

NORTH CAROLINA BOARD OF NURSING PROGRAM DESCRIPTIVE REPORT

GUIDELINES FOR SUBMISSION

All information must be submitted in both electronic and hard copy format to:

North Carolina Board of Nursing
Attn: Education and Practice Coordinator
PO Box 2129
Raleigh, NC 27602
education@ncbon.com

PURPOSE: The Program Descriptive Report (PDR) is based on an in-depth study of the program in relation to 21NCAC 36.0303 - .0323. The PDR is the method for the program to supply evidence to verify compliance with the rules. The nursing program shall file with the *Board records, data, and reports in order to furnish information concerning operation of the program as prescribed in the rules in this Section including: (1)an Annual Report received by the Board by November 1 of each year; [21 NCAC 36 .0323 (f)] *NC Board of Nursing

The purposes of the PDR are to:

- Assist the program in reviewing existing strategies for implementation of the program in relation to 21NCAC 36.0303 - .0323;
 - Facilitate identification of program strengths and weaknesses in relation to 21NCAC 36.0303 - .0323;
 - Provide a database to enhance decisions regarding needed improvements for strengthening the program;
 - Assist the Education Consultant of the Board in gathering data about the program, which will be used in preparing a report for the Board of Nursing.
1. The PDR should be completed in a narrative format. Included are forms and tables to assist with development of the report.
 2. Minimum 12-point font size.
 3. Do not change name, size, and font or delete headings on each page or form.
 4. All pages must be numbered sequentially with page numbers visible on each page.
 5. Provide a table of contents with each section and page number noted.
 6. All sections in the report shall be clearly labeled and sequential. Electronic version files should be placed in folders with each section labeled as a separate folder with the required evidence/appendix.
 7. The hard copy report shall be in a notebook with tabs for each section.
 8. The suggested evidence, which may be included in the report relative to compliance with rules, is specified underneath each section heading. The evidence may relate to more than one rule.
 - a. Do not duplicate evidence in more than one section.
 - b. Be sure to note where the evidence is located in the report.

9. In the suggested Appendices, enter data in tables as labeled at the top of each column.
10. If you have specific questions, please contact your Education and Practice Consultant and reference the item number or page number included within the application.

LIST OF EVIDENCE TO HAVE AVAILABLE ON-SITE

The following materials are to be maintained by the program and available for review if requested:

- Minutes (nursing faculty, nursing faculty committee, nursing student body) – past 2 years.
- Evaluation of learning experiences in affiliating clinical agencies.
- College/University Faculty Handbook and Program Faculty Handbook.
- All Faculty Vitae on NCBON faculty vitae forms (full-time and part-time).
- Evaluation of nursing faculty by Administrator of Nursing Program (most recent).
- Evaluation of Administrator of Nursing Program by immediate supervisor.
- Summaries of all completed course/program evaluation tools identified in program.
- Evaluation plan and outcomes (faculty and student evaluation of courses, student evaluation of class and clinical instruction) – past 2 years.
- Data collected for program improvement – past 2 years.
- Results of standardized tests administered to nursing students – past 2 years.
- All exams for each course for last offering including range and distribution of grades for the course.
- Samples of completed nursing student assignments from each course for last offering including nursing faculty evaluation of student clinical performance. Samples should be representative of grade distribution for the course.
- Documentation related to any student or faculty appeals – last 5 years.
- Records for ALL students currently enrolled in the nursing program and the last graduating class. Records may remain in usual locations, but should be pulled to facilitate the review. Hard copies of computer documents should be available.

PLEASE NOTE THE TABLES IN THE APPENDIXES ARE OPTIONAL AND NOT REQUIRED. IF THE TABLES ARE NOT USED, PLEASE MAKE SURE THE INFORMATION PROVIDED IS CLEAR AND CONCISE.

PROGRAM DESCRIPTIVE REPORT CONTENTS OVERVIEW

21 NCAC 36 .0317 ADMINISTRATION

(Section label: Administration)

Total Program Evaluation Plan [21 NCAC 36 .0317 (d)]: Submit the total program evaluation plan labeled/file name **Table 1 – Total Program Evaluation Plan** and include:

- (1) students' achievement of program outcomes;
- (2) evidence of program resources, including fiscal, physical, human, clinical and technical learning resources; student support services: and the availability of clinical sites and the viability of those sites adequate to meet the objectives of the program;
- (3) measures of program outcomes for graduates;
- (4) evidence that accurate program information for the public is available;
- (5) evidence that the controlling institution and its administration support program outcomes;
- (6) evidence that program director and program faculty meet Board qualifications and are sufficient in number to achieve program outcomes;
- (7) evidence that the academic institution assures security of student information;
- (8) evidence that collected evaluative data is utilized in implementing quality improvement activities; and
- (9) evidence of student participation in program planning, implementation, evaluation and continuous improvement.

Suggested evidence to include in PDR administration section

1. Organizational chart for the: (1) institution (2) nursing department.
2. Administrator of Nursing Program position description and qualifications.
3. Describe the budget preparation process.
4. Describe administrative support services for nursing program. Include number and type (administrative, faculty, full and part-time) of people supported, responsibilities outside of the nursing department, and comparison with other academic units within the college/university. Include other resources available to program.
5. Provide data on appeals.
6. Provide data on student/faculty clinical ratios.

21 NCAC 36 .0318 FACULTY

(Section label: Faculty)

Suggested evidence to include in PDR faculty section

1. Position descriptions for program director, full-time and part-time nursing faculty.
2. Provide *Faculty Vitae* form for all full-and part-time faculty.
3. Describe the process for full and part-time faculty participating in curriculum implementation and evaluation.
4. Statement of non-nursing faculty meeting institution's accreditation requirement.
5. Describe the process used in evaluation of nurse faculty.

6. Describe the process used for evaluation of the program director.
7. Describe faculty role in student admission, progression, and graduation requirements; and the development, implementation, and evaluation of the curriculum.
8. Describe how preceptors are selected, oriented, utilized, and evaluated in the program.
9. List ALL full-time and ALL part-time faculty working in the current year with highest degree earned.
10. Describe how policies for nursing program faculty members are consistent with those for other faculty of the institution.

21 NCAC 36 .0320 STUDENTS

(Section label: Students)

Suggested evidence to include in PDR students section

1. Submit College Catalog, Nursing Student Handbook, and other documents relative to published admission criteria for College and nursing program.
2. Data on pre-entrance examination.
3. Data on current class.
4. Data on nursing student dismissals.
5. Data on criteria for progression.
6. Three-year NCLEX pass rate.
7. Provide copy of physical/emotional assessment form that your program utilizes.

21 NCAC 36 .0321 CURRICULUM

(Section label: Curriculum)

Suggested evidence to include in PDR curriculum section

1. Provide a copy of the program philosophy, purposes, and objectives/outcomes.
2. Provide a copy of the curriculum documents, which includes all syllabi, unit objectives and calendars.
3. Provide evidence of didactic content and supervised clinical experience across the lifespan appropriate to program type shall include:
 - a. Implementing safety principles and practices minimizing risk of harm to clients and providers through both system effectiveness and individual performances;
 - b. Employing evidence-based practice to integrate best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing;
 - c. Providing client-centered, culturally competent care;
 - d. Working in interdisciplinary teams to cooperate, collaborate, communicate, and integrate client care and health promotion; and,
 - e. Participating in quality improvement processes to measure client outcomes, identify hazards, and errors, and develop changes in processes of client care.

4. Evidence of a focused client care experience with a minimum of 120 hours shall be provided in the final year of the curriculum for programs preparing registered nurses.
5. Evidence of a focused client care experience with a minimum of 90 hours shall be provided in the final semester of the curriculum for programs preparing practical nurses.
6. Include clinical rotation schedules for nursing clinical courses that indicate agency by name, clinical faculty, students, dates, days, and time.
7. Provide clinical evaluation tools for each clinical course.
8. Describe how the program is using simulation and the percentages in each course.
9. Describe how the program is using external standardized examinations and how it is incorporated into the syllabi.

21 NCAC 36 .0322 FACILITIES

(Section label: Facilities)

Suggested evidence to include in PDR facilities section

1. Statement of adequacy of classrooms, furniture, and equipment available to support teaching strategies.
2. Describe office space for nurse faculty. If offices are shared, indicate how many and provisions for privacy.
3. Describe the process for faculty involvement in acquisitions/deletions of learning resources.
4. Describe how learning resources are allocated to programs and disposal of deleted materials.
5. Describe the library/learning resource space used by faculty and nursing students.
6. Describe electronic technology available to faculty and nursing students.

21 NCAC 36 .0323 RECORDS AND REPORTS

(Section label: Records and Reports)

Suggested evidence to include in PDR records and reports section

1. Describe where and how official nursing program records are maintained.
2. Description of process for maintaining student records.
3. Indicate who controls access to each type of record.

PROGRAM DESCRIPTIVE REPORT

TO: North Carolina Board of Nursing

FROM: _____
(Nursing Program)

(Address)

Program Director Signature Title

Date

STUDENT APPEALS
(Last Five Years)

Policy	Was Published Appeal Policy Followed	Nature of Formal Challenges/Appeal(s)	Outcome Appeal Granted or Denied

FACULTY/STUDENT RATIO IN CLINICAL GROUPS FOR LAST OFFERING

Course Number	Enrollment	Number of Clinical Groups	Number of Students per Clinical Group	Number of FTE Full-time faculty (if assigned more than 1 group)	Number of FTE Part-time faculty (if assigned more than 1 group)

**NORTH CAROLINA BOARD OF NURSING
FACULTY VITAE**

Program Director _____ Program _____

Faculty Name _____ Date of Appointment _____

Full-time _____ Part-time _____ FTE _____ NC RN License Number _____

Permanent License _____ Temporary _____

Compact _____ Compact License Number _____ State _____ Primary State _____

Will residency change to North Carolina? _____

This faculty member meets the teaching/learning preparation requirement by selecting one of the following (**Clarification provided on next page**)

_____ Completion of 45 contact hours of continuing education courses. *Specify course from list on our website located in Resources for program directors* _____

_____ Completion of a certificate program in nursing education
Name of College or University _____

_____ Nine semester hours of education course work

_____ National certification in nursing education (*NLN's Certified Nurse Educator*)

_____ Documentation of successful completion of structured, individualized development activities of at least 45 contact hours approved by the Board. (*Activity must have prior approval by NCBON Education Consultant*)

OR

_____ Approved plan to meet the teaching/learning preparation requirement

_____ Indicate date here _____

EDUCATION

Date	Degree	Area of Focus, Specialty, or Concentration for GRADUATE Study	Institution

PREVIOUS CLINICAL PRACTICE EXPERIENCE AS RN

Employment Dates Mo/Yr to Mo/Yr	FT/PT*	Title	Agency	Role/ Responsibility

* For all part-time experiences, average number of hours per week must be included

PREVIOUS EXPERIENCE TEACHING IN A PN or PRE-LICENSURE RN NURSING PROGRAM

Employment Dates Mo/Yr to Mo/Yr	FT/PT*	Title	College/ University	Role/ Responsibility

CURRENT TEACHING RESPONSIBILITY IN THIS PROGRAM

Semester and Year	Course No.	Course Name	Theory/Clinical

21 NCAC 36 .0318 FACULTY (g)(4)

- (4) prior to or within the first three years of employment, have preparation in teaching and learning principles for adult education, including curriculum development, implementation, and evaluation, appropriate to assignment. This preparation may be demonstrated by one of the following:
- (A) completion of 45 contact hours of continuing education courses;
 - (B) completion of a certificate program in nursing education;
 - (C) nine semester hours of graduate course work;
 - (D) national certification in nursing education; or
 - (E) documentation of successful completion of structured, individualized development activities of at least 45 contact hours approved by the Board. Criteria for approval include content in the faculty role within the curriculum implementation, objectives to be met and evaluated, review of strategies for identified student population and expectations of student and faculty performance;

PRE-ENTRANCE EXAMINATION REPORT FOR ADMISSION TO PROGRAM

Admission Tests Administered	Acceptable Cut-Off Score	Number Admitted with Scores Below Cut-Off

CURRENT CLASS SIZES

Maximum number of students approved by NCBON	
Current number of first year nursing students	
Current number of second year nursing students	
Total number of nursing students actively enrolled in the nursing program	
Total number of nursing students to graduate in this academic year	

Class/Year	Number Admitted	Number Readmitted	Number of Transfers	Number Advanced placement	Voluntary Withdrawal	Academic Dismissal or Other Involuntary Withdrawal	Number Currently Enrolled	% Attrition

ALL NURSING STUDENT DISMISSALS FOR PREVIOUS 2 YEARS
Identify Each Occurrence

Academic Term	Policy Invoked (Specify academic versus clinical)	Level of Student in Program

CRITERIA FOR PROGRESSION

Grade required in nursing theory course for progression (number or grade)	
Grade required in clinical for progression	
GPA required for lower division courses	
GPA required for graduation	

NCLEX PASS RATES

List NCLEX pass rates for the past three years:

Year 1 _____ (most recent year)

Year 2 _____

Year 3 _____