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New OCIS Notification – UT Medical Center & Cherokee Farms

The University of Tennessee Knoxville

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The University of Tennessee Knoxville, "New OCIS Notification – UT Medical Center & Cherokee Farms" (2023). *SACSCOC Documentation*.

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THE UNIVERSITY OF
TENNESSEE
KNOXVILLE

March 28, 2023

Dr. Kevin Sightler
SACS Commission on Colleges
1866 Southern Lane
Decatur, GA 30033

Re: BS in Nursing at UT Medical Center & Cherokee Farms - Notification

Dear Kevin,

Please accept this letter as notification of off-campus site instruction of 25-49% for the Bachelor of Science in Nursing (BSN) program at the University of Tennessee Medical Center (UTMC) and Cherokee Farms.

University of Tennessee Medical Center
2121 Medical Center Way
Knoxville, TN 37920

Cherokee Farms
2706 Cherokee Farm Way
Knoxville, TN 37920

The program will enroll junior level students in fall 2023, with a cohort of 54 students who will be instructed for five consecutive terms, including one mini and one summer term at UTMC.

This is not a new program, and there are no curricular changes. This is an avenue for increasing enrollment and providing exclusive onsite clinical training to students in the acute care setting with our strongest academic practice partner. The coursework is a combination of didactic and clinical instruction. Graduates will be committing to work for three years at UTMC in exchange for having their five terms of tuition covered by UTMC. UTMC has space at its facility to dedicate for didactic, clinical and simulation lab instruction. Additional clinical placements for these students will be guaranteed above our existing placements for BSN students.

Please contact accreditation liaison Dr. Heather Hartman with any questions you may have regarding this agreement.

Sincerely,

Attachment

Cc: Dr. John Zomchick, Provost and Senior Vice Chancellor, UTK
Dr. Ozlem Kilic, Interim Vice Provost for Academic Affairs, UTK
Dr. Shelia Swift, Interim Executive Associate Dean of Academic Affairs, College of Nursing, UTK
Dr. Victoria Niederhauser, Dean, College of Nursing, UTK

Substantive Change Cover Sheet

Submit to SACSCOC,
Substantive Change, 1866
Southern Lane, Decatur, GA
30033. One copy only;
electronic media preferred.
Do not email submissions
or send copies to staff.


Note:

1. Include a completed cover sheet with each submission; please don't submit a cover sheet only.
2. Submit substantive changes as separate submissions except as permitted by policy.
3. Submit substantive changes defined in policy only; others are not reviewable.
4. For best results, download this form and complete with [Adobe Reader](#). Hover mouse over fields for guidance.

INSTITUTIONAL INFORMATION

INSTITUTION (NO ABBREVIATIONS PLEASE)	CITY + STATE/PROVINCE
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SUBSTANTIVE CHANGE RESTRICTION

1. Is the institution currently on Warning, Probation, or Probation for Good Cause?	<input type="radio"/> Yes	<input type="radio"/> No
2. Was the institution placed on Warning, Probation, or Probation for Good Cause on or after September 3, 2020, and subsequently removed from sanction?	<input type="radio"/> Yes	<input type="radio"/> No
3. Is the institution currently under provisional certification for participation in federal financial aid programs?	<input type="radio"/> Yes	<input type="radio"/> No
If ANY are "Yes" the institution is on SUBSTANTIVE CHANGE RESTRICTION . Additional and/or different requirements may apply; consult policy.		

SUBMISSION INFORMATION

SUBSTANTIVE CHANGE TYPE (SELECT FROM DROP-DOWN LIST; SUBMIT ONLY TYPES DEFINED IN POLICY)	SUBMISSION DATE
SUBSTANTIVE CHANGE DESCRIPTION (BRIEF SUMMARY)	INTENDED IMPLEMENTATION

OFF-CAMPUS INSTRUCTIONAL SITES SUBMITTED IN THIS SUBSTANTIVE CHANGE

Site Name, Physical Address, City, State/Province, ZIP or Postal Code, and Country/Territory

1.	
2.	
3.	
4.	
5.	There are more than 5 sites in this submission → <input type="radio"/>

PROGRAMS SUBMITTED IN THIS SUBSTANTIVE CHANGE

Include credential AND discipline: e.g., Associate of Arts in English, Bachelor of Science in Physics, Certificate in Office Management, etc.

1.	
2.	
3.	
4.	
5.	There are more than 5 programs in submission → <input type="radio"/>

SUBMITTED	FOR OFFICE USE
I certify the information on this form is correct and accurately represents the current status of the institution at the time of submission.	
SUBMITTING LIAISON or CEO NAME	EMAIL ADDRESS

Revised 01/31/2022

[Check for current version](#)