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CHAPTER FOUR

ADVANCED PRACTICE NURSING

SECTION I

SCOPE OF PRACTICE

The advanced practice nurse shall practice in a manner consistent with the definition of the practice of advanced practice nursing set forth in Arkansas Code Annotated §17-87-102(4).(A)(B)(C)(D), and in accordance with the scope of practice defined by the appropriate national certifying body and the standards set forth in these rules. The advanced practice nurse (APN) may provide health care for which the APN is educationally prepared and for which competence has been attained and maintained.

SECTION II

QUALIFICATIONS FOR LICENSURE

Advanced practice nurse (APN) licensure shall be designated in one of the four **categories roles** below **and at least one population focus – Family/Individual Across the Lifespan, Adult-Gerontology, Neonatal, Pediatrics, Women's Health/Gender-related, or Psychiatric/Mental Health (effective 2015)**. A current, unencumbered registered nurse license to practice in Arkansas is required for all categories of advanced practice licensure. Effective January 1, 2003, all applicants for advanced practice licensure by examination shall have completed a graduate level advanced practice nursing education program. ~~Applicants for advanced practice licensure by endorsement shall have met the educational and certification requirements set forth in Arkansas State Board of Nursing Rules at the time of their initial licensure as an advanced practice nurse in another jurisdiction.~~ APN **categories roles** and their respective qualifications are:

A. ADVANCED NURSE PRACTITIONER (ANP)

1. Successful completion of ~~an organized program of~~ **a graduate** nursing education **al** program that prepares nurses for the advanced practice role of advanced nurse practitioner; and
2. Current certification as a nurse practitioner by a nationally recognized certifying body which meets the requirements of Section VII of this Chapter.

B. CERTIFIED REGISTERED NURSE ANESTHETIST (CRNA)

1. ~~Satisfactory~~ **Successful** completion, ~~beyond generic nursing preparation,~~ of a **formal graduate** educational program that meets the standards of the Council on Accreditation of Nurse Anesthesia Educational Programs or another nationally recognized accrediting body that has as its objective preparation of nurses to perform as nurse anesthetists; and
2. Current certification from the Council on Certification of Nurse Anesthetists, Council on Recertification of Nurse Anesthetists, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter.

C. CERTIFIED NURSE MIDWIFE (CNM)

1. Successful completion of ~~an organized program of~~ **a graduate** nursing education **al** program that prepares nurses for the advanced practice role of nurse midwife;
2. Current certification as a nurse midwife from the American College of Nurse Midwives, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter; and
3. Written agreement with a consulting physician if providing intrapartum care.

D. CLINICAL NURSE SPECIALIST (CNS)

1. ~~Master's degree evidencing~~ **S**uccessful completion of a graduate **nursing** educational program ~~in nursing~~, which shall include supervised clinical practice and classroom instruction in a nursing clinical practice specialty; and
2. Current certification in a specialty role as a clinical nurse specialist from a nationally recognized

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certifying body which meets the requirements of Section VII of this Chapter.

SECTION III **LICENSURE**

A. ELIGIBILITY

The applicant shall meet the licensure requirements of the Board.

B. APPLICATION FOR LICENSURE BY EXAMINATION

In addition to a current registered nurse license to practice in Arkansas, the information submitted to the Board shall include:

1. A completed Board application form;
2. An official transcript or document from a nursing education program ~~that~~ accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or Council for higher Education Accreditation (CHEA), as acceptable by the Board and meets the qualifications of Section II of this Chapter in the category of advanced practice nursing for which the applicant is seeking licensure. The transcript or document shall verify the date of graduation, the degree or certificate conferred, clinical hours completed, and the role and population focus of the education program;
- ~~3. For foreign educated applicants, documentation that the graduate level educational program meets criteria for accreditation equivalent to that of a U.S. national accrediting body;~~
3. Evidence of state and federal criminal background checks conducted by the Arkansas State Police and the Federal Bureau of Investigation completed no earlier than twelve (12) months prior to the application for advanced practice licensure;
- 4 A statement directly from the Board approved national certifying body evidencing current certification in good standing; and
- 5 Payment of the nonrefundable fee.

C. APPLICATION FOR LICENSURE BY ENDORSEMENT

1. The Board may issue a license by endorsement to an APN licensed under the laws of another state if, in the opinion of the Board, the applicant meets the qualifications for licensure in this state.
2. In addition to the requirements set forth in Section II and III.A. and B. of this Chapter, the information submitted to the Board shall include documentation of current unencumbered advanced practice licensure/authority to practice in another jurisdiction.

D. APPLICATION FOR AN INTERNATIONALLY EDUCATED APN (educated outside the United States)

An internationally educated applicant for licensure in this state as an APN shall:

1. Graduate from a graduate level APN program equivalent to an APN educational program in the United States accepted by the board.
2. Submit an official transcript directly from the international nursing education program and verified through a qualified credentials evaluation process for the license being sought.
3. Meet all other licensure criteria required of applicants educated in the United States, including English proficiency.

E. TEMPORARY PERMITS

1. Upon application and payment of the required fee, the Board shall issue a temporary permit to practice in an advanced practice nursing category to a qualified applicant who has no violations as listed in ACA §17-87-312 on the Arkansas State Police criminal background check and:
 - a. Meets the educational requirements set forth in Section II of this Chapter and has been accepted by the appropriate certification body to sit for the first national certification exam he or she is eligible to take; or

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- b. Has a current advanced practice license or the equivalent from another jurisdiction and has current Board approved certification in the appropriate advanced practice nursing education category.
2. The temporary permit shall immediately become invalid upon receipt of information obtained from the federal criminal background check indicating any offense listed in ACA §17-87-312 or upon notification to the applicant or ASBN of failure of the certification examination.
4. The temporary permit is not renewable and does not apply to prescriptive authority.
5. In no event shall the permit be valid in excess of six (6) months.

F. RENEWALS

1. The date for renewal of licensure to practice as an advanced practice nurse shall coincide with renewal of the applicant's registered nurse license.
2. An applicant for renewal of an advanced practice nurse license shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. ~~Proof~~ Documentation of current national certification in the appropriate APN specialty through an ongoing maintenance program of a Board approved certifying body;
 - c. Documentation of current compact state RN licensure if primary state of residence has enacted the Interstate Nurse Licensure Compact; and
 - d. Payment of the nonrefundable renewal fee.
3. If disciplinary proceedings have been initiated against an individual with a lapsed, inactive, or retired license, the license shall not be renewed until the proceedings have been completed.
4. Continuing education submitted to the certifying body to meet the qualifications for recertification shall be accepted as meeting the statutory requirement for continuing education.
5. Upon request, an APN shall submit documentation to the Board of continuing education.
6. Effective January 1, 2010, APNs with prescriptive authority shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification each biennium prior to license renewal. (New to Chapter 4 from Chapter 2)

G. LAPSED LICENSE

The license is lapsed if not renewed or placed in an inactive status by the expiration date.

1. The license is lapsed if the RN license to practice in Arkansas is not renewed by the expiration date.
2. The license is lapsed when the national certification upon which licensure was granted expires.
3. Failure to receive the renewal notice shall not relieve the licensee of the responsibility for renewing the license by the expiration date.
4. Any licensee whose license has lapsed shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. ~~Proof~~ Documentation of current national certification; and
 - c. The renewal fee and the reinstatement fee/late penalty.
5. Fees submitted to the Board are nonrefundable.
6. Any person engaged in advanced practice nursing during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

H. REINSTATEMENT OF APN LICENSE

1. An individual who applies for licensure reinstatement who has been out of practice for more than five years shall provide evidence of passing an APN nursing refresher course approved by the board or an extensive orientation in the appropriate advanced practice role and population focus which includes a supervised clinical component by a qualified preceptor who meets the following requirements:

- a. Holds an active unencumbered APN or physician license
- b. Is in current practice in the advanced role and population focus
- c. Functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting

2. For those licensees applying for licensure reinstatement following disciplinary action, compliance with all board licensure requirements as well as any specified requirements set forth in the board's discipline order is required

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I. INACTIVE STATUS

1. Any licensee in good standing who desires his or her advanced practice license to be placed on inactive status may submit a request in writing to the Board.
2. The APN license shall immediately be placed on inactive status when the registered nurse license is placed on inactive or retired status.
3. The current license shall be placed on inactive status ~~from the date of expiration~~ upon receipt of the written request.
4. While the license is inactive, the licensee shall not engage in advanced practice nursing nor be subject to the payment of renewal fees.
5. If the nurse desires to resume practice in this state, he or she shall request a renewal application, which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
6. All certification and continuing education requirements for renewal shall apply.

J. RETIRED ADVANCED PRACTICE NURSE

1. Any advanced practice nurse in good standing whose registered nurse license has been placed on retired status may request that their APN license be placed on retired status.
2. The APN shall submit a request in writing, surrender the current license, and pay the required fee and the current license shall be placed on inactive status and a retired APN license issued.
3. An APN retired license shall be renewed biennially following submission of a renewal application and fee.
4. Fees are non-refundable.
5. While retired, the APN shall not practice nursing, however, an advanced practice nurse with a retired license may use the title "Advanced Practice Nurse" or the abbreviation "APN."
6. When the licensee desires to resume practice, he or she shall request a renewal application, which shall be completed and submitted with a reinstatement fee and the active renewal fee. The licensee must also meet those requirements outlined in Section III.E.
7. If the retired APN license is allowed to lapse, the licensee shall not hold himself or herself out as an APN and shall pay a reinstatement fee in addition to the fee required for renewal of the retired APN license.

K. Additional Certifications

1. An APN who has completed post-masters education for an additional nursing specialty shall:
 - a. Submit a request for permission to practice in the new certification area;
 - b. Submit a copy of authorization to sit for the first available certification exam from the Board approved certifying body;
 - c. Immediately cease practicing in the specialty upon notification of failure of the exam
 - d. Submit results of the certification in the additional specialty directly from the certifying body
 - e. Submit an official transcript or document from a nursing education program that meets the qualifications in Section II of the Chapter verifying the date and degree or certificate conferred
2. An APN who has prescriptive authority shall:
 - a. Prescribe only for patients covered by the original specialty while waiting additional specialty results.
 - b. Submit a collaborative practice agreement which includes the additional certification.

SECTION IV

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DUPLICATE LICENSE

- A. A duplicate license or certificate shall be issued when the licensee submits a notarized statement to the Board that the document is lost, stolen, or destroyed, and pays the required fee.
- B. The license will be marked "duplicate".

SECTION V NAME OR ADDRESS CHANGE

- A. A licensee whose name is legally changed shall be issued a replacement license following submission of the current license, along with an affidavit, copy of marriage license or court action, and the required fee.
- B. A licensee whose address changes from the address appearing on the current license shall immediately notify the Board in writing of the change.

SECTION VI STANDARDS OF NURSING PRACTICE

A. PURPOSE

- 1. To establish standards essential for safe practice by the advanced practice nurse.
- 2. To serve as a guide for evaluation of advanced nursing practice.

B. ~~CORE~~ STANDARDS FOR ALL CATEGORIES OF ADVANCED PRACTICE NURSING

- 1. The advanced practice nurse shall assess clients at an advanced level, identify health status including abnormal conditions, establish a diagnosis, develop and implement treatment plans, and evaluate client outcomes.
- 2. The advanced practice nurse shall use advanced knowledge and skills in teaching and guiding clients and other health team members.
- 3. The advanced practice nurse shall use critical thinking and decision making at an advanced level, commensurate with the autonomy, authority, and responsibility of his/her practice category.
- 4. The advanced practice nurse shall have knowledge of the statutes and rules governing advanced nursing practice, and function within the legal boundaries of the appropriate advanced practice nursing category.
- 5. The advanced practice nurse shall recognize the APN's limits of knowledge and experience, planning for situations beyond expertise, and collaborating with or referring clients to other health care providers as appropriate.
- 6. The advanced practice nurse shall retain professional accountability for advanced practice nursing care when delegating interventions.
- 7. The advanced practice nurse shall maintain current knowledge and skills in the advanced practice nursing category.
- 8. Rules which apply to registered nurses are hereby incorporated by reference.
- 9. The APN shall comply with the standards for registered nurses as specified in Chapter I. Standards for a specific role and population focus of APN supersede standards for registered nurses where conflict between the standards, if any, exists.

- C. In addition to the ~~core~~ standards, the advanced practice nurse shall practice in accordance with the standards established by the national certifying body from which the APN holds his or her certification required for licensure. These standards shall have been reviewed and accepted by the Board.

D. ADDITIONAL STANDARDS FOR CRNAs

- 1. The CRNA, acting in the normal course of his/her professional practice, may be authorized by a hospital or institution to act as their agent or employee to order the administration of controlled

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- substances under the DEA registration of the hospital or institution.
2. The CRNA may order nurses to administer drugs preoperatively and/or postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.
 3. The CRNA's order shall be directly related to the administration of drugs preoperatively and/or postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.
 4. A CRNA who has not been granted authority by a DEA registrant as described in Title 21 CFR 1301.22, or its successor to order the administration of controlled substances shall give all orders as verbal orders from the supervising physician, dentist, or other person lawfully entitled to order anesthesia.
 5. The CRNA shall be responsible for complying with all applicable state and federal laws and rules related to medications.

SECTION VII **PROFESSIONAL CERTIFICATION PROGRAMS**

- A. A national ~~certifying body~~ **certification program** which meets the following criteria shall be recognized by the Board to satisfy Section II of these rules.
- B. The national ~~certifying body~~ **certification program**:
 1. Is national in the scope of its credentialing;
 - 2. Is accredited by a national accreditation body as acceptable by the Board;**
 - 3.** Has no requirement for an applicant to be a member of any organization;
 - 4.** Has an application process and credential review which includes documentation that the applicant's education is in the advanced practice nursing category being certified, and that the applicant's clinical practice is in the certification category;
 - 5. Education requirements are consistent with the requirements of the advanced practice role and population foci.**
 - 6.** Uses an examination as a basis for certification in the advanced practice nursing category which meets the following criteria:
 - a. The examination is based upon job analysis studies conducted using standard methodologies acceptable to the testing community;
 - b. The examination represents entry-level practice in the APN role and population focus;**
 - c.** The examination represents the knowledge, skills, and abilities essential for the delivery of safe and effective advanced nursing care to clients;
 - d.** The examination content and its distribution are specified in a test plan (blueprint), based on the job analysis study, that is available to examinees;
 - e.** Examination items are reviewed for content validity and correct scoring using an established mechanism, both before use and periodically;
 - f.** Examinations are evaluated for psychometric performance;
 - h.** The passing standard is established using acceptable psychometric methods, and is reevaluated periodically; ~~and~~
 - i.** Examination security is maintained through established procedures; **and**
 - j. A re-take policy is in place.**
 - 7.** Issues certification based upon passing the examination and meeting all other certification requirements;
 - 8.** Provides for periodic recertification which includes review of continued education, qualifications, and continued competence;
 - 9.** Has mechanisms in place for communication to the Board for timely verification of an individual's certification status, changes in certification status, and changes in the certification program, including qualifications, test plan, and scope of practice;
 - 10.** Has an evaluation process to provide quality assurance in its certification program.

SECTION VIII **PRESCRIPTIVE AUTHORITY**

A. INITIAL APPLICANT

An applicant for an initial certificate of prescriptive authority shall:

1. Be currently licensed as an advanced practice nurse in Arkansas.
2. Provide evidence from the national certifying body that differential diagnosis and prescribing practices are recognized as being within the scope of practice for the applicant's certification category.
3. Provide documentation of successful completion of pharmacology coursework which shall include pharmacokinetics principles and their clinical application and the prescription of pharmacological agents in the prevention and treatment of illness, and the restoration and maintenance of health. The coursework shall contain a minimum of:
 - a. Three (3) graduate credit hour pharmacology course offered by an accredited college or university within two years immediately prior to the date of application to the Board; or
 - b. Forty-five (45) contact hours [a contact hour is fifty (50) minutes] in a pharmacology course which includes a competency component, offered by an accredited college or university, within two (2) years immediately prior to the date of application to the Board; or
 - c. Three (3) graduate credit hours pharmacology course, included as part of an advanced practice nursing education program, within five (5) years immediately prior to the date of application to the Board.
4. Provide documentation of a minimum of three hundred (300) clock hours preceptorial experience in the prescription of drugs, medicines, and therapeutic devices with a qualified preceptor, to be initiated with the pharmacology course and to be completed within one year of the beginning of the course. Preceptorial experience completed as a part of the formal educational program in which the pharmacology course is taught will meet the three hundred (300) clock hour requirement.
5. Submit a current collaborative practice agreement with a physician who is licensed under the Arkansas Medical Practices Act, §17-95-201 et seq., and who has a practice comparable in scope, specialty or expertise to that of the advanced practice nurse. APN's who will prescribe controlled substances shall seek a collaborative practice with a physician who has an unrestricted DEA registration number. The collaborative practice agreement shall include, but not be limited to:
 - a. Availability of the collaborating physician(s) for consultation or referral or both;
 - b. Methods of management of the collaborative practice, which shall include the use of protocols for prescriptive authority;
 - c. Plans for coverage of the health care needs of a client in the emergency absence of the advanced practice nurse or physician;
 - d. Provision for quality assurance; and
 - e. Signatures of the advanced practice nurse and collaborating physician(s), signifying mutual agreement to the terms of the collaborative practice.
6. Submit the nonrefundable processing fee with the application for a certificate of prescriptive authority.

B. ENDORSEMENT APPLICANT

1. An applicant for endorsement of prescriptive authority shall:
 - a. Provide documentation of a three (3) graduate credit hour pharmacology course offered by an accredited college or university or a forty-five (45) contact hour [a contact hour is fifty (50) minutes] pharmacology course which includes a competency component offered by an accredited college or university;
 - b. Provide evidence that prescriptive authority is current and unencumbered in the jurisdiction from which the applicant is moving;
 - c. Provide evidence of prescribing in a clinical setting for at least 500 hours in the year prior to application for a certificate of prescriptive authority;
 - d. Have an unencumbered advanced practice nursing license to practice or the equivalent in the jurisdiction from which the applicant is moving;
 - e. Provide a copy of current DEA registration (if prescriber has DEA number) and history of registration status; and

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- f. Meet requirements in Section VIII.A.1,2,5,6.
2. Endorsement applicants who do not meet all requirements established herein shall be required to submit documentation acceptable to the Board according to Section VIII.A.

C. PROTOCOLS FOR PRESCRIPTIVE AUTHORITY

Protocols shall be made available upon request of the Board. Such protocols shall, at a minimum, include:

1. Indications for and classifications of legend drugs, controlled substances (if prescriber holds a DEA registration number), and therapeutic devices which will be prescribed or administered by the APN;
2. Date the protocol was adopted or last reviewed, which shall be at least annually.

D. PRESCRIBING PRIVILEGES

1. The APN, applying for a certificate of prescriptive authority, shall acknowledge in the application that he or she is familiar with all state and federal laws and rules regarding prescribing; and shall agree to comply with these laws and rules.
2. An advanced practice nurse with a certificate of prescriptive authority may receive and prescribe legend drugs, medicines, or therapeutic devices appropriate to the APN's area of practice. The prescriptive authority for controlled drugs shall only extend to drugs listed in Schedules III through V.
3. Prescribing stipulations are as follows:
 - a. Legend drugs, therapeutic devices, and controlled substances (Schedules III-V), defined by the state and/or federal controlled substances lists, will be prescribed, administered, or ordered as established in protocols provided that the APN has an assigned DEA registration number which is entered on each written prescription for a controlled substance.
 - b. The APN shall file his/her DEA registration number with the Board upon receipt.
 - c. Advanced practice nurses shall not delegate to unlicensed ancillary staff the calling in of prescriptions to the pharmacy.
 - d. The APN shall notify the Board in writing the next working day following termination of the collaborative practice agreement. A new collaborative practice agreement is required to be on file prior to reactivating prescriptive authority.
4. The APN may prescribe a legend drug, medicine, or therapeutic device not included in the written protocols only as follows:
 - a. Upon a specific written or verbal order obtained from the collaborating physician before the prescription or order is issued by the APN; and
 - b. Include documentation of consultation as described above in the client's medical record to be signed by the APN;
 - c. Schedules I and II controlled substances shall not be prescribed under the APN's certificate of prescriptive authority.
5. The APN shall note prescriptions on the client's medical record and include the following information:
 - a. Medication and strength;
 - b. Dose;
 - c. Amount prescribed;
 - d. Directions for use;
 - e. Number of refills; and
 - f. Initials or signature of APN.
6. Advanced practice nurses in the category of certified registered nurse anesthetists shall not be required to have prescriptive authority to provide anesthesia care, including the administration of drugs or medicines necessary for such care.
7. Advanced practice nurses who prescribe prior to obtaining a certificate of prescriptive shall be considered illegal practitioners and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

E. WRITTEN PRESCRIPTION FORMAT

1. All written prescriptions issued by the APN shall contain the name of the client, and the APN's name, telephone number, signature with the initials "APN", prescribing identification number issued by the Board, and should include information contained in Subsection D.5.a-f of this Section.
2. All prescriptions for controlled substances shall be written in accordance with federal rules. The APN's assigned DEA registration number shall be written on the prescription form when a controlled substance is prescribed.

F. RECEIVING PREPACKAGED DRUG SAMPLES

1. APN's who have fulfilled requirements for prescriptive authority may receive legend drug samples and therapeutic devices appropriate to their area of practice, including controlled substances contained in Schedules III through V of the Controlled Substance Act, which have been prepared, packaged, or fabricated by a pharmaceutical manufacturer in accordance with the Arkansas pharmacy laws and rules.
2. Records must comply with all applicable federal and state laws and rules.

G. TERMINATION OF PRESCRIPTIVE AUTHORITY

1. Prescriptive authority may be terminated by the Board when the prescriber:
 - a. Fails to maintain current active licensure as an advanced practice nurse;
 - b. Violates provisions of this Act and/or rules established by the Arkansas Department of Health, Nursing, or Pharmacy Boards;
 - c. Violates any state or federal law or rules applicable to prescriptions; or
 - d. Fails to follow any conditions imposed.
2. To reinstate prescriptive authority, the APN must meet requirements of the Board at the time of reinstatement.

H. LAPSED CERTIFICATE OF PRESCRIPTIVE AUTHORITY

1. The certificate of prescriptive authority is lapsed if:
 - a. The licensee's active advanced practice nurse license is not renewed by the expiration date;
 - b. The national certification upon which licensure is based expires;
 - c. There is not a current collaborative practice agreement on file with the board; or
 - d. The advanced practice license is placed in inactive or retired status.
2. After reinstating a lapsed advanced practice license, the licensee shall submit to the Board a current collaborative practice agreement to reactivate the certificate of prescriptive authority.
3. Any person engaged in prescribing during the time his or her certificate of prescriptive authority has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

I. INACTIVE STATUS

1. A certificate of prescriptive authority will automatically be considered lapsed and subject to the requirements of these rules when a licensee places his or her advanced practice license on inactive status.
2. While the certificate of prescriptive authority or advanced practice nurse license is inactive the licensee shall not engage in any practice within the scope of the certificate of prescriptive authority.
3. If the nurse desires to resume practice in this state, he or she shall request a renewal application which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
4. All certification requirements for renewal shall apply.
5. If disciplinary proceedings on an inactive licensee have been initiated, the license shall not be reinstated until the proceedings have been completed.
6. Effective January 1, 2010, APNs whose prescriptive authority is inactive shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification for each 12 months of non-prescribing activity in addition to the five (5) contact hours required for APN license renewal prior to reactivation of prescriptive authority. (NEW to Chapter 4 from Chapter 2)

SECTION IX PRESCRIPTIVE AUTHORITY ADVISORY COMMITTEE

A. PURPOSE

The purpose of this committee shall include functioning in an advisory capacity to assist the Board with oversight and implementation of the provisions regarding prescriptive authority.

B. COMPOSITION

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The Advisory Committee shall be composed of five (5) members appointed by the Board and approved by the Governor. Three (3) members shall be advanced practice nurses holding certificates of prescriptive authority. One (1) committee member shall be a licensed physician who has been involved in a collaborative practice with a registered nurse practitioner for at least five (5) years. One member shall be a licensed pharmacist who has been in practice for at least five (5) years.

C. TERMS OF OFFICE

Members shall serve three (3) year terms and may be reappointed. The Board may remove any advisory committee member, after notice and hearing, for incapacity, incompetence, neglect of duty, or malfeasance in office.

D. COMPENSATION

Advisory committee members shall serve without compensation; but may be reimbursed to the extent special monies are appropriated therefore for actual and necessary expenses incurred in the performance of their official Board duties.

Effective December 1, 2004

SECTION X NURSING EDUCATION PROGRAMS (New Section in Chapter 4)

A. NEW APN PROGRAM LEADING TO LICENSURE (moved from Chapter Six)

1. Prerequisite Approval

a. An institution, seeking to establish a new APN nursing education program leading to licensure, shall submit a letter of intent to the Board.

(1) An applicant for an Advanced Practice Nursing (APN) program shall comply with the "Criteria and Procedures for Preparing Proposals for New Programs," established by the Arkansas Department of Higher Education.

(2) Appropriate professional accreditation of the new APN program is considered to be deemed status as approved by the Board.

b. The institution shall submit:

(1) a copy of the curricula plan and course descriptions for Board review within thirty(30) days of sending the information to the accrediting body;

(2) other accreditation materials as requested by the Board; and

(3) documentation of accreditation within thirty(30) days of receipt of the report from the accrediting body.

B. ESTABLISHED PROGRAM THAT PREPARES GRADUATES FOR LICENSURE

1. Continued Full Approval

a. An established ~~Master's~~ graduate program in advanced practice nursing shall ~~submit to~~ ~~notify~~ the Board ~~documentation~~ of the program's continued national nursing accreditation status within thirty (30) days of receipt from the accrediting body. Receipt of the documentation ~~which will~~ ~~shall~~ serve as deemed status for approval ~~by the ASBN~~.

C. EDUCATION PROGRAM

1. The education program for advanced practice nursing shall meet the nursing accrediting body standards for advanced practice nursing.

2. The curriculum plan for advanced practice nursing shall include:

a. Preparation in one of the four identified APN roles (CRNA, CNM, CNS, and ANP); and

b. Preparation in at least one of the approved population foci; (effective 2015)

(1) Family/Individual Across the Lifespan

(2) Adult-Gerontology

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- (3) Neonatal
- (4) Pediatrics
- (5) Women's Health/Gender-related
- (6) Psychiatric/Mental Health; and

c. Three separate graduate level courses (the APN Core):

- (1) Advanced physiology and pathophysiology
- (2) Advanced health assessment
- (3) Advanced pharmacology

3.Clinical Experiences

- a. All APNs who have a direct client care role, make diagnoses, prescribe therapeutic regimens and are accountable for these decisions shall have a minimum of 500 supervised clinical hours in direct clinical practice during the program.
- b. APN programs preparing for two population foci shall have a minimum of 500 supervised clinical hours for each population focus.
- c. Clinical supervision must be congruent with current national professional organizations and nursing accrediting body standards applicable to the APN role and population focus.
- d. Student clinical experiences shall be congruent with the population focus of the role.

Effective July 1, 2010

CHAPTER SIX STANDARDS FOR NURSING EDUCATION PROGRAMS

SECTION I APPROVAL OF PROGRAMS

This chapter presents the Standards established by the Arkansas State Board of Nursing for nursing education programs that lead to licensure.

A. NEW PROGRAM LEADING TO LICENSURE

1. Prerequisite Approval

- a. An institution, seeking to establish a new nursing program leading to licensure, shall submit a letter of intent to the Board.
 - (1) An applicant for a baccalaureate, diploma, associate degree, or practical nurse program shall comply with the approval process of appropriate state education approval authority.
 - (2) The parent institution shall be a post-secondary institution approved by the Arkansas Department of Higher Education or hospital approved by the Arkansas Department of health of a consortium of such institutions.
 - ~~(3) An applicant for an Advanced Practice Nursing (APN) program shall comply with the "Criteria and Procedures for Preparing Proposals for New Programs," established by the Arkansas Department of Higher Education.~~
 - ~~(4) Appropriate professional accreditation of the new APN program is considered to be deemed status as approved by the Board.~~
 - (3) Out of state nurse programs shall meet the requirements of the Arkansas Department of Higher Education and be approved by the Arkansas State Board of Nursing.
- b. The institution must submit a current feasibility study, that is signed by the appropriate administrative officers, and includes the following:
 - (1) Purpose for establishing the program;
 - (2) Type of educational program to be established;
 - (3) Relationship to the parent institution, including an organizational chart;
 - (4) Mission, philosophy, purposes, and accreditation status of the parent institution;
 - (5) Evidence that the parent institution has authorization or is in the process of obtaining authorization to conduct a program of nursing; or the approval status of parent institution;
 - (6) Financial statement of the parent institution for the past two fiscal years;
 - (7) A proposed budget for each year of the program's implementation;
 - (8) Documented need and readiness of the community to support the program, including surveys of potential students, employment availability, and potential employers;
 - (9) Source and numbers of potential students and faculty;
 - (10) Proposed employee positions including support staff;
 - (11) Proposed clinical facilities for student experiences, including letters of support from all major facilities expected to be used for full program implementation, including evidence of clinical space for additional students;
 - (12) Letters of support from approved nursing and health-related programs using the proposed clinical facilities;
 - (13) Proposed physical facilities including offices, classrooms, technology, library, and laboratories;
 - (14) Availability of the general education component of the curriculum or letter of agreement, if planned, from another institution; and
 - (15) A timetable for initiating the program, including required resources, and plans for attaining initial approval.
 - (16) Other information as requested by the Board.
- c. A representative of the Board shall conduct an on-site survey and complete a report.
- d. The Board shall review all prerequisite documents during a regularly scheduled Board meeting.
- e. The Board may grant, defer, or deny Prerequisite Approval.

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- f. After receiving Prerequisite Approval status, the institution may:
 - (1) Advertise for students; and
 - (2) Proceed toward compliance by following the Education Standards for Initial Approval.
- 2. Initial Approval
 - a. The institution shall secure a nurse administrator of the program.
 - b. The nurse administrator shall plan the program and
 - (1) Assure compliance with Board standards and recommendations;
 - (2) Address prerequisite recommendations;
 - (3) Prepare detailed budget;
 - (4) Employ qualified faculty and support staff;
 - (5) Prepare a program organizational chart showing lines of authority;
 - (6) Design the program's sequential curriculum plan;
 - (7) Develop student, faculty, and support staff policies and procedures;
 - (8) Attain agency affiliation agreements;
 - (9) Verify that proposed physical facilities are in place; and
 - (10) Submit documentation to the Board that Initial Approval Standards are met.
 - c. A Board representative shall validate readiness of the program to admit students and prepare a report.
 - d. The Board shall review all documents for Initial Approval during a regularly scheduled Board meeting.
 - e. The Board may grant, defer or deny Initial Approval.
 - f. After receiving Initial Approval, the program:
 - (1) May admit students;
 - (2) Shall proceed toward compliance by following the Education Standards for Full Approval; and
 - (3) Shall follow the same standards as those of established programs in terms of annual activities, projects, and reports.
- 3. Full Approval
 - a. Before graduation of the first class, a Board representative shall validate compliance with the Standards and prepare a report.
 - b. The report and documentation shall be reviewed during a regularly scheduled Board meeting.
 - c. The Board may grant, defer, or deny Full Approval.

B. ESTABLISHED PROGRAM THAT PREPARES GRADUATES FOR LICENSURE

- 1. Continued Full Approval
 - a. A survey will be periodically conducted to review the program for continued compliance with the Standards. An on-site or paper survey for a program includes:
 - (1) A newly established program shall have an on-site survey three (3) years after receiving initial Full Approval.
 - (2) An established professional or practical nurse program that has continued accreditation status with a national nursing accreditation organization and has maintained a NCLEX-RN® or NCLEX-PN® pass rate of at least 75% shall have a paper survey every five (5) years thereafter.
 - (3) An established professional or practical nurse program that does not meet the criteria for accreditation with a national nursing education accreditation organization or has failed to maintain at least a 75% pass rate on the NCLEX-RN® or NCLEX-PN® shall have an on site survey visit every five (5) years thereafter.
 - (4) ~~An established Master's program in advanced practice nursing shall notify the Board of the program's continued national nursing accreditation status, which will serve as deemed status for Board approval.~~
 - b. The survey report and documentation shall be submitted to the Board and reviewed during a regularly scheduled Board meeting.
 - c. The Board may grant, defer, or deny Continued Full Approval.

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2. Conditional Approval
 - a. If areas of noncompliance with standards are not corrected in the timeframe established by the Board, the Board shall award Conditional Approval.
 - b. Information regarding a nursing program requested by the Board shall be provided by the parent institution.
 - c. A representative of the Board shall conduct an on-site survey and complete a written report.
 - d. Additional information available to the Board may be considered.
 - e. The Board shall review all documents during a regularly scheduled Board meeting.
 - f. The Conditional Approval status shall be in effect for a maximum of one (1) year to correct noncompliance deviations from the standards, unless otherwise determined by the Board.
 - g. The program and parent institution shall receive written notification of noncompliance deviations and the Board action.
 - h. The Board may grant continued Conditional Approval, Full Approval, or withdraw the program's approval.
3. Satellite Campus
 - a. Satellite campus programs shall be approved by the Board prior to implementation.
 - (1) Continued Full Approval program may submit a proposal for a satellite campus program.
 - (2) The proposal shall reflect requirements for prerequisite approval of a new program.
 - b. The Board may grant, defer, or deny approval.
 - c. All approved satellite campus programs shall maintain the same standards as the parent program.
 - d. Each satellite campus' data will be included in the program's annual report and five-year survey report.
4. Distant Learning Sites
 - a. Distant learning sites shall be approved by the Board prior to utilization.
 - b. Each distant learning site's data shall be included in the program's annual report and five-year survey report.
5. Out of state programs shall be Board approved prior to implementing clinical rotations in Arkansas healthcare facilities.

SECTION II **PROGRAM REQUIREMENTS**

A. ADMINISTRATION AND ORGANIZATION

1. Institutional Accreditation
The parent institution shall be approved by the appropriate state body.
2. Institutional Organization
 - a. The parent institution shall be a post-secondary educational institution, hospital, or consortium of such institutions.
 - b. The institutional organizational chart shall indicate lines of authority and relationships with administration, the program, and other departments.
 - c. The program shall have at least equal status with comparable departments of the parent institution.
3. Program Organization
 - a. The program shall have a current organizational chart.
 - b. The program shall have specific current job descriptions for all positions.

B. PHILOSOPHY AND GRADUATE COMPETENCIES

1. The philosophy of the program shall be in writing and consistent with the mission of the parent institution.
2. Graduate competencies shall be derived from the program's philosophy.
3. The philosophy and graduate competencies shall serve as the framework for program development and maintenance.

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C. RESOURCES

1. Financial Resources
 - a. There shall be adequate financial support to provide stability, development, and effective operation of the program.
 - b. The director of the program shall administer the budget according to parent institutional policies.
 - c. The director shall make budget recommendations with input from the faculty and staff.
2. Library and Learning Resource Center
 - a. Each program and each satellite campus shall have a library or learning resource center with the following:
 - (1) Current holdings to meet student educational needs, faculty instructional needs, and scholarly activities.
 - (2) Budget plan for acquisitions of printed and multi-media materials.
 - (3) Written process for identifying and deleting outdated holdings.
 - (4) Resources and services accessible and conveniently available.
 - b. The library of a baccalaureate, diploma, associate degree, or practical nurse program shall be under the direction of a qualified master's degreed librarian.

D. FACILITIES

1. Classrooms and Laboratories
 - a. Each program and satellite campus shall have a clinical skills laboratory equipped with necessary educational resources.
 - b. Classrooms and laboratories shall be:
 - (1) Available at the scheduled time;
 - (2) Adequate in size for number of students;
 - (3) Climate controlled, ventilated, lighted; and
 - (4) Equipped with seating, furnishings and equipment conducive to learning and program goals.
 - c. Adequate storage space shall be available.
 - d. Facilities shall be in compliance with applicable local, state, and federal rules and regulations related to safety and the Americans with Disabilities Act.
2. Offices
 - a. The director of the program shall have a private office.
 - b. Faculty members shall have adequate office space to complete duties of their positions and provide for uninterrupted work and privacy for conferences with students.
 - c. There shall also be adequate:
 - (1) Office space for clerical staff;
 - (2) Secure space for records, files, equipment, and supplies; and
 - (3) Office equipment and supplies to meet the needs of faculty and clerical staff.
3. Clinical Facilities
 - a. Clinical facilities and sites shall provide adequate learning experiences to meet course objectives.
 - b. Clinical sites shall be adequately staffed with health professionals.
 - c. The program shall have a current and appropriate written agreement with each clinical site.
 - d. Written agreements shall include a termination clause and be reviewed annually.
 - e. Students shall receive orientation to each clinical site.

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E. PERSONNEL

1. Program Director
 - a. The program director shall have a current unencumbered registered nurse license to practice in Arkansas and be employed full time.
 - b. The practical nursing program director shall have a minimum of a baccalaureate degree in nursing. Directors appointed prior to January 1, 2004, shall be exempt for the duration of their current position.
 - c. The baccalaureate, diploma or associate degree program director shall have a minimum of a master's degree in nursing.
 - d. The program director shall have previous experience in clinical nursing practice and/or education.
 - e. The program director's primary responsibility and authority shall be to administer the nursing program.
 - (1) The program director shall be accountable for program administration, planning, implementation, and evaluation.
 - (2) Adequate time shall be allowed for relevant administrative duties and responsibilities.
 - f. The licensure examination application shall be authorized by the nursing program director to assure the applicant has completed the program.
2. Faculty and Assistant Clinical Instructors
 - a. Faculty shall hold a current unencumbered registered nurse license to practice in Arkansas.
 - b. Faculty shall have had previous experience in clinical nursing.
 - c. Faculty teaching in a baccalaureate, diploma, associate degree, or practical nurse program shall have a degree or diploma above the type of education program offered.
 - d. Nurses serving as assistant clinical instructors in a baccalaureate, diploma, associate degree, or practical nurse program may have a degree or diploma at or above the type of education program offered.
 - e. Assistant clinical instructors shall:
 - (1) Be under the direction of faculty;
 - (2) Hold a current unencumbered license to practice in Arkansas; and
 - (3) Have a minimum of one year experience in the clinical area.
 - f. All faculty shall maintain education and clinical competencies in areas of instructional responsibilities.
 - g. Non-nurse faculty shall meet the requirements of the parent institution.
 - h. Faculty shall be organized with written policies, procedures, and, if appropriate, standing committees.
 - i. Nursing faculty policies shall be consistent with parent institutional policies.
 - j. Program specific policies shall be developed by nursing faculty.
 - k. A planned program specific orientation for new faculty shall be in writing and implemented.
 - l. Consideration shall be given to safety, patient acuity, and the clinical area in determining the necessary faculty to student ratio for clinical experiences. The faculty to student ratio in clinical experiences shall be no greater than 1:10.
 - m. The minimum number of faculty shall be one (1) full-time member in addition to the director.
 - n. Faculty meetings shall be regularly scheduled and held. Minutes shall be maintained in writing.
 - o. Faculty members shall participate in program activities as per policies and procedures.
3. Support Staff

There shall be secretarial and other support staff sufficient to meet the needs of the program.

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F. PRECEPTORS

1. Preceptor Utilization
 - a. Preceptors shall not be utilized in foundation or introductory courses.
 - b. Preceptors shall not be considered in clinical faculty-student ratio. The ratio of preceptor to student shall not exceed 1:2.
 - c. There shall be written policies for the use of preceptors, that include:
 - (1) Communications between the program and preceptor concerning students;
 - (2) Duties, roles, and responsibilities of the program, preceptor, and student; and
 - (3) An evaluation process.
 - d. All preceptors shall be listed on the annual report by area, agency, and number of students precepted.
2. Preceptor Criteria
 - a. Baccalaureate, diploma, associate degree, or practical nurse program student preceptors shall hold a current unencumbered license to practice as a registered nurse in Arkansas. Practical nurse student preceptors shall hold a current unencumbered license to practice as a registered nurse, licensed practical nurse, or licensed psychiatric technician nurse in Arkansas.
 - b. Preceptors shall have a minimum of one-year experience in the area of clinical specialty for which the preceptor is utilized.
 - c. Preceptors shall participate in evaluation of the student.
3. Student Criteria
 - a. Precepted students shall be enrolled in courses specific to the preceptor's expertise.
 - b. Precepted students shall have appropriate learning experiences prior to the preceptorship.
 - c. There shall be no reimbursement to students for the educational preceptorship.
4. Faculty Criteria
 - a. Program faculty shall be responsible for the learning activity.
 - b. Program faculty shall be available for consultation with student and preceptor.
 - c. Program faculty shall be responsible for the final evaluation of the experience.

G. STUDENTS

1. Admissions, Readmissions, and Transfers
 - a. There shall be written policies for admission, readmission, transfer, and advanced placement of students.
 - b. Admission criteria shall reflect consideration of potential to complete the program and meet standards to apply for licensure (See ACA §17-87-312).
 - c. Students who speak English as a second language shall meet the same admission criteria as other students and shall pass an English proficiency examination.
 - d. Documentation of high school graduation or an equivalent, as determined by the appropriate educational agency, shall be an admission requirement.
2. Progression and Graduation: There shall be written policies for progression and graduation of students.
3. Student Services
 - a. Academic and financial aid services shall be accessible to all students.
 - b. If health services are not available through the parent institution, a plan for emergency care shall be in writing.
 - c. There shall be provision for a counseling and guidance program separate from nursing faculty.
4. Appeal Policies: Appeal policies shall be in writing and provide for academic and non-academic grievances.
5. Program Governance: Students shall participate in program governance as appropriate.

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H. STUDENT PUBLICATIONS

1. Publications shall be current, dated, and internally consistent with parent institution and program materials.
2. The following minimum information shall be available in writing for prospective and current students:
 - a. Approval status of the program granted by the Board;
 - b. Admission criteria;
 - c. Advanced placement policies;
 - d. Curriculum plan;
 - e. Program costs;
 - f. Refund policy;
 - g. Financial aid information; and
 - h. Information on meeting eligibility standards for licensure, including information on ACA §17-87-312 and that graduating from a nursing program does not assure ASBN's approval to take the licensure examination.
3. The student handbook shall include the following minimum information:
 - a. Philosophy and graduate competencies;
 - b. Policies related to substance abuse, processes for grievances and appeal, grading, progression, and graduation; and
 - c. Student rights and responsibilities.

I. EDUCATIONAL PROGRAM

1. The education program shall include curriculum and learning experiences essential for the expected entry level and scope of practice.
 - a. Curriculum development shall be the responsibility of the nursing faculty.
 - b. Curriculum plan shall be organized to reflect the philosophy and graduate competencies.
 - c. Courses shall be placed in a logical and sequential manner showing progression of knowledge and learning experiences.
 - d. Courses shall have written syllabi indicating learning experiences and requirements.
 - e. Theory content shall be taught concurrently or prior to related clinical experience.
 - f. Clinical experiences shall include expectations of professional conduct by students.
 - g. Curriculum plans for all programs shall include appropriate content in:
 - (1) Introduction to current federal and state patient care guidelines;
 - (2) Current and emerging infectious diseases;
 - (3) Emergency preparedness for natural and man made disasters;
 - (4) Impact of genetic research and cloning;
 - (5) End of life care; and
 - (6) Legal and ethical aspects of nursing, including the *Arkansas Nurse Practice Act*.
2. The curriculum plan for practical nurse programs shall include:
 - a. Theoretical content and clinical experiences that focus on:
 - (1) Care for persons throughout the life span including cultural sensitivity;
 - (2) Restoration, promotion, and maintenance of physical and mental health; and
 - (3) Prevention of illness for individuals and groups.
 - b. The length of the practical nurse curriculum shall be no less than ten (10) calendar months which includes at least thirteen hundred (1300) contact hours.
 - c. Theory content may be in separate courses or integrated and shall include at least the following:
 - (1) Anatomy and physiology;
 - (2) Nutrition;
 - (3) Pharmacology and intravenous therapy;
 - (4) Growth and development throughout the life span;
 - (5) Fundamentals of nursing;
 - (6) Gerontological nursing;
 - (7) Nursing of adults;
 - (8) Pediatric nursing;
 - (9) Maternal/infant nursing;
 - (10) Mental health nursing; and
 - (11) Principles of management in long term care, including delegation.

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- d. Clinical experiences shall be in the areas of:
 - (1) Fundamentals of nursing;
 - (2) Nursing of adults;
 - (3) Pediatric nursing;
 - (4) Gerontological nursing;
 - (5) Maternal/infant nursing;
 - (6) Mental health;
 - (7) Administration of medications, including intravenous therapy; and
 - (8) Management in long term care, including delegation.
- 3. The curriculum plan for baccalaureate, diploma, or associate degree nurse programs shall include:
 - a. Theoretical content and clinical experiences that focus upon:
 - (1) The prevention of illness and the restoration, promotion, and maintenance of physical and mental health;
 - (2) Nursing care based upon assessment, analysis, planning, implementing, and evaluating; and
 - (3) Care for persons throughout the life span, including cultural sensitivity.
 - b. Course content may be in separate courses or integrated and shall include at least the following:
 - (1) Biological and physical sciences content:
 - a. Chemistry;
 - b. Anatomy and physiology;
 - c. Microbiology;
 - d. Pharmacology;
 - e. Nutrition; and
 - f. Mathematics.
 - (2) Behavioral science and humanities content:
 - a. Psychology;
 - b. Sociology;
 - c. Growth and Development;
 - d. Interpersonal relationships;
 - e. Communication; and
 - f. English composition.
 - (3) Nursing science content:
 - a. Medical surgical adult;
 - b. Pediatrics;
 - c. Maternal/Infant;
 - d. Gerontology;
 - e. Mental Health;
 - f. Leadership, including nursing management and delegation; and
 - g. Baccalaureate programs shall include community health.
 - (4) Clinical experiences shall be in the areas of:
 - a. Medical/surgical;
 - b. Pediatrics;
 - c. Maternal/infant;
 - d. Mental health;
 - e. Gerontology;
 - f. Leadership and management, including delegation;
 - g. Rehabilitation; and
 - h. Baccalaureate programs shall include clinical in community health.

J. PROGRAM EVALUATION

- 1. Faculty shall be responsible for program evaluation.
- 2. A systematic evaluation plan of all program aspects shall be in writing, implemented, and include: philosophy and graduate competencies, curriculum, policies, resources, facilities, faculty, students, graduates, and employer evaluation of graduates.
- 3. The outcomes of the systematic evaluations shall be used for ongoing maintenance and development of the program.
- 4. Appropriate records shall be maintained to assist in overall evaluation of the program after graduation.
- 5. The systematic program evaluation plan shall be periodically reviewed.

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6. Students shall evaluate the courses, instructors, preceptors, and clinical experiences throughout the program, and the overall program after graduation.

K. RECORDS

1. Transcripts of all students enrolled in the program shall be maintained according to policies of the parent institution.
 - a. Transcripts shall reflect courses taken.
 - b. The final transcript shall include:
 - (1) Dates of admission;
 - (2) Date of separation or graduation from the program;
 - (3) Hours/credits/units earned, degree, diploma, or certificate awarded;
 - (4) The signature of the program director, registrar, or official electronic signature; and
 - (5) The seal of the school or be printed on security paper or an official electronic document.
 - c. Current program records shall be safely stored in a secure area.
 - d. Permanent student records shall be safely stored to prevent loss by destruction and unauthorized use.

SECTION III

REPORTS, LICENSURE EXAMINATION PERFORMANCE, AND CLOSURE

A. REPORTS

1. Annual report: An annual report shall be submitted in a format and date determined by the Board.
2. Special reports/requests: The Board shall be notified in writing of major changes affecting the program, including but not limited to:
 - a. School name;
 - b. Director of Program; and
 - c. Ownership or merger of parent institution.
3. Curriculum changes:
 - a. Baccalaureate, diploma, associate degree, or practical nurse program changes – Major changes of curriculum or standards shall be reported to the Board prior to implementation, including but not limited to:
 - (1) Philosophy, competencies, and objectives.
 - (2) Reorganization of curriculum.
 - (3) Increase or decrease in length of program.
 - b. Practical Programs – Major changes of curriculum and standards shall be approved prior to implementation, including but not limited to:
 - (1) Philosophy, competencies, and objectives;
 - (2) Reorganization of curriculum; and
 - (3) Increase or decrease in length of program.
4. Pilot programs/projects that differ from the current approved program shall be approved prior to implementation.

B. LICENSURE EXAMINATION PERFORMANCE

1. The student pass rate on the licensure examination shall be calculated on an annual calendar year.
2. The program shall maintain a minimum pass rate of 75% for first-time examination candidates.
3. Any program with a pass rate below 75% shall:
 - a. First year:
 - (1) Receive a letter of concern; and
 - (2) Provide the Board with a report analyzing all aspects of the program. The report shall identify and analyze areas contributing to the low pass rate and include plans for resolution which shall be implemented.
 - b. Second consecutive year:
 - (1) Receive a letter of warning; and

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- (2) Program director and parent institution representative shall present a report to the Board. The report shall identify and analyze the failure of first year corrections and additional plans for resolution of the low pass rate.
- c. Third consecutive year:
 - (1) Be placed on conditional approval; and
 - (2) Conditional approval will be granted until two consecutive years of an above 75% pass rate is achieved or until the Board withdraws approval status for noncompliance with the education standards.

C. PROGRAM CLOSURE

- 1. Voluntary
 - a. The parent institution shall submit a letter of intent for closure at least six (6) months prior to the closure. The letter shall include:
 - (1) Date of closure; and
 - (2) Plan for completion of currently enrolled students.
 - b. The Board must approve closure plan prior to implementation.
 - c. All classes and clinical experiences shall be provided until current students complete the program or parent institution provides for transfer to another acceptable program.
 - d. Records of a closed program shall be maintained by the parent institution and be in compliance with federal and state laws. The institution shall notify the Board of arrangements for the storage of permanent student and graduate records.
- 2. Mandatory
 - a. Upon Board determination that a program has failed to comply with educational standards and approval has been withdrawn, the parent institution shall receive written notification for closure of the program. The notification shall include:
 - (1) The reason for withdrawal of approval;
 - (2) The date of expected closure; and
 - (3) A requirement for a plan for completion of currently enrolled students or transfer of students to another acceptable program.
 - b. Records of a closed program shall be maintained by the parent institution and be in compliance with federal and state laws. The institution shall notify the Board of arrangements for the storage of permanent student and graduate records.
- 3. A program that has had withdrawal of their approval status may apply as a new program after one year from official closure date.

~~Effective May 1, 2008~~
Effective July 01, 2010