

#### **BOARD OF REGISTERED NURSING**

PO BOX 944210, Sacramento, CA 94244-2100 P (916) 322-3350 | TTY (800) 326-2297 | www.rn.ca.gov



# INSTRUCTIONS FOR INSTITUTIONS SEEKING APPROVAL OF NEW PRELICENSURE REGISTERED NURSING PROGRAM OR ADDITION OF A NEW CAMPUS OR LOCATION FOR A CURRENTLY APPROVED NURSING PROGRAM

(Business and Professions Code Section 2786; California Code of Regulations Sections 1421, 1422, and 1423) (Effective 10/21/10)

# **PURPOSE**

The Instructions specify the requirements and process for an institution seeking approval of a new prelicensure registered nursing program (program applicant) pursuant to Business and Professions Code (B&PC) section 2786 or seeking to add a new campus or location for a currently approved nursing program pursuant to Title 16, section 1432(b)(3) of the California Code of Regulations (CCR). The document is incorporated by reference in CCR section 1421.

# STEPS IN THE APPROVAL PROCESS

In accordance with B&PC section 2786(a), the program applicant must be an institution of higher education or affiliated with an institution of higher education (hereafter referred to as affiliated institution). Affiliated institutions must make an agreement with an institution of higher education in California in the same general location, i.e., within 50 miles, to grant degrees to students who complete the registered nursing program. Such written agreement must be made prior to seeking approval from the Board. A copy of this agreement must be submitted with the feasibility study, described in Step 2.

The institution of higher education offering the program or the institution of higher education granting the degree for the new affiliated institution must have the authority to grant an associate of arts degree or baccalaureate or higher degree to individuals who graduate from the nursing program. An institution that wishes to start a new program must meet this requirement prior to submission of an application.

# STEP 1 – Submit a Letter of Intent:

Submit a letter of intent to the Board of Registered Nursing (BRN) at least one year in advance of the anticipated date for admission of students. The letter must specify the name of the institution seeking approval; contact person; type of nursing program, e.g., associate degree, baccalaureate degree, entry-level master's, etc., and its location; and proposed start date. The letter is to be addressed to:

Executive Officer Board of Registered Nursing P.O. Box 944210 Sacramento, CA 94244-2100 The Board will acknowledge receipt of the letter of intent.

# STEP 2 –Submit Feasibility Study

Submit a feasibility study to the BRN documenting the need for the program and the program applicant's ability to develop, implement, and sustain a viable prelicensure registered nursing program. The feasibility study shall include the following:

- a) Description of the institution and the institution's experience providing nursing or other health-related educational programs. The description must include:
- 1. History, organizational structure and programs (attach an organization chart), funding sources
- 2. Accreditation status and history, (i.e., date of initial accreditation, denials, revocations, warnings) for the institution and any programs offered by the institution
- 3. Type of nursing or other health-related programs including number: of students currently enrolled and graduates by program type; passage rate on any required certification or licensing examination for the past five years (as applicable); and status of the program with any state, regional, or federal agency
- 4. If the applicant does not have a nursing program or other health-related programs, provide a statement related to the processes and resources it will utilize to start and sustain a prelicensure registered nursing program.
- b) Geographic area (community) served by the institution and a description of the community and its population.
- c) Description of the type of program being proposed (e.g., associate, baccalaureate, entry-level master's, etc.), the intended start date, projected size of the first class and enrollment projection for the first five years, and method for determining the projected enrollment.
- d) Information on the applicant pool and sustainability of enrollment for the proposed new prelicensure registered nursing program. Include data on existing nursing programs preparing students for licensure (vocational, associate, baccalaureate, or entry level master's) within a 50-mile radius. Include a statement on plans for promoting the proposed program.
- e) Description of proposed provisions for required subject matter and support areas, including faculty and resources. The proposed program must be at least two academic years, not less than 58 semester or 87 quarter units, and must include *all course areas* specified in CCR 1426. Consult CCR section 1426, Required Curriculum, for required subject matter. Support areas include such items as the library, skills learning lab, computer labs, simulation labs, and tutorial and counseling services.
- f) Budget projection that demonstrates initial and sustainable budgetary provisions for a full enrollment of the initial cohort. The projected budget demonstrates building of reserves to sustain the proposed program.
- g) Evidence of availability of clinical placements for students of the proposed program. Include a list of the clinical facilities that may be utilized for learning experiences and a description of any plans for future addition or expansion of health facilities. Provide a completed "Facility Verification Form" (EDP-I-01 Rev 10/22) for each health care facility that has agreed to provide clinical placement for students of the proposed program. When available, verification shall include the accommodations specifying shift and days.

**Note**: Clinical placements of the new program must take into consideration the impact on the use of the clinical facility by existing prelicensure registered nursing programs and must be

coordinated with any process for clinical placement, such as consortium for regional planning. Include a description of your collaboration and coordination efforts with any existing registered nursing programs and any regional planning consortium.

# Affiliate Program Agreement with Institution of Higher Education

An affiliate program must submit an agreement with an institution of higher education that has authority to grant an associate of arts degree or a baccalaureate or higher degree in nursing to individuals who complete an additional course of study approved by the board. The institution of higher education must be in California and within 50 miles of the nursing program. The agreement must include:

- 1) The type of degree to be conferred by the institution of higher education
- 2) The additional course of study required to obtain the degree
- 3) Process and procedures for nursing program students to enroll in the required courses
- 4) Approximate cost and timeframe for students to complete the requirements
- 5) Role and responsibility of the nursing program, institution of higher education, and the student
- 6) Resources available to students at the institution of higher education.

The program applicant may include any additional information that it believes might reasonably affect the Board's decision to accept the feasibility study.

# STEP 3 – Review of Feasibility Study

It is the responsibility of the program applicant to have staff or a consultant(s) who possess the requisite knowledge and expertise to complete a feasibility study that conforms to the requirements specified in the Instructions. Upon submission of the feasibility study, a BRN staff member will review the study, and will work with the planners of the proposed nursing program to clarify issues. Close communication with BRN staff must be maintained during this time period. The process for initial review usually takes three to four weeks. In the event the initial review time will exceed this time period, BRN staff will notify the program applicant of the approximate time for the initial review. Priority will be given to first-time applicants for program approval.

The following action will be taken:

- 1) If BRN staff determines that the feasibility study is complete and complies with requirements specified in these Instructions, staff will submit the feasibility study to the Education /Licensing Committee (ELC), (Step 4).
- 2) If the feasibility study is deemed incomplete, staff will notify the program applicant, in writing, of any deficiencies and a date for submission of a completed feasibility study. If BRN staff deems the revised feasibility study is complete, it will be submitted to the ELC (Step 4).
- 3) If staff deems the revised feasibility study incomplete, it will be returned to the program with a written notice of the deficiencies, and will not be submitted to the ELC. The ELC and Board will be notified, at a regularly scheduled meeting, of the name of the program applicant, the return of the feasibility study, and the deficiencies that resulted in the feasibility study being returned. If the applicant still wishes to start a prelicensure registered nursing program, the applicant must restart the process at Step 1.
- 4) If the revised feasibility study is returned because it is incomplete and the applicant still wishes to seek approval of a prelicensure registered nursing program, the applicant must restart at Step 1. The Letter of Intent must include a statement summarizing the BRN staff's reason(s) for not accepting the prior revised feasibility study and subsequent corrective action the applicant has taken.

# STEP 4 –Education/Licensing Committee Recommendation on the Feasibility Study

When the feasibility study is deemed complete, it will be submitted to the Board's Education/Licensing Committee for discussion and action at a regularly scheduled meeting. The meeting is open to the public, and there are opportunities for public comment. The BRN will notify the program applicant of the ELC meeting date at which the Committee will discuss and take action on the feasibility study. A representative of the program must be present at the ELC meeting to respond to any questions from the Committee regarding the feasibility study. The ELC will recommend to the Board the acceptance or non-acceptance of the feasibility study, or may defer action on the study to permit the institution time to provide additional information at a subsequent ELC meeting. If the ELC defers action, the program applicant will be notified in writing within ten (10) days of the deferred action, reason(s) for the deferral, and date for submission of any additional information and/or documents. The ELC considers the following criteria in determining its recommendation to the Board:

- 1) Evidence of applicant's ability to initiate and maintain a prelicensure registered nursing program.
- 2) Evidence of initial and sustainable budgetary provisions for the proposed program.
- 3) Institution of higher authority to grant an associate of arts, baccalaureate, or higher degree.
- 4) For affiliated institutions, the agreement with an institution of higher education within 50 miles to grant an associate of arts degree or baccalaureate or higher degree to students completing the nursing program.
- 5) Evidence of availability of clinical placements for students of the proposed program.
- 6) Plans for administrative and faculty recruitment to staff the proposed program.

# STEP 5 - Board Action on the Feasibility Study

The ELC's recommendation on the feasibility study will be submitted for Board discussion and action at a regularly scheduled Board meeting. The Board meeting is also open to the public, with opportunities for public comment. The Board may accept or not accept the study, or may defer action on the study to provide the program applicant with an opportunity to provide additional information. The Board considers the criteria specified in Step 4 in rendering its decision.

The following action will be taken:

- 1) Within ten (10) days after the Board decision on the feasibility study, the Board will notify the program applicant in writing of its decision.
- 2) If the feasibility study is accepted, the program applicant may proceed to Step 6.
- 3) If the feasibility study is not accepted, the Board notice will include the basis for its decision.
- 4) If action on the feasibility study is deferred, the notice shall specify what additional information and/or documents are needed from the program applicant in order for the feasibility study to be deemed complete and a due date for submission of the materials. The revised feasibility study will be considered at regularly scheduled ELC and Board meetings after the due date for submission of materials. If the revised feasibility study is not accepted, the Board will notify the applicant in writing within ten (10) days; the notice will include the basis for the Board's decision.
- 5) An applicant whose initial or revised feasibility study is not accepted, and who still wishes to seek approval of a prelicensure registered nursing program must restart with Step 1. The Letter of Intent must include a statement summarizing the Board's reason(s) for not accepting the prior feasibility study and subsequent corrective action the applicant has taken.

# **STEP 6 - Appointment of Program Director**

Upon acceptance of the feasibility study, the program applicant shall appoint a director who meets the requirements of CCR section 1425(a).

# STEP 7 - Self-Study Report and Site Visit

Upon Board acceptance of the feasibility study, a BRN Nursing Education Consultant (NEC) will be assigned as the BRN liaison for the proposed program. The program director will have responsibility for preparing the self-study for the proposed program and coordinating the site-visit. At least six (6) months prior to the projected date of student enrollment the program applicant must submit to the NEC a self-study that describes how the proposed program plans to comply with all BRN nursing program-related rules and regulations. The attached *Preparing the Self-Study Report for Approval of Prelicensure Nursing Program* (EDP-I-19 Rev 10/22) and *Criteria and Guidelines for Self-Study* (EDP-R-03 Rev 01/09) must be used to compile the self-study.

The NEC will review the report and notify the program director of any deficiencies, issues, or concerns with the self-study. Once the NEC has verified the self-study satisfactorily addresses the applicable rules and regulations, the NEC will schedule an on-site visit. The NEC will visit selected clinical sites the program plans to use as part of the on-site visit. Clinical site visits may be deferred depending on the start date of the proposed program. The NEC will complete a written report of findings.

# STEP 8 – ELC and Board Actions related to Approval of the Proposed Program

The NEC's written report is submitted to the Board's ELC for discussion and action at a regularly scheduled Committee meeting. The Committee may recommend that the Board grant or deny approval, or may defer action on the initial program approval to provide the program applicant a specified time period to resolve any problems and to resubmitted to the ELC. A representative of the proposed program must be present at the ELC meeting(s) to respond to any questions from the Committee.

The Board will take action at a regularly scheduled meeting following the ELC meeting. Representatives of the proposed program are encouraged to be present at the Board meeting(s) to respond to any questions. The action the Board may take includes the following:

- 1) Grant initial approval;
- 2) Deny approval;
- 3) Defer action on the approval to permit the program applicant a specified time period to resolve area(s) of non-compliance. After resolution of the area(s) of non-compliance, the proposed program must be submitted for Board action at another regularly scheduled meeting.

Any material misrepresentation of fact by the program applicant in any required information is grounds for not accepting the feasibility study or denial of initial approval.

# **STEP 9 - Certificate of Approval**

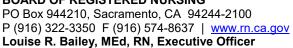
A certificate of approval will be issued by the BRN once the Board grants initial approval.

# **ABANDONMENT OF APPLICATION**

A program applicant who does not take any action to complete the application process within one year of submitting a Letter of Intent or receipt of notice of Board action not accepting the program's feasibility study shall be deemed to have abandoned the application.



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# FACILITY VERIFICATION FORM

The nursing program must verify that clinical facilities offer necessary learning experiences to meet course/clinical objectives. The facility validates that clinical spaces for new students are available and the impact on existing clinical placements of nursing programs was reviewed.

Name of the School:	Name of Dir	ector/Designee:			
	Talambana N	l			
	Telephone N				
	E-Mail Addre	ess:			
Name of health care facility:	Name of Dir	ector of Nursing	/Designee:		
Type of health care facility (Acute, OPD, SNF, etc.)	Telephone N	lumber:			
Average Daily Census for the agency:	E-Mail Addre	ess:			
	Address of F	acility:			
			B. P. 1		
	Medical- Surgical	Obstetrics	Pediatrics	Psych – Mental Health	Geriatrics
Type of units where students can be placed in the health care facility (Place X in the column)					
Average daily census for each area					
Average personnel staffing for the shift for a unit (Include number of RNs, LVNs, CNAs, separately)					
Number of students placed in the unit at any one time.					
Identify shifts and days available for placement of students in the program					
Provide the following information on all other schools util	izing your faci	lity: Attac	h additional she	ets if needed.	<u> </u>
Category of students Schools (RN, LVN, CNA, etc.		. ,	Semesters (Fall, Spr.)	Units u	ısed
				00	
This agency does not have spaces to offer clinical space.	ees to the new	пгодгат	<u> </u>		
agency area not nave spaces to offer cumeat space	io inc new	program.			
This agency intends to offer clinical placement(s) to th	is new progra	m.			
Agency Representative completing this form			Date		

EDP-I-01 (REV 10/22)



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Ruth Ann Terry, MPH, RN, Executive Officer

# PREPARING THE SELF-STUDY REPORT FOR INITIAL APPROVAL OF PRE-LICENSURE NURSING PROGRAM

This form contains instructions for preparation of the Self-Study Report for Approval of initial prelicensure nursing program. This Self-Study Report serves as the cornerstone of the approval visit. The following items are to be included in the Self-Study Report:

- 1) Nursing Program Approval Application and Cover Data Sheet (EDP-P-09);
- 2) Total Curriculum Plan (EDP-P-05);
- 3) REQUIRED CURRICULUM: CONTENT REQUIRED FOR LICENSURE (EDP-P-06);
- 4) RESPONSE TO COMPLIANCE WITH BRN RULES & REGULATIONS;
- 5) Nursing Curriculum And Clinical Facilities (EDP-P-11)
- 6) Program clinical facility verification form (EDP-P-14)
- 7) Conclusion
- Item 1 serves as a coversheet and, as such, should be the first thing in the Self-Study Report.
- Items 2 and 3 pertain to the proposed curriculum plan and may be interspersed throughout the report as deemed appropriate.
- Item 5, the narrative, is to be succinct and presented in a format that:
  - is paginated, indexed for easy reference, and bound in a loose leaf binder;
     and
  - 2) is prepared with regulation cited, followed by narrative explanation.
  - 3) The entire self-study should be no more than 200 pages.
  - 4) is not formatted in columns.

The narrative section referring to compliance with BRN Rules & Regulations should:

- state the criteria (regulation);
- describe how the criteria are being met with appendices and/or charts where appropriate;
- demonstrate the inter-relationship of B&P Section 2725 (scope of practice) and CCR Section 1426 (Required Curriculum) to the curriculum content; and
- demonstrate the inter-relationship of the
  - Philosophy,
  - Terminal objectives (program objectives, outcomes),
  - Conceptual framework or statement of unifying theme and theory of learning,
  - Level objectives,
  - Course description,
  - Course objectives theory and clinical, and
  - Content.

EDP-I-19 (REV 01/09) 6.3.1

CRITERIA AND GUIDELINES FOR SELF-STUDY (EDP-R-03) serves as a guide in writing this portion of the narrative.

The narrative section referring to **CONCLUSION** should be a statement of:

- 1) the areas of strength;
- 2) the areas that need improvement in the program;
- 3) plans to address the areas needing improvement; and
- 4) plans for the program in the next 8 years.

This section should be no more than 20 pages.

EDP-I-19 (REV 01/09) 6.3.2

Department of Consumer Affairs Board of Registered Nursing

# **CRITERIA & GUIDELINES FOR SELF-STUDY**

Ruth Terry, MPH, RN Executive Officer (916) 322-3350

To become approved and to continue to be approved, a school shall, in addition to meeting the criteria stated in this document, comply with all sections of Article 3, Title 16, Chapter 14, California Code of Regulations and Article 4, Chapter 6, Business and Professions Code. A material misrepresentation of fact by a nursing program in any information required to be submitted to the Board is grounds for denial or revocation of the program's approval

APPROVAL CRITERIA	INDICATORS	EVIDENCE
I. ADMINISTRATION		Including, but not limited to:
SECTION 1424(a) There shall be a written statement of philosophy and objectives that serves as a basis for curriculum structure. Such statement shall take into consideration the individual difference of students, including their cultural and ethnic background, learning styles, goals, and support systems. It shall also take into consideration the concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.	<ul> <li>The philosophy and the objectives of a nursing program must be consistent and serve as the basis of the curriculum structure.</li> <li>Philosophical statement is readily available in writing to students, applicants and the public.</li> <li>Course objectives are written in clear, behavioral terms and are included in all course syllabi.</li> <li>Program philosophy is included in Self-Study.</li> </ul>	A. Students report consistent implementation of program philosophy in their experiences in the program.  B. Philosophy includes faculty's beliefs about:  1. Person (humanity)  2. Art and science of nursing.  3. Nursing education, including the following individual differences among students,  a. Cultural milieu,  b. Ethnic background,  c. Learning styles, and  d. Support systems.  C. Program objectives reflect philosophy.
SECTION 1424(b) The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.	<ul> <li>All policies and procedures by which the nursing program is administered shall reflect its philosophy and objectives.</li> <li>Documents where information is available to students are included in the Self-Study.</li> <li>Include a copy of Nursing Student Handbook with each Self-Study.</li> </ul>	<ul> <li>A. Written policies and procedures are available to student on the following activities:     Admissions' Promotion; Retention;     Graduation; Dismissal; Grievance policies'     Transfer and Challenge policies.</li> <li>B. Students state they are aware of policies and procedures of the program and that they are universally applied.</li> </ul>

EDP-R-03 (Rev 01/09) 6.4.1

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1424(b)(1) The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedure, attrition and retention of students, and performance of graduates in meeting community needs.	<ul> <li>The evaluation process assesses the effectiveness of the total educational program, including the effectiveness of the evaluation plan as a quality improvement tool.</li> <li>The faculty as a whole analyze data collected and make appropriate changes based on that input and the continuing evolution of nursing/health care theory and practice.</li> <li>Faculty utilize a system to track problems and responses over time.</li> </ul>	A. Written reports of the results of the total program evaluation, including:  1. Attrition rates and patterns, 2. Surveys, e.g., students, graduates, employers, 2. NCLEX pass rates for past five years, and 3. Any student issues or complaints. B. The above reports include: 1. Patterns and trends, 2. Faculty analysis, 3. Outcome of analysis (change, resolution).
Section 1424(b)(2) The program shall have procedure for resolving student grievances	<ul> <li>The written procedure for resolution of student grievance should be consistent with the educational institution.</li> <li>Identify location of written grievance policy in Self Study.</li> </ul>	A. Written nursing program's grievance process printed in at least one official document.  B. Grievance process is readily available to students, is objective and is universally applied.
SECTION 1424(c) There shall be an organizational chart which identifies the relationships, lines of authority and channels of communication within the program, between the program and other administrative segments of the institution with which it is affiliated, and between the program, the institution and clinical agencies.	<ul> <li>There is an organizational plan that shows lines of authority and channels of communication between the program, the institution and all clinical agencies.</li> <li>Director has responsibility and authority to supervise and evaluate all program faculty and staff.</li> <li>All faculty responsible for a nursing course, i.e., lead faculty, are approved as an Instructor and an Instructor, Assistant Director or the Director supervises all Assistant Instructors and Clinical Teaching Assistants.</li> </ul>	A. Nursing Department organizational chart to include clinical agencies and relation to administration.  B. Administrators, faculty and students verify authority and communication lines as indicated on organizational chart.  C. Summary of minutes reflect identified relationships and communications:  1. faculty meetings 2. interdepartmental meetings 3. interagency meetings

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1424(d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives.	<ul> <li>There are adequate resources, including use of technology, to assist the students to achieve the program objectives.</li> <li>Faculty have identified and sought to mitigate any limitations in resources or any barriers students' experience in accessing resources.</li> </ul>	A. Written evaluation of resources, to include: Faculty; Library; Staff services; Support services; Learning/skills laboratory; Laboratory resources; Physical space; Equipment, include technology, such as equipment for simulation; and hardware/software B. Students and faculty verify adequacy of resources. C. Written report demonstrates tracking of any resource concerns or access problems.
SECTION 1424(e) The director and the assistant director shall dedicate sufficient time for the administration of the program.	<ul> <li>Director and assistant director have specified time set aside for the administration of the program.</li> <li>Dedicated time for administration of the program is sufficient time for the director to perform the functions described in CCR section 1420(h). Director functions include the responsibility and authority to:         <ol> <li>Develop and implement the program budget,</li> <li>Plan, manage and evaluate all aspects of the program including, but not limited to:                 <ol> <li>Faculty and staff,</li> <li>Curriculum development and implementation,</li> <li>Compliance with Board rules and regulations, and</li> <li>Act as a student advocate.</li> </ol> </li> <li>Note: Refer to and implement CCR 1420(h) and (c) for definitions of "Director" and "Assistant Director," respectively.</li> </ol></li></ul>	A. Job description for:  1. Director 2. Assistant director  B. Semester/quarter schedule for: 1. Director 2. Assistant director

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1424(f) The program shall have a board-approved assistant director who is knowledgeable and current regarding the program and the policies and procedures by which it is administered, and who is delegated the authority to perform the director's duties in the director's absence.	<ul> <li>There will be at least one Assistant Director, with a defined duty statement, who meets the qualifications for Assistant Director as stated in Section 1425(b).</li> <li>The amount of release time and responsibilities of the Assistant Director are specified.</li> </ul>	A. Credentials of Assistant Director:  1. Assistant Director Approval form 2. Job descriptions of Assistant Director that defines administrative functions performed.  B. Nursing Department organizational chart reflecting Assistant Director's role.  C. Sufficient dedicated time to perform administrative functions.
SECTION 1424(g) Faculty members shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.	<ul> <li>Faculty minutes reflects faculty participation by all faculty with regard to:         <ol> <li>Input into program policy development,</li> <li>Responsibility for program implementation and outcomes, and</li> <li>Evaluation of all aspects of program.</li> </ol> </li> </ul>	A. A summary report of minutes demonstrating faculty's participation on their:  1. Development of policies and procedures 2. Planning, organization, implementing and evaluating all aspects of the program.  B. Organizational chart reflecting the manner by which the faculty functions C. Faculty handbook D. Validation from students, faculty and director.
SECTION 1424(h) The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in section 1426(d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.	<ul> <li>Faculty members teaching in the nursing program will meet qualification listed in CCR 1425(c), (d) or (e).</li> <li>Information shall be available on each faculty's current education and experience in teaching theory and clinical.</li> <li>Faculty numbers, including the ratio of full-time to part-time faculty, will be sufficient to safely implement the curriculum.</li> <li>Note: Refer to and implement CCR 1420(d) for definition of "clinically competent."</li> </ul>	A. Faculty profiles that include the last five years of activities related to their teaching assignment(s) and their approved clinical area(s). CE hours &/or clinical work experiences sufficient to demonstrate faculty expertise and continued clinical competency.  B. Identify education and clinical experience that qualifies each content expert for that role.  C. List class schedule and faculty assignments and include in Self-Study.  D. Faculty Approval/Resignation Notification forms(EDP-P-02)*  E. Compliance with policy on content experts.
SECTION 1424(i) When a non-faculty individual participates in the instruction and supervision of students obtaining clinical experience, his or her responsibilities shall be described in writing and kept on file by the nursing program.	Non-faculty individuals shall have expertise in the area in which they are responsible for the clinical supervision of students.	A. Identification of all non-faculty individuals and their responsibilities written and on file.

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APPROVAL CRITERIA  SECTION 1424(j) The assistant director shall function under the supervision of the director. Instructors shall function under the supervision of the director or the designee. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.  SECTION 1424(k) The student/teacher ratio in the clinical setting shall be based on the following criteria:  (1) Acuity of patient needs; (2) Objectives of the learning experience; (3) Class level of the students; (4) Geographic placement of students;	<ul> <li>INDICATORS</li> <li>Describe the hierarchy of the faculty in relation to implementing the curriculum.</li> <li>Plan to show rationale for student/teacher ratio based on criteria, Section 1424(k).</li> <li>Faculty evaluate initial and ongoing clinical placement of students.</li> </ul>	A. List relationships from Director through all faculty and non-faculty members and responsibility for curriculum.  B. Supervision is consistent with program organizational chart.  A. Written process for determining student/teacher ratio in all clinical sites.  B. Minutes of meetings between faculty and clinical agency personnel.  C. A written summary report on student evaluations of clinical settings.
(5) Teaching methods; and (6) Requirements established by the clinical agency  II. FACULTY QUALIFICATIONS & CHANGES		D. Students report clinical settings are adequate for them to meet course objectives.  Including, but not limited to:
SECTION 1425 All faculty, the director, and the assistant director shall be approved by the board pursuant to the document, "Faculty Qualifications and Changes Explanation of CCR Section 1425 (EDP-R-02 Rev 01/09), which is incorporated herein by reference. A program shall report to the board all changes in faculty, including changes in teaching areas, prior to employment of, or within 30 days after, termination of employment of a faculty member. Such changes shall be reported on forms provided by the board. Faculty Approval/Notification form (EDP-P-02, Rev 01/09) and Director or Assistant Director Approval form (EDP-P-03, Rev 01/09) are herein incorporated by reference. Each faculty member, director, and assistant director shall hold a clear and active license issued by the board and shall possess the following qualifications:	<ul> <li>Director, Assistant Director, and all faculty must have on file in the program and with the Board an approval form, signed by Board staff, approving all administrative or teaching functions performed in the program.</li> <li>All nurse faculty members, Director, and Assistant Director will have a clear and active RN licensed by the board at all times</li> </ul>	A. Faculty, Assistant Director, and Director forms on file with Board are consistent with assignments and positions held in the program.  B. List all faculty and administrators of the program showing current, active California RN licensure.

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1425(a) The director of the program shall meet the following minimum qualifications: (1) A master's or higher degree from an accredited college or university which includes course work in nursing, education or administration; (2) One (1) year's experience as an administrator with validated performance of administrative responsibilities consistent with section 1420(h); (3) Two (2) years' experience teaching in pre- or post-licensure registered nursing programs; and (4) One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse. (5) Equivalent experience and/or education as determined by the board.	RN Director shall meet all requirements of 1425(a).	A. Narrative showing how position is filled:  1. Appointed or elected (process),  2. Term of office, and  3. Amount of time for administrative functions.  B. Duty statement that includes functions listed under Indicators for section 1424(e). Also refer to definition of director in CCR 1420(h).  C. Copy of approved Director or Assistant Director Approval (EDP-P-03)  Note: It is the program's responsibility to demonstrate that a non-nursing degree and/or non-academic administrative experience meets the requirements of 1425(a).
SECTION 1425 (b) The assistant director shall meet the education requirements set forth in subsections (a)(1) above and the experience requirements set forth in subsections (a)(3) and (a)(4) above, or such experience as the board determines to be equivalent.	The registered nurse Assistant Director shall meet minimum requirements of section 1425(b).	A. Narrative showing how position is filled:  1. Appointed or elected position  2. Term of office, and  3. Amount of time for administrative functions.  B. Duty statement that includes administrative functions assigned or shared. See definition, CCR section 1420(c) and 1420(e).  C. Copy of approved Director or Assistant Director Approval (EDP-P-03).

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1425(c) An instructor shall meet the following minimum qualifications:  (1) The education requirements set forth in subsection (a)(1);  (2) Direct patient care experience within the previous five (5) years in the nursing area to which he or she is assigned, which can be met by:  (A) One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area; or  (B) One (1) academic year or of registered nurse level clinical teaching experience in the designated nursing area or its equivalent that demonstrate clinical competency; and  (3) Completion of at least one (1) year's experience teaching courses related to registered nursing or completion of a post-baccalaureate course which includes practice in teaching registered nursing.	Instructors in the nursing programs shall meet minimum requirements of section 1425(c).	A. Faculty Approval/Resignation Notification (EDP-P-02). B. Description of clinical experience in approved content area within the previous five years.
SECTION 1425(d) An assistant instructor shall meet the following minimum qualifications:  (1) A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice;  (2) Direct patient care experience within the previous five (5) years in the content area to which he or she will be assigned, which can be met by:  (A) One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area; or  (B) One (1) academic year or of registered nurse level clinical teaching experience in the designated nursing area or its equivalent that demonstrate clinical competency.	An Assistant Instructor shall meet minimum requirements of section 1425(d).	A. Faculty Approval/Resignation Notification (EDP-P-02).  B. Description of clinical experience in approved content area within the previous five years.

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1425(e) A clinical teaching assistant shall have at least one (1) year continuous, full-time or its equivalent experience in the designated nursing area within the previous five years (5) as a registered nurse providing direct patient care.	The clinical teaching assistant shall meet the minimum requirements for section 1425(e).	A. Faculty Approval/Resignation Notification (EDP-P-02). B. Description of clinical experience in approved content area within the previous five years
SECTION 1425(f) A content expert shall be an instructor and shall possess the following minimum qualifications:  (1) A master's degree in the designated nursing area; or  (2) A master's degree that is not in the designated nursing area and shall:  (A) Have completed thirty (30) hours of continuing education or two (2) semester units or three (3) quarter units of nursing education related to the designated nursing area; or have national certification in the designated nursing area from an accrediting organization, such as the American Nurses Credentialing Center (ANCC); and  (B) Have a minimum of two hundred forty (240) hours of clinical experience within the previous three  (3) years in the designated nursing area; or have a minimum of one (1) academic year of registered nurse level clinical teaching experience in the designated nursing area within the previous five (5) years.	At least one content expert in the area of geriatrics, medical-surgical, mentalhealth/psychiatric nursing, obstetrics, and pediatrics with each expert's qualifying credentials listed in the Self-Study. Refer to CCR 1420(f) for the role of a content expert.  Identification of content expert role in the curriculum implementation.	A. Faculty profiles that include the last five years of activities related to their teaching assignment(s) and their approved nursing area(s). CE hours and/or clinical work experiences are sufficient to demonstrate faculty expertise and continued clinical competency.  B. Identify education and clinical experience that qualifies each content expert for that role C. Description on how content expert role is accomplished in program is included in the Self-Study
III. FACULTY RESPONSIBILITIES		Including, but not limited to

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.	<ul> <li>There shall be a record showing all activities and responsibilities of each faculty member.</li> <li>The Board considers each faculty member responsible for the consistent implementation of the program philosophy, objectives, policies and curriculum.</li> <li>The Board considers part time faculty share the same responsibility as full time faculty.</li> </ul>	A. Schedule of faculty/student rotations. B. Faculty job description C. Program's full-time/part-time policy. D. Students report consistent implementation of philosophy and framework across the curriculum. E. Meeting minutes, such as faculty, curriculum, etc.
SECTION 1425.1(b) Each faculty member shall participate in an orientation program, including, but not limited to, the program's curriculum, policies and procedures, strategies for teaching, and student supervision and evaluation	<ul> <li>Policy on orientation of a new faculty member.</li> <li>Faculty handbook</li> </ul>	A. Policy on faculty orientation; B. Verification by faculty members.
SECTION 1425.1(c) A registered nurse faculty member shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.	<ul> <li>Registered nurse faculty members are responsible exclusively for clinical supervision of students in the registered nursing program.</li> <li>List names of any faculty with a dual appointment between the institution and service and how position is funded.</li> </ul>	A. Schedule of faculty/student rotations. B. Clinical agency contracts reflect faculty responsibility for student supervision.
SECTION 1425.1(d) Each faculty member shall demonstrate clinical competence in the nursing area in which he or she teaches. The board document, "Faculty Remediation Guidelines" (EDP-R-08 Rev. 01/09), provides guidelines for attaining and documenting clinical competence, and is herein incorporated by reference.	Policy on faculty remediation.	A. Faculty profiles that include the last five years of activities related to their teaching assignment(s) and their approved clinical area(s). CE hours &/or clinical work experiences sufficient to demonstrate faculty expertise and continued clinical competency.  B. Completed faculty remediation plans.
IV. REQUIRED CURRICULUM; PRIOR APPROVAL		Including, but not limited to:

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1426(a) The curriculum of a nursing program shall be that set forth in this section and shall be approved by the board. Any revised curriculum shall be approved by the board prior to its implementation	The Board of Registered Nursing shall approve the current curriculum of a nursing program prior to its implementation.	A. Program curriculum forms are <u>signed</u> and consistent with Board files.  1. Total Curriculum Plan form (EDP-P-05).  2. Course of Instruction form (EDP-P-06).  B. Hours & units implemented are consistent with Program and Board files.
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a student who completes the program will have the knowledge, skills, and abilities necessary to meet minimum competency standards of a registered nurse.	<ul> <li>Curriculum shall have a unifying theme that includes the nursing process and is a plan that provides the necessary knowledge, skills, and abilities necessary for the student to function and meet minimum competency standard for a RN and to meet standards of competence in CCR section 1443.5.</li> <li>Narrative and/or a diagram showing how curriculum model includes nursing process and embodies program philosophy.</li> <li>Each faculty implements curriculum according to agreed upon philosophy, objectives and theoretical framework/unifying theme.</li> </ul>	A. Consistency of curriculum will be reflected in:  1. Course syllabi, 2. Student and faculty evaluations, and 3. Pattern of attrition across the curriculum. B. Curriculum is relevant to current nursing practice and reflects standards of competence performance (CCR 1443.5). This is demonstrated by:  1. NCLEX pass rates and trends, 2. Evaluations of graduate and employer surveys and program reviews.
SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number of units in the specified course areas:	<ul> <li>The curriculum shall reflect the minimum requirements as stated in section 1426(c).</li> <li>Curriculum forms signed and dated by Board staff on file match program files.</li> </ul>	A. Total Curriculum Plan for (EDP-P-05). B. Required Curriculum/Content Required for Licensure (EDP-P-06R) C. Approved units and hours consistent:
(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice	Course syllabi reflect units and hours documented on curriculum forms.	A. Board forms, B. College catalog, C. Course syllabi, D. Class schedule, E. Nursing Student Handbook, F. Verification from students and faculty.
(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of oral, written and group communication.	<ul> <li>College courses that emphasize interpersonal communication skills, oral, written, group.</li> <li>Separate communication courses and may also be included in nursing courses, identify where met.</li> </ul>	EDP-P-06

APPROVAL CRITERIA	INDICATORS	EVIDENCE
(3) Related natural sciences (anatomy, physiology, and microbiology courses with labs), behavioral and social sciences, sixteen (16) semester or twenty-four (24) quarter units.	<ul> <li>A minimum of 16 (semester) /24 (quarter) units of sciences required, e.g., anatomy, physiology, microbiology, psychology, sociology, or cultural anthropology.</li> <li>Other science units may be included or be apart of other degree requirements.</li> </ul>	Appropriate Board forms and program sources confirm compliance. *
SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, and pediatrics. Instructional outcomes will focus on delivering patient-centered care, practicing evidence-based practice, working as part of interdisciplinary teams, focusing on quality improvement, and using information technology. Instructional contents shall include, but is not limited to, the following: critical thinking, personal hygiene, patient protection and safety, pain management, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, and nursing leadership and management.	<ul> <li>All nursing courses shall have concurrent theory and clinical practice.</li> <li>Clinical practice sufficient to meet course objectives and standards of competent performance (CCR 1443.5) is expected for each of five nursing areas of registered nursing practice.</li> </ul>	A. Schedule of classes. B. Schedule of clinical rotations. C. Identification of content areas that are integrated (e.g., geriatrics, nutrition, and pharmacology, etc.) D. Course syllabi.

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.  (1) The nursing process; (2) Basic intervention skills in preventive, remedial, supportive, and rehabilitative nursing; (3) Physical, behavioral, and social aspects of human development from birth through all age levels; (4) Knowledge and skills required to develop collegial relationships with health care providers from other disciplines; (5) Communication skills including principles of oral, written and group communications; (6) Natural science, including human anatomy, physiology, and microbiology; and (7) Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health-illness.	<ul> <li>The curriculum shall reflect all subsections of Section 1426(e).</li> <li>Include in Self Study the approved (signed by NEC) curriculum forms: <ol> <li>Total Curriculum Plan (EDP-P-05 or EDP-P-05A)</li> <li>Required Curriculum/Content Required for Licensure (EDP-P-06 or EDP-P-06 Rev 09/01)</li> </ol> </li> </ul>	A. Course syllabi will contain appropriate:  1. Course objectives, 2. Curriculum content, and 3. Clinical experiences, including nursing skills and clinical conference.  B. Communication skills and related sciences provided by:  1. Support courses provided on campus and/or accepted as transfer credit 2. Integration into nursing courses  C. Narrative summary evaluating relevance and effectiveness of above content.
SECTION 1426(f) The program shall have tools that are directly related to course objectives to evaluate a student's academic progress, performance, and clinical learning experiences.	<ul> <li>There is a formal plan for evaluation of students' achievements that is based upon clinical objectives that are measurable and related to course outcome objectives.</li> <li>The student evaluation plan is consistently implemented across the curriculum.</li> </ul>	<ul> <li>A. Clinical evaluation tools related to clinical/course objectives that are stated in measurable terms.</li> <li>B. Documentation of student conferences.</li> <li>C. Report by students of consistent implementation of evaluation of students' academic progress based on clearly stated objectives.</li> </ul>
SECTION 1426(g) The course of instruction shall be presented in semester or quarter units under the following formula:  1) One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit.  2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.	<ul> <li>Nursing program must utilize semester or quarter units as designated by college policy. Indicate if using a compressed calendar</li> <li>Total hour for theory is based on the number of weeks times one hour/week/unit.</li> <li>Total hour for clinical is based on the number of weeks times 3 hrs/week/unit.</li> <li>Note: Courses may be compressed as long as total number of hours/unit equals the total for the base number of weeks in the semester or quarter.</li> </ul>	A. Hours per unit accurately reflected in:  1. Total Curriculum Plan Form (EDP-P-05 or EDP-P-05A) Form 05A will calculate total hours if opened in Excel.  2. College/university catalogue  3. Course outlines/syllabi  4. Student handbook  5. Credit granted

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1426.1 A preceptorship is a course, or component of a course, presented at the end of a board-approved curriculum, that provides students with a faculty-planned and supervised experience comparable to that of an entry-level registered nurse position. The following shall apply:  SECTION 1426.1(a) The course shall be approved by the board prior to its implementation.	<ul> <li>Preceptorship, if implemented is approved by the Board;</li> <li>Faculty is assigned to a course that has the supervisory responsibilities for the course;</li> <li>Policies and procedures for the preceptorship course are clear;</li> <li>Preceptor orientation is provided to preceptors.</li> </ul>	Preceptorship course policies. Verified by faculty, preceptor, students.
SECTION 1426.1(b) The program shall have written policies and shall keep policies on file for conducting the preceptorship that include all of the following:  (1) Identification of criteria used for preceptor selection;	•	Preceptor policy
SECTION 1426.1(b)(2) Provision for a preceptor orientation program that covers the policies of the preceptorship and preceptor, student, and faculty responsibilities;	<ul> <li>Formalized orientation program is available for preceptors;</li> <li>All Preceptors complete an orientation that covers policies and procedures of the preceptorship and responsibilities of the preceptor, student, and faculty prior to being assigned students;</li> </ul>	Preceptor policy and records.
SECTION 1426.1(b)(3) Identification of preceptor qualifications for both the primary and the relief preceptor that include the following requirements:  (A) An active, clear license issued by the board; and (B) Meet the minimum requirements specified in section 1425(e); and (C) Employed by the health care agency for a minimum of one (1) year; and (D) Completed a preceptor orientation program prior to serving as a preceptor; (E) A relief preceptor, who is similarly qualified to be the preceptor and present and available on the primary preceptor's days off.	<ul> <li>Preceptors meet the requirements per 1426.1;(b)(3);</li> <li>Required records for preceptors are maintained;</li> </ul>	

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1426.1(b)(4) Communication plan for faculty, preceptor, and student to follow during the preceptorship, including:  (A) The frequency and method of faculty/preceptor/student contact;  (B) Availability of faculty and preceptor to the student during his or her preceptorship experience.  (i) Preceptor is present and available on the patient care unit during the entire time the student is in his or her preceptorship rendering nursing services.  (ii) Faculty is available to the preceptor and student during the entire time the student is involved in the preceptorship learning activity.	<ul> <li>Communication plan during preceptorship is clear to all parties involved.</li> <li>Preceptor and faculty are available to the student during his or her preceptorship experience.</li> </ul>	Preceptor course files and responses from student/preceptor interview
SECTION 1426.1(b)(5) Description of responsibilities of the faculty, preceptor, and student for the learning experiences and evaluation during preceptorship, including following activities:  (A) Faculty member conducts periodic on-site meetings/conferences with the preceptor and the student;  (B) Faculty member completes the final evaluation of the student with input from the preceptor;	<ul> <li>Onsite meetings are held at regular intervals;</li> <li>Conduct ongoing monitoring and evaluation;</li> </ul>	Interview with students/preceptors
SECTION 1426.1(b)(6) Maintenance of preceptor records that includes names of all current preceptors, registered nurse licenses, and dates of preceptorships;	Preceptor files kept on file.	Preceptor files contain required information.
SECTION 1426.1(b)(7) Plan for an ongoing evaluation regarding the continued use of preceptors.	•	
SECTION 1426.1(c) Faculty/student ratio for preceptorship shall be based on the following criteria: (1) Student/preceptor needs; (2) Faculty's ability to effectively supervise; (3) Students' assigned nursing area; and (4) Agency/facility requirements.	Criteria on faculty/student ratio for preceptorship are used.	Effectiveness of supervision using the given ratio. Responses from faculty, preceptors, students.
V. CLINICAL FACILITIES		Including, but not limited to

Attachment 4  APPROXIAL CRITERIA  INDICATORS  ENURSES			
APPROVAL CRITERIA	INDICATORS	EVIDENCE	
Section 1427(a) A nursing program shall not utilize any agency and/or facility for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b), (c), and (d) of this section and the policies outlined by the board.	<ul> <li>List of clinical facilities used by the nursing program is kept.</li> <li>Program will have a Clinical Site Approval form (EDP-P-08) for each facility the program uses for clinical learning experience.</li> <li>Verification that selected clinical sites meet requirements of subdivision (b)(c) below.</li> </ul>	A. The following documents verify compliance: 1. Clinical Site Approval form (EDP-P-08),* 2. Curriculum/Faculty form (EDP-P-11) 3. Clinical contracts, 4. Minutes of interagency meetings, and 5. Written evaluation/verification of clinical sites. (May use Verification Form EDP-P-14.)	
Section 1427(b) A program that utilizes an agency or facility for clinical experience shall maintain written objectives for student learning in such facilities, and shall assign students only to facilities that can provide the experience necessary to meet those objectives	<ul> <li>Clinical agencies shall be utilized only when they can provide the experiences necessary to meet course objectives.</li> <li>Written objectives shall be posted and available on each unit or area when students are present.</li> </ul>	A. The following demonstrates compliance: 1. Consultants are readily able to obtain current written objectives at each site visited. 2. Students report ability to meet clinical objectives and that faculty and RN staff support the students' learning. 3. Written report that summarizes student and faculty evaluations of clinical sites and changes made when indicated.	
<ul> <li>SECTION 1427(c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following:</li> <li>(1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;</li> <li>(2) Provisions for orientation of faculty and students;</li> <li>(3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;</li> <li>(4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients.</li> <li>(5) Provisions for continuing communication between the facility and the program; and</li> <li>(6) A description of the responsibilities of faculty assigned to the facility utilized by the program.</li> </ul>	<ul> <li>Clinical contracts shall meet the requirements stated in section 1427(c)(1)-(6). (Include in the Self Study as a sample of contract form(s) used.)</li> <li>A process that faculty use for discussing the program's philosophy, curricular framework and specific course objectives with clinical agencies. (Include in Self Study.)</li> <li>A statement of adequate staffing must be included in the contract with the clinical agency.</li> <li>Job responsibilities of the faculty should be delineated in the agency contracts.</li> <li>How orientation of faculty occurs and who is responsible to orient students.</li> </ul>	A. All clinical agencies used by program will have a signed, current contract that includes all the requirements of 1427(c)(1) – (6).  B. Written summary of interagency meetings including resolution of any problems.  C. Written plan for the following if not detailed in contract:  1. Communication between agency and college or university.  2. Orientation of faculty and students.  3. Preceptor Program if applicable.  4. Work-Study Program if applicable.	

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1427(d) In selecting student placement in a new agency or facility, the program shall take into consideration the impact of such additional group of students has on students of other nursing programs already assigned to the agency or facility.	Interagency meeting minutes shall reflect considerations of impact being given on placement of a new clinical group at the agency.	
VI. STUDENT PARTICIPATION		Including, but not limited to:
Section 1428(a) students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to: (1) Philosophy and objectives; (2) Learning experiences; and (3) Curriculum, instruction and evaluation of the various aspects of the program, including clinical facilities.	<ul> <li>There is active student participation formally or informally with the faculty in the identification of policies and procedures relating to the students in the nursing program.</li> <li>Avenues for student input listed in Self Study, such as:</li> <li>1. Committee membership(s) and whether students have voting privileges,</li> <li>2. Student representatives by name and level,</li> <li>3. Method used to collect written student course evaluations, and</li> <li>4. Utilization of student nurses organization if applicable.</li> <li>5. Any other avenues open to students to have input into program activities.</li> </ul>	A. Written report tracking student issues and complaints and program responses. (Identify location of verifying documentation.)  B. Verification from students and faculty concerning student participation.  C. Faculty analysis of student evaluations of courses, faculty, clinical sites and program, including changes made as appropriate.  D. Description of student representative's responsibilities, how selected and process for student to student communication.
VII. POLICIES RELATING TO ESTABLISHING ELIGIBILITY FOR		
EXAMINATION		Including, but not limited to:
SECTION 1428.6(a) At least four (4) weeks prior to its established graduation date, the nursing program shall submit to the board a roster of names of those students and their expected date to successfully complete required course work. Except as provided below such a student shall be deemed eligible to take the examination after the date on which the student successfully completed the required course work.	Procedure is in place for submission of Board required forms for graduates of the program.	Policies and procedures used by the program.

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1428.6(b) The nursing program shall notify the board immediately by telephone, facsimile, or email of any student who fails to maintain eligibility and such individual shall be deemed ineligible to take the examination.		
VII. LICENSED VOCATIONAL NURSES, Thirty (30) Semester or Forty-Five (45) Quarter Unit Option		Including, but not limited to
SECTION 1429(a) An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the Board, including a transcript, of successful completion of the requirements set forth in sub-section (c) and of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.	Note: This section refers to the California Licensed Vocational Nurse applying for licensure in California as a Registered Nurse through the 30 unit/45 unit Option. The process for program applicants who are applying for advanced placement due to prior education and experience should be addressed under Transfer and Challenge section 2786.6.	Transcripts will reflect eligibility to sit for the licensure examination in California.
SECTION 1429(b) The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicant's academic deficiencies, irrespective of the time such courses were taken.	<ul> <li>Counseling is provided to all LVN applicants to the program and shall include the following:         <ol> <li>Minimum requirements for licensure shall be explained objectively to each applicant.</li> <li>Previous courses shall be analyzed on an individual basis.</li> <li>No recency requirements shall be applied to prerequisite courses for this option.</li> </ol> </li> <li>There is at least one officially published document describing this option.</li> </ul>	A. The official school document that indicates all options available to LVNs interested in RN licensure and that each applicant will be individually evaluated.  B. Program Director, college/university counselors and students verify option is made available and that counseling is offered.  C. Written narrative of program's experience with 30 (45) unit Option students including:  1. Number of graduates,  2. Evaluation of attrition rates, and  3. Licensing exam (NCLEX) pass rates.

APPROVAL CRITERIA	INDICATORS	EVIDENCE
SECTION 1429(c) The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in Section 1426, may be counted toward fulfillment of the additional education requirement.  Nursing courses shall be taken in an approved	<ul> <li>Curriculum requirements for 30/45 unit         Option included in Self Study is consistent         with Board approved curriculum requirements         for this option. (EDP-P-06 or EDP-P-06 Rev.)</li> <li>The program will specify no more that 30         semester or 45 quarter units for completion of         minimum requirements for a California LVN         to be eligible for the NCLEX-RN.</li> <li>Course work will be beyond the licensed         vocational nursing level.</li> <li>Note: Students who complete this option (30/45)</li> </ul>	A. Transcripts shall reflect designated courses required by section 1429(c).  B. Course syllabi for this option reflect the minimum units/hours as listed on approved curriculum form.  C. Implementation of this option verified by students and faculty.
program and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing, and geriatric nursing. The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.	unit) will take NCLEX-RN as a non-graduate. This status will not change even if student goes on to obtain a degree. There is no restriction to practice within California. The student may have difficulty in transferring to another state or territory. The student may also have difficulty applying to a college/university for an advanced degree.	
VIII PREVIOUS EDUCATION CREDIT  SECTION 1430 An approved nursing program shall have a process for an applicant to obtain credit for previous education or for other acquired knowledge in the field of nursing through equivalence, challenge examinations, or other methods of evaluation. The program shall:  SECTION 1430(a) Make the information available to applicants and the public in published documents, such as college catalog or student handbook, and online;	Process for providing alternative entry and completion options for applicants will be described in Self Study and includes:  Challenge examination for theory and clinical practice, if required,  Type and percent of students entered into advanced placement, and  How eligibility for advanced placement is determined.	A. All policies, including alternative entry and completion options are readily available to applicants, and the policies are universally applied B. Written policy for challenge and transfer options.  C. The challenge/transfer policy is known by students.  D. Students eligible for alternative options were offered the opportunity for challenge and/or transfer of previous education for credit

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SECTION 1430(b) Have policies and procedures for alternative entry and completion options for applicants, who have: (1) A license or certificate in the field of health care; (2) Previous education in a registered nursing program; or (3) Earned a baccalaureate or higher degree from a regionally accredited institution.  Note: Authority cited: Section 2715, Business and Professions Code. Reference: Sections 2736, 2786.6, Business and Professions Code.	<ul> <li>Program has a process to grant credit for previous education for all nursing courses and other acquired knowledge.</li> <li>Policy for challenge and transfer is written and is available to students.</li> <li>Note: The Board will accept the college or university's evaluation on granting credit as reflected in the applicants transcript</li> </ul>	A. College catalog B. Student handbook C. Written materials for admission
IX LICENSING EXAMINATION PASS RATE STANDARD		Including, but not limited to:
SECTION 1431 The nursing program shall maintain a minimum pass rate of seventy-five percent (75%) for first time licensing exam candidates.  SECTION 1431(a) A program exhibiting a pass rate below seventy-five percent (75%) for first time candidates in an academic year shall conduct a comprehensive program assessment to identify variables contributing to the substandard pass rate and shall submit a written report to the board. The report shall include the findings of the assessment and a plan for increasing the pass rate including specific corrective measures to be taken, resources, and timeframe.	Systematic evaluation plan shall include monitoring of licensing exam pass rates;  • First substandard performance (first academic year)  a. Discuss with the program director  b. Ask the director to submit a report outlining the program's action plan.  • Second substandard performance (second academic year)  a. Schedule an interim visit with specific objectives which include:  b. Meeting with director  1. Meeting with administrator  2. Meeting with faculty  3. Establish whether program's action plan is still current, and whether being met.  4. Document on interim visit form.  5. NEC presents finding in a written report to ELC with director present.	Systematic evaluation - Data collection and annual evaluation data on pass rates. Faculty/committee meeting minutes ATI and/or other measurement tools being used.

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SECTION 1431(b) A board-approval visit will be conducted if a program exhibits a pass rate below seventy-five percent (75%) for first time candidates for two (2) consecutive academic years.	NEC schedules a visit if there is no improvement and pass remains substandard for two consecutive years, within the next six months, per BPC section 2788.	
SECTION 1431(c) The board may place a program on warning status with intent to revoke the program's approval and may revoke approval if a program fails to maintain the minimum pass rate pursuant to section 2788 of the Code.	ELC makes recommendation to the board when indicated.	