

Commonwealth of Virginia

VIRGINIA BOARD OF NURSING SURVEY VISIT REPORT

October 2016

A Board of Nursing representative will contact the program director to establish a date for the survey visit. The visit may be completed in one or two days. This will be discussed with the program director when scheduling the visit.

A letter will be mailed to the program director to confirm the date of the visit and provide instruction regarding the submission of required fees. Payments not received prior to the visit may result in the rescheduling of the visit.

For the initial review, the self-study and supporting documents can be submitted to the Board in either hard copy or electronic copies on a CD. The self-study and the supporting documents will need to be provided to the Board 4 weeks prior to the date of the visit.

A hardcopy of the completed self-study and a hard copy of supporting documents as requested by the assigned On-Site Reviewer shall be given to the reviewer on the date of the on-site visit.

The program will set the agenda to include the following:

Board of Nursing Survey Visit Agenda

Agenda Item	Time allotted
Meeting with program director	45 minutes
Tour of facility	45 minutes
Meeting with students- representation from each	45 minutes
cohort	
Meeting with faculty- full time, part time, adjunct	45 minutes
Time to review student records/files	1 hour
Time to review supporting documents	2 hours
Meeting with program administration	30 minutes
Clinical sites tour	varies

Agenda items and allotted times may differ. The Board representative completing the survey will discuss the specifics with the program director. Please provide a copy of the agenda when the self-study is submitted for initial review.

COMMONWEALTH OF VIRGINIA

DEPARTMENT OF HEALTH PROFESSIONS BOARD OF NURSING PERIMETER CENTER 9960 MAYLAND DRIVE, SUITE 300 HENRICO, VIRGINIA 23233-1463

SURVEY VISIT REPORT

Nursing Education Progr	ram Name:					
Address:						
(Street	t)	(City)	(State)	(Zip Code)		
Program Director:						
(Na	ame)	(Title)	(Telephone Number)		
Controlling Institution:						
Address: (Street		(0')	(0)	(7) (3.1)		
(Street	ί)	(City)	(State)	(Zip Code)		
Public School Programs	Only:					
Superintendent:						
T7 4' 1D' 4	(Name/Credentials)	(,	Address)			
Vocational Director:	(Name/Credentials)	(/	Address)			
Principal:	(i vaine, executivals)	(-	- Luci (555)			
	(Name/Credentials)	(,	Address)			
Board Representative:		Date of Visit:	Date of La	st Visit:		
PN Program		RN Program	<u>1</u>			
Total Enrollment:		Total Enrollment				
Day Program Enrollment:		Day Program Enrollment:				
Evening Program Enrollm	ent:	Evening Program Enrollment:				
Length of Program:		Length of Program:				
Months:		Months:				
Years:		Years:				
Semester	rs:	Semesters:				

NURSING FACULTY

FULL-TIME						PART-TIME					
	PhD/EdD/DNP	MS/MSN	BS/BSN	AASN	DIP	PhD/EdD	MS/MSN	BS/BSN	AASN	DIP	TOTAL
NURSE											
Please indicat	te the use of other	er essential	personnel.							-	
Title/Positio			_	edential			Total	Number	in Role		
LIBRARIAN ADMINISTF OTHER	I RATIVE ASSIS	TANT	 					_ _ _			
NCLEX pas	ss rates of first	time test ta	akers								
Year	Pass r	ate		er of tes istered		Number of graduates passing	g	lumber o raduate ailing			
2014											
2015											
2016											
	AL NURSING			LY:							
Number of A	Adults:										

AGENCIES USED FOR INSTRUCTION AND EXPERIENCE (Include additional sheet, if necessary)

\Box Table 1: Agencies Used for Instruction and Experience

Table 1.4 – Program Clinical Site Information Form

Clinical Agency Name/ Clinical Agency address Unit name Accrediting Body; date and results of most recent	Agency Contact phone number and email (person that will be able to provide information regarding the student and faculty performance on the	Date of Contract Date last used for	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 /
accreditation visit	unit)	student experiences		Indicate preceptor experiences with *
Example: 1.The Best Hospital, 4 South 1010 Wonder Way, Richmond, VA	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 hrs 12 students per term/80 clinical hours
TJC 2014/good standing met all standards				direct care
1.				
2.				
3.				
4.				
5.				
6.				

18VAC 90-20-40. Application for initial approval.

Section 3a & 3b

- 3. Submit the following information on the organization and operation of a nursing education 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;
 - b. The organizational structure of the institution and its relationship to the nursing education program therein;

Examples of supporting evidence may include:

Copy of business license, Certificate To Operate (CTO) from SCHEV, zoning permits Organization chart

18VAC 90-20-40. Application for initial approval.

Sections 4e & 4f

- 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:
 - 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;

Examples of supporting evidence may include:

Evidence that 80% of total clinical hours are completed in VA. Written board approval for sites outside of VA or 50 miles or more from school

18VAC 90-20-40. Application for initial approval. Cont.

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.

Examples of supporting evidence may include:

Facility blueprint- (including, classroom, skills lab, learning resource center)
Faculty offices
Can be verified during site visit tour

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.

Examples of supporting evidence may include:

Certificate To Operate (CTO) from SCHEV
Affirmation of current accreditation from regional or national accreditors such as SACS or ABHES
Recent ACEN or CCNE Accreditation Self-Study Report/Recommendation
State education agreement

SARA Agreement

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

Examples of supporting evidence may include:

Clinical Agency Form: Column entitled "Accredited by Month/Year"; "Good Standing" should be completed

Link to website of accreditors of clinical agency

- *C.* The 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.

Examples of supporting evidence may include:

Position Descriptions for Program Director Licensure Verification for the Program Director Resume or Curriculum Vitae (C.V) of Program 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 policy regarding budget process

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 for the nursing education program.

Examples of supporting evidence may include:

Organization chart of nursing program and controlling agency

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 may include:

Operational budget and List of annual expenditures for instructional equipment and supplies

18 VAC90-20-80. 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, mission statement Meeting minutes

18VAC 90-20-90. Faculty.

- A. Qualifications for all faculty.
- 1. Every member of the nursing faculty, including the program director, shall hold a current license or 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:

Licensure Verification for the Program Director and all Faculty Members Faculty Summary Form (add 2 years direct care as a registered nurse) 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 family providing supervision shall have completed a clinical orientation to the site in which supervision is being provided.

Examples of supporting evidence may include:

Licensure Verification for the Program Director and all Faculty Members Faculty Summary Form Documentation of orientation to the clinical floor Completion of agency's required training

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 the board review.

Examples of supporting evidence may include:

** this is required for all faculty, full time, part time, adjunct, clinical or classroom

Certificates of Completion of Continuing Education (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)

Certification

- 4. For baccalaureate degree programs and prelicensure 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 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 Resume or 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 degree or a graduate degree with a major in nursing.

Examples of supporting evidence may include:

Faculty Academic Transcripts Resume or CV

- 6. For practical nursing programs:
 - a. The program director shall hold a baccalaureate degree with a major in nursing.
 - 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 Resume or 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 patients to whom students provide care.

Examples of supporting evidence may include:

Faculty Summary Form (number of faculty)
Clinical availability (# of students per unit)
Number of Students (each cohort and total for program)

Defined Faculty: Student Ratio calculation

2. When students are giving direct care to patients, 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 supporting evidence may include:

Clinical Experience Tracking forms- to Verify the Number of clinical hours obtained by each Student

Written Agreements with Clinical Agencies

Clinical Agency Form

Faculty, Student, and Clinical Agency interviews

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 supporting evidence may include:

Clinical Experience Tracking forms- to Verify the Number of clinical hours obtained by each student

Written Agreements with Clinical Agencies

Clinical Agency Form

Preceptorship Packet (signed agreements, evaluation forms, evidence of orientation)

Faculty, Student, and Clinical Agency interviews

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;
- 5. Provide opportunities for and evidence of student and graduate evaluation of curriculum and teaching and program effectiveness; and
- 6. Document actions taken in faculty and committee meetings using a systematic plan of evaluation for total program review.

Examples of supporting evidence may include:

Faculty and Student Interviews
Student Admission Process/Policies
Position Descriptions for Faculty
Student Evaluation Forms (Course, Clinical)

Minutes of Faculty and Standing Committee(s) Meetings Systematic Evaluation Plan

- A. Requirements for admission to the 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. General Educational Development (GED) certificate for high school equivalence; or
 - 2. Satisfactory completion of the college courses required by the nursing education program.

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

- stating educational requirements for admission
- need for a background check
- Reasons for dismissal
- Requirements for graduation

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

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's Self-Evaluation:

Program admission criteria

- stating educational requirements for admission
- need for a background check
- Reasons for dismissal
- Requirements for graduation

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

Examples of supporting evidence may include:

Program admission criteria

- stating educational requirements for admission
- need for a background check
- Reasons for dismissal
- Requirements for graduation

Program catalog, handbook

D. A criminal background check shall be required for admission to a nursing education program with the exception of high school students.

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's Self-Evaluation:

Program admission criteria

- stating educational requirements for admission
- need for a background check
- Reasons for dismissal
- Requirements for graduation

E. Transfer students may not be admitted until a nursing education program has received dull 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

Program's Self-Evaluation:

Program admission criteria

- stating educational requirements for admission
- need for a background check
- Reasons for dismissal
- Requirements for graduation

18VAC 90-20-110. 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 supporting evidence may include:

On site visit of classrooms, conference rooms, labs, clinical facilities and faculty offices.

18VAC 90-20-110. Resources, facilities, publications, and services.

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

18VAC 90-20-110. Resources, facilities, publications, and services. Cont.

C. Current information about the nursing education program shall be published periodically and distributed to applicants for admission and shall be available to the board. Such information shall include:

- 1. Description of the program to include whether the program is accredited by a nursing education accrediting body;
- 2. Philosophy and objectives of the controlling institution and of the nursing program;
- 3. Admission and graduation requirement, including policy on the use of a final comprehensive exam;
- 4. Fees and expenses;
- 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;
- 12. School calendar;
- 13. Student grievance policy; and
- 14. Information about implication of criminal convictions.

Examples of supporting evidence may include:

Current School Catalog Current Student Handbook School Website Recruitment and Admissions Documents

18VAC 90-20-110. Resources, facilities, publications, and services. Cont.

D. Administrative support services shall be available.

Examples of supporting evidence may include:

Job description of administrative assistance Number of Graduate Assistances

18VAC 90-20-110. Resources, facilities, publications, and services. Cont.

- 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 Clinical site form

18VAC 90-20-120. 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 Course descriptions, outcomes, evidence of professional standards aligned with curricula.

18VAC 90-20-120. Curriculum. Cont.

- B. Nursing education programs preparing for licensure as a registered or practical nurse shall include:
- 1. Evidence-based didactic content and supervised clinical experience in nursing encompassing the attainment and maintenance of physical and mental health and prevention of illness for individuals and groups throughout he life cycle and in a variety of acute, nonacute, community-base, 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, 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? 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 calculations, medication administration, nutrition, and diet therapy;
- 7. Concepts of client-centered care, including:
 - a) Respect for cultural differences, values, preferences;
 - *b) Promotion of health life styles for clients and populations;*
 - c) Promotion of a safe client environment;
 - d) Prevention and appropriate response to situations of bioterrorism, natural and manmade disasters, and intimate partner and family violence; and
 - e) Use of clinical 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

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)
Craduate and Employer Evaluation Forms

Graduate and Employer Evaluation Forms Completed Curriculum map table 5 Clinical Experience Tracking forms- to Verify the Number of clinical hours obtained by each student

Written Agreements with Clinical Agencies Clinical Agency Form Faculty, Student, and Clinical Agency Interviews Clinical Objectives

18VAC 90-20-120. Curriculum. Cont.

- C. In addition to meeting the 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 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 forms- to Verify the number of clinical hours obtained by each student Written Agreements with Clinical Agencies Clinical Agency Form Faculty, Student, and Clinical Agency Interviews Clinical Objectives

Completed Curriculum map table 5

§18VAC 90-20-120. Curriculum. Cont.

18VAC 90-20-121. Curriculum for direct 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 students 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 as set forth in §18VAC 90-20-120 B 1.

Examples of supporting evidence may include:

Clinical Experience Tracking

18VAC 90-20-121. Curriculum for direct care. Cont.

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

Examples of supporting evidence may include:

Policy on allowing clinical hours from previous practical nursing programs Clinical Experience Tracking

18VAC 90-20-121. Curriculum for direct care. Cont.

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 Number of observational hours in curriculum

18VAC 90-20-121. Curriculum for direct care. Cont.

- D. Simulation for direct client clinical hours.
- 1. No more than 25% of direct client contact hours may be simulation. For prelicensure registered nursing programs, the total of simulated client care hours cannot exceed 125 hours (25% of the required 500 hours). For prelicensure 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 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 18VAC 90-20-90.
- 5. Documentation of the following shall be available for all simulated experiences:
 - a. Course descriptions and objectives;
 - b. Type of simulation and location of simulated experience;
 - c. Number of simulated hours;
 - d. Faculty qualifications; and
 - e. Methods of debriefing.

Examples of supporting evidence may include:

Simulation Policy
Plan for each simulation developed
Alignment document showing course objectives that simulation meets
Qualifications of faculty teaching in simulation

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:

Student Handbook Preceptor 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:

Policy regarding making student assignments Policy regarding activities to be completed prior to advancing to clinical Student skills checklist

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 Preceptor 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:

Preceptor Packet Faculty Handbook Course syllabus

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:

Preceptor Packet Verification of Preceptor License

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.
- 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 student in the 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 Clinical Schedule Preceptor packet with roles

- 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 preceptor experience Course syllabus with course objectives outlined Preceptor Packet Student Skills Checklist Faculty, student, preceptor interviews

18VAC90-20-136. RECORDS AND PROVISION OF INFORMATION.

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

Examples of supporting evidence may include:

Program Policy Student handbook or catalog

Program's Self-Evaluation:

- B. A system of records shall be maintained and be made available to the board representative and shall include:
 - 1. Data relating to accreditation by any agency or body.
 - 2. Course outlines.
 - 3. Minutes of faculty and committee meetings including documentation of the use of a systematic plan of evaluation for total program review and including those faculty members in attendance.
 - 4. Record of and disposition of complaints.

Examples of supporting evidence may include:

To be available for review during site visit

- C. A file shall be maintained for each student. Provision shall be made for the protection of student and graduate files against loss, destruction, and unauthorized use. Each file shall be available to the board representative and shall include the student's:
 - 1. Application, including the date of its submission and the date of admission into the program;
 - 2. High school transcript or copy of high school equivalence certificate, and if the student is a foreign graduate, a transcript translated into English;
 - 3. Current record of achievement to include classroom grades, skills checklists, and clinical hours for each course; and
 - 4. A final transcript retained in the permanent file of the institution to include dates of admission and completion of coursework, graduation date, name and address of graduate, the dates of each semester or term, number of clinical hours for each clinical course, course grades, and authorized signature.

Examples of supporting evidence may include:

Files are to be available for review during site visit.

Program's Self-Evaluation:

- D. Current information about the nursing education program shall be published and distributed to students and applicants for admission and shall be made available to the board. In addition to information specified in 18VAC90-20-110 C, the following information shall be included:
 - 1. Annual passage rates on NCLEX for the past five years; and
 - 2. Accreditation status.

Examples of supporting evidence may include:

Program website Program handbook or catalog

18VAC90-20-137. EVALUATION OF RESOURCES; WRITTEN AGREEMENTS WITH COOPERATING AGENCIES.

A. Periodic evaluations of resources, facilities, and services shall be conducted by the administration, faculty, students, and graduates of the nursing education program including an employer evaluation for graduates of the nursing education program. Such evaluation shall include assurance that at least 80% of all clinical experiences are conducted in Virginia unless an exception has been granted by the board.

Examples of supporting evidence may include:

Systematic plan of evaluation Nursing faculty meeting minutes

Program's Self-Evaluation:

- B. Current written agreements with cooperating agencies shall be maintained and reviewed annually and shall be in accordance with of 18VAC90-20-110 E.
- C. Upon request, a program shall provide a clinical agency summary on a form provided by the board.
- D. Upon request and if applicable, the program shall provide (i) documentation of board approval for use of clinical sites located 50 or more miles from the school; and (ii) for use of clinical experiences conducted outside of Virginia, documented approval from the agency that has authority to approve clinical placement of students in that state.

Examples of supporting evidence may include:

Completed table 1 – Agencies used for instruction and experiences Contracts will need to be available for review during visit

18VAC90-20-151. Passage rate on national examination.

A. For the purpose of continued approval by the board, a nursing education program shall maintain a passage rate for first-time test takers on the NCLEX that is not less than 80%, calculated on the cumulative results of the past four quarters of all graduates in each calendar year regardless of where the graduate is seeking licensure.

Examples of supporting evidence may include:

NCLEX pass rates as reported on the VA BON website

FACULTY SUMMARY

NAME OF SCHOOL:
Table 2. Faculty Summary

Table 2: Faculty Summary *Please list all nurses, including administrators, who are members of the faculty.*

NAME	DATE APPT (YEAR)	CURRENT FACULTY RANK/TITLE	FULL TIME/ PART TIME	MAJOR TEACHING RESPONSIBILITY	HIGHEST NURSING CREDENTIAL	HIGHEST DEGREE OBTAINED	COLLEGE/ UNIVERSITY	YEARS EXPERIENCE PRACTICE	YEARS EXPERIENC E TEACHING In an Academic setting	STATE OF LICENSURE LICENSE NUMBER AND EXP. DATE
								_		•
								_		
								_		
								_		

Table 3: Clinical Hours per course

Course Title	Course Name	Didactic instruction hours	Skills lab/Simulation hours	Observations	Simulation in lieu of direct clinical hours	Direct client care hours
NURS 110	Fundamentals in nursing	75	30/15	0	0	90

Table 4:

Direct Client Care Clinical Experience Hours

Specialty Area	Fundam	ientals	medical/surgical n		Adult medical/s nursing		Adult medical/su nursing	ırgical		
Course Title and number										
Acute Setting Clinical	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours
Non- acute setting clinical	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours

Direct Client Care Clinical Experience Hours

Specialty Area Course Title and number	Geriatric	nursing	Maternal/ (obstetric gynecolog neonatal)	S,	Mental health/ps	sychiatric	Pediatric			
Acute Setting Clinical	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours
Non- acute setting clinical	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours	Name of Clinical Agency	Hours

TABLE 5: 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:					
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, community-based, 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,					

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					
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.					
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					

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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.					