

**Substantive Policy Statement  
Arizona State Board of Nursing**

**Changes in Credit Hours for Pre-licensure Nursing Programs**

**November 21, 2014**

This Substantive Policy Statement is advisory only. A Substantive Policy Statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on the regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedures Act. If you believe that this Substantive Policy Statement does impose additional requirements or penalties on regulated parties you may petition the agency under Arizona Revised Statutes Section 41-1033 for a review of the statement. (ARS § 41-1091)

**R4-19-209. Nursing Program Change**

- A. The program administrator shall ensure that the following changes to a nursing education program are evidence-based and supported by rationale. A nursing program administrator shall receive approval from the Board before implementing any of the following nursing program changes:
  2. Increasing or decreasing the academic credits or units of the program excluding pre-requisite credits;
- B. The administrator shall submit one electronic and one paper copy of the following materials with the request for nursing program changes:
  1. The rationale for the proposed change and the anticipated effect on the program administrator, faculty, students, resources, and facilities;
  2. A summary of the differences between the current practice and proposed change;
  3. A timetable for implementation of the change; and
  4. The methods of evaluation to be used to determine the effect of the change.
- C. The Board shall approve a request for a nursing program change if the program demonstrates that it has the resources to implement the change and the change is evidence-based and consistent with R4-19-201 through R4-19-206. A nursing program that is denied approval of program changes may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for full approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**Purpose:** The purpose of this Substantive Policy is to establish guidelines for evaluating changes to credits of a nursing program. Nursing programs are pressured to decrease credit hours by accrediting agencies and others without consideration of the safety needs of patients or the effect on students (Education Committee, 2014). This policy serves to establish the evidence and rationale that programs will need to provide to support a change in nursing program credits.

**Policy:**

1. The Education Committee will consider whether evidence and rationale provided by programs seeking to change the number of credits meet the following criteria:
  - a. Decreases in program hours eliminate redundancies in the program or involve deletion of material that is unnecessary for safe nursing care.
  - b. The change is not likely to diminish the effectiveness or safety of the student or graduate.
  - c. The change is supported by nursing faculty and is consistent with accepted practice in other approved nursing programs.

- d. The change is not made by adjusting instructional time offered per credit.
  - e. The change does not negatively affect the student's articulation into higher degree nursing programs.
  - f. The change considers the unique learning needs of the program's students, the workforce needs of the community in which the program resides, the program's resources and the availability of qualified faculty.
  - g. The change is consistent with A.A.C. R4-19-206.
2. The Board will not consider requests for changes in credits based solely on national norms or mandates by accrediting bodies.

**References:**

Education Committee (2014). Credits/length of associate degree nursing programs white paper. Available at [azbn.gov/Education/Resources](http://azbn.gov/Education/Resources)

**R4-19-206. Curriculum**

- A. A nursing program shall assign students only to those clinical agencies that provide the experience necessary to meet the established clinical objectives of the course.
- B. A nursing program shall provide a written program curriculum to students that includes;
  1. Student centered outcomes for the program;
  2. A curriculum plan that identifies the prescribed course sequencing and time required;
  3. Specific course information that includes:
    - a. A course description;
    - b. Student centered and measurable didactic objectives;
    - c. Student centered and measurable clinical objectives, if applicable;
    - d. Student centered and measurable simulation objectives, if applicable;
    - e. A course content outline that relates to the course objectives;
    - f. Student centered and measurable objectives and a content outline for each unit of instruction.
    - g. Graded activities to demonstrate that course objectives have been met.
- C. A nursing program administrator and faculty members shall ensure that the curriculum:
  1. Reflects the nursing program's mission and goals;
  2. Is designed so that the student is able to achieve program objectives within the curriculum plan;
  3. Is logically consistent between and within courses and structured in a manner whereby each course builds on previous learning.
  4. Incorporates established professional standards, guidelines or competencies; and
  5. Is designed so that a student who completes the program will have the knowledge and skills necessary to function in accordance with the definition and scope of practice specified in A.R.S. § 32-1601(16) and R4-19-401 for a practical nurse or A.R.S. § 32-1601(20) and R4-19-402 for a registered nurse.
- D. A nursing program shall provide for progressive sequencing of classroom and clinical instruction sufficient to meet the goals of the program and be organized in such a

manner to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and practice.

1. A nursing program curriculum shall provide coursework that includes, but is not limited to:
    - a. Content in the biological, physical, social, psychological and behavioral sciences to provide a foundation for safe and effective nursing practice consistent with the level of the nursing program;
    - b. Content regarding professional responsibilities, legal and ethical issues, history and trends in nursing and health care;
    - c. Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration and maintenance of health in patients across the life span and from diverse cultural, ethnic, social and economic backgrounds to include:
      - i. Patient centered care,
      - ii. Teamwork and collaboration,
      - iii. Evidence-based practice,
      - iv. Quality improvement,
      - v. Safety, and
      - vi. Informatics,
  2. A registered nursing program shall provide clinical instruction that includes, at a minimum, selected and guided experiences that develop a student's ability to apply core principles of registered nursing in varied settings when caring for:
    - a. Adult and geriatric patients with acute, chronic, and complex, life-threatening, medical and surgical conditions;
    - b. Peri-natal patients and families;
    - c. Neonates, infants, and children;
    - d. Patients with mental, psychological, or psychiatric conditions; and
    - e. Patients with wellness needs.
  3. A practical nursing program shall provide clinical instruction that includes, at minimum, selected and guided experiences that develop a student's ability to apply core principles of practical nursing when caring for:
    - a. Patients with medical and surgical conditions throughout the life span,
    - b. Peri-natal patients, and
    - c. Neonates, infants, and children in varied settings.
- E A nursing program may provide precepted clinical instruction. Programs offering precepted clinical experiences shall:
1. Develop and adhere to policies that require preceptors to:
    - a. Be licensed nurses at or above the level of the program either by holding an Arizona license in good standing, holding multi-state privilege to practice in Arizona under A.R.S. Title 32, Chapter 15, or if practicing in a federal facility, meet requirements of A.R.S. § 32-1631(5);
    - b. For LPN preceptors, practice under the general supervision of an RN or physician according to A.R.S. § 32-1601(16).
  2. Develop and implement policies that require a faculty member of the program to:
    - a. Together with facility personnel, select preceptors that possess clinical expertise sufficient to accomplish the goals of the preceptorship;

- b. Supervise the clinical instruction according to the provisions of R4-19-204(C) and (D), and
  - c. Maintain accountability for student education and evaluation.
- F. A nursing program may utilize simulation in accordance with the clinical objectives of the course. Unless approved under R4-19-214, a nursing program shall not utilize simulation for an entire clinical experience with any patient population identified in subsection (D) of this Section.
- G. A nursing program shall maintain at least a 80% NCLEX® passing rate for graduates taking the NCLEX-PN® or NCLEX-RN® for the first time within 12 months of graduation. The Board shall issue a notice of deficiency to any program that has a NCLEX® passing rate less than 80% for two consecutive calendar years or less than 75% for one calendar year.
- H. At least 45% of students enrolled in the first nursing clinical course shall graduate within 100% of the prescribed period. “Prescribed period” means the time required to complete all courses and to graduate on time according to the nursing program’s curriculum plan excluding the time to complete program pre-requisite or pre-clinical courses.