



WEST VIRGINIA SECRETARY OF STATE

MAC WARNER

ADMINISTRATIVE LAW DIVISION

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4/10/2019 12:35:53 PM

Office of West Virginia
Secretary Of State

**NOTICE OF FINAL FILING AND ADOPTION OF A LEGISLATIVE RULE AUTHORIZED
BY THE WEST VIRGINIA LEGISLATURE**

AGENCY: Registered Professional Nurses TITLE-SERIES: 19-01

RULE TYPE: Legislative Amendment to Existing Rule: Yes Repeal of existing rule: No

RULE NAME: Policies, Standards and Criteria for the Evaluation,
Approval and National Nursing Accreditation of
Prelicensure Nursing Education Programs

CITE STATUTORY AUTHORITY: W. Va. Code §§ 30-1-4, 30-7-4

The above rule has been authorized by the West Virginia Legislature.

Authorization is cited in (house or senate bill number) SB 199

Section §64-9-8 Passed On 3/8/2019 12:00:00 AM

This rule is filed with the Secretary of State. This rule becomes effective on the following date:

April 10, 2019

This rule shall terminate and have no further force or effect from the following date:

April 10, 2029

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENT IS TRUE AND CORRECT.

Yes
Alice R Faucett -- By my signature, I certify that I am the person authorized to file legislative rules,
in accordance with West Virginia Code §29A-3-11 and §39A-3-2.

TITLE 19
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF EXAMINERS
FOR REGISTERED PROFESSIONAL NURSES

SERIES 1
POLICIES , STANDARDS AND CRITERIA FOR THE EVALUATION, APPROVAL AND
NATIONAL NURSING ACCREDITATION OF PRELICENSURE NURSING EDUCATION
PROGRAMS

§19-1-1. General.

1.1. Scope. -- This rule establishes the policies and standards criteria for the evaluation, approval and accreditation of colleges, departments or schools of nursing.

1.2. Authority. -- W. Va. Code §§30-7-4 and 30-1-4.

1.3. Filing Date. -- April 10, 2019.

1.4. Effective Date. -- April 10, 2019.

1.5. Sunset Provision. -- This rule shall terminate and have no further force or effect upon April 10, 2029.

§19-1-2. Definitions.

These words and terms mean the following:

2.1. "Accredited college, department or school of nursing" means a college, department or school nursing education program which has Board Approval, or is accredited by a national nursing accreditor recognized by the United States Department of Education and therefore has Board Approval and meets the requirements of W. Va. Code §30-7-1 et seq, this rule, and any other applicable laws and rules. For purposes of considering applications for licensure, the Board recognizes nursing education programs accredited by a national nursing accreditor recognized by the United States Department of Education or approved by a comparable Board or other recognized authority in another jurisdiction. All nursing education programs shall provide evidence of current accreditation by a national nursing accrediting agency recognized by the United States Department of Education by July 1, 2022 and a program created after July 1, 2018 shall have 5 years after full Board approval to obtain this accreditation.

2.2. "Administrator employment time" means the devotion of 80% time to school administrative duties. The administrator of the nursing program's teaching responsibilities is not to exceed 6 academic semester credits per year, no more than 3 academic credits per semester.

2.3. "Associate degree program in nursing" means a program conducted by a college or university that leads to an associate degree with a major in nursing.

2.4. "Baccalaureate degree program in nursing" means a program conducted by a college or university and leads to a baccalaureate degree with a major in nursing.

2.5. "Board" means the West Virginia board of examiners for registered professional nurses.

2.6. "Board approved" means a nursing program that meets the requirements of W. Va. Code §30-7-1 et seq, this rule, and any other applicable laws and rules. For purposes of considering applications for licensure, the Board may recognize nursing education programs approved by a comparable Board or other recognized authority in another jurisdiction. Programs accredited by a national nursing accrediting agency recognized by the United States Department of Education are considered Board approved and exempt from rules related to Board approval.

2.7. "Clinical Preceptor" means a registered professional nurse in good standing in the state in which he or she is providing the preceptorship with education preparation at or above the level for which the student is preparing; who may serve as a teacher, mentor, role model or supervisor in a clinical setting, shall possess competencies related to the area of assigned clinical teaching responsibilities and has a minimum of 2 years of experience as a registered professional nurse providing direct patient care during the 5 years immediately preceding the date of the written agreement.

2.8. "College", "Department" or "School" mean a nursing education unit charged with responsibility to prepare its graduates for practice as registered professional nurses, qualified to meet licensing requirements in West Virginia. This nursing education unit may have multiple programs and may be structured in a university, college or hospital.

2.9. "Continuing Board Approval" means continuation of board approval of a nursing education program because the program ~~based~~ meets the requirements of W. Va. Code §30-7-1 et seq, of this rule, any other applicable laws and rules and when applicable, has current accreditation by a national nursing accrediting agency recognized by the United States Department of.

2.10. "Curriculum" means a planned nursing educational experience based on the philosophy, mission, goals and outcomes of the nursing education program. The curriculum will include clinical assignments to meet the objectives of each nursing course.

2.11. "Diploma program" means a program which is usually, but not necessarily, conducted by a hospital and leads to a diploma in nursing.

2.12. "Distance education" means a formal educational process in which the majority of the instruction in a course/program occurs when instructors and students are not physically in the same location. The educational process may use various methodologies for communication, instruction, and evaluation.

2.13. "Generic Masters degree program" means a program conducted by a university and leads to a masters degree in nursing for individuals preparing for initial licensure as a registered professional nurse.

2.14. "Governing organization" means the university, college, or other organization of which the nursing education unit is an integral part.

2.15. "Graduation" means the candidate has satisfied all requirements of the college, department or school of nursing granting the diploma or degree.

2.16. "New program" means any education program planning to prepare individuals for initial licensure that has not been Board approved and has not received a unique NCLEX-RN program code_ by the Board.

2.17. "Part-time faculty" means faculty employed by the nursing education program in a position with fewer hours than the organization's definition of full-time faculty status.

2.18. "Prelicensure Nursing Education Standards" means a standard prescribed by the Board for educational programs preparing persons for licensure to practice registered professional nursing.

2.19. "Provisionally approved college, department or school of nursing" means a college, department or school of nursing which has not been in operation long enough to qualify for full approval, or one which fails to meet the requirements of the law and of the Board, and has received notification of its deficiencies.

2.20. "Recommendations" means suggestions for the guidance of colleges, departments or schools of nursing in the development of their programs.

2.21. "Requirements" means mandatory conditions which a college, department or school of nursing must meet in order to be approved.

2.22. "Visit" means the on-site evaluation occurring as part of the ongoing approval process of the nursing education unit.

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§19-1-3. Purposes of Nursing Education Approval.

3.1. The purposes of approval include:

3.1.a. To promote the safe practice of nursing by implementing educational standards for prelicensure nursing programs educating individuals who desire to seek licensure as a registered professional nurse;

3.1.b. To grant legal recognition to nursing education programs that meet the requirements of the Board;

3.1.c. To provide criteria for the development, evaluation and improvement of new nursing education programs; and

3.1.d. To ensure ongoing evaluation and improvement of nursing education programs.

§19-1-4. Prelicensure Nursing Education Standards.

4.1. All nursing education programs shall meet these standards:

4.1.a. The purpose and outcomes of the nursing program shall be consistent with requirements of W. Va. Code §30-7-1 et seq, of this rule, any other applicable laws and rules.

4.1.b. The purpose and outcomes of the nursing program shall be consistent with accepted standards of nursing practice appropriate for graduates of the type of nursing program offered.

4.1.c. The input of stakeholders shall be considered in developing and evaluating the purpose and outcomes of the program.

4.1.d. The nursing program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.

4.1.e. The curriculum shall provide diverse didactic and clinical learning experiences consistent with program outcomes.

4.1.f. Faculty and students shall participate in program planning, implementation, evaluation and continuous improvement.

4.1.g. The nursing program administrator shall be a professionally and academically qualified RN with institutional authority and administrative responsibility for the program.

4.1.h. Professionally, academically and clinically qualified nurse faculty shall be sufficient in number and expertise to accomplish program outcomes and quality improvement.

4.1.i. The fiscal, human, physical, clinical and technical learning resources shall be adequate to support program processes, security and outcomes.

4.1.j. Program information communicated by the nursing program shall be accurate, complete, consistent and readily available.

§19-1-5. Required Criteria for Prelicensure Nursing Education Programs.

5.1. The organization and administration of the nursing education program shall be consistent with the law governing the practice of nursing. The nursing education program shall be an integrated part of a governing academic institution that is accredited by an accrediting agency that is recognized by the U.S. Department of Education. The nursing education program shall provide evidence of current accreditation by a national nursing accrediting agency recognized by the United States Department of Education by July 1, 2022.

5.1.a. Curriculum. The curriculum of the nursing education program shall enable the student to develop the nursing knowledge, skills and abilities necessary for the level, scope and standards of competent nursing practice expected at the level of licensure. Curriculum will be revised as necessary to maintain a program that reflects advances in health care and its delivery.

5.1.a.1. The curriculum, as defined by nursing education, professional and practice standards, shall include:

5.1.a.1.A. Experiences that promote the development and subsequent demonstration of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;

5.1.a.1.B. Evidence-based learning experiences and methods of instruction, including distance education methods, consistent with the written curriculum plan.

5.1.a.1.C. Curriculum content including, but not limited to:

5.1.a.1.C.1. Content in the biological, physical, social and behavioral sciences to provide a foundation for safe and effective nursing practice;

5.1.a.1.C.2. Content regarding professional responsibilities, legal and ethical issues, history and trends in nursing and health care; and

5.1.a.1.C.3. Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration and maintenance of health in patients across the

lifespan and from diverse cultural, ethnic, social and economic backgrounds. Patient experiences will occur in a variety of clinical settings and will include:

5.1.a.1.C.3.(a). Integrating patient safety principles throughout the didactic and clinical coursework.

5.1.a.1.C.3.(b). Implementing evidence-based practice to integrate best research with clinical expertise and patient values for optimal care, including skills to identify and apply best practices to nursing care.

5.1.a.1.C.3.(c). Providing patient-centered, culturally competent care that recognizes that the patient or designee is the source of control and full partner in providing coordinated care by: (a) Respecting patient differences, values, preferences and expressed needs; (b) Involving patients/designees in decision-making and care management; (c) Coordinating and managing patient care across settings; (d) Explaining appropriate and accessible interventions to patients and populations that may positively affect their ability to achieve healthy lifestyles.

5.1.a.1.C.3.(d). Collaborating with interprofessional teams to foster open communication, mutual respect, and shared decision-making in order to achieve quality patient care.

5.1.a.1.C.3.(e). Participating in quality improvement processes to monitor patient care outcomes, identify possibility of hazards and errors, and collaborate in the development and testing of changes that improve the quality and safety of health care systems.

5.1.a.1.C.3.(f). Using information technology to communicate, mitigate error and support decision making.

5.1.a.1.D. Faculty supervised clinical practice shall include development of skills in direct patient care; making clinical judgments; care and management of both individuals and groups of patients across the lifespan; and delegation to and supervision of, as appropriate to level of education, other health care providers.

5.1.a.1.D.1. The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.

5.1.a.1.D.2. Clinical experiences shall be supervised by qualified faculty.

5.1.a.1.D.3. All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.

5.1.a.1.D.4. Measurement of students' competencies shall focus on the students' demonstration of care management and decision making skills when providing patient care in a variety of clinical situations and care settings.

5.1.a.1.E. Delivery of instruction by distance education methods must be consistent with the program curriculum plan and enable students to meet the goals, competencies and outcomes of the educational program and standards of the Board.

5.1.b. Students.

19CSR1

5.1.b.1. The program shall provide students the opportunity to acquire and demonstrate the knowledge, skills, and abilities required for safe and effective nursing practice, in theory and clinical experience, through faculty supervision.

5.1.b.2. The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study.

5.1.b.3. All policies relevant to applicants and students shall be readily available in writing.

5.1.b.4. Students shall meet health standards and criminal background check requirements for clinical placements.

5.1.c. Administrator qualifications.

5.1.c.1. Administrator qualifications in a program shall include:

5.1.c.1.A. A current, active RN license or privilege to practice that is not encumbered and meets requirements of the Board;

5.1.c.1.B. A graduate degree in nursing for baccalaureate nursing education programs and for associate degree nursing programs;

5.1.c.1.C. Educational preparation or experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation; and

5.1.c.1.D. A current knowledge of registered nursing practice

5.1.d. Faculty.

5.1.d.1. There shall be sufficient number of qualified faculty to meet the outcomes and purposes of the nursing education program.

5.1.d.2. The nursing faculty shall hold a current, active RN license or privilege to practice that is not encumbered and meets requirements of the Board.

5.1.d.3. Faculty supervising clinical experiences shall hold a current active RN license or privilege to practice that is not encumbered and meets requirements in the jurisdiction where the clinical practicum is conducted.

5.1.d.4. Faculty who teach in a program shall be academically and experientially qualified and meet the qualifications contained in this rule.

5.1.d.5. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.

5.1.d.6. Clinical preceptors shall possess competencies related to the area of assigned clinical teaching responsibilities and will serve as role models and educators for students. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences. Clinical preceptors shall have an unencumbered license to practice as a nurse at or above the level for which the student is being prepared, in the jurisdiction where they are precepting students.

§19-1-6. Faculty of the Nursing Education Unit.

6.1. Nursing faculty members, both full and part-time shall be academically and professionally qualified and shall:

6.1.a. Full-time nursing faculty members shall:

6.1.a.1. Have a graduate degree with a major in nursing; have a bachelor's degree with a major in nursing and be enrolled in a graduate degree program with a major in nursing within one year of employment as a faculty member; or have a bachelor's degree with a major in nursing and at least 10 years of direct patient care experience in nursing.

6.1.a.2. Have evidence of current experience in nursing practice and education sufficient to demonstrate professional competence. For faculty with less than two years experience in education, the nursing program administrator will submit to the Board mentoring and orientation plans as defined by Board guidelines and function under the guidance of a faculty member fully qualified in the specific teaching area and professional competence; and

6.1.a.3 Have credentials which verify status as a registered professional nurse in West Virginia.

6.1.b. Part-time nursing faculty members shall:

6.1.b.1. Have a graduate degree with a major in nursing; Have a bachelor's degree with a major in nursing and be enrolled in a graduate degree program with a major in nursing within one year of employment as a faculty member; or have a bachelor's degree with a major in nursing and at least two years of direct patient care experience in nursing;

6.1.b.2 Have evidence of current experience in nursing practice and education sufficient to demonstrate professional competence. For faculty with less than two years' experience in education, the nursing program administrator will submit to the Board mentoring and orientation plans as defined by Board guidelines and function under the guidance of a faculty member fully qualified in the specific teaching area and professional competence; and

6.1.b.3 Have credentials which verify status as a registered professional nurse in West Virginia.

6.1.c. The board may grant an exception to the requirements in 30-7-5a(a) and 30-7-5a(b) for faculty members who have qualifications other than those set forth in these subsections which are acceptable to the board.

6.2. Malpractice insurance for nursing faculty. The faculty shall have liability insurance for clinical practice required in nursing education courses.

§19-1-7. Students in the Nursing Education Unit.

7.1. The nursing education unit shall base the selection and admission of students on established criteria, and be consistent in the recruitment and admission of students, and shall determine student enrollment by the clinical and teaching facilities available and by the numbers of nursing faculty. Enrollment into the nursing education program may not increase if the program does not have full approval by the Board. An increase in enrollment of greater than 10 % must have prior approval by the

Board.

7.2. Student policies. All policies relevant to applicants and students shall be readily available in writing.

7.3. Liability insurance for students. Students shall be covered by liability insurance for clinical practice.

7.4. Students shall adhere to the standards for professional conduct as stated in the Board's rule, Standards for Professional Nursing Practice, 19CSR10, and are subject to disciplinary action by the Board for acts of professional misconduct as defined in the Board's rule, Professional Misconduct, 19CSR3.

§19-1-8. Curriculum.

8.1. The curriculum of each nursing education program within the nursing education unit shall be based on the philosophy or mission and goals or outcomes of the nursing education unit.

8.1.a. The curriculum shall incorporate the concepts of nursing process and the standards for nursing practice as defined in the Board's rule, Standards for Professional Nursing, 19CSR10. Clinical assignments shall be designed to meet the objectives of each nursing course. Faculty shall provide evidence of ongoing review and updating of instructional materials, lecture notes, handouts and resources provided to students to ensure students receive current information and standards of practice.

8.1.b. Curricula for programs offering the diploma, the associate degree, baccalaureate degree, generic masters, accelerated programs, cohorts, sites, or distance education in nursing shall include theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process.

8.2. The nursing courses shall be supported by content which meet the requirements of the governing organization, including biological, physical, social and behavioral science content to provide a foundation for safe and effective nursing practice.

8.3. Simulation. A prelicensure nursing education program ("program") may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours. A program that uses simulation shall adhere to the standards set in this section.

8.3.a. Evidence of Compliance. A program shall provide evidence to the Board of Nursing that these standards have been met.

8.3.a.1. The program shall have an organizing framework that provides adequate fiscal, human, and material resources to support the simulation activities.

8.3.a.2. Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation while managing the program.

8.3.a.3. There shall be a budget that will sustain the simulation activities and training of the faculty.

8.3.b. Facilities and Resources. The program shall have appropriate facilities for

conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation.

8.3.c. Faculty Preparation. Faculty involved in simulations, both didactic and clinical, shall have training in the use of simulation. Faculty involved in simulations, both didactic and clinical, shall engage in on-going professional development in the use of simulation.

8.3.d. Curriculum. The program shall demonstrate that the simulation activities are linked to programmatic outcomes.

8.3.e. Policies and Procedures. The program shall have written policies and procedures on the following:

8.3.e.1. short-term and long-term plans for integrating simulation into the curriculum;

8.3.e.2. method of debriefing each simulated activity; and

8.3.e.3. plan for orienting faculty to simulation.

8.3.f. Evaluation. The program shall develop criteria to evaluate the simulation activities and students shall evaluate the simulation experience on an ongoing basis.

8.3.g. Annual Report. The program shall include information about its use of simulation in its annual report to the Board of Nursing.

§19-1-9. Establishment of a New Prelicensure Nursing Education Program.

9.1. The application fee for establishing a new program of a professional nursing education program is fifty dollars (\$50). A governing institution that plans to establish a new nursing education program for the preparation of practitioners of registered professional nursing shall complete and submit such application for approval to the Board in at least thirty (30) days prior to a regularly scheduled Board meeting and in advance of the expected opening date.

9.2. Approval for admission of students: The proposed program shall provide the Board with verification that the following program components and processes have been completed:

9.2.a. Employment of a program administrator to develop the program;

9.2.b. Overview of the total curriculum, including the content, sequence of courses, course description, contracts with clinical agencies, program evaluation plan and course syllabi for the first year with identified timeline for the submission of syllabi for the next years;

9.2.c. Establishment of student policies for admission, progression, retention and graduation.

9.3. If all standards for approval are met, the program shall receive provisional approval and shall be authorized to admit students to the program.

9.4. Following receipt of the first calendar year report of performance of graduates on the national licensure examination, the Board shall conduct a visit to determine if all standards for approval of a nursing education program have been met. The Board may:

9.4.a. grant full approval if standards of a nursing education program are met;

9.4.b. continue provisional approval and provide to the nursing program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct deficiencies.

§19-1-10. Continuing Approval of Prelicensure Education Programs.

10.1. Visits and evaluation: The Board, through its executive director and/or other qualified persons, shall evaluate all non-national nursing accredited nursing education programs every other year until the program receives national nursing accreditation. The Board shall review and analyze various sources of information regarding program performance, including, but not limited to:

10.1.a. Evidence of seeking national nursing accreditation by an accrediting agency approved by the U.S. Department of Education. National nursing accreditation shall be obtained within 5 years of the Board's full approval of the new program;

10.1.b Results of ongoing program evaluations;

10.1.c. Other evidence regarding achievement of program outcomes including, but not limited to student retention, attrition and on-time graduation rates; sufficient type and number of faculty, faculty competence and faculty retention and turnover; adequate laboratory, simulation and clinical learning experiences; NCLEX-RN pass rates which are at least 80% for first-time test-takers in the last calendar year; trend data and action planning related to NCLEX-RN performance, employer and graduate satisfaction; performance improvement initiative related to program outcomes and program complaints or grievances review and resolution. nursing education programs accredited by the Board, including all satellite sites of any program.

10.2. Maintenance of Board Approval Status. A nursing program without national accreditation shall maintain approval as set forth in this rule. A national nursing accredited education unit shall maintain national nursing accreditation and submit to the Board a copy of all national nursing accreditation reports, recommendations, annual reports and final decisions for each national nursing accreditation visit once received or sent by the program within 30 days of the program's receipt or submission of the report.

10.3. Program visits to a new nursing program shall be conducted as outlined by the board. Additional program visits to a non national nurse accredited program shall be conducted if:

10.3.a. the director of the nursing program changes;

10.3.b. a major curriculum change is proposed; and/or

10.3.c. a complaint has been submitted to the Board.

10.4. Board approval of an existing program when ownership and control are changed. When a governing organization contemplates a change of ownership and control of a program, it shall send notice of the intended change to the Board 90 days prior to the effective date of the intended change. The owner or governing organization expecting to assume responsibility for the program shall immediately make application for Board approval. If the Board determines the owner or governing organization which will be responsible for the new program meets the criteria for approval and will comply with the recommendations of the Board, it may be provisionally approved.

10.5. A distance-learning program shall establish a means for assessing individual student and program outcomes.

10.6. Expansion of a non-national nursing accredited nursing education program requires agreement from the Board if the program seeks greater than a 10% expansion. Only those programs with full approval status may submit requests to the Board to initiate expansion of a program.

§19-1-11. Loss of Board Approval or National Nursing Accreditation.

11.1. The Board shall immediately withdraw approval of a program if the program's national nursing accreditation is lost. Board approval shall be granted once the nursing program's national accreditation is fully reinstated. Any program seeking approval by the Board which does not have national accreditation must submit an application as a new program and meet all new program requirements contained in this rule.

11.1.a. Factors jeopardizing program Board approval of a non-national nurse accredited program shall include but may not be limited to:

11.1.a.1. deficiencies in compliance with this rule, student retention, attrition and on-time graduation rates;

11.1.a.2. utilization of students to meet staffing needs in health care facilities and/or sufficient/adequate type and number of faculty, faculty competence and faculty retention/turnover ;

11.1.a.3. noncompliance with school's stated philosophy/mission, program design, objectives/outcomes, and/or policies;

11.1.a.4. continual failure to submit records and reports to the Board office within designated time frames;

11.1.a.5. failure to provide sufficient variety and number of clinical learning opportunities for students to achieve stated objectives/outcomes and/or inadequate laboratory and simulation learning experiences;

11.1.a.6. failure to comply with Board requirements or to respond to Board recommendations within a specified time;

11.1.a.7. student enrollments without sufficient faculty, facilities and/or patient census;

11.1.a.8. failure to maintain at least 80% passing rate on the licensure examination by first-time candidates;

11.1.a.9. failure of the program dean or director to document annually the currency of faculty licenses;

11.1.a.10. failure to maintain adequate budget to meet the needs of the program; or

11.1.a.11. other activities or situations that demonstrate to the Board that a program is not meeting legal requirements and standards.

11.2. Loss of approval through change of organization. When a program changes ownership or control, the Board shall automatically withdraw approval. The new owner or organization shall comply with the provisions of subsection 7.4. of this rule to continue the nursing education program.

11.3. Provisional approval for failure to meet standards. At the Board's discretion, it may grant provisional approval to a nursing education program during the time in which it takes corrective action in order to meet the standards set forth in this rule.

11.4 Any non-national nursing accredited professional nursing education program having a 20% or higher failure rate on the national licensure examination, shall receive a warning from the Board. If changes, correction and/or adjustments relative to faculty, facilities, student admission, curriculum content, and/or methods of teaching are not initiated within a specified time and such action approved by the Board, the Board may impose additional requirements or restrictions on the program.

§19-1-12. Closing of a Program.

12.1. The governing organization shall advise the Board in writing of the intent to close a nursing education program at least 6 months prior to the planned closing date. The governing organization shall submit a plan for safeguarding the quality of instruction and practice during the closing period.

12.2. The governing organization shall ensure that all standards for nursing education programs are maintained and all necessary courses are taught until the last student is transferred or graduated.

12.3. The governing institution shall secure and provide for the permanent custody and storage of records of students and graduates. The Board shall be notified of the location and method of retrieving information from these records.

12.4. At the Board's discretion, it may request additional information and plans for the closing of a nursing education program and the transfer of students and records.

12.5. The Board shall automatically withdraw accreditation of the program on the day the last student completes curriculum requirements of the program that is closing.

§19-1-13. Reports.

13.1. The nursing education unit shall submit an annual report to the Board by September 1 of each year for each nursing program accredited by the Board. Non-national nursing accredited nursing education programs shall submit annual reports on forms provided by the Board. Data included in this annual report shall be determined by the Board. National nursing accredited nursing education programs shall submit a copy of the national nursing accreditor annual report to the Board.

13.2. A non-national nursing accredited nursing education unit shall submit a program evaluation report to the Board one month prior to a scheduled on-site visit to the nursing education program. The Board shall determine the format and guidelines for the submission of this report.

13.3. At the Board's discretion, it may request additional reports from a nursing education unit to include, but not be limited to, written plans for improving licensure examination pass rates of graduates and progress reports.

§19-1-14. Resources, Facilities, and Services.

14.1. The nursing education unit shall provide adequate teaching facilities to accomplish the goals or outcomes of the nursing education programs. These shall include well-equipped classrooms, conference rooms, libraries, laboratories and offices for faculty members.

14.2. Comprehensive and current library resources, computer facilities, laboratory and other learning resources shall be available and accessible. The nursing faculty shall have input into the development and provision of learning resources.

14.3. The resources, facilities and services of the governing organization shall be available to and used by the nursing education unit.

14.4. The hospitals or other health care facilities and services utilized for clinical learning experiences shall be adequate in number and kind to meet program goals or outcomes. A preceptor serves as a role model and resource to students in the clinical setting in conjunction with a faculty member.

§19-1-15. Evaluation of the Nursing Education Unit.

15.1. The nursing education unit shall have an ongoing systematic evaluation of all program components which is used for development, maintenance and revision of the program. The evaluation shall include but not be limited to curriculum content review and test review.

15.2. The evaluation plan shall include measurable outcomes, e.g., licensure examination passage rate, employment patterns, graduation rates and attrition.