

CHAPTER 6

STANDARDS FOR NURSING EDUCATION PROGRAMS

Section 1. Statement of Purpose. These Board Rules are adopted to implement the Board's authority to:

- (a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;
- (b) Ensure that graduates of programs are prepared for safe and effective nursing practice; and
- (c) Ensure candidates are educationally prepared for certification, licensure, and recognition.

Section 2. Definitions.

- (a) **“Administrator”** means the nurse educator who has administrative responsibility or authority for the direction of a program.
- (b) **“Committee”** means the Practice and Education Committee of the Board.
- (c) **“Distance Education”** means instruction offered by any means where the student and faculty are in separate physical locations. Teaching methods may be synchronous or asynchronous and shall facilitate and evaluate learning in compliance with approved statutes and regulations.
- (d) **“Encumbered license”** means a license with a current discipline, condition, or restriction.
- (e) **“Preceptor”** also known as partners in education, means a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.
- (f) **“Parent Institution”** means the organization or agency responsible for the administration and operation of the program.
- (g) **“Program”** means nursing education program.
- (h) **“Program Compliance Report”** means a report generated by the program in which the program reports its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.
- (j) **“Self-Study Evaluation”** means an evaluation generated by the program in which the program evaluates its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.

Section 3. Standards of Nursing Education.

(a) Standards of Nursing Education. All programs shall adopt purposes and outcomes which:

(i) Are consistent with the Act, Board Rules, and other state laws;

(ii) Are consistent with the accepted standards governing the practice of nursing appropriate for graduates of the type of program offered; and

(iii) Were developed utilizing stakeholder input.

(b) Administration and Organization. The parent institution and program shall:

(i) Establish statements of purpose, philosophy, and outcomes which are consistent with those of the parent institution and nursing standards;

(ii) Establish and adopt an organizational design which clearly delineates the lines of authority, responsibility, and channels of communication based on stakeholder input;

(iii) Ensure faculty and students participate in program planning, implementation, evaluation, and continuous improvement;

(iv) Provide adequate resources to support the program's processes, goals, and outcomes which include, but are not limited to: fiscal, human (qualified administrative, instructional, and support personnel), physical (facilities and equipment), clinical, and technical learning resources;

(v) Implement written policies, congruent with the policies of the parent institution, which are reviewed periodically; and

(vi) Provide students the opportunity to acquire and demonstrate the knowledge, skills, and abilities required for safe and effective nursing practice, in theory and clinical experience, through faculty supervision.

(c) Accreditation Requirements.

(i) The parent institution shall be accredited by a U.S. Department of Education regionally or nationally recognized institutional accrediting agency.

(ii) The Board shall not require the program to obtain national accreditation as a condition for approval, but it is encouraged.

(iii) The parent institution or program shall notify the Board of any changes affecting their respective accreditation status.

Section 4. Programmatic Standards for Prelicensure Programs.

(a) Curriculum.

(i) *Overview.* The curriculum of the program shall enable the student to develop the nursing knowledge, skills, and abilities necessary for the level, scope, and standards of competent nursing practice expected at the level of licensure or recognition. The program shall revise its curriculum to maintain a program that reflects advances in health care and its delivery.

(ii) *Principles.* Based on nursing education, professional, and practice standards, the curriculum shall 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 if used, consistent with the written curriculum plan;

(C) 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;

(D) Written statements of specific, measureable, theoretical, and clinical outcomes/competencies for each course; and

(E) Delivery of instruction consistent with the program curriculum plan, which enables students to meet the goals, competencies, and outcomes of the program.

(iii) *Clinical Experience.*

(A) The program shall 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.

(B) A written contract or agreement shall be executed by the parent institution conducting the program and the cooperating clinical facility or agency. The contract shall be executed by the responsible individual(s) of each party, and shall set forth the responsibilities of each party.

(C) Faculty supervised clinical practice 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 health care providers.

(D) Measurement of students' competencies shall focus on the students'

demonstration of care management and decision making skills when providing patient care in a variety of clinical situations and care settings.

(iv) *Faculty/Student Ratio.*

(A) The program shall consider the following factors in determining the faculty/student ratio in clinical settings, including: clinical site, level of student, type of clinical experience, contractual agreement with the agency, program, and curricular objectives and the faculty's teaching experience.

(B) Faculty/student ratio shall be a maximum of 1:8 for clinical experiences.

(C) When preceptors are used in a clinical setting, the preceptor/student ratio shall be 1:1. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.

(b) Administrator Responsibilities. The administrator shall:

(i) Be responsible for the administration, planning, implementation, evaluation, and improvement of the program; and

(ii) Dedicate appropriate time and resources to meet the needs of the program and the students, which should result in reduced teaching responsibilities.

(c) Administrator Qualifications. The administrator shall have education and experience necessary to direct the program preparing graduates for the safe practice of nursing.

(i) In associate degree and/or practical nursing programs, the administrator shall:

(A) Have a minimum of a master's degree in nursing;

(B) Hold an active, unencumbered Wyoming RN license;

(C) Have at least five (5) years of experience practicing nursing; and

(D) Experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.

(ii) In baccalaureate nursing programs, the administrator shall meet the qualifications in Section 4(c)(i) and have a doctoral degree in nursing or related field.

(d) Faculty and Preceptors.

(i) *Principles.*

(A) The program shall employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program. A minimum of 50% of the part-time faculty shall also hold a graduate degree with a major in nursing.

(B) Preceptors may be used to enhance faculty-directed clinical learning

experiences. Criteria for selecting preceptors shall be in writing.

(ii) *Faculty Qualifications.* Nursing faculty shall hold an active, unencumbered Wyoming RN license and be experientially qualified. Faculty shall also meet the following educational requirements:

(A) Full-time faculty:

(I) Graduate degree in nursing education;

(II) Graduate degree in nursing and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date; or

(III) Obtain a graduate degree in nursing within five (5) years of hire date and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date. The administrator shall immediately notify the Board in writing of the hire of the non-graduate prepared faculty member along with a plan for compliance with the requirements.

(B) Part-time faculty:

(I) Minimum of a baccalaureate degree with a major in nursing; and

(II) Successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date.

(iii) *Preceptors Qualifications.* Preceptors shall:

(A) Hold an active, unencumbered nursing license in the jurisdiction where the clinical experience occurs; and

(B) Demonstrate competencies related to the area of assigned clinical teaching responsibilities and will serve as role models and educators for students.

(e) Students.

(i) The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences.

(ii) The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study. All policies relevant to applicants and students shall be readily available in writing.

(iii) Students shall meet health standards and criminal background check requirements established by the program.

(f) Program Evaluation.

(i) *Overview.* The program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.

(ii) *Principles.* The program evaluation shall include the methodology, frequency, assignment of responsibility, and evaluative criteria in the following areas:

(A) Protection of patient safety. Including, but not limited to: tracking of medication errors, unusual/sentinel events, or training in QSEN competencies;

(B) Student retention, attrition, and on-time program completion rates;

(C) NCLEX pass rates which are at least 75% for one year for graduates taking the examination for the first time for pre-licensure programs;

(D) Trend data/action related to NCLEX performance or certification exam;

(E) Assessment of faculty performance;

(F) Trend data/action planning related to employer and graduate satisfaction;

(G) Program complaints/grievance review and resolution; and

(H) Program improvement initiatives related to program outcomes.

Section 5. Process for Approval of New Programs.

(a) Step 1 – Submit New Program Proposal.

(i) *Timeframe.* At least fifteen (15) months prior to admitting students, the parent institution shall submit to the Board a statement of intent to establish a program and a proposal.

(ii) *Statement of Intent.* The statement of intent shall address:

(A) Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;

(B) Employment opportunities for program graduates; and

(C) Potential effects on other programs in Wyoming.

(iii) *Proposal.* The proposal shall address how the program will comply with the standards of nursing education identified in Section 3. At a minimum, the proposal shall include:

(A) Purpose, mission, and level of the proposed program;

(B) Evidence of parent institution and other pertinent governing bodies approval and support;

- (C) Accreditation status of the parent institution;
- (D) Organizational structure of the educational institution documenting the relationship of the program within the parent institution;
- (E) Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;
- (F) Documentation of adequate academic facilities and staff to support the program;
- (G) Source and description of adequate clinical resources for the level of program;
- (H) Availability of qualified administrator and faculty;
- (J) Evidence of community support;
- (K) Anticipated student population; and
- (L) Proposed time line for planning and initiating the program.

(iv) *Board Action.* After review of the initial proposal, the Board may grant or deny permission to proceed to submit an application for provisional approval.

(b) Step 2 – Preparation for Submission of the Application for Provisional Approval.

(i) *Timeline.* Between fifteen (15) and twelve (12) months prior to admitting students, the parent institution shall prepare for submission of the application for provisional approval.

(ii) *Preparation.* The parent institution shall:

- (A) Appoint/hire an administrator;
- (B) Develop a written proposed program plan in accordance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. In addition, the proposed program plan shall include:
 - (I) Program content;
 - (II) Schedule (course sequence);
 - (III) Course descriptions;
 - (IV) Contracts for clinical sites;
 - (V) Self-study evaluation; and

(VI) Course syllabi.

(C) Establish student policies for admission, progression, retention, and graduation; and

(D) Request that the Board conduct a site-visit.

(c) Step 3 – Submit Application for Provisional Approval.

(i) *Timeline.* At least twelve (12) months prior to admitting students, the parent institution shall submit a provisional application which demonstrates that the requirements in subsection (b) are met.

(ii) *Committee Review.* After reviewing the application for provisional approval, the Committee may recommend that the Board grant or deny provisional approval. If the Committee recommends denial, the parent institution may request in writing a hearing within 180 days.

(iii) *Board Action.* After review of the application for provisional approval, the Board may grant or deny provisional approval. Provisional approval shall be valid for twenty-four (24) months following graduation of the first cohort.

(d) Step 4 – Preparation for Admission of Students.

(i) *Timeline.* Between twelve (12) months and six (6) months prior to admitting students, the parent institution shall prepare for the admission of students.

(ii) *Preparation.* The parent institution shall hire sufficient faculty and notify the Committee of those appointments.

(iii) *Committee Review.* After verifying all components and processes are complete and in place, the Committee shall notify the program that it may admit students.

(e) Step 5 – Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.

(f) Step 6 – Submit Application for Initial Full Approval.

(i) *Timeline.* Within eighteen (18) months after graduation of the first cohort, the program shall submit an application for initial full approval which includes a self-study evaluation and participate in a site-visit to be conducted by the Board.

(ii) *Committee Review.* After reviewing the application for initial full approval, the Committee may recommend that the Board grant or deny initial full approval. If the Committee recommends denial, the program may request in writing a hearing within 180 days.

(iii) *Board Action.* After review of the application for initial full approval, the Board may grant or deny initial full approval.

Section 6. Annual Report. All programs, excluding those with provisional approval, shall submit an annual report on or before October 31 to the Board. The annual report shall include:

- (a) Program compliance report;
- (b) Projected program changes;
- (c) Faculty data forms; and
- (d) Current college catalog.

Section 7. Process for Continuing Full Approval.

(a) Evaluation of Program. Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.

(b) Timeline.

(i) If the program is accredited by a national nursing accreditation agency, the evaluation process shall occur at least every ten (10) years.

(ii) If the program is not accredited by a national nursing accreditation agency, the Board shall evaluate the program at least every five (5) years.

(c) Evaluation Process.

(i) *Nationally Accredited Programs.* If the program is accredited by a national nursing accreditation agency, the evaluation process may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending review. The Board may accept the self-study evaluation submitted to the accrediting body. The program shall submit the results of accrediting body survey to the Board.

(ii) *Non-Nationally Accredited Programs.* If the program is not accredited by a national nursing accreditation agency, the Board shall review and analyze various sources of information regarding program performance including, but not limited to:

- (A) Review of annual reports since the last evaluation;
- (B) Self-study evaluation; and
- (C) Site-visit.

(d) Committee Review. After reviewing the evaluation documentation, the Committee may recommend that the Board grant or deny continuing approval. If the Committee recommends denial, the program may request in writing a hearing within 180 days.

(e) Board Action. After review of the evaluation documentation, the Board may grant

or deny continuing approval to the program.

Section 8. Site Visit Conducted by the Board.

(a) Pre-Site Visit Process.

(i) At least three (3) months prior to the site visit, the Board shall notify the program of the site visit.

(ii) Thirty (30) days prior to the scheduled site visit, the program shall submit the self-study evaluation or plan of correction to the Board.

(iii) The program shall schedule all site visit activities.

(b) Post Site Visit Report.

(i) Following a site visit, the Board shall provide a report of its findings to the program.

(ii) The program may respond to the report with additional information within ninety (90) days.

(iii) Following review of the program's response, the Board shall issue a final decision. Written notification of the final decision shall be sent to the parent institution and the administrator.

Section 9. Denial or Withdrawal of Approval for Programs.

(a) Noncompliance. If the Committee finds that a program is not in compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4, the Committee shall provide written notice of deficiency(s) to the administrator of the parent institution and the administrator.

(b) Notice of Deficiency(s). The written notice shall:

(i) Enumerate or identify the deficiency(s); and

(ii) Based on the number and severity of deficiency(s), establish a reasonable period of time to correct the deficiency(s), not to exceed (18) months.

(c) Program Response to Notice of Deficiency(s). Within thirty (30) days from the date of mailing the notice of deficiency(s), the administrator shall:

(i) Submit a plan of correction to the Committee for review; or

(ii) Request a hearing before the Board.

(d) Committee Review. After reviewing the plan of correction, the Committee may:

- (i) Recommend approval of the plan of correction;
 - (ii) Recommend that the Board conduct a site visit of the program;
 - (iii) Recommend conditional approval pending submission of a revised plan of correction; and/or
 - (iv) Recommend withdrawal of program approval.
- (e) Program's Request for Hearing. If the Committee recommends withdrawal of program approval, the program may request in writing a hearing within 180 days.
- (f) Board Action. Upon a recommendation from the Committee or following a hearing, the Board may:
- (i) Dismiss the written notice of deficiency(s);
 - (ii) Order the program to submit a plan of correction, including reporting obligations;
 - (iii) Conduct a site visit of the program;
 - (iv) Approve the Committee's recommendation;
 - (v) Withdraw full approval and order a plan of correction placing the program on conditional approval; and/or
 - (vi) Withdraw approval of the program.

Section 10. Reinstatement. A program may petition for reinstatement of approval by submitting evidence of compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.

Section 11. Closure of Nursing Education Program.

- (a) Voluntary Closing.
- (i) When the parent institution decides to close a program, it shall notify the Board in writing stating the reason(s) for closure, the plan for discontinuation, and the intended date of closure.
 - (ii) When closing a program, the parent institution shall:
 - (A) Continue the program until the last class enrolled is graduated; or
 - (B) Assist in the transfer of students to other Board-approved programs.
 - (iii) The program shall meet the standards of nursing education and the programmatic standards identified in Sections 3 and 4 until the date of closure.

(iv) The date of closure is the date on the degree, diploma, or certificate of the last graduate or the date on which the last student was transferred.

(b) Closing as a Result of Withdrawal of Approval.

(i) Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program and transfer of students to other Board-approved programs.

(ii) The date of closure is the date on which the last student was transferred.

(c) Storage of Records. The Board shall be advised of the arrangements for storage of permanent records.

Section 12. Out-of State Program(s)/Course(s) Including Distance Education.

(a) Pre-Licensure Out-of-State Program Approval. An out-of-state program seeking to provide students with pre-licensure clinical learning experiences in Wyoming shall obtain Board approval.

(i) The Board may accept an out-of-state programs that has been approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located. Such approval shall meet or exceed approval requirements established in this chapter.

(ii) If an out-of-state program is not approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located, the program shall apply for Board approval.

(b) Out-of-State Course Approval.

(i) *Timeline.* At least two (2) months prior to the start date of the clinical course, an out-of-state program shall submit a completed course approval application.

(ii) *Application Requirements.* The applicant shall provide:

(A) Parent institution's current registration with the Wyoming Department of Education or be designated as a participating institution by the National Council for State Authorization Reciprocity Agreements (SARA);

(B) Proof of parent institution's accreditation by an accrediting body recognized by the United States Secretary of Education for pre-licensure programs;

(C) Proof of faculty and preceptors qualifications identified in Section 4; and

(D) Course and student information.

(iii) *Reporting Obligations.* Programs with approval clinical placements in Wyoming shall be required to complete an abbreviated annual education report.

Section 13. Approval of Certification Courses.

(a) The Board shall establish standards and approve certification courses for CNA II, MA-C, and LPN IV.

(b) Board-approved courses shall be offered and administered by:

- (i) A program in a post-secondary institution of higher learning in Wyoming;
- (ii) A Board-approved program;
- (iii) An approved provider of continuing education; or
- (iv) A licensed health care facility.