1 21 NCAC 36 .0120 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows: 2 3 21 NCAC 36 .0120 **DEFINITIONS** 4 The following definitions apply throughout this chapter unless the context indicates otherwise: 5 (1)"Administrative Law Counsel" means an attorney licensed to practice in this State whom the Board 6 has retained to serve as procedural officer for contested cases. 7 (2)"Academic term" means one semester of a school year. 8 (3)"Accountability/Responsibility" means being answerable for action or inaction of self, and of others 9 in the context of delegation or assignment. 10 (4)"Accredited institution" means an institution accredited by a United States Department of 11 Education-approved institutional accrediting body. 12 (5)"Active Practice" means activities that are performed, either for compensation or without 13 compensation, consistent with the scope of practice for each level of licensure as defined in G.S. 90-171.20(4), (7), and (8). 14 15 (6)"Advanced Practice Registered Nurse (APRN)" means a nurse practitioner, nurse anesthetist, nurse-16 midwife, or clinical nurse specialist. 17 (7)"Assigning" means designating responsibility for implementation of a specific activity or set of 18 activities to an individual licensed and competent to perform such activities. 19 (8) "Bulletin" means the official publication of the Board. "Chief Nursing Administrator" means a senior level executive within the healthcare organization 20 (9) 21 responsible for overseeing the practice of nursing to ensure consistency in practice standards and to 22 facilitate an interdisciplinary team approach to the delivery of care. 23 (10)"Clinical Agency" means an agency established to administer or provide health care services in which a student provides care to clients under the supervision of faculty or a preceptor. 24 25 (9)(11) "Clinical experience" means application of nursing knowledge demonstrating clinical judgment in 26 a current or evolving practice setting in which a student provides care to clients under the supervision 27 of faculty or a preceptor. 28 (10)(12) "Clinical judgment" means the application of nursing knowledge, skills, abilities, and experience in 29 making decisions about client care. the observed outcome of critical thinking and decision-making. 30 It is an iterative process that uses nursing knowledge to observe and assess presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions in order 31 32 to deliver safe client care. 33 (11)(13) "Competent" means having the knowledge, skills, and ability to safely perform an activity or role. 34 (12)(14) "Continuing Competence" means on-going acquisition and application of knowledge and the 35 decision-making, psychomotor, and interpersonal skills expected of the licensed nurse resulting in 36 nursing care that contributes to the health and welfare of clients served. 37 (13)(15) "Contact Hour" means 60 minutes of an organized learning experience.

1	(14)(16) "Continuing Education Activity" means a planned, organized learning experience that is related to
2	the practice of nursing or contributes to the competency of a nurse as outlined in 21 NCAC 36
3	.0223(a)(2).
4	(15)(17) "Controlling institution" means the degree-granting organization or hospital under which a nursing
5	education program is operating. operating or seeking to establish a new nursing education program.
6	The controlling institution shall hold approval or applicable licensure by the appropriate North
7	Carolina agency, the University of North Carolina System, or North Carolina Community College
8	System and be accredited by an accrediting body recognized by the United States Secretary of
9	Education.
10	(16)(18) "Curriculum" means an organized system of teaching and learning activities directed toward the
11	achievement of specified learning objectives and outcomes.
12	(17)(19) "Delegation" means transferring to a competent individual the authority to perform a specific
13	nursing activity in a selected situation. The nurse retains accountability/responsibility for the
14	delegation.
15	(18)(20) "Debriefing" means an organized learning activity that follows a clinical or simulated experience
16	and is led by a trained faculty facilitator. Students' reflective thinking is encouraged and feedback
17	is provided regarding the students' performance during discussion of various aspects of the
18	completed experiences.
19	(19)(21) "DHSR" means Division of Health Service Regulation.
• •	
20	(20)(22) "Dimensions of Practice" means aspects of nursing practice, including professional responsibility,
20 21	(20)(22) "Dimensions of Practice" means aspects of nursing practice, including professional responsibility, knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with
21	knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with
21 22	knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8).
21 22 23	knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of
21 22 23 24	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location.
21 22 23 24 25	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test
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21 22 23 24 25 26 27	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEX[™] examination.
 21 22 23 24 25 26 27 28 	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEX™ examination. (23)(25) "Faculty directed clinical practice" means clinical experiences provided under the
 21 22 23 24 25 26 27 28 29 	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEX™ examination. (23)(25) "Faculty directed clinical practice" means clinical experiences provided under the accountability/responsibility and direction of nursing program faculty.
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 21 22 23 24 25 26 27 28 29 30 31 	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEXTM examination. (23)(25) "Faculty directed clinical practice" means clinical experiences provided under the accountability/responsibility and direction of nursing program faculty. (24)(26) "Focused client care experience" means a clinical experience that emulates an entry-level work experience in nursing, assisting the student in transitioning to an entry-level nursing practice.
 21 22 23 24 25 26 27 28 29 30 31 32 	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEXTM examination. (23)(25) "Faculty directed clinical practice" means clinical experiences provided under the accountability/responsibility and direction of nursing program faculty. (24)(26) "Focused client care experience" means a clinical experience that emulates an entry-level work experience in nursing, assisting the student in transitioning to an entry-level nursing practice. Supervision may be by faculty and preceptor dyad or direct faculty supervision.
 21 22 23 24 25 26 27 28 29 30 31 32 33 	 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with G.S. 90-171.20(4), (7), and (8). (21)(23) "Distance education" means teaching and learning strategies used to meet the learning needs of students when the students and faculty are not in the same location. (22)(24) "External standardized examination" means a commercially available standardized predictive test that provides individual student scores that are linked to a probability of passing the NCLEXTM examination. (23)(25) "Faculty directed clinical practice" means clinical experiences provided under the accountability/responsibility and direction of nursing program faculty. (24)(26) "Focused client care experience" means a clinical experience that emulates an entry-level work experience in nursing, assisting the student in transitioning to an entry-level nursing practice. Supervision may be by faculty and preceptor dyad or direct faculty supervision. (25)(27)"Full Approval" is the status assigned to a program following graduation by the first cohort of

1	(25)[(26)](28)"Initial Approval" means the status assigned to a newly established nursing education program
2	following submission of a new, complete application and documented evidence of compliance with
3	Section .0300 of this Chapter.
4	(26)[(27)](29)"Interdisciplinary faculty" means faculty from professions other than nursing.
5	(27)[(28)][30]"Interdisciplinary team" means all individuals involved in providing a client's care who
6	cooperate, collaborate, communicate, and integrate care to ensure that care is continuous and
7	reliable.
8	(28)[(29)](31) "Learning resources" means materials that faculty use to assist students in meeting the
9	expectations for learning defined by the curriculum.
10	(29)[(30)](32) "Level of Licensure" means practice of nursing by either a licensed practical nurse or a
11	registered nurse, as defined in G.S. 90-171.20(7) and (8).
12	(30)[(31)][33]"Level of student" means the point in the program to which the student has progressed.
13	(31)[(32)][34]"Maximum enrollment" means the total number of pre-licensure students that can be enrolled
14	in the <mark>nursing</mark> program at any one time. The number reflects the capacity of the <mark>nursing</mark> program
15	based on demonstrated resources sufficient to implement the curriculum.
16	(32)[(33)][35]"Methods of Instruction" means the planned process through which teacher and student interact
17	with selected environment and content so that the response of the student gives evidence that
18	learning has taken place, based upon stated course objectives and outcomes for learning experiences
19	in classroom, laboratory, simulation, and clinical settings.
20	(33)[(34)](36)" National Credentialing Body" means a credentialing body that offers certification or re-
21	certification in the licensed nurse's or Advanced Practice Registered Nurse's specialty area of
22	practice.
23	(34)[(35)](37)"NCLEX-PN TM " means the National Council Licensure Examinations for Practical Nurses.
24	(35)[(36)][38]"NCLEX-RN™" means the National Council Licensure Examinations for Registered Nurses.
25	(36)[(37)][39]"Nursing Accreditation body" means a national nursing accrediting body that is recognized by
26	the United States Department of Education.
27	(37)[(38)](40)"Nursing program "Program faculty" means individuals employed full or part-time by an
28	academic institution responsible for developing, implementing, evaluating, and updating nursing
29	curricula.
30	(38)[(39)](41)"Nursing project" means a project or research study of a topic related to nursing practice that
31	includes a problem statement, objectives, methodology, and summary of findings.
32	(39)[(40)][42]"Participating in" means to have a part in or contribute to the elements of the nursing process.
33	As defined by the legal scope of practice, the licensed practical nurse role for participating in the
34	nursing process is dependent upon the assignment and supervision by the registered nurse,
35	physician, dentist, or other person authorized by State law to provide the supervision.
36	(40)[(41)](43)"Pattern of noncompliance" means episodes of recurring non-compliance with one or more
37	Rules in Section .0300.

1	(41)[(42)](44)" Preceptor" means a registered nurse at or above the level of licensure that an assigned student
2	is seeking who may serve as a teacher, mentor, role model, and supervisor for the student in a
3	faculty-directed clinical experience.
4	(42)[(43)](45)" "Prescribing Authority" means the legal permission granted by the Board of Nursing and
5	Medical Board for the nurse practitioner and nurse midwife to procure and prescribe legend and
6	controlled pharmacological agents and devices to a client in compliance with Board rules and other
7	applicable federal and State law, regulations, and rules.
8	(43)[(44)](46)"Program Closure" means to cease operation of a nursing program.
9	(47) "Program Description Report" means a written assessment of a program designed to detail program
10	features and operations which support Board evaluation of compliance with established regulations
11	as set forth in Section .0300 of this Chapter.
12	(44)[(45)](48)"Program" means a course of study that prepares an individual to function as an entry-level
13	practitioner of nursing. The three four types of programs are:
14	(a) Bachelor of Science Degree in Nursing (BSN) - Curriculum components for <u>the</u> BSN
15	provide for the attainment of knowledge and skill sets in the current practice in nursing,
16	nursing theory, nursing research, community and public health, health care policy, health
17	care delivery and finance, communications, therapeutic interventions, and current trends in
18	health care. For this program type, the client is the individual, family, group, and
19	community. <u>community:</u>
20	(b) Associate Degree in Nursing (ADN)/Diploma in Registered Nursing - Curriculum
21	components for the ADN/Diploma in Registered Nursing provide for the attainment of
22	knowledge and skill sets in the current practice in nursing, community concepts, health
23	care delivery, communications, therapeutic interventions, and current trends in health care.
24	For this program type, client is the individual, group of individuals, and family. family:
25	(c) Practical Nurse Diploma (PN) - Curriculum components for the practical nurse PN diploma
26	prepare for providing direct nursing care under the supervision of a registered nurse or
27	other health care provider as defined by the Nursing Practice Act. Curriculum components
28	provide for the attainment of knowledge and skill sets in the current practice of practical
29	nursing, communications, therapeutic interventions, including pharmacology, growth and
30	development, and current trends in health care. For this program type client is the
31	individual or group of individuals. individuals; and
32	(d) Direct Master's Entry (DME) - Curriculum components for a DME provide for the
33	attainment of knowledge and skill sets in the current practice in nursing, nursing theory,
34	nursing research, community and public health, health care policy, health care delivery and
35	finance, communications, therapeutic interventions, and current trends in health care. For
36	this program type, the client is the individual, family, group, and community. The DME
37	will provide additional education for strengthened competencies in organizational and

1		systems thinking, quality improvement and safety, care coordination, interprofessional
2		communication, and team-based care and leadership for students with a non-nursing
3		baccalaureate degree.
4	<mark>(45)[(4</mark>	6)[(49]"Review" means collecting and analyzing information to assess compliance with Section .0300
5		of this Chapter. Information may be collected by multiple methods, including review of written
6		reports and materials, on-site observations, review of documents, and in-person or telephone
7		interviews and conferences.
8	<mark>(46)[(4</mark>	7)[50]"Self-Assessment" means the process whereby an individual reviews their own nursing
9		practice and identifies the knowledge and skills possessed as well as those skills to be strengthened
10		or acquired.
11	<mark>(47)</mark> [(4	8)[51]"Simulation" means a technique, not a technology, to replace or amplify clinical experiences
12		with guided experiences that evoke or replicate substantial aspects of the real world of nursing
13		practice in a fully interactive manner.
14	<mark>(48)</mark> [(4	9)[52]"Specialty" means a broad, population-based focus of study encompassing the common health-
15		related problems of a particular group of patients and the likely co-morbidities, interventions, and
16		responses to those problems.
17	<mark>(49)[(5</mark>	0)](53) "Supervision" means the provision of guidance or direction, evaluation, and follow-up by a
18		licensed nurse to accomplish an assigned or delegated nursing activity or set of activities.
19	<mark>(50)[(5</mark>	1)[54]"Survey" means an on-site visit for the purpose of gathering data in relation to reviewing a
20		nursing program's compliance with Section .0300 of this Chapter.
21	[(52)](:	55) "Traditional clinical experience" means a clinical experience where the student provides in-person
22		care to patients/clients under the guidance of an instructor or preceptor.
23	[(53)](:	56)"Warning Status" means the status assigned to a nursing education program found to be
24		noncompliant with any provision in Section .0300 of this Chapter.
25		
26	History Note:	Authority G.S. 90-171.23; 90-171.38;
27		Eff. April 1, 2003;
28		Amended Eff. June 1, 2017; December 1, 2016; July 1, 2012; November 1, 2008; May 1, 2006;
29		December 1, 2005; August 1, 2005;
30		Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 9,
31		2018;
32		Amended Eff. <mark>[January 1, 2024;] <u>March 1, 2024;</u> January 1, 2019.</mark>

1 21 NCAC 36 .0220 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:

2 3 **21 NCAC 36 .0220 REFRESHER COURSE**

4	(a) A refresher	r course shall be designed for those individuals, previously licensed, who are not eligible for re-entry
5	into nursing pro	actice because their license has expired for five or more years.
6	(b)(<u>a)</u> Satisfac	tory completion <u>Completion</u> of a Board-approved refresher course shall be required of the individual
7	previously licer	nsed individuals who has have not held an active license in any jurisdiction for five or more years and
8	requests:	
9	(1)	reactivation of an inactive license;
10	(2)	reinstatement of an expired license; or
11	(3)	endorsement to North Carolina.
12	(c)(b) If satisfa	letory completion of a Board-approved refresher course is required by the Board <mark>based upon <u>following</u></mark>
13	disciplinary ac	tion as authorized in <u>pursuant to</u> G.S. 90-171.37 or based upon a license being inactive due to
14	disciplinary act	ion, <u>90-171.37,</u> the individual <mark>may <u>shall</u> be subject to Board stipulated restrictions <u>issued by the Board</u></mark>
15	in <u>during</u> the c	linical component of the refresher course, based upon the terms of the disciplinary actions and the
16	contents of the	elinical components. course. The individual shall meet All all eligibility requirements for reinstatement
17	of the license <mark>s</mark>	hall have been met prior to <u>enrollment in the</u> refresher course enrollment. <u>course.</u>
18	(d)(c) Applicat	tion for approval of a refresher course shall be completed and submitted by the provider at least 90 days
19	prior to the exp	bected date of enrollment and shall include evidence of complying comply with the rules as defined in
20	this Chapter for	r refresher courses. Chapter. The application for Refresher Course is posted on the Board's website at
21	www.ncbon.co	m. No student shall be enrolled prior to Board approval. Board approval shall be granted to a provider
22	for a period of t	time not to exceed five years. All changes in faculty, curriculum, or clinical facilities shall be approved
23	by the Board pr	rior to implementation, as set out in the Rules of this Chapter.
24	(e)(d) The app	lication for approval of a refresher course shall include:
25	(1)	course objectives, content outline, and time allocation;
26	(2)	didactic and clinical learning experiences, including teaching methodologies for measuring the
27		registrant's abilities to practice nursing;
28	(3)	a plan for evaluation of student competencies and ability to competently practice nursing;
29	(4)	a faculty list that includes the director and all instructors, and identifies their qualifications and their
30		functions in teaching roles; and
31	(5)	the projected clinical schedule.
32	(f)(e) The Bo	ard shall make site visits if it is unable to determine that all requirements have been met through
33	application doc	cument review. A decision on an application to offer a refresher course shall be given within 30 days
34	following recei	pt of a complete application.
35	(g)(f) A provid	ler <mark>of a refresher course shall be approved by the Board as set out in these Rules. A provider</mark> <u>seeking</u>
36	to offer a refre	sher course may shall be a post-secondary educational institution, a health care institution, or other
37	agency. agency	providing education in healthcare-related fields.

1	(h)(g) <mark>Admini</mark>	strative responsibility for developing The director of the refresher course is responsible for
2	administering ar	nd implementing a refresher the course shall be vested in a registered nurse director. and maintaining
3	compliance with	this Rule. The director shall:
4	[(i) The register	ed nurse director shall have authority and responsibility for maintaining compliance with this Rule.]
5	(i)[(j)] Instructo	rs in the course shall be directly accountable to the nurse director. <mark>The director shall have had at least</mark>
6	one year prior t e	eaching experience preparing individuals for registered nurse or licensed practical nurse licensure at
7	the post second	ary level or in a nursing staff development position. [Instructors in the course shall be directly
8	accountable to the	ne director.] The director and each instructor shall:
9	(1)	hold an active unencumbered license to practice as a registered nurse in North Carolina;
10	(2)	hold a baccalaureate or higher degree in nursing; and nursing;
11	(3)	have had at least two years experience in direct patient nursing practice as a registered nurse. nurse:
12		and
13	<u>(4)</u>	have at least one year prior teaching experience preparing individuals for a registered nurse or
14		licensed practical nurse licensure at the post-secondary level or in a nursing staff development
15		position which provides workforce education to nurses.
16	(h) Instructors f	for the refresher course shall report to the director of the refresher course and meet the requirements
17	<u>as set out in (g)(</u>	
18	0/ <u>L(/)]</u>	mity of the instructor to students is the major factor in determining faculty student ratio for clinical
19	U	nces. The ratio of instructors to students for clinical experiences shall not exceed 1:10.
20		cal preceptors for the course shall have competencies, assessed by the registered nurse director of the
21		or a designated instructor, related to the area of assigned clinical precepting responsibilities. Clinical
22		hold an active unencumbered license to practice as a registered nurse in North Carolina. Prior to
23		ical preceptor, the director or designated instructor shall ensure the competencies of the prospective
24		with the assigned clinical precepting responsibilities.
25	(])[(m)](<u>k)</u> The	refresher course shall include both theory and clinical instruction. Course objectives shall be stated
26	that:	
27	(1)	show relationships between nursing theory and practice; and
28	(2)	identify behaviors consistent with the ability to competently practice nursing.
29		curriculum for a registered nurse refresher course shall include at least 240 hours of instruction, at
30		ch shall consist of clinical learning experiences, and shall incorporate:
31	(1)	the scope of practice for the registered nurse, as defined in G.S. 90-171.20 and 21 NCAC 36 .0221,
32		.0224, .0225 and .0401; and
33	(2)	instruction in and opportunities to demonstrate knowledge, skills, and abilities to competently
34		practice nursing according to components of practice for the registered nurse as defined in 21 NCAC
35		36 .0224.
36		e curriculum for a licensed practical nurse refresher course shall include at least 180 hours of
37	instruction, at le	ast 90 of which shall consist of clinical learning experiences, and shall incorporate:

1	(1)	the scope of practice for the licensed practical nurse, as defined in G.S. 90-171.20(8) and 21 NCAC
2		36 .0221, .0225 and .0401; and
3	(2)	instruction in and opportunities to demonstrate knowledge, skills, and abilities to competently
4		practice nursing according to components of nursing practice for the licensed practical nurse as
5		defined in 21 NCAC 36 .0225.
6	(0)<mark>[(p)](n)</mark> The	e refresher course director or the designated refresher course instructor shall assess each refresher
7	student and ens	ure the appropriateness of all clinical learning settings and assignments.
8	(p)<mark>[(q)</mark>](0) Reg	gistered nurse and licensed practical nurse refresher courses shall limit simulation experiences to no
9	more than 50 pe	ercent of clinical learning experiences, pursuant to 21 NCAC 26 .0321(m). <u>.0321(p).</u>
10	(q)<mark>[(r)</mark>](p) Eva	aluation processes shall be implemented that effectively measure the refresher student's ability to
11	competently pra	actice nursing consistent with the level of licensure and scope as set forth in 21 NCAC 36 .0221, .0224,
12	.0225, and .040	1.
13	[(s)](q)	letion of] The student shall complete both the theory and clinical components of the refresher course
14	[shall occur] <u>wi</u>	thin 24 months of initial enrollment in the course.
15	[(t)](r) [Clinica	il resource <u>The provider</u> shall indicate, in written contract, <u>in writing, with the agency the</u> support and
16	availability to p	rovide the necessary required clinical experiences. experiences for the refresher course.
17	[(u)](s) Individ	uals previously licensed in North Carolina and presently residing outside of North Carolina may meet
18	the requirement	s of this Rule by successfully completing a refresher course approved by another state board of nursing.
19	[(v)](t) Individ	uals enrolled in refresher courses shall identify themselves as RN Refresher Student (R.N.R.S.) or LPN
20	Refresher Stude	ent (L.P.N.R.S.), consistent with the course level, after signatures on records or on name pins.
21	[(w)](u) In a fo	rmat specified by the Board, the <u>The director of the refresher</u> course provider shall provide the Board
22	with <u>a list of</u> th	ne names and license numbers of those individuals who have satisfactorily completed the refresher
23	course at the ap	propriate level of licensure on the Board supplied form. <u>licensure.</u>
24	<mark>(v)[(x)]_ Upon 1</mark>	equest, the Board shall provide:
25	(1)	<u>a list of approved providers;</u>
26	(2)	the format for applications for program approval; and
27	(3)	the format for verification of successful completion to all approved programs.
28		
29	History Note:	Authority G.S. 90-171.23(b)(3); 90-171.35; 90-171.36; 90-171.37; 90-171.38; 90-171.83;
30		Eff. May 1, 1982;
31		Amended Eff. January 1, 2007; July 1, 2000; June 1, 1993; April 1, 1989;
32		Readopted Eff. January 1, 2019. 2019:
33		<u>Amended Eff.</u> [January 1, 2024] <u>March 1, 2024.</u>

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21 NCAC 36 .0233 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:

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3 21 NCAC 36.0233 OUT OF STATE STUDENTS

4	(a) Unlicensed	nursing students enrolled in out of State <u>out-of-state</u> nursing education programs who request use of
5	seeking clinical	<mark>experiences in</mark> North Carolina <mark>elinical facilities <u>agencies</u> shall be allowed such experiences access to</mark>
6	these facilities for	ollowing approval by the Board. Upon receiving such a request, the chief nursing administrator of a
7	North Carolina (elinical facility shall provide the Board with the following [Requests to use North Carolina elinical
8	facilities for out	of state nursing education programs shall be submitted by the chief nursing administrator or RN
9	designee of a No	orth Carolina clinical facility in the format provided by the Board] at <u>At</u> least 30 days prior to the start
10	of the <mark>requested</mark>	experience: clinical experience. experience, the chief nursing administrator or RN designee of a North
11	Carolina agency	shall submit the request for unlicensed nursing students enrolled in out-of-state nursing education
12	programs to acce	ess the facility. The [submitted] request shall include the following:
13	(1)	a letter of request for approval to provide the clinical offering, including proposed starting and
14		completion dates;
15	(2)	documentation that the nursing program is currently approved by the Board of Nursing in the state
16		in which the parent institution is located;
17	(3)	the name, qualifications, curriculum vitae, and evidence of an active, unencumbered registered nurse
18		licensure of the faculty responsible for coordinating the student's experience; and
19	(4)	the name, qualifications, resume, and evidence of active unencumbered license to practice as a
20		registered nurse in North Carolina for the preceptor or on-site faculty. faculty: and
21	<u>(5)</u>	evidence of licensure from the UNC Board of Governors consistent with G.S. 116-15.
22	(b) Copies of th	<mark>e following shall be distributed by the <u>The</u> chief nursing administrator of the clinical facility agency</mark>
23	shall distribute c	opies of the following documents to all students and faculty involved in the clinical experiences:
24	(1)	North Carolina Nursing Practice Act;
25	(2)	North Carolina administrative rules and related interpretations provided by the Board regarding the
26		role of the registered nurse, licensed practical nurse, and unlicensed nursing personnel; and
27	(3)	North Carolina Board of Nursing developed Suggestions for Utilization of Preceptors.
28	(c) Failure to co	ontinue remain in compliance with the requirements of Paragraph (a) of this Rule shall result in the
29	immediate with	lrawal of the Board's approval of the clinical offering and student status, for use of the facility by
30	unlicensed nursi	ng students enrolled in out-of-state nursing education programs, consistent with G.S. 90-171.43(2).
31		
32	History Note:	Authority <mark>G.S. 90-85.3; G.S.</mark> 90-171.23(b) 90-171.43; 90-171.83;
33		Eff. April 1, 2008;
34		Amended Eff. July 1, 2023.
35		Readopted Eff. January 1, 2019. 2019:
36		<u>Amended Eff. <mark>[January 1, 2024.</mark>] <u>March 1, 2024.</u></u>

1	21 NCAC 36 .03	02 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:
2		
3	21 NCAC 36 .03	602 ESTABLISHMENT OF A NURSING PROGRAM - INITIAL APPROVAL
4	(a) An <u>A control</u>	ling institution seeking initial approval to operate a nursing program shall employ a program director
5	qualified pursua	nt to Rule .0317(c) .0317(b) of this Section. A controlling institution can seek initial approval to
6	<u>establish one <mark>[nu</mark></u>	rsing] program and one program entry option at a time.
7	(b) The program	director shall <u>develop and</u> submit an application for initial approval at least six [42] months prior to
8	the proposed pro	gram start date that documents date. The application shall contain the following:
9	(1)	a narrative description of the organizational structure of the program and its relationship to the
10		controlling institution, including accreditation status. The controlling institution shall be an
11		accredited institution;
12	(2)	a general overview of the entire proposed curriculum that includes:
13		(A) the program philosophy, purposes, and objectives;
14		(B) a master plan of the curriculum, indicating the sequence for both nursing and non-nursing
15		courses, as well as prerequisites and corequisites;
16		(C) course descriptions and course objectives for all courses; and
17		(D) course syllabi pursuant to 21 NCAC 36 <u>.0321(i)</u> <u>.0321(j)</u> for all first-year nursing courses;
18	(3)	the proposed student population;
19	<u>(4)(3)</u>	the projected student enrollment;
20	(5)<u>(4)</u>	evidence of learning resources and clinical experiences available to implement and maintain the
21		program;
22	(6)<u>(5)</u>	financial resources adequate to begin and maintain the program;
23	(7)<u>(6)</u>	physical facilities adequate to house the program;
24	(8)<u>(7)</u>	support services available to the program from the controlling institution;
25	(9)<u>(8)</u>	approval of the program by the governing body of the controlling institution; and institution;
26	<u>(9)</u>	approval from the applicable licensing regulatory body in North Carolina for the controlling
27		institution:
28	<u>(10)</u>	student policies for admission, progression and graduation of [students, pursuant to 21 NCAC 36
29		.0320;] students:
30	<u>(11)</u>	an emergency preparedness plan for addressing situations which shall include a reduction in the
31		availability of clinical [sites,] agencies, a transition from in-person to virtual learning platforms, and
32		a need for increased use of simulation;
33	<u>(12)</u>	a comprehensive program evaluation plan, pursuant to 21 NCAC 36 .0317(f); and,
34	(10) (13)) a plan with a specified time frame for:
35		(A) availability of qualified faculty as specified in 21 NCAC 36 .0318; .0318; and
36		(B) course syllabi as specified in 21 NCAC 36 <u>.0321(h)</u> <u>.0321(i)</u> and (j) of this Section for all
37		nursing courses; courses.

1		(C) student policies for admission, progression, and graduation of students, pursuant to 21
2		NCAC 36 .0320; and
3		(D) comprehensive program evaluation, pursuant to 21 NCAC 36 .0317(d).
4	(c) The application	tion to establish a <mark>nursing</mark> program shall contain current and accurate information required in Paragraph
5	(a) (b) of this	Rule, be complete, and be signed by the program director and the chief executive officer of the
6	controlling inst	itution.
7	(d) The comple	eted application required in paragraph (b) of this Rule shall be received by the Board not less than 120
8	days prior to a 1	regular meeting of the Board to be considered for placement on the agenda of that meeting.
9	(e) If another p	rogram exists in the institution, the application shall include:
10	(1)	the organizational relationship of the existing program and the proposed program in the institution;
11	(2)	the NCLEX pass rate of the existing program for the past three years; and
12	(3)	a description of the expected impact of the proposed program on the existing program, including:
13		(A) the availability of a program director for each program;
14		(B) the availability of qualified faculty;
15		(C) the physical facilities adequate to house both programs;
16		(D) the availability of learning resources;
17		(E) the availability of clinical experiences; and
18		(F) the adequacy availability of student services.
19	(f) No new pro	gram application shall be considered if a nursing program currently exists in the institution if:
20	(1)	the NCLEX pass rate of the existing program has not met the standard for the past three years,
21		pursuant to 21 NCAC 36 .0320(e); and any currently approved program at the institution is on
22		warning status; or
23	(2)	resources are not demonstrated to be adequate available to maintain both the existing and the
24		proposed program in compliance with Rules .0300 to .0323 of this Section.
25		n initial approval may admit students.
26	(h)(g) The Boa	rd shall conduct an on site survey of the proposed program <u>shall be subject to an on-site survey</u> after
27		meets all the requirements set forth in this Rule, Rule. Following the on-site survey, the Board shall
28	prepare a surve	ey report, report outlining the program's compliance with established regulations and afford the
29	petitioning insti	tution <u>proposed program</u> an opportunity to respond to <mark>the survey this</mark> report.
30		hall consider all evidence, including the application, the survey report, comments from representatives
31	of the petition	ing institution, public comments, and the status of other nursing programs at the institution in
32	determining wh	ether to approve the application.
33	•	slication is approved, When the Board shall grant grants initial approval approval, it and shall establish
34		rollment and implementation date. date for the [program.] program based on the resources outlined
35		n (b) of this Rule.
36	(k)(i) The inst	itution seeking initial approval shall not solicit students until the program has been granted initial

37 <u>approval status by the Board.</u>

1	<u>(j) Programs</u>	on] which have not received initial approval [or full approval status] pursuant to Rule .0303 of this
2	Chapter, [may]	shall not admit students.
3	(k) The Board	l shall rescind the initial approval <u>status</u> of a program if the controlling institution fails to submit
4	documentation	as set forth in the plan required by Subparagraph (b)(10) (b)(13) of this Rule.
5	(1)(k) The <mark>Boar</mark>	d <u>program</u> shall rescind the initial approval [status] of a program if <u>enroll</u> the first class of students <mark>is</mark>
6	not enrolled in	the program within one year after <mark>issuing</mark> the <mark>Board issues</mark> initial approval. approval status.
7	(<u>m)(1)</u> For <u>a mi</u>	<mark>nimum of</mark> 12 months <mark>following rescission of approval, after initial approval is rescinded,</mark> the controlling
8	institution shall	l not submit an application <mark>for establishing <u>to establish</u> a <mark>nursing</mark> program.</mark>
9	(<mark>n)(m)</mark> A progr	ram shall retain initial approval status for the time necessary for full implementation of the curriculum,
10	curriculum and	graduation of the first cohort of students, provided that the program complies with Section .0300 of
11	this Chapter.	
12	(n) Programs w	vith initial approval <u>status</u> shall be surveyed: surveyed by the Board:
13	(1)	during the final term of curriculum implementation of the program; and
14	(2)	upon receipt by the Board of information that the program may not be complying with Section .0300.
15	<mark>(r)[(p)](0)</mark> If, f	ollowing the survey and during final curriculum implementation, the Board finds that the program is
16	complying with	h Section .0300 of this Chapter, the <u>The</u> <mark>Board program</mark> shall <u>be granted place the program on full</u>
17	approval status	- status provided:
18	(1)	the Board finds that the program has complied with Section .0300 of this Chapter while on initial
19		<u>approval status:</u>
20	<u>(2)</u>	an on-site survey is completed during the final term of curriculum implementation; and
21	(3)	the program demonstrates an NCLEX® examination pass rate that meets or exceeds 90 percent of
22		the national pass rate for licensure level on first writing of the licensure examination for calendar
23		years ending December 31.
24	<mark>(p)[(q)](p)</mark> If at	any time a program on initial approval status is not complying with Section .0300 of this Chapter, the
25	program, upon	written notification, shall:
26	(1)	correct the area of noncompliance and submit written evidence documentation of this correction to
27		the Board; or
28	(2)	submit and implement a plan for correction to the Board.
29	(q) The Board	shall rescind the initial approval [status] of a program if the program does not comply with Paragraph
30	(0) of this Rule	
31	(r) If, following	g the survey and during final curriculum implementation, the Board finds that the program is complying
32	with Section .0.	300 of this Chapter, the Board shall place the program on full approval status.
33	(s)(q) If, follow	ving the survey and during final curriculum implementation, the <u>If a</u> program does not comply with the
34	fails to correct t	the areas of noncompliance identified by the Board, in writing, pursuant to (p) of this Rule and is found
35	to be in noncor	npliance with the requirements of Section .0300 of this Chapter, the Board shall reseind provide the
36	program's <u>prog</u> i	ram with written notice of the decision to rescind initial approval [status] and provide the program with
37	written notice c	of the Board's decision. status.

1	<mark>(t)[(s)](r)</mark> Upon	written request from the program submitted within 10 business days of the Board's written notice of	
2	rescinding the in	nitial approval, <u>approval status,</u> the Board shall schedule a hearing at the next available meeting of the	
3	Board for which	h appropriate notice can be provided, or at a meeting of the Board that is scheduled by consent of the	
4	parties.		
5	(u)[(t)](s) Follo	wing the hearing and consideration of all evidence provided, the Board shall assign the program full	
6	approval status or shall enter an Order rescinding the initial approval status, which shall constitute program closure		
7	pursuant to 21 h	NCAC 36 .0309.	
8			
9	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;	
10		Eff. February 1, 1976;	
11		Amended Eff. June 1, 1992; January 1, 1989; November 1, 1984; May 1, 1982;	
12		Temporary Amendment Eff. October 11, 2001;	
13		Amended Eff. December 1, 2016; January 1, 2009; December 1, 2005; August 1, 2002;	
14		Readopted Eff. January 1, 2019. 2019;	
15		<u>Amended Eff. [January 1, 2024] March 1, 2024.</u>	

1

21 NCAC 36 .0303 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:

PROGRAM

2		
3	21 NCAC 36 .0303	EXISTING NURSING

4	(a) All [prelice	ensure] nursing [education] programs that are governed by the rules in this Chapter [Chapter.]
5	Accreditation by	<u>a</u> may obtain national <u>nursing</u> program accreditation by a nursing accreditation body as defined in
6	21 NCAC 36 .01	20(30). [-0120(37)] .0120(39) is [required.] required for all programs. For those programs granted
7	<u>initial approval</u>	status, full approval status, or warning status prior to December 31, [2023, evidence of] 2024,
8	accreditation by	a national nursing accreditation body (not to include pre-accreditation status) is required effective
9	<u>January 1,</u> [2030	.] 2032. The program shall submit official written documentation verifying accreditation from a
10	national nursing	accreditation body.
11	(b) <mark>Board acti</mark>	on is based upon each program's performance and demonstrated compliance with the Board's
12	requirements and	l responses to the Board's recommendations. The Board may, depending on the severity and pattern
13	of violations of	this Chapter, require The program shall be issued a letter of noncompliance, subject to a corrective
14	action <mark>for plan a</mark>	addressing identified deficiencies, impose a monitoring plan, plan subject to conditions, conduct a
15	additional progr	am <mark>survey, <u>surveys</u>, a</mark> change in program approval status, [withdraw] withdrawal of [approval,]
16	<u>approval status,</u>	issue discipline, or close closure of a the program. program upon a finding of noncompliance with
17	Section .0300 of	this Chapter.
18	(c) Full Approva	al
19	(1)	The Board shall review approved Approved programs shall be reviewed by the Board at least once
20		every eight 10 years as specified in G.S. 90-171.40. Reviews of individual programs shall be
21		conducted at shorter intervals upon request from the individual institution or <mark>as considered necessary</mark>
22		by the Board. if an issue is identified suggesting noncompliance with this Section.
23	<u>(2)</u>	National accreditation [by a] The program shall submit a copy of the self-study report prepared for
24		accreditation and submitted to the national nursing [accrediting body,] accreditation body. set forth
25		by the US Department of Education is required, and evidence of compliance with the accreditation
26		standards shall be used for evaluating continuing approval.] self study [Self study] reports shall
27		provide a basis for review of accredited programs. The program shall also submit written
28		documentation from the national nursing accreditation body verifying compliance with accreditation
29		standards.
30	(2)<u>(3)</u>	The Board shall send a written report of the review no more than 20 30 business days following the
31		completion of the review process. Responses from a nursing education program regarding a review
32		report or warning status as referenced in Paragraph (d) of this Rule shall be received in the Board
33		office by the deadline date specified in the letter accompanying the report or notification of warning
34		status. If no materials or documents are received by the specified deadline date, the Board shall act
35		upon the findings in the review report and the testimony of the Board staff.
36	(3)<u>(4)</u>	If the Board finds a pattern of noncompliance with one or more rules in this Section, the Board may
37		take action as outlined in Paragraph (b) of this Rule.

1 (d) Warning Status

2	(1)	If the Board finds that a program is not complying with the rules in this Section, the Board shall
3		assign the program warning status and shall give written notice by certified mail to the program
4		specifying:
5		(A) the areas in which there is noncompliance;
6		(B) the date by which the program must comply with the rules in this Section. The maximum
7		time for compliance shall be two consecutive years after issuance of the written notice; and
8		(C) the opportunity to schedule a hearing. Any request for a hearing regarding the program
9		warning status shall be submitted to the Board. A hearing shall be afforded pursuant to the
10		provisions of G.S. 150B, Article 3A.
11	(2)	On or before the required date of compliance specified in Part (d)(1)(B) of this Rule if the Board
12		determines that the program is complying with the rules in this Section, the Board shall assign the
13		program full approval status.
14	(3)	If the Board finds the program is not in compliance with the rules in this Section by the date specified
15		in Part (d)(1)(B) of this Rule, the program shall remain on warning status, and a review by the Board
16		shall be conducted during that time and the Board shall either: time.
17		(A) continue the program on warning status; or
18	(B)<u>(</u>4)	If the Board finds the program is not in compliance with the rules in this Section for two consecutive
19		years following the date specified in Part (d)(1)(B) of this Rule, warning status approval will be
20		withdraw approval, withdrawn, constituting a program closure consistent with Subparagraph $\frac{(c)(3)}{(c)}$
21		(b) of this Rule.
22	<u>(4)(5)</u>	Upon written request from the program submitted within 10 business days of the Board's written
23		notice of warning status, or withdrawal of approval, the Board shall schedule a hearing at the next
24		available meeting of the Board for which appropriate notice can be provided, or at a meeting of the
25		Board that is scheduled by consent of the parties. provided.
26	(5)<u>(6)</u>	If a hearing is held at the request of the program and the Board determines that the program is not
27		in compliance with the rules in this Section, the program shall remain on warning status, a review
28		by the Board shall be conducted <mark>during that time</mark> while the program is on warning status. Following
29		the review, and the Board shall either: shall:
30		(A) continue the program on warning status; or
31		(B) withdraw approval, constituting program closure consistent with Subparagraph $(c)(3)$ (b)
32		of this Rule: <u>Rule; or</u>
33		(C) remove the program from warning [status.] status and issue full approval status.
34		
35	History Note:	Authority G.S. 90-171.23(b); 90-171.38; 90-171.39; 90-171.40;
36		Eff. February 1, 1976;

1	Amended Eff. December 1, 2016; August 1, 2011; July 3, 2008; March 1, 2006; January 1, 2004;
2	June 1, 1992; January 1, 1989;
3	Readopted Eff. January 1, 2019.
4	<u>Amended Eff. <mark>[January 1, 2024] March 1, 2024.</mark></u>

1 21 NCAC 36 .0309 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows: 2 3 21 NCAC 36 .0309 PROCESS FOR PROGRAM CLOSURE 4 (a) A program is deemed closed when the program has not enrolled students for a period of two consecutive years 5 since the last graduating class or student enrollment has not occurred for a two consecutive year period. 6 (a)(b) When the controlling institution makes the decision to close a nursing program, the Administration of the 7 institution shall submit a written plan for the discontinuation of the program to the Board and shall include include: 8 (1)the reasons for program elosure, closure; 9 (2)the date of intended elosure, closure; 10 (3) and a plan for students to complete this or another approved program. program; 11 (4) a plan detailing the arrangement for secure storage and access to academic records and transcripts 12 for all students and graduates; and 13 (5) the communication methods to all current and former students the intent to close. 14 (b)(c) When the Board closes a nursing program, the program director shall, within 30 days, develop and submit a 15 plan for discontinuation of the program for Board approval. The plan shall address transfer of students to approved 16 programs. When the controlling institution makes the decision to close a nursing program, the institution may not 17 apply to establish a nursing program until at least 12 calendar months from the date of official notification to the Board 18 in writing that the plan for closure has been fully implemented. 19 (c)(d) The controlling institution shall notify the Board of the arrangement for secure storage and access to academic 20 records and transcripts. When the Board closes a nursing program based on noncompliance with the rules and 21 requirements in this Section, the Board shall give written notice of closure by certified mail to the program specifying 22 the areas in which there is evidence of noncompliance and the opportunity for the program to request a hearing 23 contesting the involuntary program closure pursuant to the provisions of G.S. 150B, Article 3A. 24 (e) If the program does not contest the involuntary closure by the Board, the program director shall, within 30 days, 25 develop and submit a plan for discontinuation of the program for Board approval consistent with Paragraph (b) of this 26 Rule. The plan shall address transfer of students to approved programs. Involuntary program closure shall occur within 27 six months from the date of notification of closure by the Board. 28 (f) When the Board closes a program, the controlling institution may not apply to establish a nursing program until at 29 least 24 calendar months from the date of official notification of program closure by the Board. 30 31 *History Note:* Authority G.S. 90-171.38; 90-171.39; 90-171.40; 32 Eff. June 1, 1992; 33 Amended Eff. December 1, 2016; December 1, 2005; 34 Readopted Eff. January 1, 2019. 2019; Amended Eff. [January 1, 2024] March 1, 2024. 35

1 21 NCAC 36 .0317 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows: 2 3 **ADMINISTRATION** 21 NCAC 36 .0317 (a) The [program shall secure from the] controlling institution of a nursing program shall provide human, physical, 4 technical, and financial resources and services essential to support program processes and outcomes, including those 5 listed in Paragraph (f) and (g) of this Rule, and maintain compliance with Section .0300 of this Chapter. 6 7 (b)(a) The controlling institution program shall ensure that a full-time registered nurse, qualified pursuant to Paragraph 8 employed by the institution who is regularly assigned to work at least 40 hours each week in the position of program 9 director. 10 (e)(b) The controlling institution program shall ensure that the program director has the authority and responsibility 11 for maintaining compliance with the Rules in this Chapter and other legal requirements in all areas of the program. 12 (d)(c) The controlling institution program shall ensure that the program director has non-teaching time sufficient to 13 allow for program organization, administration, continuous review, planning, and development. 14 (e)(d) The program director in a program preparing students for initial nurse licensure shall satisfy the following 15 requirements: shall: 16 (1)hold an active unencumbered license or multistate licensure privilege to practice as a registered 17 nurse in North Carolina; 18 (2)have two years of full-time experience as a faculty member in a Board-approved nursing program; 19 (3)be experientially qualified, having have experience in clinical nursing experience, as a faculty 20 member in a nursing program, and academic or nursing leadership experience to lead the program 21 to accomplish the mission, goals, and expected program outcomes; 22 (4)hold either a baccalaureate in nursing or a graduate degree in nursing from an accredited institution. 23 institution; If newly employed on or after January 1, 2016, hold a graduate degree from an accredited institution. If newly employed on or after January 1, 2021, hold a graduate degree in nursing from 24 25 an accredited institution; 26 (5)prior to or within the first three years of employment, have education in teaching and learning 27 principles for adult education, including curriculum development, implementation, and evaluation, 28 appropriate to the program director role. Once completed, this education need not be repeated if 29 employing organization is changed. This Proof of this education may be demonstrated by is one of 30 the following: 31 (A) completion of 45 contact hours of Board-approved continuing education courses; courses pursuant to Rule .0223 of this Chapter. A list of Board-approved continuing education 32 33 courses is posted at www.ncbon.com; 34 (B) completion of a certificate program in nursing education; 35 (C) nine semester hours of graduate course work in adult learning and learning principles; 36 (D) national certification in nursing education; or

1	(E)	documentation of completion of structured, individualized development activities of at
2		least 45 contact hours approved by the Board. Criteria for approval shall include content in
3		the faculty role in curriculum implementation, curricular objectives to be met and
4		evaluated, review of strategies for identified student population, and expectations of
5		student and faculty performance. performance; or
6	<u>(F)</u>	A letter from the controlling institution attesting that the program director has been
7		approved by the controlling institution following the submission of a portfolio.
8		Individuals with prior teaching experience in an academic [nursing program] setting [may
9		be evaluated by administration to assess each individual's prior teaching experience
10		commensurate with] seeking the program director position shall submit to the controlling
11		institution for approval a portfolio detailing the individual's formal education in teaching
12		and learning principles for adult education, [including] which includes curriculum
13		development, implementation, and evaluation, appropriate to the program director role.
14		A copy of this submission shall be provided to the Board upon request.
15	(6) maint	ain competence <mark>pursuant to Rule .0232 of this Chapter</mark> in the areas of assigned responsibility;
16	and <u>re</u>	sponsibility.
17	(7) have l	knowledge of current nursing practice for the registered nurse and the licensed practical nurse.
18	(f)(e) A nursing educat	ion program shall implement, for quality improvement, a comprehensive program evaluation
19	in writing that shall incl	ude the following:
20	(1) studer	nts' achievement of program outcomes;
21	(2) <mark>evide</mark> r	nce <u>description</u> of program resources, including fiscal, physical, human, clinical, and technical
22	learni	ng resources; student support services; and the availability of clinical sites and the viability of
23	those	sites adequate to meet the objectives of the program;
24	(3) measu	ares of program outcomes for graduates;
25	(4) evider	nce that <u>the public's access to</u> accurate program <mark>information for the public is available;</mark>
26	inform	nation;
27	(5) <mark>evide</mark> r	nce that <u>how the program and</u> the controlling institution <mark>and its administration support program</mark>
28	achiev	ve concurrent outcomes;
29	(6) <mark>evide</mark> r	nce that <u>an attestation from the</u> program director and <u>that all</u> program faculty meet Board
30	qualif	ications and are sufficient in number to achieve program outcomes;
31	(7) <mark>evide</mark> r	nce that <u>reporting</u> of collected evaluative data is used in implementing quality improvement
32	activi	ties; and
33	(8) <mark>evide</mark> r	nce <u>description</u> of student participation in program planning, implementation, evaluation, and
34	contir	nuous improvement.
35	(g)(f) The controlling i	nstitution and the nursing education program shall communicate information describing the
36	nursing education progr	ram that is accurate, complete, consistent across mediums, and accessible by the public. The
37	following shall be acces	ssible to all applicants and students:

37 following shall be accessible to all applicants and students:

1	(1)	admission policies and practices;
2	(2)	policy on advanced placement and transfer of credits;
3	(3)	the number of credits required for completion of the program;
4	(4)	tuition, fees, and other program costs;
5	(5)	policies and procedures for withdrawal, including refund of tuition or fees;
6	(6)	the grievance procedure;
7	(7)	criteria for successful progression in the program, including graduation requirements; and
8	(8)	policies for clinical performance.
9		
10	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;
11		Eff. June 1, 1992;
12		Amended Eff. December 1, 2016; January 1, 2015; April 1, 2008; March 1, 2006;
13		Readopted Eff. January 1, 2019;
14		Amended Eff. <mark>[January 1, 2024;]March 1, 2024;</mark> September 1, 2021.

 21 NCAC 36 .0318 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:

3	21 NCAC 36 .0)318 FACULTY
4	(a) The [nursin	ng] program shall develop Policies policies for mursing program faculty members shall be consistent
5	with those for a	other faculty of the controlling institution, with variations as needed due to the nature of the nursing
6	curriculum.	
7	(b) Fifty percer	nt or more of the nursing faculty per program shall hold a graduate degree.
8	(c) Nurses lice	ensed pursuant to this Chapter who are full-time and part-time faculty and who teach in a program
9	leading to initia	as a nurse shall:
10	(1)	hold an active unencumbered license or multistate licensure privilege to practice as a registered
11		nurse in North Carolina;
12	(2)	hold either a baccalaureate in nursing or a graduate degree in nursing from an accredited institution;
13	(3)	have two calendar years or the equivalent of full-time clinical experience as a registered nurse. \underline{A}
14		Full time full-time registered nurse is a registered nurse employed by the institution program who
15		is regularly assigned to work at least 40 hours each week in the a position of faculty member;
16		position:
17	(4)	if newly employed in a full time faculty position on or after January 1, 2016, full-time faculty shall
18		hold a graduate degree from an accredited institution or obtain a graduate degree in nursing from an
19		accredited institution within five years of initial full-time employment;
20	(5)	prior to or within the first three years of employment, have education in teaching and learning
21		principles for adult education, including curriculum development, implementation, and evaluation,
22		appropriate to faculty assignment. Once completed, this education need not be repeated if the
23		employing organization is changed. This education may be demonstrated by one of the following:
24		(A) completion of 45 contact hours of Board-approved continuing education courses;
25		(B) completion of a certificate program in nursing education;
26		(C) nine semester hours of graduate course work in adult learning and learning principles;
27		(D) national certification in nursing education; or
28		(E) documentation of completion of structured, individualized development activities of at
29		least 45 contact hours approved by the Board. Criteria for approval shall include content in
30		the faculty role in the curriculum implementation, curricular objectives to be met and
31		evaluated, review of strategies for identified student population, and expectations of
32		student and faculty performance. <u>performance; or</u>
33		(F) individuals with prior teaching experience in an academic [nursing program] setting
34		seeking a faculty position [may] shall be evaluated by the Program Director to assess each
35		individual's prior teaching experience commensurate with formal education in teaching
36		and learning principles for adult education including curriculum development,
37		implementation, and evaluation, appropriate to faculty assignment.

1	(6)	maintain competence pursuant to Rule .0232 of this Chapter in the areas of assigned responsibility;
2		and <u>responsibility.</u>
3	(7)	have knowledge of current nursing practice for the registered nurse and the licensed practical nurse.
4	(d) Interdisciplin	nary faculty who teach in nursing program courses shall have academic preparation, including a
5	conferred degree,	, with applicable licensure or certification be licensed or certified in the content area in which they
6	are teaching.	
7	(e) Clinical prec	eptors shall have competencies, assessed by the nursing program, related to the area of assigned
8	clinical teaching	responsibilities. Clinical preceptors may be used to enhance faculty directed clinical learning
9	experiences after	a student has received basic instruction for that specific learning experience. Clinical preceptors shall
10	hold an active un	encumbered license to practice as a registered nurse in North Carolina.
11	(f) Nurse [Progra	am] faculty members shall have the authority and responsibility [be responsible] for:
12	(1)	student admission, progression, and graduation requirements; and
13	(2)	the development, implementation, and evaluation of the curriculum.
14		
14	(g) Nurse faculty	r members shall be academically qualified and sufficient in number to implement the curriculum as
14		y members shall be academically qualified and sufficient in number to implement the curriculum as ourse objectives, the levels of the students, the nature of the learning environment, and to provide for
	required by the co	
15	required by the contract teaching, supervise	ourse objectives, the levels of the students, the nature of the learning environment, and to provide for
15 16	required by the contract teaching, supervise	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation.
15 16 17	required by the constraints of the constraint of	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation.
15 16 17 18	required by the contract of th	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation.
15 16 17 18 19	required by the contract of th	purse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. [controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15.
15 16 17 18 19 20	required by the contract of th	purse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. [controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15.
15 16 17 18 19 20 21	required by the constraints of the constraint of	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. [controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15. ent ratio for all other clinical experiences shall be no greater than 1:10.
15 16 17 18 19 20 21 22	required by the constraints of the constraint of	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. [controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15. ent ratio for all other clinical experiences shall be no greater than 1:16. <i>Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;</i>
15 16 17 18 19 20 21 22 23	required by the constraints of the constraint of	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. [controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15. ent ratio for all other clinical experiences shall be no greater than 1:16. <i>Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;</i> <i>Eff. February 1, 1976;</i>
 15 16 17 18 19 20 21 22 23 24 	required by the constraints of the constraint of	burse objectives, the levels of the students, the nature of the learning environment, and to provide for sion, and evaluation. controlling institution] program shall provide workshops and presentations devoted to faculty aculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15. ent ratio for all other clinical experiences shall be no greater than 1:15. <i>Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;</i> <i>Eff. February 1, 1976;</i> <i>Amended Eff. December 1, 2016; January 1, 2015; August 1, 2011; November 1, 2008; July 1, 2006;</i>

2 3 **STUDENTS** 21 NCAC 36 .0320 (a) Students in nursing programs [Programs] shall [ensure students] meet [all] requirements established by the 4 controlling institution. 5 6 (b)(a) Admission requirements and practices for the program shall be stated and published in the controlling 7 institution's publications published written and digital communications and shall include assessment of the student's: 8 (1)record of high school graduation, high school equivalent, or earned credits from a post-secondary 9 institution; 10 (2)achievement potential through the use of previous academic records and pre-entrance examination 11 eut off scores that are consistent with curriculum demands and scholastic expectations; and 12 physical and emotional mental health that is indicative of the applicant's ability to provide competent (3)13 nursing care to the public. 14 (c) The number of students enrolled in nursing courses shall not exceed by more than 10 students the maximum number approved by the Board, as established pursuant to 21 NCAC 36.0302(f) [.0302(h)] and 21 NCAC 36.0321(k). 15 [.0321(l).] 16 17 (d) (c)(b) The nursing program shall publish policies in a nursing student handbook and college catalog that provide 18 for identification and dismissal of students who: 19 present physical or emotional mental health problems that conflict with the safety essential to (1)20 nursing practice and or do not respond to treatment or counseling within a timeframe that enables 21 meeting program objectives; 22 (2)demonstrate behavior that conflicts with the safety essential to nursing practice; or 23 (3)fail to demonstrate professional behavior, including honesty, integrity, and appropriate use of social 24 media, while in the nursing program of study. 25 (e)[(d)](c) The nursing program shall maintain a three year average at or above 95 percent of an NCLEX® 26 examination pass rate that meets or exceeds 90 percent of the national pass rate for licensure level pass rate on first 27 writing of the licensure examination for calendar years ending December 31. 28 (f)(d) The controlling institution shall publish policies in a nursing student handbook and college catalog for 29 transfer of credits or for admission to advanced placement, and the nursing program shall determine the total number 30 of nursing courses or credits awarded for advanced placement. 31 32 History Note: Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.43; 33 Eff. February 1, 1976; 34 Amended Eff. December 1, 2016; January 1, 2006; August 1, 1998; January 1, 1996; June 1, 1992; 35 January 1, 1989; January 1, 1984; Readopted Eff. January 1, 2019. 2019; 36 Amended Eff. [January 1, 2024] March 1, 2024. 37

21 NCAC 36 .0320 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:

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1	21 NCAC 36 .03	21 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows:
2		
3	21 NCAC 36 .03	
4	(a) The <mark>nursing</mark>	program curriculum shall:
5	(1)	be planned by nursing <u>members of the</u> program faculty;
6	(2)	reflect the stated program philosophy, purposes, and objectives, pursuant to 21 NCAC 36
7		.0302(b)(2);
8 9	(3)	be consistent with Article 9A of G.S. 90 and the Rules in this Chapter governing the practice of nursing;
10	(4)	define the level of performance required to pass each course in the curriculum;
11	(5)	enable a student to develop the nursing knowledge, skills, and abilities necessary for competent
12		practice consistent with the level of licensure and scope as set forth in 21 NCAC 36 .0221, .0224,
13		.0225, and .0231;
14	(6)	include content in the biological, physical, social, and behavioral sciences to provide a foundation
15		for competent and effective nursing practice;
16	(7)	provide students the opportunity to acquire and demonstrate, through didactic content and clinical
17		experience under faculty supervision, the knowledge, skills, and abilities required for effective and
18		competent nursing practice in the areas of medical/surgical, obstetric, pediatric, psychiatric/mental
19		health, and community [health] health, across the lifespan; and
20	(8)	be revised as necessary to reflect changes and advances in health care and its delivery.
21	(b) Didactic con	tent and supervised clinical experience across the lifespan appropriate to program type shall include:
22	(1)	implementing quality and safety principles and practices minimizing the risk of harm to clients and
23		providers through both system effectiveness and individual performance; performance to include
24		clinical judgment, skill in clinical management, time management, and emergency preparedness;
25	(2)	using informatics to communicate, manage knowledge, mitigate error, and support decision making;
26	(3)	employing evidence-based practice to integrate the best research with clinical expertise and client
27		values for optimal care, including skills to identify and apply best practices to nursing care;
28	(4)	providing client-centered, culturally competent care by:
29		(A) respecting client differences, values, preferences, and expressed needs;
30		(B) involving clients in decision-making and care management;
31		(C) coordinating and managing continuous client care consistent with the level of licensure.
32		This shall include a demonstrated ability to delegate and supervise others and provide
33		leadership within the profession appropriate for program type; and
34		(D) promoting healthy lifestyles for clients and populations;
35	(5)	working in interdisciplinary teams to cooperate, collaborate, communicate, engage in patient
36		teaching consistent with the level of licensure, and integrate client care and health promotion; and

1 (6)participating in quality improvement processes to measure client outcomes, identify hazards and 2 errors, and develop changes in client care. care; and 3 legal and ethical issues and professional responsibilities of the licensed nurse. (7)4 (c) Clinical experience experience, experience hours, traditional or simulated, shall be comprised of sufficient hours to accomplish the curriculum, objectives of the curriculum, [and with the exception of observational experiences and 5 6 the focused client care experience as noted in Paragraphs (e) and (f) of this Rule,] shall be supervised by qualified [on-7 site faculty pursuant to 21 NCAC 36 .0318, and shall ensure students' ability to practice at an entry level. 8 (d) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty. 9 (e) A focused client care experience with a minimum of 120 hours shall be provided in the final year of curriculum 10 implementation for programs preparing registered nurses. 11 (f) A focused client care experience with a minimum of 90 hours shall be provided in the final semester of the 12 curriculum for programs preparing practical nurses. 13 (g) Learning experiences and methods of instruction, including distance education methods, shall be consistent with 14 the written curriculum plan and shall demonstrate logical curricular progression. 15 (h) Remediation strategies for students shall be in place at the beginning of each course and include processes to 16 remediate errors in the clinical setting. 17 (h)(i) Objectives for each course shall indicate the knowledge, skills, and abilities expected for competent student 18 performance. These objectives shall: 19 (1)indicate the relationship between the classroom learning and the application of this learning in the 20 clinical experience; 21 (2) serve as criteria for the selection of the types of and settings for learning experiences; and 22 (3)serve as the basis for evaluating student performance. 23 (i)(i) Student course syllabi shall include a description and outline of: 24 (1)the course content; 25 (2)the learning environments and activities; 26 (3) when the course is taken in the curriculum; 27 (4)allocation of time for didactic content, clinical experience, laboratory experience, and simulation; 28 and 29 (5)methods of evaluation by faculty of student performance, including all evaluation tools used in the 30 course. 31 (i)(k) Each course shall be implemented in accordance with and evaluated by reference to the student course syllabus. 32 (k)(1) Requests for approval of changes in, in the currently approved curriculum, or expansion of, the program, 33 accompanied by all required documentation, shall be submitted in the format provided by to the Board [on a form 34 posted on the Board's website at www.ncbon.com] in writing at least 30 <u>60</u> days prior to implementation for approval 35 by the Board. Criteria for approval shall include program approval status, the availability of classrooms, laboratories, 36 clinical placements, equipment, and supplies and faculty sufficient to implement the curriculum to an increased number of students. Approval shall be required for any increase in enrollment that exceeds, by more than 10 students, 37

1	the maximum m	umber approved by the Board. Requests for expansion in enrollment shall be considered only for
2	programs with fu	Il approval status that demonstrate at least a three year average licensure examination pass rate equal
3	to or greater than	the North Carolina three year average pass rate for program type. status.
4	(l)<u>(m)</u> The <mark>nursi</mark>	ng education program shall notify the Board at least 30 <u>45</u> days prior to implementation of:
5	(1)	alternative or additional program schedules; and
6	(2)	planned decrease in the Board-approved student enrollment number to accurately reflect program
7		capacity; and capacity.
8	(3)	changes that alter the currently approved curriculum.
9	(n) The program	m shall have written policies and procedures on the following:
10	<u>(1)</u>	short-term and long-term plans for integrating simulation into the curriculum;
11	(2)	method of debriefing for each simulated activity; and
12	<u>(3)</u>	a plan for orienting faculty to simulation.
13	(m)(o) For all p	rograms using simulation experiences substituted for clinical experience time, the nursing education
14	program shall:	
15	(1)	demonstrate that simulation faculty have been formally educated and maintain the competencies in
16		simulation and debriefing; and
17	(2)	provide a simulation environment with adequate faculty, space, equipment, and supplies that
18		simulate realistic clinical experiences to meet the curriculum and course objectives.
19	(n) Programs no	t holding national nursing accreditation shall limit simulation experiences to no more than 25 percent
20	in each course, in	neluding the focused client care experience.
21	(o)(p) Programs	holding national nursing accreditation shall limit simulation experiences to:
22	(1)	no more than 25 percent in the focused client care experience; and
23	(2)	no more than 50 percent of clinical experience time in each course.
24	(p)(q) External	standardized examinations shall not be used to determine a student's progression or graduation in a
25	nursing education	n program preparing students for initial nurse licensure. When used, external examinations shall not
26	weigh more than	10 percent of the final course grade or final course points calculation.
27		
28	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;
29		Eff. February 1, 1976;
30		Amended Eff. June 1, 1992; January 1, 1989; January 1, 1984;
31		Temporary Amendment Eff. October 11, 2001;
32		Amended Eff. December 1, 2016; December 1, 2005; August 1, 2002; <u>July 1, 2023.</u>
33		Readopted Eff. January 1, 2019. 2019:
34		<u>Amended Eff.</u> [January 1, 2024] <u>March 1, 2024.</u>

1	21 NCAC 36 .03	322 is amended, with changes , <u>repealed</u> as published in NCR 38:06, pages 340 - 353 as follows:
2		
3	<mark>21 NCAC 36 .0</mark>	322 FACILITIES
4	(a) Campus fac	ilities shall be appropriate in type, number, and accessibility for [The program shall secure facilities
5	consistent with]	the total needs of the program.
6	(b) Classrooms,	, laboratory and simulation space, and conference rooms shall be sufficient in size, number, and types
7	for the number	of students and purposes for which the rooms are to be used. Lighting, ventilation, location, and
8	equipment shall	be suitable for the number of students and purposes for which the rooms are to be used.
9	(c)[(b)] Office [The program shall make available office] and conference space for nursing program faculty members
10	shall be appropr	iate and available for uninterrupted work and privacy, including conferences with students.
11	(d)[(c)] Learnin	g resources, including [The program shall provide students with] educational reference materials [and]
12	clinical experier	nces, shall be comprehensive, current, developed with nursing faculty input, accessible to students and
13	faculty and shall	support the implementation [that are required as part] of the curriculum. [curriculum pursuant to Rule
14	.0321 of this Sec	ztion.]
15		
16	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;
17		Eff. February 1, 1976;
18		Amended Eff. January 1, 1996; June 1, 1992; January 1, 1989; May 1, 1988;
19		Temporary Amendment Eff. October 11, 2001;
20		Amended Eff. December 1, 2016; April 1, 2006; August 1, 2002; <u>July 1, 2023.</u>
21		Readopted Eff. January 1, 2019. <u>2019;</u>

22 <u>Amended Eff.</u> [January 1, 2024.] March 1, 2024.

- 1 21 NCAC 36 .0323 is amended, with changes, as published in NCR 38:06, pages 340 - 353 as follows: 2 3 21 NCAC 36 .0323 **RECORDS AND REPORTS** 4 (a) The controlling institution's publications describing the nursing program shall be current and accurate. 5 (b)(a) The controlling institution program shall maintain a system for maintaining official records. records consistent 6 with the policies of the controlling institution. Current and permanent student records shall be stored in a secure 7 manner that prevents physical damage and unauthorized access. 8 (e)(b) Both permanent and current records shall be available for review by Board staff. 9 (d)(c) The official permanent record for each graduate shall include documentation of graduation from the program 10 and a transcript of the individual's achievement in the program. 11 (e)(d) The record for each currently enrolled student shall contain up-to-date and complete information, including the 12 following: 13 (1)documentation of admission criteria met by the student; 14 (2)documentation of high school graduation, high school equivalent, or earned credits from 15 post-secondary institution approved pursuant to G.S. 90-171.38(a); and 16 (3)a transcript of credit hours achieved in the classroom, laboratory, and clinical instruction for each 17 course that reflects progression consistent with program policies. 18 (f)(e) The nursing program shall file an annual report with the Board records, data, and reports in order to furnish information concerning operation of the program as prescribed in the rules in this Section, including: 19 an annual report to be filed with the Board by November 1 of each year; year. [This report shall 20 (1)21 include information about the program's use of simulation;] The annual report shall be available to 22 the program director through the Board's website at www.ncbon.com and shall include the 23 following: 24 accreditation status; (1)25 (2)academic calendar; (3) faculty composition; 26 27 (4) student enrollment; 28 (5) graduation rate; 29 formal remediation process; and, (6) 30 (7) use of simulation. (2)(f) In addition to the annual report in (e), a program description report for non-accredited programs filed with the 31 Board at least 30 days prior to a scheduled review by the Board; and shall file a program description report 32 33 with the Board at least 30 days prior to a scheduled review by the Board. The program description report shall be available on the Board's website at www.ncbon.com. 34 35 (g) The program shall concurrently submit to the Board all communications regarding accreditation that are submitted
- 36 to the accrediting body.

1	(h) The Board m	nay require additional records and reports for review at any time to provide evidence and substantiate
2	compliance with	the rules in this Section by a program and its controlling institutions.
3	(i) The program	shall notify the Board
4	(3)	notification by institution administration of any change of the nursing program director. director
5		This notification shall include a curriculum vitae for the new director and shall be submitted no later
6		than at least 10 business days before the effective date of prior to the change.
7	(g) All comm	unications relevant to accreditation shall be submitted to the Board at the same time that the
8	communications	are submitted to the accrediting body.
9	(h) The Board m	nay require additional records and reports for review at any time to provide evidence and substantiate
10	compliance with	the rules in this Section by a program and its controlling institutions.
11	(i)(j) The part o	f the application for licensure by examination to be submitted to the Board by the nursing program
12	shall include a st	atement verifying satisfactory completion of all requirements for program completion and the date of
13	completion. The	nursing program director shall verify to the Board in writing all students who have completion of
14	requirements to	the Board completed the program no later than one month following completion of the Board-
15	approved nursing	program.
16		
17	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;
18		Eff. February 1, 1976;
19		Amended Eff. December 1, 2016; January 1, 2015; December 1, 2005; January 1, 2004; June 1,
20		1992; January 1, 1989; January 1, 1984;
21		Readopted Eff. January 1, 2019;

22 Amended Eff. [January 1, 2024;] March 1, 2024; November 1, 2020.