

Standard A: Administration and Organization

Expected Level of Achievement:

- 100% of Minimum Standards met and agreed on by PN faculty committee when appropriate.

PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
A.1 Institutional Accreditation – The parent institution shall be approved by the appropriate state body.	College wide	Continuously	The next Higher Learning Commission Reaffirmation of Accreditation is scheduled for 2029-2030.	Accreditation letter on file and on college website.	Continuation of current college wide activities and assessments
A.2a The parent institution shall be a post-secondary educational institution, hospital, or consortium of such institutions.	College Administration	Continuously	The next Higher Learning Commission Reaffirmation of Accreditation is scheduled for 2029-2030.	Accreditation letter on file and on college website.	The Higher Learning Commission is an accreditation body for post-secondary education.
A.2b Institutional Organization – The institutional organizational chart shall indicate lines of authority and relationships with administration, the program, and other departments.	College Administration	Reviewed and revised yearly and as needed by college administration	College Administration team review	Updated October 2020	None
A.3a Program Organization – The program shall have a current organizational chart.	PN Program Director	Reviewed and revised yearly By PN Program Director	Reviewed October 2020	Organizational Chart in PN Policy Manual	None
A.3b					

Program Organization – The program shall have specific current job descriptions for all positions.	PTC Admin, PN Program Director and Human Resources	Reviewed with recommended updates to HR yearly	Reviewed October 2020	Last reviewed in October 2020	HR to update the job description for Administrative III position within the next 12 months.
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Standard B: Philosophy and Graduate Competencies					
Expected Level of Achievement: <ul style="list-style-type: none"> 100% of Minimum Standards met and agreed on by PN faculty committee when appropriate. 					
PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
B.1 The philosophy of the program shall be in writing and consistent with the mission of the parent institution.	PN Program Director & nursing faculty	Reviewed & revised on a yearly basis	Reviewed October 2020	Approved May 2019/Reviewed October 2020	None
B.2 Graduate competencies shall be derived from the program's philosophy.	PN Program Director & nursing faculty	Reviewed & revised on a yearly basis	Reviewed October 2020	Updated January 2019/Reviewed October 2020	None
B.3 The philosophy and graduate competencies shall serve as the framework for program development and maintenance.	PN Program Director & nursing faculty	Reviewed & revised on a yearly basis	Reviewed October 2020	Updated Spring 2019/Reviewed October 2020	None

Standard C: Resources

Expected Level of Achievement:

- 100% of Minimum Standards met and agreed on by PN faculty committee when appropriate.

PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
C.1a Financial Resources – There shall be adequate financial support to provide stability, development and effective operation of the program.	Board of Directors, Administration, Dean, Program Director	Yearly budget July 1- June 30 of each fiscal year	Chancellor's budget committee meets to review requests submitted by each School/Department/Program Evaluation of budget effectiveness at the end of each budget year by Dean & Program Director	Program Director submitted proposed budget for the 2020-2021 fiscal year. The budget was adjusted and approved	None
C.1b Financial Resources – The director of the program shall administer the budget according to parent institutional policies.	The program director administers budget via administrative budget policy	Budget recommendation is made each spring by program director and submitted to Dean for review by the Chancellor's budget committee	Evaluation of budget effectiveness at the end of each budget year by Dean & Program Director	Program Director submitted proposed budget for the 2020-2021 fiscal year. The budget was adjusted and approved	Will work to increase budget to get additional supplies for program. Will also work on finding grant opportunities.
C.1c Financial Resources – The director shall make budget recommendations with	The program director administers budget via	Nursing Faculty involvement in budgeting process is documented via	Administrative Policy, departmental/program budget done each Spring by Program Director	PN Faculty minutes address budgeting and departmental purchases	None

input from the faculty and staff.	admin budget policy	PN Faculty Committee minutes			
C.2a Library and Learning Resource Center – Each program and each satellite campus shall have a library or learning resource center	Library and learning center available to students on Main Campus	PTC Librarian	Library Committee, Librarian, and accreditations surveys	Library hours posted on college website. Library liaisons are available to assist students when needed. Program uses imbedded librarians in the Blackboard portion of several courses.	None

Standard C: Resources

Expected Level of Achievement:

- 100% of Minimum Standards met and agreed on by PN faculty committee when appropriate.

PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
C.2a (cont.) following: (1) Current holdings to meet student educational needs, faculty instructional needs, and scholarly activities. (2) Budget plan for acquisitions of printed and multi-media materials.	PTC Librarian	Library Committee, Librarian, and accreditations surveys	Development, review and revision of policies and holdings	Accreditation current	Librarian will work to update the books related to studying for the NCLEX. The library does currently have some study materials on-hand.

(3) Written process for identifying and deleting outdated holdings.					Databases are being reviewed to ensure adequate access to updated journal resources.
(4) Resources and services accessible and conveniently available.					

Standard D: Facilities

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
D.1a Classrooms and Laboratories – Each program and satellite campus shall have a clinical skills laboratory equipped with necessary educational resources.	Administration, Physical Plant Program Director	Ongoing	Accreditation surveys and nursing faculty recommendations The next Higher Learning Commission Reaffirmation of Accreditation is scheduled for 2029-2030.	Current accreditation; Adequate Classroom and Laboratory space. Classroom space was expanded to accommodate the growing program.	None
D.1b Classrooms and laboratories shall be: 1. Available at the scheduled time 2. Adequate in size and number of students	Program Director; Facilities Management; Administration	Ongoing	Class schedule Reviewed and scheduled prior to the beginning of each academic semester.	Adequate Classroom and Laboratory space	None

<p>3. Climate controlled, ventilated, lighted, and</p> <p>4. Equipped with seating, furnishings and equipment conducive to learning and program goals.</p>					
<p>D.1c Adequate storage space shall be available.</p>	Dean of Science, Math, Allied Health and Program Director	Ongoing	Visual assessments	Adequate Space is available for storage	None
<p>D.1d Facilities shall be in compliance with applicable local, state, and federal rules and regulations related to safety and the Americans with Disabilities Act.</p>	Program Director; Facilities Management; Administration	Ongoing	Visual assessment; Maintenance schedules	In compliance	None
<p>D. 2a The director of the program shall have a private office.</p>	Program Director; Facilities Management; Administration	Ongoing	Visual assessments	In compliance	None
<p>D. 2b Faculty members shall have adequate space to complete duties of their positions and provide uninterrupted work and privacy for conferences with students.</p>	Program Director; Facilities Management; Administration	Ongoing	Visual assessments	In compliance	None

D. 2c There shall also be adequate: <ol style="list-style-type: none"> 1. Office space for clerical staff 2. Secure space for records, files, equipment, and supplies, and 3. Office equipment and supplies to meet the needs of faculty and clerical staff. 	Program Director; Facilities Management; Administration	Ongoing	Visual assessments	In compliance	None
D. 3a Clinical facilities and sites shall provide adequate learning experiences to meet course objectives.	Program Director	Ongoing	Clinical evaluations, student feedback, faculty feedback; Program Director visits to clinical sites	In compliance	None
D. 3b Clinical sites shall be adequately staffed with health professionals	Program Director and Hospital Administration	Ongoing	Visits, Faculty and Student Feedback, Clinical Evaluations	In compliance	None
D.3c Clinical Facilities – The program shall have a current and appropriate written agreement with each clinical site.	Program Director; Legal Department	Yearly	All clinical affiliations updated and renewed each year	Done and on file	Renewed for Fall 2020
D. 3d Written agreements shall include a termination clause and be reviewed annually.	Program Director; Legal Department	Yearly	All clinical affiliations updated and renewed each year	Done and on file	Renewed for Fall 2020

D.3e Clinical Facilities – Students shall receive orientation to each clinical site.	Clinical Instructor and/or Hospital Nurse Educator	Before each rotation	Clinical Facilities Orientation Policy reviewed October 2020	Yearly policy review	None
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Standard E: Personnel

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
E.1a Program Director – The program director shall have a current unencumbered registered nurse license to practice in Arkansas and be employed full time.	Dean of Science, Math, and Allied Health	Every two years	Current licensure renewed and forwarded to Dean and HR every two years	Current	None
E.1b Program Director – The practical nursing program director shall have a minimum of a baccalaureate degree in nursing. Directors appointed prior to January 1, 2004, shall be exempt for the duration of their current position.	Dean of Science, Math, and Allied Health, Human Resources	Upon Hire	Copy of Transcripts kept in HR	Met	None
E. 1e The program director shall have previous	Human Resources; Dean of	Upon Hire	Resume and Interview Process	Met	None

experience in clinical nursing practice and/or education.	Science, Math, and Allied Health				
E. 1f The program director's primary responsibility and authority shall be to administer the nursing program. <ol style="list-style-type: none"> 1. The program director shall be accountable for program administration, planning, implementation, and evaluation. 2. Adequate time shall be allowed for relevant administrative duties and responsibilities. 	Human Resources, Dean of Science, Math, and Allied Health, College Administration	Continuous	Job Descriptions; Job Expectations	In compliance	None
E. 1g The program director shall verify the applicant has completed the program.	Program Director; Records	May and August of each year	Policies and Procedures Review	In compliance	None
E.2a Faculty and Assistant/Adjunct Clinical Instructors – Faculty shall hold a current unencumbered registered nurse license to practice in Arkansas.	Program Director	Every two years	Current licensure renewed and forwarded to Program Director every two years	Current	None
E. 2b Faculty shall have had previous at least two years previous	Human Resources; Program Director	Upon Hire	Transcripts and Resumes, Interview process	Met	None

experience in clinical nursing at or above the education program level.					
E. 2c Faculty teaching in a practical nursing program shall have a degree or diploma above the type of education program offered.	Human Resources; Program Director	Upon Hire	Transcripts and Resumes on File	Met	None
E. 2d Nurses serving as assistant clinical instructors in a practical nursing program shall have a degree or diploma at or above the type of education program offered.	Human Resources; Program Director	Upon Hire	Transcripts and Resumes on File	Met	None
E. 2e Assistant clinical instructors shall: <ol style="list-style-type: none"> 1. Be under the direction of faculty 2. Hold a current unencumbered license to practice in Arkansas, and 3. Have a minimum of one-year experience in the clinical area. 	Human Resources; Program Director	Ongoing	Onboarding process, Transcripts, and Resumes	Met	None

Standard E: Personnel

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
E.2f Faculty and Assistant Clinical Instructors – All faculty shall maintain education and clinical competencies in areas of instructional responsibilities.	Program Director	Yearly	Instructor Profiles to Program Director for review each year	All Profiles are up to date	None
E.2h Faculty shall be organized with written policies, procedures, and, if appropriate, standing committees.	Program Director; Faculty	Yearly	Yearly Policy Review	Ongoing updating and review	Ongoing updating and review
E.2i Nursing faculty policies shall be consistent with parent institutional policies.	Program Director; Dean of Science, Math, and Allied Health; Faculty	Yearly	Yearly Policy Review	In compliance	None
E.2j Program specific policies shall be developed by nursing faculty.	Program Director; Dean of Science, Math, and Allied Health; Faculty	Yearly	Yearly Policy Review	In compliance	None
E.2k Faculty and Assistant Clinical Instructors – A planned program	Program Director	Yearly policy review	Policy review in October 2020	Policy consistent with minimum standard-each	Working to improve orientation to better meet needs of the new

specific orientation for new faculty shall be in writing and implemented.				new faculty will complete nursing faculty orientation	faculty who have little teaching experience.
E.21 Faculty and Assistant Clinical Instructors – Consideration shall be given to safety, patient acuity, and the clinical area in determining the	Program Director	Yearly policy review	Policy review in October 2020	Policy consistent with minimum standard Ratio 1:10 long term care Ratio 1:8 acute care	None

Standard E: Personnel					
Expected Level of Achievement:					
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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
E.21 (cont.) necessary faculty to student ratio for clinical experiences. The faculty to student ratio in clinical experiences shall be: (1) In the acute care setting where students are providing direct patient care the ratio is one faculty to eight students (1:8).					

(2) In the non-acute care setting where students are providing direct patient care the ratio is one faculty member to ten students (1:10).					
(3) In the community setting where the					

Standard E: Personnel

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
E.2l (cont.) students have indirect or direct patient care with a community partner the ratio is one faculty member to fifteen students (1:15).					
E.2m The minimum number of faculty shall be one (1) full-time member in addition to the director.	Program Director	Yearly	Monitor	Currently two (2) full-time faculty for traditional student and one (1) full-time faculty for nontraditional students.	None
E.2n			Review of minutes		None

Faculty and Assistant Clinical Instructors – Faculty meeting shall be regularly scheduled and held. Minutes shall be maintained in writing.	Program Director	Quarterly meetings are standard, both meetings are held more often as needed		Meetings held and minutes available	
E.2o Faculty and Assistant Clinical Instructors – Faculty members shall participate in program activities as per policies and procedures.	Program Director	Quarterly meetings are standard, both meetings are held more often as needed	Review of minutes	Meetings held and minutes available	None

Standard E: Personnel

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
E.3a Support Staff – There shall be secretarial designated support staff sufficient to meet the needs of the program.	Dean of Science, Math, and Allied Health	Ongoing to maintain FTE	Ongoing reassessment	Allied Health Administrative Assistant III is used throughout all allied health programs.	Currently working to secure specific times that are dedicated to nursing work by the Administrative Assistant III

Standard F: Preceptors

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
F.1a Preceptor Utilization- Preceptors shall not be utilized in foundation or introductory courses	Program Director	Yearly when used	Ongoing... Preceptor paperwork	All preceptors met minimum requirements	None
F.1b Preceptors shall not be considered in faculty-student ratio. The ratio of preceptor to student shall not exceed 1:2	Program Director; Faculty	Ongoing	Preceptor policies	Preceptor policies; visits	None
F.1c There shall be written policies for the use of preceptors, that include: <ol style="list-style-type: none"> 1. Communications between the program director and preceptor concerning students; 2. Duties, role, and responsibilities of the program, preceptor, and student; and 3. An evaluation process. 	Program Director; Faculty	Ongoing	Preceptor policies	Faculty/Director review and approval	None
F.1d All preceptors shall be listed on the annual	Program Director	Yearly	Accurate report completion	Review prior to submission	Updated each semester as needed

report by area, agency, and number of students precepted.					
F.2a Preceptor Criteria Practical nurse program student preceptors shall hold a current unencumbered license to practice as a registered nurse, licensed practical nurse, or a licensed psychiatric technician nurse in Arkansas.	Program Director; Faculty	Yearly and As Needed	Online verification	Online verification	None
F.2b Preceptors shall have a minimum of one year experience in the area of clinical specialty for which the preceptor is utilized.	Program Director; Faculty	Yearly	Preceptor paperwork; visits	All preceptors met minimum requirements	None
F.2c Preceptors shall participate in evaluation of the student.	Program Director; Faculty	Yearly	Preceptors policies and paperwork	Met	None
F.3a Student Criteria Precepted students shall be enrolled in courses specific to the preceptor's expertise.	Program Director; Faculty	Yearly	Preceptor Policies and paperwork	Preceptors are currently used in the final review course.	None
F.3b Precepted students shall have appropriate learning experiences prior to the preceptorship.	Program Director; Faculty	Yearly	Preceptor policies and paperwork	Students must complete skills checklist to be eligible for preceptorship	None
F.3c There shall be no reimbursement to students for the	Program Director; Faculty	Yearly	Preceptor policies and paperwork	No money is exchanged for a student's time	None

educational preceptorship.				during the preceptorship.	
F.4a Faculty Criteria Program faculty shall be responsible for the learning activity.	Program Director; Faculty	Yearly	Review policies and procedures	Faculty are responsible for ensuring the completion of the skills check list	None
F.4b Program faculty shall be available for consultation with student and preceptor.	Program Director; Faculty	Yearly	Review policies and procedures	Faculty are available continuously and make preceptor visits.	None
F.4c Program faculty shall be responsible for the final evaluation of the experience.	Program Director; Faculty	Yearly	Review policies and procedures	Faculty assign grades based on visits and input by preceptor.	None

Standard G: Students

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
G.1a Admissions, Readmissions, and Transfers – There shall be written policies for admission, readmission, transfer, and advanced placement of students.	Program Director; Faculty	Yearly	Policy Review	Policy reviewed and updated September 2020	None

G.1b Admission criteria shall reflect consideration of potential to complete the program and meet standards to apply for licensure. (See ACA 17-87-312).	Program Director; Faculty	Yearly	Policy Review	Policy reviewed September 2020	None
G.1c Students who speak English as a second language shall meet the same admission criteria as other students and shall pass an English proficiency examination.	Program Director; Faculty	Yearly	Policy Review	Policy reviewed September 2020	None
G.1d Documentation of high school graduation or an equivalent, as determined by the appropriate educational agency, shall be an admission requirement.	Program Director; Faculty	Yearly	Policy Review	Policy reviewed September 2020	None
G.2 Progression and Graduation – There shall be written policies for progression and graduation of students.	Program Director	Yearly	Policy Review	Policy reviewed September 2020	None
G.3a Student Services – Academic and financial aid services shall be accessible to all students.	College administration	Ongoing	The next Higher Learning Commission Reaffirmation of Accreditation is scheduled for 2029-2030.	Student Services and Financial aid hold regular office hours that are accessible to	None

				both day and evening students.	
G.3b If health services are not available through the parent institution, a plan for emergency care shall be in writing.	Administration; Student Services; Dean of Science, Math, and Allied Health; Program Director	Ongoing	Review process and procedures	Currently in contact with other UA schools to set up an agreement.	Needs further discussion and work toward an agreement.
G.3c There shall be provision for a counseling and guidance program separate from nursing faculty.	Administration; Student Services; Dean of Science, Math, and Allied Health; Program Director	Ongoing	Review of available student services	On campus Counseling services currently sees students.	None
G.4 Appeal Policies: Appeal policies shall be in writing and provide for academic and non-academic grievances.	Administration; Student Services; Dean of Science, Math, and Allied Health; Program Director	Ongoing	Review policies and procedures	Appeal policies are located in the Academic Catalog	None
G.5 Program Governance: Students shall participate in program governance as appropriate.	Program Director	New	Review of options and possibilities	Program Director plans to implement student governance.	Monitor progress. Plans for program student government participation have not yet been implemented. The plan is still in progress.

Standard H: Student Publications

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
H.1 Publications shall be current, dated, and internally consistent with parent institution and program materials.	Program Director	Yearly July	All program materials and reference material within date and no publications more than 5 years old utilized	No text or reference over 5 years old	None
H.2 The following minimum information shall be available in writing for prospective and current students: <ol style="list-style-type: none"> Approval status of the program granted by the board Admission criteria Advanced placement policies Curriculum plan Program costs Refund policy 	Program Director; Dean of Science, Math, and Allied Health; College Administration	Continuously	Review and revision of all forms of communication and student publications.	All information is posted on the website, in the student handbook, each course syllabus, or in the academic catalog	None

<p>g. Financial aid information; and</p> <p>h. Information on meeting eligibility standards for licensure, including information on ACA 17-87-312 and that graduating from a nursing program does not assure ASBN's approval to take the licensure exam.</p>					
<p>H.3 The student handbook shall include the following minimum information:</p> <p>a. Philosophy and graduate competencies.</p> <p>b. Policies related to substance abuse, processes for grievances and appeal, grading, progression, and graduation</p>	Program Director and Faculty	Yearly	New Student Handbook with each incoming class	Student Handbook reviewed each year and updated to ensure accuracy.	None

c. Student rights and responsibilities.					
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Standard I: Educational Program					
Expected Level of Achievement:					
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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
I.1a The education program shall include curriculum and learning experiences essential for the expected entry level and scope of practice – a. Curriculum development shall be the responsibility of the nursing faculty.	Program Director and Nursing Faculty	Yearly	Curriculum Plan review by faculty in faculty meeting	Updated Fall 2019; ongoing Review	None
I.1b Curriculum plan shall be organized to reflect the philosophy and graduate competencies.	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards	Updated Fall 2019; ongoing Review	None
I.1c Courses shall be placed in a logical order and sequential manner showing progression of	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards	Updated Fall 2019; ongoing Review	None

knowledge and learning experiences.					
I.1d Courses shall have written syllabi indicating learning experiences and requirements.	Program Director and Nursing Faculty	Each Semester	College level standard syllabi used as a base. Changes are made based on policies and procedures review.	Syllabi are available for all courses. New information added as needed.	None
I.1e Theory content shall be taught concurrently or prior to related clinical experience.	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None
I.1f Clinical experiences shall include expectations of professional conduct by students.	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None
I.1g Curriculum plans for all programs shall include appropriate content in: (1) Introduction to current federal and state patient care guidelines.	Program Director and Nursing Faculty	Yearly	Curriculum Plan review by faculty in faculty meeting	Updated Fall 2019; ongoing Review	None

Standard I: Educational Program

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data	Actions for Program, Development,

				Collection and Analysis	Maintenance, or Revision
I.1g (cont.) (2) Current and emerging infectious diseases. (3) Emergency preparedness for natural and man-made disasters. (4) Impact of genetic research and cloning. (5) End of life care, and (6) Legal and ethical aspects of nursing, including the <i>Arkansas Nurse Practice Act</i> .	Program Director and Nursing Faculty	Yearly	Curriculum Plan review by faculty in faculty meeting	Updated Fall 2019; ongoing Review	None
I.2a The curriculum plan for practical nurse programs shall include Theoretical content and clinical experiences that focus on: (1) Care for persons throughout the life span including cultural sensitivity.	Program Director and Nursing Faculty	Yearly	Curriculum Plan review by faculty in faculty meeting	Updated Fall 2019; ongoing Review	None

Standard I: Educational Program	
Expected Level of Achievement: •	
PLAN	IMPLEMENTATION

Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
I.2a (cont.) (2) Restoration, promotion, and maintenance of physical and mental health; and (3) Prevention of illness for individuals and groups.	Program Director and Nursing Faculty	Yearly	Curriculum Plan review by faculty in faculty meeting	Updated Fall 2019; ongoing Review	None
I.2b The length of the practical nurse curriculum shall be no less than ten (10) calendar months which includes a minimum of thirty-five (35) credit hours in nursing content,	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None
I.2c Theory content may be in separate courses or integrated and shall include at least the following: <ol style="list-style-type: none"> 1. Anatomy and physiology 2. Nutrition 3. Pharmacology and intravenous therapy 4. Growth and development 	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None

<p>throughout the lifespan</p> <ol style="list-style-type: none"> 5. Fundamentals of nursing 6. Gerontological nursing 7. Nursing of adults 8. Pediatric nursing 9. Maternal/infant nursing 10. Mental health nursing 11. Principles of management in long-term care, including delegation. 					
<p>I.2d Clinical experiences shall be in the areas of:</p> <ol style="list-style-type: none"> 1. Fundamentals of nursing, 2. Nursing of adults, 3. Pediatric nursing 4. Gerontological nursing, 5. Maternal/infant nursing, 6. Mental health, 7. Administration of medications, including intravenous therapy, and 8. Management in long-term 	Program Director and Nursing Faculty	Yearly	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None

care, including delegation.					
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Standard J: Program Evaluation					
Expected Level of Achievement: <ul style="list-style-type: none"> 					
PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
J.1 Faculty shall be responsible for program evaluation	Program Director and Nursing Faculty	Ongoing	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None
J.2 A systematic evaluation plan of all program aspects shall be in writing, implemented, and include: philosophy and graduate	Program Director and nursing faculty	Ongoing	Systematic Plan reviewed during faculty meetings each quarter and submitted to college assessment committee	Updated Fall 2019; ongoing Review	Ongoing systematic program evaluations

competencies, curriculum, policies, resources, facilities, faculty, students, graduates, and employer evaluation of graduates.					
J.3 The outcomes of the systematic evaluations shall be used for ongoing maintenance and development of the program.	Program Director and Nursing Faculty	Ongoing	Systematic Plan reviewed during faculty meetings each quarter and submitted to college assessment committee	Updated Fall 2019; ongoing Review	Ongoing systematic program evaluations
J.4 Appropriate records shall be maintained to assist in overall evaluation of the program after graduation.	Program Director and Nursing Faculty	Ongoing	Student Evaluations; Faculty feedback; changes in standards. Curriculum Plan reviewed by faculty in faculty meetings	Updated Fall 2019; ongoing Review	None
J.5 The systematic program evaluation plan shall be periodically reviewed.	Program Director and nursing faculty	Quarterly	Systematic Plan reviewed during faculty meetings each quarter and submitted to college assessment committee	New Systematic Plan began Fall 2019	Ongoing systematic program evaluations
J.6 Students shall evaluate the courses, instructors, preceptors, and clinical experiences throughout the program, and the overall program after graduation.	Program Director and nursing faculty	Quarterly	Systematic Plan reviewed during faculty meetings each quarter and submitted to college assessment committee	New Systematic Plan began Fall 2019	Ongoing systematic program evaluations

Standard K: Records

Expected Level of Achievement:

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PLAN				IMPLEMENTATION	
Component	Responsible Person(s)	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for Program, Development, Maintenance, or Revision
K.1a Transcripts of all students enrolled in the program shall be maintained according to policies of the parent institution. a. Transcripts shall reflect courses taken.	Program Director; Records; Registrar	Ongoing	Records are maintained as paper files while the student is enrolled. Once student cohort has graduated, files are scanned into electronic format.	Reviewed during the admission process and each semester while enrolled.	None
K.1b The final transcript shall include: <ol style="list-style-type: none"> Dates of admission; Date of separation or graduation from the program; Hours/credits/units earned, degree, diploma, or certificate awarded; The signature of the program director, registrar, or official electronic signature; and 	Program Director; Records; Registrar	Ongoing	Records are maintained as paper files while the student is enrolled. Once student cohort has graduated, files are scanned into electronic format.	Reviewed during the admission process and each semester while enrolled.	None

5. The seal of the school or be printed on security paper or an official electronic document.					
K.1c Current program records shall be safely stored in a secure area.	Program Director; Records; Registrar	Ongoing	Records are maintained as paper files while the student is enrolled. Once student cohort has graduated, files are scanned into electronic format.	Reviewed during the admission process and each semester while enrolled.	None
K.1d Permanent student records shall be safely stored to prevent loss by destruction and unauthorized use.	Program Director; Records; Registrar	Ongoing	Records are maintained as paper files while the student is enrolled. Once student cohort has graduated, files are scanned into electronic format.	Reviewed during the admission process and each semester while enrolled.	None