

Frequently Asked Questions - Individualized Re-Entry Plan for LPNs and RNs

Any nurse with current or previous licensure who seeks licensure must have documented practice history of at least 960 hours in the five year period immediately preceding the application for renewal or re-activation of the license. If this minimum standard is not met, a re-entry program must be completed to obtain a full license.

Completion of a re-entry program may be accomplished by attending an approved program in Oregon, attending a re-entry program in another state that meets the standards required in Oregon (a minimum of 120 hours of theory which includes pharmacology and a minimum of 160 hours of precepted clinical learning), or completing an individualized plan for re-entry.

There are two options for completion of an individualized plan for re-entry

These options are:

1. NCLEX®
 - Take the NCLEX® and meet the passing standard
2. Develop Entire Re-Entry Course
 - Develop and complete a re-entry course that includes 120 hours of theory and 160 hours of clinical based on a specific curriculum plan

Frequently Asked Questions

1. How can I develop my own clinical learning experience?

Answer: This requires the applicant to find a clinical facility willing to provide a preceptor and obtain a contract or letter of agreement with that facility. The contract or letter of agreement must address provisions for client and re-entry nurse safety, a specific clause allowing the facility to terminate the agreement if there are safety concerns, and the signature of the appropriate authority at the facility. Once the contract/agreement is signed and the preceptor is identified, the preceptor and their supervisor must sign an agreement to function in this role.

2. How can I prepare to take NCLEX®?

Answer: There are many commercially available products to assist those who are studying for the NCLEX®. There are classes, books, on-line reviews, vendors that provide practice testing on-line, and private tutoring. The Board of Nursing does not provide learning resources or endorse any particular resource. Seeking a resource that fits best with one's own learning style is typically the most helpful.

3. What does it mean to “develop” a curriculum or learning experience?

Answer: The options above each require the applicant to create their own learning objectives, method of obtaining those objectives, and clear delineation of how the completion of the objectives will be evaluated. In the first option above, the applicant develops the learning objectives for the clinical learning experience. In general, these objectives should be strongly linked to the evaluation form the Board of Nursing provides which will be validated by the preceptor at completion of the clinical time. The learning method will be working with the preceptor.

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For the nurse who wishes to develop an individualized theory and clinical program, the entire course needs to be developed just as a college course might be developed. This includes the theory learning objectives for the 120 hours of theory showing what type of study will be completed to meet the 120 hours and the specific learning objectives for this portion of the re-entry program. The objectives must link to the required curricular elements found in Oregon Administrative Rule 851-031- 0065 as well as the Scope of Practice for RNs found in Oregon Administrative Rule Division 45. For the precepted clinical time, the clinical objectives and method of evaluation must be defined.

See the Oregon Nurse Practice Act for more information.

NOTE: All individualized plans must be approved by Board of Nursing staff before they can be started.

4. Who can serve as a preceptor?

Answer: The preceptor must be an RN with no less than two years of experience as a nurse and at least six months of the experience must be in the setting where the clinical learning experience is to be completed. The preceptor must also agree to serve in this role and be recommended/approved by the nursing supervisor at the clinical facility.

5. I don't have any experience developing learning objectives or curriculum. Is the individualized plan right for me?

Answer: Probably not. Checklists and information on required elements will be provided by Board staff but the development of the actual learning objectives and plan are the responsibility of the applicant. A submitted plan that doesn't provide clear learning objectives, learning methods, and methods of evaluation will be returned to the applicant for revision.

6. How do I get started on developing an individualized plan?

Answer: If the applicant decides an individualized plan is an appropriate choice, contact the Board of Nursing Education and Assessment Policy Analyst to discuss the requirements and proposed timeframe. The preferred contact method is e-mail: osbn.practicequestion@state.or.us.

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