1 2	21 NCAC 50.01	20 is amended, with changes, as published in NCR 31:01, pages 25-27, as follows:
3	21 NCAC 36 .01	20 DEFINITIONS
4	The following de	finitions apply throughout this chapter unless the context indicates otherwise:
5	(1)	"Academic term" means one semester of a school year.
6	(2)	"Accountability/Responsibility" means being answerable for action or inaction of self, and of others in
7		the context of delegation or assignment.
8	(3)	"Accredited institution" means an institution accredited by a United States Department of Education
9		approved institutional accrediting body.
10	(4)	"Active Practice" means activities that are performed, either for compensation or without
11		compensation, consistent with the scope of practice for each level of licensee as defined in G.S. 90-
12		171.20(4), (7) and (8).
13	(5)	"Advanced Practice Registered Nurse (APRN)" means a nurse practitioner, nurse anesthetist, nurse-
14		midwife or clinical nurse specialist.
15	(6)	"Assigning" means designating responsibility for implementation of a specific activity or set of
16		activities to a person licensed and competent to perform such activities.
17	(7)	"Clinical experience" means application of nursing knowledge in demonstrating clinical judgment.
18		judgment in a current or evolving practice setting where the student provides care to clients under the
19		[guidance] supervision of [an instructor] faculty or a preceptor.
20	(8)	"Clinical judgment" means the application of the nursing student's knowledge, skills, abilities abilities.
21		and experience in making decisions about client care.
22	(9)	"Competent" means having the knowledge, skills, skills, and ability to safely perform an activity or
23		role.
24	(10)	"Continuing Competence" means the on-going acquisition and application of knowledge and the
25		decision-making, psychomotor, and interpersonal skills expected of the licensed nurse resulting in
26		nursing care that contributes to the health and welfare of clients served.
27	(11)	"Contact Hour" means 60 minutes of an organized learning experience.
28	(12)	"Continuing Education Activity" means a planned, organized learning experience that is related to the
29		practice of nursing or contributes to the competency of the a nurse as defined outlined in 21 NCAC 36
30		.0223 Subparagraph (a)(2).
31	(13)	"Controlling institution" means the degree-granting organization or hospital under which the nursing
32		education program is operating.
33	(14)	"Curriculum" means an organized system of teaching and learning activities directed toward the
34		achievement of specified learning objectives/outcomes. objectives and outcomes.
35	(15)	"Delegation" means transferring to a competent individual the authority to perform a selected nursing
36		activity in a selected situation. The nurse retains accountability accountability/responsibility for the
37		delegation.

1	<u>(16)</u>	"Debriefing" means an activity that follows a clinical or simulated experience and is led by a trained
2	<u>1</u>	faculty facilitator. Students' reflective thinking is encouraged, and feedback is provided regarding the
3	<u>s</u>	students' performance [while] during discussion of various aspects of the completed [experiences are
4	•	discussed.] experiences.
5	(16)<u>(</u>17) '	"Dimensions of Practice" means those aspects of nursing practice that include professional
6	1	responsibility, knowledge-based practice, legal/ethical ethical and legal practice practice, and
7	(collaborating with others, consistent with G.S. 90-171.20(4), (7) and (8).
8	(17)<u>(18)</u> '	"Distance education" means the teaching and learning strategies used to meet the learning needs of
9	ŧ	students, <u>students</u> when the students and faculty are <mark>separate from each other.</mark> not in the same location.
10	<u>(19)</u>	"External standardized [examinations"] examination" means a commercially available standardized
11	1	predictive test that provides individual student scores that are linked to a probability of passing the
12	<u>]</u>	NCLEX TM examination.
13	(<u>18)(20)</u>	"Faculty directed clinical practice" means <mark>clinical experiences provided under the</mark>
14	<u>-</u>	<mark>accountability/responsibility and direction of the responsibility of nursing program faculty in</mark>
15	•	overseeing student learning including the utilization of preceptors. <u>faculty.</u>
16	(19)<u>(21)</u> '	"Focused client care experience" means a clinical experience that simulates emulates an entry-level
17	•	work <mark>experience. experience in nursing.</mark> The intent is to assist the student to transition to an entry-level
18	<u>1</u>	nursing practice. There is no specific setting requirement. Supervision may be by faculty and
19	1	preceptor dyad or direct faculty supervision.
20	(20)(22)	"Interdisciplinary faculty" means faculty from professions other than nursing.
21	(21)(23)	"Interdisciplinary team" means all individuals involved in providing a client's care who cooperate,
22	(collaborate, communicate communicate, and integrate care to ensure that care is continuous and
23	1	reliable.
24	<u>(24)</u>	"Learning resources" means <mark>[a variety of instrumental]</mark> materials that faculty use to assist students <mark>[to</mark>
25	ł	meet] in meeting the expectations for learning defined by the curriculum.
26	(22)(25) '	"Level of Licensure" means practice of nursing by either a Licensed Practice Practical Nurse or a
27]	Registered Nurse as defined in G.S. 90-171.20(7) and (8).
28	(23)(26) '	"Level of student" means the point in the program to which the student has progressed.
29	(24)(27) '	"Maximum enrollment" means the total number of pre-licensure students that can be enrolled in the
30	1	nursing program at any one time. The number reflects the capacity of the nursing program based on
31	(demonstrated resources sufficient to implement the curriculum.
32	(25)(28)	"Methods of Instruction" means the planned process through which teacher and student interact with
33	5	selected environment and content so that the response of the student gives evidence that learning has
34	t	taken place. It is based upon stated course objectives and outcomes for learning experiences in
35		classroom, laboratory laboratory, simulation and clinical settings.
36	(26)(29) '	"National Credentialing Body" means a credentialing body that offers certification or re-certification
37	i	in the licensed nurse's or Advanced Practice Registered Nurse's specialty area of practice.

1	(27)(30) "NCLEX-PN TM " means the National Council Licensure Examinations for Practical Nurses.
2	(28)(31) "NCLEX-RN TM " means the National Council Licensure Examinations for Registered Nurses.
3	(29)(32) "Nursing Accreditation body" means a national nursing accrediting body, recognized by the United
4	States Department of Education.
5	(30)(33) "Nursing program faculty" means individuals employed full or part-time part-time by academic
6	institution responsible for developing, implementing, evaluation and updating nursing curricula.
7	(31)(34) "Nursing project" means a project or research study of a topic related to nursing practice that includes
8	a problem statement, objectives, methodology and summary of findings.
9	(32)(35) "Participating in" means to have a part in or contribute to the elements of the nursing process.
10	(33)(36) "Pattern of noncompliance" means episodes of recurring non-compliance with one or more Rules in
11	Section .0300.
12	(34)(37) "Preceptor" means a registered nurse at or above the level of licensure that an assigned student is
13	seeking, who may serve as a teacher, mentor, role model and supervisor for a faculty directed clinical
14	experience.
15	(35)(38) "Prescribing Authority" means the legal permission granted by the Board of Nursing and Medical
16	Board for the nurse practitioner and nurse midwife to procure and prescribe legend and controlled
17	pharmacological agents and devices to a client in compliance with Board of Nursing rules and other
18	applicable federal and state law and regulations.
19	(36)(39) "Program Closure" means to cease operation of a nursing program.
20	(37)(40) "Program Type" "Program" means a course of study that prepares an individual to function as an
21	entry-level practitioner of nursing. The three program types <u>"Program Types"</u> are:
22	(a) BSN - Curriculum components for Bachelor of Science in Nursing provides for the
23	attainment of knowledge and skill sets in the current practice in nursing, nursing theory,
24	nursing research, community and public health, health care policy, health care delivery and
25	finance, communications, therapeutic interventions and current trends in health care. For this
26	program type, the client is the individual, family, group, and community.
27	(b) Associate Degree in Nursing (ADN)/Diploma in Registered Nursing - Curriculum
28	components for the ADN/Diploma in Registered Nursing provides for the attainment of
29	knowledge and skill sets in the current practice in nursing, community concepts, health care
30	delivery, communications, therapeutic interventions and current trends in health care. For this
31	program type, client is the individual, group of individuals, and family.
32	(c) Practical Nurse Diploma - Curriculum prepares for functioning in a dependent role in
33	providing direct nursing care under the direction supervision of a registered nurse or other
34	health care provider as defined by the Nursing Practice Act. Curriculum components provide
35	for the attainment of knowledge and skill sets in the current practice of practical nursing,
36	communications, therapeutic interventions, including pharmacology, growth and

1	development development, and current	trends in health care. For this program type client is
2	the individual, individual or group of in	idividuals.
3	(38)(41) "Review" means collecting and analyzing inform	ation to assess compliance with Section .0300 of this
4	Chapter. Information may be collected by mult	iple methods methods, including review of written
5	reports and materials, on-site observations observations	<u>ations</u> and review of <mark>documents documents, or and in</mark>
6	person in-person or telephone interview(s) and c	onference(s).
7	(39)(42) "Rescind Approval" means a Board action that	t removes the approval status previously granted.
8	granted by the Board.	
9	(40)(43) "Self Assessment" means the process whereby	the an individual reviews her or his own nursing
10	practice and identifies the knowledge and skills	possessed, <u>possessed</u> as well as those skills to be
11	strengthened. strengthened or acquired.	
12	(44) "Simulation" means a technique, not a technolo	gy, to replace or amplify clinical experiences with
13	guided experiences that evoke or replicate substant	ntial aspects of the real world <mark>of nursing practice</mark> in a
14	fully interactive manner.	
15	(41)(45) "Specialty" means a broad, population-based focu	as of study encompassing the common health-related
16	problems of that <u>a particular</u> group of patie	ents and the likely co-morbidities, interventions
17	interventions, and responses to those problems.	
18	(42)(46) "Supervision" means the provision of guidance o	r direction, <mark>evaluation <u>evaluation,</u> and follow-up by</mark>
19	the a licensed nurse for accomplishment of to acc	omplish an assigned or delegated nursing activity or
20	set of activities.	
21	(43)(47) "Survey" means an on-site visit for the purpose	of gathering data in relation to reviewing <mark>a</mark> nursing
22	programs program's compliance with Section .0.	300 of this Chapter.
23		
24	History Note: Authority G.S. 90-171.23; 90-171.38;	
25	Eff. April 1, 2003;	
26	Amended Eff. <u>December 1, 2016;</u> July 1, 2012; N	lovember 1, 2008; May 1, 2006; December 1, 2005;
27	August 1, 2005.	

1 2	21 NCAC 36 .03	02 is amended, with changes, as published in NCR 31:01, pages 27-28, as follows:
3	21 NCAC 36 .03	802 ESTABLISHMENT OF A NURSING PROGRAM - INITIAL APPROVAL
4	(a) At least six n	nonths prior to the proposed enrollment of students in a nursing program, an institution seeking approval
5	to operate a nurs	ng program shall employ a program director qualified pursuant to 21 NCAC 36 .0317(c) to develop the
6	an application de	ocumenting the following:
7	(1)	a narrative description of the organizational structure of the program and its relationship to the
8		controlling institution, including accreditation status. The controlling institution must shall be an
9		accredited institution;
10	(2)	a general overview of the entire proposed total curriculum that includes:
11		(A) <u>the</u> program philosophy, purposes, and objectives;
12		(B) <u>a</u> master plan of the curriculum, indicating the sequence for both nursing and non-nursing
13		courses, as well as prerequisites and corequisites;
14		(C) course descriptions and course objectives for all courses; and
15		(D) course syllabi pursuant to 21 NCAC 36. 0321(i) for all first-year nursing courses;
16	(3)	the proposed student population;
17	(4)	the projected student enrollment;
18	(5)	evidence of learning resources and clinical experiences available to implement and maintain the
19		program;
20	(6)	financial resources adequate to begin and maintain the program;
21	(7)	physical facilities adequate to house the program;
22	(8)	support services available to the program from the <u>controlling</u> institution;
23	(9)	approval of the program by the governing body of the parent controlling institution; and
24	(10)	a plan with a specified time frame for:
25		(A) availability of qualified faculty as specified in 21 NCAC 36 .0318;
26		(B) course syllabi as specified in 21 NCAC 36. 0321(h) of this Section for all nursing courses;
27		(C) student policies for admission, progression, and graduation of students, pursuant to 21 NCAC
28		36 .0320 of this <mark>Section for admission, progression, and graduation of students; Section;</mark> and
29		(D) total comprehensive program evaluation pursuant to 21 NCAC 36 .0317(e)0317(d).
30	(b) The applica	tion to establish a nursing program must shall be on a Board form, contain current and accurate
31	information, <u>info</u>	ormation required in Paragraph (a) of this Rule, be complete, and be signed by the program director and
32	the chief executi	ve officer of the controlling institution.
33	(c) The complete	ed application shall be received by the Board not less than $90 \underline{120}$ days prior to a regular meeting of the
34	Board to be cons	idered for placement on the agenda of that meeting.
35	(d) The Board sl	nall conduct an on-site survey of the proposed program and agencies after the application meets all the
36	[rule] requireme	nts set forth in this Rule, shall prepare a survey report, and afford the petitioning institution an
37	opportunity to re	spond to the <mark>survey. <u>survey report.</u></mark>

- 1 (e) The Board shall consider all evidence, including the application, the survey report, and any testimony comments
- 2 from representatives of the petitioning institution institution, public comments, and the status of other nursing programs
- 3 <u>at the institution</u> in determining approval status. <u>whether to approve the application</u>.
- 4 (f) If the Board finds, from the evidence presented, that the resources and plans meet all rules [rule] requirements set
- 5 forth in this Rule for establishing a new nursing program, the Board shall grant Initial Approval Approval, and shall
- 6 <u>establish</u> including a maximum enrollment and implementation date.
- 7 (g) If the Board determines that a proposed program does not comply with all rules, initial approval Initial Approval
- 8 shall be denied.
- 9 (h) The Board shall rescind the Initial Approval of a program if Failure of the controlling institution fails to submit
- 10 documentation $\frac{\text{consistent with the time specified as set forth}}{\text{as set forth}}$ in the plan $\frac{\text{of required by}}{\text{of subparagraph}}$ Subparagraph (a)(10) of this $\frac{\text{Rule}}{\text{Rule}}$
- 11 shall result in Initial Approval being rescinded. <u>Rule.</u>
- 12 (i) Following The Board shall rescind the Initial Approval, Approval of a program if the first class of students are is not
- 13 enrolled in the program within one year, year after issuing the approval shall be rescinded. Initial Approval.
- 14 (j) For 12 months following rescinded rescission of approval, the controlling institution shall not submit an application
- 15 for establishing a nursing program.
- 16 (k) A program may shall retain Initial Approval Status for the time necessary for full implementation of the curriculum.
- 17 curriculum provided that the program complies with Section .0300 of this Chapter.
- 18 (1) Programs with Initial Approval shall be surveyed:
- 19 (1) during the final term of curriculum implementation of the program; and
- 20 (2) when there is upon receipt by the Board of information that the program may not be complying with
 21 Section .0300.
- 22 (m) If at any time it comes to the attention of the Board that a program on initial approval Initial Approval is not
- 23 complying with Section .0300 of this Chapter, the program, upon written notification, shall:
- 24 (1) correct the area of noncompliance and submit written evidence of <u>this</u> correction to the Board; or
- 25 (2) submit and implement a plan for correction to the Board.
- 26 (n) If the The Board shall rescind the Initial Approval of a program if the Board determines that the program does not
- 27 comply with Paragraph (m) of this Rule, Initial Approval shall be rescinded. Rule.
- 28 (o) If, following the survey and during the final term for curriculum implementation, the Boards finds that the program is
- 29 complying with Section .0300 of this Chapter, the Board shall place the program on Full Approval status.
- 30 (p) If, following the survey and during the final term for curriculum implementation implementation, the Board finds that
- 31 the program does not comply with the Section .0300 of this Chapter, the Board shall rescind <u>the program's</u> Initial
- 32 Approval and provide the program with written notice of the Board's decision.
- 33 (q) Upon written request from the program submitted within 10 business days of the Board's written notice, notice of
- 34 <u>rescinding the Initial Approval</u>, the Board shall schedule a hearing within 30 business days from the date on which the
- 35 request was received.

(r) Following the hearing and consideration of all evidence provided, the Board shall assign the program Full Approval
 status or shall enter an Order rescinding the Initial Approval status, which shall constitute program closure of the
 program pursuant to 21 NCAC 36 .0309.

4 5

History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;

- 6 *Eff. February 1, 1976;*
- 7 Amended Eff. June 1, 1992; January 1, 1989; November 1, 1984; May 1, 1982;
- 8 Temporary Amendment Eff. October 11, 2001;
- 9 Amended Eff. <u>December 1, 2016;</u> January 1, 2009; December 1, 2005; August 1, 2002.

1 2	21 NCAC 36 .03	03 is amended, with changes, as published in NCR 31:01, pages 28-29, as follows:
3	21 NCAC 36 .03	03 EXISTING NURSING PROGRAM
4	(a) All nursing	programs under the authority of the Board may obtain national program accreditation by a nursing
5	accreditation bod	y as defined in 21 NCAC 36 .0120(29).
6	(b) Full Approva	ป
7	(1)	The Board shall review approved programs at least every eight years as specified in G.S. 90-171.40.
8		Reviews of individual programs shall be conducted at shorter intervals upon request from the
9		individual institution or as considered necessary by the Board. National accreditation self study self-
10		study reports shall provide a basis for review for accredited programs.
11	(2)	The Board shall send a written report of the review no more than 20 business days following the
12		completion of the review process. Responses from a nursing education program regarding a review
13		report or Board Warning Status as referenced in Paragraph (c) of this Rule shall be received in the
14		Board office by the deadline date specified in the letter accompanying the report or notification of
15		Warning Status. If no materials or documents are received by the specified deadline date, the Board
16		shall act upon the findings in the review report and the testimony of the Board staff.
17	(3)	If the Board determines that a program has complied with the rules in this Section, the program shall
18		be continued on Full Approval status.
19	(4)	If the Board determines a pattern of noncompliance with one or more rules in this Section, a review
20		shall be conducted. The program shall submit to the Board a plan of compliance to correct the
21		identified pattern. Failure to comply with the correction plan shall result in withdrawal of approval,
22		constituting program closure, consistent with 21 NCAC 36 .0309.
23	(c) Warning Stat	us
24	(1)	If the Board determines that a program is not complying with the rules in this Section, the Board shall
25		assign the program Warning Status, Status and shall give written notice by certified mail to the
26		program specifying:
27		(A) the areas in which there is noncompliance;
28		(B) the date of notice by which the program must comply. comply with the rules in this Section.
29		The maximum <mark>timeframe <u>time</u> for compliance is two years; years after issuance of the written</mark>
30		notice; and
31		(C) the opportunity to schedule a hearing. <u>Any request for a hearing regarding the program</u>
32		Warning Status shall be submitted to the Board. A hearing shall be afforded pursuant to the
33		provisions of G.S. 150B, Article 3A.
34	(2)	On or before the required date of compliance identified in this Paragraph, if the Board determines that
35		the program is complying with the rules in this Section, the Board shall assign the program Full
36		Approval Status.

1	(3)	If the Board finds the program is not in compliance with the rules in this Section by the date specified
2		in Part (c)(1)(B) of this Rule, the Board shall withdraw approval constituting closure consistent with
3		21 NCAC 36 .0309. the program shall remain on Warning Status: and,
4		(A) a review by the Board shall be conducted during that time;
5		(B) following review, the Board may continue the program on Warning Status; or
6		(C) the Board may withdraw [approval] approval, constituting program closure consistent with
7		[21 NCAC 36 .0309.] Paragraph (b)(4) of this Rule.
8	(4)	Upon written request from the program, program submitted within 10 business days of the Board's
9		written notice of Warning Status, the Board shall schedule a hearing within 30 business days from
10		after the date on which the request was received.
11	(5)	When a hearing is held at the request of the program and the Board determines that:
12		(A)—the program is in compliance with the rules in this Section, the Board shall assign the
13		program Full Approval status; or <u>Status.</u>
14	(B) (6)	When a hearing is held at the request of the program and the Board determines that the program is not
15		in compliance with the rules in this Section, the program shall remain on Warning Status. Status; and,
16		(A)a review by the Board shall be conducted during that time.time;
17		(B) following review, the Board may continue the program on Warning Status; or
18		(C) the Board may withdraw [approval] approval, constituting program closure consistent with
19		[21 NCAC 36 .0309.] Paragraph (b)(b) of this Rule.
20	<mark>NOTE: The Boa</mark>	rd recommends but does not require that all nursing programs under the authority of the Board pursue
21	<mark>and maintain nat</mark>	ional nursing accreditation.
22		
23	History Note:	Authority G.S. 90-171.23(b); 90-171.38; 90-171.39; 90-171.40;
24		Eff. February 1, 1976;
25		Amended Eff. December 1, 2016; August 1, 2011; July 3, 2008; March 1, 2006; January 1, 2004; June
26		1, 1992; January 1, 1989.

1 2	21 NCAC 36 .03	309 is amended <mark>, with changes,</mark> as published in NCR 31:01, page 29 as follows:
3	21 NCAC 36 .03	309 PROCESS FOR CLOSURE OF A PROGRAM <u>CLOSURE</u>
4	(a) When the con	ntrolling institution makes the decision to close a nursing program, the Administration of the institution
5	shall submit a wr	itten plan for the discontinuation of the program to the Board. <u>Board and shall</u> include <u>the</u> reason(s) for
6	{the closing of the	te program,] program closure, the date of intended closure, and a plan for students to complete this or
7	another approved	d program.
8	(b) When the Bo	pard closes a nursing program, the program director shall develop and submit to the Board a plan, for
9	discontinuation of	of the program including the transfer of students to approved programs. Closure shall take place after the
10	transfer of stude	nts to approved programs. shall, within 30 days, develop and submit a plan for discontinuation of the
11	program for Boa	rd approval. The plan shall address transfer of students to approved programs.
12	(c) The controll	ing institution shall notify the Board of the arrangement for secure storage of permanent records. and
13	access to acaden	nic records and transcripts.
14		
15	History Note:	Authority G.S. 90-171.38; 90-171.39; 90-171.40;
16		Eff. June 1, 1992;
17		Amended Eff. <u>December 1, 2016;</u> December 1, 2005.

1

21 NCAC 36 .0317 is amended, with changes, as published in NCR 31:01, pages 29-30, as follows:

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3 21 NCAC 36.0317 ADMINISTRATION

4 (a) The controlling institution of a nursing program shall provide those human, physical, technical, and financial

5 resources and services essential to support program processes, processes and outcomes, including those listed in (d)

6 and (e) of this Rule, and maintain compliance with Section .0300 of this Chapter.

7 (b) A full time full-time registered nurse qualified pursuant to Paragraph (c) of this Rule shall have the authority for

8 the direction of the nursing program. This authority shall encompass responsibilities for maintaining compliance

9 with rules and other legal requirements in all areas of the program. The program director shall have non-teaching

10 time sufficient to allow for program organization, administration, continuous review, planning, and development.

(c) Program director in a program preparing <u>students</u> for initial nurse licensure shall satisfy the following
 requirements:

- 13 (1) hold a current <u>unrestricted unrestricted</u> license or multistate licensure privilege to practice as a
 registered nurse in North Carolina;
- 15 (2) have two years of full-time experience as a faculty member in a board approved Board-approved
 16 nursing program;
- be experientially qualified to lead the program to accomplish the mission, goals, and expected
 program outcomes;
- (4) hold either a baccalaureate in nursing or a graduate degree in nursing from an accredited
 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 an accredited institution;
- (5) prior to or within the first three years of employment, have preparation education in teaching and
 learning principles for adult education, including curriculum development, implementation, and
 evaluation, appropriate to assignment. the program director role. This preparation education may
 be demonstrated by one of the following:
 - (A) completion of 45 contact hours of <u>Board approved</u> continuing education courses;
 - (B) completion of a certificate program in nursing education;
- 29 (C) nine semester hours of graduate course work; work in adult learning and learning
 30 principles;
 - (D) national certification in nursing education; or
- 32 (E) documentation of successful completion of structured, individualized development 33 activities of at least 45 contact hours approved by the Board. Criteria for approval 34 include content in the faculty role within the curriculum implementation, <u>curricular</u> 35 objectives to be met and evaluated, review of strategies for identified student population 36 population, and expectations of student and faculty performance;
- 37 (6) maintain competence in the areas of assigned responsibility; and

1	(7)	have current knowledge of nursing practice for the registered nurse and the licensed practical	
2		nurse.	
3	(d) The nursing education program shall implement, for quality improvement, a comprehensive program evaluation		
4	that shall includ	le the following:	
5	(1)	students' achievement of program outcomes;	
6	(2)	evidence of program resources resources, including fiscal, physical, human, clinical, and technical	
7		learning resources; student support services, services; and the availability of clinical sites and the	
8		viability of those sites adequate to meet the objectives of the program;	
9	(3)	measures of program outcomes for graduates;	
10	(4)	evidence that accurate program information for consumers the public is available;	
11	(5)	evidence that the head of the academic <u>controlling</u> institution and the its administration support	
12		program outcomes;	
13	(6)	evidence that program director and program faculty meet board Board qualifications and are	
14		sufficient in number to achieve program outcomes;	
15	(7)	evidence that the academic institution assures security of student information;	
16	(8)	evidence that collected evaluative data is utilized in implementing quality improvement activities;	
17		and	
18	(9)	evidence of student participation in program planning, implementation, evaluation, and continuous	
19		improvement.	
20	(e) The control	olling institution and the nursing education program shall communicate information describing the	
21	nursing education	on program that is accurate, complete, consistent across mediums, and accessible by the public. The	
22	following shall	be accessible to all applicants and students:	
23	(1)	admission policies and practices;	
24	(2)	policy on advanced placement, placement and transfer of credits;	
25	(3)	the number of credits required for completion of the program;	
26	(4)	tuition, fees, and other program costs;	
27	(5)	policies and procedures for withdrawal, including refund of tuition or fees;	
28	(6)	the grievance procedure;	
29	(7)	criteria for successful progression in the program program, including graduation requirements; and	
30	(8)	policies for clinical performance.	
31			
32	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;	
33		Eff. June 1, 1992;	
34		Amended Eff. <u>December 1, 2016;</u> January 1, 2015; April 1, 2008; March 1, 2006.	

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1 2	21 NCAC 36 .0	318 is ar	nended, with changes, as published in NCR 31:01, pages 30-31, as follows:
3	21 NCAC 36 .0	318	FACULTY
4	(a) Nursing p	rogram	faculty shall include full-time and part-time faculty members. Part-time faculty shall
5	participate in cu	rriculum	implementation and evaluation.
6	(b) Policies for	nursing	program faculty members shall be consistent with those for other faculty of the institution.
7	Variations in the	ese polic	ies may be necessary due to the nature of the nursing curriculum.
8	(c) Fifty percent	t or mor	e of the nursing faculty shall hold a graduate degree.
9	(d) As of Janu	ary 1, 2	021, at least 80 percent of the full-time full-time faculty shall hold a graduate degree in
10	nursing.		
11	(e) As of Janu	ary 1, 2	021, at least 50 percent of the part time part-time faculty shall hold a graduate degree in
12	nursing.		
13	(f) <mark>Hold <u>All f</u></mark>	aculty s	hall hold a current unrestricted license or multistate licensure privilege to practice as a
14	registered nurse	in North	n Carolina.
15	(g) Nurses lice	nsed pur	<mark>suant to this Chapter who are Full-time <u>full-time</u> and part-time <mark>nurse</mark> faculty <mark>and</mark> who teach</mark>
16	in a program lea	ding to i	initial licensure as a nurse shall:
17	(1)	hold e	either a baccalaureate in nursing or a graduate degree in nursing from an accredited
18		institu	tion;
19	(2)	have t	wo calendar years or the equivalent of full time full-time clinical experience as a registered
20		nurse;	
21	(3)	if new	ly employed in a full-time full-time faculty position on or after January 1, 2016, hold a
22		gradua	te degree from an accredited institution, institution or obtain a graduate degree in nursing
23		from a	n accredited institution within five years of initial full time full-time employment;
24	(4)	prior t	o or within the first three years of employment, have preparation education in teaching and
25		learnii	ng principles for adult education, including curriculum development, implementation, and
26		evalua	tion, appropriate to faculty assignment. This preparation may be demonstrated by one of
27		the fol	lowing:
28		(A)	completion of 45 contact hours of [Board approved] Board-approved continuing
29			education courses;
30		(B)	completion of a certificate program in nursing education;
31		(C)	nine semester hours of graduate course work; work in adult learning and learning
32			principles:
33		(D)	national certification in nursing education; or
34		(E)	documentation of successful completion of structured, individualized development
35			activities of at least 45 contact hours approved by the Board. Criteria for approval
36			include content in the faculty role within in the curriculum implementation, curricular
37			objectives to be met and evaluated, review of strategies for identified student population
38			population, and expectations of student and faculty performance;

- 1 (5) maintain competence in the areas of assigned responsibility; and
- 2 (6) have current knowledge of nursing practice for the registered nurse and the licensed practical 3 nurse.
- 4 (h) Interdisciplinary faculty who teach in nursing program courses shall have academic preparation in the content5 area they are teaching.
- 6 (i) Clinical preceptors shall have competencies, assessed by the nursing program, related to the area of assigned
- 7 clinical teaching responsibilities and shall serve as role models to the student. Students. Clinical preceptors may be
- 8 used to enhance faculty-directed clinical learning experiences after a student has received basic instruction for that
- 9 specific learning experience. Clinical preceptors shall hold a current, unrestricted license to practice as a registered
- 10 nurse in North Carolina.
- 11 (j) Nurse faculty members shall have the authority and responsibility for:
- 12
 - (1) student admission, progression, and graduation requirements; and
- 13 (2) the development, implementation, and evaluation of the curriculum.

14 (k) Nurse faculty members shall be academically qualified and sufficient in number to implement the curriculum as

15 demanded required by the course objectives, the levels of the students, the nature of the learning environment, and to

- 16 provide for teaching, supervision supervision, and evaluation.
- 17 (1) The faculty-student ratio for faculty-directed faculty-directed preceptor clinical experiences shall be no larger
- 18 than 1:15. The faculty-student ratio for all other clinical experiences shall be no larger than 1:10.
- 19

20 History Note: Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;

- 21 *Eff. February 1, 1976;*
- 22 Amended Eff. <u>December 1, 2016;</u> January 1, 2015; August 1, 2011; November 1, 2008; July 1,
- 23 2006; July 1, 2000; January 1, 1996; June 1, 1992; January 1, 1989; January 1, 1984.

1 2	21 NCAC 36 .0	320 is amended, with changes, as published in NCR 31:01, page 31, as follows:
3	21 NCAC 36 .0	320 STUDENTS
4	(a) Students in	n nursing programs shall meet requirements established by the controlling institution. Additional
5	<mark>requirements m</mark>	ay be stipulated by the nursing program for students because of the nature and legal responsibilities of
6	nursing education	on and nursing practice.
7	(b) Admission	requirements and practices shall be stated and published in the controlling institution's publications and
8	shall include as	sessment of:
9	(1)	record of high school graduation, high-school equivalent, or earned credits from a post-secondary
10		institution;
11	(2)	achievement potential through the use of previous academic records and pre-entrance examination cut-
12		off scores that are consistent with curriculum demands and scholastic expectations; and
13	(3)	physical and emotional health that would provide evidence that is indicative of the applicant's ability
14		to provide safe nursing care to the public.
15	(c) The number	of students enrolled in nursing courses shall not exceed by more than 10 students the maximum number
16	approved by the	Board <u>Board,</u> as defined in established pursuant to 21 NCAC 36 .0302(f) and 21 NCAC <mark>36 .0321(k) by</mark>
17	more than 10 st	udents. <u>.0321(k).</u>
18	(d) The nursin	g program shall publish policies in nursing student handbook and college catalog that provide for
19	identification ar	nd dismissal of students who:
20	(1)	present physical or emotional problems which conflict with the safety essential to nursing practice and
21		do not respond to treatment or counseling within a timeframe that enables meeting program objectives.
22		objectives;
23	(2)	demonstrate behavior which conflicts with the safety essential to nursing practice. practice; or
24	<u>(3)</u>	fail to demonstrate professional behavior, including honesty, integrity, and appropriate use of
25		social [media] media, while in the nursing program of study.
26	(e) The nursing	program shall maintain a three year three-year average at or above 95 percent of the national pass rate
27	for licensure lev	rel pass rate on first writing of the licensure examination for calendar years ending December 31.
28	(f) The control	ling institution shall publish policies in nursing student handbook and college catalog for transfer of
29	credits or for ad	mission to advanced placement placement and the nursing program shall determine the total number of
30	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. <u>December 1, 2016;</u> January 1, 2006; August 1, 1998; January 1, 1996; June 1, 1992;
35		January 1, 1989; January 1, 1984.

1	21 NCAC 36 .03	21 is amended, with changes, as published in NCR 31:01, pages 31-32, as follows:
2		
3	21 NCAC 36 .03	
4	(a) Nursing <u>The</u>	nursing program curriculum shall:
5	(1)	be planned by nursing program faculty;
6	(2)	reflect the stated program philosophy, purposes, and objectives pursuant to 21 NCAC 36.0302(a)(2);
7	(3)	be consistent with the Statutes Article 9A of G.S. 90 and the Rules in this Chapter governing the
8		practice of nursing;
9	(4)	define the level of performance required to pass each course in the curriculum;
10	(5)	enable the student to develop the nursing knowledge, skills and competencies abilities necessary for
11		the level, scope and competent practice consistent with the level of licensure and scope [in] all
12		applicable Rules as defined set forth in 21 NCAC 36 .0221, .0224, .0225, and .0231 consistent with
13		the level of licensure; and .0231;
14	(6)	include content in the biological, physical, social social, and behavioral sciences to provide a
15		foundation for safe and effective nursing practice. practice;
16	<u>(7)</u>	provide students the opportunity to acquire and demonstrate, through [theory] didactic content and
17		clinical experience under faculty supervision, the knowledge, skills, and abilities required for safe,
18		effective, and competent nursing practice across the lifespan; and
19	<u>(8)</u>	be revised as necessary to maintain a program that reflects changes and advances in health care and its
20		delivery.
21	(b) Didactic con	tent and supervised clinical experience across the lifespan appropriate to program type shall include:
22	(1)	Implementing safety principles and [practices,] practices minimizing risk of harm to clients
23	and prov	viders through both system effectiveness and individual performance;
24	(1)<u>(2)</u>	Using informatics to communicate, manage knowledge, mitigate error error, and support decision
25		making, <u>making;</u>
26	(2)(3)	Employing evidence-based practice to integrate best research with clinical expertise and client values
27		for optimal care, including skills to identify and apply best practices to nursing care by: care;
28	(A)<u>(4)</u>	providing Providing client-centered, culturally competent care; care by:
29		(B)(A) respecting client differences, values, preferences preferences, and expressed needs;
30		(C)(B) involving clients in decision-making and care management;
31		(D)(C) coordinating and managing continuous client care consistent with the level of licensure. This
32		includes <mark>demonstration of</mark> the <u>demonstrated</u> ability to supervise others and provide leadership
33		of the profession appropriate for program type; and
34		(E)(D) promoting healthy lifestyles for clients and populations.
35	(3)<u>(5)</u>	Working in interdisciplinary teams to cooperate, collaborate, communicate communicate, and
36		integrate client care and health promotion. promotion; and,

1 (4)(6)Participating in quality improvement processes to measure client outcomes, identify hazards and 2 errors, and develop changes in processes of client care. 3 (c) Clinical experience shall be comprised of sufficient hours to accomplish the curriculum, shall be supervised by qualified faculty pursuant to 21 NCAC 36 .0318 .0318, and shall ensure students' ability to practice at an entry level. 4 5 (d) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty. 6 (e) By January 1, 2008, a A focused client care experience with a minimum of 120 hours shall be provided in the final 7 year of curriculum implementation for programs preparing registered nurses. 8 (f) Beginning January 1, 2008, a A focused client care experience with a minimum of 90 hours shall be provided in the 9 final semester of the curriculum implementation for programs preparing practical nurses. 10 (g) Learning experiences and methods of instruction, including distance education methods, shall be consistent with the 11 written curriculum plan and shall demonstrate logical curricular progression. 12 (h) Objectives for each course shall indicate the knowledge and knowledge, skills, skills, and abilities expected of the 13 students. for competent student performance. These objectives shall be stated to: shall: 14 indicate the relationship between the classroom learning and the application of this learning in the (1)15 clinical laboratory experience; serve as criteria for the selection of the types of and settings for learning experiences; and 16 (2)17 (3)serve as the basis for evaluating student performance. 18 (i) Student course syllabi shall include a description and outline of of: 19 (1) the course content, content; 20 (2) the learning environments and activities, activities; 21 (3) when the course placement, is taken in the curriculum; 22 allocation of time, time for [theory,] didactic content, clinical experience, [laboratory,] (4)23 laboratory experience, and [simulation,] simulation; and, 24 (5) and methods of evaluation of student performance, including [didactic and] clinical all 25 evaluation tools. tools used in the curriculum. (j) Each course shall be implemented [and evaluated] in accordance with and evaluated by reference to the student 26 27 course syllabus. (k) Requests for approval of changes in, or expansion of, the program program, accompanied by all required 28 29 documentation documentation, shall be submitted on the form in the format provided by the Board at least 30 days prior 30 to implementation for approval by the Board. Criteria for approval include the availability of classrooms, laboratories, 31 clinical placements, equipment and supplies supplies, and faculty sufficient to implement the curriculum to an increased 32 number of students. Approval is required; required for any increase in enrollment that exceeds, by more than 10 students, 33 the maximum number approved by the Board. Requests for expansion are considered only for programs with Full 34 Approval status that demonstrate at least a three-year average student retention licensure examination pass rate equal to 35 or higher greater than the state <u>NC three-year</u> average retention pass rate for program type. 36 (1) The nursing education program shall notify the Board of: 37 (1)alternative or additional program schedules; and

1	(2)	planned decrease in the Board-approved student enrollment number to accurately reflect program
2		capacity.
3	(m) For all pro	grams using simulation experiences substituted for clinical experience time, the nursing education
4	program shall:	
5	(1)	demonstrate that simulation faculty have been formally educated, and maintain the
6	compet	encies in simulation and [debriefing theory;] debriefing; and
7	(2)	provide a simulation environment with adequate faculty, space, equipment, and supplies [to]
8	<u>that</u> sim	ulate realistic clinical experiences to meet the curriculum and course objectives.
9	(n) Programs no	t holding national nursing accreditation shall limit simulation experiences to no more than 25% in any
10	[course,] <u>course</u>	including the focused client care experience.
11	(o) Programs ho	lding national nursing accreditation shall limit simulation experiences to:
12	(1)	no more than 25% in the focused client care experience, and
13	(2)	no more than 50% of clinical experience time in any other course.
14	(p) External star	idardized examinations shall not be used as a determinant of a student's progression or graduation in a
15	[prelicensure] nu	rsing education [program.] preparing students for initial nurse licensure.
16		
17	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;
18		Eff. February 1, 1976;
19		Amended Eff. <u>December 1, 2016;</u> June 1, 1992; January 1, 1989; January 1, 1984;
20		Temporary Amendment Eff. October 11, 2001;
21		Amended Eff. December 1, 2005; August 1, 2002.

1	21 NCAC 36 .0322 is amended, with changes, as published in NCR 31:01, pages 32-33, as follows:		
2			
3	21 NCAC 36 .03	322 FACILITIES	
4	(a) Campus faci	lities shall be appropriate in type, number, and accessibility for the total needs of the program.	
5	(b) Classrooms,	laboratories, [laboratory/simulation] laboratory and simulation space, and conference rooms shall be	
6	sufficient in size	e, number, and types for the number of students and purposes for which the rooms are to be used.	
7	Lighting, ventila	tion, location, and equipment must be suitable for the number of students and purposes for which the	
8	rooms are to be u	used.	
9	(c) Office and conference space for nursing program faculty members shall be appropriate and available for		
10	uninterrupted work and privacy privacy, including conferences with students.		
11	(d) Learning resources, including clinical experiences, shall be comprehensive, current, developed with nursing faculty		
12	input, accessible	to students and faculty faculty, and support the implementation of the curriculum.	
13			
14	History Note:	Authority G.S. 90-171.23(b)(8); 90-171.38;	
15		<i>Eff. February 1, 1976;</i>	
16		Amended Eff. <u>December 1, 2016;</u> January 1, 1996; June 1, 1992; January 1, 1989; May 1, 1988;	
17		Temporary Amendment Eff. October 11, 2001;	
18		Amended Eff. April 1, 2006; August 1, 2002.	

1 2 21 NCAC 36 .0323 is amended, with changes, as published in NCR 31:01, pages 33, as follows:

- 3 21 NCAC 36 .0323 RECORDS AND REPORTS
 - 4 (a) The controlling institution's publications describing the nursing program shall be accurate.
 - 5 (b) There shall be a system for maintaining official records. Current and permanent student records shall be stored
 - 6 in a secure manner that prevents physical damage and unauthorized access.
 - 7 (c) Both permanent and current records shall be available for review by Board staff.
 - 8 (d) The official permanent record for each graduate shall include documentation of graduation from the program
 - 9 and a transcript of the individual's achievement in the program.
 - 10 (e) The record for each <u>currently</u> enrolled student shall contain up-to-date and complete information, including the
- 11 following:
- 12 (1) documentation of admission criteria met by the student;
- (2) <u>documentation of</u> high school graduation, high school equivalent, or earned credits from
 post-secondary institution approved pursuant to G.S. 90-171.38(a); and
- (3) <u>a</u> transcript of credit hours achieved in the classroom, laboratory, and clinical instruction for each
 course that reflects progression consistent with program policies.
- (f) The nursing program shall file 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 (1) an Annual Report to be filed with the Board by November 1 of each year;
- 20 (2) a Program Description Report for non-accredited programs filed with the Board at least 30 days
 21 prior to a scheduled review; review by the Board; and
- (3) notification by institution administration of any change of the registered nurse responsible for the nursing program. This notification shall include a <u>curriculum</u> vitae for the new individual and shall be submitted within no later than 20 10 business days of the effective date of the change.
- (g) All communications relevant to accreditation shall be submitted to the North Carolina Board of Nursing at the
 same time that the communications are submitted to the accrediting body.
- (h) The Board may require additional records and reports for review at any time to provide evidence and
 substantiate compliance with the rules in this Section by a program and its associated agencies. controlling
 institutions.
- 30 (i) The part of the application for licensure by examination to be submitted by the nursing program shall include a
 31 statement verifying satisfactory completion of all requirements for graduation and the date of completion. The
- 32 nursing program director shall submit the [online] verification form verify completion of requirements to the Board
- 33 within no later than one-month [10 business days] following completion of the [graduation from a] [Board approved]
- 34 <u>Board-approved nursing program.</u>
- 35

36 History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;
37 Eff. February 1, 1976;

 1
 Amended Eff. December 1, 2016; January 1, 2015; December 1, 2005; January 1, 2004; June 1,

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 1992; January 1, 1989; January 1, 1984.