Regulation of Nursing Programs in AZ

An Introduction to Nursing Education Regulation
Arizona State Board of Nursing
Disclaimer

• This presentation is intended to provide a quick summary/synopsis of education AZBN rules regulations and practices and is for educational purposes only and is not all inclusive.
• Please see the actual regulations to evaluate compliance.
• This document is not intended for use in any legal proceeding.
• As rules and statutes change frequently, please refer to the Nurse Practice Act and Rules of the Board for current information.
Objectives

• Locate regulations governing nursing education in the Arizona Nurse Practice Act
• Identify key components of Nursing Education oversight by the Board
• Discuss policies affecting nursing programs
• Discuss the role of the Education Committee
• Identify key Board personnel responsible for nursing programs
Statutory Authority A.R.S. §32-1644

- Nurse practice act available on-line www.azbn.gov
- ARS 32-1644 covers approval of schools
- Subsection A requires all schools offering nursing programs be accredited by an agency recognized by the US Department of Education
- Subsection B provides for surveys of new programs
Subsection C contains a waiver provision for nationally accredited (CCNE/ACEN) programs, BUT these programs do fall under Board jurisdiction if they fail to maintain standards in Board rule or lose accreditation. The Board monitors this by:

- Reviewing self study and accompanying national accrediting team on site visit to determine compliance
- Monitoring NCLEX pass rates and on-time graduation
- Responding to complaints alleging rule violations
32-1644 D

• Subsection D allows the board to resurvey all approved programs and if programs:
  – Fall below standards, issue a “notice of deficiency”—official Board action (similar to “conditional approval” in other states)
  – If deficiencies not remedied the Board may
    • Restrict ability to admit new students
    • Revoke program’s approval
Rules—Effective July 6, 2013

• Education rules found in Article 2 of the “Rules of the Board” under Nurse Practice Act
  www.azbn.gov

• Key provisions of rules that may be unique to AZ or are complex will be highlighted:
  – Administrative authority
  – Evaluation plan
  – Faculty qualifications
  – Policies
  – Curriculum
Administrator Qualifications

– All programs must have a nurse administrator who meets qualifications in R4-19-203
  • Graduate degree with a major in nursing (including LPN programs)
  • Minimum 3 years work experience providing direct patient care
  • Minimum of one academic year full-time experience teaching in or administering a pre-licensure nursing program. IF NOT—provision for appointment to an interim position
Administrative Authority
R4-19-203

– Nurse administrator:
  • Must answer directly to an academic officer of the institution
  • Must have administrative authority over all aspects of the program including faculty evaluation, budget, and lead faculty in curriculum and policy development
  • Cannot teach more than 3 clock hours per week
  • Must contribute to institutional governance (e.g. formal committee appointment with other administrators)
Change in Administrator

• R4-19-201 (L) requires that institutions notify the Board within 15 days of a change in nursing program administrator
• Must appoint a new administrator within 15 days of a vacancy
• An interim administrator must meet requirements and carry our role functions of R4-19-203 and including restricted teaching
Evaluation Plan

• Similar to CCNE/NLNAC however Board expects (R4-19-201(I)) programs to:
  – Have measurable evaluative criteria (goals) and sound methodology
  – Actually implement the plan as specified and provide results of evaluation (preferably on the plan)
  – Evaluate 10 general categories including “protection of patient safety”
Faculty

• The Program Administrator must maintain, enforce and evaluate equivalent policies for students and faculty necessary to provide safe care (R4-19-203 (C)(6)). Policies must address:
  – Physical and mental health
  – Criminal background checks
  – Substance use screens
  – Functional abilities
  – Supervision of clinical activities
Additional Requirement

• R4-19-203 (C)(8)
  – Together with faculty develop, enforce and evaluate both student and faculty policies regarding minimal requisite nursing skills and knowledge necessary to provide safe patient care for the type of unit and patient assignment
  • Means both faculty and students must be prepared and qualified for their roles in clinical
Faculty Qualifications—RN Programs R4-19-204

• Didactic faculty must have:
  – License or privilege to practice in AZ
  – A graduate degree
    • A majority of the didactic faculty (not counting the nursing program administrator) must hold a graduate degree in nursing
    • Faculty who do not hold a graduate degree in nursing must hold a BSN—partial completion of a master’s program does not substitute
    • 2 years RN experience providing direct patient care
Faculty Qualifications
Clinical Faculty

- Same as didactic or
- RN License plus 3 years RN experience
- BSN Degree (must actually hold the degree—not partial completion of master’s program)
  - Degree must be in nursing
Faculty Qualifications—PN R4-19-204

• ONLY applies to free standing PN programs (not optional exit programs)

• Must have:
  – A license to practice nursing in AZ (AZ nursing license or multi-state privilege)
  – Minimum of a BSN with 2 years RN experience providing direct patient care
  – NO DIFFERENCE IN QUALIFICATIONS OF DIDACTIC OR CLINICAL FACULTY
Policies/information
(R4-19-201, 203, 204, 205)

• Required policy topics
  – Student input
  – Admission, progression, graduation, withdrawal, advanced placement
  – Grievance, rights, responsibilities
  – Ability to practice safely--students and faculty
  – Personnel policies that conform to other faculty or explanation of differences not related to Board requirements
Public Information
R4-19-205

• Accurate, complete and readily available
  – Nature of the program
  – Length of the program
  – Cost of the program (see disclosure of cost policy on Board website)
  – Transferability of credits earned in the program
  – Clear statement regarding technology based instruction and technical support
Changes in Policy
R4-19-205

• Must communicate changes clearly and provided advance notice similar to the advance notice provided by other schools.
  – Some policies may require more advance notice—graduation requirements, curriculum change, testing
  – Some require less—dress code, cheating policy

• The more potential to harm students, the more advance notice needs to be given—policies should be written and dated
Policy on Cost Disclosure
Substantive Policy Statement

• The minimum information on costs available to all students and prospective students should include
  – Tuition and Fees
  – Textbooks
  – Uniforms/Supplies
  – Background check/Fingerprinting
  – Drug Screens
  – Health/Immunization Requirements
  – Transportation
  – CPR Training
  – Cost of Licensure/NCLEX
Curriculum R4-19-206

• Must have the following elements
  – Overall program goals/objectives
  – Level and/or course objectives
  – Measurable learning outcomes for each class session
  – Course content outline
Curriculum information

1. Student centered program outcomes
2. Prescribed course sequencing and time required;
3. Specific course information—see next slide
Course Information  
R4-19-206

- Course description;
- Student centered and measurable didactic, simulation and clinical objectives;
- A course content outline that relates to the course objectives;
- Student centered and measurable objectives and a content outline for each unit of instruction.
- Graded activities to demonstrate that course objectives have been met.
Course Content—QSEN R4-19-206

- Patient centered care,
- Teamwork and collaboration,
- Evidence-based practice,
- Quality improvement,
- Safety, and
- Informatics,
Clinical-RN
R4-19-206

- RN program must provide patient care in the following areas:
  - Medical Surgical—acute, chronic and complex, life threatening conditions
  - Perinatal patients
  - Pediatrics—neonatal, infant, children
  - Psych-mental health
  - Wellness
Clinical—PN
R4-19-206

• All PN programs must have patient care clinical in the following
  – Medical surgical—throughout the life span
  – Peri-natal patients
  – Neonates, infants and children
Preceptorships
R4-19-206

• Can be at any point in the program
• LPN program can also offer—LPN may be preceptor for an LPN student, but must function under the general supervision of RN or physician
• Program must retain accountability for selection of preceptors and student learning
Clinical

• The Board does NOT prescribe
  – Number of clinical hours
  – % of clinical that can be simulation/virtual—
    with the exception that 100% of population
    cannot be virtual/simulation
  – The setting of the clinical
Outcomes
R4-19-206

• 2 defined outcome standards
  – NCLEX
    • Below 75% for one year = deficiency
    • Below 80% for 2 consecutive years = deficiency
  – On-time (100% of curriculum plan) graduation
    • 45% of students enrolled in the first nursing clinical course must graduate on time
Rules may be waived for programs applying for innovations. Eligibility includes:
- Full approval by the Board
- No substantiated complaints, discipline or deficiencies in past 2 years
- Compliant with Board regulations in past 2 years
- Submit application according to R4-19-214
Unprofessional Program Conduct R4-19-211

• Failure to meet minimal educational standards
• Deficiencies in compliance with Article 2
• Non-compliance with program or parent institutions mission, goals, program design, objectives or policies
• Failure to provide adequate clinical experiences
Unprofessional Conduct

• Ongoing or repetitive employment of unqualified faculty
• Enrollment of students without necessary faculty, facilities, or clinical experiences
• Fraud and deceit
• False information in advertising or to the Board
• Failure to cooperate with a Board investigation
Accredited Programs
R4-19-213

• Notify the Board at least 30 days before an accreditation visit and allow Board to accompany national site visitors
• Provide the Board a copy of all site visit reports—not just the outcome
Board Policies and Papers of Interest

• All of these are available on our website
  – Annual reports from nursing programs
  – Quarterly and annual NCLEX pass rates
  – Choosing a Nursing Program
  – Competency Model
  – Comparison of RN and LPN Standards Related to Scope
  – Minimum Pediatric Clinical Competencies
  – Clinical Utilization by AZ Nursing Programs
Resources

• Nursing Administrator/Director Program Resources
• Nursing Program Approval/Accreditation Basics
• Nursing Program Expansion Fact Sheet
• Preparing for a site visit—putting your best foot forward
Resources
Substantive Policies

- Program expansion when under provisional approval
- Disclosure of program costs
- Submission of items to the Education Committee
- Changes in Mission and Goals
- NCLEX Accommodation Policy
Education Committee

• Composed of members representing a variety of education programs and geographical regions
• Two year renewable terms with identified Goals and Activities
• No program has a “right” to be represented on the committee
• Meet every other month—open to the public
• Advise the Board on education matters
Education Department

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