



NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 851
BOARD OF NURSING

FILED

04/24/2025 9:07 AM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Division 21 - Standards for institutions: establish programs, survey to evaluate; outlines withdrawal of approval.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 05/21/2025 5:00 PM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

CONTACT: Brandy Ritter
971-334-4216
brandy.ritter@osbn.oregon.gov

17938 SW Upper Boones Ferry Rd
Portland, OR 97224

Filed By:
Brandy Ritter
Rules Coordinator

HEARING(S)

Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.

DATE: 05/20/2025

TIME: 11:00 AM

OFFICER: Brandy Ritter

REMOTE HEARING DETAILS

MEETING URL: Click here to join the meeting

PHONE NUMBER: 253-215-8782

CONFERENCE ID: 83283075700

SPECIAL INSTRUCTIONS:

Meeting URL: <https://us06web.zoom.us/j/83283075700>

Meeting ID: 832 8307 5700

One tap mobile

+12532158782,,83283075700#

Presenters: Only those registered to provide testimony will be called to present comments.

To register to testify for this hearing, please contact: brandy.ritter@osbn.oregon.gov at least 24 hours prior to the start of the hearing and provide name, address, and affiliation (This is required per OAR 137-001-0030).

Presenters may also register at the beginning of the hearing but are encouraged to pre-register to reserve time during the hearing for the presentation of testimony.

Each presenter will have 3 minutes to testify. Be prepared to summarize your comments to fit within the allotted time.

The hearing will close no later than 12:00 PM and may close earlier if all individuals that have registered to testify have had the opportunity to enter their comments into the record.

Submit Written Comments: Via email: brandy.ritter@osbn.oregon.gov.

All written comments and materials must be received by the close of the comment period on May 21, 2025, at 5:00 PM. Late comments will not be reviewed or considered.

For accommodations or questions, please contact the OSBN Rule Coordinator at least 72 hours prior to the hearing.

NEED FOR THE RULE(S)

ORS 678.340 requires the Board to establish standards for institutions desiring to establish nursing education programs. ORS 678.360 requires the Board to survey to evaluate institutions; reporting processes; and outlines withdrawal of approval. ORS 678.150 allows the Board to establish rules to enforce the provisions of ORS 678.010 to ORS 678.448.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

OAR 851-021: <https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=3925>

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

Updates to the qualifications for nursing faculty may allow for the hiring of more diverse candidates. The curricular standards for nursing education programs include education tied to access and social determinants of health; educating nursing students on key issues related to the attainment of health equity. Flexibility in rules surrounding program NCLEX standards will allow nursing programs to retain more non-traditional students.

FISCAL AND ECONOMIC IMPACT:

Education institutions and nursing programs will have increase costs related to the attainment of national nursing accreditation. Updates to the rules around faculty oversight of students in clinical experiences may increase costs associated with hiring and retaining nursing faculty. Updates to the qualifications for nursing faculty, surrounding full-time status and simulation, may increase costs. Requirement of accreditation for nursing programs may impact the individual student; their education will be more transferable and able to continue at higher levels without less need to repeat coursework.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) None; (2)(a) Re-entry education programs – 2 (b) OSBN will no longer provide regulatory oversight of these programs. (c) None

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

No involvement with small businesses.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:

851-021-0000, 851-021-0010, 851-021-0012, 851-021-0015, 851-021-0018, 851-021-0020, 851-021-0025, 851-021-0030, 851-021-0035, 851-021-0040, 851-021-0045, 851-021-0050, 851-021-0051, 851-021-0055, 851-021-0060, 851-021-0065, 851-021-0070, 851-021-0080, 851-021-0090

AMEND: 851-021-0000

RULE SUMMARY: Revisions to simplify or clarify existing language. Align with changes to following rules.

CHANGES TO RULE:

851-021-0000

Purpose of Standards ¶¶

~~To foster the safe and effective practice of nursing by graduates of nursing education programs by setting standards that promote adequate preparation of students for~~establish standards for nursing education programs that ensure graduates are prepared for safe nursing practice. To include the following:¶¶

~~(1) Standard Processes for the development~~approval of new nursing education programs;¶¶

~~(2) Enable innov~~Accreditative~~on responses of established~~quirements of nursing education programs to a changing health care environment.¶¶

~~(3) Provide criteria for the approval of new and;~~¶¶

~~(3) Criteria for ongoing evaluation of~~ established nursing education programs;¶¶

~~(4) Provide sanction standards for nursing education programs that do not maintain compliance with OAR 851-021.~~¶¶

~~(5) Set standards for approval of learning experiences for students enrolled in programs outside of Oregon.~~¶¶

~~(6) Set standards for nurse re-entry programs~~Standards for the operation of nursing education programs; and¶¶

~~(5) Processes for denial or withdrawal of approval of nursing education programs that do not maintain compliance with Oregon Administrative Rules (OAR) Chapter 851 Division 21.~~

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

RULE SUMMARY: Process for establishing new nursing education programs was simplified from five steps to three, aligning with NCSBN model rules. This revision removes barriers by eliminating the letter of intent, combining preliminary and development applications, and clarifying approval steps.

CHANGES TO RULE:

851-021-0010

Establishment and Approval of New Nursing Education Programs

(1) Step 1 - Letter of Intent:

(a) At minimum of one year in advance of the anticipated opening date, an educational institution or a program that is part of a corporate structure wishing to establish a new program in nursing must give written notification of intent to establish a new nursing education program to the Board representative, chief nurse executives of planned nursing practice experience sites, and to nursing program administrators of all existing OSBN-approved nursing education programs.

(b) The letter of intent must include information about size and type of program proposed, projected start date, student enrollment, geographic region and planned nursing practice experience sites.

(c) The nurse administrators and chief nurse executives, duly notified, have the option of responding. Such response must be sent to the appropriate Board representative within 30 days from the date on the letter of intent and must address potential adverse impacts to Preliminary Development Application.

(a) The proposed program must submit the following documentation to the Board at least one year prior to the planned start date:

(A) Needs assessment highlighting the statewide need for the programs or nursing practice experience entities.

(d) The Board representative must retain the letters of response and send a copy of the letters to the applicant within 45 days of the date on the applicant's letter of intent. These letters must be included in the applicant's preliminary application when submitted.

(2B) Step 2 - Preliminary Application

(a) After receiving the letters of response from the Board representative, the applicant may make application for Preliminary approval.

(b) The preliminary application must address at minimum the following information:

(A) Purpose, size, and type of program proposed.

(B) Studies documenting the statewide need for graduates of the program. The study should also specifically address the need for the program in relation to the nursing needs of the geographic region to be served. Type of program including identification of proposed instructional modality and degree or certificate awarded;

(C) An analysis of potential impact on other nursing programs in the state including: Planned student enrollment;

(i) An analysis of current usage of potential nursing practice experience sites in the area proposed for student placements including impact on other programs placing students in nursing practice experience sites;

(ii) Projected number of faculty positions and availability of qualified faculty in the area proposed for nursing practice experience placements; and;

(iii) Letters of response from Oregon-approved nursing programs addressing specific concerns regarding adverse impact on current programs. Evidence of institutional accreditation by an agency recognized by the United States Department of Education;

(D) Evidence of interactions with the Nurse Administrators of currently approved nursing programs in area of planned nursing practice experience placements to discuss the impact on those nursing programs.

(E) Availability of adequate practice sites for the program with supporting documentation from persons assigned to coordinate nursing practice experience placements for each facility showing facility size, average patient numbers, number dedicated financial resources for planning, implementation, and continuation of other programs hosted, and potential available placements.

(F) Plans for informing potential students of expected transportation and distance requirements for nursing practice experience placements.

(G) Evidence of administrative and financial support for development of a nursing program.

(H) Evidence of the appointment of a qualified Nurse Administrator and sufficient administrative support staff for program development.

(F) Description of anticipated educational resources, including facilities, and technological learning resources;

(I) Anticipated student enrollment and proposed date of enrolment.

(J) A program that is part of a corporate structure must also address the current number of new programs in an approval process in other states, the program outcomes for nursing programs in other states inclusive of licensing

examination pass rates, student retention rates, employment rates, the current faculty vacancy rate:¶¶

(i) Provide any contracts, charters, or documents that reflect the relationship of the Oregon program to the corporate structure; and¶¶

(ii) Evidence of local control of faculty hiring, budget, and curriculum.¶¶

(K) The Board representative must summarize the content of the letters of response and bring that summary to the Board.¶¶

(L) The applicant must respond to any Board requests for additional information: Description of anticipated clinical resources;¶¶

(H) Number of anticipated faculty and program administrators; and¶¶

(I) A proposed timeline for developing and initiating the program.¶¶

(M) The Board, after timely review and consideration of the information contained in the letter of intent and any supplementary information, must either grant approve or deny permission to begin development of a nursing program, including rationale for the decision.¶¶

(N) If permission is granted, the applicant may begin preparing the Application for Developmental Approval as established in OAR 851-021-0010(3). If the applicant does not submit a complete development move forward with preliminary development.¶¶

(2) Step 2 - Initial Approval application within twelve months after the date of the Board granting permission to proceed, the permission to begin program development is expired. for Admission of Students;¶¶

(O) If the applicant is denied permission to begin development of a nursing program:¶¶

(i) The program may submit a revised letter of intent and preliminary application no sooner than six months from the previous submission;¶¶

(ii) A hearing before the Board may be requested in accordance with the Administrative Procedures Act.¶¶

(3) Step 3 - Application for Developmental Approval;¶¶

(a) An educational institution or program that has received approval of the program's letter of intent The proposed program must provide the Board with evidence that the following program components and preliminary application to develop a nursing program may make application for developmental approval.¶¶

(b) The developmental approval application must include at minimum the following information:¶¶

(A) Evidence of accreditation of the educational institution and all entities that are part of a corporate structure by an appropriate regional or national accrediting association or agency processes have been completed at least six months prior to the planned start date;¶¶

(i) Approval as a degree-granting institution of higher education in Oregon for programs located in Oregon; and,¶¶

(ii) Accreditation by a regional association or national agency recognized by the United States Department of Education (USDE).¶¶

(B) Evidence of the appointment of a qualified Nurse Administrator as specified in OAR 851-021-0045.¶¶

(C) Evidence that the educational institution agrees to center the administrative control of the nursing program to the nursing program administrator and must continue to provide the support and resources necessary to maintain the standards for approval as specified in OAR 851-021-0045.¶¶

(D) Administration and organizational plan delineating lines of authority and decision-making impacting the nursing program.¶¶

(E) Description of proposed instructional modalities and resources to support these modalities with dates of availability.¶¶

(F) Availability of adequate practice sites for the program with supporting documentation from persons assigned to coordinate nursing practice experience placements for each facility. Employment of a nursing administrator;¶¶

(B) Employment of nurse educators, other educators and administrative support;¶¶

(C) Current institutional catalog, including information provided to students regarding program accreditation and approvals;¶¶

(G) Availability of adequate educational facilities, services, resources, and The proposed nursing practice experience placement sites for the entire length of the program; riculum plan;¶¶

(H) Evidence of financial resources adequate for planning, implementation, and continuation of the program, including proposed operating costs.¶¶

(I) Tentative timetable for planning the program.¶¶

(J) Tentative start date for the program.¶¶

(K) Current educational institution catalog inclusive of all published information provided to students on accreditations and approvals; adequate clinical placements for the program with supporting documentation;¶¶

(L) Signed formal agreement for the articulation of program graduates into the next level of nursing education. The agreement must be with an Oregon-based program or an on-line program that meets criteria for Oregon registered nurse licensure and does not require residency of any length outside of Oregon. Such articulation agreement must define specific accepted credits for progression in the registered nurse program.¶¶

- (i) Programs leading to a certificate or degree in practical nursing must have an agreement that prepares candidates for licensure as a registered nurse; and,¶¶
- (ii) Programs leading to an associate degree in nursing must have an agreement with program leading to a baccalaureate or higher degree in nursing.¶¶
- (c) The applicant must respond to the Board's request for additional information.¶¶
- (d) After a timely review the Board will notify the program within 20 business days of the Board's decision.¶¶
- (e) Once the developmental program application is approved by the Board, the program has twelve months to submit an application for Initial Approval or the developmental approval will expire.¶¶
- (f) If developmental approval is denied:¶¶
- (A) The program may submit a revised developmental application no sooner than six months from the previous submission;¶¶
- (B) The applicant may request a hearing before the Board in accordance with the Administrative Procedures Act.¶¶
- (4) Step 4 – Initial Approval:¶¶
- (a) Initial approval status may be applied for with documented evidence that the following conditions have been met:¶¶
- (A) Preliminary Application as described in OAR 851-021-0010(2) has received Board approval.¶¶
- (B) Evidence of approval for the new program has been obtained from the appropriate agencies or bodies that review and approve new programs for public and private educational institutions: A systematic plan of evaluation of the curriculum and program;¶¶
- (G) Policies related to admission, progression, retention, and graduation;¶¶
- (H) Policies and strategies to address students' needs including accommodations, learning disabilities, English as an international language, and remediation tactics for students performing below standard and for when clinical errors occur;¶¶
- (i) An educational institution must provide one copy of the report that was submitted to each agency and a copy of the letter indicating that approval for the program have been granted;¶¶
- (ii) A program that is part of a corporate structure must provide documentation that each member educational institution has approved the program, as well as documentation of agency approval as above; and,¶¶
- (iii) An educational institution approved by the Oregon Department of Education; Private Career Schools section must provide current documentation.¶¶
- (C) A timetable for onboarding faculty allows adequate time for faculty to assist with curriculum development.¶¶
- (D) Evidence that a sufficient number of qualified Practical nursing (PN) and associate degree nursing education programs must have a signed articulation agreement for program graduates into the next level of nursing educators, other required educators and administrative support services are in place a minimum of six months prior to the beginning of the courses.¶¶
- (E) Documentation of budgeted funds to cover faculty salaries.¶¶
- (F) Evidence that the following have been submitted to the Board a minimum of three months prior to initiation of the program:¶¶
- (i) A tentative written proposed program plan, including curriculum developed in accordance with OAR 851-021;¶¶
- (ii) Readiness for admission of students in educion; ¶¶
- (J) PN and registered nursing (RN) education programs must provide a timeline for attainment of national nursing program accreditation; and nursing practice experience facilities including placement sites for the maximum number of students enrolled at one time;¶¶
- (iii) Policies for admission and progression;¶¶
- (iv) A comprehensive plan for evaluation of the nursing program that addresses key outcomes; and,¶¶
- (v) Board-approved, signed agreement for the articulation of program graduates into the next level of nursing education as established in OAR 851-021-0010 (3)(b)(L).¶¶
- (b) Following Board receipt and review of the information required in OAR 851-021-0010(3);¶¶
- (K) Advanced Practice Registered Nursing (APRN) education programs must provide verification of candidacy for accreditation. ¶¶
- (b) If the Board may grant or denys initial approval:¶¶
- (c) ~~A~~ If initial approval is granted, a site visit may be conducted by a representative of the Board.¶¶
- (d) Initial approval must be received by a program prior to publication of the program and recruitment or The program may begin recruitment and acceptance of students for, and may admission to the first class of nursing students.¶¶
- (e) A new program may t one cohort of students per academit only one class of studentsc year until final Board approval has beenis granted;¶¶
- (f) ~~B~~ If initial approval is denied, the applicant interim progress reports may be request a hearing before the Board in accordance with the Administrative Procedures Act. ed by the Board or its representative at any time; and¶¶

~~(gC) Interim visits and progress reports may be requested by the Board at any time during the initial approval phase and following initial not admitted within twelve months of initial approval, the approval is deemed necessary by the Board expired.~~¶

~~(hC) If the educational institution does not admit a class within twelve months after the date designated for initiating the program, the Board denies the initial approval the program may submit a revised initial approval is expired application.~~¶

~~(53) Step 53 - Final Approval:~~¶

~~(a) Eligibility for final approval occurs after the graduation of the first class of students of Program:~~¶

~~(b) Within six months following the graduation of the first class, cohort of students the program must:~~¶

~~(A) Submit a self-study written report addressing their compliance with OAR 851-021-0040 through 851-021-0070; and a survey visit must be made for consideration of approval.~~¶

~~(B) Undergo a site survey conducted by a representative of the program Board.~~¶

~~(c) The decision of the Board to grant or deny approval must be based on:~~¶

~~(A) Review of a self-study report submitted by the program addressing compliance with OAR 851-021;~~¶

~~(B) The success rate of graduates on the national licensure examination; and,~~¶

~~(C) A survey report by a representative of the Board full approval of a new program may be granted for four years, with subsequent approvals aligning with the frequency of national nursing accreditation surveys.~~¶

~~(d) If full approval is denied, the applicant program may request a hearing before the Board in accordance of with the Administrative Procedures Act.~~

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

ADOPT: 851-021-0012

RULE SUMMARY: Establishes requirement of national accreditation, timelines, and required documentation from nursing programs. This ensures quality education, producing safe nurses and supporting the Board's mission of public protection.

CHANGES TO RULE:

851-021-0012

Accreditation Requirements of Nursing Education Programs

(1) New nursing education programs must acquire national nursing accreditation from an agency approved by the United States Department of Education. This accreditation must occur within four years of the full approval of a new nursing education program.¶

(2) Except as provided in (1) all nursing education programs must obtain national nursing education accreditation from an agency approved by the United States Department of Education by July 1st, 2029.¶

(3) Nursing education programs must notify the Board of accrediting agency site visit dates within 30 days of scheduling the visit. A site survey will be conducted alongside the accrediting agency by a representative of the Board.¶

(4) All nursing education programs that are accredited or candidates for accreditation must submit to the Board:¶

(a) The program's most recent national nursing accreditation agency written self-study report;¶

(b) Any report or letter exchanged between the nursing education program and the national nursing education accreditation agency, including but not limited to: continuous improvement progress reports, substantive change notification and accreditation action letters, mid-cycle review documentation, site visit reports and program response letters, and final site visit report; and¶

(c) Any notice of change in nursing education program or institutional accreditation status. ¶

(5) The documents listed in OAR 851-021-0012(4) must be submitted to the Board within 30 days of completion or receipt by the nursing education program. The nursing education program must report any non-compliance with accreditation standards within five business days. ¶

(6) The Board may authorize a program survey for:¶

(a) Failure to submit documentation as listed in OAR 851-021-0012(4) above.¶

(b) Failure to achieve or maintain national nursing accreditation.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.340, ORS 678.360

AMEND: 851-021-0015

RULE SUMMARY: Program survey requirements were simplified, and the Board's authority, timeline, and expectations for surveys were clarified.

CHANGES TO RULE:

851-021-0015

Periodic Evaluation/Continuing Board Approval of Nursing Education Programs ¶

The Board representative may require reports or conduct a survey or site visit for any one of the following reasons:¶

(1) The nursing program requests a survey or site visit.¶

(2) The Board may require survey or site visits or interim progress reports at any time to determine if the minimum standards for nursing programs are being met. These situations may include, but are not limited to the following:¶

(a) Reports relating to identified violations of OAR 851-021.¶

(b) Potential violations of OAR 851-021. (1) All nursing education programs must continue to meet the standards outlined in OAR Chapter 851 Division 21 to maintain approval.¶

(c) Denial, withdrawal or change of nursing program or educational institution accreditation status.¶

(d) Providing false or misleading information to Board representative, applicants, students, accreditors, or the public concerning the nursing program.¶

(e) Inability to secure or retain a qualified nurse administrator, resulting in substandard supervision and instruction of students.¶

(f) Failure to achieve NCLEX® pass rate standards per OAR 851-021-0018.¶

(g) Evidence of non-compliance with remediation plan by programs with deficiencies or violations. Nursing education programs will be surveyed on a cycle that aligns with their national nursing accreditation. As part of the survey process the nursing education program must: ¶

(3a) Survey Visits to Determine Continued Approval:¶

(a) All nursing education programs without national nursing accreditation are required to demonstrate continuing compliance with OAR 851-021 a minimum of every eight years for continued approval¶

(b) Programs that have received national nursing accreditation may be surveyed in conjunction with the national nursing accreditation body.¶

(c) The survey visit must be made by a written self-study report. Nationally accredited nursing programs may submit their accreditation self-study report; and¶

(b) Undergo a site survey conducted by a representative of the Board on dates mutually agreeable.¶

(3) Following receiptable to the Board representative and the program.¶

(d) A program must submit a narrative self-evaluation report that provides evidence of compliance with OAR 851-021 one month prior to the scheduled survey visit.¶

(e) During the survey visit the Board representative will review and analyze various sources that validate compliance.¶

(f) Nurs for the accrediting agency site visit report and documentation of accreditation status the Board will determine continuing approval. Programs must be evaluated by use of a rubric to guide approval. The Board determines the approval length of time.¶

(g) Program evaluations based on OAR 851-021-0040 through OAR 851-021-0070 are deemed "met", "partially met" or "not met" with narrative explanation for any standard that is partially met or not met.¶

(A) Expectations in the summary of the report are intended as action items for the nursing school status and timeline.¶

(4) The Board may direct a representative to perform a survey at any time, related to potential or identified violations of OAR Chapter 851 Division 21. This includes, but is not limited to:¶

(a) Denial, withdrawal or change of program and/or educational institution. Expectations are intended to be corrected and implemented within a timeframe set by the Board representative and approved by the Board, accreditation status.¶

(b) Complaints from students, faculty, and clinical agencies; or¶

(B) Failure to address previously identified areas deemed "partially met" or "not met" may result in identification of a deficiency. Annual report data indicating concerns about the stability of the program.¶

(C) If the Board determines that a deficiency exists, the nurse administrator and educational institution administration shall receive a report. If an institution does not meet requirements for approved programs, the Board shall issue to the institution written notice that specifying the deficiency and prescribing the time and the timeframe within which the deficiency must be corrected.¶

(D) Failure to address previously identified survey deficiencies in the time prescribed by the Board may result in

withdrawal of program approval.¶¶

(h) Continuing approval will be granted upon the Board's verification that the program is in compliance with OAR 851-021 and has the defect. The Board shall withdraw approval from an institution that fails to provide continued support of the educational institution to maintain compliance.¶¶

(i) The Board representative may share a preliminary summary report to rectify the defect specified within the program at the end of the survey with the understanding that the report is not final until final modification or approval by the Board.¶¶

(j) A draft of the survey visit report may be made available to the program for review and corrections in factual data before review by a period of time prescribed in the notice. The institution may request and if requested shall be granted a hearing before the Board.¶¶

(k) The nurse administrator or designee of the program may be invited to be present during the presentation of the survey visit report to the Board in the manner required for contested cases under Oregon Revised Statutes (ORS) Chapter 183.¶¶

(l) Following the Board's review and decision, the Board may written notification regarding approval of the program, or notice of standards requiring a follow-up report within a specified timeframe must be sent by the Board representative to the administrator of the nursing education program within 30 business days.¶¶

(m) An approved nursing program that becomes accredited by a national nursing accreditation body between Board survey visits, may have withdrawn approval for the nursing education program if deficiencies are next scheduled Board survey visit adjusted to provide for alignment not corrected within the accreditation review cycle allotted time.

Statutory/Other Authority: ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.360

REPEAL: 851-021-0018

RULE SUMMARY: Rules on NCLEX pass rates have been moved to 021-0070 Outcomes and Evaluation, simplifying our regulations by aligning the data with program evaluation.

CHANGES TO RULE:

~~851-021-0018~~

~~NCLEX® Standards~~

~~(1) For reporting and tracking purposes, all NCLEX® pass rates are rounded up or down to the nearest percentage.~~

~~¶~~

~~(2) A program must maintain the following:¶~~

~~(a) A minimum of 75% first-time pass rate or higher for the most recent 12-month period; or, ¶~~

~~(b) A 90% total pass rate or higher of all test-takers that includes first-attempt and repeaters for the most recent 12 months.¶~~

~~(3) In the event a program fails to maintain the NCLEX® standards above, a program must provide the Board a written plan, to evaluate, improve, and monitor graduate performance on the licensing examination as directed by the Board representative.~~

~~Statutory/Other Authority: ORS 678.150~~

~~Statutes/Other Implemented: ORS 678.150~~

REPEAL: 851-021-0020

RULE SUMMARY: Moved to 021-0015 for clarity, consolidating all survey outcome and approval decision information into one rule.

CHANGES TO RULE:

~~851-021-0020~~

~~Denial or Withdrawal of Approval ¶¶~~

~~(1) If, in the opinion of the Board, a nursing education program is not meeting OAR 851-021, a formal notice must be provided in writing to the nursing program and to the educational institution specifying the deficiency and prescribing the timeframe within which the deficiency must be corrected.¶¶~~

~~(2) Approval may be withdrawn if a program fails to correct the deficiency within the timeframe specified after a hearing in which such facts are established.¶¶~~

~~(3) Approval may be withdrawn if a nursing program or the educational institution knowingly makes any false, misleading, or deceptive statements, or submits or causes to be submitted any false, misleading, or deceptive information or documentation to the Board or any representative of the Board.~~

~~Statutory/Other Authority: ORS 678.340, ORS 678.360~~

~~Statutes/Other Implemented: ORS 678.360~~

RULE SUMMARY: Streamlined rules to reduce barriers for nursing programs, clarify Board reporting requirements, and simplify approval processes. Key changes include easing admission notifications, shortening documentation timelines, empowering institutions to select nurse administrators while still meeting standards in 0045(3), and aligning curricular change submissions with accrediting agency requirements.

CHANGES TO RULE:

851-021-0025

Reports and Approvals ¶¶

~~(1) Program Changes Requiring Reports to the Board: The ps must complete an annual report as directed by the Board representative.¶¶~~

~~(2) Programs must notify the Board representative in writing within 1530 days of development of the following circumstances:¶¶~~

~~(a) Change in the nurse administrator must be accompanied by a request for approval of an interim or replacement as established in OAR 851-021 following a:¶¶~~

~~(a) Change in the nurse administrator; ¶¶~~

~~(b) Change of administrative control within the educational institution, with the rationale for the change and anticipated impact on the nursing program-; or,¶¶~~

~~(c) Plans to move the entire program to a new location within the current geographic region;¶¶~~

~~(A) The program must notify the Board representative in writing of the following. This notification must include:¶¶~~

~~(iA) Address of the new location;¶¶~~

~~(iiB) Rationale for moving the nursing program;¶¶~~

~~(iiiC) Anticipated date of completed move; and;¶¶~~

~~(ivD) Anticipated impact on curriculum delivery, other nursing programs, nursing practice experienceclinical partners, students and faculty.¶¶~~

~~(B) The Board representative may complete a survey visit to confirm compliance with OAR 851-021. ¶¶~~

~~(d) Changes in availability of adequate nursing practiceclinical experiences for the program that results in alteration of student progression;¶¶~~

~~(e) Plans to increase or decrease the number of applicants admitted to the program by 8 or more students;¶¶~~

~~(f) Plans to increase the number of clinical groups in a geographic region;¶¶~~

~~(g) Change in accreditation status of the nursing program or the educational institution; and,or¶¶~~

~~(h) Reductions in the financial support for the program that impact curriculum delivery, student progression or program operations.¶¶~~

~~(2) Program Changes Requiring Board Approval:¶¶~~

~~(a) Change of Administrative Control:¶¶~~

~~(A) When control of a nursing education program is transferred from one educational institution to another, a report must be submitted to the Board by the receiving institution containing the following information:¶¶~~

~~(i) Rationale for change;¶¶~~

~~(ii) Anticipated effects on students, faculty and resources;¶¶~~

~~(iii) Administrative and organizational plans, including a sound operational budget;¶¶~~

~~(iv) Plans for the orderly transition of the program; and,¶¶~~

~~(v) Application for new program as delineated in OAR 851-021-0010 unless this requirement is waived by the Board.¶¶~~

~~(B) The educational institution relinquishing the program must notify the Board in writing of the intent to transfer the program and must submit to the Board the information requested of programs undergoing voluntary termination (OAR 851-021-0035(1)).¶¶~~

~~(b) Major Curriculum Change:¶¶~~

~~(A) When a nursing program anticipates a major curriculum change in courses required for the nursing program3) When a nursing education program anticipates a substantive change to an educational track, such change must be submitted to the Board for approval at a minimum of six month90 days prior to offering the first nursing course under the new curriculum implementation. ¶¶~~

~~(Ba) A major curriculumsubstantive change includes, but is not limited to:¶¶~~

~~(i) A revision of the, changes in:¶¶~~

~~(A) Overall length of the program;¶¶~~

~~(iiB) An addition, deletion or revision of the program outcomes;¶¶~~

~~(iii) Initial implementation of simulation modality for nursing practice experience learning hours;¶¶~~

(iv) Any revision of the curriculum of a program that affects the ability of the program to comply with the requirements of the curriculum as established in OAR 851-021-0050; Iteration of 25% of nursing curriculum course credits;

(C) Program outcomes; or

(v) Substantive change in educational modality for program delivery; and

(vi) New Opening or closing of an educational track at the same level in an established program of licensure.

(Cb) The following materials nursing education program must be submitted w for approval either the request for curriculum changes:ir accreditation substantive change report or a report including:

(i) A) Rationale for proposed changes including the anticipated effect on faculty, students, clinical resources and facilities;

(ii) B) Presentation of the differences between the current curriculum and the proposed curriculum;

(iii) C) A timetable for implementation of change; and;

(iv) Methods of evaluation that will be used to determine the effects of the change.

(c) Addition of an extended campus site, or moving the

(D) Plan for evaluation of the change.

(c) The nursing education program may not implement the change until approved by the Board.

(4) Approved nursing programs to a new location outside of the current geographic region or addition of distance education technology:

(A) The hat intend to offer a PN exit or option, that is not a standalone PN program, must submit to the Board a letter of intent to make changes a minimum of six months prior to the planned implementation.

(B) The letter of intent must include, at minimum, the following informa for approval evidence of how the program meets the standards prescribed for PN programs outlined in OAR 851-021-0050(5). The nursing education program must receive approval at least six months prior to allowing the PN option:

(i) 5) Plan for qualified faculty for the program at the

(ii) When an approved nursing education program intends to add an extended or new campus site or with addition of distance education technology;

(ii) the program must notify the Board and provide the following information:

(a) Description of available and the proposed education facilities and delivery modalities, services and resources with dates of availability or distance education technology;

(b) Plan for ensuring adequate qualified faculty;

(iii) Availability of adequate nursing practice experiences

(c) Evidence of adequate clinical pr lactice sites and provisions for faculty supervision of experiences;

(iv) Plans for informing potential students of expected transporements with supporting documentation;

(d) Evidence of dedicated financial resources for planning, implementation, and distance requirements for nursing practice experiences

(e) continuation of the program; and;

(ve) Tentative time-schedulline for planning, initiating, and evaluating the program.

(C) 6) The Board may deem the addition of an extended campus site, a new location or distance nursing education option as the equivalent of a new program and require application under OAR 851-021-0010.

(d) Plans for an increase or decrease in th

(A) A nursing education program may apply to implement an innovative capacity of the educational institutions physical facilities, human, technologic, and fiscal resources, or nursing pproach that significantly alters the approved curriculum, model for clinical experiences, or faculty-to-student raetice experience sites. The plano. A letter of intent must be submitted to the Board representative for approval six months prior to the beginning of the student enrollment change in a report containing the following:

(A) Rationale for increase or decrease.

(B) An analysis of potential impact on other nursing programs and communities within the geographic region including:

(i) Projected number of faculty positions and availability of qualified faculty in the area proposed for nursing practice experience placements;

(ii) An analysis of the available nursing practice experience sites for the program, including the types of placement organizations expected to provide for the increase in student enrollment showing facility size, average patient numbers, number of other programs hosted, and potential available placements;

(iii) Plans for informing potential students of expected transportation and distance requirements for nursing practice experiences; or;

(iv) Evidence of meeting with the Nurse Administrator of currently approved nursing programs within the geographic region of planned nursing practice experience placements to discuss the impact of an enrollment increase.

(C) Anticipated effects on students, facul planned implementation. The letter of intent must include the following information:

(a) Description of the proposed project, including purpose and rationale;

(b) Identification of the standards affected by the proposed innovative approach;

(c) Description of mechanisms and procedures for student safety; and nursing practice experience

resources; learning effectiveness; ¶

(Dd) Administrative and organizational plans, including an operational budget to support increased enrollment; and, ¶

(E) Within one year following the start of the planned change in student enrollment, the program must submit a report Plan for evaluation of the project and reporting findings back to the Board; addressing the following: ¶

(i) Impact on nursing practice; and ¶

(e) Tentative experience sites; ¶

(ii) Impact on nursing practice experience faculty; ¶

(iii) Student attrition rate; and ¶

(iv) Summary of findings from time schedule for planning, initiating, and evaluation of the increase or decrease in the program. ¶

(e) The following Nursing program appointments may require approval by the Board representative before the applicant assumes the program assignment: ¶

(A) Non-nurse appointment by exception of nurse administrators or interim nurse administrator; ¶

(B) Any appointment who do not meet by exception; and, ¶

(C) Non-nurse faculty teaching the qualifications outlined in OAR 851-021-0045(2). Programs must submit writing the nursing curriculum rationale for other required courses embedded with nursing outcomes. ¶

(3) Annual Reports: ¶

(a) Program information must be submitted to the Board representative or designee annually on a form. Exception requests must be approved before the individual assumes the program assignment. The Board representative may grant approval by the Board. ¶

(b) The annual report must include information to confirm continued compliance with OAR 851-021. ¶

(c) A list of all current Nurse Educators and Nurse Educator Associates, including all nursing practice experience faculty, must be submitted with the annual report and upon request of the Board representative in the following circumstances: ¶

(a) The education and experience qualifications are deemed equivalent to the requirements. The list must include academic degrees, areas of nursing. ¶

(b) The individual is pursuing expertise, years of experience and full-time or part-time status. ¶

(4) General Guidelines for Reports: ¶

(a) The Board reviews required submitted reports during posted public meeting dates; and, ¶

(b) Materials to be reviewed at public Board meetings as described above, must be in the Board office and accessible to the needed qualifications. Reports on progress toward meeting the minimum qualifications must be provided as requested by the Board representative; or designee by the posted filing date for interested parties. ¶

(c) The individual is appointed for one year. The appointment may be extended annually for a maximum of two times.

Statutory/Other Authority: ORS 678.150

Statutes/Other Implemented: ORS 678.150

REPEAL: 851-021-0030

RULE SUMMARY: Removed references to Board representative offering consultation.

CHANGES TO RULE:

~~851-021-0030~~

~~Consultative Services ¶¶~~

~~Consultative services regarding OAR 851-021 may be provided by the Board representative at the request of a program or educational institution offering or planning to offer a nursing program.~~

~~Statutory/Other Authority: ORS 678.150~~

~~Statutes/Other Implemented: ORS 678.150~~

AMEND: 851-021-0035

RULE SUMMARY: Simplified and clarified expectations around closing a program and aligned with standards as prescribed by the Higher Education Coordinating Commission (HECC) for education institutions.

CHANGES TO RULE:

851-021-0035

Closing of an Approved Nursing Education Program ¶¶

(1) ~~Voluntary closing:~~ When the educational institution anticipates the voluntary closing of a nursing education program, it must notify the Board in writing, stating the reason, plan, and date of the intended closing. ~~Notice of intent to discontinue a nursing program must be transmitted to the Board at minimum 30 days prior to public announcement. The educational institution must choose one of the following closing procedures:¶¶~~

~~(a) The program must continue until the last class enrolled has graduated:¶¶~~

~~(A) The program must continue to meet OAR 851-021 until all enrolled students have graduated.¶¶~~

~~(B) The date of closure is the date on the degree, diploma, or certificate of the last graduate.¶¶~~

~~(C) The educational institution must notify the Board of the closing date.¶¶~~

~~(b) The program must close after the educational institution has assisted in the transfer of students to other approved nursing programs: for teach out and transfer, and date of the intended closing. The educational institution must follow closing procedures as per OAR 583-030-0061.¶¶~~

~~(A2) The program must continue to meet the OAR 851-021 until all students are transferred.¶¶~~

~~(B) A list of the names of students who have been transferred to approved nursing programs and the date on which the last student was transferred must be submitted to the Board by the educational institution.¶¶~~

~~(C) The date on which the last student was transferred must be the closing date of the program standards in OAR Chapter 851 Division 21 until closure.¶¶~~

~~(23) Closing as a result of denial or withdrawal of approval:~~ When the Board denies or withdraws approval of a program, the educational institution must comply with the following procedures:¶¶

~~(a) The program must close after the institution has made a reasonable effort to assist in the transfer of students to other approved nursing education programs. A timeframe for the transfer process must be established by the Board.¶¶~~

~~(b) A list of the names of students who have transferred to approved nursing programs and the date on which the last student was transferred must be submitted to the Board by the educational institution.¶¶~~

~~(c) The date on which the last student was transferred must be the closing date of the program unless otherwise designated by the Board.¶¶~~

~~(3) Provision must be made for custody of records as follows:¶¶~~

~~(a) Safe storage of vital records, including permanent records of all graduates of the program.¶¶~~

~~(b) Notification to the Board in writing as to where the records are store; and¶¶~~

~~(b) The date on which the last student was transferred must be the closing date of the program unless otherwise designated by the Board.~~

Statutory/Other Authority: ORS 678.150

Statutes/Other Implemented: ORS 678.150

AMEND: 851-021-0040

RULE SUMMARY: Renamed and clarified the administrator responsibilities, relocated information from 021-0060 about student record retention and clarified documents and timelines.

CHANGES TO RULE:

851-021-0040

~~Standards for Approval:~~Nursing Education Program Organization and Administration ¶

(1) The educational institution offering nurseing education programs ~~shall~~must: ¶

(a) Maintain all required approvals through the State of Oregon;and ¶

(b) ~~Be accredited by a regional association or national~~institutionally accredited by an agency recognized by the United States Department of Education.¶

(2) ~~There must be evidence of adequate human~~ program must have adequate faculty, staff, physical space, technological, and fiscal resources for the development, implementation, stability, and continuation of the program,including required prerequisite and support courses.¶

~~(3) ¶~~

(3) The educational institution must ensure the Nurse Administrator must havehas institutional authority, control, and administrative responsibility for the program, including:¶

(a) Ensuring adherence with all regulatory standards;¶

(b) Leadership within the faculty for the development, implementation, and evaluation of the program, including curriculum and instructional delivery;¶

~~(b) Creation and maintenance of a safe environment conducive to teaching and learning, including of~~ qualified faculty and coordination and support of faculty assignments;¶

~~(c) Liaison with executive administrators and administrative and student service units of the institution;~~¶

~~(d) Participation in institutional policy and program decisions that affect teaching and learning within the nursing program, prerequisite, or support courses~~of appropriate teaching assignments;¶

(d) Participation in institutional policy and program decisions that affect the nursing program; ¶

(e) Participation in preparation of the budget;¶

~~(f) A~~ and administration of the approved gram budget;¶

~~(g) Facilitation of~~ Ensuring faculty member orientation and professional development;¶

~~(h) Participation in faculty member performance reviews and policies;~~¶

~~(i) Recommendation for faculty member appointment, promotion, tenure and retention; and;~~¶

~~(j) Liaison with the Board related to the program's continuing compliance with OAR 851-021.~~ ¶

(4) ~~There must be a description or organizational chart available to faculty and staff that clearly illustrates communication and decision-making processes within the nursing program, and accountability and communication across the educational institution.~~¶

~~(5) The Nurse Administrator must have sufficient time provided for carrying out administrative responsibilities. Instructional responsibilities and responsibilities for administration of other programs must be considered.~~ ¶

~~(6) Student complaint and grievance process must be defined, reviewed, and addressed in accordance with established policies.~~ ¶

~~(7) During periods when the nurse administrator role is temporarily unfilled and interim nurse administrator must be designated within 15 days to maintain ongoing nursing leadership;~~ ¶

~~(a) The interim designee must serve in that role after approval by the Board representative;~~ ¶

~~(b) The interim designee must have the authority to fulfill the role as described in OAR 851-021-0045(4) and~~ ¶

(g) Have sufficient time provided for carrying out administrative responsibilities to ensure the nursing education program meets the standards of OAR Chapter 851, Division 21. ¶

~~(84)~~ The policies of the educational institution and the nursing education program must be congruent, fair, equitable, current and published. The following must be accessible to all applicants and students:¶

(a) Admission and re-admission policies; ¶

(b) Grading policies; ¶

(c) Policy on advanced placement, articulation agreements, and transfer of credits;¶

(d) Criteria for successful progression in the program, including graduation requirements; ¶

(e) The number of credits required for completion of the program;¶

(f) Tuition, fees, and other program costs; and¶

(g) Appeal, grievance and complaint policies.¶

(5) Nursing education programs must establish mechanisms for student input into and participation in decisions related to the nursing education program.¶

(6) The following records must be maintained and made available for review for a period of 20 years:¶

(a) Student complaints and grievances filed with the program;¶

(b) Reports related to education, preparation, licensing, and continuing education (CE) of all faculty as established in OAR 851-021-0045; and¶

(c) Curriculum, syllabi, program of study, and student handbooks.

Statutory/Other Authority: ORS 678.150, ORS 678.340

Statutes/Other Implemented: ORS 678.150, ORS 678.360

RULE SUMMARY: The Nursing Faculty title was updated and qualification requirements clarified, including reduced barriers for nurse administrators and faculty. Programs now have more flexibility in hiring, focusing on qualifications rather than experience years, and can appoint non-nurse faculty without Board approval. Faculty evaluation of students is reaffirmed, and new standards for faculty development, ratios, and placements were established, allowing more program flexibility. The faculty presence requirement was removed for most placements except community-based, with increased flexibility for 1:1 precepted experiences.

CHANGES TO RULE:

851-021-0045

~~Standards for Approval:~~ Nursing Faculty ¶

(1) Nursing education program faculty must include a sufficient number of qualified ~~Nurse Educators and Nurse Educator Associates~~ to meet the ~~identified learning outcomes of the nursing education program.~~ program. Additionally: ¶

~~(2a) The Nurse Administrator and each nurse faculty member must hold a current, unencumbered license to practice as a registered nurse in Oregon, maintain current knowledge of nursing practice for the registered nurse and the licensed practical nurse, and final evaluation of student learning outcomes in the classroom or clinical experience must be made by a nurse faculty member; and, ¶~~

~~(b) Nursing faculty must be academically and experientially qualified for the level of program assignment. ¶~~

~~(2) Program appointment: ¶~~

~~(3) Qualifications for practical nurse programs include: ¶~~

~~(a) The Nurse Administrator must: ¶~~

~~(A) Hold at least a master's degree in nursing with documentation of preparation or experience in curriculum and teaching; and, ¶~~

~~(B) Have the equivalent of a minimum of four years of full-time nursing experience of which two years must have been in patient care, and two years must have been as a Nurse Educator or in an administrative position in an academic nursing education program. ¶~~

~~(b) Each Nurse Educator must: ¶~~

~~(A) Hold at least a baccalaureate degree in nursing; ¶~~

~~(B) Have the equivalent of a minimum of three years of full-time patient care nursing experience; and, ¶~~

~~(C) Document competency in teaching through experience, educational preparation, or continuing education the nursing education program, regardless of the official title assigned by the institution. The nurse administrator must: ¶~~

~~(A) Hold an active RN license in Oregon; ¶~~

~~(c) Each Nurse Educator Associate must: ¶~~

~~(AB) Hold at least a baccalaureate degree in nursing; and, ¶~~

~~(BC) Have the equivalent of a minimum of two years of full-time patient care nursing experience. ¶~~

~~(d) If the program in practical nursing is embedded within a registered nurse program, all faculty member appointments shall meet the qualifications required for registered nurse programs. ¶~~

~~(4) Qualifications for registered nurse experience as a nurse educator or in an administrative position in an academic nursing education programs: ¶~~

~~(ab) The Nurse Administrator must: ¶~~

~~(A) Hold at least a master's degree in nursing with documentation of preparation, development, implementation, and experience in curriculum and teaching in an academic nursing program. In addition, for baccalaureate degree nursing programs, the Nurse Administrator must hold an earned doctorate degree; and, ¶~~

~~(B) Have the equivalent of a minimum of five years of full-time nursing experience to include: ¶~~

~~(i) A minimum of two years must be in patient care at the registered nurse level; and, ¶~~

~~(ii) A minimum of three of these years must be in a valuation of the nursing program curriculum. This may include a full-time, part-time, or adjunct faculty regardless of institutional rank. The nurse Educator or administrative position in an academic nursing education program. ¶~~

~~(b) Each Nurse Educator must: must: ¶~~

~~(A) Hold an active RN license in Oregon; ¶~~

~~(AB) Hold at least a master's graduate degree in nursing, or a baccalaureate degree in nursing and master's graduate or doctoral degree in a related field with relevant teaching and nursing experience related to~~

the teaching assignment.¶

(B) Have the equivalent of a minimum of three years of full-time patient care experience at the time of teaching in a PN program only, the nurse educator may hold a baccalaureate degree in nursing; and,¶

(C) Document competency in teaching through experience, educational preparation, or continuing education.¶

(c) Each NCE.¶

(c) The nurse educator associate. The nurse educator associate must hold at least a baccalaureate degree in nursing with the equivalent of a minimum of two years of full-time contribute to classroom and clinical instruction in collaboration with and under the direction of the nurse educator. The nurse educator associate must:¶

(A) Hold an active patient care experience at the registered nurse level RN license in Oregon; and¶

(B) Hold at least a baccalaureate degree in nursing. ¶

(5d) The non-nurse faculty. Non-nurse faculty may teach within the nursing curriculum or other required courses with embedded nursing outcomes must be. These faculty must:¶

(A) Hold at least a graduate degree; and¶

(B) Be academically and experientially qualified for assigned teaching responsibilities. ¶

(a3) A faculty appointment form must be completed by the nurse in addition to the requirements in OAR 851-021-0045(2) APRN program administrators and approved by the Board representative before such faculty assumes program responsibilities. faculty must meet the following qualifications for APRN programs:¶

(ba) No exceptions will be granted for non-nurse faculty members.¶

(6) Faculty appointments without exception are made by the Nurse Administrator and do not require Board approval or notification. However, the Board maintains the authority to conduct audits of a program's faculty education and experience at any time to confirm compliance with OAR 851-021.¶

(7) Approval for Appointment by Exception is required for nursing faculty and nurse administrator serving in a nursing program as indicated:¶

(a) Any exceptions to the minimum qualifications for nursing program faculty and nurse administrator of a Nurse Practitioner (NP) education program must have a current national certification with the same population focus of the educational program.¶

(b) A program administrator of a Certified Registered Nurse Anesthetist (CRNA) education program must have a current national CRNA certification.¶

(c) A program administrator appointments as of a C indicated in subsections (3) and (4) of this rule must be submitted in writing to the Board representative including the rationale for the request and description of recruitment efforts;¶

(b) The exception request must be approved by the Board representative before the faculty member or nurse administrator assumes the program assignment; and¶

(c) The fully qualified nurse educator providing oversight for the faculty appointed by exception is identified; and ¶

(d) The current number of faculty and administrator appointments by exception in a program must be considered during the approval process by the Board representative. Nurse Specialist (CNS) education program must have a current national certification with the same population focus as the education program, unless a national certification for the population focus or subject matter does not exist.¶

(8d) The Board representative may grant exceptions to nursing faculty and nurse administrator appointments for any of the following circumstances:¶

(a) The education and experience qualifications are deemed equivalent to the requirements; or, All nursing faculty teaching APRN specialty core courses must hold an active equivalent Oregon APRN license.¶

(b4) The appointed individual is pursuing the needed qualifications. Reports on progress toward meeting the minimum qualifications must be provided as requested by the Board representative; or,¶

(c) The individual without full qualification is appointed for one year. The exception may be extended annually for a maximum of two times. nurse administrator has authority to make faculty appointments within these rules; with documentation of either continued and unsuccessful recruitment for a qualified replacement, or a plan to establish eligibility under exception (b) above.¶

(9) Nursing program faculty may include full-time and part-time faculty members. Any individual responsible for evaluating student ability to meet outcomes in the classroom or any part of the nursing practice experiences is included in the faculty out Board approval or notification. ¶

(5) The nursing education program must ensure that faculty are provided orientation and mentorship in their assigned roles.¶

(6) Nurse faculty members must have the authority and responsibility to: ¶

(a) Design, review, and implement the curriculum; ¶

(b) Determine, develop and evaluate nursing program policies, including student admission, progression, and graduation eligibility.¶

(c) Define expected outcomes for each course and the program overall. policies;¶

- (c) Evaluate student learning outcomes in didactic and clinical settings;¶
- (d) Provide timely feedback to students on progression within a course and the program overall; ¶
- (e) Provide opportunity for students to evaluate teaching effectiveness, courses, and the program overall;¶
- (f) Collaborate through defined channels with other nursing programs and nursing practice experience partners to develop appropriate and equitable access to nursing practice experiences. ¶
- (g) Provide clear guidance to nursing practice experience partners, Clinical Nurses, and Clinical Preceptors;¶
- (f) Provide clear guidance to clinical partners on learning outcomes, expected competencies, and learning level of students assigned to nursing practice experiences.¶
- (h) Provide faculty member and Clinical Preceptor orientation. ¶
- (i) Provide mechanisms for student input into and/or participation in decisions related to the nursing program, the clinical experience; and ¶
- (jg) Implement a plan for on-going course-specific and comprehensive program evaluation.¶
- (k) Maintain documentation of professional development activities that demonstrate links between periodic evaluation of competency, professional goals, planned professional development activities, and completion of these activities. ¶
- (10) Faculty Operations must show the following:¶
- (a) A standard format for faculty meeting minutes to capture meaningful discussions, decision-making, and follow-up; and,¶
- (b) A timetable for regular review of nursing program policy, including student, program, and course outcomes with overall curriculum evaluation and faculty input.¶
- (11) The Nurse Administrator and each nurse faculty member must demonstrate professional competence and continued development in nursing practice pertinent to assigned teaching responsibilities and, nursing education practices. ¶
- (a) The Nurse Administrator and each faculty member must periodically review assigned teaching responsibilities, evaluating and revising professional development plans as indicated.¶
- (b); ¶
- (7) Nurse faculty members must engage in professional development related to their professional role or teaching responsibilities. The educational institution and Nurse Administrator shall must provide support for faculty in developing and maintaining competence in assigned teaching responsibilities and nursing practice. ¶
- (e8) Links between evaluation of competency, professional goals, planned professional development activities and completion of these activities must be evident in documented performance review process. ¶
- (12) Faculty providing oversight in nursing practice experience settings outside of Oregon must meet nurse practice act requirements in the state in which the nursing practice experience is occurring.¶
- (13) Faculty Member to Student Ratio in Faculty-led nursing practice experience:¶
- (a) Faculty-led nursing practice experience must include nursing practice experiences that lead to achievement of course outcomes. ¶
- (b) The number of faculty members appointed for oversight of direct care must be one faculty member to every eight students having experience in one or more patient care units at any given time. Nursing faculty may determine that student and patient safety and learning effectiveness are improved with a lower faculty to student ratio.¶
- (c) Nursing program policy must include factors to be considered iFaculty to student ratios in clinical experiences for prelicensure PN/RN education: ¶
- (a) Nursing education programs must develop policies surrounding the faculty-to-student ratio in each clinical experience setting utilized by the program. In determining the faculty member-to-student ratio in each nursing practice experience setting, such as:¶
- (A) Outcomes to be achieved;¶
- (B) Preparation and expertiss programs must consider: ¶
- (A) Learning outcomes;¶
- (B) Experience of the faculty member;¶
- (C) Level of students;¶
- (D) Type of environment; Context of care: ¶
- (E) Number, type and condition of patclients; ¶
- (F) Number, type, and location of nursing practice experience sites; and, and ¶
- (GF) Adequacy of the ratio for to allow nurse faculty to:¶
- (i) Assess students' eapability to function safely within the nursing practice experience;¶
- (ii) Select and guide the student experience; and,¶
- (iii) Evaluate student performance and learning.¶
- (db) Faculty must remain inIn clinical experiences where the samnurse faculty as the student group throughout the nursing practice experience shift and must maintain a meaningful presence in the facilitation of learning and

evaluation as defined in program policy. ¶

(e) When students are assigned to community-based practice sites, the faculty member assigned to the student group is not required to be consistently on-site, but must provide meaningful presence and appropriate, in-person participation with thuly provides direct supervision of the nursing student, a nurse faculty member may be responsible for up to eight students. Faculty members providing supervision must remain in the same facility as the student group for the duration of their clinical experiences. ¶

(c) In clinical experiences where students and agency staff as described in program policy. ¶

(f) A faculty member must be readily available directly supervised by an employee in the clinical setting, the faculty may oversee up to 12 students. The faculty remains responsible ~~to~~for the agency staff while students are involved in the nursing practice experience. ¶

(14) Faculty Member-to-Student Ratio in Dedicated Education Units (DEU): ¶

(a) The faculty member-to-student ratios may be modified in the DEU with the use of DEU-specific Clinical Preceptors. ¶

(b) Clinical Preceptors may be used within a DEU as described by evaluation of student learning and must be available for in-person participation with facility staff. ¶

(d) Nursing programs may develop and utilize Dedicated Education Units (DEU), using clinical preceptors and a modified faculty-to-student ratio. Programs and DEU's must adhere to the following guidelines: ¶

(A) Faculty must orient and provide on-going guidance for Clinical Ppreceptors in practice sites related to the program goals, teaching strategies, learning outcomes, and expected competencies of the students; ¶

(B) Clinical Ppreceptors must be selected according to written criteria developed by faculty and agreed to by a responsible person in the practice site; ¶

(C) Faculty are not required to remain in the same facility as the student group throughout the nursing practiceclinical experience shift but must maintain a meaningful presence with nursing practice experience Pbe available for the clinical preceptors and students at the practice site, as defined in program policy; ¶

(D) The faculty member must confer with each Cclinical Ppreceptor and student (individually or in groups) regularly during the nursing practiceclinical experience as defined in program policy; and; ¶

(E) Each Cclinical Ppreceptor in the DEU may have oversight of no more than two students at one time. ¶

(15) Faculty Member-to-Student Ratio in the Final Clinical Pe) Nursing programs may offer students a precepted final practicum Eexperience: ¶

(a) The program must establish reasonable faculty-to-student ratios to: ¶

(A) A. The faculty-to-student ratio for this experience must allow for appropriate supervisionassessment and evaluation of the learning experience; and; ¶

(B) Support studentand support the achievements of course outcomes and may not exceed one faculty for fifteen students per group. ¶

(bA) Each CThe clinical Ppreceptor may have oversightsupervision of one student at a time during the provision of patclient care; ¶

(eB) The faculty member assigned to the student group is not required to be consistently on-site, but must provide meaningful presence and appropriate, be available for in-person participation in the student-preceptor-faculty triad as described in program policy. with the clinical preceptor and student while the student is involved in the learning experience; and ¶

(dC) A faculty member must be readily available to the Evaluation of student learning and achievement of course or program outcomes remains with the faculty member. ¶

(9) Clinical Ppreceptor and student while students are involved in the learning experience: s may be assigned to work directly with students. Nursing education programs must ensure that: ¶

(ea) Nursing practice experienceClinical preceptors are licensed at or above the levaluation of student achievement of course outcomes remainel of licensure that an assigned student is seeking. Additionally, for APRN programs: ¶

(A) For NP and CNS programs, the presponsibility of the assigned faculty member with consideceptor must be licensed as a licensed independent practitioner (LIP), and have praction of input from the Clinicalced in a comparable practice focus; or ¶

(B) For CRNA programs, the preceptor must be licensed as a CRNA or an anesthesiologist. ¶

(b) Preceptors and Clinical Nursre provided written information about student preparation and expected learning outcomes.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

AMEND: 851-021-0050

RULE SUMMARY: Renamed and simplified for clarity, with updated terminology (e.g., "nursing practice experience" changed to "clinical component"). It now allows more flexibility in clinical placements, promoting community-based settings, and no longer requires a 1:1 final practicum experience, although the option is retained. Simulation rules have been clarified, with no more than 50% of traditional hours allowed to be replaced by simulation. Language has been updated for PN, RN, and APRN programs to align with Divisions 45 and 55, and APRN curricular standards from 051-0020 have been incorporated.

CHANGES TO RULE:

851-021-0050

~~Standards for Approval: Curriculum ¶¶~~

(1) The mission, goals, and expected program outcomes must be consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.¶¶

(2) Curriculum must: ¶¶

(a) Prepare the student to achieve the nursing competencies necessary at the level of licensure for safe practice based on current standards of care;¶¶

(b) Reflect the identified mission, goals, and learning outcomes of the nursing education program;¶¶

~~(c) Be consistent with the law governing the practice of nursing.¶¶~~

~~(d) Identify learning outcomes at the course and program level that show alignment and progression throughout the program; ¶¶~~

~~(ed) Include courses and learning activities that support student achievement of identified outcomes; ¶¶~~

~~(fe) Include nursing practice experiences organized in such a manner to have sufficient proximity in time a clinical component sufficient to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and demonstrate competent safe nursing practice; and ¶¶~~

~~(gf) Define the requirements of the educational institution for graduation. Include within PN and RN programs:¶¶~~

~~(hA) Identify the total units required for graduation. ¶¶~~

~~(3) Nursing practice experience includes the clinical component of the nursing curriculum and must:¶¶~~

~~(a) Occur in a variety of settings.¶¶~~

~~(b) Include sufficient direct care and final clinical practicum hours to meet course and program outcomes and, at minimum, provide 51% The one-hour pain management education program described in ORS 413.572 or an equivalent pain management education program; and¶¶~~

~~(B) A minimum of these two hours across the nursing education program except as provided in OAR 851-021-0050~~

~~(4)(i). ¶¶~~

~~(c) Integrate a combination of four modalities to refine competencies at the appropriate program level of education related to cultural competency.¶¶~~

~~(3) The clinical component of the nursing curriculum includes the modalities of direct care, simulation, and final can occur in any setting where students may impact a health outcome. Over the course of the program, clinical practicum must:¶¶~~

~~(Aa) Skills laboratory (if applicable). ¶¶~~

~~(B) Direct Care. ¶¶~~

~~(C) Simulation (if applicable). ¶¶~~

~~(D) Final Clinical Practicum. Occur in a variety of settings:¶¶~~

~~(b) Be sufficient in experience to allow for students to meet course and program outcomes;¶¶~~

~~(dc) Integrate patient safety principles; ¶¶~~

~~(ed) Include the implementation of evidence-based practices; ¶¶~~

~~(fe) Focus on the provision of patient-centered, culturally competent care; that recognizes the patient or designee is the source of control and full partner in providing coordinated care by:¶¶~~

~~(Af) Respecting patient differences, values, preferences and expressed needs;¶¶~~

~~(B) Involving patients or designees in decision-making and care management; and,¶¶~~

~~(C) Explaining interventions to patients that promote health. ¶¶~~

~~(g) Include collabor Include collaboration and communication with inter-professional teams to foster open communication, mutual respect, and shared decision-making supportive of quality patient care.; and¶¶~~

~~(g) Promote clinical judgment. ¶¶~~

~~(4) Programs may use simulation as a component of nursing practice experience. T part of the clinical component. When utilized, the nursing program must: ¶¶~~

- (a) Ensure simulation learning has adequate fiscal, human, technologic, and physical space resources to support the learning environment; ¶
- (b) ~~Provide evidence to the Board that~~ Follow national simulation standards ~~have been met~~; ¶
- (c) Designate a ~~nursing faculty member as~~ simulation coordinator who is academically and experientially qualified. This individual must demonstrate continued expertise and competence in the use of simulation while managing the program; ¶
- (d) ~~Define the roles of simulation coordinator and simulation faculty members.~~ ¶
- (e) Have a written plan for orienting faculty to simulation; ¶
- (f) ~~Ensure faculty involved in simulations have initial training in the use of simulation. Initial simulation training must include:~~ ¶
 - (A) Introduction to simulation-based learning experiences; ¶
 - (B) Foundations of scenario design and curriculum integration; ¶
 - (C) Introduction to pre-brief and debrief; ¶
 - (D) Debriefing for clinical judgement; and, ¶
 - (E) Introduction to assessment and evaluation of simulation-based education. ¶
- (g) ~~Ensure faculty involved in simulations have annual training in on-going professional development in the use of simulation.~~ ¶
- (h) ~~Have written policies and procedures on the following:~~ ¶
 - (A) ~~Short-term and long-term plans for integrating simulation into the curriculum; and,~~ ¶
 - (B) ~~Procedures for the method of debriefing each simulated activity;~~ ¶
- (i) ~~Establish a budget that will sustain the simulation activities and training of the simulation faculty.~~ ¶
- (j) ~~Develop criteria to evaluate the relationship of simulation-based experiences to course outcomes and development of required competencies.~~ ¶
- (k) ~~Develop criteria to allow~~ Provide a mechanism for students to evaluate the simulation experience on an ongoing basis; and ¶
- (l) ~~Not to exceed 49% of simulated clinical component~~ Ensure that no more than 50% of traditional clinical hours across the nursing program. An exception to exceed 49% must include rationale for the request and be approved by the Board representative prior to implementation. ¶
- (m) ~~Include information about the programs use of simulation in its annual report to the Board~~ program are replaced with simulation. ¶
- (5) Practical Nurse Programs: ¶
 - (a) ~~Practical nurse~~ N program curricula must meet all educational institution requirements for, and culminate in the award of, a certificate or diploma. ¶
 - (b) ~~Consistent with OAR 851-0045-0050, the program curriculum must focus on the role of the practical nurse~~ Must deliver curriculum consistent with the practice of practical nursing as described in OAR 851-045-0050 in a supervised practice that occurs at the direction and under the supervision of the ~~registered nurse or licensed independent practitioner~~ RN or LIP with the authority to make changes to the plan of care. ¶
 - (c) ~~In practical nursing~~ The PN programs, the course content must have: ¶
 - (A) A minimum of six clock hours of learning activities related to pain management and, ¶
 - (B) A minimum of two hours of cultural competency curriculum. ¶
 - (d) ~~The Practical Nurse program must provide theory and nursing practice experience that promote achievement of outcomes within the practical nurse scope of practice, including those related to:~~ ricula must include content related to the following concepts: ¶
 - (A) Creating and maintaining a safe environment of care; ¶
 - (B) Demonstrating professional, legal, and ethical behavior in nursing practice; ¶
 - (C) Collecting data and performing focused nursing assessments of the health status of an individual client; ¶
 - (D) Participating in the planning of the nursing care needs of an individual client; ¶
 - (E) Participating in the development and modification of the nursing care plan; ¶
 - (F) Providing safe, evidence-based, clinically competent, culturally sensitive, and ~~pat~~ client-centered care for the promotion, restoration and maintenance of wellness in a variety of care settings or; for palliation across the lifespan; ¶
 - (G) Functioning as a member of the interdisciplinary healthcare team; ¶
 - (H) Using technology to facilitate communication, manage information, and document care; ¶
 - (I) Providing cost-effective nursing care and participating in quality improvement strategies; ¶
 - (J) Participating in health teaching and counseling to promote, attain, and maintain the optimum health level of an individual client; ¶
 - (K) Assisting in the evaluation of a ~~pat~~ client's response to nursing interventions and the identification of that pat client's needs; and ¶
 - (L) Assigning and providing oversight to assistive personnel and other ~~licensed practical nurses; and,~~ ¶

~~(M) Awareness of community-based care concepts found in OAR 851-047PNs.~~ ¶

(6) Registered Nurse Programs:¶

(a) Registered nurseN program curricula must meet all institutional requirements for, and culminate in the award of, an associate, baccalaureate, or masters.¶

~~(b) In registered nurse programs, the course degree.¶~~

~~(b) Must deliver curriculum consistent must have:¶~~

~~(A) A minimum of six clock hours of learning activities related to pain management and,¶~~

~~(B) A minimum of two hours of cultural competency curriculum.¶~~

~~(c) The Registered Nurse program must provide theory and nursing practice experience that promote achievement of outcomes within the registered nurse scope of practice, including those related to: with the practice of registered nursing as described in OAR 851-045-0060.¶~~

~~(c) RN programs that wish to offer a practice nursing exit-option must follow the process outlined in OAR 851-021-0025(4). ¶~~

~~(d) The RN program curricula must include content related to the following concepts: ¶~~

~~(A) Creating and maintaining safe and effective environment of nursing care; ¶~~

~~(B) Demonstrating professional, legal and ethical behavior in nursing practice;¶~~

~~(C) Using problem-solving skills, reflection, and clinical judgment in nursing practice to assess the health status of individuals and groups of individuals and to identify health care problems that are amenable to nursing interventionclients to identify health care problems;¶~~

~~(D) Prescribing nursing interventions and assessing responses to those interventions in order to direct, manage, delegate, and supervise nursing care for individuals, families, or groupclients;¶~~

~~(E) Establishing outcomes to meet identified health care needs and providing safe, clinically competent, culturally sensitive, patient-centered and evidence-based care to promote, restore and maintain wellness in a variety of care settings or, for palliation across the lifespan;¶~~

~~(F) Providing culturally sensitive and evidence-based teaching, counseling, and advocacy for individuals, families and groupclients;¶~~

~~(G) Participating within and providing leadership for an interdisciplinary team; ¶~~

~~(H) Assigning and supervising other members of the healthcare team; ¶~~

~~(I) Applying leadership skills to identify the need for and to promote change;¶~~

~~(J) Using communication and information technology effectively and appropriately to collaborate with other health professionals in the management of health care;¶~~

~~(K) Applying and integrating principles of community health and community-based care into practice;¶~~

~~(L) Integrating concepts of resource utilization, quality improvement and systems to enhance care delivery; and¶~~

~~(M) Delegating nursing interventions that may be performed by others per the OSBN-defined concept of Delegation in community-based care per OAR 851-047; and, as defined in OAR Chapter 851 Division 6. ¶~~

~~(N) Baccalaureate and entry level masters programs must also include outcomes related to:¶~~

~~(i) Applying epidemiological, social, and environmental data and principles to identify and implement health promotion goals and strategies for communities and populations;¶~~

~~(ii) Leading and effecting change through participation in teams and beginning application of management knowledge;¶~~

~~(iii) Identifying and implementing measures to improve access to healthcare for individuals and underserved groups;¶~~

~~(iv) Using the principles and practice of research to validate and improve nursing care for individuals, families, and groupclients; and,¶~~

~~(v) Using teaching-learning principles to develop outcomes and provide formative and summative feedback to others. ¶~~

~~(7) Proposed demonstrAdvanced Practition project that significantly alters the approved curriculum, model of nursing practice experience, or faculty-to-student ratio requires a letter of intent be submitted to the Board six months prior to the planned implementation. The letter of intent must include the following information:¶~~

~~(a) Description of the proposed projectce Nurse Programs:¶~~

~~(a) APRN program curricula must meet all educational institution requirements for, and culminate in the award of, a doctoral degree.¶~~

~~(b) Must prepare students for the role of CRNA, CNS, or NP inclusive of the role of certified nurse midwife (CNM). ¶~~

~~(c) Must deliver curriculum consistent with the advanced practice nursing role and population foci as described in OAR Chapter 851 Division 55.¶~~

~~(d) The APRN program curricula must include content related to the following:¶~~

~~(A) Advanced health assessment which includes assessment of all human systems, advanced assessment techniques, concepts and approaches across the lifespan;¶~~

~~(B) Advanced physiology and pathophysiology, including purpose-general principles that apply across the lifespan;¶~~

~~(bC) Description of mechanisms and procedures for student safety and learning effectiveness.¶~~

~~(c) Plan for evaluation of the project and reporting findings back to the Board. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents; ¶~~

~~(D) Health promotion, health maintenance, differential diagnosis and management of diseases across all practice settings appropriate to program focus; and¶~~

~~(dE) Tentative time schedule for planning, initiating, and evaluating the program~~Basic understanding of the principles of independent decision making in the identified role.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

ADOPT: 851-021-0051

RULE SUMMARY: Incorporated this temporary rule into the permanent draft. Provides flexibility for nursing programs to obtain approval for alternative learning experiences, when clinical placements are suddenly lost.

CHANGES TO RULE:

851-021-0051

Exception Requests for Clinical Experiences Due to Unforeseen Circumstances

(1) A nursing education program may request an exception to OAR 851-021-0050(3) and (4) when unforeseen circumstances, such as a work stoppage affecting healthcare services, pandemic, natural disaster, or other extraordinary event, prevent students from obtaining greater than 25% of their scheduled clinical placements within an academic term. Routine or reasonably foreseeable difficulties in securing clinical placements are not a basis for requesting an exception.¶

(2) Exception Request Requirements:¶

(a) The nursing program administrator of the affected nursing program must submit a written exception request to the Board representative.¶

(b) The written request must include the following: ¶

(A) A description of the unforeseen circumstance leading to the lack of clinical placements and the anticipated impact on student progression;¶

(B) The anticipated duration of the circumstances, if known, and the dates of the academic term affected;¶

(C) A breakdown of the types of clinical placements (cohort or final practicum) affected, the number of students affected, the total clinical clock hours for the current academic term, and the total planned clinical hours for the program; and¶

(D) A plan which outlines how students will meet course and program outcomes following substitutions in planned clinical experiences. Substitutions may include: mid-fidelity and high-fidelity simulation and virtual simulation. The plan must describe the following:¶

(i) Any changes in the use of simulation to meet educational requirements;¶

(ii) Transition strategies to virtual learning platforms, if applicable; and¶

(iii) Other course or programmatic strategies implemented to address the clinical placement gap.¶

(3) The Board representative will review the exception request and will approve or deny the request based on the adequacy of the plan and compliance with this rule. Programs may not implement substitutions until receipt of approval.¶

(4) Exceptions will be granted for no more than a single academic term. Programs may submit a new exception request if the unforeseen circumstances persist beyond the approved duration.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150

AMEND: 851-021-0055

RULE SUMMARY: Clarified standards regarding what information must be provided to prospective students, standards for students in the program, and expectations for articulation agreements.

CHANGES TO RULE:

851-021-0055

Standards for Approval: Program Responsibilities to Students ¶

(1) ~~While in the program of study, students must be held accountable for demonstration of professional behaviors expected of licensed professionals; Prior to admission, student applicants must be informed of:~~¶

(a) Current signed agreements for the articulation of program graduates into the next level of nursing education;¶

(b) Potential and anticipated transportation and distance requirements for any clinical component; and¶

~~(2c) Admission, readmission, transfer, progression, dismissal, and graduation policies must be available to the applicants and be consistent with those of the educational institution. Where necessary, policies specific to the nursing program may be adopted if justified by the nature and purposes of the nursing program.~~¶

~~(3) Support services of the program and the educational institution are accessible to~~¶

(2) While in the program of study, the nursing education program must ensure students:¶

~~(4a) Students must meet all nursing practice experience~~Comply with all clinical component requirements as defined by the Oregon Health Authority. ~~per OAR Chapter 409 Division 30; and~~¶

(b) Have access to support services of the program and the educational institution. ¶

~~(53) Programs that provide allow for advanced placement must develop and use policies designed to ensure that students meet the equivalent of the program's current curriculum and outcomes.~~¶

~~(64) The use of a single high stakes standardized, or non-standardized examination is not congruent with best PN and associate degree nursing educational practices and must not be used as a sole determinant of a student's graduation or progression in a nursing education program. If such assessments are used, the programs must maintain an articulation agreement for graduates into the next level of nursing education.~~¶

(5) Nursing education programs must have a process and procedure for remediation for students who do not pass.¶

~~(7) Student applicants must be informed before admission that the Board has limits on eligibility for licensure, as defined in OAR 851-031. Ultimately, licensure may be denied to graduates with a criminal offense and those with a major physical or mental condition that could affect the individual's ability to practice nursing safely.~~¶

~~(8) Student applicants to practical nurse and associate degree level nursing programs must be informed of the current Board-approved, signed agreement for the articulated process in place for student remediation of clinical incidents.~~¶

(6) The use of a single or high stakes exam may not be used as a sole determinant of a student's graduation of program graduates into the next level of nursing education.¶

(9) Student applicants must be informed of expected transportation and distance requirements for nursing practice experiencesession in a nursing education program.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

REPEAL: 851-021-0060

RULE SUMMARY: Moved to 021-0040 for clarity, consolidating information regarding records retention into the program administration and organization rule.

CHANGES TO RULE:

~~851-021-0060~~

~~Standards for Approval: Records ¶¶~~

~~A system of records must be maintained and be made available to the Board representative and must include but not be limited to:¶¶~~

~~(1) Reports relating to institutional and program accreditation by any agency or body;¶¶~~

~~(2) Student complaints and grievances filed with the program to confirm adherence to program and educational institution policy;¶¶~~

~~(3) Other records in accordance with state or federal guidelines, program or institution policy, record retention schedule or statute of limitations; and,¶¶~~

~~(4) Reports relating to education, preparation, licensing, and continuing education of all faculty as established in 851-021-0045.~~

~~Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360~~

~~Statutes/Other Implemented: ORS 678.150, ORS 678.360~~

AMEND: 851-021-0065

RULE SUMMARY: Old rule language simplified and moved to 021-0040. Rule renamed Facilities and Resources with the language being simplified for clarity. Clinical preceptor information moved to 021-0045.

CHANGES TO RULE:

851-021-0065

~~Standards for Approval:~~ Facilities and ~~Servi~~Resources ¶

(1) ~~Educational~~Nursing education program facilities must ensure fiscal, technologic, academic support services and physical space to ensure program outcomes are met. ¶

(2) Resources ~~are~~must be comparable and available to nursing students on all campuses where the program is offered. ¶

(3) Selection of ~~nursing practice experience~~clinical component sites must be based on ~~writ~~documented criteria established by ~~faculty inclusive of the requirement that facilities hold appropriate certifications or licenses.~~the program. ¶

(4) There ~~is~~must be a current ~~written, formal~~documented, formal affiliation agreement that is in effect between the authorities responsible for the educational program and the ~~nursing practice experience~~clinical component site. The agreement must state that faculty members have the authority and responsibility to select appropriate learning experiences in collaboration with the practice site. ¶

(5) ~~Clinical Nurses and Clinical Preceptors may be assigned to work directly with students. These individuals must:~~ ¶

(a) ~~Be licensed at or above the level of licensure that an assigned student is seeking;~~ ¶

(b) ~~Be licensed in the jurisdiction of the learning experience.~~ ¶

(c) ~~Be approved by the faculty after recommendation by nursing staff members in leadership roles who can confirm demonstrated nursing competencies.~~ ¶

(d) ~~Be provided written information about student preparation and expected learning outcomes.~~ ¶

(e) ~~Engage students in nursing practice experiences only after a student has received basic instruction for that specific learning experience from a faculty member.~~

Statutory/Other Authority: ORS 678.150, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.340, ORS 678.360

AMEND: 851-021-0070

RULE SUMMARY: Renamed Outcomes and Evaluation, simplifying the program's systematic evaluation plan and aligning NCLEX standards with accrediting agencies, offering flexible pathways for nursing programs seeking accreditation.

CHANGES TO RULE:

851-021-0070

~~Standards for Approval:~~Outcomes and Evaluation

(1) The nursing program ~~has~~must have a current, written systematic plan of evaluation and shows evidence of ongoing periodic review of the entire program. ~~The plan must include:~~

~~(a) Evaluative criteria;~~

~~(b) Methodology of how the data will be collected;~~

~~(c) Frequency of evaluation;~~

~~(d) Assignment of responsibility; and,~~

~~(e) Indicators of program and instructional effectiveness.~~

(2) The plan of evaluation contains the following:

~~(a) Specific expectation of measurable achievement for each e~~

(2) The plan of evaluation must include:

(a) Course outcome and for each program outcome;

(b) Internal and external measures of graduate achievement of identified student learning outcomes;

(c) NCLEX® pass rate data, trends, and Program effectiveness;

(c) NCLEX® pass rate data;

(d) Overall curriculum design, influenced by factors;

~~(d) Sufficient and appropriate data analysis to inform program decision-making for the maintenance and improvement of each program and student outcome;~~

(e) Periodic assessment of curriculum design, consideration of clinical experiences and simulation;

~~(f) Faculty sufficient in number, preparation, experience, and diversity to effectively~~qualifications and ability to achieve course and program outcomes; and maintain patient and student safety.

~~(g) R~~

(f) Review of resources, including human, fiscal, technologic, and physical space to support the number of enrolled students, instructional delivery, and achievement of program learning outcomes.

(3) There ~~is~~must be evidence that faculty review data and make decisions regarding ongoing program improvement based on the analysis.

(4) Nursing education programs working towards accreditation must maintain the following NCLEX standards:

(a) A minimum of 80% first-time pass rate for the most recent 12-month period;

(b) An average 80% first-time pass rate, based on the total number of test-takers, for the most recent 36-month period;

(c) A 90% total pass rate or higher, based on the total number of test-takers, for the most recent 12 months; or

(d) An average 90% total pass rate or higher, based on the total number of test-takers, for the most recent 36-month period.

Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.360

REPEAL: 851-021-0080

RULE SUMMARY: Repeal of rule providing oversight of re-entry programs.

CHANGES TO RULE:

851-021-0080

Standards for Re-Entry Programs

(1) Re-entry programs must be approved by the Board before the implementation and a minimum of every 5 years thereafter.¶¶

(a) An application for program approval must include:¶¶

(A) The intended size and type of re-entry program;¶¶

(B) A written program plan addressing the standards for approval in subsection (2) of this rule;¶¶

(C) Projected number and type of faculty; and,¶¶

(D) Description and availability of educational and nursing practice experience facilities and resources, as appropriate.¶¶

(b) Program changes requiring Board approval:¶¶

(A) Change in program director;¶¶

(B) Major change in curriculum or instructional design; and,¶¶

(C) Intent to close or substantially reduce program enrollment.¶¶

(2) Standards for Approval:¶¶

(a) Faculty qualifications:¶¶

(A) The program director, each nurse educator, nurse educator associate, Clinical Nurse, and Clinical Preceptor must hold a current unencumbered license to practice as a registered nurse in Oregon;¶¶

(B) The re-entry program director and all nurse educators must:¶¶

(i) Hold a minimum of a bachelor's degree in nursing;¶¶

(ii) Have no less than three years of registered nursing experience; and¶¶

(iii) Provide evidence of a minimum of three years of academic teaching experience or demonstrated competency in teaching adult learners; ¶¶

(C) Each nurse educator associate must have no less than three years of registered nursing experience and demonstrated competency in teaching adult learners; ¶¶

(D) Each Clinical Nurse and Clinical Preceptor must:¶¶

(i) Agree to directly supervise and evaluate the re-entry nurse;¶¶

(ii) Have no less than two years of registered nursing experience, of which a minimum of six months must be in the setting in which the nursing practice experience is to occur; and,¶¶

(iii) Be recommended by the nurse executive or immediate supervisor in that setting.¶¶

(b) Faculty Responsibilities. The faculty must:¶¶

(A) Plan, implement, evaluate, and revise the educational program;¶¶

(B) Select and evaluate facilities for supervised nursing practice experience;¶¶

(C) Develop and use written examinations and nursing practice experience performance measures based on the registered or practical nurse scope of practice to evaluate student achievement of program outcomes and required competencies;¶¶

(D) Develop, implement, and evaluate policies related to student admission, retention, and progression, and policies related to program operations; and,¶¶

(E) Provide for student evaluation of the program.¶¶

(c) Program curriculum:¶¶

(A) Curriculum must be consistent with the law governing the practice of nursing as defined in division 45 and division 47 of the Nurse Practice Act;¶¶

(B) Curriculum plan must identify:¶¶

(i) Course length, methods of instruction, and planned learning experiences;¶¶

(ii) Course content and practice requirements for completion of the program; and,¶¶

(iii) Outcomes achieved on completion of the program; and,¶¶

(C) The curriculum must include a minimum of 120 hours of didactic instruction in current nursing practice which must be completed prior to beginning the clinical component, encompassing:¶¶

(i) The scope of nursing practice, legal and ethical perspectives, the current health care system, and working within interdisciplinary teams;¶¶

(ii) The nursing process, critical thinking, prioritizing, decision-making, and cultural competence in nursing practice;¶¶

(iii) The prescribing, directing, managing, assigning, delegating, and supervising of nursing care;¶¶

(iv) Nursing care of patients with alterations in health;¶¶

(v) Current nursing procedures and processes including use of technology in patient management, nursing practice and documentation;¶¶

(vi) Comprehensive nursing assessment;¶¶

(vii) Documentation including legal aspects of documentation; and,¶¶

(viii) Application of pharmacologic knowledge and administration of medications.¶¶

(d) Supervised nursing practice experience:¶¶

(A) The re-entry nurse must hold a limited license at the level for which the re-entry course is being taken prior to engaging in supervised nursing practice experience;¶¶

(B) Supervised nursing practice experience must be appropriate to the student's level of licensure and plan for competency development;¶¶

(C) Prior to required supervised nursing practice experience, the student must receive relevant orientation appropriate to the planned experience;¶¶

(D) Supervised nursing practice experience for nursing re-entry must be a learning role and unpaid;¶¶

(E) The re-entry program must include a minimum of 160 hours of supervised nursing practice experience that may include up to 72 hours of simulation;¶¶

(F) Up to 160 additional hours of supervised clinical practice may be required when recommended by the re-entry program director, nurse preceptor or nurse supervisor at the clinical site;¶¶

(G) Instructor-supervised clinical practice may be provided; and,¶¶

(H) The faculty-to-student ratio for instructor-supervised clinical practice must be no greater than 1:8. A lower ratio may apply when dictated by student and patient safety and learning effectiveness.¶¶

(e) Documentation of successful completion of the re-entry program must include:¶¶

(A) Completion of program outcomes;¶¶

(B) Completion of required supervised clinical practice hours;¶¶

(C) Achievement of course competencies; and,¶¶

(D) Recommendation for licensure by the re-entry program director and the clinical preceptor.¶¶

(f) The program must notify the Board representative in writing of each student's successful completion of the program, withdrawal from the program prior to completion, or failure to meet required outcomes.

Statutory/Other Authority: ORS 678.150, ORS 678.113

Statutes/Other Implemented:

AMEND: 851-021-0090

RULE SUMMARY: Renamed to Standards for out-of-state prelicensure programs offering educational experiences in Oregon, with the process simplified and barriers removed for Oregon students attending distance programs but completing clinicals in Oregon.

CHANGES TO RULE:

851-021-0090

Standards for Out-of-State Student Clinic Pre-licensure Programs Offering Educational Experiences in Oregon ¶

(1) All out-of-state nursing programs seeking to place one or more students in Oregon for a nursing practice experience must submit an initial letter of intent as per OAR 851-021-0010 and the required Oregon State Board of Nursing petition. Board representative approval must be obtained prior to student placements in the nursing practice experience site. ¶

(a) The initial and annual petition must include: ¶

(A) Justification or rationale for use of Oregon facilities including description of nursing practice experience sites and planned duration of cohort placements; ¶

(B) The estimated number of students to be placed in an Oregon nursing practice experience site each term; ¶

(C) Attestation of affiliation agreement with clinical site; ¶

(D) Documentation of home Board approval including time frame and any recommendations which are outstanding; that offer education with Oregon-based clinical placements must notify the Board prior to offering placements in Oregon. This notification must include: ¶

(Ea) Evidence of educational institution accreditation by a regional accreditation body or national agency recognized by the United States Department of Education. ¶

(F) Analysis of current usage of planned nursing practice experience sites in areas where student placements are planned Information regarding the type of program and level of licensure; ¶

(Gb) Evidence of interactions with the Nurse Administrators of currently approved nursing programs in area of planned nursing practice experience placements to discuss the impact on those nursing programs; ¶

(H) Evidence of availability of faculty in areas where nursing practice experience placements are planned, including providing meaningful presence as established in OAR 851-021-0045 (13)(d)(e), (14)(C), (15)(c). ¶

(I) Name and credentials of a contact person within the Oregon nursing practice experience facility; ¶

(J) NCLEX® pass rate, number of candidates and number passing for the past two years ending on the most recent December 31st. ¶

(K) An out-of-state Nursing Program seeking to increase the approved number of student cohorts must submit a revised petition prior to making the change and obtain approval from the Board representative prior to placement of additional students. The revised petition must include the following: ¶

(i) Updates to the information required for initial application as established in subsection (5)(a) above, or attestation that the information has not changed; and, ¶

(ii) A written agreement with the Oregon nursing practice experience facility that additional students from the out-of-state nursing program will not adversely impact current Oregon Nursing Program placements. ¶

(b) The Board representative may request evidence from the nursing program of the following, including but not limited to: ¶

(A) A written agreement with the Oregon nursing practice experience facility; ¶

(B) Learning objectives to guide the student experience; ¶

(C) Specific policies regarding patient and student safety such as error reporting, and frequency of faculty visitation; ¶

(D) Expectations of the provision of meaningful presence by faculty providing oversight; ¶

(E) Criteria for selection of Clinical Preceptor; and, ¶

(F) Other information as needed. ¶

(2) The Board representative or designee, after timely review and consideration of the request and required information, may grant, or deny the request, or bring it to the full Board for a decision program approval by the nursing regulatory body in the state or US jurisdiction where the program is located; ¶

(c) Anticipated annual Oregon student enrollment; and ¶

(d) Attestation of affiliation agreements with Oregon clinical sites. ¶

(32) All requests for precepted, final clinical practicum and student cohort placements must include evidence that the responsible faculty member is licensed in Oregon appropriate to the level of the program and provides meaningful presence as established in OAR 851-021-0045 (13)(d)(e), (14)(C), (15)(c). ¶

(4) For precepted, final nursing practice experiences, student names and other information required by the Board

must be submitted for approval prior to the start of the learning experience.¶¶

~~(5) Nursing programs with faculty and facilities located i~~Out of state nursing education programs are required to resubmit the information Oregon and approved by another state:¶¶

~~(a) The program must meet the OAR 851-021 for Oregon-based nursing programs.¶¶~~

~~(b) In addition, the program must:¶¶~~

~~(A) Report any change in approval/accreditation status within 30 days of such change;¶¶~~

~~(B) Report plans for a significant increase in planned enrollment that may impact geographic region practice sites including plans for provision of nursing practice experience placement for an additional student or students;¶¶~~

~~(C) Submit to the Board representative, a copy of any progress reports required by the home board;¶¶~~

~~(D) Submit the annual NCLEX® pass rate, number of candidates and number of candidates passing for the previous calendar year ending December 31; and,¶¶~~

~~(E) Demonstrate attainment of OSBN standards for approval through OSBN participation in the regular survey visit conducted by the home board and/or nursing specialty accreditation organization.¶¶~~

~~(6) The Board may conduct a complete survey of the program of nursing to determine its eligibility for approval at any time or may accept all or part of the survey and findings on approval from the home Board or nursing specialty accreditation organization~~quired in OAR 851-021-0090(1) of this rule on an annual basis.

Statutory/Other Authority: ORS 678.031, ORS 678.150, ORS 678.340, ORS 678.360

Statutes/Other Implemented: ORS 678.031, ORS 678.150, ORS 678.340, ORS 678.360