

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
NOTICE OF PUBLIC HEARING

November 16, 2020  
10:00 a.m. Central Time  
Nebraska State Office Building – Lower Level A  
301 Centennial Mall South, Lincoln, Nebraska  
Phone call information: 888-820-1398; Participant code: 3213662#

The purpose of this hearing is to receive comments on proposed changes to Title 172, Chapter 97 of the Nebraska Administrative Code (NAC) – *Approval of Basic Nursing Programs in Nebraska*. The proposed changes remove all duplicative statutory language from the regulations and remove any repetitive regulatory language that would be found in the Nurse Practice Act or Uniform Credentialing Act. Other proposed changes include: adding specific pre-licensure nursing education program standards that nursing programs must meet in order to gain initial approval or maintain ongoing approval and specifying how nursing education programs can apply for approval of innovative approaches to pre-licensure programs. In addition, the proposed changes: update definitions; remove internal guidance language; clarify language; remove unnecessary language; and restructure the regulatory chapter.

Authority for these regulations is found in Neb. Rev. Stat. § 81-3117(7).

Due to the current public health crisis, the agency will enforce any Directed Health Measure Order on the size of gatherings that is in effect at the time of the hearing. In order to encourage participation in this public hearing, a phone conference line will be set up for any member of the public to call in and provide oral comments.

Interested persons may provide verbal comments by participating via phone conference line by calling 888-820-1398; Participant code: 3213662#.

Interested persons may provide written comments by mail, fax, or email, no later than the day of the hearing to: DHHS Legal Services, PO Box 95026, Lincoln, NE 68509-5026, (402) 742-2382 or [dhhs.regulations@nebraska.gov](mailto:dhhs.regulations@nebraska.gov), respectively.

A copy of the proposed changes is available online at <http://www.sos.ne.gov>, or by contacting DHHS at the mailing address or email above, or by phone at (402) 471-8417. The fiscal impact statement for these proposed changes may be obtained at the office of the Secretary of State, Regulations Division, 1201 N Street, Suite 120, Lincoln, NE 68508, or by calling (402) 471-2385.

Auxiliary aids or reasonable accommodations needed to participate in a hearing can be requested by calling (402) 471-8223. Individuals with hearing impairments may call DHHS at (402) 471-9570 (voice and TDD) or the Nebraska Relay System at 711 or (800) 833-7352 TDD at least 2 weeks prior to the hearing.

## FISCAL IMPACT STATEMENT

Agency: <b>Department of Health and Human Services</b>	
Title: 172	Prepared by: Ann Oertwich, RN
Chapter: 97	Date prepared: 06/27/2019
Subject: Approval of programs of professional nursing	Telephone: 402-471-0317

Type of Fiscal Impact:

	State Agency	Political Sub.	Regulated Public
No Fiscal Impact	( <input checked="" type="checkbox"/> )	( <input checked="" type="checkbox"/> )	( <input checked="" type="checkbox"/> )
Increased Costs	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Decreased Costs	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Increased Revenue	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Decreased Revenue	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Indeterminable	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )

Provide an Estimated Cost & Description of Impact: None

State Agency:

Political Subdivision:

Regulated Public:

If indeterminable, explain why:

TITLE 172      PROFESSIONAL AND OCCUPATIONAL LICENSURE

CHAPTER 97    APPROVAL OF BASIC NURSING PROGRAMS IN NEBRASKA

001. SCOPE AND AUTHORITY. This chapter sets forth the standards for approval of registered and practical programs of nursing in Nebraska pursuant to Nebraska Revised Statute (Neb. Rev. Stat.) §§ 38-2232 to 38-2234 of the Nurse Practice Act.

002. DEFINITIONS. Definitions are set out in the Nurse Practice Act, the Uniform Credentialing Act, 172 Nebraska Administrative Code (NAC) 10, and this chapter.

002.01 ACCREDITATION. A status bestowed by a national nursing accrediting agency recognized by the United States Department of Education.

002.02 ADJUNCT FACULTY. Persons who are employed by a program, but not on a full-time basis, or who are not employed by a program, who supervise and instruct students in a specific area of expertise. Adjunct faculty work under the supervision and guidance of faculty. Adjunct faculty must meet the educational qualifications of faculty. Adjunct faculty are to supplement and complement the nursing faculty. Staff Nurse Clinical Instructors working on Dedicated Education Units (DEUs) are exempt from faculty qualifications as outlined in 172 NAC 97-003.

002.03 ANNUAL REPORT. A document that each nursing program is to submit at the end of each calendar year to maintain ongoing program approval and to keep the Board informed of the status of the program's administration and organization, clinical resources, curriculum, faculty and preceptors, program evaluation, students, and student services.

002.04 APPROVED. A program has been approved by the Board after it has met the requirements of Nebraska Revised Statute (Neb. Rev. Stat.) §§ 38-2232 to 38-2234 and the requirements of the Board as set out in this chapter.

002.05 ASSISTANT DIRECTOR. The registered nurse who is assistant to the director in administration of the educational program in nursing regardless of the official title in any specific institution. The assistant director has the administrative responsibility for a specific program or site and must meet the same qualifications as those specified in this chapter for the director.

002.06 CLINICAL EXPERIENCE. Faculty-planned and guided learning activities designed to assist students to meet the stated program and course outcomes. Learning activities should be designed to assist students to safely apply knowledge and skills to clients across the

lifespan and must be appropriate to the expectations of the graduates according to the program type.

002.07 CONTROLLING INSTITUTION. An established organization or institution which applies for approval and actually administers and controls the program of registered or practical nursing in its entirety after approval is received from the Board.

002.08 COURSE. An instructional unit of the curriculum with defined objectives and methods of evaluation.

002.09 CURRICULUM. The total learning experiences of the program organized in a systematic manner.

002.10 DEBRIEFING. An activity that follows a clinical lab, classroom or simulation experience, is led by a facilitator, encourages participants' reflective thinking, and provides feedback regarding participants' performance.

002.11 DEDICATED EDUCATION UNIT (DEU). Nursing units in which designated staff nurses become the clinical instructors to the students. Staff nurse clinical instructors work closely with nursing faculty and have received education about teaching, learning and evaluation in clinical nursing education.

002.12 DIPLOMA, DEGREE OR CERTIFICATE. The formal document showing that the student has completed the prescribed program.

002.13 DIRECTOR. The registered nurse administratively in charge of an educational program in nursing regardless of the official title in any specific institution.

002.14 DISTANCE LEARNING. A mode of delivering education and instruction to students who are not physically present in the same location.

002.15 GOVERNING BODY. The body of a controlling institution that sets the policies for the institution.

002.16 INNOVATIVE APPROACH. A creative nursing education strategy that departs from the current rule structure and requires Board approval for implementation.

002.17 NURSING FACULTY. Individuals employed full- or part-time by an academic institution who drive nursing education based on national standards, reflect the parent institution's mission, and facilitate the development of clinical judgment necessary for safe and effective practice.

002.18 OBSERVATIONAL EXPERIENCE. An assignment to a facility or unit where students observe the role of the facility and the role of nursing within the facility, but where students do not participate in direct patient or client care. Direct faculty or preceptor supervision is not

required for an observational experience outside the clinical facility. Observational experiences may be used to supplement, but not replace direct patient care experiences.

002.19 PRECEPTOR. An experienced registered nurse who provides direct supervision of student clinical learning experiences at a clinical agency where the preceptor is employed. A preceptor acts as a facilitator of student learning and serves as a teacher, mentor, role model or supervisor who is immediately available in a clinical setting. Preceptors are employed by the agency where the student is placed for clinical experience.

002.20 PRELICENSURE NURSING EDUCATION PROGRAM. An educational program approved by the Board which prepares the registered or practical nursing graduates to qualify for the license of registered nurse or licensed practical nurse upon passing the required licensing examination, and meeting other licensure requirements.

002.21 PROGRAM STATUS. A designation assigned to a nursing education program by the Board which may include approval, warning, suspension or revocation.

002.22 PURPOSE. A statement which identifies the reason for the existence of a program.

002.23 RECOMMENDATIONS. Advice of what must be done to ensure that the entire program or program components have met the requirements of the law and the requirements of the Board as set out in this rule. All recommendations must be considered and implemented by the program and the program must keep the Board informed of the implementation of the recommendations.

002.24 SIMULATION. A technique to replace or amplify patient care experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.

002.25 STAFF NURSE SUPPORTED EXPERIENCE. A clinical experience where a student is assigned 1:1 to a staff nurse in a specialty setting for a hands on clinical experience at the direction of the staff nurse. Faculty should provide indirect supervision for the experience as defined in 172 NAC 99.

002.26 STAFF NURSE CLINICAL INSTRUCTOR. A registered nurse with 12 months or more experience who receives orientation and training from nursing programs and is employed in a clinical setting at sites using the Dedicated Education Unit (DEU) model of clinical instruction. A staff nurse instructor will supervise no more than 2 students at 1 time and is exempt from faculty qualifications as outlined in 172 NAC 97-007.03.

002.27 SUGGESTIONS. Proposals for the program to consider that may enhance the program or program components. Suggestions are to be considered by the program, but may be accepted and implemented, modified and implemented, or rejected and not implemented. No follow-up communication with the Board is required.

002.28 SUPPORT COURSE. A non-nursing course in the areas of the biological, physical, or behavioral sciences, for which the content is essential to the application of nursing knowledge.

002.29 WAIVER. A provisional document that allows temporary suspension of 1 element of this chapter, such as faculty education or preceptor education.

003. CLASSIFICATION OF PRELICENSURE PROGRAMS IN NURSING EDUCATION. The nursing education program shall be an integral part of a governing academic institution that is accredited by an accrediting agency that is recognized by the United States Department of Education. There are 2 types of prelicensure programs for registered nurses and one type for licensed practical nurses.

003.01 BACCALAUREATE DEGREE PROGRAM. A prelicensure program for registered nurses conducted by a university or college and leads to a baccalaureate degree in nursing;

003.02 ASSOCIATE DEGREE PROGRAM. A prelicensure program for registered nurses conducted by a community college, college or university and leads to an associate degree in nursing; and

003.03 PRACTICAL DIPLOMA PROGRAM. A prelicensure educational program for practical nurses of at least 1 academic year conducted by a community college or educational agency.

004. PRELICENSURE NURSING EDUCATION PROGRAM STANDARDS. Prelicensure nursing education programs must meet the following program standards. A program shall provide evidence to the Board that these standards have been met on an annual basis.

- (A) Maintain national nursing program accreditation;
- (B) Implement and maintain a comprehensive, systematic plan for ongoing evaluation based on program outcomes and incorporates continuous improvement;
- (C) National Council Licensure Exam pass rates at 80% per year or a 3 year average consistent with the national average;
- (D) Retention of faculty and administration above the state average;
- (E) No significant change in completion or attrition rates;
- (F) Student faculty ratio that does not exceed ratios defined in 172 NAC 97-007.02;
- (G) No significant loss of clinical contracts or lack of meeting requirements for clinical experiences;
- (H) Provides annual report data and complies with curriculum revision or review or site visit requirements; and
- (I) No substantiated complaints that indicate lack of maintaining quality outcome standards.

005. ADMINISTRATION AND ORGANIZATION. The administrative control for the program must be vested in the governing body of the controlling institution. The governing body of the controlling institution must:

- (A) Provide an organizational chart showing the relationship of the nursing program to the controlling institution, to other departments, institutions, and agencies and the channels of authority and communication;
- (B) Provide an organizational chart showing relationships of individuals or groups within the nursing program;
- (C) Appoint a qualified person to administer the nursing program or programs as set forth in 172 NAC 97-007.01;
- (D) Provide for an adequate number of qualified faculty as set forth in 172 NAC 97-007-03;
- (E) Provide for adequate educational facilities and clinical resources as set forth in 172 NAC 97-010 and 011;
- (F) Provide for written agreements with all cooperating agencies that delineate the methods of communication and areas of responsibilities of each party;
- (G) Provide for a financial base that is sufficient to ensure adequate financial resources to maintain a qualified faculty, adequate facilities including classrooms and laboratories, and simulation, to be able to provide students with adequate education from admission to completion;
- (H) Provide in writing the conditions of employment and the policies for faculty; and
- (I) Provide in writing the educational philosophy of the controlling institution.

006. PHILOSOPHY AND OUTCOMES. The program must have in writing a clearly defined statement of philosophy, organizing framework and program outcomes which serve as a basis for the development of the total nursing education program.

- (A) The statement of philosophy must include the beliefs of the faculty about:
  - (i) Human beings;
  - (ii) Nursing;
  - (iii) Education;
  - (iv) Nursing education;
  - (v) Health; and
  - (vi) Must be in accord with those of the controlling institution.
- (B) The organizing framework must reflect the concepts or theories that serve as the foundation of the curriculum.
- (C) Program outcomes must reflect the stated philosophy and must be based on the concept of preparing a practitioner who gives safe and competent care and who functions within the legally defined scope of practice of a registered or licensed practical nurse.
- (D) The program outcomes must be measurable and attainable within the timeframe of the program of instruction.
- (E) The philosophy and program outcomes must be defined and approved by the faculty and shared with the students.

007. FACULTY. The program must hire and retain a qualified program director and faculty.

007.01 DIRECTOR. The director of the nursing education program must be a registered nurse, hold an unencumbered license to practice in Nebraska, with the additional education and experience necessary to direct the program preparing graduates for the safe and effective

practice of nursing. The director is accountable for the administration, planning, implementation and evaluation of the nursing education program.

007.01(A) PRELICENSURE PRACTICAL NURSING PROGRAM. Any person appointed director of a prelicensure practical nursing program must have:

- (i) A minimum of a graduate degree in nursing;
- (ii) 3 years of clinical experience; and
- (iii) 3 years of nursing education experience.

007.01(B) PRELICENSURE REGISTERED NURSING PROGRAM. Any person appointed director of a prelicensure registered nursing program must have:

- (i) A minimum of a graduate degree in nursing;
- (ii) 3 years of clinical experience; and
- (iii) 3 years of nursing education experience.

007.02 FACULTY RATIOS. There must be sufficient faculty with educational preparation and nursing expertise to meet the objectives and purposes of the nursing education program. Factors which determine the number and qualifications of faculty include the type and length of program, number of students enrolled, number of students assigned to a clinical area, frequency of admissions, total responsibilities of the faculty, and number and location of clinical facilities.

- (A) There must be a sufficient core of full-time faculty to assure consistent presentation of the curriculum, consistent application of policies, and consistent supervision of the clinical experiences;
- (B) There must be no more than 10 students per faculty member, a 1:10 faculty-to-student ratio, in the clinical area. The clinical facility may require a lower number of students per faculty. A 1:8 faculty-to-student ratio is preferred; and
- (C) For Dedicated Education Units (DEU's), 1 nursing faculty member may supervise up to 16 students in the clinical setting. Staff nurse clinical instructors must supervise no more than 2 students at a time.

007.03 FACULTY QUALIFICATIONS. There must be written position descriptions of all faculty members, their qualifications, and their responsibility in the educational program.

007.03(A) TYPE OF NURSING PROGRAM. Qualifications for nursing faculty are outlined by program.

007.03(A)(i) PRACTICAL NURSING PROGRAM. Nursing faculty who teach in a program leading to licensure as a practical nurse must:

- (1) Have an unencumbered registered nursing license to practice in Nebraska;
- (2) Have a minimum of a baccalaureate degree in nursing. Faculty, except for adjunct clinical faculty, must have a minimum of a graduate degree in nursing or be making annual progress toward a graduate degree in nursing and complete it within 6 years of faculty appointment; and
- (3) Have 2 years of clinical experience.



007.03(A)(ii) REGISTERED NURSING PROGRAM. Nursing faculty who teach in programs leading to licensure as a registered nurse must:

- (1) Have an unencumbered registered nurse license to practice nursing in Nebraska;
- (2) Have a minimum of a graduate degree in nursing or make annual progress toward a graduate degree in nursing and complete a degree within 6 years of faculty appointment; and
- (3) Have 2 years of clinical experience.

007.03(B) OTHER FACULTY REQUIREMENTS. Other requirements for faculty in nursing programs include the following:

- (i) All nursing faculty including clinical, full-time and adjunct, must complete a planned orientation;
- (ii) Faculty teaching non-clinical nursing courses shall have advanced preparation and experience appropriate for the content being taught; and
- (iii) If for any emergency reason a program employs a faculty member on a temporary basis who does not meet the requirements, the program must request a waiver of faculty qualifications for that specific situation. The waiver request must include the reason for the request, the time frame for the request, and what steps were taken to prevent the need for the waiver.

007.04 DIRECTOR AND FACULTY RESPONSIBILITIES. Responsibilities and functions of the director and faculty of a nursing program include the following:

- (A) Develop, implement, evaluate, and update the purpose, philosophy, organizational framework and program outcomes;
- (B) Design, implement and evaluate the curriculum using a written plan;
- (C) Develop, evaluate, and revise student admission, progression, retention, and graduation policies within the policies of the institution;
- (D) Participate in academic advising and guidance of students;
- (E) Provide theoretical instruction and clinical or practicum experiences;
- (F) Supervise the instruction provided by preceptors;
- (G) Assure that observational experiences comprise no more than 20% of the clinical experiences of any course;
- (H) Evaluate student achievement of curricular outcomes related to nursing knowledge and practice;
- (I) Provide for student evaluation of teaching effectiveness;
- (J) Provide an orientation for new faculty; and
- (K) Participate in activities which facilitate maintaining the faculty members' own nursing competence and professional expertise in the area of teaching responsibility and maintaining clinical competence through clinical experience, workshops, and in-service education.

007.05 POLICIES AND PROCEDURES. Faculty policies and procedures must be available in writing and must include qualifications, rights and responsibilities of faculty members, the criteria for evaluation of performance, and promotion and tenure policies.

007.06 RECORDS AND REPORTS. Written records of faculty decisions and committee reports must be maintained and available to all faculty.

007.07 RESOURCES. The program must have clerical staff and other resources sufficient to meet the needs of the faculty and administration.

008. PRECEPTORS. The program may use preceptors in direct supervision of student learning experiences in the clinical agency where the preceptor is employed.

008.01 PRECEPTOR GUIDELINES. These guidelines apply when a faculty member has assigned responsibility for direct supervision of student clinical learning experiences to a preceptor, at the preceptor's employing agency, and when the faculty member may not be physically present within the clinical agency or clinical setting.

- (A) Preceptor supervision is not appropriate for the beginning student. Clinical preceptors may be used to enhance clinical learning experiences, after a student has received clinical and didactic instruction in all basic areas of nursing or within a course after students have received clinical and didactic instruction in all basic areas for that course or specific learning experience.
- (B) While learning with the preceptor, the student role expectations must not exceed the level of practice for which the student is being prepared.
- (C) Direct supervision by a preceptor means that the preceptor is present in the clinical setting and available to the student at all times.
- (D) Preceptors may be responsible for no more than one student at a time.
- (E) The responsibility for student learning rests with the faculty member, preceptor and student.
  - (i) The faculty member primarily coordinates the learning experience of the student, provides direction for the preceptor and student, and evaluates the student's achievement of the course objectives.
  - (ii) The preceptor retains his or her nursing staff responsibility for client care while considering the individual student's capabilities in making assignments.
  - (iii) The student must be directed to accept only those responsibilities which the preceptor believes can be safely managed. Students are expected to maintain practice within the safe limits which have previously been taught. Recognizing their own strengths and limitations, students are required to request help and supervision as needed.

008.02 PRECEPTOR QUALIFICATIONS. Qualifications for a clinical preceptor include:

- (A) An unencumbered license to practice nursing in the jurisdiction where students are precepted;
- (B) The educational level of the preceptor must be at or above the level for which the student is being prepared;
- (C) A minimum 12 months experience in the practice of registered nursing;
- (D) Competence related to the area of assigned clinical teaching responsibilities; and
- (E) Designated by manager and peers as a collaborator and leader among nurses.

009. CURRICULUM – CORE EDUCATIONAL REQUIREMENTS. The program must have a curriculum that enables students to develop the nursing knowledge, skills and abilities necessary for the level of licensure. An organized pattern, developed by the nurse faculty for the continuity and sequence of courses and related concurrent clinical instruction, must provide for progression of knowledge, skills, abilities, and attitudes of nursing students. Curricula will be revised as necessary to maintain a program that reflects advances in health care and its delivery.

009.01 STANDARDS. The curriculum, as defined by nursing education, professional and practice standards, must include:

- (A) Experiences that promote the development and subsequent demonstration of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients.
- (B) Evidence-based learning experiences and methods of instruction, including distance education methods, consistent with the written curriculum plan.
- (C) Coursework including, but not limited to:
  - (i) Content in the biological, physical, social and behavioral sciences to provide a foundation for safe and effective nursing practice;
  - (ii) Content regarding professional responsibilities, scope of practice, legal and ethical issues, history and trends in nursing and health care; and
  - (iii) Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social and economic backgrounds. Patient experiences must occur in a variety of clinical settings and must include:
    - (1) Integrating patient safety principles throughout the didactic and clinical coursework;
    - (2) Using information technology to communicate and manage knowledge, mitigate error, and support decision making;
    - (3) Employing evidence-based practice to integrate best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing care;
    - (4) Providing client-centered, culturally competent care by:
      - (a) Respecting client differences, values, preferences and expressed needs;
      - (b) Involving clients in decision-making and care management;
      - (c) Coordinating and managing care transitions or continuous care; and
      - (d) Explaining appropriate and accessible interventions to patients and populations that may positively affect their ability to achieve healthy lifestyles;
    - (5) Collaborating with interdisciplinary teams to foster open communication, mutual respect, and shared decision making in order to achieve quality patient care; and
    - (6) Participating in quality improvement processes to measure client outcomes, identify hazards and errors, and develop changes in processes of client care.

009.02 ADDITIONAL CURRICULUM REQUIREMENTS. All nursing programs must meet the following additional curriculum requirements:

- (A) Experiences which promote the development of leadership and management skills and professional socialization consistent with the level of licensure; and
- (B) Delivery of instruction by distance education methods must be consistent with the program curriculum plan and enable students to meet the goals, competencies and objectives of the educational program and standards of the Board.

009.03 LEARNING EXPERIENCES. The curriculum must provide for learning experiences that prepare the student to identify and intervene in actual or potential health problems of individuals, families, or groups. Nursing actions must be directed toward maintaining or improving health status, based on the nursing assessment and through the execution of nursing care or therapeutic regimens prescribed by any person lawfully authorized to prescribe. Learning experiences, methods of instruction, and evaluation of student accomplishment must:

- (A) Be planned, implemented and evaluated by the faculty with provisions for student input;
- (B) Reflect the organizing framework and objectives of the nursing education program;
- (C) Be organized logically and sequenced appropriately;
- (D) Provide supervised clinical experience to prepare the student for the safe practice of nursing and shall include development of skills in direct patient care; making clinical judgments; care and management of both individuals and groups of patients across the lifespan and delegation to and supervision of, as appropriate to level of education, other healthcare providers;
- (E) Provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program;
- (F) Provide clinical experiences such as observation, simulation, staff nurse supported, dedicated education unit, adjunct or preceptor, that are supervised by qualified faculty;
- (G) Measure the students' competencies based on the students' demonstration of care management and decision making skills when providing patient care in a variety of clinical situations and care settings; and
- (H) Be comprised of sufficient hours to meet these standards, be supervised by educationally and clinically qualified faculty, and ensure students' ability to practice at an entry level.

009.04 SYLLABI. Current syllabi must be available at the educational institution.

009.05 CHALLENGE PROCEDURE. Programs permitting students to challenge selected courses for credit must have written policies governing the challenge procedure.

009.06 CURRICULUM REVISIONS. Consultation from the Board is available when curriculum revisions are being considered. Plans for major curriculum revisions must be submitted to the Board for approval 3 months before they are implemented and must include

the rationale and indicate the present plan as well as the proposed change and expected outcome. Major curriculum changes include:

- (A) Changes in program outcomes which alter the present curriculum;
- (B) Changes in the length of the program;
- (C) Changes in the number of hours of didactic instruction or clinical instruction;
- (D) Reorganization of the entire curriculum; and
- (E) Additions, deletions, and substitutions of support courses or nursing electives.

010. CLINICAL RESOURCES. There must be clinical resources available and adequate for the number of students and faculty and the outcomes of the program.

010.01 CLINICAL FACILITIES. Clinical facilities must be available with a sufficient number and variety of clients to provide learning experiences essential to achievement of the stated objectives of the curriculum and for the number of students enrolled.

010.02 APPROVAL. The program must identify on the annual report all clinical facilities utilized by the program.

011. EDUCATIONAL FACILITIES. Adequate classrooms, offices, laboratories, conference rooms, and a library to meet the objectives of the program and to provide the needs of the students and faculty must be available.

012. STUDENTS. Students must be provided the opportunity to acquire and demonstrate the knowledge, skills and abilities for safe and effective nursing practice in theory and clinical experience through faculty supervision. The following requirements related to students must be in place:

- (A) All institutional policies relevant to applicants and students must be available in writing.
- (B) Written policies must be developed by faculty for selection, admission, readmission, progression, graduation, transfer, dismissal or withdrawal of nursing students.
- (C) Student responsibilities and due process rights must be available in writing.
- (D) Requirements for graduation must be stated in the program brochure or catalog.
- (E) The date of completion of the nursing program must be specified on the transcript.
- (F) Students must be required to meet the health standards and criminal background checks as required by the clinical agencies and the nursing program.
- (G) Students must be accountable for the integrity of their work.
- (H) The program must hold students accountable for professional behavior, including honesty and integrity, while enrolled in their program of study.

013. RECORDS. The controlling institution must maintain a record system with provision for the protection of records against loss, destruction, and unauthorized use. Such record system must meet the following requirements:

- (A) Student records are to be available to the faculty;
- (B) No part of the student's record may be released without the written consent of the student;
- (C) Official records will be maintained for current students enrolled, including admission data, transcripts, and evaluations;

- (D) Transcripts for students who have withdrawn or graduated will be kept on file;
- (E) Records for transfer students, at the time of admission into a nursing program, must include a transcript of the previous nursing or college program and a written program of studies required to be completed by the transfer student prior to graduation; and
- (F) Faculty records demonstrating educational and experiential qualifications will be maintained, including official educational transcripts.

014. REPORTS TO THE BOARD. An annual report, accreditation reports, and accreditation updates or reports must be submitted to the Board by the program, and the program must:

- (A) Notify the Board in writing of administrative changes relating to and affecting the program; and
- (B) Cooperate in submitting data to the Board for purposes of research and planning activities.

015. PROMOTIONAL MATERIALS. The program brochure, catalog, website, or other materials must be current and give an accurate description of the program.

016. EVALUATION. The faculty must develop a systematic evaluation plan for the total program and provide for periodic evaluation of all aspects of the program including: philosophy and outcomes, organization and administration, faculty, curriculum, students, facilities, follow-up study of graduates, records, and reports, and demonstrate how the evaluation data are used for program improvement.

017. SURVEY VISITS TO NURSING PROGRAMS. The Board will conduct survey visits to each of the nursing programs to verify compliance with all of the preceding regulations.

017.01 FREQUENCY. The frequency of survey visits will be based on an annual evaluation of the following criteria:

- (A) The stability of the nursing administrative structure and personnel;
- (B) The stability and retention of the faculty;
- (C) The program maintaining accreditation by a national nursing program accreditation entity approved by the Board.
- (D) The annual reports for the last 4 years; and
- (E) The graduates from the program having demonstrated a pass rate on the National Council Licensure Examination each year for the last 4 years that meets or exceeds the national pass rate.

017.02 BOARD DIRECTED SURVEY. The Board may direct that a survey visit be conducted more frequently if it determines that a survey is indicated based on, but not limited to, the following:

- (A) Frequent nursing department administrative changes or faculty turnover;
- (B) Complaints received from faculty, students, parents, or the general public;
- (C) A pass rate of the graduates lower than the national pass rate for 2 consecutive years;  
or
- (D) Student retention and attrition.

018. INNOVATIVE APPROACHES TO PRE-LICENSURE PROGRAMS. A nursing education program may apply to implement an innovative approach by complying with provisions of this section. Nursing education programs approved to implement innovative approaches will continue to provide quality nursing education that prepares graduates to practice safely, competently and ethically within the scope of practice as defined in the Nurse Practice Act.

018.01 PURPOSE. A nursing program applying to implement an innovative approach must explain the purpose for creating innovation in curriculum or educational design, which must include:

- (A) To foster innovative models of nursing education to address the changing needs in health care;
- (B) To assure that innovative approaches are conducted in a manner consistent with the Board's role in protection of the public; and
- (C) To assure that innovative approaches conform to the quality outcome standards and core education criteria established by the Board.

018.02 ELIGIBILITY. In order for a nursing program to be eligible to submit an innovative approach to nursing education, the nursing program must:

- (A) Hold full Board approval without conditions;
- (B) Have no substantiated complaints in the past 2 years; and
- (C) Have committed no rule violations in the past 2 years.

018.03 APPLICATION. The following information must be provided by the nursing program to the Board at least 90 days prior to a Board meeting:

- (A) Executive summary of the project;
- (B) Identifying information including name of nursing program, address, responsible party, and contact information;
- (C) A brief description of the current program, including accreditation and Board approval status;
- (D) Identification of the regulation or regulations affected by the proposed innovative approach;
- (E) Length of time for which the innovative approach is requested;
- (F) Description of the innovative approach, including objectives;
- (G) Brief explanation of why the program wants to implement an innovative approach at this time;
- (H) Explanation of how the proposed innovation differs from approaches in the current program;
- (I) Rationale with available evidence supporting the innovative approach;
- (J) Identification of resources that support the proposed innovative approach;
- (K) Expected impact innovative approach will have on the program, including administration, students, faculty, and other program resources;
- (L) Plan for implementation, including timeline;
- (M) Plan for evaluation of the proposed innovation, including measurable criteria and outcomes, method of evaluation, and frequency of evaluation; and
- (N) Additional application information as requested by the Board.

018.04 STANDARDS FOR APPROVAL. Approval is based on the following criteria:

- (A) Eligibility and application criteria in 172 NAC 97-018.02 and 172 NAC 97-018.03 met;
- (B) The innovative approach will not compromise the quality of education or safe practice of students;
- (C) Resources are sufficient to support the innovative approach;
- (D) Rationale with available evidence supports the implementation of the innovative approach;
- (E) Implementation plan is reasonable to achieve the desired outcomes of the innovative approach;
- (F) Timeline provides for sufficient period to implement and evaluate the innovative approach; and
- (G) Plan for periodic evaluation is comprehensive and supported by appropriate methodology.

018.05 BOARD REVIEW OF APPLICATION. Annually, the Board may establish the number of innovative approach applications it will accept, based on available Board resources. The Board will evaluate innovative approach applications to determine if eligibility criteria in 172 NAC 97-018.02 are met and if the standards from 172 NAC 97-018.04 are established.

018.05(A) APPROVAL. If the application meets the eligibility criteria and standards, the Board will:

- (i) Approve the application; or
- (ii) Approve the application with modifications as agreed between the Board and the nursing education program.

018.05(B) DENIAL. If the application does not meet the eligibility criteria and standards, the Board will deny approval of the innovative approach or may request additional information.

018.05(C) RESCIND APPROVAL. The Board may rescind the approval or require the program to make modifications in the innovative approach if:

- (i) The Board receives substantiated evidence indicating adverse impact; or
- (ii) The nursing education program fails to implement the innovative approach as presented and approved.

018.06 PERIODIC EVALUATION. Periodic evaluation of the innovative approach to nursing education requires the following:

- (A) The educational program must submit progress reports conforming to the evaluation plan annually or as requested by the Board;
- (B) The final evaluation report must conform to the evaluation plan, detailing and analyzing the outcomes data;
- (C) If any report indicates that students were adversely impacted by the innovation, the nursing program must provide documentation of corrective measures and their effectiveness; and
- (D) The educational program must maintain eligibility criteria in 172 NAC 97-018.02.



018.07 CONTINUATION. Requests for the innovative approach to continue and become an ongoing part of the education program must be submitted 30 days prior to a regularly scheduled Board meeting. Continuation of the innovative approach to nursing education may be granted by the Board if:

- (A) The final evaluation has been submitted;
- (B) The innovative approach has achieved the desired outcomes;
- (C) The innovative approach has not compromised public protection; and
- (D) The innovative approach is consistent with core nursing education criteria.

019. APPROVAL OF NEW PRELICENSURE EDUCATION PROGRAMS. An institution seeking Board approval to conduct a new prelicensure program in registered or practical nursing must submit an application provided by the Department at least 1 year prior to the anticipated opening of the new program. The application must include the following:

- (A) Results of a needs assessment, including identification of potential and available students and employment opportunities for program graduates;
- (B) Identification of sufficient financial and other resources;
- (C) Governing institution approval and support;
- (D) A description of the readiness that has been identified of the community to support the proposed program;
- (E) Type of educational program proposed;
- (F) Evidence of the institution meeting state requirements, and regional or national accreditation by an accredited agency recognized by the U.S. Department of Education;
- (G) Evidence of the nursing program actively seeking accreditation from a U.S. Department of Education recognized national nursing accrediting agency;
- (H) A description of the provision for educational facilities including classroom, laboratories, library, conference rooms and offices;
- (I) A description of the provision for clinical opportunities and available resources;
- (J) A description of the availability of qualified faculty;
- (K) A description of the general education and nursing content of the curriculum including proposed course descriptions;
- (L) Proposed timeline for initiating and expanding the program;
- (M) If the controlling institution is a private organization, a copy of its articles of incorporation and of the resolution of its governing body authorizing it to establish a program of registered or practical nursing must be attached;
- (N) If the controlling institution is a public body, a copy of its statutory authority to establish a program of registered or practical nursing must be attached, along with a copy of the resolution of its governing body authorizing it to establish a program of registered or practical nursing must be attached; and
- (O) The application must be signed by the head of the governing body of the controlling institution making the application.

019.01 EMPLOYMENT OF DIRECTOR AND FACULTY. The applying institution must employ a director at least 12 months prior to the anticipated opening of the program. Sufficient, qualified faculty must be in place 6 months prior to the beginning of any course for the purpose of course development.

019.02 INITIAL APPROVAL FOR ADMISSION OF STUDENTS. The proposed program must provide the Board with verification that the following program components and processes have been completed:

- (1) Overview of the total curriculum;
- (2) Content;
- (3) Schedule, including course sequence;
- (4) Course descriptions;
- (5) Contracts for clinical sites;
- (6) Program evaluation plan;
- (7) Course syllabi for first year with identified timeline for submission of syllabi for subsequent years; and
- (8) Establishment of student policies for admission, progression, retention and graduation.

019.02(A) INITIAL APPROVAL. When the Board determines that all components and processes are complete and in place, the Board will authorize the program to admit students. The Board may or may not require a site visit to make this determination.

019.02(B) DENIAL. The Board will deny initial approval if it determines that a proposed nursing education program is unable to meet the standards for nursing education.

019.03 FULL PROGRAM APPROVAL. The Board may request periodic reports from a new program regarding initial program operations before granting full program approval. The Board will fully approve the program upon:

- (A) Successful completion of a Board survey visit of the program concurrent with graduation of first class eligibility for the National Council Licensure Examination;
- (B) Submission of the nursing program's ongoing systematic evaluation plan;
- (C) Satisfactory completion of survey report that verifies that the program is in compliance with the Board's Nursing Education Standards in 172 NAC 97-004; and
- (D) Accreditation approval or application status update.

019.04 CONTINUING APPROVAL. Approval is continued for those programs which continue to meet the requirements of the Board as determined by survey visits, annual reports, and such reports as may be required by the Board. Approval may be continued with or without Board recommendations or suggestions.

019.04(A) ONGOING EVALUATION. Nursing education programs will be reevaluated every 4 years with a site visit, upon request of the nursing education program, or at the discretion of the Board, to ensure continuing compliance with the regulations.

019.04(B) ANNUAL REPORT. Programs must submit an annual report.

020. BOARD ACTIONS. Failure to meet the standards put forward in this chapter may result in disciplinary action by the Board. The Board may recommend one of the following actions:

- (A) Warning;

- (B) Suspension; or
- (C) Revocation.

020.01. WARNING. If the Board determines that any controlling institution having a program in registered or practical nursing approved by the Board is not maintaining the standards required by the statutes and by this chapter, the controlling institution will be warned. Notice will be given in writing to the controlling institution, specifying the deficiency or deficiencies.

020.01(A) CORRECTION OF DEFICIENCIES. The controlling institution will be given 12 months in which to correct the deficiency or deficiencies in its program.

020.01(B) POSSIBLE WITHDRAWAL OF APPROVAL. If the requirements for approval have not been met within 12 months after receipt of a warning, the controlling institution will be given 6 months' notice of possible withdrawal of approval.

020.01(C) FAILURE TO CORRECT DEFICIENCIES. If the deficiency or deficiencies have not been corrected within 6 months after the controlling institution has been given notice of possible withdrawal of approval, a hearing before the Department will be scheduled to determine whether the approval from the Board will be suspended or revoked.

021. TRANSFERRING A PROGRAM. In the event that the transfer of the controlling institutional ownership or control of a program in registered or practical nursing is to take place, the new ownership or new controlling institution must comply with the same requirements as for the establishment of a new program in Section 019 of this chapter.

022. CLOSING A PROGRAM. A nursing education program anticipating closure of its program is subject to the following requirements:

- (A) A controlling institution terminating its program must notify the Board at least 1 year in advance of such intended termination, and must submit to the Board the plan for completion of students currently enrolled and the disposition of records. All Board requirements for approval must be maintained until the program is closed.
- (B) The program must be officially closed on the date the last nursing student completes the program or is transferred to another approved program under the plan for termination of the program or voluntarily withdraws from the program. The controlling institution which has operated the program is responsible for the permanent preservation of records and issuance of transcripts of graduates, and must notify the Board of the custody of the records.

TABLE OF CONTENTS

<u>SUBJECT</u>	<u>SECTION</u>	<u>PAGE</u>
Accreditation of Controlling Institution	004	4
Administration and Organization	005	4
Brochure/Catalog	016	14
Classification of Basic Programs in Nursing Education	003	3
Clinical Resources	010	13
Closing a Program	022	19
Curriculum	009	10
Definitions	002	4
Educational Facilities	011	13
Evaluation	017	14
Faculty	007	5
Philosophy, Objectives/Outcomes	006	5
Preceptors	008	8
Procedures for Approving Programs Including Satellite Programs	019	15
Records	014	14
Reports to the Board	015	14
Scope and Authority	001	4
Student Services	013	13
Students	012	13
Survey Visits	018	15
Suspension or Revocation of Approval	020	18
Transferring a Program	021	18

TITLE 172 \_\_\_\_\_ PROFESSIONAL AND OCCUPATIONAL LICENSURE

CHAPTER 97 \_\_\_\_\_ APPROVAL OF BASIC NURSING PROGRAMS IN NEBRASKA

97-001 SCOPE AND AUTHORITY: These regulations are intended to set forth the procedure for defining minimum standards established by the Nebraska Board of Nursing for approval of registered and practical programs of nursing in Nebraska pursuant to Neb. Rev. Stat. § 71-1,132.11. Specific purposes of the regulations are to define standards of nursing education to:

- \_\_\_\_\_ 1. Assist programs so that graduates of nursing education programs are prepared for safe and effective nursing practice;
- \_\_\_\_\_ 2. Serve as a guide for the development of new nursing education programs;
- \_\_\_\_\_ 3. Foster the continued improvement of established nursing education programs;
- \_\_\_\_\_ 4. Provide criteria for the evaluation of new and established nursing education programs; and
- \_\_\_\_\_ 5. Assure eligibility for admission to the licensure examination for nurses, and to facilitate interstate endorsement of graduates of Board-approved nursing education programs.

97-002 DEFINITIONS

Adjunct faculty means persons who are employed by the program, but not on a full time basis, or who are not employed by the program, who supervise/instruct students in a specific area of expertise. Adjunct faculty work under the supervision and guidance of faculty. Adjunct faculty, except for adjunct clinical faculty in a practical nursing program, must meet the educational qualifications of faculty. Adjunct faculty are to supplement and complement the nursing faculty.

Remains in section 002 as modified.

Annual report means the document that each nursing program is to submit at the end of each calendar year to maintain on-going program approval and to keep the Board informed of the status of the program's administration and organization, clinical resources, curriculum, faculty and preceptors, program evaluation, students, and student services.

Remains in section 002 as modified.

Approved means a program has been approved by the Board of Nursing after it has met the requirements of the law and the requirements of the Nebraska Board of Nursing as set out in this rule.

Remains in section 002 as modified.

Assistant director means the registered nurse who is assistant to the director in administration of the educational program in nursing regardless of the official title in any specific institution. The Assistant Director has the administrative responsibility for a specific program or site and must meet the same qualifications as those specified in these regulations for the Director. **Remains in section 002 as modified.**

Basic program in nursing education means an educational program approved by the Nebraska Board of Nursing which prepares the registered or practical nursing graduate to qualify for the license of registered nurse or licensed practical nurse upon passing the required licensing examination, and meeting other licensure requirements. **Renamed 'Pre-licensure Nursing Education Program – now 002.20**

Board means the Nebraska Board of Nursing.

Controlling institution means an established organization or institution which applies for approval and actually administers and controls the program of registered or practical nursing in its entirety after approval is received from the Board. **Remains in section 002 as modified.**

Cooperating agency means an established organization that cooperates with the controlling institution by providing learning experiences for the program of registered or practical nursing, with instruction and supervision being provided from the faculty of the controlling institution.

Course means an instructional unit of the curriculum. **Remains in section 002 as modified.**

Curriculum means the total learning experiences of the program organized in a systematic manner. **Remains in section 002 as modified.**

Department means the Department of Health and Human Services Regulation and Licensure. These rules and regulations must be approved by the Department.

Diploma, degree or certificate means the formal document showing that the student has completed the prescribed program. **Remains in section 002 as modified.**

Director means the registered nurse administratively in charge of the educational program in nursing regardless of the official title in any specific institution. **Remains in section 002 as modified.**

Faculty means the persons employed by the program in nursing who are responsible for administration, curriculum, instruction, guidance, and research. **Renamed Nursing Faculty, now 002.17**

Governing body means the body of the controlling institution that sets the policies for the institution. **Remains in section 002 as modified.**

Observational experience means an assignment to a facility or unit where students observe the role of the facility and the role of nursing within the facility, but where students do not participate in direct patient/client care. Direct faculty or preceptor supervision is not required for an

~~observational experience outside the clinical facility. Observational experiences may be used to supplement, but not replace direct patient care experiences.~~ Remains in section 002 as modified.

~~Preceptor means an experienced registered nurse who provides direct supervision of student clinical learning experiences at the clinical agency where the preceptor is employed. The preceptor acts as a facilitator of student learning and serves as a role model who is immediately available in the clinical setting. Preceptors are employed by the agency where the student is placed for clinical experience.~~ Remains in section 002 as modified.

~~Program means the educational unit which prepared persons for licensure as registered or licensed practical nurses.~~ Renamed Program Status, now 002.21

~~Purpose means a statement which identifies the reason for the existence of the program.~~ Remains in section 002 as modified.

~~Recommendation(s) means advice of what must be done to ensure that the entire program or program components have met the requirements of the law and the requirements of the Board as set out in this rule. All recommendations must be considered and implemented by the program and the program must keep the Board informed of the implementation of the recommendation(s).~~ Remains in section 002 as modified.

~~Regulations or requirements means the minimum standards of the Board which a program must meet in order to be approved.~~

~~Satellite program means the provision of an approved nursing program or a major component thereof, geographically apart from a campus.~~

~~Suggestion(s) means proposals for the program to consider that may enhance the program or program components. Suggestions are to be considered by the program, but may be accepted and implemented, modified and implemented, or rejected and not implemented. No follow-up communication with the Board is required.~~ Remains in section 002 as modified.

~~Support course means a non-nursing course in the areas of the biological and physical sciences and behavioral sciences, the content of which is essential to the application of nursing knowledge.~~ Remains in section 002 as modified.

~~97-003 CLASSIFICATION OF BASIC PROGRAMS IN NURSING EDUCATION: The types of basic programs are:~~ Remains in section 003 with name change to Classification of Prelicensure Nursing Education Programs.

- ~~1. The baccalaureate degree program, which is conducted by a university or college and leads to a baccalaureate degree in nursing;~~ Remains in section 003 as modified.
- ~~2. The diploma program, which is conducted by a general acute-care hospital accredited by the Joint Commission on the Accreditation of Healthcare Organizations and leads to a diploma in nursing;~~

3. ~~The associate degree program, which is conducted by a community college, college or university and leads to an associate degree in nursing; and~~ **Remains in section 003 as modified.**
4. ~~The practical program, which is an educational program of at least one academic year conducted by a community college or educational agency that is accredited by an accrediting body that is recognized as an accrediting body by the United States Secretary of Education.~~ **Remains in section 003 as modified.**

#### 97-004 ACCREDITATION OF CONTROLLING INSTITUTION

97-004.01 ~~A university or college offering an associate degree and/or basic baccalaureate degree program in nursing must be accredited by an accrediting body that is recognized as an accrediting body by the United States Secretary of Education.~~

97-004.02 ~~A hospital which offers a diploma program in nursing must be general acute-care in type, licensed by the Department, and accredited by the Joint Commission on Accreditation of Healthcare Organizations.~~

97-004.03 ~~Community colleges and other educational agencies offering a program in practical nursing or associate degree registered nursing must be accredited by an accrediting body that is recognized as an accrediting body by the United States Secretary of Education.~~

97-005 ADMINISTRATION AND ORGANIZATION: ~~The administrative control for the program must be vested in the governing body of the controlling institution. The governing body of the controlling institution must:~~

1. ~~Provide an organizational chart showing the relationship of the nursing program to the controlling institution, to other departments, institutions, and agencies and the channels of authority and communication;~~
2. ~~Provide an organizational chart showing relationships of individuals or groups within the nursing program;~~
3. ~~Appoint a qualified person to administer the nursing program(s) as set forth in 172 NAC 97-007;~~
4. ~~Provide for an adequate number of qualified faculty as set forth in 172 NAC 97-007;~~
5. ~~Provide for adequate educational facilities and clinical resources as set forth in 172 NAC 97-010 and 011;~~
6. ~~Provide for written agreements with all cooperating agencies that delineate the methods of communication and areas of responsibilities of each party;~~



7. Provide for a financial base that is sufficient to ensure adequate financial resources to maintain a qualified faculty and adequate facilities including classrooms and laboratories to be able to provide students with adequate education from admission to completion;
8. Provide in writing the conditions of employment and the policies for faculty; and
9. Provide in writing the educational philosophy of the controlling institution.

Remains in section 005 with no substantial changes.

97-006 PHILOSOPHY, OBJECTIVES/OUTCOMES: The program must have in writing a clearly defined statement of philosophy, organizing framework and program objectives/ outcomes which serve as a basis for the development of the total nursing education program.

97-006.01 The statement of philosophy must include the beliefs of the faculty about:

1. Human being,
2. Nursing,
3. Education,
4. Nursing education, and
5. Health, and

must be in accord with those of the controlling institution.

97-006.02 The organizing framework must reflect the concepts or theories that serve as the foundation of the curriculum.

97-006.03 Program objectives/outcomes of the program must reflect the stated philosophy and must be based on the concept of preparing a practitioner who gives safe and competent care and who functions within the legally defined scope of practice of the registered or licensed practical nurse.

97-006.04 The program objectives/outcomes must be measurable and attainable within the timeframe of the program of instruction.

97-006.045 The philosophy, program objectives, and outcomes must be defined and approved by the faculty and shared with the students. Remains in section 006 as modified.

#### 97-007 FACULTY

97-007.01 The Director of the nursing education program must be a registered nurse, currently licensed in this state, with the additional education and experience necessary to direct the program preparing graduates for the safe and effective practice of nursing. The Director is accountable for the administration, planning, implementation and evaluation of the nursing education program.

97-007.01A Any person appointed Director after the effective date of these regulations must have:

1. In a program preparing for practical nurse licensure:

- a. A minimum of a graduate degree in nursing;
- b. Three years of clinical experience; and
- c. Three years of education experience.

2. In a program preparing for registered nurse licensure:

- a. A minimum of a graduate degree in nursing;
- b. Three years of clinical experience; and
- c. Three years of education experience.

97-007.02 There must be sufficient faculty with educational preparation and nursing expertise to meet the objectives and purposes of the nursing education program. Factors which determine the number and qualifications of faculty include the type and length of program, number of students enrolled, number of students assigned to a clinical area, frequency of admissions, total responsibilities of the faculty, and number and location of clinical facilities.

97-007.02A There must be a sufficient core of full-time faculty to assure consistent presentation of the curriculum, consistent application of policies, and consistent supervision of the clinical experiences.

97-007.02B There must be no more than ten students per faculty member (a 1:10 faculty to student ratio) in the clinical area. The clinical facility may require a lower number of students per faculty. A 1:8 faculty to student ratio is preferred.

97-007.03 There must be written position descriptions of all faculty members, their qualifications, and their responsibility in the educational program.

97-007.03A Qualifications

1. Nursing faculty who teach in a program leading to licensure as a Practical Nurse must:

- a. Be currently licensed as a registered nurse in this state;
- b. Have a minimum of a baccalaureate or higher degree in nursing. Faculty appointed after the effective date of these regulations, except for adjunct clinical faculty, must have a minimum of a graduate degree in nursing or be making annual progress toward a graduate degree in nursing and complete it within six years of employment; and

- c. Have one year of clinical experience relevant to areas of responsibility.
2. Nursing faculty who teach in programs leading to licensure as a registered nurse must:
  - a. Be currently licensed as a registered nurse in this state;
  - b. Have a minimum of a graduate degree in nursing or make annual progress toward a graduate degree in nursing. There must be a graduate degree in nursing-prepared registered nurse instructor giving direct instruction in each of the primary curriculum areas of Medical-Surgical Nursing, Psychiatric-Mental Health Nursing, and Maternal-Child Nursing. Baccalaureate programs must also have a graduate degree in nursing-prepared registered nurse instructor giving direct instruction in Community Health Nursing. There must be a minimum of three graduate degree in nursing-prepared registered nurse instructors in each program (four for baccalaureate programs). Each registered nurse faculty must complete the required graduate degree within six years of being appointed to the faculty;
  - c. Have one year of clinical experience relevant to areas of responsibility;
  - d. For faculty who instruct in the clinical area, have a minimum of one year of clinical experience in that clinical specialty; and
  - e. For faculty assigned to teach in the clinical area, be academically and clinically prepared in that clinical specialty.
3. Non-nurse faculty members teaching in a nursing program must have or be working toward a minimum of a master's degree in their field of teaching or function.
4. If for any temporary emergency reason a program employs a faculty member on a temporary basis who does not meet the requirements, the program must request a waiver of faculty qualifications for that specific situation. The waiver request must include the reason for the request, the time frame for the request, and what steps were taken to prevent the need for the waiver.
  - a. The Board will consider the waiver request at its next regularly scheduled meeting and either approve or disapprove the request.

97-007.04 The principal responsibilities and functions of the Director and faculty are to:

1. Develop, implement, evaluate, and update the purpose, philosophy, organizational framework and program objectives/outcomes;
2. Design, implement and evaluate the curriculum using a written plan;
3. Develop, evaluate, and revise student admission, progression, retention, and graduation policies within the policies of the institution;
4. Participate in academic advising and guidance of students;
5. Provide theoretical instruction and clinical or practicum experiences;
6. Supervise the instruction provided by preceptors;
7. Assure that observational experiences comprise no more than 20% of the clinical experiences of any course;
8. Evaluate student achievement of curricular objectives/outcomes related to nursing knowledge and practice;
9. Provide for student evaluation of teaching effectiveness;
10. Provide an orientation for new faculty; and
11. Participate in activities which facilitate maintaining the faculty members' own nursing competence and professional expertise in the area of teaching responsibility and maintaining clinical competence through clinical experience, workshops, and in-service education.

~~97-007.05~~ Faculty policies and procedures must be available in writing and must include qualifications, rights and responsibilities of faculty members, the criteria for evaluation of performance, and promotion and tenure policies.

~~97-007.06~~ Written records of faculty decisions and committee reports must be maintained and available to all faculty.

~~97-007.07~~ The program must have clerical staff and other resources sufficient to meet the needs of the faculty and administration. **Remains in section 007 as modified.**

~~97-008 PRECEPTORS:~~ The program may use preceptors in direct supervision of student learning experiences in the clinical agency where the preceptor is employed. These guidelines apply when a faculty member has delegated responsibility for direct supervision of student clinical learning experiences to a preceptor (at the preceptor's employing agency), and when the faculty member may not be physically present within the clinical agency or clinical setting.

~~97-008.01~~ Preceptor supervision is not appropriate for the beginning student. Clinical preceptors may be used to enhance clinical learning experiences, after a student has

received clinical and didactic instruction in all basic areas of nursing or within a course after students have received clinical and didactic instruction in all basic areas for that course or specific learning experience.

97-008.02 While learning with the preceptor, the student role expectations must not exceed the level of practice for which the student is being prepared.

97-008.03 Direct supervision by a preceptor means that the preceptor is present in the clinical setting and available to the student at all times.

97-008.04 Preceptors may be responsible for no more than one student at a time.

97-008.05 Qualifications for a clinical preceptor include:

1. Completion of an approved registered nursing education program with a BSN preferred;
2. At least 24 months in the practice of registered nursing and either current specialty certification or demonstrated expertise in the area of practice related to the responsibilities of the appointed position;
3. Current, active, unencumbered license as a registered nurse in Nebraska or in the jurisdiction where practice occurs;
4. Competence as a clinician with an ability to apply nursing theory to practice;
5. Effective communication with clients, students, peers and other members of the health care team; and
6. Interest and ability to facilitate learning by students and staff.

97-008.06 Preceptor Orientation: The faculty must clarify with the preceptor:

1. An overview of the roles and responsibilities of preceptors, faculty and students within the course;
2. Specific preceptor responsibilities;
3. Methods of clinical evaluation of students by faculty and preceptors;
4. Goals and objectives for the clinical experience; and
5. Process of resolution of potential/actual problems.

97-008.07 The functions and responsibilities of the preceptor must be clearly delineated in a written agreement between the clinical agency, the preceptor and the nursing education program. The responsibilities of preceptors are two-fold:

1. To facilitate the student's learning within the agency by:
  - a. Assessing and suggesting learning experiences available to the student within course objectives/outcomes;

- b. Selecting client care assignments and arranging other learning experiences within course objectives; and
- c. Directly assisting student learning experiences when needed; and

2. To assist faculty with the evaluation of student performance in the clinical area by:

- a. Identifying areas where the student may need additional assistance from faculty;
- b. Providing periodic feedback about the student's clinical performance; and
- c. Discussing questions and problems with faculty that may arise with the student during the preceptor experience.

97-008.08 The faculty member must retain responsibility for the student's learning experiences. The responsibilities of the faculty regarding preceptors include:

- 1. Orienting the preceptor to the overall course purposes and objectives of the nursing education program;
- 2. Clarifying any questions about the course, the level, or the curriculum;
- 3. Facilitating, monitoring and evaluating the student's learning through periodic conferences with the student and preceptor;
- 4. Assisting the student with application of core content in clinical experiences;
- 5. Serving as a resource person for the student and preceptor; and
- 6. Providing appropriate orientation materials, forms, and evaluation tools to the preceptor.

97-008.09 The responsibility for student learning rests with the faculty member, preceptor and student.

97-008.09A The faculty member primarily coordinates the learning experience of the student, provides direction for the preceptor and student, and evaluates the student's achievement of the course objectives.

97-008.09B The preceptor retains his/her nursing staff responsibility for client care while considering the individual student's capabilities in making assignments.

97-008.09C The student must be directed to accept only those responsibilities which the preceptor believes can be safely managed. Students are expected to maintain practice within the safe limits which have previously been taught. Recognizing their own strengths and limitations, students are required to request help and supervision as needed. **Remains in section 008 as modified.**

97-009 CURRICULUM: The program must have a curriculum that enables the student to develop the nursing knowledge, skills and competencies necessary for the level of licensure.

~~97-009.01 The stated philosophy and objectives/outcomes of the nursing program must be used to develop, organize, implement, and evaluate the curriculum.~~

~~97-009.02 An organized pattern, developed by the nurse faculty for the continuity and sequence of courses and related concurrent clinical instruction must provide for progression of knowledge, skills, abilities, and attitudes of the nursing students.~~

~~97-009.03 Instruction must be provided in the following areas with the courses in the biological, physical, social and behavioral sciences providing a foundation for safe and effective nursing practice:~~

~~97-009.03A Biological and Physical Sciences: Content from these sciences must include Anatomy and Physiology, Chemistry, Microbiology, Nutrition, and Pharmacology. Courses may be developed separately or as integral parts of other courses.~~

~~97-009.03B Social and Behavioral Sciences: Content from these sciences must include Sociology, Psychology, Growth and Development, and Communication Skills. Courses may be developed separately or as integral parts of other courses.~~

~~97-009.03C Nursing: Didactic content and supervised clinical experience in the prevention of illness and promotion, restoration, and maintenance of health in patients/clients across the life span and in a variety of clinical settings, to include:~~

- ~~1. Using informatics to communicate, manage knowledge, mitigate error, and support decision making;~~
- ~~2. Employing evidence-based practice to integrate best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing care;~~
- ~~3. Providing client-centered, culturally competent care by:
  - ~~a. Respecting client differences, values, preferences and expressed needs;~~
  - ~~b. Involving clients in decision-making and care management;~~
  - ~~c. Coordinating and managing continuous client care; and~~
  - ~~d. Promoting healthy lifestyles for clients and populations;~~~~
- ~~4. Working in interdisciplinary teams to cooperate, collaborate, communicate, and integrate client care and health promotion; and~~
- ~~5. Participating in quality improvement processes to measure client outcomes, identify hazards and errors, and develop changes in processes of client care.~~

~~97-009.04 In addition, the curriculum must include:~~

- ~~1. Content regarding legal and ethical issues, history and trends in nursing, professional responsibilities, and scope of nursing practice;~~

2. Experiences which promote the development of leadership and management skills and professional socialization consistent with the level of licensure;
3. Learning experiences, methods of instruction, and evaluation of student accomplishment consistent with the written curriculum plan; and
4. Delivery of instruction by distance education methods must be consistent with the program curriculum plan and enable students to meet the goals, competencies and objectives of the educational program and standards of the Board.

97-009.05 The curriculum must provide for learning experiences that prepare the student to identify and intervene in actual or potential health problems of individuals, families, or groups, which actions are directed toward maintaining health status, preventing illness, injury, or infirmity, improving health status, and providing care supportive to or restorative of life and well-being through nursing assessment and through the execution of nursing care and of diagnostic or therapeutic regimens prescribed by any person lawfully authorized to prescribe. The curriculum must:

1. Be planned, implemented and evaluated by the faculty with provisions for student input;
2. Reflect the organizing framework and objectives of the nursing education program;
3. Be organized logically and sequenced appropriately;
4. Provide supervised clinical experience to prepare the student for the safe practice of nursing;
5. Be comprised of sufficient hours to meet these standards, be supervised by educationally and clinically qualified faculty, and ensure students' ability to practice at an entry level; and
6. In addition to clinical experience provided under direct faculty supervision, experiences may include student observation or experience supervised by adjunct faculty or preceptors.

97-009.06 Current syllabi must be available at the educational institution.

97-009.07 Programs permitting students to challenge selected courses for credit must have written policies governing the challenge procedure.

97-009.08 Nursing electives must be approved in the same manner as all other nursing courses.

#### 97-009.09 Curriculum Revisions

97-009.09A Consultation from the Board is available when curriculum revisions are being considered. Plans for major curriculum revisions must be submitted to the Board for approval three months before they are implemented. Major curriculum changes include:



1. Major changes in program objectives/outcomes which alter the present curriculum;
2. Changes in the length of the program;
3. Changes in the number of hours of didactic instruction or clinical instruction;
4. Reorganization of the entire curriculum;
5. Additions, deletions, and substitutions of support courses; and
6. Additions, deletions, and substitutions of nursing elective courses.

~~97-009.09B~~ A request for curriculum change must include the rationale and indicate the present plan as well as the proposed change and expected outcome. **Remains in section 009 as modified.**

**97-010 CLINICAL RESOURCES:** There must be clinical resources available and adequate for the number of students and faculty and the objectives/outcomes of the program.

~~97-010.01 Clinical Facilities:~~ Clinical facilities must be available with a sufficient number and variety of clients to provide learning experiences essential to achievement of the stated objectives of the curriculum and for the number of students enrolled.

~~97-010.02 Approval:~~ The program must identify on the annual report all clinical facilities utilized by the program. **Remains in section 010 with no substantial changes.**

**97-011 EDUCATIONAL FACILITIES:** Adequate classrooms, offices, laboratories, conference rooms, and a library to meet the objectives of the program and to provide the needs of the students and faculty must be available. **Remains in section 011 with no substantial changes.**

**97-012 STUDENTS:** Students must be provided the opportunity to acquire and demonstrate the knowledge, skills and abilities for safe and effective nursing practice.

~~97-012.01~~ All policies relevant to applicants and students must be available in writing.

~~97-012.02~~ Written policies must be developed by faculty for selection, admission, readmission, progression, graduation, transfer, dismissal and/or withdrawal of nursing students.

~~97-012.03~~ Student responsibilities and due process rights must be available in writing.

~~97-012.04~~ Requirements for graduation must be stated in the program brochure/catalog.

~~97-012.05~~ The date of completion of the nursing program must be specified on the transcript.

~~97-012.06~~ Students must be required to meet the health standards and criminal background checks as required by the clinical agencies and the nursing program.

~~97-012.07~~ Students must be accountable for the integrity of their work. Remains in section 012 as modified; section 013 was incorporated here as well.

~~97-013 STUDENT SERVICES:~~ Policies for student services must be available in writing.

~~97-014 RECORDS:~~ The controlling institution must maintain a record system with provision for the protection of records against loss, destruction, and unauthorized use.

~~97-014.01~~ Student records must be available to the faculty.

~~97-014.02~~ No part of the student's record may be released without the written consent of the student.

~~97-014.03~~ Official records must be maintained for current students enrolled, including admission data, transcripts, and evaluations.

~~97-014.04~~ Transcripts for students who have withdrawn or graduated must be kept on file.

~~97-014.05~~ Records for transfer students, at the time of admission into a nursing program, must include a transcript of the previous nursing or college program and a written program of studies required to be completed by the transfer student prior to graduation.

~~97-014.06~~ Faculty records demonstrating educational and experiential qualifications must be maintained, including official educational transcripts.

~~97-014.07~~ General program records, contracts, minutes of faculty and committee meetings, reports to the administration, nursing program budgets, curriculum plan, current course syllabi, and program brochure/catalog must be maintained. Content now in section 013 as modified.

#### 97-015 REPORTS TO THE BOARD

~~97-015.01~~ An annual report and other reports as requested must be submitted to the Board.

~~97-015.02~~ The Board must be notified in writing of administrative changes relating to and affecting the program.

~~97-015.03~~ The program must cooperate in submitting data to the Board for purposes of research and/or planning activities. Content now in section 014 as modified.

~~97-016 BROCHURE/CATALOG:~~ The program brochure/catalog must be current and give an accurate description of the program. Content now in section 015 as modified.

~~97-017 EVALUATION: The faculty must develop a systematic evaluation plan for the total program and provide for periodic evaluation of all aspects of the program including: Philosophy and Objectives/Outcomes, Organization and Administration, Faculty, Curriculum, Students, Facilities, Follow-Up Study of Graduates, Records, and Reports, and demonstrate how the evaluation data are used for program improvement. Content now in section 016 with no substantial change.~~

~~97-018 SURVEY VISITS TO NURSING PROGRAMS: The Board of Nursing will conduct survey visits to each of the nursing programs to verify compliance with all of the preceding regulations.~~

~~97-018.01 Those survey visits will occur at the time of submission of RN-1 or PN-1 and four years after the date the first graduating class was admitted to the program.~~

~~97-018.02 The frequency of subsequent surveys will be based on an annual evaluation of the following criteria:~~

- ~~1. The stability of the nursing administrative structure and personnel;~~
- ~~2. The stability/retention of the faculty;~~
- ~~3. The program voluntarily maintaining accreditation with the National League for Nursing Accrediting Commission (NLNAC) or the Commission on Collegiate Nursing Education (CCNE);~~
- ~~4. The annual reports for the last four years; and,~~
- ~~5. The graduates from the program having demonstrated a pass rate on the NCLEX examination each year for the last four years that meets or exceeds the national pass rate.~~

~~97-018.03 The Board may direct that a survey visit be conducted more frequently than every four years if it determines that one is indicated based on, but not limited to, the following:~~

- ~~1. Frequent nursing department administrative changes and/or faculty turnover;~~
- ~~2. Complaints received from faculty, students, parents, and/or the general public;~~
- ~~3. A pass rate of the graduates lower than the national pass rate for two consecutive years; or~~
- ~~4. Student retention and attrition.~~

~~97-018.04 Staff for the Board of Nursing will make arrangements with the program to establish a date for the survey to occur sometime during the academic year that it is due. Content now in section 017 as modified.~~

~~97-019 PROCEDURES FOR APPROVING PROGRAMS (INCLUDING SATELLITE PROGRAMS): The application to conduct a program in registered or practical nursing must meet~~

the following requirements and be made on forms provided by the Department, copies of which are attached as RN-1 and RN-2 and PN-1 and PN-2 and incorporated into these regulations by this reference. Only applications which are complete will be considered.

97-019.01 The applying institution must employ a Director at least 12 months prior to the anticipated opening of the program or at least six months prior to the anticipated opening of a satellite program.

97-019.02 At least one qualified faculty member for each course must be employed six months prior to the beginning of a course for the purpose of course development. If a developed course is going to be taught in the satellite program, qualified faculty must be employed two months prior to the beginning of the course for purposes of program and site orientation.

97-019.03 Form RN-1 or PN-1: This portion of the application must be submitted by the applying institution at least one year prior to the anticipated opening of the new program or six months prior to the opening of a satellite program/campus.

97-019.03A Form RN-1 or PN-1 must be signed by the head of the governing body of the controlling institution making the application.

97-019.03A1 If the controlling institution is a private organization, a copy of its articles of incorporation and of the resolution of its governing body authorizing it to establish a program of registered or practical nursing must be attached.

97-019.03A2 If the controlling institution is a public body, a copy of its statutory authority to establish a program of registered or practical nursing must be attached, along with a copy of the resolution of its governing body authorizing it to establish a program of registered or practical nursing.

97-019.03B Form RN-1 or PN-1 of the application must include the following information with supporting documents:

1. A description of the need that has been identified for establishing a program;
2. A description of the classification of the proposed program;
3. A description of the readiness that has been identified of the community to support the proposed program;
4. A description of the financial resources for the program;
5. A description of the educational philosophy of the controlling institution;
6. A description of the accreditation status of the controlling institution;
7. Specification of the source of authority of the controlling institution to offer a basic educational program in registered or practical nursing and to grant the degree, diploma or certificate;
8. A description of the availability of qualified faculty;
9. A description of the availability of qualified applicants for selection of students;

10. A description of the provision for educational facilities including classroom, laboratories, library, conference rooms, and offices;
11. A description of the provision for clinical resources;
12. A description of the general education and nursing content of the curriculum including proposed course descriptions; and
13. A description of the tentative time table for planning and initiating the program.

97-019.03C Approval of RN-1 or PN-1: Upon receipt of the above application, the Board will review the information and direct a survey of the controlling institution for verification of the data contained in the RN-1 or PN-1 portion of the application. Within 90 days of receiving this portion of the application, the Board will evaluate the feasibility for initiating the program and make written recommendations to the applying institution. Consultation with the Board will be available to the governing body of the program and controlling institution.

97-019.04 Form RN-2 or PN-2: This part of the application must be submitted to the Board by the Director and the initiating controlling institution at least six months prior to the anticipated beginning of teaching the courses, to allow the Board time to evaluate the application.

97-019.04A The RN-2 or PN-2 must include the following information with supporting documents:

1. A tentative time plan for the program;
2. The philosophy and objectives of the program;
3. A budget plan;
4. The provision for qualified faculty as set forth in 172 NAC 97-007;
5. An organization chart showing institution control, administration, relationships, and lines of authority;
6. Course outlines for the first year of the nursing content and course descriptions for the remainder of the program. Course syllabi must include course descriptions, course objectives, course content outline and methods of student evaluation, and relationship of learning activities to proposed course objectives;
7. A listing of the clinical resources that will be used, copies of agreements with the cooperating agencies, and a Clinical Facility Statistical Report, which is included in the RN-1 or PN-1 application;
8. A recruitment plan and admission requirements that will be used to select students; and
9. Position descriptions for faculty that outline responsibilities and functions.

97-019.04B Approval of RN-2 or PN-2: The Board will review the total application. Within 60 days after Form RN-2 or PN-2 of the application has been submitted to the Board, the Board will notify the applicant by registered or certified mail either that it has been approved or that it has been denied.

~~97-019.04B1 Initial Approval: When approved for admission of students, the educational program will be granted initial approval beginning with the date of enrollment of the first class. Progress reports must be made by the Director as requested by the Board. Consultation of the Board will be available.~~

~~97-019.04B2 Continuing Approval: Approval is continued for those programs which continue to meet the requirements of the Board as determined by survey visits, annual reports, and such reports as may be required by the Board. Approval may be continued with or without Board recommendations and/or suggestions.~~

~~97-019.04B2a Nursing education programs will be reevaluated every four years with a site visit, or upon request of the nursing education program, or at the discretion of the Board, to ensure continuing compliance with the regulations.~~

~~97-019.04B2b Programs must submit an annual report.~~ Content now in section 019 as modified.

~~97-020 SUSPENSION OR REVOCATION OF APPROVAL: Once a program of registered or practical nursing has been approved, such approval will not be suspended or revoked except as provided hereafter. (Neb. Rev. Stat. § 71-1,132.28)~~

~~97-020.01 If the Board determines that any controlling institution having a program in registered or practical nursing approved by the Board is not maintaining the standards required by the statutes and by these rules and regulations, the controlling institution will be warned. Notice thereof will be given in writing to the controlling institution immediately, specifying the deficiency(ies).~~

~~97-020.01A Such notice will be given by either registered or certified mail.~~

~~97-020.01B The specific deficiency(ies) will be set out in the warning.~~

~~97-020.01C The controlling institution will be given 12 months in which to correct the deficiency(ies) in its program.~~

~~97-020.02 At the conclusion of 12 months, if the requirements for approval have not been met, the controlling institution will be given six months notice of possible withdrawal of approval.~~

~~97-020.03 Six months after the controlling institution has been given notice of possible withdrawal of approval, if the deficiency(ies) have not been corrected, the Department will fix a time and place for a hearing to determine whether the approval from the Board will be suspended or revoked.~~

~~97-020.03A~~ A copy of the charges alleging a specific deficiency(ies), together with a notice of the time and place fixed for the hearing, will be served on the Director of the program and the controlling institution by personal service or registered or certified mail at least ten days prior to said hearing.

~~97-020.03B~~ The hearing will be conducted in accordance with the rules of practice and procedure before the Department. Content remains in section 020 as modified.

~~97-021 TRANSFERRING A PROGRAM:~~ In the event that the transfer of the controlling institutional ownership or control of a program in registered or practical nursing is to take place, the new ownership or new controlling institution must comply with the same requirements as for the establishment of a new program. Content remains in section 021 with no substantial change.

#### 97-022 CLOSING A PROGRAM

~~97-022.01~~ A controlling institution terminating its program must notify the Board at least one year in advance of such intended termination, and must submit to the Board the plan for completion of students currently enrolled and the disposition of records. All Board requirements for approval must be maintained until the program is closed.

~~97-022.02~~ The program must be officially closed on the date the last nursing student completes the program or is transferred to another approved program under the plan for termination of the program or voluntarily withdraws from the program. The controlling institution which has operated the program is responsible for the permanent preservation of records and issuance of transcripts of graduates, and must notify the Board of the custody of the records. Content remains in section 022 with no substantial change.

Approved by Attorney General \_\_\_\_\_ 11/7/06  
Approved by Governor \_\_\_\_\_ 12/4/06  
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