

1 21 NCAC 36 .0120 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0120 DEFINITIONS**

4 The following definitions apply throughout this chapter unless the context indicates otherwise:

- 5 (1) "Administrative Law Counsel" means an attorney licensed to practice in this State whom the Board
6 has retained to serve as procedural officer for contested cases.
- 7 (2) "Academic term" means one semester of a school year.
- 8 (3) "Accountability/Responsibility" means being answerable for action or inaction of self, and of others
9 in the context of delegation or assignment.
- 10 (4) "Accredited institution" means an institution accredited by a United States Department of
11 Education-approved institutional accrediting body.
- 12 (5) "Active Practice" means activities that are performed, either for compensation or without
13 compensation, consistent with the scope of practice for each level of licensure as defined in G.S.
14 90-171.20(4), (7), and (8).
- 15 (6) "Advanced Practice Registered Nurse (APRN)" means a nurse practitioner, nurse anesthetist, nurse-
16 midwife, or clinical nurse specialist.
- 17 (7) "Assigning" means designating responsibility for implementation of a specific activity or set of
18 activities to an individual licensed and competent to perform such activities.
- 19 (8) "Bulletin" means the official publication of the Board.
- 20 (9) "Clinical experience" means application of nursing knowledge demonstrating clinical judgment in
21 a current or evolving practice setting in which a student provides care to clients under the supervision
22 of faculty or a preceptor.
- 23 (10) "Clinical judgment" means ~~the application of nursing knowledge, skills, abilities, and experience in~~
24 ~~making decisions about client care.~~ the observed outcome of critical thinking and decision-making.
25 It is an iterative process that uses nursing knowledge to observe and assess presenting situations,
26 identify a prioritized client concern, and generate the best possible evidence-based solutions in order
27 to deliver safe client care.
- 28 (11) "Competent" means having the knowledge, skills, and ability to safely perform an activity or role.
- 29 (12) "Continuing Competence" means on-going acquisition and application of knowledge and the
30 decision-making, psychomotor, and interpersonal skills expected of the licensed nurse resulting in
31 nursing care that contributes to the health and welfare of clients served.
- 32 (13) "Contact Hour" means 60 minutes of an organized learning experience.
- 33 (14) "Continuing Education Activity" means a planned, organized learning experience that is related to
34 the practice of nursing or contributes to the competency of a nurse as outlined in 21 NCAC 36
35 .0223(a)(2).
- 36 (15) "Controlling institution" means the degree-granting organization or hospital under which a nursing
37 education program is ~~operating.~~ operating or seeking to establish a new nursing education program.

1 The controlling institution shall hold approval or applicable licensure by the appropriate North
2 Carolina agency, the University of North Carolina System, or North Carolina College System and
3 be accredited by an accrediting body recognized by the United States Secretary of Education.

4 (16) "Curriculum" means an organized system of teaching and learning activities directed toward the
5 achievement of specified learning objectives and outcomes.

6 (17) "Delegation" means transferring to a competent individual the authority to perform a specific
7 nursing activity in a selected situation. The nurse retains accountability/responsibility for the
8 delegation.

9 (18) "Debriefing" means an organized learning activity that follows a clinical or simulated experience
10 and is led by a trained faculty facilitator. Students' reflective thinking is encouraged and feedback
11 is provided regarding the students' performance during discussion of various aspects of the
12 completed experiences.

13 (19) "DHSR" means Division of Health Service Regulation.

14 (20) "Dimensions of Practice" means aspects of nursing practice, including professional responsibility,
15 knowledge-based practice, ethical and legal practice, and collaborating with others, consistent with
16 G.S. 90-171.20(4), (7), and (8).

17 (21) "Distance education" means teaching and learning strategies used to meet the learning needs of
18 students when the students and faculty are not in the same location.

19 (22) "External standardized examination" means a commercially available standardized predictive test
20 that provides individual student scores that are linked to a probability of passing the NCLEX™
21 examination.

22 (23) "Faculty directed clinical practice" means clinical experiences provided under the
23 accountability/responsibility and direction of nursing program faculty.

24 (24) "Focused client care experience" means a clinical experience that emulates an entry-level work
25 experience in nursing, assisting the student in transitioning to an entry-level nursing practice.
26 Supervision may be by faculty and preceptor dyad or direct faculty supervision.

27 (25) "Full Approval" is the status assigned to a program following graduation by the first cohort of
28 students, evidence of compliance with Section .0300 of this Chapter, and an NCLEX® examination
29 pass rate that meets or exceeds 90 percent of the national pass rate for licensure level on first writing
30 of the licensure examination for calendar years ending December 31.

31 ~~(25)~~(26) "Initial Approval" means the status assigned to a ~~newly established~~ nursing education program
32 following submission of a new, complete application and documented evidence of compliance with
33 Section .0300 of this Chapter.

34 ~~(26)~~(27) "Interdisciplinary faculty" means faculty from professions other than nursing.

35 ~~(27)~~(28) "Interdisciplinary team" means all individuals involved in providing a client's care who cooperate,
36 collaborate, communicate, and integrate care to ensure that care is continuous and reliable.

1 ~~(28)~~(29) "Learning resources" means materials that faculty use to assist students in meeting the expectations
2 for learning defined by the curriculum.

3 ~~(29)~~(30) "Level of Licensure" means practice of nursing by either a licensed practical nurse or a registered
4 nurse, as defined in G.S. 90-171.20(7) and (8).

5 ~~(30)~~(31) "Level of student" means the point in the program to which the student has progressed.

6 ~~(31)~~(32) "Maximum enrollment" means the total number of pre-licensure students that can be enrolled in the
7 nursing program at any one time. The number reflects the capacity of the nursing program based on
8 demonstrated resources sufficient to implement the curriculum.

9 ~~(32)~~(33) "Methods of Instruction" means the planned process through which teacher and student interact with
10 selected environment and content so that the response of the student gives evidence that learning
11 has taken place, based upon stated course objectives and outcomes for learning experiences in
12 classroom, laboratory, simulation, and clinical settings.

13 ~~(33)~~(34) "National Credentialing Body" means a credentialing body that offers certification or re-certification
14 in the licensed nurse's or Advanced Practice Registered Nurse's specialty area of practice.

15 ~~(34)~~(35) "NCLEX-PN™" means the National Council Licensure Examinations for Practical Nurses.

16 ~~(35)~~(36) "NCLEX-RN™" means the National Council Licensure Examinations for Registered Nurses.

17 ~~(36)~~(37) "Nursing Accreditation body" means a national nursing accrediting body that is recognized by the
18 United States Department of Education.

19 ~~(37)~~(38) "Nursing program faculty" means individuals employed full or part-time by an academic institution
20 responsible for developing, implementing, evaluating, and updating nursing curricula.

21 ~~(38)~~(39) "Nursing project" means a project or research study of a topic related to nursing practice that
22 includes a problem statement, objectives, methodology, and summary of findings.

23 ~~(39)~~(40) "Participating in" means to have a part in or contribute to the elements of the nursing process. As
24 defined by the legal scope of practice, the licensed practical nurse role for participating in the nursing
25 process is dependent upon the assignment and supervision by the registered nurse, physician, dentist,
26 or other person authorized by State law to provide the supervision.

27 ~~(40)~~(41) "Pattern of noncompliance" means episodes of recurring non-compliance with one or more Rules in
28 Section .0300.

29 ~~(41)~~(42) "Preceptor" means a registered nurse at or above the level of licensure that an assigned student is
30 seeking who may serve as a teacher, mentor, role model, and supervisor for the student in a faculty-
31 directed clinical experience.

32 ~~(42)~~(43) "Prescribing Authority" means the legal permission granted by the Board of Nursing and Medical
33 Board for the nurse practitioner and nurse midwife to procure and prescribe legend and controlled
34 pharmacological agents and devices to a client in compliance with Board rules and other applicable
35 federal and State law, regulations, and rules.

36 ~~(43)~~(44) "Program Closure" means to cease operation of a nursing program.

1 ~~(44)~~(45) "Program" means a course of study that prepares an individual to function as an entry-level
2 practitioner of nursing. The three types of programs are:

3 (a) Bachelor of Science Degree in Nursing (BSN) - Curriculum components for the BSN
4 provide for the attainment of knowledge and skill sets in the current practice in nursing,
5 nursing theory, nursing research, community and public health, health care policy, health
6 care delivery and finance, communications, therapeutic interventions, and current trends in
7 health care. For this program type, the client is the individual, family, group, and
8 community.

9 (b) Associate Degree in Nursing (ADN)~~/Diploma in Registered Nursing~~ Curriculum
10 components for the ADN~~/Diploma in Registered Nursing~~ provide for the attainment of
11 knowledge and skill sets in the current practice in nursing, community concepts, health
12 care delivery, communications, therapeutic interventions, and current trends in health care.
13 For this program type, client is the individual, group of individuals, and family.

14 (c) Practical Nurse Diploma (PN) - Curriculum components for the ~~practical nurse~~ PN diploma
15 prepare for providing direct nursing care under the supervision of a registered nurse or
16 other health care provider as defined by the Nursing Practice Act. Curriculum components
17 provide for the attainment of knowledge and skill sets in the current practice of practical
18 nursing, communications, therapeutic interventions, including pharmacology, growth and
19 development, and current trends in health care. For this program type client is the
20 individual or group of individuals.

21 ~~(45)~~(46) "Review" means collecting and analyzing information to assess compliance with Section .0300 of
22 this Chapter. Information may be collected by multiple methods, including review of written reports
23 and materials, on-site observations, review of documents, and in-person or telephone interviews and
24 conferences.

25 ~~(46)~~(47) "Self-Assessment" means the process whereby an individual reviews their own nursing practice and
26 identifies the knowledge and skills possessed as well as those skills to be strengthened or acquired.

27 ~~(47)~~(48) "Simulation" means a technique, not a technology, to replace or amplify clinical experiences with
28 guided experiences that evoke or replicate substantial aspects of the real world of nursing practice
29 in a fully interactive manner.

30 ~~(48)~~(49) "Specialty" means a broad, population-based focus of study encompassing the common health-
31 related problems of a particular group of patients and the likely co-morbidities, interventions, and
32 responses to those problems.

33 ~~(49)~~(50) "Supervision" means the provision of guidance or direction, evaluation, and follow-up by a licensed
34 nurse to accomplish an assigned or delegated nursing activity or set of activities.

35 ~~(50)~~(51) "Survey" means an on-site visit for the purpose of gathering data in relation to reviewing a nursing
36 program's compliance with Section .0300 of this Chapter.

1 (52) “Traditional clinical experience” means a clinical experience where the student provides in-person
2 care to patients/clients under the guidance of an instructor or preceptor.

3 (53) “Warning Status” means the status assigned to a nursing education program found to be
4 noncompliant with any provision in Section .0300 of this Chapter.

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6 *History Note: Authority G.S. 90-171.23; 90-171.38;*
7 *Eff. April 1, 2003;*
8 *Amended Eff. June 1, 2017; December 1, 2016; July 1, 2012; November 1, 2008; May 1, 2006;*
9 *December 1, 2005; August 1, 2005;*
10 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 9,*
11 *2018;*
12 *Amended Eff. January 1, ~~2019~~; 2019; July 1, 2023.*

1 21 NCAC 36 .0220 is proposed to be amended as follows:

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

4 (a) A refresher course shall be designed for those individuals, previously licensed, who are not eligible for re-entry
5 into nursing practice because their license has expired for five or more years.

6 (b) Satisfactory completion of a Board-approved refresher course shall be required of the individual who has not held
7 an active license in any jurisdiction for five or more years and requests:

- 8 (1) reactivation of an inactive license;
9 (2) reinstatement of an expired license; or
10 (3) endorsement to North Carolina.

11 (c) If satisfactory completion of a Board-approved refresher course is required by the Board based upon action as
12 authorized in G.S. 90-171.37 or based upon a license being inactive due to disciplinary action, the individual may be
13 subject to Board-stipulated restrictions in the clinical component of the refresher course, based upon the terms of the
14 disciplinary actions and the contents of the clinical components. All eligibility requirements for reinstatement of the
15 license shall have been met prior to refresher course enrollment.

16 (d) Application for approval of a refresher course shall be completed and submitted by the provider at least 90 days
17 prior to the expected date of enrollment and shall include evidence of complying with the rules as defined in this
18 Chapter for refresher courses. No student shall be enrolled prior to Board approval. Board approval shall be granted
19 to a provider for a period of time not to exceed five years. All changes in faculty, curriculum, or clinical facilities shall
20 be approved by the Board prior to implementation, as set out in the Rules of this Chapter.

21 (e) The application for approval of a refresher course shall include:

- 22 (1) course objectives, content outline, and time allocation;
23 (2) didactic and clinical learning experiences, including teaching methodologies for measuring the
24 registrant's abilities to practice nursing;
25 (3) a plan for evaluation of student competencies and ability to competently practice nursing;
26 (4) a faculty list that includes the director and all instructors, and identifies their qualifications and their
27 functions in teaching roles; and
28 (5) the projected clinical schedule.

29 (f) The Board shall make site visits if it is unable to determine that all requirements have been met through application
30 document review. A decision on an application to offer a refresher course shall be given within 30 days following
31 receipt of a complete application.

32 (g) A provider of a refresher course shall be approved by the Board as set out in these Rules. A provider may be a
33 post-secondary educational institution, a health care institution, or other agency.

34 (h) Administrative responsibility for developing and implementing a refresher course shall be vested in a registered
35 nurse director.

36 (i) The registered nurse director shall have authority and responsibility for maintaining compliance with this Rule.

1 ~~(i)(j)~~ ~~Instructors in the course shall be directly accountable to the nurse director.~~ The director shall have had at least
2 one year prior teaching experience preparing individuals for registered nurse or licensed practical nurse licensure at
3 the post-secondary level or in a nursing staff development position. Instructors in the course shall be directly
4 accountable to the director. The director and each instructor shall:

- 5 (1) hold an active unencumbered license to practice as a registered nurse in North Carolina;
- 6 (2) hold a baccalaureate or higher degree in nursing; and
- 7 (3) have had at least two years experience in direct patient nursing practice as a registered nurse.

8 ~~(j)(k)~~ Proximity of the instructor to students is the major factor in determining faculty-student ratio for clinical
9 learning experiences. The ratio of instructors to students shall not exceed 1:10.

10 ~~(k)(l)~~ Clinical preceptors shall have competencies, assessed by the registered nurse director of the refresher course or
11 a designated instructor, related to the area of assigned clinical precepting responsibilities. Clinical preceptors shall
12 hold an active unencumbered license to practice as a registered nurse in North Carolina.

13 ~~(l)(m)~~ The refresher course shall include both theory and clinical instruction. Course objectives shall be stated that:

- 14 (1) show relationships between nursing theory and practice; and
- 15 (2) identify behaviors consistent with the ability to competently practice nursing.

16 ~~(m)(n)~~ The curriculum for a registered nurse refresher course shall include at least 240 hours of instruction, at least
17 120 of which shall consist of clinical learning experiences, and shall incorporate:

- 18 (1) the scope of practice for the registered nurse, as defined in G.S. 90-171.20 and 21 NCAC 36 .0221,
19 .0224, .0225 and .0401; and
- 20 (2) instruction in and opportunities to demonstrate knowledge, skills, and abilities to competently
21 practice nursing according to components of practice for the registered nurse as defined in 21 NCAC
22 36 .0224.

23 ~~(n)(o)~~ The curriculum for a licensed practical nurse refresher course shall include at least 180 hours of instruction, at
24 least 90 of which shall consist of clinical learning experiences, and shall incorporate:

- 25 (1) the scope of practice for the licensed practical nurse, as defined in G.S. 90-171.20(8) and 21 NCAC
26 36 .0221, .0225 and .0401; and
- 27 (2) instruction in and opportunities to demonstrate knowledge, skills, and abilities to competently
28 practice nursing according to components of nursing practice for the licensed practical nurse as
29 defined in 21 NCAC 36 .0225.

30 ~~(o)(p)~~ The refresher course director or the designated refresher course instructor shall assess each refresher student
31 and ensure the appropriateness of all clinical learning settings and assignments.

32 ~~(p)(q)~~ Registered nurse and licensed practical nurse refresher courses shall limit simulation experiences to no more
33 than 50 percent of clinical learning experiences, pursuant to 21 NCAC 26 .0321(m).

34 ~~(q)(r)~~ Evaluation processes shall be implemented that effectively measure the refresher student's ability to
35 competently practice nursing consistent with the level of licensure and scope as set forth in 21 NCAC 36 .0221, .0224,
36 .0225, and .0401.

1 ~~(s)~~ (s) Completion of both the theory and clinical components of the refresher course shall occur within 24 months of
2 initial enrollment in the course.

3 ~~(t)~~ (t) Clinical resources shall indicate, in written contract, support and availability to provide the necessary clinical
4 experiences.

5 ~~(u)~~ (u) Individuals previously licensed in North Carolina and presently residing outside of North Carolina may meet
6 the requirements of this Rule by successfully completing a refresher course approved by another state board of nursing.

7 ~~(v)~~ (v) Individuals enrolled in refresher courses shall identify themselves as RN Refresher Student (R.N.R.S.) or LPN
8 Refresher Student (L.P.N.R.S.), consistent with the course level, after signatures on records or on name pins.

9 ~~(w)~~ (w) In a format specified by the Board, the course provider shall provide the Board with the names and license
10 numbers of those individuals who have satisfactorily completed the refresher course at the appropriate level of
11 licensure on the Board supplied form.

12 ~~(x)~~ (x) Upon request, the Board shall provide:

- 13 (1) a list of approved providers;
- 14 (2) the format for applications for program approval; and
- 15 (3) the format for verification of successful completion to all approved programs.

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17 *History Note: Authority G.S. 90-171.23(b)(3); 90-171.35; 90-171.36; 90-171.37; 90-171.38; 90-171.83;*

18 *Eff. May 1, 1982;*

19 *Amended Eff. January 1, 2007; July 1, 2000; June 1, 1993; April 1, 1989; July 1, 2023.*

20 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0233 is proposed to be amended as follows:

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3 **21 NCAC 36 .0233 OUT OF STATE STUDENTS**

4 (a) Unlicensed nursing students enrolled in out-of-State nursing education programs who request use of North
5 Carolina clinical facilities shall be allowed such experiences following approval by the Board. ~~Upon receiving such a~~
6 ~~request, the chief nursing administrator of a North Carolina clinical facility shall provide the Board with the following~~
7 Requests to use North Carolina clinical facilities for out-of-state nursing education programs shall be submitted by
8 the chief nursing administrator or RN designee of a North Carolina clinical facility in the format provided by the
9 Board at least 30 days prior to the start of the requested ~~experience:~~ experience. The submitted request shall include
10 the following:

- 11 (1) a letter of request for approval to provide the clinical offering, including proposed starting and
12 completion dates;
- 13 (2) documentation that the nursing program is currently approved by the Board of Nursing in the state
14 in which the parent institution is located;
- 15 (3) the name, qualifications, curriculum vitae, and evidence of an active, unencumbered registered nurse
16 licensure of the faculty responsible for coordinating the student's experience; and
- 17 (4) the name, qualifications, resume, and evidence of active unencumbered license to practice as a
18 registered nurse in North Carolina for the preceptor or on-site faculty.

19 (b) Copies of the following shall be distributed by the chief nursing administrator of the clinical facility to all students
20 and faculty involved in the clinical experiences:

- 21 (1) North Carolina Nursing Practice Act;
- 22 (2) North Carolina administrative rules and related interpretations provided by the Board regarding the
23 role of the registered nurse, licensed practical nurse, and unlicensed nursing personnel; and
- 24 (3) North Carolina Board of Nursing developed Suggestions for Utilization of Preceptors.

25 (c) Failure to continue in compliance with the requirements of Paragraph (a) of this Rule shall result in the immediate
26 withdrawal of the Board's approval of the clinical offering and student status, consistent with G.S. 90-171.43(2).

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28 *History Note: Authority G.S. 90-85.3; 90-171.23(b) 90-171.43; 90-171.83;*
29 *Eff. April 1, 2008;*
30 *Amended Eff. July 1, 2023.*
31 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0302 is proposed to be amended as follows:

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3 **21 NCAC 36 .0302 ESTABLISHMENT OF A NURSING PROGRAM - INITIAL APPROVAL**

4 (a) ~~A~~ A controlling institution seeking initial approval to operate a nursing program shall employ a program director
5 qualified pursuant to Rule ~~.0317(e)~~ .0317(b) of this Section. A controlling institution can seek initial approval to
6 establish one nursing program and one program entry option at a time.

7 (b) The program director shall develop and submit an application for initial approval at least ~~six~~ 12 months prior to
8 the proposed program start date that documents the following:

9 (1) a narrative description of the organizational structure of the program and its relationship to the
10 controlling institution, including accreditation status. The controlling institution shall be an
11 accredited institution;

12 (2) a general overview of the entire proposed curriculum that includes:

13 (A) the program philosophy, purposes, and objectives;

14 (B) a master plan of the curriculum, indicating the sequence for both nursing and non-nursing
15 courses, as well as prerequisites and corequisites;

16 (C) course descriptions and course objectives for all courses; and

17 (D) course syllabi pursuant to 21 NCAC 36 ~~.0321(i)~~ .0321(j) for all first-year nursing courses;

18 ~~(3) the proposed student population;~~

19 ~~(4)~~(3) the projected student enrollment;

20 ~~(5)~~(4) evidence of learning resources and clinical experiences available to implement and maintain the
21 program;

22 ~~(6)~~(5) financial resources adequate to begin and maintain the program;

23 ~~(7)~~(6) physical facilities adequate to house the program;

24 ~~(8)~~(7) support services available to the program from the controlling institution;

25 ~~(9)~~(8) approval of the program by the governing body of the controlling ~~institution;~~ institution;

26 ~~(10)~~(9) approval from the applicable licensing regulatory body in North Carolina for the controlling
27 institution;

28 (10) student policies for admission, progression and graduation of students, pursuant to 21 NCAC 36
29 .0320;

30 (11) an emergency preparedness plan for addressing situations which shall include a reduction in the
31 availability of clinical sites, a transition from in-person to virtual learning platforms, and a need for
32 increased use of simulation;

33 (12) a comprehensive program evaluation plan, pursuant to 21 NCAC 36 .0317(f); and,

34 ~~(10)~~(13) a plan with a specified time frame for:

35 (A) availability of qualified faculty as specified in 21 NCAC 36 ~~.0318;~~ .0318; and

36 (B) course syllabi as specified in 21 NCAC 36 ~~.0321(h)~~ .0321(i) and (j) of this Section for all
37 nursing ~~courses;~~ courses.

1 ~~(C) — student policies for admission, progression, and graduation of students, pursuant to 21~~
2 ~~NCAC 36 .0320; and~~

3 ~~(D) — comprehensive program evaluation, pursuant to 21 NCAC 36 .0317(d).~~

4 (c) The application to establish a nursing program shall contain current and accurate information required in Paragraph
5 ~~(a)~~ (b) of this Rule, be complete, and be signed by the program director and the chief executive officer of the
6 controlling institution.

7 (d) The completed application shall be received by the Board not less than 120 days prior to a regular meeting of the
8 Board to be considered for placement on the agenda of that meeting.

9 (e) If another program exists in the institution, the application shall include:

10 (1) the organizational relationship of the existing program and the proposed program in the institution;

11 (2) the NCLEX pass rate of the existing program for the past three years; and

12 (3) a description of the expected impact of the proposed program on the existing program, including:

13 (A) the availability of a program director for each program;

14 (B) the availability of qualified faculty;

15 (C) the physical facilities adequate to house both programs;

16 (D) the availability of learning resources;

17 (E) the availability of clinical experiences; and

18 (F) the adequacy of student services.

19 (f) No new program application shall be considered if a nursing program currently exists in the institution if:

20 (1) ~~the NCLEX pass rate of the existing program has not met the standard for the past three years,~~
21 ~~pursuant to 21 NCAC 36 .0320(e); and any currently approved program at the institution is on~~
22 ~~warning status; or~~

23 (2) resources are not demonstrated to be adequate to maintain both the existing and the proposed
24 program in compliance with Rules .0300 to .0323 of this Section.

25 ~~(g) Programs on initial approval may admit students.~~

26 ~~(h)~~ (g) The Board shall conduct an on-site survey of the proposed program after the application meets all the
27 requirements set forth in this Rule, shall prepare a survey report, and afford the petitioning institution an opportunity
28 to respond to the survey report.

29 ~~(i) The Board shall consider all evidence, including the application, the survey report, comments from representatives~~
30 ~~of the petitioning institution, public comments, and the status of other nursing programs at the institution in~~
31 ~~determining whether to approve the application.~~

32 ~~(j)~~ (h) If the application is approved, When the Board shall ~~grant grants~~ initial approval approval, it and shall establish
33 a maximum enrollment and implementation ~~date.~~ date for the program.

34 ~~(k)~~ (i) The institution seeking initial approval shall not solicit students until the program has been granted initial
35 approval status by the Board.

36 (j) Programs on initial approval status may admit students.

1 (k) The Board shall rescind the initial approval status of a program if the controlling institution fails to submit
2 documentation as set forth in the plan required by Subparagraph ~~(b)(10)~~ (b)(13) of this Rule.

3 (l) The Board shall rescind the initial approval status of a program if the first class of students is not enrolled in the
4 program within one year after issuing the initial ~~approval~~ approval status.

5 (m) For 12 months following rescission of approval, the controlling institution shall not submit an application for
6 establishing a nursing program.

7 (n) A program shall retain initial approval status for the time necessary for full implementation of the ~~curriculum~~,
8 curriculum and graduation of the first cohort of students, provided ~~that~~ the program complies with Section .0300 of
9 this Chapter.

10 (o) Programs with initial approval status shall be surveyed:

11 (1) during the final term of curriculum implementation of the program; and

12 (2) upon receipt by the Board of information that the program may not be complying with Section .0300.

13 (p) If at any time a program on initial approval status is not complying with Section .0300 of this Chapter, the program,
14 upon written notification, shall:

15 (1) correct the area of noncompliance and submit written evidence of this correction to the Board; or

16 (2) submit and implement a plan for correction to the Board.

17 (q) The Board shall rescind the initial approval status of a program if the program does not comply with Paragraph
18 (o) of this Rule.

19 (r) ~~If, following the survey and during final curriculum implementation, the Board finds that the program is complying~~
20 ~~with Section .0300 of this Chapter, the~~ The Board shall place the program on full approval status. status provided:

21 (1) the Board finds that the program has complied with Section .0300 of this Chapter while on initial
22 approval status;

23 (2) an on-site survey is completed during the final term of curriculum implementation; and

24 (3) the program demonstrates an NCLEX® examination pass rate that meets or exceeds 90 percent of
25 the national pass rate for licensure level on first writing of the licensure examination for calendar
26 years ending December 31.

27 (s) If, following the survey and during final curriculum implementation, the program does not comply with ~~the~~ Section
28 .0300 of this Chapter, the Board shall rescind the program's initial approval status and provide the program with
29 written notice of the Board's decision.

30 (t) Upon written request from the program submitted within 10 business days of the Board's written notice of
31 rescinding the initial ~~approval~~ approval status, the Board shall schedule a hearing at the next available meeting of the
32 Board for which appropriate notice can be provided, or at a meeting of the Board that is scheduled by consent of the
33 parties.

34 (u) Following the hearing and consideration of all evidence provided, the Board shall assign the program full approval
35 status or shall enter an Order rescinding the initial approval status, which shall constitute program closure pursuant to
36 21 NCAC 36 .0309.

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1 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;*
2 *Eff. February 1, 1976;*
3 *Amended Eff. June 1, 1992; January 1, 1989; November 1, 1984; May 1, 1982;*
4 *Temporary Amendment Eff. October 11, 2001;*
5 *Amended Eff. December 1, 2016; January 1, 2009; December 1, 2005; August 1, 2002; July 1, 2023.*
6 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0303 is proposed to be amended as follows:

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3 **21 NCAC 36 .0303 EXISTING NURSING PROGRAM**

4 (a) All prelicensure nursing education programs that are governed by the rules in this ~~Chapter~~ Chapter. Accreditation
5 by a ~~may obtain~~ national nursing program accreditation by a nursing accreditation body as defined in 21 NCAC 36
6 .0120(30), .0120(37) is required. For those programs granted initial approval status, full approval status, or warning
7 status prior to December 31, 2023, evidence of accreditation by a national nursing accreditation body (not to include
8 pre-accreditation status) is required effective January 1, 2030.

9 (b) Board action is based upon each program's performance and demonstrated compliance with the Board's
10 requirements and responses to the Board's recommendations. The Board may, depending on the severity and pattern
11 of violations of this Chapter, require corrective action for identified deficiencies, impose a monitoring plan, conduct
12 a program survey, change program approval status, withdraw approval, issue discipline, or close a program.

13 (c) Full Approval

14 (1) The Board shall review approved programs at least every ~~eight~~ 10 years as specified in G.S. 90-
15 171.40. Reviews of individual programs shall be conducted at shorter intervals upon request from
16 the individual institution or as considered necessary by the Board.

17 (2) National accreditation by a national nursing accrediting body, set forth by the US Department of
18 Education is required, and evidence of compliance with the accreditation standards shall be used for
19 evaluating continuing approval. Self-study reports shall provide a basis for review of accredited
20 programs.

21 (2)(3) The Board shall send a written report of the review no more than ~~20~~ 30 business days following the
22 completion of the review process. Responses from a nursing education program regarding a review
23 report or warning status as referenced in Paragraph (d) of this Rule shall be received in the Board
24 office by the deadline date specified in the letter accompanying the report or notification of warning
25 status. If no materials or documents are received by the specified deadline date, the Board shall act
26 upon the findings in the review report and the testimony of the Board staff.

27 (3)(4) If the Board finds a pattern of noncompliance with one or more rules in this Section, the Board may
28 take action as outlined in Paragraph (b) of this Rule.

29 (d) Warning Status

30 (1) If the Board finds that a program is not complying with the rules in this Section, the Board shall
31 assign the program warning status and shall give written notice by certified mail to the program
32 specifying:

33 (A) the areas in which there is noncompliance;

34 (B) the date by which the program must comply with the rules in this Section. The maximum
35 time for compliance shall be two consecutive years after issuance of the written notice; and

1 (C) the opportunity to schedule a hearing. Any request for a hearing regarding the program
2 warning status shall be submitted to the Board. A hearing shall be afforded pursuant to the
3 provisions of G.S. 150B, Article 3A.

4 (2) On or before the required date of compliance specified in Part (d)(1)(B) of this Rule if the Board
5 determines that the program is complying with the rules in this Section, the Board shall assign the
6 program full approval status.

7 (3) If the Board finds the program is not in compliance with the rules in this Section by the date specified
8 in Part (d)(1)(B) of this Rule, the program shall remain on warning status, and a review by the Board
9 shall be conducted during that ~~time and the Board shall either:~~ time.

10 (A) ~~continue the program on warning status; or~~

11 ~~(B)(4)~~ If the Board finds the program is not in compliance with the rules in this Section for two consecutive
12 years following the date specified in Part (d)(1)(B) of this Rule, warning status approval will be
13 withdraw approval, withdrawn, constituting a program closure consistent with Subparagraph (e)(3)
14 (b) of this Rule.

15 ~~(4)(5)~~ Upon written request from the program submitted within 10 business days of the Board's written
16 notice of warning status, or withdrawal of approval, the Board shall schedule a hearing at the next
17 available meeting of the Board for which appropriate notice can be ~~provided, or at a meeting of the~~
18 ~~Board that is scheduled by consent of the parties.~~ provided.

19 ~~(5)(6)~~ If a hearing is held at the request of the program and the Board determines that the program is not
20 in compliance with the rules in this Section, the program shall remain on warning status, a review
21 by the Board shall be conducted during that time and the Board ~~shall either:~~ shall:

22 (A) continue the program on warning status; ~~or~~

23 (B) withdraw approval, constituting program closure consistent with Subparagraph ~~(e)(3)~~ (b)
24 of this Rule; Rule; or

25 (C) remove the program from warning status.

26
27 *History Note: Authority G.S. 90-171.23(b); 90-171.38; 90-171.39; 90-171.40;*
28 *Eff. February 1, 1976;*
29 *Amended Eff. December 1, 2016; August 1, 2011; July 3, 2008; March 1, 2006; January 1, 2004;*
30 *June 1, 1992; January 1, 1989; July 1, 2023.*
31 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0309 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0309 PROCESS FOR PROGRAM CLOSURE**

4 (a) A program is deemed closed when the program has not enrolled students for a period of two consecutive years
5 since the last graduating class or student enrollment has not occurred for a two consecutive year period.

6 ~~(a)~~(b) When the controlling institution makes the decision to close a nursing program, the Administration of the
7 institution shall submit a written plan for the discontinuation of the program to the Board and shall ~~include~~ include:

8 (1) the reasons for program ~~closure~~, closure;

9 (2) the date of intended ~~closure~~, closure;

10 (3) ~~and~~ a plan for students to complete this or another approved ~~program~~, program;

11 (4) a plan detailing the arrangement for secure storage and access to academic records and transcripts
12 for all students and graduates; and

13 (5) the communication methods to all current and former students the intent to close.

14 ~~(b)~~(c) When the Board closes a nursing program, the program director shall, within 30 days, develop and submit a
15 plan for discontinuation of the program for Board approval. The plan shall address transfer of students to approved
16 programs. When the controlling institution makes the decision to close a nursing program, the institution may not
17 apply to establish a nursing program until at least 12 calendar months from the date of official notification to the Board
18 in writing that the plan for closure has been fully implemented.

19 ~~(e)~~(d) The controlling institution shall notify the Board of the arrangement for secure storage and access to academic
20 records and transcripts. When the Board closes a nursing program based on noncompliance with the rules and
21 requirements in this Section, the Board shall give written notice of closure by certified mail to the program specifying
22 the areas in which there is evidence of noncompliance and the opportunity for the program to request a hearing
23 contesting the involuntary program closure pursuant to the provisions of G.S. 150B, Article 3A.

24 (e) If the program does not contest the involuntary closure by the Board, the program director shall, within 30 days,
25 develop and submit a plan for discontinuation of the program for Board approval consistent with paragraph (b) of this
26 Rule. The plan shall address transfer of students to approved programs. Involuntary program closure shall occur within
27 six months from the date of notification of closure by the Board.

28 (f) When the Board closes a program, the controlling institution may not apply to establish a nursing program until at
29 least 24 calendar months from the date of official notification of program closure by the Board.

30
31 *History Note: Authority G.S. 90-171.38; 90-171.39; 90-171.40;*

32 *Eff. June 1, 1992;*

33 *Amended Eff. December 1, 2016; December 1, ~~2005~~; 2005; July 1, 2023.*

34 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0317 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0317 ADMINISTRATION**

4 (a) The controlling institution of a nursing program shall provide human, physical, technical, and financial resources
5 and services essential to support program processes and outcomes, including those listed in Paragraph (f) and (g) of
6 this Rule, and maintain compliance with Section .0300 of this Chapter.

7 (b) The controlling institution shall ensure that a full-time registered nurse, qualified pursuant to Paragraph (e) of this
8 Rule, has the authority to direct the nursing program. Full-time registered nurse is a registered nurse employed by the
9 institution who is regularly assigned to work at least 40 hours each week in the position of program director.

10 (c) The controlling institution shall ensure that the program director has the authority and responsibility for
11 maintaining compliance with the Rules in this Chapter and other legal requirements in all areas of the program.

12 (d) The controlling institution shall ensure that the program director has non-teaching time sufficient to allow for
13 program organization, administration, continuous review, planning, and development.

14 (e) The program director in a program preparing students for initial nurse licensure shall satisfy the following
15 requirements:

16 (1) hold an active unencumbered license or multistate licensure privilege to practice as a registered
17 nurse in North Carolina;

18 (2) have two years of full-time experience as a faculty member in a Board-approved nursing program;

19 (3) be experientially qualified, having clinical nursing experience, experience as a faculty member in a
20 nursing program, and academic or nursing leadership experience to lead the program to accomplish
21 the mission, goals, and expected program outcomes;

22 (4) hold ~~either a baccalaureate in nursing or a graduate degree in nursing from an accredited institution.~~
23 ~~institution. If newly employed on or after January 1, 2016, hold a graduate degree from an accredited~~
24 ~~institution. If newly employed on or after January 1, 2021, hold a graduate degree in nursing from~~
25 ~~an accredited institution;~~

26 (5) prior to or within the first three years of employment, have education in teaching and learning
27 principles for adult education, including curriculum development, implementation, and evaluation,
28 appropriate to the program director role. Once completed, this education need not be repeated if
29 employing organization is changed. This education may be demonstrated by one of the following:

30 (A) completion of 45 contact hours of Board-approved continuing education courses;

31 (B) completion of a certificate program in nursing education;

32 (C) nine semester hours of graduate course work in adult learning and learning principles;

33 (D) national certification in nursing education; ~~or~~

34 (E) documentation of completion of structured, individualized development activities of at
35 least 45 contact hours approved by the Board. Criteria for approval shall include content in
36 the faculty role in curriculum implementation, curricular objectives to be met and

1 evaluated, review of strategies for identified student population, and expectations of
2 student and faculty ~~performance.~~ performance; or

3 (F) individuals with prior teaching experience in an academic nursing program setting may be
4 evaluated by administration to assess each individual's prior teaching experience
5 commensurate with formal education in teaching and learning principles for adult
6 education, including curriculum development, implementation, and evaluation, appropriate
7 to the program director role.

8 (6) maintain competence in the areas of assigned responsibility; and

9 (7) have knowledge of current nursing practice for the registered nurse and the licensed practical nurse.

10 (f) A nursing education program shall implement, for quality improvement, a comprehensive program evaluation that
11 shall include the following:

12 (1) students' achievement of program outcomes;

13 (2) evidence of program resources, including fiscal, physical, human, clinical, and technical learning
14 resources; student support services; and the availability of clinical sites and the viability of those
15 sites adequate to meet the objectives of the program;

16 (3) measures of program outcomes for graduates;

17 (4) evidence that accurate program information for the public is available;

18 (5) evidence that the controlling institution and its administration support program outcomes;

19 (6) evidence that program director and program faculty meet Board qualifications and are sufficient in
20 number to achieve program outcomes;

21 (7) evidence that collected evaluative data is used in implementing quality improvement activities; and

22 (8) evidence of student participation in program planning, implementation, evaluation, and continuous
23 improvement.

24 (g) The controlling institution and the nursing education program shall communicate information describing the
25 nursing education program that is accurate, complete, consistent across mediums, and accessible by the public. The
26 following shall be accessible to all applicants and students:

27 (1) admission policies and practices;

28 (2) policy on advanced placement and transfer of credits;

29 (3) the number of credits required for completion of the program;

30 (4) tuition, fees, and other program costs;

31 (5) policies and procedures for withdrawal, including refund of tuition or fees;

32 (6) the grievance procedure;

33 (7) criteria for successful progression in the program, including graduation requirements; and

34 (8) policies for clinical performance.

35
36 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;*

37 *Eff. June 1, 1992;*

1 *Amended Eff. December 1, 2016; January 1, 2015; April 1, 2008; March 1, 2006;*
2 *Readopted Eff. January 1, 2019;*
3 *Amended Eff. September 1, ~~2021~~, 2021; July 1, 2023.*

1 21 NCAC 36 .0319 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0318 FACULTY**

4 (a) Policies for nursing program faculty members shall be consistent with those for other faculty of the controlling
5 institution, with variations as needed due to the nature of the nursing curriculum.

6 (b) Fifty percent or more of the nursing faculty shall hold a graduate degree.

7 (c) Nurses licensed pursuant to this Chapter who are full-time and part-time faculty and who teach in a program
8 leading to initial licensure as a nurse shall:

9 (1) hold an active unencumbered license or multistate licensure privilege to practice as a registered
10 nurse in North Carolina;

11 (2) hold either a baccalaureate in nursing or a graduate degree in nursing from an accredited institution;

12 (3) have two calendar years or the equivalent of full-time ~~clinical~~ experience as a registered nurse. Full-
13 time registered nurse is a registered nurse employed by the institution who is regularly assigned to
14 work at least 40 hours each week in ~~the a position of faculty member;~~ position;

15 (4) ~~if newly employed in a full-time faculty position on or after January 1, 2016,~~ full-time faculty shall
16 hold a graduate degree from an accredited institution or obtain a graduate degree in nursing from an
17 accredited institution within five years of initial full-time employment;

18 (5) prior to or within the first three years of employment, have education in teaching and learning
19 principles for adult education, including curriculum development, implementation, and evaluation,
20 appropriate to faculty assignment. Once completed, this education need not be repeated if the
21 employing organization is changed. This education may be demonstrated by one of the following:

22 (A) completion of 45 contact hours of Board-approved continuing education courses;

23 (B) completion of a certificate program in nursing education;

24 (C) nine semester hours of graduate course work in adult learning and learning principles;

25 (D) national certification in nursing education; ~~or~~

26 (E) documentation of completion of structured, individualized development activities of at
27 least 45 contact hours approved by the Board. Criteria for approval shall include content in
28 the faculty role in the curriculum implementation, curricular objectives to be met and
29 evaluated, review of strategies for identified student population, and expectations of
30 student and faculty ~~performance.~~ performance; or

31 (F) individuals with prior teaching experience in an academic nursing program setting may be
32 evaluated by the Program Director to assess each individual's prior teaching experience
33 commensurate with formal education in teaching and learning principles for adult
34 education including curriculum development, implementation, and evaluation, appropriate
35 to faculty assignment.

36 (6) maintain competence in the areas of assigned responsibility; and

37 (7) have knowledge of current nursing practice for the registered nurse and the licensed practical nurse.

1 (d) Interdisciplinary faculty who teach in nursing program courses shall have academic preparation, including a
2 conferred degree, with applicable licensure or certification in the content area they are teaching.

3 (e) Clinical preceptors shall have competencies, assessed by the nursing program, related to the area of assigned
4 clinical teaching responsibilities. Clinical preceptors may be used to enhance faculty-directed clinical learning
5 experiences after a student has received basic instruction for that specific learning experience. Clinical preceptors shall
6 hold an active unencumbered license to practice as a registered nurse in North Carolina.

7 (f) Nurse faculty members shall have the authority and responsibility for:

8 (1) student admission, progression, and graduation requirements; and

9 (2) the development, implementation, and evaluation of the curriculum.

10 (g) Nurse faculty members shall be academically qualified and sufficient in number to implement the curriculum as
11 required by the course objectives, the levels of the students, the nature of the learning environment, and to provide for
12 teaching, supervision, and evaluation.

13 (h) Thirty-five percent or more of the nursing faculty employed by the institution shall be full-time faculty.

14 (i) The controlling institution shall provide workshops and presentations devoted to faculty development.

15 ~~(h)(j)~~ The faculty-student ratio for faculty-directed preceptor clinical experiences shall be no greater than 1:15. The
16 faculty-student ratio for all other clinical experiences shall be no greater than 1:10.

17
18 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.83;*

19 *Eff. February 1, 1976;*

20 *Amended Eff. December 1, 2016; January 1, 2015; August 1, 2011; November 1, 2008; July 1, 2006;*

21 *July 1, 2000; January 1, 1996; June 1, 1992; January 1, 1989; January 1, 1984;*

22 *Readopted Eff. January 1, 2019;*

23 *Amended Eff. September 1, ~~2021~~, 2021; July 1, 2023.*

1 21 NCAC 36 .0320 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0320 STUDENTS**

4 (a) Students in nursing programs shall meet requirements established by the controlling institution.

5 (b) Admission requirements and practices shall be stated and published in the controlling institution's publications
6 and shall include assessment of the student's:

7 (1) record of high school graduation, high school equivalent, or earned credits from a post-secondary
8 institution;

9 (2) achievement potential through the use of previous academic records and pre-entrance examination
10 cut-off scores that are consistent with curriculum demands and scholastic expectations; and

11 (3) physical and ~~emotional~~ mental health that is indicative of the applicant's ability to provide competent
12 nursing care to the public.

13 (c) The number of students enrolled in nursing courses shall not exceed by more than 10 students the maximum
14 number approved by the Board, as established pursuant to 21 NCAC 36 ~~.0302(f)~~ .0302(h) and 21 NCAC 36 ~~.0321(k)~~
15 .0321(l).

16 (d) The nursing program shall publish policies in a nursing student handbook and college catalog that provide for
17 identification and dismissal of students who:

18 (1) present physical or ~~emotional~~ mental health problems that conflict with the safety essential to
19 nursing practice and do not respond to treatment or counseling within a timeframe that enables
20 meeting program objectives;

21 (2) demonstrate behavior that conflicts with the safety essential to nursing practice; or

22 (3) fail to demonstrate professional behavior, including honesty, integrity, and appropriate use of social
23 media, while in the nursing program of study.

24 (e) The nursing program shall maintain ~~a three-year average at or above 95 percent of an NCLEX® examination pass~~
25 rate that meets or exceeds 90 percent of the national pass rate for licensure level ~~pass rate~~ on first writing of the
26 licensure examination for calendar years ending December 31.

27 (f) The controlling institution shall publish policies in a nursing student handbook and college catalog for transfer of
28 credits or for admission to advanced placement, and the nursing program shall determine the total number of nursing
29 courses or credits awarded for advanced placement.

30
31 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38; 90-171.43;*

32 *Eff. February 1, 1976;*

33 *Amended Eff. December 1, 2016; January 1, 2006; August 1, 1998; January 1, 1996; June 1, 1992;*

34 *January 1, 1989; January 1, 1984; July 1, 2023.*

35 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0321 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0321 CURRICULUM**

4 (a) The nursing program curriculum shall:

- 5 (1) be planned by nursing program faculty;
- 6 (2) reflect the stated program philosophy, purposes, and objectives, pursuant to 21 NCAC 36
7 .0302(a)(2);
- 8 (3) be consistent with Article 9A of G.S. 90 and the Rules in this Chapter governing the practice of
9 nursing;
- 10 (4) define the level of performance required to pass each course in the curriculum;
- 11 (5) enable a student to develop the nursing knowledge, skills, and abilities necessary for competent
12 practice consistent with the level of licensure and scope as set forth in 21 NCAC 36 .0221, .0224,
13 .0225, and .0231;
- 14 (6) include content in the biological, physical, social, and behavioral sciences to provide a foundation
15 for competent and effective nursing practice;
- 16 (7) provide students the opportunity to acquire and demonstrate, through didactic content and clinical
17 experience under faculty supervision, the knowledge, skills, and abilities required for effective and
18 competent nursing practice in the areas of medical/surgical, obstetric, pediatric, psychiatric/mental
19 health, and community health across the lifespan; and
- 20 (8) be revised as necessary to reflect changes and advances in health care and its delivery.

21 (b) Didactic content and supervised clinical experience across the lifespan appropriate to program type shall include:

- 22 (1) implementing quality and safety principles and practices minimizing the risk of harm to clients and
23 providers through both system effectiveness and individual ~~performance~~; performance to include
24 clinical judgment, skill in clinical management, time management, and emergency preparedness;
- 25 (2) using informatics to communicate, manage knowledge, mitigate error, and support decision making;
- 26 (3) employing evidence-based practice to integrate the best research with clinical expertise and client
27 values for optimal care, including skills to identify and apply best practices to nursing care;
- 28 (4) providing client-centered, culturally competent care by:
 - 29 (A) respecting client differences, values, preferences, and expressed needs;
 - 30 (B) involving clients in decision-making and care management;
 - 31 (C) coordinating and managing continuous client care consistent with the level of licensure.
32 This shall include a demonstrated ability to delegate and supervise others and provide
33 leadership within the profession appropriate for program type; and
 - 34 (D) promoting healthy lifestyles for clients and populations;
- 35 (5) working in interdisciplinary teams to cooperate, collaborate, communicate, engage in patient
36 teaching consistent with the level of licensure, and integrate client care and health promotion; ~~and~~

1 (6) participating in quality improvement processes to measure client outcomes, identify hazards and
2 errors, and develop changes in client ~~care.~~ care; and

3 ~~(7)~~ legal and ethical issues and professional responsibilities of the licensed nurse.

4 (c) Clinical ~~experience~~ experience, traditional or simulated, shall be comprised of sufficient hours to accomplish the
5 ~~curriculum,~~ curriculum and with the exception of observational experiences and the focused client care experience as
6 noted in subsections (e) and (f), shall be supervised by qualified on-site faculty pursuant to 21 NCAC 36 .0318, and
7 shall ensure students' ability to practice at an entry level.

8 (d) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.

9 (e) A focused client care experience with a minimum of 120 hours shall be provided in the final year of curriculum
10 implementation for programs preparing registered nurses.

11 (f) A focused client care experience with a minimum of 90 hours shall be provided in the final semester of the
12 curriculum for programs preparing practical nurses.

13 (g) Learning experiences and methods of instruction, including distance education methods, shall be consistent with
14 the written curriculum plan and shall demonstrate logical curricular progression.

15 ~~(h)~~ Remediation strategies for students shall be in place at the beginning of each course and include processes to
16 remediate errors in the clinical setting.

17 ~~(h)(i)~~ Objectives for each course shall indicate the knowledge, skills, and abilities expected for competent student
18 performance. These objectives shall:

19 (1) indicate the relationship between the classroom learning and the application of this learning in the
20 clinical experience;

21 (2) serve as criteria for the selection of the types of and settings for learning experiences; and

22 (3) serve as the basis for evaluating student performance.

23 ~~(i)(j)~~ Student course syllabi shall include a description and outline of:

24 (1) the course content;

25 (2) the learning environments and activities;

26 (3) when the course is taken in the curriculum;

27 (4) allocation of time for didactic content, clinical experience, laboratory experience, and simulation;
28 and

29 (5) methods of evaluation of student performance, including all evaluation tools used in the course.

30 ~~(j)(k)~~ Each course shall be implemented in accordance with and evaluated by reference to the student course syllabus.

31 ~~(k)(l)~~ Requests for approval of changes ~~in,~~ in the currently approved curriculum, or expansion of, the program,
32 accompanied by all required documentation, shall be submitted in the format provided by the Board at least ~~30~~ 60
33 days prior to implementation for approval by the Board. Criteria for approval shall include program approval status,
34 the availability of classrooms, laboratories, clinical placements, equipment, and supplies and faculty sufficient to
35 implement the curriculum to an increased number of students. Approval shall be required for any increase in
36 enrollment that exceeds, by more than 10 students, the maximum number approved by the Board. Requests for
37 expansion in enrollment shall be considered only for programs with full approval ~~status that demonstrate at least a~~

1 ~~three year average licensure examination pass rate equal to or greater than the North Carolina three year average pass~~
2 ~~rate for program type status.~~

3 ~~(4)(m)~~ The nursing education program shall notify the Board at least ~~30~~ 45 days prior to implementation of:

- 4 (1) alternative or additional program schedules; and
- 5 (2) planned decrease in the Board-approved student enrollment number to accurately reflect program
6 ~~capacity; and~~ capacity.
- 7 ~~(3) changes that alter the currently approved curriculum.~~

8 (n) The program shall have written policies and procedures on the following:

- 9 (1) short-term and long-term plans for integrating simulation into the curriculum;
- 10 (2) method of debriefing for each simulated activity; and
- 11 (3) a plan for orienting faculty to simulation.

12 ~~(m)(o)~~ For all programs using simulation experiences substituted for clinical experience time, the nursing education
13 program shall:

- 14 (1) demonstrate that simulation faculty have been formally educated and maintain the competencies in
15 simulation and debriefing; and
- 16 (2) provide a simulation environment with adequate faculty, space, equipment, and supplies that
17 simulate realistic clinical experiences to meet the curriculum and course objectives.

18 ~~(n) Programs not holding national nursing accreditation shall limit simulation experiences to no more than 25 percent~~
19 ~~in each course, including the focused client care experience.~~

20 ~~(o)(p)~~ Programs ~~holding national nursing accreditation~~ shall limit simulation experiences to:

- 21 (1) no more than 25 percent in the focused client care experience; and
- 22 (2) no more than 50 percent of clinical experience time in each course.

23 ~~(p)(q)~~ External standardized examinations shall not be used to determine a student's progression or graduation in a
24 nursing education program preparing students for initial nurse licensure. When used, external examinations must not
25 count for more than 10 percent of a course grade or assignment.

26
27 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;*
28 *Eff. February 1, 1976;*
29 *Amended Eff. June 1, 1992; January 1, 1989; January 1, 1984;*
30 *Temporary Amendment Eff. October 11, 2001;*
31 *Amended Eff. December 1, 2016; December 1, 2005; August 1, 2002; July 1, 2023.*
32 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0322 is proposed to be amended as follows:

2

3 **21 NCAC 36 .0322 FACILITIES**

4 (a) Campus facilities shall be appropriate in type, number, and accessibility for the total needs of the program.

5 (b) Classrooms, laboratory and simulation space, and conference rooms shall be sufficient in size, number, and types
6 for the number of students and purposes for which the rooms are to be used. Lighting, ventilation, location, and
7 equipment shall be suitable for the number of students and purposes for which the rooms are to be used.

8 (c) Office and conference space for nursing program faculty members shall be appropriate and available for
9 uninterrupted work and privacy, including conferences with students.

10 (d) Learning resources, including educational reference materials and clinical experiences, shall be comprehensive,
11 current, developed with nursing faculty input, accessible to students and faculty and shall support the implementation
12 of the curriculum.

13

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

15 *Eff. February 1, 1976;*

16 *Amended Eff. January 1, 1996; June 1, 1992; January 1, 1989; May 1, 1988;*

17 *Temporary Amendment Eff. October 11, 2001;*

18 *Amended Eff. December 1, 2016; April 1, 2006; August 1, 2002; July 1, 2023.*

19 *Readopted Eff. January 1, 2019.*

1 21 NCAC 36 .0323 is proposed to be amended as follows:

2
3 **21 NCAC 36 .0323 RECORDS AND REPORTS**

4 (a) The controlling institution's publications describing the nursing program shall be current and accurate.

5 (b) The controlling institution shall maintain a system for maintaining official records. Current and permanent student
6 records shall be stored in a secure manner that prevents physical damage and unauthorized access.

7 (c) Both permanent and current records shall be available for review by Board staff.

8 (d) The official permanent record for each graduate shall include documentation of graduation from the program and
9 a transcript of the individual's achievement in the program.

10 (e) The record for each currently enrolled student shall contain up-to-date and complete information, including the
11 following:

12 (1) documentation of admission criteria met by the student;

13 (2) documentation of high school graduation, high school equivalent, or earned credits from
14 post-secondary institution approved pursuant to G.S. 90-171.38(a); and

15 (3) a transcript of credit hours achieved in the classroom, laboratory, and clinical instruction for each
16 course that reflects progression consistent with program policies.

17 (f) The nursing program shall file with the Board records, data, and reports in order to furnish information concerning
18 operation of the program as prescribed in the rules in this Section, including:

19 (1) an annual report to be filed with the Board by November 1 of each ~~year~~, year. This report shall
20 include information about the program's use of simulation;

21 (2) a program description report for non-accredited programs filed with the Board at least 30 days prior
22 to a scheduled review by the Board; and

23 (3) notification by institution administration of any change of the nursing program director. This
24 notification shall include a curriculum vitae for the new director and shall be submitted no later than
25 10 business days before the effective date of the change.

26 (g) All communications relevant to accreditation shall be submitted to the Board at the same time that the
27 communications are submitted to the accrediting body.

28 (h) The Board may require additional records and reports for review at any time to provide evidence and substantiate
29 compliance with the rules in this Section by a program and its controlling institutions.

30 (i) The part of the application for licensure by examination to be submitted to the Board by the nursing program shall
31 include a statement verifying satisfactory completion of all requirements for program completion and the date of
32 completion. The nursing program director shall verify completion of requirements to the Board no later than one
33 month following completion of the Board-approved nursing program.

34
35 *History Note: Authority G.S. 90-171.23(b)(8); 90-171.38;*

36 *Eff. February 1, 1976;*

1 *Amended Eff. December 1, 2016; January 1, 2015; December 1, 2005; January 1, 2004; June 1,*
2 *1992; January 1, 1989; January 1, 1984;*
3 *Readopted Eff. January 1, 2019;*
4 *Amended Eff. November 1, ~~2020~~; July 1, 2023.*