

# Annual Report

## 1 General Information:

Enter the KBN Program Code and the Program of Nursing Name in the box below.

KBN Program Code \_\_\_\_\_

Program of Nursing Name \_\_\_\_\_

## 2 Program Administrator Information:

In the box below, write your first name, last name, title and credentials (PhD, DNP, DNS, MSN, BSN, DNP, APRN....)

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Title \_\_\_\_\_

Credentials \_\_\_\_\_

## 3 Program Administrator Contact Information:

In the box below, provide your work mailing address, including city, state and zip code, email address and phone number.

Mailing Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Phone \_\_\_\_\_

4 I have verified that the contact information is correct.

yes

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**5 Institutional Information:**

In the box below please provide the name of the academic institution for whom you are employed and the name and title of the chief institutional officer.

Name of Academic Institution

\_\_\_\_\_

Name and Title of Chief Institutional Officer (i.e. president)

\_\_\_\_\_

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6 The Academic Institution is (select all that apply):

Public

Private

Consortium

Nonprofit

Proprietary

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**7 Governing Institution Accreditation**

SACS

ACICS

Other \_\_\_\_\_

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8 If your **Program of Nursing** is accredited, please select the organization with whom it is accredited.

- CCNE
  - ACEN
  - CNEA
  - Not Accredited
- 

9 If your **Program of Nursing** is accredited, please select the current accreditation status.

- Initial Accreditation
  - Continuing Accreditation
  - Continuing Accreditation with Conditions
  - Continuing Accreditation with Warning
- 

10 If your **Program of Nursing** is accredited, provide the following information in the box below:

- Initial Accreditation Date: \_\_\_\_\_
  - Most Recent Accreditation Date:  
\_\_\_\_\_
  - Accreditation Term Expiration Date:  
\_\_\_\_\_
  - Last Onsite Accreditation Evaluation Visit:  
\_\_\_\_\_
  - Next Onsite Accreditation Visit:  
\_\_\_\_\_
-

**11 Program of Nursing Type:**

**Please select the nursing program type for which you are program administrator. Please select all that apply.**

- PN
  - ADN
  - Generic BSN
  - Accelerated BSN
  - Prelicensure MSN
  - MEEP
-

12 How many cohorts do you admit to your program per year?

- one
  - two
  - three
  - four
  - five
  - six
  - seven
  - eight
  - nine
  - ten
  - eleven
  - twelve
-

13 In what months do you admit students? (please check all that apply.)

- August
- September
- October
- November
- December
- January
- February
- March
- April
- May
- June
- July

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14 Record the Program of Nursing enrollment baseline number as established with the Kentucky Board of Nursing.

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15 **Annual Applicant Data:**

The three (3) questions below relate to nursing applicants and enrollments for the Reporting Period (July 1- June 30). If there are two or more cohorts admitted per year, please total these

numbers together for the annual applicant data questions. If an answer for any group is 'none', then please enter zero (0).

\_\_\_\_\_ What is the total number of **qualified applicants** that met the admission criteria during the reporting period?

\_\_\_\_\_ What is the total number of **admitted applicants** during the reporting period?

\_\_\_\_\_ What is the total number of **new enrollees** during the reporting period?

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16 Why were all qualified applicants not admitted to the program of nursing?  
(Select all that apply.)

- All qualified applicants were admitted to the program of nursing.
  - Insufficient number of nursing faculty.
  - Insufficient lab space.
  - Insufficient number of preceptors.
  - Other: Please discuss in the box provided below.
- 

- Insufficient number of clinical sites.
  - Insufficient classroom space.
  - Insufficient number of clinical instructors.
  - Overall budget cuts.
- 

17 **Current Student Enrollment Data:**

**Total Student Enrollment** is a count of the number of students enrolled during the reporting period (July 1-June 30). Include students at all points of the program's curriculum sequence, including newly enrolled, continuing, transfers and readmitted students. Include pre-licensure students only.

**Include** those students eligible to take the NCLEX pre-licensure exam upon graduation.

**Do not** include students taking pre-nursing courses who are not officially admitted to the nursing program.

\_\_\_\_\_ What was the **total student enrollment** during the **reporting period**?

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18 Has there been a significant change in student enrollment in comparison to the previous academic year?

- There has been no change in enrollment.
  - Enrollment has ***increased*** by **more than 20%**.
  - Enrollment has ***increased*** by **less than 20%**.
  - Enrollment has ***decreased*** by **more than 20%**.
  - Enrollment has ***decreased*** by **less than 20%**.
- 

19 **Demographics:**

This Demographics question applies to all students currently enrolled in the program of nursing.

***Each of the following 3 questions must have the same total*** (If there are 100 students listed under race/ethnicity, then there must be 100 students listed for age and gender).

The **total numbers must match** the number used for the previously asked question: **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

***Student Race/Ethnicity***

American Indian/Alaska Native : \_\_\_\_\_

Asian : \_\_\_\_\_

Black/African American : \_\_\_\_\_

Caucasian/White : \_\_\_\_\_

Hispanic/Latino : \_\_\_\_\_

Other : \_\_\_\_\_

Unknown/Missing : \_\_\_\_\_

Total : \_\_\_\_\_



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**20 Demographics:**

This demographics question applies to all students currently enrolled in the program of nursing.

This must equal the total number noted in the question above. **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

**Age Range**

17-29 : \_\_\_\_\_

30-54 : \_\_\_\_\_

55 and above : \_\_\_\_\_

Total : \_\_\_\_\_

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**21 Demographics:**

This question applies to all students currently enrolled in the program of nursing.

This question must equal the total number noted in the section above: **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

**Identified Gender**

Male : \_\_\_\_\_

Female : \_\_\_\_\_

Total : \_\_\_\_\_

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**22 Graduates:**

Prelicensure Graduates is a count of the number of students who successfully completed the program requirements and were formally awarded a degree or diploma during the reporting period (July 1-June 30).

**Graduation Rate** is the **percent** of the admitted cohort(s) that graduated **within the maximum time frame allowed for program completion** (The maximum time frame is determined by multiplying the standard program length for normally progressing students by 1.5).

If any of the answers are none, please enter zero (0).

**Note:** *The question will fall below the text box.*

\_\_\_\_\_ 1. Total number of students who were admitted to the original cohort(s) that were expected to graduate during this reporting period (i.e., if a 2 year nursing program, how many students were admitted into the original cohort 2 years previously). **Exclude** English as a Second Language (ESL) students from this number.

\_\_\_\_\_ 2. Total number of ESL students who were admitted to the original cohort(s) that were expected to graduate during this reporting period.

\_\_\_\_\_ 3. Total number of students who graduated during the reporting period **that were admitted to the original cohort(s)**. (Add together answers provided in 1 and 2).

\_\_\_\_\_ 4. Total number of students who graduated during the reporting period **who were not in the original cohort but were added to the graduation numbers due to readmissions or course repeats**.

\_\_\_\_\_ 5. Total number of graduates **who were not in the original cohort but were added to the graduation numbers via some type of advanced placement** (LPN students/transfer students or other advanced placement students).

\_\_\_\_\_ 6. Total number of students who graduated during the reporting period (answers to 3, 4 and 5 should add up to this number).

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23 What is the graduation rate for this reporting period?

(Graduation rate means the percent of the admitted cohort (new enrollees) that graduate within the maximum time frame allowed for completion. The maximum time frame is determined by multiplying the standard program length for normally progressing students by 1.5. After the graduation rate is figured for individual cohorts, average the cohort rates to obtain a yearly graduation rate.)

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**24 NCLEX:**

\_\_\_\_\_ What is the total number of graduates whose names were released to the KBN certified list?

\_\_\_\_\_ Of those students whose names were released to the certified list, how many were unsuccessful on the first (1st) NCLEX attempt?

\_\_\_\_\_ Of those students who were unsuccessful on the first (1st) NCLEX attempt, how many had to repeat at least one nursing course?

\_\_\_\_\_ Of those students who were unsuccessful on the first (1st) NCLEX attempt, how many were ESL students? (Place a zero in the box above if the answer is none.)

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**25 Students at Risk:**

Which of the following risk factors have been identified for the nursing student population? (Select all that apply.)

- We currently do not have students at risk
  - Health issues (personal or family)
  - Working more than 20 hours a week outside school
  - Poor math skills upon entering the nursing program
  - Little to no science preparation in high school
  - Other: Please discuss in the box below
- 
- Poor classroom/online attendance
  - English as a second language
  - Required repetition of a prerequisite course
  - Prerequisite courses taught by faculty/instructors other than nursing faculty or instructors
  - Personal issues (divorce, death in family, abuse, etc.)
-

26 What mechanisms are in place to help students enrolled in the nursing program with identified risk factors as noted in the question above? (Select all that apply.)

- None
  - Peer mentoring
  - Faculty mentoring
  - Remedial/developmental coursework (required)
  - Remedial/developmental coursework (recommended)
  - Comprehensive learning assistance center/lab
  - Performance contracts for students in academic difficulty
  - Study skills center
  - Other: please discuss in the box below
- 

- Supplemental instruction
  - Tutoring
  - Early warning system
  - Mid-term progress reports
  - Organized study groups
  - Online learning support
  - Student counseling center/health center
  - ESL services
-

27 Are admission criteria established for the program of nursing?

- Yes
  - No
- 

28 Does the program of nursing consistently adhere to the established admission criteria?

- Yes
  - No
  - If "no" was selected, please explain/discuss.
- 

29 Preadmission Tools: Select all diagnostic tools utilized by the Program of Nursing for preadmission purposes.

- Preadmission diagnostic tools are not used.
  - Learning Styles Assessment
  - TOEFL
  - HESI
  - TEAS
  - Other: Please discuss in the box below.
-

30 If a preadmission diagnostic tool is used is there a requisite test score that a candidate must achieve?

Yes

No

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31 Curriculum:

What forms of didactic content delivery does your program use? (Select all that apply.)

Online

Alternate scheduling (e.g. part-time, weekends)

ITV (interactive television)

Other: Please discuss in the box below

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Hybrid (face to face + online combination)

Traditional (face to face)

Self paced learning packages/courses

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32 For programs of nursing that use online delivery, what percentage of your nursing didactic content is online?

- We do not use online delivery in our program of nursing.
  - 0-25%
  - 26-50%
  - 51-75%
  - 76-100%
- 

33 **Standardized Testing:**

A standardized test is any form of test that (1) requires all test takers to answer the same questions, or a selection of questions from a common bank of questions, and (2) is scored in a "standard" or consistent manner, which makes it possible to compare the relative performance of individual students or groups of students to national data.

Do you use standardized testing in your nursing program?

- Yes
  - No
- 

34 Do students have to achieve a certain requisite test score on a standardized test in some or all nursing courses to progress through the nursing program?

- Yes
  - No
-

35 Does the program of nursing require students to take a final/exit standardized test as part of the graduation requirements?

Yes

No

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36 If the answer to the question above was yes, how many attempts does the program of nursing allow? (Please discuss in the box below.)

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37 Does the program of nursing require the student to achieve a requisite score on the final/exit standardized test as part of the program of nursing graduation requirements?

Yes

No

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38 Does the program of nursing require the student to achieve a requisite score on the final/exit standardized test in order for the student's name to be submitted on the KBN certified list?

Yes

No

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39 In the past year, how many students were unable to graduate or have their names submitted to the KBN certified list due to the inability of the student to achieve the requisite score on the



final/exit standardized test? (If the answer to this question is none, please place a zero (0) inside the box.)

\_\_\_\_\_ Students who did not have their name submitted to the certified list

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40 If there were students who were not allowed to graduate or be placed on the certified list due to the inability to achieve the requisite score on the final/exit standardized test, what options exist for the student(s) to satisfactorily complete the program?

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41 **Clinical Implementation and Sites:**

During the reporting period, did the program of nursing experience difficulty in obtaining clinical sites for the program? If the answer to this question is yes, please discuss in the text box.

No

Yes \_\_\_\_\_

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42 What alternative strategies has the program of nursing utilized to provide students with clinical experiences? (select all that apply.)

- Do not have difficulty in obtaining clinical experiences.
  - Twelve (12 hour) shifts
  - Evening shifts
  - Non traditional venues: Please discuss below.
- 

- Weekend shifts
  - Use of high fidelity simulation
  - Night shifts
- 

43 During the reporting period, did you use clinical sites in another state/jurisdiction for prelicensure clinical experiences?

- No
  - Yes. If yes, please discuss in the box below.
- 

44 Simulation:

Is simulation routinely used in the program of nursing?

- No
  - Yes
-

45 If you answered yes to the preceding question, identify how simulation is used in the delivery of curriculum. Select all that apply.

- Skills checkoff
  - Remediation
  - Supplemental to traditional clinical experiences
  - To replace traditional clinical experiences
  - Other: please discuss in the text box below.
- 

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Q46 Is simulation used to replace traditional clinical experiences?

- yes
  - no
- 

47 If simulation is used to replace traditional clinical experiences what percentage of traditional clinical/lab hours are replaced with simulation?

- 10-20%
  - 21-30%
  - 31-40%
  - 41-50%
-

48 Of the total amount of simulated experiences used to achieve clinical and programmatic outcomes; what percentage of experiences are in:

- \_\_\_\_\_ A basic skills lab setting
- \_\_\_\_\_ Role playing with the use of standardized patients (example: health assessment lab)
- \_\_\_\_\_ High fidelity with the use of computerized mannequins (such as Noel)
- \_\_\_\_\_ Other: Please discuss in the text box below

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49 Over the last academic year has the program of nursing had difficulty in locating clinical supervision for the 120 hour integrated practicum?

- No
- Yes; Please explain a yes answer in the text box below

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50 What is your program of nursing doing to encourage experienced nurses to become preceptors?

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51 What is the total number of clinical clock hours required by the program of nursing? Of those clinical clock hours required, what is the number of hours spent in direct patient contact (traditional clinical experiences).

- \_\_\_\_\_ Total number of clinical clock hours required by the program of nursing
- \_\_\_\_\_ Number of clock hours spent in direct patient contact (traditional clinical experiences)

52 Select those areas where 50% or more of the clinical experience has been replaced with lab/simulation.

- None
  - Maternal-Infant/OB
  - Medical-Surgical
  - Pediatrics
  - Mental Health
  - Other: \_\_\_\_\_
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53 **Faculty:**

For the program of nursing, what is considered a standard work load?

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54 For the program of nursing, how is faculty workload defined?

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55 How many of the faculty are working overload? (Please enter a number. If none of your faculty are working overload enter zero.)

\_\_\_\_\_ Number of faculty who are working overload  
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56 If faculty are working overload, what is the percentage of faculty working overload? (If no faculty are working overload, please enter zero (0).)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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57 What is the total number of budgeted full-time nursing faculty positions that were vacant at any time during the reporting period (July 1-June 30)

\_\_\_\_\_

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58 For the reporting period, record the total **full-time nursing faculty vacancies**. Give the total number of vacancies for the areas listed below. If no faculty vacancies exist for a given area then record zero (0).

Fundamentals/Basic Skills : \_\_\_\_\_

Medical-Surgical : \_\_\_\_\_

Maternal-Child : \_\_\_\_\_

Mental Health : \_\_\_\_\_

Pediatrics : \_\_\_\_\_

Community : \_\_\_\_\_

Other : \_\_\_\_\_

Total : \_\_\_\_\_

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59 For the reporting period, record the total **part-time nursing faculty vacancies**. Give the total number of vacancies for the areas listed below. If no faculty vacancies exist for a given

area then record zero (0).

Fundamentals/Basic Skills : \_\_\_\_\_

Medical-Surgical : \_\_\_\_\_

Maternal-Child : \_\_\_\_\_

Mental Health : \_\_\_\_\_

Pediatrics : \_\_\_\_\_

Community : \_\_\_\_\_

Other : \_\_\_\_\_

Total : \_\_\_\_\_

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60 Does the program of nursing currently (to date) have unfilled faculty positions for this coming academic year?

No

Yes

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61 If the answer to question the question regarding unfilled faculty positions was yes, what is the number of unfilled faculty positions due to faculty resignations? (Enter zero if there have been no faculty resignations)

\_\_\_\_\_

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62 If the answer to the question regarding unfilled faculty positions was yes, what is the number of unfilled faculty positions due to faculty retirements? (Enter zero if there have been no faculty resignations)

\_\_\_\_\_

63 Has the program of nursing experienced difficulty in hiring qualified didactic faculty during the reporting period?

No

Yes

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64 Has the program of nursing experienced difficulty in hiring qualified clinical faculty during the reporting period?

No

Yes

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65 If there are unfilled positions, or there have been difficulties in hiring qualified faculty, which of the following have contributed to these difficulties? (Select all that apply)

We have experienced *no difficulty* in hiring qualified faculty

Lack of educational preparation

Inability to recruit qualified faculty because of competition for jobs with other market places

Salary

Qualified applicants for faculty positions are unavailable in your geographic area

Insufficient funds to hire new faculty

Hiring freeze

Other \_\_\_\_\_

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**66 Compliance:**

The Compliance section requires that all questions are answered. If a question is answered



"no" then a reason ***must*** be provided. Should no reason be provided, then the survey will be considered incomplete and returned. Note: ***Each Program Administrator is responsible to verify and accept the completeness and accuracy of the Annual Report and to verify that the program of nursing is in compliance with Kentucky Administrative Regulations.***

**Validation of Compliance in Accordance with 201 KAR 20: 260-360.**

	Yes	No
The governing institution provides fiscal, human, physical, clinical and technical resources that are adequate to support the program mission, processes, security and outcomes.	<input type="radio"/>	<input type="radio"/>
The governing institution makes financial resources available to the program of nursing consistent with equivalent programs at the governing institution.	<input type="radio"/>	<input type="radio"/>
The program administrator has a minimum of fifty percent (50%) of his/her time allotted for the purpose of completing those duties outlined in the administrative regulation 201 KAR 20:260; including the participation in the preparation and management of the program of nursing budget, screening and recommendation of candidates for nurse faculty appointment, retention and promotion and providing leadership within the nurse faculty for the development, implementation and evaluation of the program of nursing and program outcomes.	<input type="radio"/>	<input type="radio"/>
The current curriculum is implemented as submitted to the Kentucky Board of Nursing and follows the regulatory guidelines noted in the administrative regulation 201 KAR 20:320	<input type="radio"/>	<input type="radio"/>

Information describing the program of nursing is accurate, complete and consistent across all mediums and is accessible to the public.

All faculty meet the academic and experiential qualifications noted in the administrative regulations 201 KAR 20: 260 and 201 KAR 20:310.

All faculty hold a current, unrestricted and unencumbered license to practice as a registered nurse in Kentucky.

The faculty to student clinical ratio is no more than 1: 10.

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67 If any of the answers in Question 63 is no, please explain in the text box provided below.

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68 By entering my name in the box below, I verify and accept the completeness and accuracy of the above information.

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69 Does the program of nursing offer an RN to BSN track?

No

Yes

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**70 ANNUAL REPORT FOR PROGRAMS OF NURSING OFFERING AN RN TO BSN TRACK:**

By law, prelicensure nursing education programs in Kentucky are required to seek approval from KBN. Nursing education programs offering baccalaureate nursing courses to registered nurses are **NOT** under the jurisdiction of KBN, since RNs returning to school to obtain a BSN are already licensed to practice as registered nurses. We are requesting that each program of nursing that offers an in-state RN to BSN program complete this section to obtain workforce data to determine need for additional RN to BSN programs offered through the commonwealth. **Completion of this section is voluntary.**

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71 What is the enrollment baseline for the RN-BSN program?

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72 Annual Applicant Data:

**Annual Applicant Data:**

The three (3) questions below relate to nursing applicants and enrollments for the Reporting Period (July 1- June 30). If there are two or more cohorts admitted per year, please total these numbers together for the annual applicant data questions. If an answer for any group is 'none', then please enter zero (0).

\_\_\_\_\_ What is the total number of **qualified applicants** that met the admission criteria during the reporting period?

\_\_\_\_\_ What is the total number of **admitted applicants** during the reporting period?

\_\_\_\_\_ What is the total number of **new enrollees** during the reporting period?

73 Why were all qualified applicants not admitted to the program of nursing?  
(Select all that apply.)

- All qualified applicants were admitted to the program of nursing.
- Insufficient number of nursing faculty.
- Insufficient lab space.
- Insufficient number of preceptors.
- Other: Please discuss in the box below.

- 
- Insufficient number of clinical sites.
  - Insufficient classroom space.
  - Insufficient number of clinical instructors.
  - Overall budget cuts.

74 **Total Student Enrollment** is a count of the number of students enrolled during the reporting period (July 1-June 30). Include students at all points of the RN-BSN program's curriculum sequence, including newly enrolled, continuing, transfers and readmitted students. Include pre-licensure students only.

**Include** those students eligible to take the NCLEX pre-licensure exam upon graduation.

**Do not** include students taking pre-nursing courses who are not officially admitted to the nursing program.

\_\_\_\_\_ What was the **total student enrollment** during the **reporting period**?

75 Has there been a significant change in student enrollment in comparison to the previous academic year?

- There has been no change in enrollment.
  - Enrollment has increased by more than 20%.
  - Enrollment has increased by less than 20%.
  - Enrollment has decreased by more than 20%.
  - Enrollment has decreased by less than 20%.
- 

76 **Demographics:**

This Demographics question applies to all RN-BSN students currently enrolled in the program of nursing.

***Each of the following 3 questions must have the same total*** (If there are 100 students listed under race/ethnicity, then there must be 100 students listed for age and gender).

The ***total numbers must match*** the number used for the previously asked question: **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

***Student Race/Ethnicity***

American Indian/Alaska Native : \_\_\_\_\_

Asian : \_\_\_\_\_

Black/African American : \_\_\_\_\_

Caucasian/White : \_\_\_\_\_

Hispanic/Latino : \_\_\_\_\_

Other : \_\_\_\_\_

Unknown/Missing : \_\_\_\_\_

Total : \_\_\_\_\_

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**77 Demographics:**

This demographics question applies to all RN-BSN students currently enrolled in the program of nursing.

This must equal the total number noted in the question above. **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

**Age Range**

17-29 : \_\_\_\_\_

30-54 : \_\_\_\_\_

55 and above : \_\_\_\_\_

Total : \_\_\_\_\_

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**78 Demographics:**

This question applies to all RN-BSN students currently enrolled in the program of nursing.

This question must equal the total number noted in the section above: **What is the total number of students enrolled in the nursing program during the reporting period?**

**Note:** The Demographics Data requires a number to be entered next to each item. Zero (0) is an acceptable answer.

**Identified Gender**

Male : \_\_\_\_\_

Female : \_\_\_\_\_

Total : \_\_\_\_\_

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**79 This is the end of the annual report. Selection of the forward key will submit this report. Once the report has been submitted, the report can no longer be edited. Please take a moment to review this report prior to submission. Thank you.**

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