



COMMONWEALTH of VIRGINIA

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Virginia Board of Nursing
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Board of Nursing (804) 367-4515
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Thank you for your interest in establishing a nursing program in Virginia. The Board of Nursing **requires** those interested in establishing a nursing education program to attend an information session **prior** to submitting an application or payment of intent. Please contact the nursing education department at (804) 367-4527 for more information and session dates.

Attached is the Intent to Establish a Nursing Education Program and an application packet. Submit the completed Intent to Establish a Nursing Education Program, with the required fee as instructed. Once the intent to Establish a Nursing Education Program, the application packet and required fee have been received, you will receive written notification. The intent and application will be active for one year from the date received to the Board of Nursing.

An application packet is provided to assist in compiling the required information and documents. Please refer to the Virginia Board of Nursing *Regulations Governing the Practice of Nursing* and to the *Guidance Documents* for guidance and clarification when developing the program. The *Regulations* and *Guidance Documents* are located on the Department of Health Professions/Board of Nursing web site at <http://www.dhp.virginia.gov/>. The Board will not be able to consider your application until all required materials have been submitted.

You may contact Charlette Ridout, Senior Nursing Education Consultant at (804) 367-4527 or Dr. Paula Saxby, Deputy Executive Director at (804) 367-4597 if you have any questions or need assistance.

October, 2016

Nursing Education Approval Process

Summary

Virginia Law and Board of Nursing regulations require approval and oversight of all pre-licensure registered nursing and practical nursing education programs located in Virginia. Each level of approval requires oversight and program review.

Newly established programs require a site visit before students can be admitted and after the program has graduated their first class and the graduates have taken the NCLEX licensure exam. In addition, survey visits are conducted for low NCLEX pass-rates and in response to complaints. Once the program has been granted full approval, Board of Nursing regulations require onsite survey of programs every five years if the nursing program is not accredited and every ten years if the nursing program has programmatic accreditation.

Required Information Sessions:

Information sessions are offered free of charge for those interested in establishing a nursing education program. The Board requires program representatives (limit of 2) to attend an information session. Information regarding the application process, BON regulations, guidance documents, and trends in nursing education will be reviewed. Registration is required. You may contact the Senior Nursing Education Consult at (804) 367-4527 for the session dates.

After attending an information session, entities interested in establishing a pre-licensure nursing education program will submit an application of their intent and a fee of \$1650.00.

The required documentation to be submitted is detailed in the Board of Nursing regulations. An application packet is available to assist with compiling the required information and documents. An application is active for 12 months: The activation period starts on the day the application is received to the Board of Nursing. The application process will take a **minimum** of 12 months.

Once the Board has deemed the program has submitted a completed application and required documents, a site visit will be conducted to ensure that the classroom, skills lab, and student resources are appropriate and available.

If regulatory compliance cannot be verified, initial approval will be denied. The program will be given the opportunity to correct cited deficiencies during the 12 months the application is active.

Once the program is granted initial approval and is authorized to admit students, the program will submit quarterly reports to the Board to show progress toward full approval. Quarterly reports will continue until the program is granted full Board approval.

Once the program has graduated their first class and has four quarters of NCLEX results, the Board will complete a survey visit. The program will complete a comprehensive self-evaluation report (the format is prescribed by the Board), and submit a fee of \$2,200.00. The visit may take place over two days. Based on the survey visit report and the NCLEX testing results, the program could be granted full approval, continue on initial approval with a specified time to meet certain criteria, placed on conditional approval with terms, or have initial program approval withdrawn.

INTENT TO ESTABLISH A NURSING EDUCATION PROGRAM

**Commonwealth of Virginia
Department of Health Professions
Board of Nursing
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463
(804) 367-4527**

Submit a Cashier's Check or Money Order in the amount of \$1,650.00 made payable to the *Treasurer of Virginia*.

Enclose payment with the completed application and mail to the address above. **This page needs to be submitted via hardcopy to the Board.**

FOR OFFICE USE ONLY			
Date Submitted:	*Date Received:	Date Acknowledgement Sent:	Date Fee Submitted and Amount Received:

Name and Address of Institution:

Institution: _____

Street: _____

City, State, ZIP: _____

Phone Number: _____
(Area Code)

Fax Number: _____
(Area Code)

Email Address: _____

Contact Person for the Nursing Education Program: _____
Name and Credentials

Title of the Contact Person for the Nursing Education Program: _____

Type of Program: PN ☐ ADN ☐ Diploma ☐ BSN ☐

**The application shall be effective for 12 months from the date the application was received by the board*

Application Checklist

Please make sure you have included the following before final submission of documents.

- ☐ Business permits
- ☐ Zoning permit
- ☐ Copy of certificate from educational accrediting body or SCHEV
- ☐ State cooperation commission approval
- ☐ Parent institution catalog
- ☐ Nursing student handbook
- ☐ Curriculum map (mapping to the BON regulation)
- ☐ Curriculum plan of study
- ☐ Faculty roster
- ☐ Clinical agencies table
- ☐ Plan for Systematic Plan of Evaluation
- ☐ NCLEX Success Plan
- ☐ Syllabi for each nursing course
- ☐ Organizational chart
- ☐ Application packet
- ☐ Completed all required sections of the application

Commonwealth of Virginia



VIRGINIA BOARD OF NURSING

APPLICATION TO ESTABLISH A NURSING PROGRAM

APPLICATION FOR INITIAL APPROVAL



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APPLICATION FOR INITIAL APPROVAL



Part II. Nursing Education Programs.

Article 1. Initial Approval of a Nursing Program

18VAC90-20-40. Application for initial approval.

Article 1. Initial Approval of a Nursing Education Program
An institution wishing to establish a nursing education program shall:
1: Provide documentation of attendance by the program director at a board orientation on establishment of a nursing education program prior to submission of an application and fee.
Date: _____ of Board orientation meeting attended.
2: Submit to the board, an application to establish a nursing education program along with a nonrefundable fee as prescribed in 18VAC90-20-30. <ul style="list-style-type: none">a. The application shall be effective for 12 months from the date the application was received by the board.b. If the program does not meet the board's requirements for approval within 12 months, it shall file a new application and fee.

APPLICATION FOR INITIAL APPROVAL



3: Submit the following information on the operation of a nursing program:

- a. A copy of a business license and zoning permit to operate a school in a Virginia location, a certificate of operation from the State Corporation Commission, evidence of approval from the Virginia Department of Education, and documentation of accreditation, if applicable;

(Examples of supporting evidence may include: Copy of active business license, zoning permit to operate a school in VA location, Certificate from SCC, VA Dept. Of Ed., Accreditation certificate).

Insert/upload copy of business license and zoning permit here:

- b. The organizational structure of the institution and its relationship to the nursing education program therein;

(Provide organizational structure chart and written statements to articulate the relationship of the nursing program to the parent institution).

Insert/upload copy of organization chart for parent institution and nursing program:

- c. Type of nursing program, as defined in 18VA90-20-10;

(Example ADN, BSN, MSN)

☐ADN ☐BSN ☐MSN

Descriptions of program:

(Examples of supporting evidence may include: Program description).

APPLICATION FOR INITIAL APPROVAL



d. An enrollment plan specifying the beginning dates and number of students for each class for a two-year period from the date of initial approval including (i) the planned number of students in the first class and in all subsequent classes and (ii) the planned frequency of admissions. **Any increase in admissions that is not stated in the enrollment plan must be approved by the board.** Also, transfer students are not authorized until full approval has been granted to the nursing education program; (below is an example of an enrollment plan. *(If the program to be established is a BSN program, you will need to provide information for 3 or 4 years depending on the length of the program Provide the number of students to be enrolled in day, evening, and weekend cohorts.)*)

(Examples of supporting evidence may include: Defined admissions process, Time schedule from implementation of the program through the first graduating class, first NCLEX).

Proposed Program: Enrollment Plan

<Insert plan here>

PROPOSED PROGRAM: ENROLLMENT PLAN									
PROGRAM NAME:									
PROGRAM TYPE:									
YEAR 1 - COHORT 1					YEAR 2 - COHORT 1 & 2				
ADMIT	START			COMPLETE	ADMIT	START			COMPLETE
	SPRING	SUMMER	FALL	Month/Year		SPRING	SUMMER	FALL	Month/Year
# students	Month/Year	Month/Year	Month/Year		# students	Month/Year	Month/Year	Month/Year	
Ex: 20	January 2015	May 2015	August 2015	August 2015					

e. A tentative time schedule for planning and initiating the program through graduation of the first class and the program's receipt of results of the NCLEX examination.

Proposed Program: Tentative Time Schedule

<Insert plan here>

PROPOSED PROGRAM: TENTATIVE TIME SCHEDULE	
PROGRAM NAME:	
ACTIVITY	MONTH/YEAR

APPLICATION FOR INITIAL APPROVAL



Article I.4: Submit to the board evidence documenting adequate resources for the projected number of students and the ability to provide a program that can meet the requirements of this part to include the following information:

a. The results of a community assessment or market analysis that demonstrates the need for the nursing education program in the geographic area for the proposed school. The assessment or analysis shall include employment opportunities of nurses in the community, the number of clinical facilities or employers available for the size of the community to support the number of graduates, and the number and types of other nursing education programs in the area;

(Examples of supporting evidence may include: community assessment or market analysis, employment opportunities within the community, number of clinical facilities, number and types of other programs in the area).

b. A projection of the availability of qualified faculty sufficient to provide classroom instruction and clinical supervision for the number of students specified by the program;

(Examples of supporting evidence may include: projection of the availability of qualified faculty for classroom & clinical).

c. Budgeted faculty positions sufficient in number to provide classroom instruction and clinical supervision;

(Explain how budgeted faculty positions are sufficient. The table below may be used to support your explanation).

PROPOSED PROGRAM: FACULTY BUDGET 18 VAC-90-20-40 (4.C)		
PROGRAM TYPE		
Total Number of Students		
Number of approved Full-time Faculty		
Number of approved Part-time Faculty		
Any additional approved program support including additional approved staff:		
ample:		
New Position - Clinical Coordinator		

APPLICATION FOR INITIAL APPROVAL



d. Availability of clinical training facilities for the program as evidenced by copies of contracts or letters of agreement specifying the responsibilities of the respective parties and indicating sufficient availability of clinical experiences for the number of students in the program, the number of students, and clinical hours permitted at each clinical site and on each nursing unit;

*(Complete the clinical roster below. Provide a copy of current signed contracts for all listed clinical agencies. **Each listed clinical agency will be contacted.** Refer to Guidance Document 90-21 and 90-24 to assist in planning of clinical learning sites.)*

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Table 1.4 – Program Clinical Site Information Form

Clinical Agency Name/ Unit name	Agency Contact phone number and email (person that will be able to provide information regarding the student and faculty performance on the unit)	Date of Contract	Nursing course name/number and Type of clinical experiences obtained	Number of students per clinical unit per day/ hrs on unit Total number of students per term/ Total Hours in direct client / Indicate preceptor experiences with *
Accrediting Body; date and results of most recent accreditation visit		Date of last attendance		
Example: 1.The Best Hospital, 4 South Accredited by: Tab TJC 2014/good standing met all standards	Mary Lou Who 331-111-1111 mlw@Bestplace.	3/10/2010- 3/10/2015	Medical Surgical I, NURS 122 Medical surgical nursing care	6 students per day/8 hr 12 students per term/80 clinical hours direct care
1.				
2.				
3.				
4.				
5.				
6.				

APPLICATION FOR INITIAL APPROVAL



Clinical Agency Name/ Unit name	Agency Contact phone number and email (person that will be able to provide information regarding the student and faculty performance on the unit)	Date of Contract	Nursing course name/number and Type of clinical experiences obtained	Number of students per clinical unit per day/ hrs on unit Total number of students per term/ Total Hours in direct client / Indicate preceptor experiences with *
Accrediting Body; date and results of most recent accreditation visit		Date of last attendance		
Example: 1.The Best Hospital, 4 South Accredited by: Tab	Mary Lou Who 331-111-1111 mlw@Bestplace.	3/10/2010- 3/10/2015	Medical Surgical I, NURS 122 Medical surgical nursing care	6 students per day/8 hr 12 students per term/80 clinical hours direct care
8.				
9.				
10.				

Insert additional lines as needed.

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e. Documentation that at least 80% of all clinical experiences are to be conducted in Virginia, unless an exception is granted by the board. There shall be documentation of written approval for any clinical experience conducted outside of Virginia by the agency that has authority to approve clinical placement of students in that state. The use of any clinical site in Virginia located 50 miles or more from the school shall require board approval; *(For example for programs requiring 400 clinical hours; 320 hours of clinical would need to be completed in Virginia. For programs requiring 500 hours; 400 hours of clinical would need to be completed in Virginia. OR Documentation of a written approval by the Board for sites outside of Virginia; notification of board approval for sites > 50 miles from the school.)*

Provide a description of clinical sites in Virginia; and number of clinical hours:

Provide a description of all clinical sites outside of Virginia; supporting documentation of approval; and number of clinical hours:

f. A diagram or blueprint showing the availability of academic facilities for the program, including classrooms, skills laboratory, and learning resource center. This information shall include the number of restrooms for the student and faculty population, classroom and skills laboratory space large enough to accommodate the number of the student body, and sufficient faculty office space that meets FERPA requirements; and

(Examples of supporting evidence may include: facility blueprints (including classroom, skills lab, and learning resource center, faculty offices).

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g. Evidence of financial resources for the planning, implementation, and continuation of the program with line-item budget projections for the first three years; of operations beginning with the admission of students.

PROPOSED PROGRAM: 3 YEAR BUDGET									
PROGRAM NAME:									
PROGRAM TYPE:									
	YEAR 1			YEAR 2			YEAR 3		
	SPRING	SUMMER	FALL	SPRING	SUMMER	FALL	SPRING	SUMMER	FALL
	Year	Year	Year	Year	Year	Year	Year	Year	Year
	BATCH 1			BATCH 2			BATCH 3		
PROJECTED NUMBER OF ACCELERATED STUDENTS	# of STUDENTS								
				# of STUDENTS					
							# of STUDENTS		
Program Tuition/Fees/Net Revenue									
TOTAL NUMBER OF PROJECTED STUDENTS									
PROJECTED TUTION & OTHER FEES - PER STUDENT	\$			\$			\$		
TOTAL PROJECTED TUITION & OTHER FEES FOR COHORT	\$			\$			\$		
PROJECTED PROGRAM REVENUE PER YEAR	\$			\$			\$		

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5: Respond to the board's request for additional information within a time frame established by the board.

- (1. Provide the Board with current information regarding employment opportunities for graduates of your proposed program. Employment opportunities should be in the geographical location of the nursing program.*
- 2. Provide information regarding the programs plan to prepare students for the NCLEX.*
- 3. Provide a plan of the proposed Systematic Plan of Evaluation to evaluate learning resources, facilities and services. Refer to 18VAC 90-20-137-A)*

APPLICATION FOR INITIAL APPROVAL



18VAC90-20-70. Organization and administration.

- A. The governing or parent institution offering Virginia nursing education programs shall be approved by the Virginia Department of Education or accredited by an accrediting agency recognized by the U.S. Department of Education.

<INSERT APPROVAL AND OR ACCREDITATION FROM ACCREDITING AGENCY HERE>

(Other examples of supporting evidence may include: Recent ACEN or AACN Accreditation Self-Study; State education agreement, SARA certificate).

- B. Any Agency or institution used for clinical experience by a nursing program shall be in good standing with its licensing body.

Refer to **Table 1.4 – Program Clinical Site Information Form**

- C. The program director of the nursing education program shall:

1. Hold a current license or multistate licensure privilege to practice as a registered nurse in the Commonwealth without any disciplinary action that currently restricts practice;

2. Have additional education and experience necessary to administer, plan, implement, and evaluate the nursing education program;

3. Ensure that faculty are qualified by education and experience to teach in the program or to supervise the clinical practice of students in the program;

4. Maintain a current faculty roster, a current clinical agency form, and current clinical contracts available for board review and subject to an audit; and

5. Only serve as program director at one location or campus for the program

You may use the following checklists to ensure the program director meets requirements. Please note you will need to submit additional supporting documents.

The program director of nursing:

Current or multistate licensure as a RN ☐ YES ☐ NO

Additional education/experience ☐ YES ☐ NO

Ensures use of qualified faculty to teach ☐ YES ☐ NO

and supervise clinical

Maintains faculty roster and clinical ☐ YES ☐ NO

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contracts

(Examples of supporting evidence may include: position descriptions for program director, licensure verification for the program director, resume and curriculum vitae of program director, certificates, ceu's, current faculty roster, current clinical agency form, current clinical contracts.)

D. The program shall provide evidence that the director has authority to:

1. Implement the program and curriculum;
2. Oversee the admission, academic progression and graduation of students;
3. Hire and evaluate faculty; and
4. Recommend and administer the program budget, consistent with established policies of the controlling agency.

(Examples of supporting evidence may include: Organizational chart of nursing program and controlling agency, Position descriptions for program director outlining roles and responsibilities, Organizations defined budget process, and faculty Administration interviews).

E. An organizational plan shall indicate the lines of authority and communication of the nursing education program to the controlling body; to other departments within the controlling institution; to the cooperating agencies; and to the advisory committee.

(Examples of supporting evidence may include: Organizational chart of nursing program and controlling agency; cooperating agencies, and the advisory committee).

F. There shall be evidence of financial support and resources sufficient to meet the goals of the nursing education program as evidenced by a copy of the current annual budget or a signed statement from administration specifically detailing its financial support and resources.

(Examples of supporting evidence my include: Organizational budget and list of annual expenditures for instructional equipment and supplies)

APPLICATION FOR INITIAL APPROVAL



18VAC90-20-80. Philosophy and objectives.

Written statements of philosophy and objectives shall be the foundation of the curriculum and shall be:

1. Formulated and accepted by the faculty and the program director;
2. Descriptive of the practitioner to be prepared; and
3. The basis for planning, implementing, and evaluating the total program through the implementation of a systematic plan of evaluation that is documented in faculty or committee meeting minutes. (examples of supporting evidence may include: Systematic evaluation plan, current philosophy and/or mission statement, and meeting minutes)

(Examples of supporting evidence may include: Systematic Evaluation plan, current philosophy, mission statement, meeting minutes, and faculty and director interviews).

APPLICATION FOR INITIAL APPROVAL



18VAC90-20-90. Faculty.

A. Qualifications for all faculty.

1. Every member of the nursing faculty, including the program director, shall hold a current-or a multistate licensure privilege to practice nursing in Virginia as a registered nurse without any disciplinary action that currently restricts practice and have had at least two years of direct client care experience as a registered nurse prior to employment by the program. Persons providing instruction in topics other than nursing shall not be required to hold a license as a registered nurse.

(Examples of supporting evidence may include: Position descriptions for faculty and program directors, licensure verification for the program director and all faculty members, faculty summary form, faculty vitae forms).

2. Every member of a nursing faculty supervising the clinical practice of students shall meet the licensure requirements of the jurisdiction in which that practice occurs. Faculty shall provide evidence of education or experience in the specialty area in which they supervise students' clinical experience for quality and safety. Prior to supervision of students, the faculty providing supervision shall have completed a clinical orientation to the unit in which supervision is being provided.

(Examples of supporting evidence may include: Licensure verification for program director and all faculty members, documentation of orientation to clinical floor, completion of nursing program and cooperating agencies required training).

PROPOSED PROGRAM: FACULTY BUDGET 18 VAC-90-20-40 (4.C)

PROGRAM TYPE

APPROVED FACULTY/NAME RANK/TITLE	FULL TIME/ PART TIME INITIAL HIRE DATE	COLLEGE/ UNIVERSITY	NURSING CREDENTIALS	HIGHEST DEGREE EARNED	MAJOR TEACHING RESPONSIBILITY	YEARS EXPERIENCE PRACTICE/ TEACHING (MUST INCLUDE BOTH)	LICENSURE NUMBER & EXP. DATE

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FACULTY VITAE

Faculty Name _____ Date of Appointment _____

Employed Full _____ or Part-time _____ FTE _____

RN License # _____

OR IS THIS PERSON PRACTICING WITH A COMPACT LICENSE?

Compact License Number _____ State _____ Primary State _____

Is residency changing to Virginia? _____

EDUCATION

(Include basic RN preparation and any advanced degrees)

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

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CURRENT TEACHING RESPONSIBILITY IN THIS PROGRAM

Semester and Year	Course No.	Course Name	Theory/Clinical

3. The program director and each member of the nursing faculty shall maintain documentation of professional competence through such activities as nursing practice, continuing education programs, conferences, workshops, seminars, academic courses, research projects and professional writing. Documentation of annual professional development shall be maintained in employee files for the director and each faculty member until the next survey visit and shall be available for board review.

Faculty Name	Activity	Date

(Examples of supporting evidence may include: Certificates of completion of continuing education such as: teaching, conferences, workshops, seminars, and nursing practice focus), Academic transcripts (faculty that are current students or recent graduates of graduate or doctoral school, Publication/Poster Presentations (faculty who published articles or submitted poster presentation of their research/dissertation, and certification).

4. For baccalaureate degree and pre-licensure graduate degree programs:

- a. The program director shall hold a doctoral degree with a graduate degree in nursing.
 - b. Every member of the nursing faculty shall hold a graduate degree; the majority of the faculty shall have a graduate degree in nursing. Faculty members with a graduate degree with a major other than in nursing shall have a baccalaureate degree with a major in nursing
- (Examples of supporting evidence may include: Faculty academic transcripts, and resume and CV).*

5. For associate degree and diploma programs:

- a. The program director shall hold a graduate degree with a major in nursing.
 - b. The majority of the members of the nursing faculty shall hold a graduate degree, preferably with a major in nursing.
 - c. All members of the nursing faculty shall hold a baccalaureate or graduate degree with a major in nursing.
- (Examples of supporting evidence may include: Faculty academic transcripts, and resume and CV).*

6. For practical nursing programs:

- a. The program director shall hold a baccalaureate degree with a major in nursing.

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b. The majority of the members of the nursing faculty shall hold a baccalaureate degree, preferably with a major in nursing.
(Examples of supporting evidence may include: Faculty academic transcripts, and resume and CV).

B. Number of faculty.

1. The number of faculty shall be sufficient to prepare the students to achieve the objectives of the educational program and to ensure safety for clients to whom students provide care. (Examples of support may include: faculty summary form, clinical availability (# of students per unit), number of students (each cohort and total for program), defined faculty: student ration calculation).

2. When students are giving direct care to clients, the ratio of students to faculty shall not exceed 10 students to one faculty member, and the faculty shall be on site solely to supervise students. (Examples of evidence may include: Clinical experience tracking to verify the number of clinical hours obtained by each student, Student (course-clinical-site-Number of assigned students-Actual hours obtained-Experience summary), Written agreements with clinical agencies, clinical agency form, and master clinical schedule).

3. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students.
(Examples of evidence may include: Clinical experience tracking to verify the number of clinical hours obtained by each student, Student (course-clinical-site-Number of assigned students-Actual hours obtained-Experience summary), Written agreements with clinical agencies, clinical agency form, Preceptorship packet (signed agreements and evaluation forms, etc.), and master clinical schedule).

C. Functions. The principal functions of the faculty shall be to:

1. Develop, implement and evaluate the philosophy and objectives of the nursing education program;

2. Design, implement, teach, evaluate and revise the curriculum. Faculty shall provide evidence of education and experience necessary to indicate that they are competent to teach a given course;

3. Develop and evaluate student admission, progression, retention and graduation policies within the framework of the controlling institution;

4. Participate in academic advisement and counseling of students in accordance with FERPA requirements;

(Examples of supporting evidence for items C.1-4 and 6 may include faculty job descriptions, minutes of faculty and standing committee meetings, CV, Certifications, CEU's, total program systematic evaluation plan and documentation that the plan has been followed.)

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5. Provide opportunities for and evidence of student and graduate evaluation of curriculum and teaching and program effectiveness; and

(Examples of supporting evidence may include exit surveys, end of course student evaluation of faculty)

6. Document actions taken in faculty and committee meetings using a systematic plan of evaluation for total program review.

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18VAC90-20-100. Admission of students.

A. Requirements for admission to a registered nursing education program shall not be less than the requirements of § 54.1-3017 A 1 of the Code of Virginia that will permit the graduate to be admitted to the appropriate licensing examination. The equivalent of a four-year high school course of study as required pursuant to § 54.1-3017 shall be considered to be:

1. A General Educational Development (GED) certificate for high school equivalence; or

2. Satisfactory completion of the college courses required by the nursing education program.

B. Requirements for admission to a practical nursing education program shall not be less than the requirements of subdivision 1 of § 54.1-3020 of the Code of Virginia that will permit the graduate to be admitted to the appropriate licensing examination.

C. Requirements for admission, readmission, advanced standing, progression, retention, dismissal and graduation shall be available to the students in written form.

D. A criminal background check shall be required for admission to a nursing education program.

E. Transfer students may not be admitted until a nursing education program has received full approval from the board.

(Examples of supporting evidence may include: Current school catalog, Current student handbook, Files of each class of enrolled students and graduates, Storage of files, Program admission criteria outlining (educational requirements for admission, need for a background check, reasons for dismissal, and requirements for graduation.)

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18VAC90-20-110. Resources, facilities, publications, and services.

A. Classrooms, conference rooms, laboratories, clinical facilities, and offices shall be sufficient to meet the objectives of the nursing education program and the needs of the students, faculty, administration, and staff and shall include private areas for faculty-student conferences. The nursing education program shall provide facilities that meet federal and state requirements including:

1. Comfortable temperatures;
2. Clean and safe conditions;
3. Adequate lighting;
4. Adequate space to accommodate all students; and
5. Instructional technology and equipment needed for simulating client care.

(Examples of support evidence may include: Certificates of approval from entities such as: Department of Education (SCHEV); SACs, etc.)

B. The program shall have learning resources and technology that are current, pertinent, and accessible to students and faculty, and sufficient to meet the needs of the students and faculty. *(Examples of supporting evidence may include, library, eBooks, EHR, Online learning platform)*

C. Current information about the nursing education program shall be published and distributed to applicants for admission and shall be made available to the board. *(Examples of supporting evidence may include: Philosophy, Objectives, and Conceptual Framework, Curriculum plan and course overview, Course syllabi and Topical Outline, Current School Catalog, Current Student Handbook, Program Website, Recruitment and Admissions Documents, Proof of Accreditation.)*

1. Description of the program;
2. Philosophy and objectives of the controlling institution and of the nursing program;
3. Admission and graduation requirements, including the policy on the use of a final comprehensive exam;
4. Fees and expenses;

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5. Availability of financial aid;
6. Tuition refund policy;
7. Education facilities;
8. Availability of student activities and services;
9. Curriculum plan to include course progression from admission to graduation, the name of each course, theory hours, skills lab hours, simulation hours (if used in lieu of direct client care hours), and clinical hours;
10. Course descriptions to include a complete overview of what is taught in each course;
11. Faculty-staff roster; <i>(Examples of supporting evidence may include documentation of courses offered for the past 3 years including course faculty name)</i>
12. School calendar;
13. Student grievance policy; and
14. Information about implication of criminal convictions.
D. Administrative support services shall be available. <i>(Examples of supporting evidence may include: Job description of administrative assistant, Number of graduate assistant's)</i>
E. There shall be written agreements with cooperating agencies that:
1. Ensure full control of student education by the faculty of the nursing education program, including the selection and supervision of learning experiences to include the dismissal of students from the clinical site if client safety is or may be compromised by the acts of the student;
2. Provide that faculty members or preceptors are present in the clinical setting when students are providing direct client care;
3. Provide for cooperative planning with designated agency personnel to ensure safe client care;
4. Provide that faculty be readily available to students and preceptors while students are involved in preceptorship experiences; and
5. State the number of students allowed on each nursing unit from the nursing education program.
F. Cooperating agencies shall be approved by the appropriate accreditation, evaluation, or licensing bodies, if such exist.

(Examples of supporting evidence may include agency contracts (outlining the above information.), and Clinical site form).

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18VAC90-20-120. Curriculum.

A. Both classroom and online curricula shall reflect the philosophy and objectives of the nursing education program and shall be consistent with the law governing the practice of nursing. *(Examples of supporting evidence may include: Philosophy, Objectives, and Conceptual Framework, and Course descriptions, outcomes, evidence of professional standards aligned with curricula).*

B. Nursing education programs preparing for licensure as a registered or practical nurse shall include: *(You may use the table at the end of this document as evidence to support 18VAC90-20-120)*

1. Evidence-based didactic content and supervised clinical experience in nursing encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life cycle and in a variety of acute, nonacute, and long-term care clinical settings and experiences to include adult medical/surgical nursing, geriatric nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, nursing fundamentals, and pediatric nursing;

2. Concepts of the nursing process that include conducting a focused nursing assessment of the client status that includes decision making about who and when to inform, identifying client needs, planning for episodic nursing care, implementing appropriate aspects of client care, contributing to data collection and the evaluation of client outcomes, and the appropriate reporting and documentation of collected data and care rendered;

3. Concepts of anatomy, physiology, chemistry, microbiology, and the behavioral sciences;

4. Concepts of communication, growth and development, nurse-client interpersonal relations, and client education, including:

- a. Development of professional socialization that includes working in interdisciplinary teams; and
- b. Conflict resolution;

5. Concepts of ethics and the vocational and legal aspects of nursing, including:

- a. Regulations and sections of the Code of Virginia related to nursing;
- b. Client rights, privacy, and confidentiality;
- c. Prevention of client abuse, neglect, and abandonment throughout the life cycle, including instruction in the recognition, intervention, and reporting by the nurse of evidence of child or elder abuse;
- d. Professional responsibility to include the role of the practical and professional nurse;
- e. Professional boundaries to include appropriate use of social media and electronic technology; and
- f. History and trends in nursing and health care;

6. Concepts of pharmacology, dosage calculation, medication administration, nutrition, and diet therapy;

7. Concepts of client-centered care, including:

- a. Respect for cultural differences, values, and preferences;
- b. Promotion of healthy life styles for clients and populations;
- c. Promotion of a safe client environment;
- d. Prevention and appropriate response to situations of bioterrorism, natural and man-made disasters, and intimate partner and family violence;
- e. Use of critical thinking and clinical judgment in the implementation of safe client care; and

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f. Care of clients with multiple, chronic conditions; and

8. Development of management and supervisory skills, including:

- a. The use of technology in medication administration and documentation of client care;
- b. Participation in quality improvement processes and systems to measure client outcomes and identify hazards and errors; and
- c. Supervision of certified nurse aides, registered medication aides and unlicensed assistive personnel.

(Examples of supporting evidence may include: Curriculum Plan and Course Overviews, Course Syllabi and Topical Outlines, Current School Calendar, Current Student Handbook, Student Evaluation Forms (Course, Clinical, and Program Evaluation), Graduate and Employer Evaluation Forms, Clinical Experience Tracking to Verify the number of Clinical Hours Obtained by each Student (Course-Clinical Site-Actual Hours Obtained- Experience Summary), Written Agreements with Clinical Agencies, Clinical Agency Form, Faculty, Student, and Clinical Agency Interviews, Clinical Objectives).

C. In addition to meeting curriculum requirements set forth in subsection B of this section, registered nursing education programs preparing for registered nurse licensure shall also include:

1. Evidence-based didactic content and supervised clinical experiences in conducting a comprehensive nursing assessment that includes:

- a. Extensive data collection, both initial and ongoing, for individuals, families, groups, and communities addressing anticipated changes in client conditions as well as emerging changes in a client's health status;
- b. Recognition of alterations to previous client conditions;
- c. Synthesizing the biological, psychological and social aspects of the client's condition;
- d. Evaluation of the effectiveness and impact of nursing care;
- e. Planning for nursing interventions and evaluating the need for different interventions for individuals, groups and communities;
- f. Evaluation and implementation of the need to communicate and consult with other health team members; and
- g. Use of a broad and complete analysis to make independent decisions and nursing diagnoses;

2. Evidence-based didactic content and supervised experiences in:

- a. Development of clinical judgment;
- b. Development of leadership skills and unit management;
- c. Knowledge of the rules and principles for delegation of nursing tasks to unlicensed persons;
- d. Supervision of licensed practical nurses;
- e. Involvement of clients in decision making and a plan of care; and
- f. Concepts of pathophysiology

(Examples of supporting evidence may include: Curriculum Plan and Course Overviews, Course Syllabi and Topical Outlines, Current School Calendar, Current Student Handbook, Student Evaluation Forms (Course, Clinical, and Program Evaluation), Graduate and Employer Evaluation Forms, Clinical Experience Tracking to Verify the number of Clinical Hours Obtained by each Student (Course-Clinical Site-Actual Hours Obtained- Experience Summary), Written Agreements with Clinical Agencies, Clinical Agency Form, Clinical Objectives).

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18VAC90-20-121. Curriculum for direct client care.

- A. A nursing education program preparing a student for licensure as a registered nurse shall provide a minimum of 500 hours of direct client care supervised by qualified faculty. A nursing education program preparing a student for licensure as a practical nurse shall provide a minimum of 400 hours of direct client care supervised by qualified faculty. Direct client care hours shall include experiences and settings as set forth in 18VAC90-20-120 B 1.

(Examples of supporting evidence may include: Clinical Experience Tracking Form).

- B. Licensed practical nurses transitioning into pre-licensure registered nursing programs may be awarded no more than 150 clinical hours of the 400 clinical hours received in a practical nursing program. In a practical nursing to registered nursing transitional program, the remainder of the clinical hours shall include registered nursing clinical experience across the life cycle in adult medical/surgical nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, and pediatric nursing.

(Examples of supporting evidence may include: Policy regarding allowing clinical hours from previous practical nursing programs).

- C. Any observational experiences shall be planned in cooperation with the agency involved to meet stated course objectives. Observational experiences shall not be accepted toward the 400 or 500 minimum clinical hours required. Observational objectives shall be available to students, the clinical unit, and the board.

(Examples of supporting evidence may include: Objectives for observational experiences, and number of observational hours in the curriculum).

- D. Simulation for direct client clinical hours.

1. No more than 25% of direct client contact hours may be simulation. For pre-licensure registered nursing programs, the total of simulated client care hours cannot exceed 125 hours (25% of the required 500 hours). For pre-licensure practical nursing programs, the total of simulated client care hours cannot exceed 100 hours (25% of the required 400 hours).

2. No more than 50% of the total clinical hours for any course may be used as simulation.

3. Skills acquisition and task training alone, as in the traditional use of a skills laboratory, do not qualify as simulated client care and therefore do not meet the requirements for direct client care hours.

4. Clinical simulation must be led by faculty who meet the qualifications specified in 18VAC90-20-90.

5. Documentation of the following shall be available for all simulated experiences:

- a. Course description and objectives;
- b. Type of simulation and location of simulated experience;
- c. Number of simulated hours;
- d. Faculty qualifications; and

APPLICATION FOR INITIAL APPROVAL



e. Methods of debriefing.

(Examples of supporting may include: the chart below, Simulation policy, Plan for each simulation developed, Alignment document detailing course objectives that simulation meets).

You may use the sample table provided or insert the programs curriculum plan of study to include the number of clinical, skills lab, observation, and simulation hours for each course.

[illegible]

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18VAC90-20-122. Clinical practice of students.

A. In accordance with § 54.1-3001 of the Code of Virginia, a nursing student, while enrolled in an approved nursing program, may perform tasks that would constitute the practice of nursing. The student shall be responsible and accountable for the safe performance of those direct client care tasks to which he has been assigned. *(Examples of supporting evidence may include: agency contracts with a statement regarding student's role, course syllabi with a statement regarding student role, Student Handbook, and Preceptorship packet).*

B. Faculty shall be responsible for ensuring that students perform only skills or services in direct client care for which they have received instruction and have been found proficient by the instructor. Skills checklists shall be maintained for each student. *(Examples of supporting evidence may include: student skills checklist used by the institution).*

C. Faculty members or preceptors providing on-site supervision in the clinical care of clients shall be responsible and accountable for the assignment of clients and tasks based on their assessment and evaluation of the student's clinical knowledge and skills. Supervisors shall also monitor clinical performance and intervene if necessary for the safety and protection of the clients. *(Examples of supporting evidence may include: Faculty handbook, Student handbook, Faculty job description, and Preceptorship Packet).*

D. Clinical preceptors may be used to augment the faculty and enhance the clinical learning experience. Faculty shall be responsible for the designation of a preceptor for each student and shall communicate such assignment with the preceptor. A preceptor may not further delegate the duties of the preceptorship. *(Examples of supporting evidence may include: preceptorship packet with defined student, faculty, and preceptor roles, Faculty Handbook, and Course syllabi).*

E. Preceptors shall provide to the nursing education program evidence of competence to supervise students' clinical experience for quality and safety in each specialty area where they supervise students. The clinical preceptor shall be licensed as a nurse at or above the level for which the student is preparing. *(Examples of supporting evidence may include: Preceptorship packet, preceptor agreement, verification of preceptor's current licensure at or above the level the student is preparing, preceptor CV).*

F. Supervision of students.

1. When faculty are supervising direct client care by students, the ratio of students to faculty shall not exceed 10 students to one faculty member. The faculty member shall be on site in the clinical setting solely to supervise students. *(Examples of supporting evidence may include: Course enrollment numbers for all clinical courses and sections, Master Clinical Schedule, Preceptorship packet with roles, Agency contracts).*

2. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students. In utilizing preceptors to supervise students in the clinical setting, the ratio shall not exceed two students to one preceptor at any given time. During the period in which students are in the clinical setting with a preceptor, the faculty member shall be available for communication and consultation with the preceptor. *(Examples of supporting evidence may include: Course enrollment numbers for all clinical courses and sections, Master*

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Clinical Schedule, Preceptorship packet with roles, Agency contracts).

G. Prior to beginning any preceptorship, the following shall be required:

1. Written objectives, methodology, and evaluation procedures for a specified period of time to include the dates of each experience;
2. An orientation program for faculty, preceptors, and students;
3. A skills checklist detailing the performance of skills for which the student has had faculty-supervised clinical and didactic preparation; and
4. The overall coordination by faculty who assume ultimate responsibility for implementation, periodic monitoring, and evaluation.

(Examples of supporting evidence may include: Student objectives for precepted experience, Course syllabus with course objectives outlined, Preceptor Packet, and Student Skills Checklist).

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18VAC90-20-130. Granting of initial program approval.

A. Initial approval may be granted when all documentation required in 18VAC90-20-40 has been submitted and is deemed satisfactory to the board and when the following conditions are met:

1. There is evidence that the requirements for organization and administration and the philosophy and objectives of the program, as set forth in 18VAC90-20-70 and 18VAC90-20-80, have been met;

2. A program director who meets board requirements has been appointed, and there are sufficient faculty to initiate the program as required in 18VAC90-20-90;

3. A written curriculum plan developed in accordance with 18VAC90-20-120 has been submitted and approved by the board;

4. A written systematic plan of evaluation has been developed and approved by the board; and

5. The program is in compliance with requirements of 18VAC90-20-110 for resources, facilities, publications, and services as verified by a satisfactory site visit conducted by a representative of the board.

(Examples of supporting evidence may include: Systematic Evaluation Plan, Student Evaluation Forms (Course, Clinical, and Program Evaluation), Graduate and Employer Evaluation Forms, Minutes of Faculty and Standing Committee(s) Meetings, Faculty and Student Interviews, Curriculum alignment, Faculty and Director CV, Faculty Handbooks, Student Handbooks).

B. If initial approval is granted:

1. The advertisement of the nursing program is authorized.

2. The admission of students is authorized, except that transfer students are not authorized to be admitted until the program has received full program approval.

3. The program director shall submit quarterly progress reports to the board that shall include evidence of progress toward full program approval and other information as required by the board.

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A visit will be conducted by a Board of Nursing representative prior to receiving Board approval and the admission of students. The facility will be toured including the classrooms, library, computer lab, skills lab and simulation labs. All areas should be ready to receive students complete with equipment and supplies at the time of the visit. See the list of supplies needed for clinical skills labs. This list is a sample of minimally needed supplies. Equipment and supplies should be available to meet the desired student outcomes and the number of students in the program.

Fundamentals of Nursing /Medical Surgical Nursing			Pediatrics	Maternity/ Obstetrics
Manikins <ul style="list-style-type: none"> Low fidelity Mid fidelity High fidelity (based on curriculum and objectives) Task trainers 	Urinary elimination Bedside commode Bedpans, urinals, measuring graduates Urinary catheters insertion sets <ul style="list-style-type: none"> Indwelling Straight Male and female task trainer capability Urinary specimen equipment	Bowel elimination Enema equipment Ostomy equipment Ostomy model or trainer capability Stool specimen equipment	Manikins <ul style="list-style-type: none"> High fidelity (based on curriculum and objectives) Baby Child 	Manikins <ul style="list-style-type: none"> High fidelity (based on curriculum and objectives) Pelvis model with baby Birthing manikin Post partum assessment Infant
Hospital beds, stretchers, examination tables with privacy curtains and call system	Intravenous insertion IV fluids, IV infusion sets IV infusion pump IV insertion models	Emergency cart Resuscitation equipment Defibrillation equipment Practice medications	IV equipment Volume control regulators i.e.: buretrol	Hospital beds Isolette Bassinette
Over bed wall mounts with simulated Oxygen/ medical air/ suction/ otoscopes/ophthal moscopes	Post mortem care	Acute care <ul style="list-style-type: none"> Central IV access care kits Chest tubes Chest tubes drainage 	Emergency equipment <ul style="list-style-type: none"> Oxygen equipment Resuscitation equipment Defibrillation equipment Practice medications Barlow tape and equipment 	Doppler
Thermometers	Sharps container	wheelchairs	Medication	Baby care supplies

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Fundamentals of Nursing /Medical Surgical Nursing			Pediatrics	Maternity/ Obstetrics
(electronic) Sphygmomanometer, teaching stethoscopes			administration Supplies to teach	Cord care supplies
Oral and personal hygiene equipment Bath basins, emesis basins, towels, wash clothes, soap, tooth paste, hair care, skin care	Ambulation equipment <ul style="list-style-type: none"> • Gait belts • Canes • Crutches • walkers 	Wound care supplies Various skin treatments i.e.:Duoderm	Infant scales Measuring tapes	
Scales chair, standing	Anti-embolic stockings	Linens, linen hampers	Hospital cribs	
Pressure wound prevention <ul style="list-style-type: none"> • Elbow protectors • Heel protectors • Pillows 	Medication dispensing unit Medication administration supplies for all routes Practice medications for all routes	Surgical care supplies Sterile gloves Wound drains – i.e.: hemovac, Jackson Pratt, penrose		
Infection Control equipment <ul style="list-style-type: none"> • Gowns • Head cover • Mask • Gloves • Shoe covers 	Nutritional Supplies <ul style="list-style-type: none"> • Foods • Cups • Utensils • Diet trays 	Snellen's chart		
Oxygen equipment <ul style="list-style-type: none"> • Nasal prong • Simple mask • Non- rebreather • Pulse oximetry • Incentive spirometer 	Naso-gastric tubes and insertion supplies			

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CURRICULUM MAP

18VAC90-20-120. Curriculum.

Insert nursing course numbers in the top row of the column. Place a ✓ in the corresponding row, indicating information is completed during the course									
A. Both classroom and online curricula shall reflect the philosophy and objectives of the nursing education program and shall be consistent with the law governing the practice of nursing.									
B. Nursing education programs preparing for licensure as a registered or practical nurse shall include:									
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2. Concepts of the nursing process that include conducting a focused nursing assessment of the client status that includes decision making about who and when to inform, identifying client needs, planning for episodic nursing care, implementing appropriate aspects of client care, contributing to data collection and the evaluation of client outcomes, and the appropriate reporting and documentation of collected data and care rendered;									
3. Concepts of anatomy, physiology, chemistry, microbiology, and the behavioral sciences;									
4. Concepts of communication, growth and development, nurse-client interpersonal relations, and client education, including:									

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a. Development of professional socialization that includes working in interdisciplinary teams; and									
b. Conflict resolution;									
5. Concepts of ethics and the vocational and legal aspects of nursing, including:									
a. Regulations and sections of the Code of Virginia related to nursing;									
b. Client rights, privacy, and confidentiality;									
c. Prevention of client abuse, neglect, and abandonment throughout the life cycle, including instruction in the recognition, intervention, and reporting by the nurse of evidence of child or elder abuse;									
d. Professional responsibility to include the role of the practical and professional nurse;									
e. Professional boundaries to include appropriate use of social media and electronic technology; and									
f. History and trends in nursing and health care;									
6. Concepts of pharmacology, dosage calculation, medication administration, nutrition, and diet therapy;									
7. Concepts of client-centered care, including:									
a. Respect for cultural differences, values, and preferences;									

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b. Promotion of healthy life styles for clients and populations;									
c. Promotion of a safe client environment;									
d. Prevention and appropriate response to situations of bioterrorism, natural and man-made disasters, and intimate partner and family violence;									
e. Use of critical thinking and clinical judgment in the implementation of safe client care; and									
f. Care of clients with multiple, chronic conditions; and									
8. Development of management and supervisory skills, including:									
a. The use of technology in medication administration and documentation of client care;									
b. Participation in quality improvement processes and systems to measure client outcomes and identify hazards and errors; and									
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a. Extensive data collection, both initial and ongoing, for individuals, families, groups, and communities addressing anticipated changes in client conditions as well as emerging changes in a client's health status;									
b. Recognition of alterations to previous client conditions;									
c. Synthesizing the biological, psychological and social aspects of the client's condition;									
d. Evaluation of the effectiveness and impact of nursing care;									
e. Planning for nursing interventions and evaluating the need for different interventions for individuals, groups and communities;									
f. Evaluation and implementation of the need to communicate and consult with other health team members; and									
g. Use of a broad and complete analysis to make independent decisions and nursing diagnoses;									
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a. Development of clinical judgment;									
b. Development of leadership skills and unit management;									
c. Knowledge of the rules and principles for delegation of nursing tasks to unlicensed persons;									
d. Supervision of licensed practical nurses;									
e. Involvement of clients in decision making and a plan of									

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care; and									
f. Concepts of pathophysiology.									