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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 851
BOARD OF NURSING

FILED
09/28/2023 3:39 PM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Division 21- Standards for Approval of PN & RN Nursing Education Programs.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 10/24/2023 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.

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Filed By:
Amanda Meeuwsen
Rules Coordinator

HEARING(S)

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

DATE: 10/24/2023
TIME: 1:00 PM - 3:00 PM
OFFICER: Amanda Meeuwsen

HEARING LOCATION
ADDRESS: Oregon State Board of Nursing, 17958 SW Upper Boones Ferry Rd, Portland, OR 97224

REMOTE MEETING DETAILS
PHONE NUMBER: 971-413-4714

NEED FOR THE RULE(S)

Revisions to rule for public safety in pre-licensure nursing education.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

none

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

Adoption of these rules will not affect racial equity in this state.

FISCAL AND ECONOMIC IMPACT:

There is no fiscal or economic impact for these proposed rule changes.

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).

none

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

Small businesses were not involved in the development of proposed rule changes.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:
851-021-0000, 851-021-0010, 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, 851-021-0052, 851-021-0055, 851-021-0060, 851-021-0065, 851-021-0070, 851-021-0080, 851-021-0090

AMEND: 851-021-0000

RULE SUMMARY: Updated to follow rule writing protocol.

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 nursing practice. To include the following:¶
(1) Standards for the development of new nursing education programs.¶
(2) Enable innovative responses of established nursing education programs to a changing health care environment.¶
(3) Provide criteria for the approval of new and established nursing education programs.¶
(4) Provide sanction standards for nursing education programs that do not maintain compliance with OAR ~~851-0~~Chapter 851, Division 21. ¶
(5) Set standards for approval of learning experiences for students enrolled in programs outside of Oregon.¶
(6) Set standards for nurse re-entry programs.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ~~ORS 678.150, 678.360~~

AMEND: 851-021-0010

RULE SUMMARY: Updated to include clearly defined expectations as well as updated timelines.

CHANGES TO RULE:

851-021-0010
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~~shall 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~~is binding and shall include information about size and type of program proposed, projected start date, student enrollment, geographic region ~~and~~, planned nursing practice experience sites~~.~~ and shall provide recipients with information about the option to respond as outlined in OAR 851-021-0010(1)(c). ¶
(c) The nurse~~e~~ing program administrators and chief nurse executives, duly notified, have the option of responding. Such response ~~must~~shall be sent to the appropriate Board representative within 30 days from the date on the letter of intent and ~~must~~shall address potential adverse impacts to other 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~~shall be included in the applicant's preliminary application when submitted.¶
(e) The nursing program administrator candidate must hold an active Oregon registered nurse license and meet all standards of OAR 851-021-0025(2)(e) and OAR 851-021-0045 before performing any job functions. ¶
(2) Step 2 - Preliminary Application¶
(a) After receiving the letters of response from the Board representative, the applicant may ~~make~~submit application for Preliminary ~~a~~Approval.¶
(b) The preliminary application ~~must~~shall 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.¶
(C) An analysis of potential impact on other nursing programs in the state including:¶
(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.¶
(D) Evidence of interactions with the ~~N~~nurse ~~A~~ing program 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 ~~pat~~client numbers, number 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~~.~~ to include who will be financially responsible for the students travel and overnight accommodations, if needed. ¶
(G) Evidence of administrative and financial support for development of a nursing program.¶
(H) Evidence of the appointment of a qualified ~~N~~nurse ~~A~~ing program administrator as specified in OAR 851-021-0045 and sufficient administrative support staff for program development. ¶
(I) Anticipated student enrollment and proposed date of enrollment. ¶
(J) A program that is part of a corporate structure ~~must~~shall 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, and 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. ¶
(~~M~~L) The Board, after ~~timely~~ review and consideration of the information contained in the letter of intent and ~~any supplementary inform~~the Preliminary Application, must either grant or deny permission to begin ~~d~~Development Approval of a nursing program, including rationale for the decision. ¶
(~~N~~M) 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 developmental approval application within ~~twelve~~12 months after the date ~~of~~ the Board grant~~in~~ged permission to proceed, the permission to begin program development is expired. ¶
(~~O~~N) 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) If the program is not approved by the Board to move forward to Developmental Approval within 12 months of Board denial the program shall begin a new application process. ¶
(iii) A hearing before the Board may be requested in accordance with the Oregon Administrative Procedures Act~~.~~ ¶
~~(3) Step 3 - Application for~~, Chapter 183, 2021 edition. ¶
(3) Step 3 - Developmental Approval Application:¶
(a) An educational institution or program that has received approval of the program's letter of intent and preliminary application to develop a nursing program may ~~make a~~submit an Application for ~~d~~Developmental ~~a~~Approval.¶
(b) The developmental approval application ~~must~~shall 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:¶
(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~~with 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~~0~~(3).¶
(~~D~~C) Administration and organizational plan delineating lines of authority and decision making impacting the nursing program.¶
(~~E~~D) Description of proposed instructional modalities and resources to support these modalities with dates of availability.¶
(~~F~~E) Availability of adequate nursing practice experience sites for the program with supporting documentation from persons assigned to coordinate nursing practice experience placements for each facility.¶
(~~G~~F) Availability of adequate educational facilities, services, and resour~~ces, and nursing practice experience placement site~~s for the entire length of the program.¶
(~~H~~G) Evidence of financial resources adequate for planning, implementation, and continuation of the program, including proposed operating costs.¶
(~~I~~H) Tentative timetable for planning the program.¶
(~~J~~I) Tentative start date for the program.¶
(~~K~~J) Current educational institution catalog inclusive of all published information provided to students on accreditations and approvals.¶
(~~L~~K) Signed formal agreement for the articulation of program graduates into the next level of nursing education. The agreement ~~must~~shall 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~~shall define specific accepted credits for progression in the registered nurse program:¶
(i) Programs leading to a certificate or degree in practical nursing ~~must~~shall have an agreement that prepares candidates for licensure as a registered nurse; and,¶
(ii) Programs leading to an associate degree in nursing ~~must~~shall 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~~12 months to submit an application for Initial Approval or the developmental approval ~~will~~is expired. ¶

(~~f~~e) If developmental approval is denied:¶
(A) The program may submit a revised developmental application no sooner than six months from the previous submission;¶
(B) If the program is not approved by the Board to move forward to Initial Approval within 12 months of Board denial the program shall begin a new application process. ¶
(C) The applicant may request a hearing before the Board in accordance with the Oregon Administrative Procedures Act, Chapter 183, 2021 edition. ¶
(4) Step 4 - Initial Approval~~:¶~~
~~(a) Initial a~~ Application:¶
(a) Application for Initial Program Approval ~~status may be applied for~~may be submitted with documented evidence that the following conditions have been met:¶
(A) ~~Preliminary Application as described in~~ OAR 851-021-0010(~~2) has received~~1)(2) and (3) have met 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:¶
(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 ha~~ve~~s been granted;¶
(ii) A program that is part of a corporate structure ~~must~~shall 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 nurse educators per OAR 851-021-0045, 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 851-021-0050;¶
(ii) Readiness for admission of students in educational 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~~K).¶
(b) Following Board receipt and review of the information required in OAR 851-021-0010(~~3~~4), the Board may grant or deny initial approval.¶
(c) If initial approval is granted, a site visit ~~may~~will be conducted by a representative of the Board.¶
(d) Initial approval ~~must~~shall be received by a program prior to publication of the program and recruitment or acceptance of students for admission to the first class of nursing students.¶
(e) A new program may admit only one class of students ~~until~~in an academic year before final Board approval has been granted. ¶
(f) If the program is not approved by the Board to move forward to Final Approval within 12 months of Board denial the program shall begin a new application process. ¶
(g) If initial approval is denied, the applicant may request a hearing before the Board in accordance with the Oregon Administrative Procedures Act, Chapter 183, 2021 edition.-¶
(~~g~~h) Interim visits and progress reports may be requested by the Board at any time during the initial approval phase and following initial approval as deemed necessary by the Board.¶
(~~h~~i) If the educational institution does not admit a class within ~~twelve~~12 months after the date designated for initiating the program, the initial approval is expired.¶
(5) Step 5 - Final Approval:¶
(a) Eligibility for final approval occurs after the graduation of the first class of students.¶
(b) Within six months following graduation of the first class, the program ~~must~~shall submit a self-study report addressing compliance with current OAR 851-021-0018 and OAR 851-021-0040 through 851-021-0070~~and a~~. A survey visit ~~must~~shall be made for consideration of approval of the program.¶
(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.~~-0018 and OAR 851-021-0040 through OAR 851-021-0070;¶
(B) The success rate of graduates on the NCLEX®; and,¶
(C) A survey report by a representative of the Board.¶
(d) Final Approval will be granted for up to two years at which time another full survey will be will completed. ¶
(e) If the program is not approved by the Board to move forward to Final Approval within 12 months of Board denial the program shall begin a new application process. ¶
(~~d~~f) If approval is denied, the applicant may request a hearing before the Board in accordance ~~of the~~with the Oregon Administrative Procedures Act, Chapter 183, 2021 edition.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ~~ORS 678.150, ORS 678.360~~

AMEND: 851-021-0015

RULE SUMMARY: Updated language around survey cycles, 851-021-0018 grammar update.

CHANGES TO RULE:

851-021-0015
~~Periodic~~ Evaluation 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 ~~851-0~~Chapter 851, Division 21.¶
(b) Potential violations of OAR ~~851-0~~Chapter 851, Division 21. ¶
(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 nurs~~e~~ing program 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 program~~s~~ with deficiencies or violations.¶
(3) 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~~Chapter 851, Division 21 at a minimum of:¶
(A) Every four years for programs without national accreditation. ¶
(B) Every four years for programs with an eight-year national accreditation cycle.¶
(C) Every five years for programs with a 10-year national accreditation cycle. ¶
(b) Programs that have ~~received~~ national nursing accreditation may be surveyed in conjunction with the national nursing accreditation body. ¶
(c) The survey visit ~~must~~shall be made by a representative of the Board on dates mutually acceptable to the Board representative and the program.¶
(d) A program ~~must~~shall submit a ~~narrative self-evaluation report~~self-study rubric that provides evidence of compliance with OAR ~~851-0~~Chapter 851, Division 21 one month prior to the scheduled survey visit.¶
(e) All programs shall provide evidence that nursing faculty participated in the pre-survey, self-study process. ¶
(f) Nursing faculty must be invited and allowed to participate in the post-survey debrief. ¶
(g) During the survey visit the Board representative will review and analyze various sources that validate compliance.¶
(~~f~~h) Nursing programs ~~must~~shall be evaluated by use of a rubric to guide approval. The Board determines the approval length of time.¶
(~~g~~i) Program evaluations ~~based on~~completed through survey visits are based on OAR 851-021-0018 and 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~~Deficiencies in the survey report shall have accompanying expectations and are intended as action items for the nursing program and educational institution. ~~Expectations are intended~~Identified deficiencies are to be corrected and implemented within a timeframe set ~~by the Board representative~~ and approved by the Board.¶
(B) ~~Failure to address previously identified areas deemed "partially met" or "not met" may result in identification of a deficiency.¶~~
~~(C) If the Board determines that a deficiency exists, the nurse administrator and educational institution administration shall receive a report specifying the deficiency and prescribing 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~~j) Continuing approval will be granted upon the Board's verification that the program is in compliance with OAR ~~851-0~~Chapter 851, Division 21 and has the continued support of the educational institution to maintain compliance. ¶

(~~i~~k) The Board representative may share a preliminary summary report with the program at the end of the survey visit with the understanding that the report is not ~~final~~complete until final modification or approval by the Board is made.¶
(~~j~~l) A draft of the survey visit report may be made available to the program for review and corrections ~~in~~to factual data before review by the Board.¶
(~~k~~m) The nurs~~e~~ing program administrator or designee of the program may be invited to be present during the presentation of the survey visit report to the Board.¶
(~~l~~n) Following the Board's review and decision, written notification regarding approval of the program, or notice of standards requiring a follow-up report within a specified timeframe ~~must~~shall be sent by the Board representative to the ~~administrator of the nursing education program~~nursing program administrator within 30 business days.¶
(~~m~~o) An approved nursing program that becomes accredited by a national nursing accreditation body between Board survey visits, may have the next scheduled Board survey visit adjusted to provide for alignment with the accreditation review cycle as specified in OAR 851-021-0015(3)(a).
Statutory/Other Authority: ~~ORS 678.340,~~ ORS 678.360
Statutes/Other Implemented: ~~ORS 678.360~~

AMEND: 851-021-0018

RULE SUMMARY: Update "must" to "shall".

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~~shall 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~~shall 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~~

AMEND: 851-021-0020

RULE SUMMARY: Defined Board sanctioned steps for programs who fail to correct identified deficiencies.

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 ~~851-0~~Chapter 851, Division 21, a formal notice ~~must~~shall 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~~shall be corrected.¶
(2) A~~pproval may be withdrawn if a~~ nursing education program that fails to correct ~~the~~identified deficienc~~y~~ies within the timeframe specified ~~after a hearing in which such facts are established.~~by the Board shall be subject to one or more of the following Board sanctioned disciplinary processes: ¶
(a) Decrease in approved program enrollment; ¶
(b) A stop on program enrollment; ¶
(c) Withdrawal of approval of program;¶
(3) The nursing program administrator must ensure that: ¶
(a) The official Board notice regarding failure to correct deficiencies is posted on the admissions page of the program's website:¶
(A) Within seven business days of notice from Board staff; and ¶
(B) Remains on the website until Board approval is granted for removal. ¶
(b) All students are provided with the official Board notice OAR 851-021-0020(3)(a) within seven business days of notice from Board staff. ¶
(~~3~~4) 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, or fails to correct identified deficiencies within the timeframe specified by the Board after Board sanctioned disciplinary processes have been enforced.
Statutory/Other Authority: ORS 678.~~340, ORS 678.36~~150
Statutes/Other Implemented: ~~ORS 678.360~~

AMEND: 851-021-0025

RULE SUMMARY: Better defined the need to inform the Board about increase and decrease in enrollment, identified Boards ability to remove nursing program administrators approval.

CHANGES TO RULE:

851-021-0025
Reports and Approvals ¶

(1) Program Changes Requiring Reports to the Board: The program ~~must~~shall notify the Board representative in writing within 15 days of development of the following circumstances:¶
(a) Change in the nurs~~e~~ing program administrator ~~must~~shall be accompanied by a request for approval of an interim or replacement as established in OAR 851-021-0045. ¶
(b) Change of administrative control within the educational institution with the rationale for the change and anticipated impact on the nursing program. ¶
(c) Plans to move the entire program to a new location within the current geographic region:¶
(A) The program ~~must~~shall notify the Board representative in writing of the following:¶
(i) Address of the new location;¶
(ii) Rationale for moving the nursing program;¶
(iii) Anticipated date of completed move; and,¶
(iv) Anticipated impact on curriculum delivery, other nursing programs, nursing practice experience partners, students and faculty.¶
(B) The Board representative may complete a survey visit to confirm compliance with OAR ~~851-0~~Chapter 851, Division 21. ¶
(d) Changes in availability of adequate nursing practice 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~~eight 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,¶
(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~~shall be submitted to the Board ~~by~~within 30 days by the educational institution relinquishing the program in collaboration with the receiving institution containing the following information:¶
(~~i~~A) Rationale for change;¶
(~~ii~~B) Anticipated effects on students, faculty and resources;¶
(~~iii~~C) Administrative and organizational plans, including a sound operational budget;¶
(~~iv~~D) Evidence of student notification; ¶
(E) Plans for ~~the orderly~~ transition of the program; and,¶
(~~v~~F) 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 program, ~~such change must be submitted~~they shall submit a change request to the Board for approval at a minimum of six months prior to offering the first nursing course under the new curriculum.¶
(B) A major curriculum change includes, but is not limited to:¶
(i) A revision of the length of the program;¶
(ii) 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; ¶
(v) Substantive change in educational modality for program delivery; and ¶
(vi) New educational track at the same level in an established program. ¶
(C) The following materials ~~must~~shall be submitted with the request for curriculum changes:¶

(i) Rationale for proposed changes including the anticipated effect on faculty, students, resources and facilities;¶
(ii) Presentation of the differences between the current curriculum and the proposed curriculum;¶
(iii) A timetable for implementation of the 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 program to a new location outside of the current geographic region or addition of distance education technology: ¶
(A) The program ~~must~~shall 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~~is binding and shall include, at minimum, the following information:¶
(i) Plan for qualified faculty for the program at the extended or new site or with addition of distance education technology;¶
(ii) Description of available and proposed education facilities and delivery modalities, services and resources with dates of availability;¶
(iii) Availability of adequate nursing practice experience practice sites and provisions for faculty supervision of experiences;¶
(iv) Plans for informing potential students of expected transportation and distance requirements for nursing practice experience~~s; and,~~ to include who will be financially responsible for the students travel and overnight accommodations, if needed. ¶
(v) Tentative time schedule for planning, initiating, and evaluating the program.¶
(C)-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 the capacity of the educational institution's physical facilities, human, technologic, and fiscal resources, or nursing practice experience sites. The plan ~~must~~shall be submitted to the Board representative ~~for approval six months prior to the beginning of the student enrollment change in a~~by the specified deadline in order to be presented at the next public Board meeting for approval. The report shall contain~~ing~~ 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~~a proposed increase in student enrollment showing facility size, average ~~pat~~client 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 A~~ to include who will be financially responsible for the students travel and overnight accommodations; if needed; ¶
(iv) The nursing education program shall give written notification of intent to increase enrollment to the planned nursing practice experience sites, and to impacted nursing program administrators of ~~currently~~all Board approved nursing ~~programs within the~~education programs. ¶
(v) The letter of intent is binding and shall include information about the proposed increase in enrollment, projected start date, geographic region~~ of~~, planned nursing practice experience ~~placements to discuss the impact of an enrollment increase~~sites and shall provide recipients with information about the option to respond as outlined in OAR 851-021-0010(1)(c). ¶
(C) Anticipated effects on students, faculty, and nursing practice experience resources.¶
(D) 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~~shall submit a report to the Board, addressing the following:¶
(i) Impact on nursing practice experience sites;¶
(ii) Impact on nursing practice experience faculty;¶
(iii) Student attrition rate; and¶
(iv) Summary of findings from evaluation of the increase or decrease. ¶
(e) The following program appointments require approval by the Board representative before the applicant assumes the program assignment:¶
(A) Nurs~~e A~~ing program administrator or ~~I~~interim ~~N~~nurs~~e A~~ing program administrator; ¶
(B) Any appointment by exception; and, ¶
(C) Non-nurse faculty teaching within the nursing curriculum or other required courses embedded with nursing

outcomes. ¶
(3) Annual Reports:¶
(a) Program information ~~must~~shall be submitted to the Board representative or designee annually on a form approved by the Board.¶
(b) The annual report ~~must~~shall include information to confirm continued compliance with OAR ~~851-0~~Chapter 851, Division 21. ¶
(c) A list of all current Nurse Educators and Nurse Educator Associates, including all nursing practice experience faculty, ~~must~~shall be submitted with the annual report and upon request of the Board representative.~~-~~The list ~~must~~shall include each individual's highest level of nursing education, other academic degrees, areas of nursing expertise, years of experience~~ and full-tim~~, the content educator is responsible for~~ part-time status.~~, and Oregon license number. ¶
(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~~shall be in the Board office and accessible to the Board representative or designee by the posted filing date for interested parties.¶
(5) The nursing program administrator and all nursing faculty must be pre-approved by the Board representative. ¶
(6) The approval granted by the Board representative for the nursing program administrator may be withdrawn by the Board.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ~~ORS 678.150~~

AMEND: 851-021-0030

RULE SUMMARY: Updated for proper rule format.

CHANGES TO RULE:

851-021-0030
Consultative Services ¶

Consultative services regarding OAR ~~851-0~~Chapter 851, Division 21 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: Grammar

CHANGES TO RULE:

851-021-0035
Closing of an Approved Nursing Education Program ¶

(1) Voluntary closing: When the educational institution anticipates the closing of a nursing education program, it ~~must~~shall notify the Board in writing, stating the reason, plan, and date of the intended closing. Notice of intent to discontinue a nursing program ~~must~~shall be transmitted to the Board at minimum 30 days prior to public announcement. The educational institution ~~must~~shall choose one of the following closing procedures:¶
(a) The program ~~must~~shall continue until the last class enrolled has graduated:¶
(A) The program ~~must~~shall continue to meet OAR ~~851-0~~Chapter 851, Division 21 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~~shall notify the Board of the closing date.¶
(b) The program ~~must~~shall close after the educational institution has assisted in the transfer of students to other approved nursing programs:¶
(A) The program ~~must~~shall continue to meet the OAR ~~851-0~~Chapter 851, Division 21 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~~shall be submitted to the Board by the educational institution.¶
(C) The date on which the last student was transferred ~~must~~shall be the closing date of the program.¶
(2) Closing as a result of denial or withdrawal of approval: When the Board denies or withdraws approval of a program, the educational institution ~~must~~shall comply with the following procedures:¶
(a) The program ~~must~~shall close after the institution has made a reasonable effort to assist in the transfer of students to other approved nursing programs. A timeframe for the transfer process ~~must~~shall 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~~shall be submitted to the Board by the educational institution.¶
(c) The date on which the last student was transferred ~~must~~shall be the closing date of the program unless otherwise designated by the Board.¶
(3) Provision ~~must~~shall 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 stored.
Statutory/Other Authority: ORS 678.150
Statutes/Other Implemented: ORS 678.150

AMEND: 851-021-0040

RULE SUMMARY: grammar and citations updated

CHANGES TO RULE:

851-021-0040
Standards for Approval: Organization and Administration ¶

(1) The educational institution offering nurse education programs shall: ¶
(a) Maintain all required approvals through the State of Oregon. ¶
(b) Be accredited by a regional association or national agency recognized by the United States Department of Education.¶
(2) There ~~must~~shall be evidence of adequate human, physical space, technologic, and fiscal resources for the development, implementation, stability, and continuation of the program, including required prerequisite and support courses. ¶
(3) The ~~N~~nurse ~~A~~administrator must have institutional authority, control, and administrative responsibility for the program, including:¶
(a) 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 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¶
(e) Participation in preparation of the budget;¶
(f) Administration of the approved budget;¶
(g) Facilitation of 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 ~~851-0~~Chapter 851, Division 21. ¶
(4) There ~~must~~shall 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 ~~N~~nurs~~e A~~ing program administrator must have sufficient time provided for carrying out administrative responsibilities. Instructional ~~responsibilities and~~and administration responsibilities for ~~administration of~~ other programs must be considered. ¶
(6) Student complaint and grievance process ~~must~~shall be defined, reviewed, and addressed in accordance with established policies. ¶
(7) During periods when the nurs~~e~~ing program administrator role is temporarily unfilled an~~d~~ interim nurs~~e~~ing program 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~~).~~ 2) and (3)(a) or (4)(a).¶
(8) The policies of the educational institution and the nursing education program ~~must~~shall be congruent, fair, equitable, current and published. The following ~~must~~shall 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.
Statutory/Other Authority: ORS 678.150, ORS 678.340
Statutes/Other Implemented: ORS 678.150, ORS 678.360

AMEND: 851-021-0045

RULE SUMMARY: education requirement language made consistent, addition of 25% exception put back in rule

CHANGES TO RULE:

851-021-0045
Standards for Approval: Nursing Faculty ¶

(1) Nursing 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.¶
(2) The ~~N~~nurs~~e A~~ing program 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 be academically and experientially qualified for the level of appointment.¶
(3) Qualifications for ~~p~~Practical ~~n~~Nurse ~~p~~Programs:¶
(a) The ~~N~~nurs~~e A~~ing program administrator must:¶
(A) Hold a~~t least a master's degree in nursing~~ graduate degree in nursing or a baccalaureate degree in nursing and graduate degree in a related field 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~~shall have been in ~~pat~~client care, and two years ~~must~~shall have been as a ~~N~~nurse ~~E~~educator or in an administrative position in an academic nursing education program.¶
(C) Meet all requirements of OAR 851-021-0040(3)¶
(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 ~~pat~~client care nursing experience; and,¶
(C) Document competency in teaching through experience, educational preparation, or continuing education. ¶
(c) Each Nurse Educator Associate must:¶
(A) Hold at least a baccalaureate degree in nursing; and,¶
(B) Have the equivalent of a minimum of two years of full-time ~~pat~~client 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 ~~r~~Registered ~~n~~Nurse ~~p~~Programs:¶
(a) The ~~N~~nurs~~e A~~ing program administrator must:¶
(A) Hold a~~t least a master's degree in nursing~~ graduate degree in nursing or a baccalaureate degree in nursing and graduate degree in a related field with documentation of preparation ~~and~~or experience in curriculum and teaching ~~in an academic nursing program. In addition, for baccalaure~~for the associate degree level program. ¶
(B) Hold a graduate degree in nursing ~~programs, the Nurse Administrator must hold an earned doctorate degree; and,~~and an earned doctorate degree in a related field with documentation of preparation or experience in curriculum and teaching for the baccalaureate level program. ¶
(~~B~~C) Have the equivalent of a minimum of five years of full-time nursing experience to include: ¶
(i) A minimum of two years ~~must~~shall be in ~~pat~~client care at the registered nurse level; and, ¶
(ii) A minimum of three of these years ~~must~~shall be in a ~~N~~nurse ~~E~~educator or administrative position in an academic nursing education program.¶
(D) Meet all requirements of OAR 851-021-0040(3)¶
(b) Each Nurse Educator must:¶
(A) Hold at least a ~~master's~~graduate degree in nursing or a baccalaureate degree in nursing and ~~master's or doctoral~~graduate 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 ~~pat~~client care experience at the registered nurse level; and, ¶
(C) Document competency in teaching through experience, educational preparation, or continuing education.¶
(c) Each Nurse Educator Associate must hold at least a baccalaureate degree in nursing with the equivalent of a minimum of two years of full-time ~~pat~~client care experience at the registered nurse level. ¶
(5) Non-nurse faculty teaching within the nursing curriculum or other required courses with embedded nursing outcomes must be academically and experientially qualified for assigned teaching responsibilities. ¶
(a) A faculty appointment form ~~must~~shall be completed by the nurs~~e~~ing program administrator and approved by the Board representative before such faculty assumes program responsibilities. ¶
(b) No exceptions will be granted for non-nurse faculty members.¶

(6) Faculty appointments without exception are made by the ~~N~~nurs~~e A~~ing program 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 ~~851-0~~Chapter 851, Division 21.¶
(7) Approval for Appointment by Exception is required for nursing faculty teaching in a nursing program as indicated:¶
(a) Any exceptions to the minimum qualifications for nursing program faculty appointments as indicated in subsections (3) and (4) of this rule ~~must~~shall be submitted in writing to the Board representative including the rationale for the request and description of recruitment efforts; and¶
(b) The exception request ~~must~~shall be approved by the Board representative before the faculty member 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 appointments by exception in a program ~~must~~shall be considered during the approval process by the Board representative; and ¶
(e) No more than 25% of the total faculty may be approved by exception.-¶
(8) The Board representative may grant exceptions to nursing faculty appointments for any of the following circumstances: ¶
(a) The education and experience qualifications are deemed equivalent to the requirements; or,¶
(b) The appointed individual is pursuing the needed qualifications. Reports on progress toward meeting the minimum qualifications ~~must~~shall be provided as requested by the Board representative; or,¶
(c) The individual without full qualification is appointed by exception for one year. The~~a~~t exception may be extended annually for a maximum of two times, at the one year expiration, 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~~considered nursing faculty. Nurs~~e~~ing faculty members must have the authority and responsibility to: ¶
(a) Design, review, and implement the curriculum. ¶
(b) Determine student admission, progression, and graduation eligibility.¶
(c) Define expected outcomes for each course and the program overall. ¶
(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, ~~C~~clinical ~~N~~nurses, and ~~C~~clinical ~~P~~preceptors on learning outcomes, expected competencies, and learning level of students assigned to nursing practice experiences.¶
(h) Provide faculty member and ~~C~~clinical ~~P~~preceptor orientation. ¶
(i) Provide mechanisms for student input into and/or participation in decisions related to the nursing program.¶
(j) 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~~shall 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 ~~N~~nurs~~e A~~ing program 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 ~~N~~nurs~~e A~~ing program administrator and each faculty member must periodically review assigned teaching responsibilities, evaluating and revising professional development plans as indicated.¶
(b) The educational institution and ~~Nurse Administrator shall support faculty in developing and maintaining competence in assigned teaching responsibilities and nursing practice. ¶~~
~~(c) 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 in determining the faculty member-to-student ratio in each nursing practice experience setting, such as:¶~~
~~(A) Outcomes to be achieved;¶~~
~~(B) Preparation and expertise of faculty member;¶~~
~~(C) Level of students;¶~~
~~(D) Type of environment; ¶~~
~~(E) Number, type and condition of patients; ¶~~
~~(F) Number, type, and location of nursing practice experience sites; and,¶~~
~~(G) Adequacy of the ratio for nurse faculty to:¶~~
~~(i) Assess students' capability to function safely within the nursing practice experience;¶~~
~~(ii) Select and guide student experience; and,¶~~
~~(iii) Evaluate student performance.¶~~
~~(d) Faculty must remain in the same facility 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 the student and agency staff as described in program policy. ¶~~
~~(f) A faculty member must be readily available to 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 the following guidelines:¶~~
~~(A) Faculty must orient and provide on-going guidance for Clinical Preceptors in practice sites related to the program goals, teaching strategies, learning outcomes, and expected competencies of the students;¶~~
~~(B) Clinical Preceptors 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 practice experience shift but must maintain a meaningful presence with nursing practice experience Preceptors and students at the practice site, as defined in program policy; ¶~~
~~(D) The faculty member must confer with each Clinical Preceptor and student (individually or in groups) regularly during the nursing practice experience as defined in program policy; and,¶~~
~~(E) Each Clinical Preceptor 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 Practicum Experience:¶~~
~~(a) The program must establish reasonable faculty-to-student ratios to: ¶~~
~~(A) Allow for appropriate supervision and evaluation of the learning experience; and,¶~~
~~(B) Support student achievements of course outcomes.¶~~
~~(b) Each Clinical Preceptor may have oversight of one student at a time during the provision of patient care.¶~~
~~(c) 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 in the student-preceptor-faculty triad as described in program policy.¶~~
~~(d) A faculty member must be readily available to the Clinical Preceptor and student while students are involved in the learning experience.¶~~
~~(e) Nursing practice experience evaluation of student achievement of course outcomes remain the responsibility of the assigned faculty member with consideration of input from the Clinical Preceptor and Clinical Nurse~~nursing program administrator must support faculty in developing and maintaining competency in assigned teaching responsibilities and nursing practice. ¶
(c) Links between evaluation of competency, professional goals, planned professional development activities and completion of these activities shall be evident in documented performance review process.

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: removed nursing practice experience language (clinical) and created 0052

CHANGES TO RULE:

851-021-0050
Standards for Approval: Curriculum ¶

(1) The mission, goals, and expected program outcomes ~~must~~shall be consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.¶
(2) Curriculum ~~must~~shall: ¶
(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. ¶
(e) Include courses and learning activities that support student achievement of identified outcomes. ¶
(f) Include nursing practice experiences organized in such a manner to have sufficient proximity in time to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and demonstrate competent nursing practice. ¶
(g) Define the requirements of the educational institution for graduation.¶
(h) 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% of these hours across the nursing education program except as provided in OAR 851-021-0050 (4)(l). ¶~~
~~(c) Integrate a combination of four modalities to refine competencies at the appropriate program level. The clinical component of the nursing curriculum includes the modalities of direct care, simulation, and final clinical practicum¶~~
~~(A) Skills laboratory (if applicable). ¶~~
~~(B) Direct Care.¶~~
~~(C) Simulation (if applicable). ¶~~
~~(D) Final Clinical Practicum.¶~~
~~(d) Integrate patient safety principles. ¶~~
~~(e) Include the implementation of evidence-based practices. ¶~~
~~(f) 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:¶~~
~~(A) 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 collaboration with inter-professional teams to foster open communication, mutual respect, and shared decision-making supportive of quality patient care. ¶~~
~~(4) Programs may use simulation as a component of nursing practice experience. 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 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) 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 students to evaluate the simulation experience on an ongoing basis. ¶~~
~~(l) Not to exceed 49% of simulated clinical component 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. ¶~~
~~(5) Practical Nurse Programs:¶~~
~~(a) Practical nurse 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~~ Practical Nurse Programs:¶
(a) Practical nurse program curricula shall meet all educational institution requirements for and culminate in the award of a certificate or diploma. ¶
(b) The program curriculum shall focus on the role of the practical nurse in a supervised practice that occurs at the direction and under the supervision of the registered nurse or licensed independent practitioner with the authority to make changes to the plan of care. ¶
(c) In practical nursing programs, the course content ~~must~~shall 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~~shall provide theory and nursing practice experience that promote achievement of outcomes within the practical nurse scope of practice, including those related to: ¶
(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;¶
(D) Participating in the planning of the nursing care needs of an individual;¶
(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; ¶
(K) Assisting in the evaluation of a ~~pat~~client's response to nursing interventions and the identification of that ~~pat~~client's needs;¶
(L) Assigning and providing oversight to assistive personnel and other licensed practical nurses; and, ¶
(M) Awareness of community-based care concepts found in OAR ~~851-0~~Chapter 851, Division 47. ¶
(~~6)~~4) Registered Nurse Program:¶
(a) Registered nurse curricula ~~must~~shall meet all institutional requirements for and culminate in the award of an associate, baccalaureate, or masters degree.¶
(b) In registered nurse programs, the course content ~~must~~shall 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~~shall provide theory and nursing practice experience that promotes achievement of outcomes within the registered nurse scope of practice, including those related to: ¶
(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 intervention;¶
(D) Prescribing nursing interventions and assessing responses to those interventions in order to direct, manage,

delegate, and supervise nursing care for individuals, families, or groups;¶
(E) Establishing outcomes to meet identified health care needs and providing safe, clinically competent, culturally sensitive, ~~pat~~client-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 groups;¶
(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;¶
(M) Delegating nursing interventions that may be performed by others per the OSBN-defined concept of Delegation in community-based care per OAR ~~851-0~~Chapter 851, Division 47; and, ¶
(N) Baccalaureate and entry level masters programs ~~must~~shall 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 groups; and,¶
(v) Using teaching-learning principles develop outcomes and provide formative and summative feedback to others. ¶
(~~7~~5) Proposed demonstration project~~s~~ that significantly alter~~s~~ 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~~shall include the following information:¶
(a) Description of the proposed project, including purpose.¶
(b) 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.¶
(d) Tentative time schedule for planning, initiating, and evaluating the program.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ORS 678.150, ORS 678.360

ADOPT: 851-021-0052

RULE SUMMARY: nursing clinical practice experience language

CHANGES TO RULE:

851-021-0052
Standards for Approval: Nursing Practice Experience
(1) Nursing practice experience includes the clinical component of the nursing curriculum and shall:¶
(a) Occur in a variety of settings.¶
(b) Include sufficient direct care and final clinical practicum hours to meet course and program outcomes. ¶
(c) Integrate a combination of four modalities to refine competencies at the appropriate program level. The clinical component of the nursing curriculum includes the modalities of direct care, simulation, and final clinical practicum.¶
(A) Skills laboratory (if applicable). ¶
(B) Direct Care. ¶
(C) Simulation (if applicable). ¶
(D) Final Clinical Practicum.¶
(d) Integrate client safety principles. ¶
(e) Include the implementation of evidence informed practices. ¶
(f) Focus on the provision of client-centered, culturally competent care that recognizes the client or designee is the source of control and full partner in providing coordinated care by:¶
(A) Respecting client differences, values, preferences and expressed needs;¶
(B) Involving clients or designees in decision-making and care management; and,¶
(C) Explaining interventions to clients that promote health. ¶
(g) Include collaboration with inter-professional teams to foster open communication, mutual respect, and shared decision-making supportive of quality client care. ¶
(2) 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 client care units at any given time. Nursing faculty may determine that student and client safety and learning effectiveness are improved with a lower faculty to student ratio.¶
(c) Nursing program policy shall include factors to be considered in determining the faculty member-to-student ratio in each nursing practice experience setting, such as:¶
(A) Outcomes to be achieved;¶
(B) Preparation and expertise of faculty member;¶
(C) Level of students;¶
(D) Type of environment; ¶
(E) Number, type and condition of clients; ¶
(F) Number, type, and location of nursing practice experience sites; and,¶
(G) Adequacy of the ratio for nurse faculty to:¶
(i) Assess students' capability to function safely within the nursing practice experience;¶
(ii) Select and guide student experience; and,¶
(iii) Evaluate student performance.¶
(d) Faculty must remain in the same facility 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) A faculty member must be readily available to the agency staff while students are involved in the nursing practice experience. ¶
(3) 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 the following guidelines:¶
(A) Faculty must orient and provide on-going guidance for clinical preceptors in practice sites related to the program goals, teaching strategies, learning outcomes, and expected competencies of the students;¶
(B) Clinical preceptors 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 practice experience shift but must maintain a meaningful presence with nursing practice experience Preceptors and

students at the practice site, as defined in program policy; ¶
(D) The faculty member must confer with each clinical preceptor and student (individually or in groups) regularly during the nursing practice experience as defined in program policy; and,¶
(E) Each clinical preceptor in the DEU may have oversight of no more than two students at one time.¶
(4) Faculty Member-to-Student Ratio in the Final Clinical Practicum Experience:¶
(a) The program shall establish reasonable faculty-to-student ratios to: ¶
(A) Allow for appropriate supervision and evaluation of the learning experience; and,¶
(B) Support student achievements of course outcomes.¶
(b) Each Clinical Preceptor may have oversight of one student at a time during the provision of client care.¶
(c) 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 in the student-preceptor-faculty triad as described in program policy.¶
(d) A faculty member must be readily available to the Clinical Preceptor and student while students are involved in the learning experience.¶
(e) Nursing practice experience evaluation of student achievement of course outcomes remains the responsibility of the assigned faculty member with consideration of input from the Clinical Preceptor and Clinical Nurses. ¶
(5) Faculty Member-to-Student Ratio in the Community Setting. ¶
(a) The program shall establish reasonable faculty-to-student ratios to: ¶
(A) Allow for appropriate supervision and evaluation of the learning experience; and,¶
(B) Support student achievements of course outcomes.¶
(b) 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 the student and agency staff as described in program policy. ¶
(c) A faculty member must be readily available to the agency staff while students are involved in the nursing practice experience. ¶
(6) 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.¶
(7) Programs may use simulation as a component of nursing practice experience. The nursing program that uses simulation shall: ¶
(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 national simulation standards have been met with exception to the requirement of a certified simulation specialist. ¶
(c) Have a written plan for orienting and training faculty to simulation. ¶
(d) Ensure faculty involved in simulations have annual training in on-going professional development in the use of simulation. ¶
(e) Have written policies and procedures.¶
(f) Develop criteria to evaluate the relationship of simulation-based experiences to course outcomes and development of required competencies. ¶
(g) Establish a budget that will sustain the simulation program.¶
(h) Include information about the programs use of simulation in its annual report to the Board. ¶
(8) For programs that use simulation to replace face-to-face nursing practice experience hours the program shall not exceed 49% of simulated nursing practice experience hours over the course of the program. A written exception request to exceed 49% shall include rationale and be approved by the Board representative prior to implementation.
Statutory/Other Authority: ORS 678.150, ORS 678.340
Statutes/Other Implemented:

AMEND: 851-021-0055

RULE SUMMARY: added clarification about who is responsible for student travel expense

CHANGES TO RULE:

851-021-0055
Standards for Approval: Students ¶

(1) While in the program of study, students must be held accountable for demonstration of professional behaviors expected of licensed professionals; ¶
(2) Admission, readmission, transfer, progression, dismissal, and graduation policies ~~must~~shall 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 students. ¶
(4) Students must meet all nursing practice experience requirements as defined by the Oregon Health Authority. ¶
(5) Programs that provide for advanced placement ~~must~~shall develop and use policies designed to ensure that students meet the equivalent of the program's current curriculum and outcomes.¶
(6) The use of a single high stakes standardized, or non-standardized examination is not congruent with best educational practices and ~~must~~shall 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 program ~~must~~shall have a process and procedure for remediation for students who do not pass the examination.¶
(7) Student applicants must be informed before admission that the Board has limits on general eligibility ~~for~~requirements for nursing 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 individuals ability to practice nursing safel~~-0006, that ultimately may lead to denial of licensure if graduate does not qualify.¶
(8) Student applicants to practical nurse and associate degree level nursing programs must be informed of the current Board-approved, signed agreement for the articulation 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 experiences to include who will be financially responsible for the students travel and overnight accommodations, if needed.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ORS 678.150, ORS 678.360

AMEND: 851-021-0060

RULE SUMMARY: grammar updating instances of "must" to "shall".

CHANGES TO RULE:

851-021-0060
Standards for Approval: Records ¶

A system of records ~~must~~shall be maintained and be made available to the Board representative and ~~must~~shall 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: grammar updates of instances of "must" to "shall".

CHANGES TO RULE:

851-021-0065
Standards for Approval: Facilities and Services ¶

(1) Educational facilities must ensure fiscal, technologic, academic support services and physical space to ensure program outcomes are met. ¶
(2) Resources are comparable and available to nursing students on all campuses where the program is offered. ¶
(3) Selection of nursing practice experience sites ~~must~~shall be based on written criteria established by faculty inclusive of the requirement that facilities hold appropriate certifications or licenses.¶
(4) There is a current written, formal agreement that is in effect between the authorities responsible for the educational program and the nursing practice experience site. The agreement ~~must~~shall 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: grammar

CHANGES TO RULE:

851-021-0070
Standards for Approval: Evaluation ¶

(1) The nursing program has a current, written systematic plan of evaluation and shows evidence of ongoing periodic review of the entire program. The plan ~~must~~shall 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 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 influencing 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. ¶
(f) Faculty sufficient in number, preparation, experience, and diversity to effectively achieve course and program outcomes and maintain ~~pat~~client and student safety.¶
(g) 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 evidence that faculty review data and make decisions regarding ongoing program improvement based on the analysis.
Statutory/Other Authority: ORS 678.150, ORS 678.340, ORS 678.360
Statutes/Other Implemented: ORS 678.150, ORS 678.360

AMEND: 851-021-0080

RULE SUMMARY: grammar

CHANGES TO RULE:

851-021-0080
Standards for Re-Entry Programs
(1) Re-entry programs ~~must~~shall be approved by the Board before the implementation and a minimum of every ~~5~~five years thereafter.¶
(a) An application for program approval ~~must~~shall 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~~shall 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 polices related to program operations; and,¶
(E) Provide for student evaluation of the program.¶
(c) Program ~~c~~Curriculum:¶
(A) Curriculum ~~must~~shall be consistent with the law governing the practice of nursing as defined in ~~d~~OAR Chapter 851, Division 45 and ~~d~~Division 47 of the Nurse Practice Act;¶
(B) Curriculum plan ~~must~~shall 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~~shall include a minimum of 120 hours of didactic instruction in current nursing practice which ~~must~~shall be completed prior to beginning the clinical component, that encompass~~ing~~es:¶
(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 ~~pat~~clients with alterations in health;¶

(v) Current nursing procedures and processes including use of technology in ~~pat~~client 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~~shall 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~~shall be a learning role and unpaid;¶
(E) The re-entry program ~~must~~shall 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 ~~pat~~client safety and learning effectiveness.¶
(e) Documentation of successful completion of the re-entry program ~~must~~shall 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~~shall 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: grammar

CHANGES TO RULE:

851-021-0090
Standards for Out-of-State Student Clinical Experience in Oregon ¶

(1) All out-of-state nursing programs seeking to place one or more students in Oregon for a nursing practice experience ~~must~~shall 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~~shall 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 state Board approval including time frame and any recommendations which are outstanding;¶
(E) 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;¶
(G) Evidence of interactions with the ~~N~~nurs~~e A~~ing program 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 ~~facil~~sit~~y~~e;¶
(J) NCLEX pass rate, number of candidates and number passing for the past two years ending on the most recent annual December 31st.¶
(K) An out-of-state ~~N~~nursing ~~P~~program seeking to increase the approved number of student cohorts ~~must~~shall submit a revised petition prior to making the change and obtain approval from the Board representative prior to instituting the cohort change and placement of additional students. The revised petition ~~must~~shall 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 ~~facil~~sit~~y~~e 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 ~~facil~~sit~~y~~e;¶
(B) Learning objectives to guide the student experience;¶
(C) Specific policies regarding ~~pat~~client 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 ~~C~~clinical ~~P~~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.¶
(3) All requests for precepted, final clinical practicum and student cohort placements ~~must~~shall 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~~shall be submitted for approval prior to the start of the learning experience. ¶
(5) Nursing programs with faculty and facilities located in Oregon and approved by another state: ¶
(a) The program ~~must~~shall meet the ~~OAR 851-021~~the Chapter 851, Division 21 rules for Oregon-based nursing programs.¶
(b) In addition, the program ~~must~~shall:¶

(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 ~~b~~state Board;¶
(D) Submit the annual NCLEX pass rate, number of candidates and number of candidates ~~passing for~~who passed the examination the previous calendar year ending December 31st; and,¶
(E) Demonstrate attainment of OSBN standards for approval through OSBN participation in the regular program survey visit conducted by the home ~~b~~state Board and/or nursing specialty accreditation organization or body.¶
(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 state Board or nursing specialty accreditation organization or body.
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