentorship, study groups, learning resources.

Measured Biennial:

2016-2017 - Noel Levitz remained under a 1.0 gap, which indicates a high level of satisfaction  
 2017-2018 – Skyfactor measures are neutral

**Library Resources:** The LCN library provides journal and book resources, online access to academic support resources, and direct links to other resources. This provides students access at home or off-campus to the numerous resources the library offers. Students may request additional resources in electronic or hard copies via interlibrary loan.

**Measured Biennial:**

2017-2018 – Measures from Noel-Levitz indicate a high level of satisfaction with library services. Skyfactor measures indicate students are neutral on services.

**Financial Aid Services:** Financial assistance at Lakeview College of Nursing is available in scholarships, grants, and loans. Additional information and counseling may be obtained from the Financial Aid Office

**Measured Biennial:**

2017-2018 – Measures from Noel-Levitz indicate a high level of satisfaction with library services. SKYfactor measures mean students are neutral on services.

100% of students have access to financial aid services.

**Orientation to New Technology:** 100% of students received an orientation to technology services at Lakeview.

**Measured Biennial**

2016-2017 – The Noel-Levitz survey indicated a gap of 1.09.

2017-2018 – Students rated satisfaction with the orientation to technology as 4.49 (neutral to slightly satisfied) per Skyfactor results.

Staff providing student support services are highly qualified and active in professional organizations. Note: In 2018, the HLC team visitors gave great compliments to the staff for their dedication and longevity to the College. Noting that being a small institution, several “hats” are worn during one-person offices.

It is measured at the time of hire and 100% of staff are qualified for their positions.

**Academic Support Service Aggregate:**

2019-2020 Skyfactor question: How satisfied are you with the quality of the academic support resources (advising, tutoring, library, etc.)?

30 students responded, mean score was 4.67, on a scale of 1-7. 76.6% of students reporting being neutral, slightly satisfied, moderately satisfied, or very satisfied.

**Plan:** Continue to survey students for their satisfaction with support services. Continue to offer financial support for staff networking and professional development activities.

**Promote partnerships that foster excellence in nursing education and benefit the community.  
 [LCN Strategic Plan Goal #1, 2, 3, 4, 5, 6; CCNE Standard: I-B.; HLC Criterion:]**

Lakeview has several articulation agreements and transfer guides with educational institutions. For example, Danville Area Community College, Parkland Community College, Lakeland Community College, Eastern Illinois University as the four primary feeder schools. Visit <https://www.lakeviewcol.edu/rn-bsn-articulation-agreements> and <https://www.lakeviewcol.edu/transfer-guides>.

100% of the Student Government officers are members of NSNA. The College pays for the annual dues.

Lakeview does not have a security and safety office. The College has verbal but not a Memorandum of Understanding (MOU) for the community safety response team. The College has been added to the Danville and Charleston emergency systems for alert notifications to take immediate actions for the college campus(es).

Lakeview works with the Vermilion County Health Department on triage activities, immunizations clinics, and emergency preparedness.

**Plan:** Continue to increase articulation agreements. Ensure the Student Government is receiving information on the National Nurses Association. Develop a plan with the local emergency services.

## **PROFESSIONAL DEVELOPMENT**

**The Dean will be academically and experientially qualified to administer a BSN program.**

**[LCN Strategic Plan Goal # 1, 2, 3; CCNE Standard: II-C.; HLC Criterion]**

**The Dean will have authority and responsibility for the development, administration, and leadership of the nursing program.**

**LCN Strategic Plan Goal #1, 2; CCNE Standard: II-C.; HLC Criterion]**

The Dean of Nursing holds a PhD in nursing education, is a registered nurse, and complies with the Illinois Nurse Practice Act and accreditation standards. The Dean is assigned the authority to accomplish the mission, vision, goals, and expected program outcomes of the nursing program. The Dean of Nursing is responsible for the nursing program and ensuring the number of qualified faculty positions are adequate to deliver the nursing program.

**Plan:** Review of the Job description. Continue to support professional development attendance at leadership and CCNE conferences.

**Faculty is academically and experientially qualified to teach their courses.**

**[LCN Strategic Plan Goal # 1, 2, 3, 5; CCNE Standard: II-D.; HLC Criterion: 3.C., 4.B.]**

**Faculty are sufficient in number to accomplish the mission, goals, and expected program outcomes**

**[LCN Strategic Plan Goal # 1, 2; CCNE Standard: II-D.; HLC Criterion: 3.C]**

**The faculty engages in teaching, scholarship, service, and practice.**

**[LCN Strategic Plan Goal # 1, 2, 5; CCNE Standard: II-F.; HLC Criterion 3.B]**

The faculty are current in their disciplines. Faculty update their personnel files annually by submitting evidence of a current Illinois RN license and scholarship and service activities.

2016-2017: 97% of nursing faculty held a master's degree or had an Illinois state variance.

2017-2018: 97% of faculty holds an MSN level or higher degree.

2019-2020: 94% of faculty holds an MSN level or higher degree

The faculty member(s) whose highest degree is a BSN degree. Is on a variance from the IDFPR. However, the faculty members nursing experience aligns with the area in which they teach. The faculty members without a master's degree are paired with a full-time faculty mentor.

2016-2020: The Professional Development Committee review faculty CEU's on an annual basis.

2016-2017: 16% of full-time faculty were enrolled in a doctoral program

2017-2018: 6% of full-time faculty held a doctoral degree,

16% of full-time faculty were enrolled in a doctoral program

2018: The 100% Tuition reimbursement assistance was suspended due to a budget/enrollment freeze by the IDFPR.

Refer to the Higher Learning Commission Interim Monitoring Report, the Report was accepted by HLC in 2020. – Appendix D.

**Table 5. 2016-2020 Professional Development Activities**

<b>2020</b>		
May 1, 2020	Teaching Excellence Workshop	<b>Ariel Wright RN MSN MS CNE Katie King MSN RN CPN Eleni Key MSN-Ed RN Kiersten Emberton MSN APRN FNP-C</b>
April 17, 2020	Assessment Day	<b>Ariel Wright RN MSN MS CNE</b>
February 7, 2020	Lakeview College of Nursing White Coat Ceremony	
January 7, 2020	ATI content In-service	<b>Cara Rigby, DNP, RN Nurse Educator- Integration Specialist</b>
<b>2019</b>		
August 16, 2019	ATI Item Writing Workshop	<b>Lois Churchill</b>
May 9, 2019	CCNE Assessment Preparation Day	<b>Ariel Wright RN MSN MS CNE</b>
May 8, 2019	Teaching Excellence Workshop	<b>Ariel Wright RN MSN MS CNE Eleni Key RN MSN Rita Wallace RN MSN Mina Cho RN MSN Amy Parades RN MSN</b>
April 26, 2019 9-12pm	ATI learning system: Curriculum mapping	<b>Nadine Parise, MS, RNC, CNE</b>
January 4, 2019	Fair and Equitable Policies and Practices: Faculty, administration, and staff	<b>Mable Smith, PhD, JD, MSN, BSN</b>
<b>2018</b>		
<b>November 9, 2018</b>	Lakeview Research Day “Gabby’s Law”	<b>Mr. &amp; Mrs. Tony Galbo</b>
<b>April 13, 2018</b>	Lakeview Research Day “Generational Nursing”	<b>Faith Roberts, RN, MSN</b>
<b>January 3, 2018</b>	Exam Master	<b>Brandon Reed, Exam Master Representative</b>
<b>January 3, 2018</b>	Curriculum Evaluation	<b>Margie Williams, RN, CNE, ANEF, PhD</b>
<b>2017</b>		
<b>December 12-13, 2017</b>	Active Learning Strategies and Clinical Reasoning	<b>ATI Representatives</b>
<b>November 10, 2017</b>	Legal Trends in Nursing Education	<b>Mabel Smith, BSN, MN, JD, PhD</b>
<b>November 6, 2017 (select faculty)</b>	Critical Keys to Success in Seeking Candidacy, Accreditation, and Re-accreditation	<b>ATI –Virtual Workshop</b>
<b>November 3, 2017</b>	Lakeview Research Day "Wartime Lessons Inform Civilian Medicine"	<b>Richard Clapp, MSN, RN Instructor, Lakeview College of Nursing Lieutenant Colonel, United States Navy</b>

<b>July-August, 2017</b>	ATI Training	<b>ATI Representatives</b>
<b>August 14, 2017</b>	Assessment Presentation	<b>Vicky Welge, MSED</b> <i>Director of Assessment, Lakeview College of Nursing</i>
<b>June 21-23, 2017</b> (select faculty and admin)	Higher Learning Commission Assessment Academy	<b>Higher Learning Commission</b>
<b>May 9, 2017</b> (Board of Directors, Faculty, and Staff)	Higher Learning Commission Accreditation	<b>Linnea A. Stenson, PhD</b> <i>Vice President for Accreditation Relations and Director; AQIP Pathway Higher Learning Commission</i>
<b>March 9-10, 2017</b>	Classroom Observations, Teaching Strategies, Follow-up	<b>Donna Ignatavicius, RN, MSN</b> <i>DI Associates, Inc.</i>
<b>February 2-3, 2017</b> (select faculty)	Apollo Simulator In-service	<b>Apollo Representative</b>

**2016-2017-2018 Individual Compliance Training (mandatory upon hire):**

- American's with Disabilities
- Preventing Discrimination and Sexual Violence: Title IX, VAWA, and Clery Act for Illinois Faculty and Staff
- Unlawful Harassment Prevention
- FERPA
- Sexual Harassment

## 2016

<b>December 19, 2016</b>	See Me as a Person	<b>Faculty and Staff Retreat by Mary Koloroutis, MSN, RN</b>
<b>April 28-29, 2016</b>	NCLEX Camp for Nurse Educators	<b>Donna Ignatavicius, RN, MSN</b> <i>DI Associates, Inc.</i>
<b>February 26, 2016</b>	Kaplan – Categorizing Test Questions	<b>Rebecca Porter, RN, MSN</b> <i>KAPLAN Representative</i>
<b>January 5, 2016</b>	Test Blueprinting and Item Writing for Faculty Success	<b>Mary Krieger, MSN, CNE</b> <i>Nurse Tim, Inc.</i>
<b>January 4-5, 2016</b>	Kaplan - Testing	<b>Rebeca Porter, RN, MSN</b> <b>KAPLAN Representative</b>
<b>January 4, 2016</b>	Engaging Learners through Active Teaching Strategies	<b>Mary Krieger, MSN, CNE</b> <i>Nurse Tim, Inc.</i>

\*Upon hire, all employees completed Sexual Harassment Training.

**Plan:** Continue to recruit master's prepared faculty. Continue to verify compliance. Support faculty in professional development activities. Limit the teaching overload to 6 workload hours. Continue to monitor the budget for tuition reimbursement reinstatement. Continue to ensure faculty are receiving an orientation. Develop a training program through Safe Colleges and revise New Faculty Orientation process. Continue to survey faculty for needs assessment.

**Preceptors are academically and experientially qualified for their role.**

**[LCN Strategic Plan Goal # 1, 2; CCNE Standard: II-E.; HLC Criterion: 3.C.]**

Faculty are the primary instructors for clinical courses and evaluate new clinical sites before placing the student to make sure that the site and preceptor will allow students to achieve the learning outcomes of the course. The role of the preceptor is clearly defined in the faculty handbook. The preceptor must hold a current registered nurse license with at least one year in the area of preceptorship, preferably a baccalaureate degree, and employed at the healthcare setting.

2016-2017: No data.

2017-2018: 100% of preceptors met the qualifications.

2018-2019: 100% of preceptors met the qualifications.

2019-2020: 100% of preceptors met the qualifications

**Plan:** Continue to ensure preceptors are academically and experientially qualified. Continue to evaluate preceptors.

## CURRICULUM

**The curriculum is developed, implemented, and revised to prepare the nurse generalist.**

[LCN Strategic Plan Goal #1, 2; CCNE Standard: III-A.; HLC Criterion: 3.A, 4.A]

**Curriculum is developed, implemented, and revised to reflect the Illinois Nurse Practice Act**

[LCN Strategic Plan Goal #1, 2, CCNE Standard: III-B.; HLC Criterion: 3.A, 4.A]

**The curriculum incorporates the Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and QSEN.**

[LCN Strategic Plan Goal #1, 25; Standard: III-B.; HLC: Criterion 3.A, 4.A]

**The curriculum is logically structured to achieve expected student outcomes.**

[LCN Strategic Plan Goal # 1, 2; CCNE Standard: III-C.; HLC Criterion: 3.A, 4.A]

**The Baccalaureate curriculum builds upon a foundation of the arts, sciences, and humanities**

[LCN Strategic Plan Goal # 1, 2; CCNE Standard: III-C.; HLC Criterion: 3.B, 4.A]

**The curriculum includes cultural, ethnic, and socially diverse concepts.**

[LCN Strategic Plan Goal #1, 2; CCNE Standard: III-C.; HLC Criterion: 3.B]

**Teaching-learning practices and environments support the achievement of expected student outcomes.**

[LCN Strategic Plan Goal # 1, 2, 6; CCNE Standard: III-D.; HLC Criterion]

**Clinical practice experiences enable students to integrate new knowledge and demonstrate the attainment of program outcomes.**

[LCN Strategic Plan Goal #1, 2; CCNE Standard: III-E.; HLC Criterion]

**The curriculum and teaching-learning practices consider the needs and expectations of the community of interest.**

[LCN Strategic Plan Goal # 1, 2,3,5,6 CCNE Standard: III-F.; HLC Criterion]

**Individual student performance is evaluated by the faculty and reflects the achievement of expected student outcomes.**

[LCN Strategic Plan Goal #1, 2, 3, 6; CCNE Standard: III-G.; HLC Criterion: 4.A, 4.B]

**Evaluation policies and procedures for individual student performance are defined and consistently applied.**

[LCN Strategic Plan Goal # 2, 6; CCNE Standard: III-G.; HLC Criterion: 4.B, 4.C]

**Data on teaching and learning practices will be used in decision making.**

[LCN Strategic Plan Goal #1, 2 6; CCNE Standard: III-H.; HLC Criterion: 4.B, 4.C, 5.C]

The nursing program prepares students for generalist nursing practice. As such, the expected program outcomes focus on role expectations, and fully align with the values of the College and include knowledge, skills, and abilities (competencies) related to the Program Outcomes. The nursing program requires the completion of 60 hours of prerequisite general education. The math and sciences make up almost 40% of general education credit hours. The other 60% of credit hours are generated from the humanities and social sciences. Students applying to LCN must earn a minimum of a 2.50, on a four-point grading scale, cumulative grade point average (GPA) in the required prerequisites to meet admission criteria.

Following the 2016 program review, the faculty developed and approved new course and program outcomes that integrated concepts from the American Association of Colleges of Nursing 2008 Baccalaureate Essentials and QSEN. Faculty used Bloom's Taxonomy model to construct a framework of outcomes progressing in complexity from 200-numbered courses through graduation. Safety, collaboration, professional values, leadership, patient-centered care, and clinical judgment are the knowledge, skills, and attitudes expected of graduates.



The revised curriculum directed a more significant number of credits to be allotted toward theory and clinical experience in courses that have been identified as critical to student success. These courses include N210 Nursing Foundations, N301 Nursing of the Adult Client I, N303 Nursing of the Adult Client II, and N403 Nursing of the Adult Client III. N210 Nursing Foundations is an introductory course where students begin to build critical thinking skills, acquire technical nursing skills, and learn nursing theory. N301, N303, and N403 are all medical-surgical courses that progressively lead the student through the care of patients with chronic, stable health conditions to care for the emergent patient with multisystem health concerns. With the implementation of the revised curriculum in fall 2016, N408 will be a concept synthesis course with a clinical component. This course will reinforce the concepts and clinical reasoning acquired throughout the medical-surgical courses.

The nature of the revised curriculum allows the student to provide more patient-centered care (a *QSEN* Competency) that is focused on clinical prevention and population health (*Essential VII*). When moving through the program, students can apply the theoretical knowledge they are gaining in the classroom to make sound clinical decisions in the care of patients with progressively higher acuity health problems. The revised curriculum was voted on and approved by the faculty, the Administrative Team, and the Board, with a planned implementation date of Fall 2016.

Fall 2016, faculty adopted a new assessment plan and model that focused on measuring student learning and using results to improve. On a three-year revolving assessment cycle, The College Assessment Plan (CAP) is developed and designed to ensure ongoing quality improvement and alignment of the program and organizational mission. Assessment is conducted in the following areas: mission/vision, institutional commitment and resources, educational quality and effectiveness, and program effectiveness.

2017-2018: The NCLEX-RN test plan was reviewed, and each objective was mapped out for each assigned course. Each course instructor was given the course objective to ensure content was adequately covered. Each NCLEX objective was linked within each course outcome and program outcome. ATI test questions were categorized within the testing system. The new test plan was published in 2019. Documents were reviewed for gaps, changes, and content variation.

2017-2018 The Illinois Nurse Practice Act was incorporated. Reviewed by all faculty during assessment day. No gaps identified.

2017-2018: General Education Syllabi were obtained and reviewed from Danville Area Community College and Parkland Community Colleges.

2017-2018: The Essentials were reviewed with the 2008 and the 2019 changes. Each Essential in both the 2008 and 2019 were made into "The student will" statement and linked to the matching course. Each course instructor was given updated statements to ensure the Essentials are covered within the course. Each Essential was linked within each course outcome, program outcomes, and graduation outcome. Curriculum presented and reviewed documents with all faculty on assessment days.

QSEN competencies were mapped out into the "student will" objective statements. Each statement was linked to a course. Each course instructor was given updated statements to ensure the QSEN competency statement was covered within the course. Each QSEN competency was linked within each course outcome, program outcomes, and graduation outcome. Curriculum presented and reviewed documents with all faculty on assessment days.

2017-2018: In support of the values - caring, diversity and cultural care are included in clinical, classroom, and simulation teaching-learning activities. In addition to clinical exposure to individuals and families from diverse backgrounds, various teaching and learning activities are mapped throughout the curriculum and evaluated each semester for changes. Assignments to incorporate concepts related to cultural, ethnic, and social diversity (303-cultural assignment, 309-cultural assignment, DB, 404-cultural assignment, DB, exam, 302-Assignment,



DB, 408-with in VATI modules, 210-exam, presentations, 206-paper, test, 301-cultural assignment, 305-clinical presentation assignment, 310-test questions, 308-care plans, Med-Surg-care plan section, 405-Reflective journals, 202-CDC disease statistics).

The College supports teaching and learning by providing students and faculty technology to support online learning, simulations and skills labs, the library, classrooms, and clinical practice sites.

*2017-2018:* Each course was reviewed and outcomes were aligned with the program outcomes. End of semester evaluations for Spring 2019 were completed and reviewed for educational practices. The Dean completed in classroom evaluations of faculty. Teaching Excellence in-service was completed 5/7/2019 covering best practice in education.

*2017-2018:* Academic Probation document and process has been revised. Will start Fall 2019. End of course evaluations were completed Spring 2019. Midterm grades were entered into Sonis. Update to the student handbook requires midterm grade that is entered into Sonis be the test grade average only.

2017-2018

- 2016-Curriculum meeting minutes linked to the curriculum changes.
- 2019-clinical outcomes, skill sheet, clinical evaluations, clinical progression
- Spring 2019 end of course evaluations
- Each semester students are able to complete an end of course evaluation in SONIS to evaluation class and clinical.

2017-2018

- Progression grid started for each course. The grid will provide more feedback for clinical site selection. Grid will be completed in Fall 2019.
- End of course evaluations Spring 2019.
- Curriculum reviewed with the Illinois Nurse Practice Act (2017).
- BSN Essentials were mapped in 2018 to each course.
- QSEN competencies were mapped in 2018 to each course.

*2017-2018:* An in-service was provided to all faculty about evidence based practice and teaching best practice. Including classroom and simulation. CAE (simulation company)-all provide EBP 303 assignments, 309 assignment references sited. 310 Mental Health assignment. End of course evaluations were completed for Spring 2019.

2019-2020:

- NCLEX-RN test plan was reviewed and curriculum update in 2019.
- Medical Surgical curriculum content has been mapped to follow the NCLEX-RN blueprint.
- Each course test is reviewed per the testing policy and the NCLEX-RN test plan.
- Map specialty courses for future.
- 2022 will need update and re-map NCLEX-RN blueprint for the 2023 academic year.
- Spring 2020, Curriculum Committee reviewed syllabi to ensure the correct CSLO were used. Updated the handbook and all LCN documents.
- Spring 2020 assessment day, faculty will review program learning outcomes with individual course learning outcomes.
- Spring 2020 review pre-req requirements.
- Reviewed CSLO in Fall 2019 and the alignment to the Program learning outcomes
- Skyfactor survey and stakeholder meetings demonstrate the need for increase technology content related to EMR/EHR.
- Developed and implemented a medication calculation policy.

- Professional Development committee developed AIP directions for the faculty handbook.

*Refer to the Higher Learning Commission Interim Monitoring Report, the Report was accepted by HLC in 2020. – Appendix D.*

**Plan:** Review, modify, and approve the 2020-2023 College Assessment Plan with assessment reports completed annually. Develop action plans as needed. Assess teaching and learning across the curriculum. Review the general education courses. Review and map specialty courses within the curriculum. Complete a full curriculum review within the next assessment cycle.

## PROGRAM OUTCOMES

**The program defines and reviews formal complaints according to established policies.  
[LCN Strategic Plan Goal #, CCNE Standard: IV-G.; HLC Criterion:]**

To ensure that such freedom is upheld, the Complaint Policy and the Student Grievance Policy in the Student Handbook is used to address potential infringements of rights. Students are encouraged to participate in resolving complaints with faculty, staff, administration, and peers. During the past three years, three complaints have been received. Two of those grievances related to grades while the third related to professional behaviors between two students were subsequently withdrawn by the student reporting the grievance. Regarding the two grievances associated with grades, the policies, and procedures, were followed.

**Table 6. Formal Complaints for Academic Years 2016 to 2019**

Semester and Year	Issue	Outcome
2016	Student-Student Harassment	Resolved Informal – Unfounded Student falsified information – sent to conduct
Fall 2017	Student-Student Harassment	Complaint was withdrawn
Fall 2018	Grieved Grade/ Accommodations	Grade Stood
Spring 2019	Grade Appeal	Grade Stood

**Plan:** Review procedures of complaints, grade appeals, and grievances. Schedule training.

**Data analysis is used to foster ongoing program improvement**

**[LCN Strategic Plan Goal #, CCNE Standard: IV-H; HLC Criterion: 4.B, 4.C]**

**Students will pass NCLEX-RN on the first attempt**

**[LCN Strategic Plan Goal #1, 2, 3, 6; CCNE Standard: IV-C.; HLC Criterion: 4.A, 4.C]**

**Program outcomes for student satisfaction demonstrate program effectiveness.**

**[LCN Strategic Plan Goal #1, 2, 4, 6; CCNE Standard: IV-E.; HLC Criterion: 4.C]**

**Graduating seniors will demonstrate they have met program outcomes**

**[LCN Strategic Plan Goal #, CCNE Standard: IV-H.; HLC Criterion: 4.A, 4.B., 4.C]**

Lakeview articulates the program outcomes for the baccalaureate degree in nursing. In 2016, faculty-approved the current outcomes. The program outcomes are published on the College's website and in the Student Handbook. Faculty developed course-level student learning outcomes that align with the program outcomes. The expected course outcomes across the curricular continuum align and increase in complexity/degree of difficulty in advancing student learning across the curriculum, ultimately linking to the desired program outcomes. All expected program outcomes are maintained in written form and made accessible to current and prospective students, faculty, other constituents, and the public via online dissemination

### **Program Outcomes**

- Demonstrate collaboration among health care professionals through the use of effective communication to improve patient outcomes.
- Incorporate informatics and technology into professional nursing practice.
- Implement safe, quality care for individuals, families, and systems to improve outcomes.
- Teach patients about health promotion and screening programs based on family, population, and/or community needs.
- Integrate professional values and leadership principles as a nurse generalist.
- Demonstrate patient-centered care by respecting the patient's preferences, being culturally sensitive, and incorporating professional values into nursing practice.
- Demonstrate appropriate clinical judgment based on current evidence for patients across the lifespan in a variety of settings.

Program achievement outcomes are the completion rates, NCLEX-RN licensure pass rates, employment rates, and other program outcomes found in the College Assessment Plan (CAP).

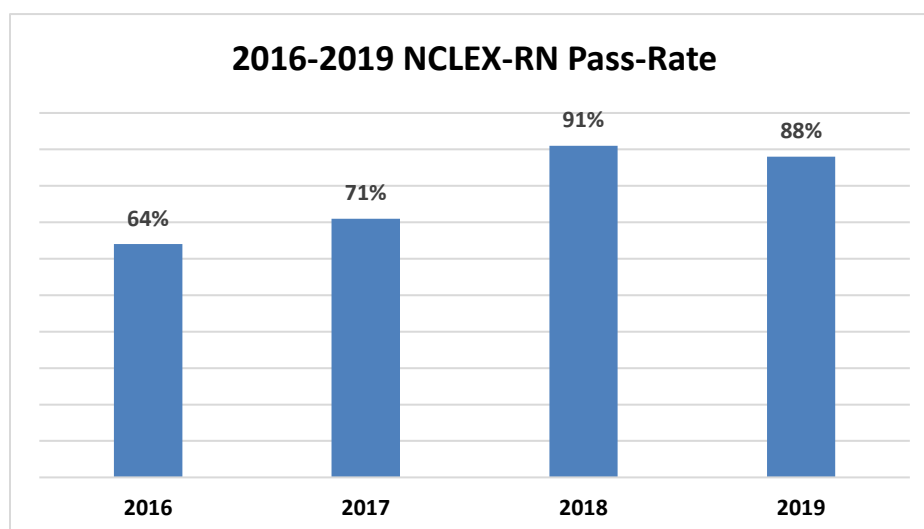
**Table 7. 2017-2019 Completion Rates****Completion Rates:**

No data available for 2016, data for 2017-2019 meet the expected CCNE benchmark of 70%

Track	Completion Year		
	2019	2018	2017
<b>ALL TRACK TOTAL:</b>	Entry: Fall 2017 (N=52), 43 completed, 82%  Entry: Spring 2018 (N=28), 28 completed, 100%	Entry: Fall 2016 (N=69), 64 completed, 92%  Entry: Spring 2017 (N=50), 47 completed, 94%	Entry: Fall 2015 (N=82), 75 completed, 91%  Entry: Spring 2016 (N=57), 52 completed, 91%
<b>Traditional BSN</b>	Entry: Fall 2017 (N=39), 30 completed, 76.9%  Entry Spring 2018 (N=20), 20 completed, 100%	Entry: Fall 2016 (N=46), 41 completed, 89%  Entry Spring 2017 (N=33), 30 completed, 90%	Entry: Fall 2015 (N=56), 49 completed, 87.5%  Entry Spring 2016 (N=40), 35 completed, 87.5%
<b>Accelerated RN-BSN</b>	Entry: Fall 2017 (N=13), 13 completed, 100%  Entry Spring 2018 (N=8), 8 completed, 100%	Entry: Fall 2016 (N=23), 23 completed, 100%  Entry Spring 2017 (N=16), 16 completed, 100%	Entry: Fall 2015 (N=26), 26 completed, 100%  Entry Spring 2016 (N=16), 16 completed, 100%
<b>LPN-BSN</b>	N/A	Entry Spring 2017 (N=1), 1 completed, 100%	Entry Spring 2016 (N=1), 1 completed, 100%
<b>RN-BSN</b>	N/A	N/A	N/A

\*The formula for calculating completion rates was as follows: the number of students at the time of matriculation as the denominator; the number of graduates at years two, three, four, and five for the numerator; admission cohorts (Spring or Fall) totaled for each calendar year.

Table 8. 2016-2019 NCLEX-RN Licensure Pass-Rate (Pass-Rates by Tracks)



**NCLEX-RN Pass-Rate by tracks – Accelerated, Traditional, LPN-BSN**

2019				2018			
	CHARLESTON	DANVILLE		CHARLESTON	DANVILLE		
TOTAL TAKERS	92	55	37	111	55	56	
PASSERS	81	49	32	101	54	47	
<b>TOTAL TAKERS</b>	<b>88%</b>	<b>89%</b>	<b>86%</b>	<b>TOTAL TAKERS</b>	<b>91%</b>	<b>98%</b>	<b>84%</b>
ACCEL.	21	13	9	ACCEL.	39	14	24
ACCEL. PASSED	20	12	9	ACCEL. PASSED	38	14	23
<b>ACCELERATED</b>	<b>95%</b>	<b>92%</b>	<b>100%</b>	<b>ACCELERATED</b>	<b>97%</b>	<b>100%</b>	<b>96%</b>
TRAD.	71	43	29	TRAD.	72	40	32
TRAD. PASSED	61	38	24	TRAD. PASSED	63	39	24
<b>TRADITIONAL</b>	<b>86%</b>	<b>88%</b>	<b>83%</b>	<b>TRADITIONAL</b>	<b>88%</b>	<b>98%</b>	<b>75%</b>
LPN/BSN	----	----	----	LPN/BSN	1	1	----
LPN/BSN PASSED	----	----	----	LPN/BSN PASSED	1	1	----
<b>LPN/BSN</b>	<b>----</b>	<b>----</b>	<b>----</b>	<b>LPN/BSN</b>	<b>100%</b>	<b>100%</b>	<b>----</b>

updated: 10/30/2019 - 2 left to take

2017				2016			
	CHARLESTON	DANVILLE		CHARLESTON	DANVILLE		
TOTAL TAKERS	158	89	69	135	76	59	
PASSERS	112	67	45	86	44	42	
<b>TOTAL TAKERS</b>	<b>71%</b>	<b>75%</b>	<b>65%</b>	<b>TOTAL TAKERS</b>	<b>64%</b>	<b>58%</b>	<b>71%</b>
ACCEL.	43	23	20	ACCEL.	39	15	24
ACCEL. PASSED	39	21	18	ACCEL. PASSED	34	13	21
<b>ACCELERATED</b>	<b>91%</b>	<b>91%</b>	<b>90%</b>	<b>ACCELERATED</b>	<b>87%</b>	<b>87%</b>	<b>88%</b>
TRAD.	114	66	48	TRAD.	94	59	35
TRAD. PASSED	72	46	26	TRAD. PASSED	51	30	21
<b>TRADITIONAL</b>	<b>63%</b>	<b>70%</b>	<b>54%</b>	<b>TRADITIONAL</b>	<b>54%</b>	<b>51%</b>	<b>60%</b>
LPN/BSN	1	----	1	LPN/BSN	2	2	----
LPN/BSN PASSED	1	----	1	LPN/BSN PASSED	1	1	----
<b>LPN/BSN</b>	<b>100%</b>	<b>----</b>	<b>100%</b>	<b>LPN/BSN</b>	<b>50%</b>	<b>50%</b>	<b>----</b>

**Plan:** All expected program outcomes are being mapped to the Baccalaureate Essentials and faculty-identified relevant professional nursing standards and guidelines (i.e., QSEN, NCLEX-RN® testing plan, code of ethics, and State of Illinois Nurse Practice Act). Increase technology integration within the nursing program. Implement a Place of Distribution (POD) for the Charleston campus. See reports submitted to IDFP for in-depth work of the faculty regarding the pass-rate.

*Students will be employed within a year of graduation*

[LCN Strategic Plan Goal #1, 2, 3, 6; CCNE Standard: IV-D.; HLC Criterion: 4.C]

**Employment Rates**

The expected employment rate is 80% of graduates will be employed (in nursing or have a job) within six months after graduation. Since 2015, the employment rates of graduates have consistently exceeded the expected outcome of 80%.

**Table 9. 2016-2019 Employment Rates**

2019* (n=71/71)	2018 (n=77)	2017 (n=105)	2016 (n=65)
100% (71/71)	100% (77/77)	97% (102/105)	98% (64/65)

\*Data not completed.

**Plan:** Continue to offer a Career Fair in the fall and spring semesters. Continue to survey all graduates within six months of graduating.

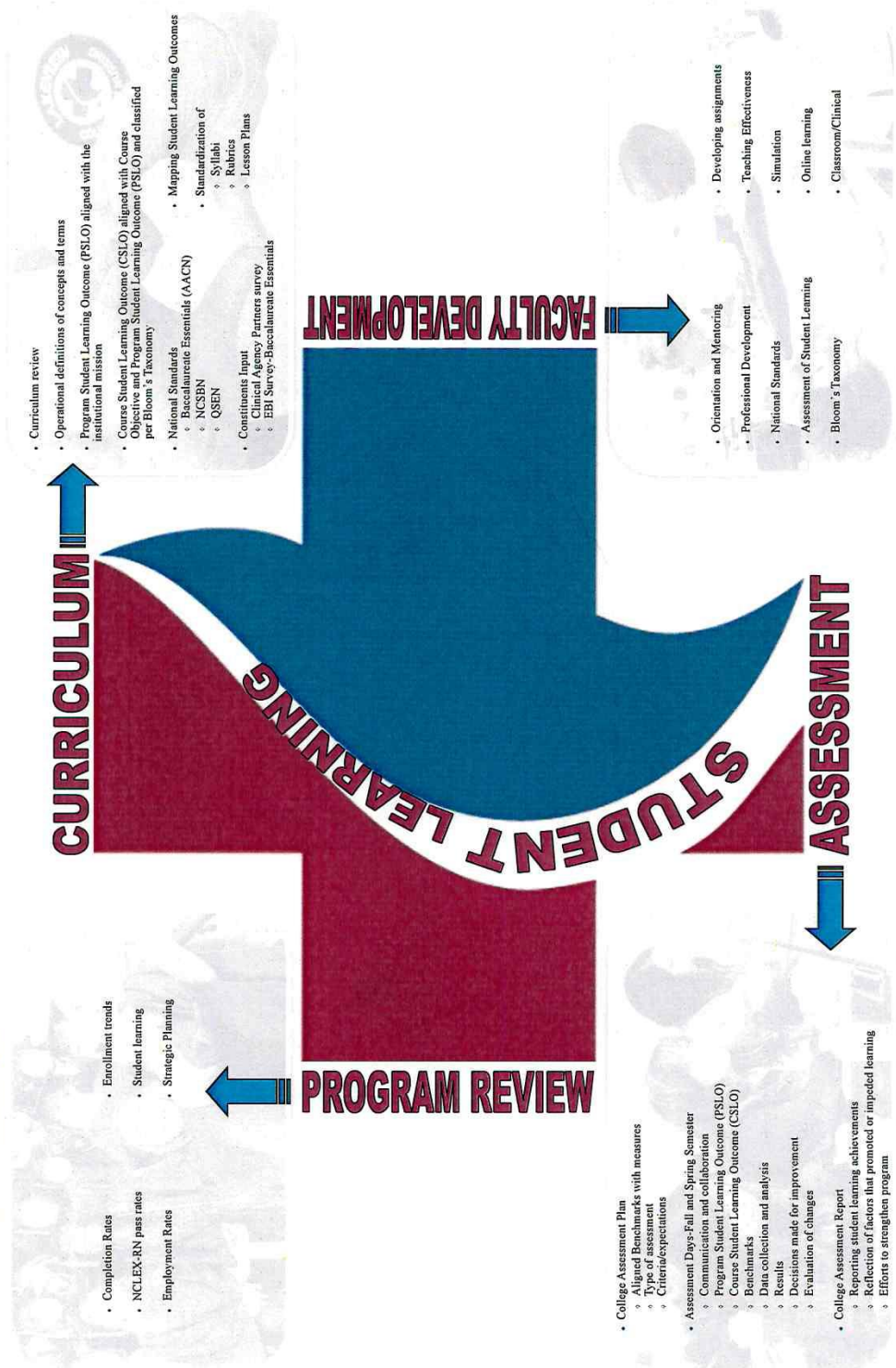
**The program uses a quality improvement process to obtain relevant qualitative and quantitative data, includes timelines, and is reviewed periodically.**

[LCN Strategic Plan Goal #2, 6; CCNE Standard: IV-A.; HLC Criterion: 4.B, 4.C, 5.C, 5.D]

The College Assessment Plan is used for quality improvement and decision-making. The College recognizes that the 100% benchmark set throughout this assessment cycle is unrealistic and will develop more realistic benchmarks in the next assessment cycle.

*Refer to the Higher Learning Commission Assessment Academy Feedback – Appendix C.*

# FACULTY DRIVEN-PROGRAM IMPROVEMENT



The Cross aligns with that of the Red Cross which represents neutrality in caring for the sick and wounded and adaptability in rendering humanitarian services. The Flame honors Florence Nightingale's passion for excellence in the healthcare field and that we may model ourselves after her efforts. The Dove reminds us of the integrity in having hope and bringing peace to those that are in need of caring, comforting, and healing.

**Lakeview College of Nursing Logo:**



## Appendix E:

### CAR Summary 2019-2020

Below is a summary and action plan of the work completed by the committees and assessment of the 2019-2020 academic year:

- **Medical-Surgical Content:** The medical-surgical curriculum course content was mapped to avoid gaps and content overlap.
- **Specialty Courses:** Curriculum mapping for the specialty course(s) will be completed in the 2020-2021 academic year.
- **Co-curricular Programs:** The Co-curricular Programs (Research Day, Service Learning, Triage Day, and the Student Government Association) have been reviewed and linked to program student learning outcomes and assessed each fall and spring semester.
- **Testing Tools:** The review of testing tools such as ATI proctored exams, ATI product integration, course exams, and medication calculation quizzes have been reviewed, implemented, and continuously maintained by the Director of Assessment, allowing for continuous quality improvement efforts.
- **Course Evaluations:** The end of course evaluations completed by faculty were reviewed and modified to align with the CAP during the Spring 2020 Assessment day. The faculty completed the new and aligned course evaluations.
- **Clinical:** Clinical progression, clinical expectations, clinical care plans, and teaching plans have been reviewed, modified as needed, and implemented for standardization in all clinical courses.
- **Skills Lab:** Standardization within the skills lab was initiated with the test out policy; further skills lab development will occur in the 2020-2021 academic year.
- **ATI's CMAP change:** The curriculum content was transferred from ATI's CMAP to the Program manager. The Director of Assessment will maintain the content.
- **General Education/Pre-Requisites:** The Curriculum, Committee will review the program requirements for general education courses and pre-requisites for student learning outcomes, content, and further-curricular development in the 2020-2021 academic year.
- **Nursing Syllabi:** All nursing course syllabi were reviewed in the 2019-2020 academic year. Lesson plans and Syllabi will be reviewed in the 2020-2021 academic year.
- **Special Circumstances:** Due to the unexpected pandemic COVID-19, in-person courses and clinical components were required to move to an online format. Due to this change, the Spring 2020 course coordinators completed the online course evaluation and online peer evaluation. A decrease in the Skyfactor benchmarks was identified for Spring 2020 compared to previous years and Fall 2019.
- **Academic Year Assessment:** The end of academic year documents, including the actions resulting from the assessment, was included in the development and approval of the 2020-2023 CAP. All Assessment Day documents completed in the Fall 2019 and Spring 2020 were reviewed and helped develop and approve the 2020-2023 CAP. The NCLEX-RN plan, QSEN, BSN Essentials, and guiding national standards were reviewed and helped develop and support the 2020-2023 CAP.

## 2019-2020 CAR Action Plan

Below is a list of initiatives for the 2020-2021 academic year. All initiatives have been identified through review of benchmarks and quality improvement efforts:

- **President:**
  - LCN's Strategic plan will be developed and implemented.
- **The Dean of Nursing:**
  - Dean of Nursing to hold Tea with the Dean Fall 2020, Spring 2021, and Summer 2021 semesters.
  - Develop action plan to increase certification of faculty (Certified Nurse Educator-CNE certification)
  - Review the nursing program budget.
- **Director of Assessment:**
  - Conduct and develop action plans for Skyfactor Fall 2020 and Spring 2021 survey.
  - Conduct and develop action plans for the Noel Levitz Fall 2020 survey.
  - Conduct and develop action plans for the NESSE 2021 survey.
  - Conduct Assessment Day for Fall 2020 and Spring 2021.
  - Modify CAP 2020-2023 benchmark to 75% of courses with a clinical component includes simulation experiences.
  - Develop CAP assignment to document culture, ethnic, and social diversity in the following courses: N313 Pathophysiology, N314 Professional Practice, N322 Pharmacology, N323 Mental and Behavioral Health, N433 Infant, Child, and Adolescent Health, and N444 Concepts Synthesis.
  - Modify the Assessment-Measurement section of the Benchmark: 100% of students will be notified of poor academic performance and receive a remediation plan. Change the measurement to review of remediation plans by Remediation Coordinators instead of Course Evaluations. Rationale: Course evaluations do not notify a student if the academic performance is poor.
  - Add the Assessment-Measurement of End of Course Evaluations to the benchmark: 100% of faculty will use best practice teaching methods
  - Modify the CAP 2020-2023 is to better align with the Skyfactor results for the benchmark: 100% of faculty will use best practice teaching methods. Skyfactor does not report data in 100%.
  - Modify the Assessment-Measurement of the benchmark: 90% of students will meet course learning outcomes to completion rate provided by the Director of Enrollment.
- **The Faculty Organization Committee:**
  - The SGA faculty representatives will complete and develop a sign-up sheet to increase SGA representatives for college committees.
- **The Curriculum Committee:**
  - Hold the Spring 2021 Stakeholder meeting.
  - Review and edit the Student Handbook due Spring 2021.
  - Review lesson plans for each course for standardization and best practice in the Fall 2020 semester.
  - Will map specialty courses related to course content and clinical progression.
  - Incorporate ATI EMR and map the use of ATI EMR throughout the program. Curriculum can work on the ATI mapping Fall 2020; budget request can be completed Fall 2020. Review of resources and curricular mapping can be reviewed for Spring 2021.
- **The Professional Development Committee**
  - Review the Faculty Handbook due Spring 2021.
  - Add Faculty Outcomes to the 2020-2021 Faculty Handbook.
  - Develop the Charleston Place of Distribution (POD) in Coles County
  - Conduct an annual needs assessment survey to determine areas to be covered in the Teaching Excellence Workshop and faculty needs.
  - Collaborate with the Simulation Coordinators to provide faculty simulation related training.