

**WEST VIRGINIA BOARD OF EXAMINERS FOR
REGISTERED PROFESSIONAL NURSES**

**ON SITE SURVEY VISIT
GUIDE**



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WEST VIRGINIA BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES

MISSION

The Mission of the West Virginia Board of Examiners for Registered Professional Nurses (WV RN Board) is to promote and protect public health, safety, and welfare through the regulation of registered professional nurses and dialysis technicians.

GOALS AND OBJECTIVES

In accordance with WV Code §30-7-1 et seq. the Board will:

1. Abide by the WV RN Board Code of Conduct and the Open Governmental Meetings Act.
2. Prescribe standards and approve educational programs preparing persons for licensure to practice registered professional nurses and dialysis technicians.
3. Validate the initial and continuing competence of the registered professional nurse
4. Define the scope of practice for registered professional nursing, advanced practice Nurses and dialysis technicians.
5. Deliver a disciplinary process if licensee actions constitute professional misconduct subject to disciplinary action.
6. Support the mission of the West Virginia Center for Nursing
7. Coordinate the nurse health program, including WV Restore.

STATUTORY HISTORY

The Board of Nursing is mandated under Chapter 30 – Article 7 of the West Virginia Code.

PERFORMANCE MEASURES

1. Conduct scheduled and/or follow-up on site visits to nursing education programs.
2. Standardize RN licenses processes and convert to an online format with a third party working in partnership with the state of West Virginia for the following: initial, endorsement, reinstatement and renewal.
3. Provide educational information to registered nurses, dialysis technicians, nursing education programs, employers and the public as needed or requested.
4. Investigate Professional Misconduct and administer discipline according to West Virginia Code and Rules.
5. Implement the enhanced Nurse Licensure Compact, NURSYS and the Optimal Regulatory Board System in collaboration with the National Council of the State Boards of Nursing.
6. Appraise Information Technology infrastructure needs and make recommendations for improvements.
7. Evaluate the effectiveness of the nurse health program and WV Restore.
8. Establish a Practice Committee for discussion of practice issues.

APPROVAL VISIT PURPOSE, SCHEDULING AND RESPONSIBILITIES

Purpose

The purpose of the on-site survey visit is to supplement the self-evaluation report submitted by the nursing education program so that the Board will have a clear and complete picture of the program. It is the responsibility of the visitors to clarify, verify and amplify the data prepared by the program, to seek additional information that may be pertinent to the Board's evaluation, to assess the effectiveness of the program's activities in relation to its own objectives, the West Virginia Code and Rules pertaining to nursing education programs preparing students for initial licensure, and to delineate the major strengths and weaknesses of the program as they relate to specific criteria.

Scheduling

Board Staff sends the approval report with instructions as well as contacts the nurse administrator of the nursing program to be visited to establish a date for the on-site survey visit. Once the date is determined, visitors will be notified. The self-evaluation is due to the office four weeks prior to the scheduled on-site survey visit. Once received, the self-evaluation including supporting information will be sent to each visitor for review prior to the scheduled date for the on-site survey visit.

Visitor Responsibilities

Each visitor is expected to:

- Decline the role of visitor if she/he has previously served in the capacity of consultant to the nursing education program being visited;
- Be knowledgeable about the approval requirement as set forth in West Virginia Code and Rule;
- Be thoroughly conversant with the self-evaluation and supporting materials;
- Maintain objectivity during the visitation, considering each aspect of the program only in terms of the philosophy and objectives set forth by the nursing education program and West Virginia Code and Rule;
- Develop relationships that will encourage the faculty to continue self-evaluation and program improvement;
- Assume responsibility for individual activities necessary to clarify, verify and amplify aspects of the nursing education program;
- Contribute to the content and participate in writing the on-site survey visit report;
- Participate in the final conference with the nurse administrator of the nursing education program and assist in reading and interpretation of the on-site survey visit report.

CONFIDENTIALITY OF APPROVAL INFORMATION

All data, observations, conversations, conclusions, reports and minutes relating to approval activities of the Board are confidential. Acceptance of an invitation to be a visitor constitutes a contractual agreement to safeguard the confidentiality of approval data. Therefore, observations made during the visit, the self-evaluation report, the visitor's on-site survey report and all other communication between the nursing education program and the visitors are confidential.

It is therefore essential that visitors do not divulge any information from these sources. It is also important to avoid leaving materials where they may be read by others and to refrain from discussing observations made during the visit or the findings with anyone.

The final report submitted to the Board is public information. Interested persons may attend the committee or Board meeting during which the report is reviewed or submit a written request for a copy of the final report.

Signature of Visitor

Date

TRAVEL EXPENSES

Expenses incurred by the visitor will be reimbursed by the Board based on the West Virginia travel reimbursement policy. Vendor contracts and travel forms with receipts must be received by the Board Staff processing the travel expenses within three (3) weeks of the visit.

WEST VIRGINIA CODE OF LEGISLATIVE RULES

19CSR1 Policies and Criteria for the Evaluation and Accreditation
of Colleges, Departments or Schools of Nursing

*TITLE 19
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF EXAMINERS
FOR REGISTERED PROFESSIONAL NURSES*

*SERIES 1
POLICIES , STANDARDS AND CRITERIA FOR THE EVALUATION AND ACCREDITATION
OF COLLEGES, DEPARTMENTS OR SCHOOLS OF NURSING*

§19-1-1. General.

1.1. Scope. -- This rule establishes the policies and standards criteria for the evaluation and accreditation of colleges, departments or schools of nursing.

1.2. Authority. -- W. Va. Code §§30-7-4 and 30-1-4.

1.3. Filing Date. -- March 23, 2018.

1.4. Effective Date. -- March 23, 2018.

1.5. Sunset Provision. -- This rule shall terminate and have no further force or effect on March 23, 2023.

§19-1-2. Definitions.

These words and terms mean the following:

2.1. "Accredited college, department or school of nursing" means a college, department or school which meets the requirements of W. Va. Code §30-7-1 et seq, this rule, and any other applicable laws and rules. For purposes of considering applications for licensure, the Board may recognize nursing education programs accredited or approved by a comparable Board or other recognized authority in another jurisdiction.

2.2. "Administrator employment time" means the devotion of 80% time to school administrative duties. The administrator of the nursing program's teaching responsibilities is not to exceed 6 academic semester credits per year, no more than 3 academic credits per semester.

2.3. "Associate degree program in nursing" means a program conducted by a college or university that leads to an associate degree with a major in nursing.

2.4. "Baccalaureate degree program in nursing" means a program conducted by a college or university and leads to a baccalaureate degree with a major in nursing.

2.5. "Board" means the West Virginia board of examiners for registered professional nurses.

2.6. "Clinical Preceptor" means a registered professional nurse who:

2.6.a. is currently licensed as a registered professional nurse in good standing in the state in which he or she is providing the preceptorship with education preparation at or above the level for which the student is preparing;

2.6.b. has a minimum of 2 years of experience as a registered professional nurse providing direct patient care during the 5 years immediately preceding the date of the written agreement;

2.6.c. has a philosophy of health care congruent with that of the nursing program; and,

2.6.d. has current knowledge of nursing practice at the registered professional nurse level.

2.7. "College", "Department" or "School" mean a nursing education unit charged with responsibility to prepare its graduates for practice as registered professional nurses, qualified to meet licensing requirements in West Virginia. This nursing education unit may have multiple programs and may be structured in a university, college or hospital.

2.8. "Credit hour" means that credit assigned for 1 hour of lecture per week, or 2 to 4 hours of lab per week, per semester.

2.9. "Curriculum" means a planned nursing educational experience based on the philosophy, mission, goals and outcomes of the nursing education program. The curriculum will include clinical assignments to meet the objectives of each nursing course.

2.10. "Diploma program" means a program which is usually, but not necessarily, conducted by a hospital and leads to a diploma in nursing.

2.11. "Distance education" means a formal educational process in which the majority of the instruction in a course/program occurs when instructors and students are not physically in the same location. The educational process may use various methodologies for communication, instruction, and evaluation.

2.12. "Generic Masters degree program" means a program conducted by a university and leads to a masters degree in nursing for individuals preparing for initial licensure as a registered professional nurse.

2.13. "Governing organization" means the university, college, or other organization of which the nursing education unit is an integral part.

2.14. "Graduation" means the candidate has satisfied all requirements of the college, department or school of nursing granting the diploma or degree.

2.15. "New program" means any education program planning to prepare individuals for initial licensure that has not been accredited by the Board. This includes but is not limited to diploma, associate, baccalaureate, generic masters, second degree programs, accelerated programs, cohorts, sites, distance education through technology, Internet or web-based programs.

2.16. "Part-time faculty" means faculty employed by the nursing education program in a position with fewer hours than the organization's definition of full-time faculty status.

2.17. "Provisionally accredited college, department or school of nursing" means a college, department or school of nursing which either has been temporarily approved but has not been in operation long enough to qualify for full accreditation, or one which fails to meet the requirements of the law and of the Board, and has

received notification of its deficiencies.

2.18. "Recommendations" means suggestions for the guidance of colleges, departments or schools of nursing in the development of their programs.

2.19. "Recommendation for admission to the licensure examination for registered professional nurses" means a written statement required in order to take the license examination. The applicant must be recommended to the Board by a faculty member of the program. This recommendation is based on satisfactory completion of the program.

2.20. "Renewal of accreditation" means continuation of accreditation based on survey visits, conferences, correspondence, and contents of the annual report during the reporting period and is granted for a time period determined by the Board.

2.21. "Requirements" means mandatory conditions which a college, department or school of nursing must meet in order to be accredited.

2.22. "Scheduled on-site visit" means the on-site accreditation visit occurring as part of the ongoing accreditation process of the nursing education unit.

2.23. "Standards" means a standard prescribed by the Board for educational programs preparing persons for licensure to practice registered professional nursing as per §30-7-7.(b).

§19-1-3. Purposes of Accreditation.

3.1. The purposes of accreditation include:

3.1.a. Protection of the public through evaluation of pre-service professional nursing education programs in terms of the criteria set forth in this rule;

3.1.b. Improvement in the quality of nursing service through the improvement of professional nursing education;

3.1.c. Guidance of prospective students in the selection of approved professional nursing education programs; and

3.1.d. Assurance of eligibility to take the state licensing examination and to apply for state licensure to graduates of state accredited nursing programs.

§19-1-4. Application for Legal Accreditation.

4.1. The application fee for establishing a new program and to receive legal accreditation of a professional nursing education program and initial on-site visit is fifty dollars (\$50). A governing institution that plans to establish a new nursing education program for the preparation of practitioners of registered professional nursing shall complete and submit such application for accreditation to the Board a minimum of 6 months in advance of the expected opening date:

4.1.a. a letter of intent identifying the governing institution, the type of nursing education program, and the status of approval from accrediting bodies and state agencies.

4.1.b. documentation that demonstrates the potential to meet all standards identified in this rule;

4.1.c. verification that a qualified nursing program administrator meeting the requirements of this rule is employed to develop the nursing program;

4.1.d. verification of availability of qualified nursing faculty to support the proposed numbers of student admissions to the new nursing education program; and

4.1.e. a curriculum plan that complies with the standards identified in §19-1-14.

4.2. A survey may be conducted to amplify, clarify, and verify information in the application.

4.3 If all standards for accreditation are met, the program shall receive provisional accreditation.

4.4. Following receipt of the first calendar year report of performance of graduates on the national licensure examination, the Board shall conduct a survey to determine if all standards for approval of a nursing education program have been met. The Board may:

4.4.a. grant full accreditation if standards of a nursing education program are met;

4.4.b. continue provisional approval and provide to the governing institution and nursing program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct deficiencies.

§19-1-5. Accreditation of Education Unit.

5.1. Visits and surveys. The Board, through its executive secretary and staff or other qualified persons, shall periodically survey all nursing education programs accredited by the Board, including all satellite sites of any program.

5.2. Maintenance of accreditation standards. The nursing education unit shall maintain accreditation standards as set forth in this rule. The nursing education unit shall submit to the Board a copy of the national accreditation report, recommendations and final decision for each national accreditation visit once received by the program within 10 days of the program's receipt of the report.

5.3. Program visits, in addition to regularly scheduled visits, shall be conducted more frequently if:

5.3.a. there is a concern regarding the school's compliance with standards for nursing education programs;

5.3.b. the director of the nursing program changes;

5.3.c. a major curriculum change is proposed; and/or

5.3.d. a complaint has been submitted to the Board.

5.4. Accreditation of an existing program when ownership and control are changed. When a governing organization contemplates a change of ownership and control of a program, it shall send notice of the intended change to the Board 90 days prior to the effective date of the intended change. The owner or governing organization expecting to assume responsibility for the program shall immediately make application for accreditation. If the Board is satisfied the owner or governing organization which will be responsible for the new program meets the criteria for accreditation and will comply with the recommendations of the Board, it may be provisionally accredited.

5.5. Delivery of instruction by distance education methods shall enable students to meet the goals, competencies, and objectives of the educational program and standards of the Board, including supervised clinical learning experiences.

5.6. A distance-learning program shall establish a means for assessing individual student and program outcomes.

5.7. A nursing education program based outside the state of West Virginia desiring to have students in a clinical facility in West Virginia shall:

5.7.a. notify the Board, in writing, 30 days in advance of the clinical learning experience for Board approval:

5.7.a.1. name of student, including license number if student is licensed in West Virginia;

5.7.a.2. name and license number of clinical supervisor;

5.7.a.3. name and location of the clinical facility;

5.7.a.4. name and license number of the nursing faculty responsible for the evaluation and oversight of the student's clinical learning experiences;

5.7.a.5. submit documentation verifying the program has accreditation by the residing state board of nursing or national nursing accreditation body;

5.7.a.6. comply with all standards of the rule including those related to clinical supervision of student learning experiences. The Board may request periodic report for the purpose of data collection or to determine compliance with the provisions of this rule.

5.8. Expansion of a program requires approval from the Board. Only those programs with full accreditation status may submit requests to the Board to initiate expansion of a program.

§19-1-6. Loss of Accreditation.

6.1. Loss of accreditation through failure to meet standards. The Board may withdraw accreditation from any nursing education program which fails to meet legal and educational requirements or Board standards to the satisfaction of the Board within a reasonable time period as determined by the Board. The program shall be removed from the list of Board -approved professional nursing education programs. The Board shall notify the administrator of the nursing education unit in writing of deficiencies in the nursing education program.

6.1.a. Factors jeopardizing program accreditation status include but may not be limited to:

6.1.a.1. deficiencies in compliance with this rule;

6.1.a.2. utilization of students to meet staffing needs in health care facilities;

6.1.a.3. noncompliance with school's stated philosophy/mission, program design, objectives/outcomes, and/or policies;

6.1.a.4. continual failure to submit records and reports to the Board office within designated time frames;

6.1.a.5. failure to provide sufficient variety and number of clinical learning opportunities for students to achieve stated objectives/outcomes;

6.1.a.6. failure to comply with Board requirements or to respond to Board recommendations within a specified time;

6.1.a.7. student enrollments without sufficient faculty, facilities and/or patient census;

6.1.a.8. failure to maintain at least 80% passing rate on the licensure examination by first-time candidates;

6.1.a.9. failure of the program dean or director to document annually the currency of faculty licenses;

6.1.a.10. failure to maintain adequate budget to meet the needs of the program; or

6.1.a.11. other activities or situations that demonstrate to the Board that a program is not meeting legal requirements and standards.

6.2. Loss of accreditation through change of organization. When a program changes ownership or control, the Board shall automatically withdraw accreditation. The new owner or organization shall comply with the provisions of subsection 5.3. of this rule to continue the nursing education program.

6.3. Provisional accreditation for failure to meet standards. At the Board's discretion, it may grant provisional accreditation to a nursing education program during the time in which it takes corrective action in order to meet the accreditation standards set forth in this rule.

6.4 Any professional nursing school having a 20% or higher failure rate on the national licensure examination, shall receive a warning from the Board. If changes, correction and/or adjustment relative to faculty, facilities, student admission, curriculum content, and/or methods of teaching are not initiated within a specified time and such action approved by the Board, the Board may impose additional requirements or restrictions on the program.

§19-1-7. Closing of a Program.

7.1. The governing organization shall advise the Board in writing of the intent to close a nursing education program at least 6 months prior to the planned closing date. The governing organization shall submit a plan for safeguarding the quality of instruction and practice during the closing period.

7.2. The governing organization shall ensure that all standards for nursing education programs are maintained and all necessary courses are taught until the last student is transferred or graduated.

7.3. The governing institution shall secure and provide for the permanent custody and storage of records of students and graduates. The Board shall be notified of the location and method of retrieving information from these records.

7.4. At the Board's discretion, it may request additional information and plans for the closing of a nursing education program and the transfer of students and records.

7.5. The Board shall automatically withdraw accreditation of the program on the day the last student completes curriculum requirements of the program that is closing.

§19-1-8. Reports.

8.1. The nursing education unit shall submit an annual report to the Board by September 1 of each year for each nursing program accredited by the Board. Data included in this annual report shall be determined by the Board, and shall include, but not be limited to, statistical data, faculty data, faculty qualifications information, plans for the next academic year, student enrollment data, faculty workload data and a brief evaluation statement.

8.2. The nursing education unit shall submit a self-study or program evaluation report to the Board one month prior to a scheduled on-site visit to the nursing education program. The Board shall determine the format and guidelines for the submission of this report

8.3. A university, college, or hospital desiring to initiate a new nursing education program shall complete a needs assessment report for submission to the Board at least one month prior to a scheduled Board meeting. The Board shall determine the format and guidelines for submitting this report.

8.4. A nursing education unit desiring to implement a substantial change to the nursing education program shall submit its request to the Board one month prior to a scheduled Board meeting. The nursing education unit shall not implement a substantial change to a nursing education program prior to receiving permission to do so by the Board.

8.5. At the Board's discretion, it may request additional reports from a nursing education unit to include, but not be limited to, written plans for improving licensure examination pass rates of graduates and progress reports.

§19-1-9. Mission and Goals/Outcomes of the Nursing Education Unit.

9.1. The mission or philosophy and goals or outcomes of the nursing education unit shall be clearly stated, periodically reviewed by nursing faculty, and consistent with those of the governing organization.

9.2. Implementation through an adequate program. The nursing education unit shall accomplish its stated goals or outcomes.

§19-1-10. Organization and Administrative Control of the Nursing Education Unit.

10.1. The nursing education unit in the governing organization.

10.1.a. Organization of the nursing education unit. The organization pattern of the nursing education unit shall be comparable to that of other like education units in the governing organization. The nursing education unit shall make a chart showing the structure of the nursing education unit, its relationship to administration, and with other education units available to the Board upon request.

10.1.b. Budget of the nursing education unit. The budget of the nursing education unit shall be part of the budget of the governing organization. The administrator of the nursing education unit has input into the preparation, presentation and is responsible for the administration of the budget for the nursing education unit. The administrator of the nursing program has input into the budget and it shall be adequate to achieve the mission of the nursing education unit.

10.1.b.1. Financial support for faculty, equipment, supplies and services shall be adequate to achieve the outcomes of all nursing programs within the nursing education unit.

10.1.b.2. Secretarial and other support services shall be sufficient to accomplish the goals and

expected outcomes of all nursing programs within the nursing education unit.

10.1.c. Administration of the nursing education unit. The nursing education unit shall be administered by a nurse who (a) holds a graduate degree with a major in nursing, (b) has 5 years professional nursing experience, 2 years of which were teaching in a professional nursing program, and c) holds a license as a registered professional nurse in the state of West Virginia. In addition, qualifications are comparable to those qualifications required of other faculty in the governing organization. The administrator of the nursing education unit is responsible for the following:

10.1.c.1. Providing leadership for faculty and staff;

10.1.c.2. Developing and maintaining relationships with local, state, regional, and national agencies involved in professional nursing or nursing education;

10.1.c.3. Establishing and maintaining liaison with the central administration and other departments of the governing organization;

10.1.c.4. Preparing and administering the budget;

10.1.c.5. Facilitating faculty development and conducting performance reviews;

10.1.c.6. Recommending faculty for appointment, promotion, tenure and retention; and

10.1.c.7. Notifying the Board of any major changes in the nursing education program or its administration.

10.1.d. Agreements with an agency or agencies for clinical practice experiences. There shall be a written agreement between the governing organization and the agency or agencies which provide clinical education experiences for students.

§19-1-11. Faculty of the Nursing Education Unit.

11.1. Nursing faculty members, both full and part-time shall be academically and professionally qualified and shall:

11.1.a. Have a graduate degree with a major in nursing;

11.1.a.1. The Board may grant an exception to the requirements in subdivision 11.1.a. of this rule for faculty members who:

11.1.a.1.A. Have a bachelor degree with a major in nursing and are admitted and enrolled in a graduate degree program with a major in nursing within 1 year of employment in the faculty position;

11.1.a.1.B. Have qualifications other than those set forth in this subsection which are acceptable to the Board.

11.1.b. Have evidence of current experience in nursing practice and education sufficient to demonstrate professional competence. For faculty with less than two years experience in education, the nursing program administrator will submit to the Board mentoring and orientation plans as defined by Board guidelines and function under the guidance of a faculty member fully qualified in the specific teaching area and professional competence; and

11.1.c. Have credentials which verify status as a registered professional nurse in West Virginia.

11.2. Reports on faculty qualifications. The nursing education unit shall submit to the Board a record of the qualifications of each faculty member with the program annual report.

11.3. Conditions of nursing faculty employment. Faculty policies of the nursing education unit shall be nondiscriminatory and consistent with that of the governing organization. Faculty policies which differ from the governing organization shall be justified by the nursing education unit goals. The policies shall be written, implemented and available to faculty and to the Board upon request.

11.4. Assignment and workload of nursing faculty. The governing organization shall hire and maintain sufficient faculty with the experience and competence in the respective specialties of nursing education to accomplish the goals or outcomes of the nursing education unit. Assignment and workload shall be consistent with the governing institution and includes clinical lab. Workload should provide for regeneration, reflection and wellness opportunities for nursing faculty. Factors to be included but not limited to when establishing the ratio of faculty to students should include:

- 11.4.a. the students' level of knowledge/skill;
- 11.4.b. course objectives;
- 11.4.c. acuity level of clients;
- 11.4.d. affiliating agency's goal and priorities;
- 11.4.e. percentage of temporary personnel staffing;
- 11.4.f. physical layout of facility;
- 11.4.g. current usage by other affiliating students; and
- 11.4.h. the Board's standards.

11.5. Organization of nursing faculty. The nursing faculty shall organize under its own governing rules, and meet regularly. Students shall have opportunities to participate in meetings of the faculty organization. The nursing education unit shall maintain minutes of meetings recorded and shall maintain minutes on file. The nursing education unit shall provide evidence of part time faculty participation in governance and communication within the nursing education unit.

11.6. Malpractice insurance for nursing faculty. The faculty shall have liability insurance for clinical practice required in nursing education courses.

§19-1-12. Students in the Nursing Education Unit.

12.1. The nursing education unit shall base the selection and admission of students on established criteria, and be consistent in the recruitment and admission of students, and shall determine student enrollment by the clinical and teaching facilities available and by the numbers of nursing faculty. Enrollment into the nursing education program may not increase if the program does not have full accreditation by the Board. An increase in enrollment of greater than 10 % must have prior approval by the Board.

12.1.a. Requirements for admission. A high school diploma or general education development (G.E.D.) certificate is required for admission to any nursing education program. Requirements for admission shall be consistently applied throughout the program. Changes in requirements shall be communicated to the

students in a reasonable timeframe.

12.1.b. Transfer or readmission of students. The nursing faculty members shall establish policies for students requesting readmission or admission by transfer from another university, college, or hospital's nursing education program. Requirements for transfer and readmission shall be consistently applied throughout the program. Changes in requirements shall be communicated to the students in a reasonable time frame.

12.2. Student policies. Policies concerning students shall be clearly stated in the student handbook and/or catalog of the governing organization. There shall be evidence of communication of policies of the governing institution and nursing education program to the students. Changes in requirements shall be communicated to the students in a reasonable time frame.

12.3. Liability insurance for students. Students shall be covered by liability insurance for clinical practice.

12.4. Students shall adhere to the standards for professional conduct as stated in the Board's rule, Standards for Professional Nursing Practice, 19CSR10, and are subject to disciplinary action by the Board for acts of professional misconduct as defined in the Board's rule, Professional Misconduct, 19CSR3.

§19-1-13. Curriculum.

13.1. The curriculum of each nursing education program within the nursing education unit shall be based on the philosophy or mission and goals or outcomes of the nursing education unit.

13.1.a. The curriculum shall incorporate the concepts of nursing process and the standards for nursing practice as defined in the Board's rule, Standards for Professional Nursing, 19CSR10. Clinical assignments shall be designed to meet the objectives of each nursing course. Faculty shall provide evidence of ongoing review and updating of instructional materials, lecture notes, handouts and resources provided to students to ensure students receive current information and standards of practice.

13.1.b. Curricula for programs offering the diploma, the associate degree, baccalaureate degree, generic masters, accelerated programs, cohorts, sites, or distance education in nursing shall include theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process.

13.2. The nursing courses shall be supported by courses which meet the requirements of the governing organization, including biological, physical and behavioral science courses.

§19-1-14. Resources, Facilities, and Services.

14.1. The nursing education unit shall provide adequate teaching facilities to accomplish the goals or outcomes of the nursing education programs. These shall include well-equipped classrooms, conference rooms, libraries, laboratories and offices for faculty members.

14.2. Comprehensive and current library resources, computer facilities, laboratory and other learning resources shall be available and accessible. The nursing faculty shall have input into the development and provision of learning resources.

14.3. The resources, facilities and services of the governing organization shall be available to and used by the nursing education unit.

14.4. The hospitals or other health care facilities and services utilized for clinical learning experiences shall be adequate in number and kind to meet program goals or outcomes. A preceptor serves as a role model and resource to students in the clinical setting in conjunction with a faculty member.

§19-1-15. Evaluation of the Nursing Education Unit.

15.1. The nursing education unit shall have an ongoing systematic evaluation of all program components which is used for development, maintenance and revision of the program. The evaluation shall include but not be limited to curriculum content review and test review.

15.2. The evaluation plan shall include measurable outcomes, e.g., licensure examination passage rate, employment patterns, graduation rates and attrition.

TITLE 19
LEGISLATIVE RULES
WEST VIRGINIA BOARD OF EXAMINERS FOR
REGISTERED PROFESSIONAL NURSES

SERIES 3
REQUIREMENTS FOR REGISTRATION AND LICENSURE AND CONDUCT
CONSTITUTING PROFESSIONAL MISCONDUCT

§19-3-1.General.

1.1. Scope. -- This rule establishes the requirements for registration and licensure of a registered professional nurse and describes behavior which constitutes professional misconduct subject to disciplinary action.

1.2. Authority. -- W. Va. Code §30-7-4.

1.3. Filing Date. -- May 2, 2017.

1.4. Effective Date. -- May 2, 2017.

1.5. Sunset date. -- This rule will terminate and have no further force or effect on May 2, 2027.

§19-3-2. Definitions.

The following words and phrases as used in this rule have the following meanings, unless the context requires otherwise:

2.1. "Certificate of registration" means a document issued by the board upon original licensure by examination in West Virginia;

2.2. "Direct supervision" means the activity of a registered professional nurse with an unencumbered license in West Virginia being present at all times in the same assigned physical work area as the person being supervised.

2.3. "Good professional character" means the integrated pattern of personal, academic and occupational behaviors which, in the judgment of the board, indicates that an individual is able to consistently conform his or her conduct to the requirements of W.Va. Code § 30-7-1 et seq., the board's rules and generally accepted standards of nursing practice including, but not limited to, behaviors indicating honesty, accountability, trustworthiness, reliability and integrity.

2.4. "Impaired" means the condition of a licensee whose performance or behavior is altered through the use of alcohol, drugs, or other means.

2.5. "Licensure card" means the wallet-sized document issued ~~annually~~ to indicate ~~current~~ registration or re-registration.

2.6. "National Council Licensure Examination" (NCLEX-RN) means the licensure examination for registered nurses which is owned and controlled by the National Council of State Boards of Nursing.

2.7. "Structured treatment program" means a program for physical, psychological, social and/or spiritual rehabilitation, if the program has been expressly approved by the board.

2.8. "Temporary permit" means a permit authorizing the holder to practice registered professional nursing in this state until the permit is no longer effective or the holder is granted a license by the board. The holder of a temporary permit is subject to all provisions of W. Va. Code §30-7-1 et.seq., and all other relevant sections of the West Virginia Code and rules promulgated by the board.

§19-3-3. Application for Examination.

3.1. Qualifications for application

3.1.a. Applicants educated in the United States or United States Territory shall:

3.1.a.1. have completed an approved four-year high school course of study or an equivalent course of study, as determined by the appropriate educational agency;

3.1.a.2. be of good moral character;

3.1.a.3. have completed the basic curriculum in a program in nursing education approved by the board, or in a school accredited or approved by a comparable board or other recognized authority in another jurisdiction. He or she must hold a diploma from that school and be recommended to the board by the faculty of the school of nursing; and,

3.1.a.4. The applicant shall submit to a state and a national electronic criminal history records check for the purpose of determining whether the applicant has been charged with, indicted for, or convicted of a crime that may have bearing upon the applicant's fitness to hold a license.

3.1.a.4.A. The criminal history records checks shall be based on fingerprints submitted to the West Virginia State Police or its assigned agent for forwarding to the Federal Bureau of Investigation.

3.1.a.4.B. The applicant shall meet all requirements necessary to accomplish the state and national criminal history record check, including:

3.1.a.4.B.1. Submitting fingerprints for the purposes set forth in this subsection; and,

3.1.a.4.B.2. Authorizing the board, the West Virginia State Police and the Federal Bureau of Investigation to use all records submitted and produced for the purpose of screening the applicant for a license.

3.1.a.4.B.3. Paying for actual costs of the fingerprinting and criminal history record check.

3.1.a.4.C. The criminal history records required by this paragraph must have been completed within the twelve (12) months immediately before the application is filed with the board.

3.1.a.4.D. The board may require the applicant to obtain an electronic criminal history records check from a similar agency in the state of the technician or applicant's residence, if outside of West Virginia.

3.1.a.4.E. To be qualified for licensure, the results of the criminal history records checks must be unremarkable and verified by a source acceptable to the board other than the applicant.

3.1.a.4.F. The board may deny licensure or certification to any applicant who fails or refuses to submit the criminal history records checks required by this subsection.

3.1.a.4.G. The results of the state and national criminal history record check may not be released to or by a private entity except:

3.1.a.4.G.1. To the individual who is the subject of the criminal history record check;

3.1.a.4.G.2. With the written authorization of the individual who is the subject of the criminal history record check; or

3.1.a.4.G.3. Pursuant to a court order.

3.1.a.4.H. The criminal history record check and related records are not public records for the purposes of chapter twenty-nine-b of this code.

3.1.b. Applicants seeking licensure as veterans in lieu of the educational qualifications specified in subdivision 3.1.c. of this rule, and qualifying under W. Va. Code §30-24-1 et seq. an applicant who is a veteran shall:

3.1.b.1. have completed an approved four-year high school course of study or an equivalent course of study, as determined by the appropriate educational agency;

3.1.b.2. be of good moral character;

3.1.b.3. have served on active duty in the medical corps of any of the armed forces of the United States for at least one (1) year within the three (3) year period immediately preceding the date of application and have successfully completed the course of instruction required to qualify her or him for rating as a medical specialist advanced, medical service technician or advanced hospital corpsman technician, or other equivalent rating in her or his particular branch of the armed forces;

3.1.b.4. be honorably discharged from military service; and,

3.1.b.5. The applicant shall submit to a state and a national electronic criminal history records check for the purpose of determining whether the applicant has been charged with, indicted for, or convicted of a crime that may have bearing upon the applicant's fitness to hold a license.

3.1.b.5.A. The criminal history records checks shall be based on fingerprints submitted to the West Virginia State Police or its assigned agent for forwarding to the Federal Bureau of Investigation.

3.1.b.5.B. The applicant shall meet all requirements necessary to accomplish the state and national criminal history record check, including:

3.1.b.5.B.1. Submitting fingerprints for the purposes set forth in this subsection; and,

3.1.b.5.B.2. Authorizing the board, the West Virginia State Police and the Federal Bureau of Investigation to use all records submitted and produced for the purpose of screening the applicant for a license.

3.1.b.5.B.3. Paying for actual costs of the fingerprinting and criminal history record check.

3.1.b.5.C. The criminal history records required by this paragraph must have been completed within the twelve (12) months immediately before the application is filed with the board.

3.1.b.5.D. The board may require the applicant to obtain an electronic criminal history records check from a similar agency in the state of the technician or applicant's residence, if outside of West Virginia.

3.1.b.5.E. To be qualified for licensure, the results of the criminal history records checks must be unremarkable and verified by a source acceptable to the board other than the applicant.

3.1.b.5.F. The board may deny licensure or certification to any applicant who fails or refuses to submit the criminal history records checks required by this subsection.

3.1.b.5.G. The results of the state and national criminal history record check may not be released to or by a private entity except:

3.1.b.5.G.1. To the individual who is the subject of the criminal history record check;

3.1.b.5.G.2. With the written authorization of the individual who is the subject of the criminal history record check; or

3.1.b.5.G.3. Pursuant to a court order.

3.1.b.5.H. The criminal history record check and related records are not public records for the purposes of chapter twenty-nine-b of this code.

3.1.c. Applicants educated outside the United States or United States Territory shall:

3.1.c.1. have completed an approved four-year high school course of study or an equivalent course of study, as determined by the appropriate educational agency;

3.1.c.2. be of good moral character;

3.1.c.3. submit a copy of the certificate issued by the commission on graduates of foreign nursing schools (CGFNS), as specified in the board's rule, Qualification of Graduates of Foreign Nursing Schools for Admission to the Professional Nurse Licensing Examination, 19CSR4;

3.1.c.4. submit a copy of the transcript from a professional nursing education program, translated in the English language;

3.1.c.5. submit satisfactory documentation of the English language proficiency by one of the following methods:

3.1.c.5.A. submit evidence that the nursing education, text books, and majority of the clinical experiences were in English;

3.1.c.5.B. submit an original report showing a score of at least 530 for the written exam or 200 for the computer exam on the Test of English as a Foreign Language (TOEFL) plus a score of at least 50 on the Test of Spoken English (TSE);

3.1.c.5.C. submit an original report showing a score of at least 700 on the Test of English for International Communication (TOEIC) plus a score of at least 50 on the Test of Spoken English (TSE); or,

3.1.c.5.D. provide a VisaScreen certificate; and,

3.1.c.6. The applicant shall submit to a state and a national electronic criminal history records check for the purpose of determining whether the applicant has been charged with, indicted for, or convicted of a crime that may have bearing upon the applicant's fitness to hold a license.

3.1.c.6.A. The criminal history records checks shall be based on fingerprints submitted to the West Virginia State Police or its assigned agent for forwarding to the Federal Bureau of Investigation.

3.1.c.6.B. The applicant shall meet all requirements necessary to accomplish the state and national criminal history record check, including:

3.1.c.6.B.1. Submitting fingerprints for the purposes set forth in this subsection; and,

3.1.c.6.B.2. Authorizing the board, the West Virginia State Police and the Federal Bureau of Investigation to use all records submitted and produced for the purpose of screening the applicant for a license.

3.1.c.6.3. Paying for actual costs of the fingerprinting and criminal history record check.

3.1.c.6.C. The criminal history records required by this paragraph must have been completed within the twelve (12) months immediately before the application is filed with the board.

3.1.c.6.D. The board may require the applicant to obtain an electronic criminal history records check from a similar agency in the state of the technician or applicant's residence, if outside of West Virginia.

3.1.c.6.E. To be qualified for licensure, the results of the criminal history records checks must be unremarkable and verified by a source acceptable to the board other than the applicant.

3.1.c.6.F. The board may deny licensure or certification to any applicant who fails or refuses to submit the criminal history records checks required by this subsection.

3.1.c.6.G. The results of the state and national criminal history record check may not be released to or by a private entity except:

3.1.c.6.G.1. To the individual who is the subject of the criminal history record check;

3.1.c.6.G.2. With the written authorization of the individual who is the subject of the criminal history record check; or

3.1.c.6.G.3. Pursuant to a court order.

3.1.c.6.H. The criminal history record check and related records are not public records for the

purposes of chapter twenty-nine-b of this code.

3.2. Filing of Application.

3.2.a. Applicants educated in the United States.

3.2.a.1. An applicant for licensure by examination shall meet the requirements set forth in subdivision 3.1.a. of this section and submit the following to the board office:

3.2.a.1.A. A completed board application forty-five (45) days prior to the date the applicant wishes to take the examination;

3.2.a.1.B. The required fee for licensure by examination set forth in the board's rule, Fees, 19 CSR 12. Payment shall be in the form established by the West Virginia Board of Examiners for Registered Professional Nurses. Application fees are not refundable, nor applicable to other test dates;

3.2.a.1. C. A final official transcript showing the type of degree and date conferred shall be sent directly to the office of the board from a board approved nursing education program. The final official transcript may be submitted after the forty-five (45) day filing deadline, but shall be submitted prior to the examination date. The board will not consider an application for approval until the final, official transcript is received in the board office.

3.2.a.2. An applicant for licensure by examination shall submit an application directly to the contracted test service for the National Council Licensure Examination (NCLEX-RN) with the application fee forty-five (45) days prior to the date the applicant wishes to take the examination.

3.2.a.3. The authorization to test for any one application is valid for ninety (90) days, and may not be extended.

3.2.b. Applicants educated outside the United States or United States Territory.

3.2.b.1. An applicant who was educated outside the United States or United States Territories and who seeks licensure by examination shall submit the following:

3.2.b.1.A. A completed board application forty-five (45) days prior to the date the applicant wishes to sit for the examination; and.

3.2.b.1.B. The required fee for licensure by examination set forth in the board's rule, Fees, 19 CSR 12. Payment shall be in the form established by the West Virginia Board of Examiners for Registered Professional Nurses. Application fees are not refundable, nor applicable to other test dates; ~~and~~

3.2.b.2. An applicant for licensure by examination shall submit directly to the current test service under contract with national council, a completed National Council Licensure Examination (NCLEX-RN) application with the application fee forty-five (45) days prior to the date the applicant wishes to take the examination.

3.2.b.3. The authorization to test for any one application is valid for ninety (90) days, and may not be extended.

3.2.c. Veteran applicants pursuant to W. Va. Code §30-24-1 et seq..

3.2.c.1. An applicant for licensure by examination who qualifies under W. Va. Code §30-24-1 et. seq. (veterans) shall submit the following information to the board office:

3.2.c.1.A. A completed board application forty-five (45) days prior to the date the applicant wishes to take the examination;

3.2.c.1.B. The required fee for licensure by examination as set forth in the board's rule, Fees, 19 CSR 12. Payment shall be in the form established by the West Virginia Board of Examiners for Registered Professional Nurses. Application fees are not refundable, nor applicable to other test dates;

3.2.c.1.C. An official copy of military form DD214 directly from the national personnel records center; and

3.2.c.1.D. Any additional information requested by the board including but not be limited to:

3.2.c.1.D.1. Copies of certificates of completion for military education including course and occupation credit recommendations; and,

3.2.c.1.D.2. Course outlines for military education documenting nursing science content in the training program.

3.2.c.2. An applicant for licensure by examination who qualifies under West Virginia Code §30-24-1 et. seq. shall submit directly to the current test service under contract with national council a completed National Council Licensure Examination (NCLEX-RN) application with the application fee forty-five (45) days prior to the date the applicant wishes to take the examination.

3.2.c.3. The authorization to test for any one application is valid for ninety (90) days, and may not be extended.

§19-3-4. Temporary Permit to Practice as a Registered Professional Nurse.

4.1. A temporary permit issued to an applicant awaiting initial examination for licensure as a registered professional nurse is valid until three (3) days from the date the applicant's licensing examination results are mailed from the office of the board.

4.2. The board may issue a temporary permit to an applicant for examination following graduation from a state approved nursing education program. The temporary permit expires ninety (90) days following graduation, or at the time licensure examination results are announced, whichever comes first. A temporary permit is not renewable.

4.3. The board shall not issue a temporary permit which permits the holder to practice registered professional nursing while awaiting initial examination for licensure and the reporting of the results of the examination until it has received and approved an application for licensure by examination.

4.4. The holder of a temporary permit is subject to all provisions of West Virginia Code § 30-7-1 et.seq. and all other relevant provisions of the West Virginia Code and rules promulgated by the board.

4.5. The holder of a temporary permit shall work under the direct supervision of a licensee, until the applicant has successfully passed the NCLEX-RN and a license is issued.

§19-3-5. Licensure Examination.

5.1. The licensure examination is the national council licensure examination for registered nurses (NCLEX-RN) which is owned and controlled by the National Council of State Boards of Nursing, Inc.

5.2. The board shall determine the availability of the examination dates, times, and places of administration.

§19-3-6. Failure to Pass Licensure Examination.

6.1. An applicant for licensure by examination who fails to attain a passing score on the examination shall, upon notification of examination results, immediately return any temporary permit to practice registered professional nursing to the office of the board.

6.2. In considering an application for licensure by examination, the number of times the applicant has taken the licensing examination shall include each time that the applicant has taken an examination for licensure as a registered professional nurse in any jurisdiction.

6.3. In the event an applicant fails the licensure examination two times, he or she may petition the board for permission to repeat the licensure examination. The board may deny approval for an applicant to repeat an examination after two failures if more than two years has lapsed since the applicant graduated from a nursing education program. In addition, the board may deny approval to repeat the examination after two failures if the applicant cannot show in the petition to repeat the examination more than two times that any further education has been taken by the applicant to correct deficiencies in his or her nursing knowledge.

6.4. An examination applicant may not repeat the licensure examination more than four times per year, nor more often than every forty five (45) days.

6.5. A repeat examination applicant shall complete the application for examination as specified in subsection 3.2. of this rule and be subject to other requirements as established by the board.

§19-3-7. Licensure by Endorsement.

7.1. An applicant for permanent licensure by endorsement shall:

7.1.a. be currently licensed in another state and shall have passed the licensure examination that was used in the state of West Virginia at the time of his or her graduation from a professional nursing education program.

7.1.b. complete and submit to the board an accurately completed application for licensure by endorsement;

7.1.c. submit the non-refundable fee set forth in the board's rule, Fees, 19 CSR 12.

7.1.d. have submitted a verification of licensure from the state in which he or she was originally licensed and the state in which he or she is currently employed if it is different than the original state of licensure. If these boards participate in the licensure verification system maintained by the National Council of State Boards of Nursing, the applicant shall follow the process of verification to another state in accordance with the procedures set in place for that system.

7.2. Temporary permit for endorsement applicant.

The holder of a temporary permit is subject to all provisions of W. Va. Code §30-7-1 et. seq. and all other relevant sections of the West Virginia Code and rules promulgated by the board.

7.2.a. A complete endorsement application shall be on file in the board office prior to the issuance of a temporary permit including the notarized form, identification photograph, and endorsement application fee .

7.2.b. The board shall not issue a temporary permit until a complete board application for a temporary permit for an endorsement applicant is on file in the board office including the form and the fee set forth in the board's rule, Fees, 19 CSR 12.

7.2.c. The temporary permit expires ninety (90) days from the date of issuance and the expiration date shall be printed on the temporary permit.

7.2.d. The holder of the temporary permit shall immediately return the temporary permit upon request of the board. A temporary permit holder who fails to complete the endorsement application for full licensure is not entitled to an extension of the temporary permit. An applicant must provide a satisfactory explanation to the board prior to any subsequent request for endorsement by the applicant if the ninety (90) day period expires prior to the completion of the required procedure for licensure by endorsement by an applicant licensed as a registered professional nurse in another state, territory, or foreign country. The applicant shall repeat the process for endorsement in its entirety if the explanation is considered acceptable by the board.

7.2.e. A temporary permit is not renewable, and the board shall not extend the initial ninety (90) days.

7.2.f. The holder of any temporary permit to practice registered professional nursing shall furnish the board with his or her address and telephone number, and the name, address, and telephone number of his or her employer at all times while the permit is effective.

7.2.g. The board shall not issue a temporary permit if it determines upon satisfactory proof that the applicant has in any way falsified his or her qualifications for the temporary permit.

7.2.h. The board shall not issue the temporary permit if it is presented with satisfactory proof that the applicant has any action pending against his or her license to practice registered professional nursing in another state, territory, or foreign country, or if the license is encumbered in any way.

7.2.i. A temporary permit becomes void during the ninety (90) days if the board determines, upon satisfactory proof, that it will deny the applicant full licensure for any of the causes set forth in West Virginia Code §30-7-6. The board may also revoke the temporary permit at any time if the board has sufficient information indicating the temporary permit was issued in error or if the board receives information establishing probable cause that the applicant violated the board's laws or rules while practicing under the temporary permit.

§19-3-8. Change of Name and/or Address.

8.1. If a licensee legally changes his or her name through marriage, divorce court order or other means, he or she shall send this information to the office of the board. The information shall include both the full prior name and the new name, in a properly executed affidavit or a certified copy of the marriage certificate or divorce decree. The licensee shall submit these documents along with the fee set forth in the board's rule, Fees, 19 CSR 12.

8.2. A licensee shall notify the board of any change in residence or mailing address within thirty (30) days of the change. This notification shall be submitted in writing to the board office by facsimile, electronic communication or postal service.

§19-3-9. Renewal of License.

9.1. Each license issued by the board expires on October 31 of each year. In order to continue practicing a licensee shall renew his or her license annually. The deadline for receipt of the renewal application and fee is thirty days after receipt of the renewal application. A license for which a renewal application is received after October 31 is lapsed. The board shall consider the application for renewal of the license of each licensee upon receipt of:

9.1.a. an accurately completed application for renewal of the license;

9.1.b. submission of additional documents as determined by the board;

9.1.c. verification that he or she meets the continuing competence requirements specified in the board's rule, Continuing Education, 19CSR11;

9.1.d. all additional requirements set forth by the board; and,

9.1.e. the fee for renewal set forth in the board's rule, Fees, 19 CSR 12.

9.2. Request for inactive status.

A licensee who is not practicing, and who has no disciplinary action pending against his or her license, may request his or her name be entered on the inactive list by the executive secretary of the board by completing the renewal application furnished by the board and indicating his or her desire to be placed on inactive status. The board shall then designate the licensee's records "inactive". No fee is required for inactive status and no license is issued. The board may provide the inactive licensee, upon application, payment of the current fee, and completion of required continuing education, an active license to practice registered professional nursing in West Virginia. The board may inquire into activities and events during the term of the inactive license period.

9.3. Request for permanently retired status.

A licensee who has permanently retired from the practice of nursing in all states may upon request be designated as a "Retired Registered Professional Nurse" and shall receive an identification card with that designation. The recipient of the designation may not practice as a registered professional nurse in any state and may not in any way indicate to any persons that he or she is licensed to practice as a registered professional nurse. If the individual identified as the "Retired Registered Professional Nurse" does practice in any form, voluntarily or for pay, as a registered professional nurse, he or she is guilty of practicing nursing without a license and shall be subject to the appropriate penalties contained in law and rule. If at any time the individual designated as the "Retired Registered Professional Nurse" desires to return to the practice of nursing, he or she shall submit the reinstatement application along with the current fee and shall meet all reinstatement requirements.

§19-3-10. Reinstatement of Lapsed License.

10.1. Non-renewal of license. If a licensee fails to renew his or her license before the current license expires, the license shall lapse.

10.2. The fee to reinstate a lapsed license is set forth in the board's rule, Fees, 19 CSR 12.

10.3. Any person practicing registered professional nursing during the time his or her license has lapsed is considered an illegal practitioner and is subject to the penalties provided for violation of W.Va. Code §30-7-1 et seq.

§19-3-11. Verification of Licensure to Another State Board of Nursing.

The board, shall provide a verification of West Virginia licensure upon submission of a written request by the licensee for the verification and payment of a fee set forth in the board's rule, §19 CSR 12, Fees. Should the board participate in the licensure verification system as maintained by the National Council of State Boards of Nursing, the licensee shall follow the process of endorsement to another state in accordance with the procedures set in place for that system. If the licensee is a graduate of a school which has closed and his or her records are on file in the board office, the board shall provide a copy of school records upon written request and payment of the fees set forth in the board's rule, Fees, 19 CSR 12.

§19-3-12. Loss of Certificate of Registration or Current Licensure Card.

12.1. To replace a lost or destroyed certificate of registration the licensee shall send an affidavit certifying the loss or destruction of the certificate of registration and the fee set forth in the board's rule, Fees, 19 CSR 12.

12.2. To replace a lost or destroyed current licensure card, the licensee shall send an affidavit certifying the loss and the fee set forth in the board's rule, Fees, 19 CSR 12.

12.3. The board may publish notice of the issuance of a duplicate certificate of registration or current licensure card at the board's discretion.

§19-3-13. Penalty for Presentation of Non-negotiable Check.

13.1. The board shall assess the fee set forth in the board's rule, Fees, 19 CSR 12 to any individual who presents a check payable to the board that is later returned by the bank as non-negotiable. The presenter of the non-negotiable check shall redeem the non-negotiable check within fourteen (14) days of notification by certified mail. This fee is in addition to any reinstatement or other fee which may additionally become due because the applicant or licensee submits an application or registration form after a board deadline. The applicant, licensee, or other person who presents a non-negotiable check shall redeem it with cash, a money order, or a cashier's check.

13.2. The board shall designate the license or temporary permit of a registered professional nurse as invalid if fees are not paid within 14 days for a non-negotiable check submitted with an application for renewal or reinstatement or any other application form.

§19-3-14. Professional Misconduct

14.1. Conduct, including, but not limited to the following, if proven by a preponderance of evidence, constitutes professional misconduct subject to disciplinary action pursuant to W. Va. Code § 30-7-11(a)(6). The applicant or licensee:

14.1.a. failed to adhere to common and current standards for professional nursing practice, including but not limited to standards established by a national professional nursing organization, nursing research, nursing education, or the board;

14.1.b. failed to adhere to established standards in the practice setting to safeguard patient care;

14.1.c. knowingly committed an act which could adversely affect the physical or psychological welfare of a patient;

14.1.d. abandoned patients by terminating responsibility for nursing care, intervention, or observation without properly notifying appropriate personnel and ensuring the safety of patients;

14.1.e. practiced or offered to practice beyond the scope permitted by law or accepted and performed professional responsibilities that the licensee knows or has reason to know that he or she is not licensed, qualified, or competent to perform;

14.1.f. impersonated another licensed practitioner;

14.1.g. permitted another person to use the licensee's license for any purpose;

14.1.h. permitted, aided, or abetted an unlicensed, uncertified, or unregistered person to perform activities requiring a license, certificate, or registration;

14.1.i. delegated professional responsibilities to a person when the licensee delegating the responsibilities knows or has reason to know that person is not qualified by training, experience or licensure to perform them;

14.1.j. practiced registered professional nursing while his or her license is suspended, lapsed, or inactive;

14.1.k. failed to comply with terms and conditions as may be imposed by the board based upon previous disciplinary action of the board;

14.1.l. practiced professional nursing while the ability to safely and effectively practice is compromised by alcohol or drugs;

14.1.m. is addicted to a controlled substance;

14.1.n. is a chronic or persistent alcoholic;

14.1.o. engaged in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud or harm the public or any member of the public; thus, not exercising good professional character;

14.1.p. practiced professional nursing while the ability to safely and effectively practice was compromised by physical or mental disability;

14.1.q. refused or failed to report for a physical or mental examination, including but not limited to laboratory or other tests, requested by the board;

14.1.r. provided false or incorrect information to an employer or potential employer regarding the status of a license, or failed to inform an employer or potential employer of a change in the status of a license;

14.1.s. knowingly falsified an application for employment;

14.1.t. knowingly provided false information regarding completion of educational programs;

14.1.u. falsified patient records, intentionally charted incorrectly;

14.1.v. improperly, incompletely, or illegibly documented the delivery of nursing care, including but not limited to treatment or medication;

- 14.1.w. knowingly made or filed a false report;
- 14.1.x. knowingly or negligently failed to file a report or record required by state or federal law;
- 14.1.y. willfully impeded or obstructed the filing of a report or record required by state or federal law;
- 14.1.z. induced another person to file a false report or obstructed the filing of a report required by state or federal law;
- 14.1.aa. failed to report to the board within thirty (30) days, knowledge of a violation by a registered professional nurse of W. Va. Code §§ 30-7-1 et seq., 30-15-1 et seq., this rule, any other applicable state law or rule or any applicable federal law or regulation;
- 14.1.bb. failed to report through proper channels a violation of any applicable state law or rule, any applicable federal law or regulation or the incompetent, unethical, illegal, or impaired practice of another person who provided health care
- 14.1.cc. impeded or obstructed an investigation by the board by failing to comply or respond to requests for action or information, whether the failure was known or negligent;
- 14.1.dd. violated any provision of W. Va. Code §30-7-1 et seq., or rules governing the practice of registered professional nursing, or a rule or order of the board, or failed to comply with a subpoena or subpoena duces tecum issued by the board;
- 14.1.ee. failed to register or notify the board of any changes of name or mailing address;
- 14.1.ff. failed to accept certified mail from the board, when mailed to the licensee's last address on record in the board's office;
- 14.1.gg. failed to disclose to the board a criminal conviction in any jurisdiction;
- 14.1.hh. was convicted of a misdemeanor with substantial relationship to the practice of registered professional nursing, in a court of competent jurisdiction.
- 14.1.ii. failed to disclose information when required by the board concerning treatment or counseling for substance abuse, or participation in any professional peer assistance program;
- 14.1.jj. provided false information on any application, or any other document submitted to the board for the purpose of licensure, advance practice recognition, or prescriptive authority;
- 14.1.kk. misappropriated medications, supplies, or personal items of a patient or employer;
- 14.1.ll. self-administered or otherwise took into his or her body any prescription drug in any way not in accordance with a legal, valid prescription or used any illicit drug;
- 14.1.mm. prescribed, dispensed, administered, mixed or otherwise prepared a prescription drug, including any controlled substance under state or federal law, not in accordance with accepted nursing practice standards or not in accordance with the board's rule Limited Prescriptive Authority For Nurses in Advanced Practice, §19 CSR 8;
- 14.1.nn. physically or verbally abused, or failed to provide adequate protection or safety for an incapacitated individual in the context of a nurse-patient/client relationship;

14.1.oo. used the nurse-patient/client relationship to exploit a patient or client;

14.1.pp. engaged a patient or client in sexual activity or became romantically involved with a patient or client while still responsible for the care of that patient or client;

14.1.qq. failed to maintain appropriate professional boundaries in the nurse-patient/client relationship;

14.1.rr. failed to report that his or her license to practice registered professional nursing in any other state, territory, jurisdiction or foreign nation was revoked, suspended, restricted or limited, or otherwise acted against, that he or she was subjected to any other disciplinary action by the licensing authority, or that he or she was denied licensure in any other state, territory, jurisdiction, or foreign nation;

14.1.ss. violated the confidentiality of information or knowledge concerning a patient;

14.1.tt. practiced registered professional nursing by way of telecommunications or otherwise, in any other state, territory, jurisdiction, or foreign nation, without a license to do so and not in accordance with the law of that state, territory jurisdiction, or foreign nation; or

14.1.uu. was found guilty for improper professional practice or professional misconduct by a duly authorized professional disciplinary agency or licensing or certifying body or board in this or another state or territory, where the conduct upon which the finding was based would, if committed in this state, constitute professional misconduct under the laws of this state, may serve as a basis for disciplinary action by this board.

14.2. Upon a finding of probable cause that a basis for disciplinary action exists, the board may require a licensee or a person applying for licensure to practice as a registered professional nurse in this state to submit to a physical or psychological examination by a practitioner approved by the board. Any individual who applies for or accepts the privilege of practicing as a registered professional nurse in this state is considered to have given consent to submit to all such examinations when requested to do so in writing by the board and to have waived all objections to the admissibility of the testimony or examination report of any examining practitioner on the ground that the testimony or report is a privileged communication. If an applicant or licensee fails or refuses to submit to any examination under circumstances which the board finds are not beyond his or her control, that failure is prima facie evidence of his or her inability to practice as a registered professional nurse competently and in accordance with accepted standards for professional practice. A licensee or person applying for licensure as a registered professional nurse who is adversely affected by this provision may request a hearing within thirty days of any action taken by the board.

14.3. Based on the nature of the complaint filed against the licensee, technician, or of the information received about an applicant, the board may require the technician or applicant to request and submit to the board the results of a state and a national electronic criminal history records check by the State Police.

14.3.a. The licensee, technician, or applicant under investigation shall furnish to the State Police a full set of fingerprints and any additional information required to complete the criminal history records check.

14.3.b. The licensee, technician, or applicant under investigation is responsible for any fees required by the Sate Police in order to complete the criminal history records check.

14.3.c. The board may require the licensee, technician, or applicant to obtain an electronic criminal history records from a similar agency in the state of the technician or applicant's residence, if outside of West Virginia.

14.3.d. Instead of requiring the licensee, technician, or applicant under investigation to apply directly

to the State Police for the criminal history records checks, the board may contract with a private vendor to provide the services required in this subsection.

14.3.e. The board may deny licensure or certification or take disciplinary action against any licensee, technician, or applicant who fails or refuses to submit the criminal history records checks required by this subsection.;

14.4. If the board finds that public health, safety and welfare requires emergency action and incorporates a finding to that effect into its order, the board shall order summary suspension of a license pending proceedings for revocation of the license or other action. The board shall promptly institute and determine further disciplinary action. A licensee whose license has been summarily suspended is entitled to a hearing not less than twenty (20) days after the license was summarily suspended. The licensee may waive his or her right to a hearing on the summary suspension within the twenty (20) day period.

§19-3-15. Impaired Nurse Treatment Program

15.1. The board may permit a licensee or applicant for licensure who has been found guilty of prohibited conduct, to participate in a structured treatment program and meet other terms and conditions for continued licensure, in lieu of disciplinary action.

15.1.a. The board may appoint a designee to monitor participation in a approved treatment program;

15.1.b. The board may excuse an applicant or licensee that remains in compliance with the terms of an approved treatment program, to the satisfaction of the board's designee, from appearing before the board or hearing examiner to respond further to charges of misconduct;

15.1.c. An applicant or licensee that fails to comply with the terms of an approved treatment program, to the satisfaction of the board's designee, may be subject to further disciplinary action to the fullest extent of the board's authority;

15.2. The board may establish or approve impaired nurse treatment programs.

§19-3-16. Expungement of Records.

The Disciplinary Review Committee shall expunge all complaints that it dismisses, upon request by the licensee, from the licensee's file after three (3) years, if no other complaint is received against the same licensee within the three (3) year period.

19CSR10 Standards for Professional Nursing Practice

*TITLE 19
LEGISLATIVE RULE
BOARD OF EXAMINERS FOR REGISTERED
PROFESSIONAL NURSES*

*SERIES 10
STANDARDS FOR PROFESSIONAL NURSING PRACTICE*

§19-10-1. General.

1.1. Scope. ~ This rule establishes standards of safe practice for the registered professional nurse, and serves as a guide for the board in evaluating nursing care to determine if it is safe and effective.

1.2. Authority. ~ W. Va. Code §30-7-4

1.3. Filing Date. ~ March 31, 1994

1.4. Effective Date. ~ April 1, 1994

§19-10-2. Standards Related to the Registered Professional Nurse's Responsibility to Implement the Nursing Process.

2.1. The registered professional nurse shall conduct and document nursing assessments of the health status of individuals and groups by:

2.1.1. Collecting objective and subjective data from observations, examinations, interviews, and written records in an accurate and timely manner. The data includes but is not limited to:

2.1.1.a. The client's knowledge and perception about health status and potential, or maintaining health status;

2.1.1.b. Consideration of the client's health goals;

2.1.1.c. The client's biophysical and emotional status;

2.1.1.d. The client's growth and development;

2.1.1.e. The client's cultural, religious and socio-economic background;

2.1.1.f. The client's ability to perform activities of daily living;

2.1.1.g. The client's patterns of coping and interacting;

- 2.1.1.h. Environmental factors (e.g. physical, social, emotional and ecological);
- 2.1.1.i. Available and accessible human and material resources;
- 2.1.1.j. The client's family health history; and
- 2.1.1.k. Information collected by other health team members;
- 2.1.2. Sorting, selecting, reporting and recording the data; and
- 2.1.3. Continuously validating, refining and modifying the data by utilizing all available resources, including interaction with the client, the client's family and significant others, and health team members.
- 2.2. The registered professional nurse shall establish and document nursing diagnoses and/or client care needs which serve as the basis for the plan of care.
- 2.3. The registered professional nurse shall identify expected outcomes individualized to the client and set realistic and measurable goals to implement the plan of care.
- 2.4. The registered professional nurse shall develop and modify the plan of care based on assessment and nursing diagnosis and/or patient care needs. This includes:
 - 2.4.1. Identifying priorities in the plan of care;
 - 2.4.2. Prescribing nursing intervention(s) based upon the nursing diagnosis and/or patient care needs;
 - 2.4.3. Identifying measures to maintain comfort, to support human functions and responses, to maintain an environment conducive to well-being, and to provide health teaching and counseling.
- 2.5. The registered professional nurse shall implement the plan of care by:
 - 2.5.1. Initiating nursing interventions through:
 - 2.5.1.a. Writing nursing orders and/or directives;
 - 2.5.1.b. Providing direct care;
 - 2.5.1.c. Assisting with care; and
 - 2.5.1.d. Delegating and supervising nursing care activities;
 - 2.5.2. Providing an environment conducive to safety and health;
 - 2.5.3. Documenting nursing interventions and responses to care; and
 - 2.5.4. Communicating nursing interventions and responses to care to other members of the health care team.
- 2.6. The registered professional nurse shall evaluate patient outcomes and the responses of individuals or

groups to nursing interventions. Evaluation shall involve the client, the client's family and significant others, and health team members.

2.6.1. Evaluation data shall be documented and communicated to other members of the health care team.

2.6.2. Evaluation data shall be used as a basis for reassessing the client's health status, modifying nursing diagnoses and/or patient care needs, revising plans of care, and prescribing changes in nursing interventions.

§19-10-3. Standards Related to the Registered Professional Nurse's Responsibility as a Member of the Nursing Profession.

3.1. The registered professional nurse shall know the statutes and rules governing nursing and function within the legal boundaries of nursing practice.

3.2. The registered professional nurse shall accept responsibility for his or her individual nursing actions and competence.

3.3. The registered professional nurse shall obtain instruction and supervision as necessary when implementing nursing techniques or practices.

3.4. The registered professional nurse shall function as a member of the health team.

3.5. The registered professional nurse shall collaborate with other members of the health team to provide optimum patient care.

3.6. The registered professional nurse shall consult with nurses and other health team members and make referrals as necessary.

3.7. The registered professional nurse shall contribute to the formulation, interpretation, implementation and evaluation of the objectives and policies related to nursing practice within the employment setting.

3.8. The registered professional nurse shall participate in the systematic evaluation of the quality and effectiveness of nursing practice.

3.9. The registered professional nurse shall report unsafe nursing practice to the Board and unsafe practice conditions to recognized legal authorities.

3.10. The registered professional nurse shall delegate to another only those nursing measures which that person is prepared or qualified to perform.

3.11. The registered professional nurse shall supervise others to whom nursing interventions are delegated.

3.12. The registered professional nurse shall retain professional accountability for nursing care when delegating nursing interventions.

3.13. The registered professional nurse shall conduct practice without discrimination on the basis of age, race, religion, gender, sexual preference, socio-economic status, national origin, handicap, or disease.

3.14. The registered professional nurse shall respect the dignity and rights of clients regardless of social or economic status, personal attributes, or nature of the client's health problems.

3.15. The registered professional nurse shall respect the client's right to privacy by protecting confidential information unless obligated by law to disclose the information.

3.16. The registered professional nurse shall respect the property of clients, family, significant others, and the employer.

3.17. The registered professional nurse assuming advanced practice shall be qualified to do so through education and experience as set forth in W. Va. Code §30-7-1 et seq. and the rule governing Announcement of Advanced Practice, 19 WV CSR 7.

ON-SITE SURVEY

Overview

The West Virginia Board of Examiners for Registered Professional Nurses is authorized and empowered to:

prescribe standards for educational programs preparing persons for licensure to practice registered professional nursing under Chapter 30 Article 7 of the West Virginia Code;
provide for surveys of such educational programs;
approve educational programs for the preparation of practitioners of registered professional nursing as shall meet the requirement of this article and the board;
deny or withdraw approval of educational programs for failure to meet or maintain prescribed standards required by this article and by the board;
focus on quality of education program;
integrity of education program;
assess programs achievement of mission, goals and outcomes; and
educational preparedness of students for profession.

Purpose

The purposes of approval include:

Protection of the public through evaluation of pre-service professional nursing education programs in terms of the criteria set forth in this rule;
Improvement in the quality of nursing service through the improvement of professional nursing education
Guidance of prospective students in the selection of approved professional nursing education; and
Assurance of eligibility to take the state licensing examination and to apply for state licensure to graduates of state approved nursing programs

Process

Initial
Provisional
Continuing
Multiple Sites / Cohorts
Accreditation Self Evaluation

The approval process of a nursing education unit goes far beyond the initial approval. It is an ongoing process. Each year every Board approved program is required to submit an annual report to the Board for review. The annual report covers every aspect of the program, from the financial status to the degrees held by faculty and most importantly the quality of the information being taught to the student. The Board also conducts a

number of on-site survey visits to programs to have a “hands on” view of the activity taking place in nursing education programs. During the on-site survey visit, Board representatives have the opportunity to view the quality of the resources for nursing education students and to also speak with nursing education students regarding the nursing education program.

SELF-EVALUATION

NURSING PROGRAM NAME:

DATE:

STATE OF WEST VIRGINIA
BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES
90 MacCorkle Avenue SW, Suite 203
South Charleston, WV 25303

SELF-EVALUATION
19-1-9 Mission and Goals/Outcomes of the Nursing Education Unit

PROGRAM COMMENTS	NM	M	I P	STANDARDS	NM	M	I P	EVALUATOR'S COMMENTS
				<p>9.1 Mission/Philosophy and goals/outcomes of the nursing education unit shall be:</p> <ul style="list-style-type: none"> a. Clearly stated b. Periodically reviewed by nursing faculty and, c. Consistent with those of the governing organization 				
				<p>9.2 Stated nursing goals/outcomes are accomplished by the nursing education unit.</p>				

SELF-EVALUATION

19-1-10 Organization and Administrative Control of the Nursing Education Unit

PROGRAM COMMENTS	NM	M	I P	STANDARDS	NM	M	IP	EVALUATOR'S COMMENTS
				<p>10.1. The nursing education unit in the governing organization:</p> <p>a. Organizational pattern of the nursing education unit is comparable to like education units in the governing organization. (Include an organizational chart showing the structure of the nursing education unit and its relationship to administration and with other education units).</p> <p>10.1.b. Budget of the nursing education unit is part of the governing organization's budget;</p> <p>the nursing administrator has input into the preparation, presentation, and administration of the nursing education unit budget; and</p> <p>the budget shall be adequate to achieve the mission of the nursing education unit:</p> <p style="padding-left: 20px;">10.1.b.1. Financial support for</p> <ul style="list-style-type: none"> - faculty - equipment - supplies and - services. <p style="padding-left: 20px;">10.1.b.2. Secretarial support and other support services to accomplish goals and expected outcomes.</p>				

PROGRAM COMMENTS	NM	M	I P	STANDARDS	NM	M	I P	EVALUATOR'S COMMENTS
				<p>10.1.c. Administration of the nursing education unit is administered by a nurse with:</p> <ul style="list-style-type: none"> a. a graduate degree with a major in nursing b. 5 years of professional nursing experience including c. 2 years teaching in a professional nursing education program d. an holds a license as a registered professional nurse in the state of West Virginia and e. qualifications comparable to those qualifications required of other faculty in the governing organization. <p>The nurse administrator of the nursing education unit is responsible for:</p> <p>10.1.c.1. providing leadership for faculty & staff;</p> <p>10.1.c.2. developing and maintaining relationships with local, state, regional and national agencies involved in professional nursing or nursing education;</p> <p>10.1.c.3. establishing and maintaining liaison with the central administration and other departments of the governing organization;</p> <p>10.1.c.4. preparing and administering the budget;</p> <p>10.1.c.5. facilitating faculty development & conducting performance reviews;</p> <p>10.1.c.6. recommending faculty for appointment,</p>				

**promotion, tenure,
and retention; and**

**10.1.c.7. notifying the
Board of any major
changes in the
nursing education
program or its
administration;**

**10.1.d. Agreements with an
agency or agencies for
clinical practice
experiences.**

SELF-EVALUATION

19-1-11 Faculty of the Nursing Education Unit

PROGRAM COMMENTS	NM	M	I P	STANDARDS	NM	M	I P	EVALUATOR'S COMMENTS
				<p>11.1 Nursing faculty members, both full and part-time shall be academically and professionally qualified and shall:</p> <p>11.1.a. Have a graduate degree with a major in nursing;</p> <p style="padding-left: 40px;">11.1.a.1. The Board may grant an exception to the requirements in 11.1.a for faculty who:</p> <p style="padding-left: 80px;">11.1.a.1.A. Have a bachelor degree with a major in nursing & are admitted and enrolled in a graduate degree program with a major in nursing within 1 year of employment in the faculty position;</p> <p style="padding-left: 80px;">11.1.a.1.B. Have qualifications other than those set forth in this subsection, which are acceptable to the Board.</p> <p>11.1.b. Have evidence of current experience in nursing practice and education sufficient to demonstrate professional competence.</p> <p>For faculty with less than 2 years experience in education, the nursing program administrator will submit to the Board mentoring and orientation plans as defined by Board guidelines and function under the guidance of a faculty member fully qualified in the specific teaching area and professional competence; and</p> <p>11.1.c. Have credentials, which verify status as a registered professional nurse in West Virginia.</p>				

			<p>11.2. The nursing program submits to the Board a record of the qualifications of each faculty member with the program annual report.</p> <p>11.3 Faculty policies of the nursing education unit are nondiscriminatory, consistent with governing organization, justified by nursing education unit goals when different from governing organization, written, implemented, and available to faculty and Board upon request.</p> <p>11.4 The governing organization shall hire and maintain sufficient faculty with the experience and competence in the respective specialties of nursing education to accomplish the goals or outcomes of the nursing education unit. Assignment and workload of faculty shall be consistent with the governing institution and includes clinical lab. Workload should provide for regeneration, reflection, and wellness opportunities for nursing faculty. Factors to be included but not limited to when establishing the ratio of faculty to students should include:</p> <p style="padding-left: 40px;">11.4.a. the students' level of knowledge/skill; 11.4.b. course objectives; 11.4.c. acuity level of clients; 11.4.d. affiliating agency's goal and priorities; 11.4.e. percentage of temporary personnel staffing; 11.4.f. physical layout of facility; 11.4.g. current usage by other affiliating students; and 11.4.h. the Board's standards.</p> <p>11.5 The nursing faculty shall organize under its own governing rules and meet</p>			
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				<p>regularly. Students shall have opportunities to participate in meetings of the faculty organization. The nursing education unit shall maintain minutes of meetings recorded and shall maintain minutes on file. The nursing education program shall provide evidence of part time faculty participation in governance and communication within the nursing education unit.</p>				
				<p>11.6 The faculty shall have liability insurance for clinical practice in nursing education courses.</p>				

SELF-EVALUATION
19-1-12 Students in the Nursing Education Unit

PROGRAM COMMENTS	NM	M	I P	STANDARDS	NM	M	IP	EVALUATOR'S COMMENTS
				<p>12.1 The nursing education program shall base the selection and admission of students on established criteria;</p> <p>be consistent in the recruitment and admission of students;</p> <p>shall determine enrollment by the clinical and teaching facilities available; and</p> <p>by the numbers of nursing faculty.</p> <p>An increase in enrollment of greater than 10% must have prior approval by the Board.</p> <p>12.1.a. A high school diploma or general education development certificate is required for admission to any nursing education program. Requirements for admission shall be consistently applied</p>				

SELF-EVALUATION 19-1-13 Curriculum

Program Comments	NM	M	IP	STANDARDS	NM	M	IP	Evaluator's Comments
				<p>13.1 The curriculum of each nursing education program within the nursing education unit shall be based on the philosophy or mission and goals or outcomes of the nursing education unit.</p> <p>13.1.a. The curriculum incorporates the concepts of nursing process and standards for nursing practice as defined in 19CSR10.</p> <p>Clinical assignments shall be designed to meet the objectives of each nursing course.</p> <p>Faculty shall provide evidence of ongoing review and updating of instructional materials, lecture notes, handouts and resources provided to students to ensure students receive current information and standards of practice.</p> <p>13.1.b. Curricula for programs offering the diploma,</p>				

associate degree, baccalaureate degree, generic masters, accelerated programs, cohorts, sites, or distance education in nursing shall include theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process.

13.2 The nursing courses shall be supported by courses, which meet the requirements of the governing organization, including biological, physical and behavioral science courses.

SELF-EVALUATION

19-1-14 Resources, Facilities, and Services

PROGRAM COMMENTS	NM	M	IP	STANDARDS	NM	M	IP	EVALUATOR'S COMMENTS
				<p>14.1 The nursing education program(s) shall provide adequate teaching facilities to accomplish the goals or outcomes of the nursing education programs and include well equipped classrooms, conference rooms, libraries, laboratories and offices for faculty members.</p> <p>14.2 Comprehensive and current library resources, computer facilities, laboratory and other learning resources shall be available and accessible. The nursing faculty shall have input into the development and provision of learning resources.</p> <p>14.3 The resources, facilities and services of the governing organization shall be available to and used by the nursing education unit.</p> <p>14.4 The hospitals or other health care facilities and services utilized for clinical learning experiences shall be adequate in number and kind to meet program goals or outcomes.</p> <p>A preceptor serves as a role model and resource to students in the clinical setting in conjunction with a faculty member.</p>				



SELF-EVALUATION

19-1-15 Evaluation of the Nursing Education Unit

PROGRAM C	NM	M	IP	STANDARDS	NM	M	IP	EVALUATOR'S COMMENTS
				<p>15.1 The nursing education unit shall have an ongoing systematic evaluation plan of all program components, which is used for development, maintenance and revision of the program. The evaluation shall include but not be limited to curriculum content review and test review.</p> <p>15.2 The Evaluation plan shall include measurable outcomes that include but are not limited to:</p> <ul style="list-style-type: none"> a. licensure examination passage rate b. employment patterns c. graduate rates and d. attrition. 				

Nursing Faculty Interviewed:

Students Interviewed:

Administration Interviewed:

Support Faculty Interviewed:

Library Representative Interviewed:

Information Technology Staff Interviewed:

Clinical Agency Personnel Interviewed:

POTENTIAL INTERVIEW QUESTIONS FOR THE ON-SITE VISIT

For all interviews, there will be questions specific to the program, clarifying an issue from the self-evaluation report as well as anything each interview participant(s) would like the Board to know. The following are general topic areas usually covered during the visit:

Program Nurse Administrator

brief overview of program and any current activities
strengths and weaknesses of the program
long range plans for the program and how they fit with those of the college/university
organizational climate and review of current organizational chart
department's participation on campus
nursing department organizational structure, function, and description of specific roles
department committee structure
student participation
adequacy of resource allocation
number of faculty both full time and part time
faculty attrition
faculty attrition plan
new faculty orientation process
faculty handbook
expectations/faculty roles in the program and college/university
faculty workload
faculty relationships with other departments
 communication with faculty teaching support courses/integration of nursing
 curriculum with support courses
administrative workload
faculty continuing education
evaluation process of administrator and faculty
promotion and tenure process
liability contracts for faculty and students
method of departmental decision-making
faculty and students participation in curriculum development activities
advising
mission and philosophy communication to the students
standards of practice communication to the students
review of curriculum including sequence, correlation with support courses, progression,
 review and revision process, evaluation process and methodologies
NCLEX-RN preparation for students
clinical objectives communication to students and clinical site
clinical resources, continuing education available to nursing students and faculty
skills lab
faculty to student ratio in clinical setting
number of agency's for clinical adequate in number and kind

review of clinical schedules
clinicals occurring where more than one program is on the same unit
agency contracts current
relationship with agencies
preceptorship utilized for clinical/leadership experiences
current enrollment
applicant admission process/screening/requirements
brochures/literature available about the nursing program
relationship with registrar office
notification of acceptance
process progression process
how problems with graduation are communicated
student attrition
student handbook
extracurricular activity involvement by nursing students
evaluation plan-faculty involvement in implementation and evaluation/general discussion regarding evaluation outcomes including:
 pass rate, postgraduate statistics r/t employment, continuing education, employer survey, etc.
budget process
budget
adequacy
 salaries, equipment, resources, support services
library allocation/process/acquisitions
equipment and resource availability including classrooms
communication with faculty teaching support courses to include:
 preparation and performance of nursing students: integration, understanding of concepts
 curriculum integrated with nursing
 lab courses (optional vs. required)
 adjusted class time to accommodate nursing students
 nursing faculty involved in campus activities and in community scholarly activities
 interdisciplinary projects with nursing
 describe typical load
concerns the program would like administration to know
about anything the program would like the Board to know
about contact with alumni
questions for reviewers

Faculty of the Nursing Program

communication with program dean/director/chairperson
brief overview of program and any current activities
strengths and challenges of the program
long range plans for the program and how they fit with those of the college/university
organizational climate
department's participation on campus
nursing department organizational structure, function, and description of specific roles
department committee structure
student participation
faculty attrition plan
new faculty orientation process
faculty handbook
expectations/faculty roles in the program and college/university
faculty workload
faculty relationships with other departments/interdisciplinary collaboration
 communication with faculty teaching support courses/integration of nursing
 curriculum with support courses
committee participation and at what level
adequate budget/resources/offices and supplies
faculty continuing education
evaluation process of administrator and faculty
promotion and tenure process
liability contracts for faculty and students
method of departmental decision-making
policies affecting nursing students are fair and equitable
faculty and student participation in curriculum development activities
advising
office hours and their communication to students and others
mission and philosophy communication to the students
standards of practice communication to the students
review of curriculum including sequence, correlation with support courses, progression,
 review and revision process, evaluation process and methodologies, course
 objectives and program goals-how a concept is threaded through curriculum
NCLEX-RN preparation for students
skills lab
clinical objectives communication to students and clinical site
clinical resources, continuing education available to nursing students and faculty
faculty to student ratio in clinical setting
clinicals occurring where more than one program is on the same unit
preceptors used with clinical/leadership experiences
description of student applicant pool
progression process
how problems with graduation are communicated
student attrition
student handbook
extracurricular activity involvement by nursing students

evaluation plan-faculty involvement in implementation and evaluation/general discussion regarding evaluation outcomes including:

pass rate, postgraduate statistics r/t employment, continuing education, employer survey, etc.

library allocation/process/acquisitions

equipment and resource availability including classrooms

communication with faculty teaching support courses to include:

preparation and performance of nursing students: integration, understanding of concepts

curriculum integrated with nursing lab courses (optional vs. required)

adjusted class time to accommodate nursing students

nursing faculty involved in campus activities and in community scholarly activities

interdisciplinary projects with nursing describe typical load

concerns faculty would like administration to know about anything faculty would like the Board to know

about contact with alumni

questions for reviewers

Students

mission and philosophy of the program/carried throughout the curriculum communication with program dean/director/chairperson

support courses

student services

available skills lab

resources

available faculty

office time

clinical sites

student to faculty ratio in clinical setting

process for clinical including objectives, patient assignment, communication with staff, resources available at clinical sites

use of preceptors

communication with staff at clinical site

standards of practice including when students first hear about them involvement in evaluation process of program

quality of instruction including resources used/variations of instruction style and teaching methodologies

adequacy of advisement and career counseling

access to faculty/advisor and program

dean/director/chairperson student handbook including review of policies

grievance process

extracurricular activity involvement

SNA student government involvement
community service activities
strengths and weaknesses of the program
preparation for entry into the profession
suggestions for change/recommendation of program to others interested
opportunities to provide input into program decisions and policy-making/committee
representatives
concerns students would like administration to know about
anything students would like the Board to know about
questions for reviewers

College President

general comments related to the nursing program
perception of the nursing faculty on campus
how nursing department fits in the institution's master plan
nursing program's contribution to the mission of the college
planned changes for the program
5-year plan/vision for the college
10-year plan/vision for the college

Dean VPAA and Faculty

many of the same questions as college president
how nursing department fits in the institution's master plan
long range plans for the program
faculty development support
percentage of faculty with tenure
faculty evaluation process
faculty roles expected
lines of communication

Financial Assistance Officer

current tuition/semester
types of financial aid available for students
percentage of students receiving financial aid
default rate on loans
scholarships for nursing
faculty salaries compared with SREB and across campus
faculty evaluation; is there a merit system
what percentage of institutional budget goes to academics
how are departmental budget allocations determined
travel reimbursement (if required to clinical sites)
liability insurance

Student Affairs Officer

comments related to the nursing program
description of services available to students
utilization of services by nursing students
health and counseling services
perception of students and faculty on campus
participation in campus activities

Registrar

review of application and graduation process for nursing students
process if standards not met at time of anticipated graduation
file security
transcript generation process
communication with nursing faculty/program

Admissions Officer

enrollment process for nursing admissions
number of students
retention rate
transfer credit evaluation process
how progress is monitored

Library Director

communication with nursing faculty
holdings selection process
how library funds are allocated
periodicals
monitoring of holdings
nursing student usage of library
review of stacks, periodicals and reserve sections
computer access to online resources
how current are holdings
historical section

Support Course Faculty (optional meeting: determined by program)

communication with nursing faculty
preparation and performance of nursing students: integration, understanding of
concepts
curriculum integrated with nursing
lab courses (optional vs. required)

adjusted class time to accommodate nursing students
nursing faculty involved in campus activities and in community
scholarly activities
interdisciplinary projects with nursing
describe typical load

Documents Reviewed During Visit

curriculum to include course syllabi, activities,
presentations, handouts
committee meeting minutes
faculty files
student files
agency contracts
liability contracts
faculty handbook
student handbook
college/university handbook
clinical group lists
agency evaluations
evaluation plan and supporting surveys
student work

Tour to Include

general tour of campus
visit other campus/satellite sites
library, which includes review of all available resources
computer labs
skills lab, which includes review of all available resources, materials and supplies
administrator and faculty offices
bookstore
clinical site visit for each class
labs
classrooms & equipment
review of the security of records (student and faculty files)
visit class in session for each year (first, second -sophomore, junior, senior)

