



Certification Page Regular and Emergency Rules

Revised June 2020

Emergency Rules *(Complete Sections 1-3 and 5-6)*

Regular Rules

1. General Information

a. Agency/Board Name*			
b. Agency/Board Address		c. City	d. Zip Code
e. Name of Agency Liaison		f. Agency Liaison Telephone Number	
g. Agency Liaison Email Address			h. Adoption Date
i. Program			
Amended Program Name <i>(if applicable)</i> :			

* By checking this box, the agency is indicating it is exempt from certain sections of the Administrative Procedure Act including public comment period requirements. Please contact the agency for details regarding these rules.

2. Legislative Enactment For purposes of this Section 2, "new" only applies to regular (non-emergency) rules promulgated in response to a Wyoming legislative enactment not previously addressed in whole or in part by prior rulemaking and does not include rules adopted in response to a federal mandate.

a. Are these non-emergency or regular rules new as per the above description and the definition of "new" in Chapter 1 of the Rules on Rules?

No. Yes. If the rules are new, please provide the Legislative Chapter Numbers and Years Enacted (e.g. 2015 Session Laws Chapter 154):

3. Rule Type and Information For purposes of this Section 3, "New" means an emergency or regular rule that has never been previously created.

a. Provide the Chapter Number, Title* and Proposed Action for Each Chapter. *Please use the "Additional Rule Information" form to identify additional rule chapters.*

Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed
Amended Chapter Name <i>(if applicable)</i> :		

4. Public Notice of Intended Rulemaking

a. Notice was mailed 45 days in advance to all persons who made a timely request for advance notice. No. Yes. N/A

b. A public hearing was held on the proposed rules. No. Yes. Please complete the boxes below.

Date:	Time:	City:	Location:

5. Checklist

a. For regular rules, the Statement of Principal Reasons is attached to this Certification and, in compliance with Tri-State Generation and Transmission Association, Inc. v. Environmental Quality Council, 590 P.2d 1324 (Wyo. 1979), includes a brief statement of the substance or terms of the rule and the basis and purpose of the rule

b. For emergency rules, the Memorandum to the Governor documenting the emergency, which requires promulgation of these rules without providing notice or an opportunity for a public hearing, is attached to this Certification.

6. Agency/Board Certification

The undersigned certifies that the foregoing information is correct. By electronically submitting the emergency or regular rules into the Wyoming Administrative Rules System, the undersigned acknowledges that the Registrar of Rules will review the rules as to form and, if approved, the electronic filing system will electronically notify the Governor's Office, Attorney General's Office, and Legislative Service Office of the approval and electronically provide them with a copy of the complete rule packet on the date approved by the Registrar of Rules. The complete rules packet includes this signed certification page; the Statement of Principal Reasons or, if emergency rules, the Memorandum to the Governor documenting the emergency; and a strike and underscore copy and clean copy of each chapter of rules.

<i>Signature of Authorized Individual</i>	<i>Lori Hart</i>
<i>Printed Name of Signatory</i>	
<i>Signatory Title</i>	
<i>Date of Signature</i>	

7. Governor's Certification

I have reviewed these rules and determined that they:

1. Are within the scope of the statutory authority delegated to the adopting agency;
2. Appear to be within the scope of the legislative purpose of the statutory authority; and, if emergency rules,
3. Are necessary and that I concur in the finding that they are an emergency.

Therefore, I approve the same.

<i>Governor's Signature</i>	
<i>Date of Signature</i>	

Wyoming State Board of Nursing

Chapter 6: Standards for Nursing Education Programs

Intent to Adopt Amended Rule

Statement of Reasons

The Wyoming State Board of Nursing has voted to initiate a change to Chapter 6 of its Rules pursuant to the Nurse Practice Act Statutes §§ 33-21-119 through 33-21-158. Chapter 6 establishes standards for nursing education programs, continuing education, and CNA certification advancement (CNA II and Medication Assistant-Certified). As required by W.S. § 16-3-103(a)(i)(G), this proposed change meets minimum substantive state statutory requirements.

The purpose of the proposed rule change is threefold:

- (a) Strengthen regulatory standards for nursing education programs operating in Wyoming utilizing current, evidence-based recommendations;
- (b) Clarify regulatory language for programs as current language has resulted in ambiguity and unequal enforcement; and
- (c) Decrease the administrative burden on programs by working cooperatively with national nursing accreditors to offer joint program visits and reports.

The proposed rules utilize quality and warning indicators, standards, and model rule language suggested by the National Council of State Boards of Nursing (NCSBN). Rules were drafted following input from experts and other interested parties from across the state. These changes will clarify language, support evidence-based quality/warning indicators, and improve oversight of nursing education programs.

There is a reorganization of content to remove redundant provisions and improve clarity. Other substantive changes include:

- Requiring national nursing accreditation for all nursing education programs. Language and requirements align with those of the accrediting bodies. It was recommended by NCSBN all programs be nationally accredited by 2020 as this assures all programs are held to common standards of quality.
- Approval visits and reports may be made jointly with the accrediting body. This change addresses the overlap of both entities, decreases duplication of effort, and increases the diversity of expertise. This follows recommendations made by NCSBN.
- Establishes standards for simulation as past rules have been silent in this area. Evidence-based standards established by NCSBN supported up to 50% simulation experiences can be effectively substituted for traditional clinical experiences in prelicensure programs. This research also supported the need for adequate facilities, faculty training in the modality, and debriefing after the simulation activity. Each of these requirements are included in these rules.
- Clarifies requirements for out-of-state prelicensure programs regarding initial and continued approval, programmatic standards, and reporting requirements. Current rules limit oversight of out-of-state prelicensure programs. Out-of-state programs utilizing Wyoming clinical facilities and providing education to citizens of Wyoming should be held to the same high standards established for in-state programs.

- Establishes post-licensure requirements related to administration, faculty, preceptors, and curriculum which follow requirements outlined in NCSBN Model Rules.
- Increases NCLEX (nursing licensing exam) first-time student pass-rates requirements from 75% to 80% to align requirements with national accreditation standards.
- Defines evaluation criteria and warning signs that may result in a WSNB review of a program.
- Clarifies process for denying and withdrawing approval and assure due process.

To assist in understanding these substantive changes to Chapter 6, a “crosswalk” is utilized to identify proposed rules, current rules, and rationale for change. The “crosswalk” is attached for ease of reference.

Public Comments received during Public Comment period October 11 – November 24, 2021

Proposed Revisions to Chapter 6 – Standards for Nursing Education Programs

	PROPOSED REVISION/COMMENT	CH 6 REFERENCE	BOARD RESPONSE
<i>Public Comment 1 – Louise Posten, Director of Nursing NWCCD / Received November 12, 2021</i>			
1-A	Offers currency and a broad definition to encompass all methods of clinical-related activities. I like it!	Section 2 (c) “Clinical Learning Experience” means planned activities in nursing practice that prepare students to understand, perform, and refine professional competencies at the appropriate program level. These experiences include direct and indirect patient care, simulation, standardized patient experiences, or any nursing intervention that influences health care outcomes.	Comment supports proposed revisions. No change requested.
1-B	With the recent decision to split Sheridan and Gillette College we will be looking to separately accredit the new GCCD (HLC) and the GCCD Nursing Program (ACEN). ACEN eligibility requirements to seek initial accreditation state—The governing organization/ institution is accredited <u>or approved to pursue accreditation by an institutional accrediting agency</u> recognized by the ACEN. (ACEN recognizes the same accrediting agencies as the DOE.) Is it possible to have the “or” section added here so programs can be state approved while the governing organization and nursing program seek nationally recognized accreditation? Programs	Section 3 (b) Current accreditation approval of:	<u>Accept</u> suggested modification to rule language Section 3 to read: (b) Current accreditation approval <u>or approved to pursue accreditation</u> of:

	PROPOSED REVISION/COMMENT	CH 6 REFERENCE	BOARD RESPONSE
	cannot even apply to begin the process for initial accreditation unless WSBN approved.		
1-C	Essential content! Great addition!	Section 4 (a)(ii) (F) Instruction on the Wyoming Nurse Practice Act and Administrative Rules which shall include:	Comment supports proposed revisions. No change requested.
1-D	Still seems unclear to me. The faculty shall not supervise more than 16 preceptor/student pairs per semester, per clinical rotation, per day? I get this question frequently.	Section 4 (b)(i)(D) (II) When preceptors are used in a clinical setting, one (1) preceptor shall supervise a maximum of one (1) student. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.	<u>Reject</u> the comment to clarify the language. Faculty shall not supervise more than 16 students at <u>any</u> time.
1-E	We also use adjunct faculty in the classroom on occasion. Does this rule need to include the descriptor "clinical"?	Section 4 (e) (v) Provide formal orientation for new adjunct clinical faculty.	<u>Accept</u> suggested modification to rule language Section 4 (e) to read: (v) Provide formal orientation for new adjunct clinical faculty.
1-F	I appreciate the addition of the prescriptive 10 hour content criteria.	Section 4 (f) (ii) Demonstrate pedagogical competence by: (A) A graduate degree in nursing education; or (B) A minimum of ten (10) hours of educational preparation obtained within six (6) months of the hire date which shall include:	Comment supports proposed revisions. No change requested.
1-G	Again, is the descriptor "clinical" required?	Section 4 (g) (iii) Adjunct or part-time clinical faculty shall be educationally prepared with a minimum of a baccalaureate degree in nursing.	<u>Reject</u> the comment to lower the educational requirement for didactic faculty to a bachelor's degree. NCSBN Evidence-based quality indicator recommends a graduate degree for all faculty. ¹ Allowing faculty to

	PROPOSED REVISION/COMMENT	CH 6 REFERENCE	BOARD RESPONSE
			obtain this degree while working in a teaching role is a compromise for rural areas.
1-H	Appreciate the rural compromise here.	Section 4 (g) (iv) A minimum of fifty percent (50%) of the full-time faculty shall hold a graduate degree with a major in nursing.	Comment supports proposed revisions. No change requested.
1-I	This section is very complex. If this is the process GCCD will have to follow to separate from NWCCD, it is very complicated. Maybe GCCD will not be considered new?? GCCD is separating but they are not new. Gillette College has been in existence for over 52 years. The nursing program at Gillette College has delivered nursing education PN since 1982 and AD since 1985.	Section 5 Process for Approval of New Programs	<u>Reject</u> the comment to simplify the program approval process. New programs applying for approval will receive step-by-step assistance from the Practice & Education Consultant.
1-J	Admission of students for the first time??	Section 8 (e) Step 4 – Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.	<u>Reject</u> the comment to clarify the language. New programs applying for approval will receive step-by-step assistance from the Practice & Education Consultant.
1-K	APRNs may utilize preceptors other than licensed APRNs depending on the specialty foci.	Section 7 (b)(ii)(D) (II) Preceptors and faculty providing patient care in Wyoming shall have an active, unencumbered Wyoming, or multi-state RN or APRN license.	<u>Reject</u> the comment to clarify the requirement for APRNs. The requirements in Section 7 (b)(ii)(D)(II) refer exclusively to prelicensure programs.
1-L	We get separate scores for our traditional pre-licensure (BASIC) and 2 nd degree (BRAND) programs. Not sure if that needs to be clarified here?	Section 9 (a) (i) LPN and RN pass rates shall be evaluated separately.	<u>Reject</u> the comment, this section is specific to programs that have separate RN/LPN programs

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Public Comment 2 - Leslie Hagenstein / Received November 14, 2021			
2-A	I will assume that the acronyms for APRN, etc are previously addressed in earlier chapters within document? Ex: Advanced Practice Registered Nurse (APRN).		<u>Reject</u> the comment for an additional explanation of acronyms – these are addressed in the Nurse Practice Act.
2-B	Where did the sixteen (16) preceptor / student pairs come from for faculty supervision? The number seems a bit large to me ... your call.	Section 4 (b)(i)(D) (II) When preceptors are used in a clinical setting, one (1) preceptor shall supervise a maximum of one (1) student. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.	<u>Reject</u> the comment to change preceptor/faculty rations. These numbers are unchanged from previous rules.
2-C	Program Administrators shall have a doctorate in "nursing or related field" ... I would suggest "health-related" field.	Section 4, (d) (vi) The post-licensure nursing program administrator shall have a doctoral degree in nursing or a related field.	<u>Reject</u> the comment to change educational requirements for program administrators to "health-related field." Program administrators with a doctoral degree in education (a non-health-related field) would be well-qualified as a program administrator due to knowledge of pedagogy.
Public Comment 3 - Kody Wheeler, DNP/FNP student / Received November 20, 2021			
3-A	I am writing regarding chapter 6 with a concern that our community colleges do not require a nursing leadership and policy class at the associate level. I believe the future of nursing depends on educating our new nursing workforce about leadership and the nurses' ability to influence health policy. I believe policy and leadership education is vital to nursing's future in the healthcare arena. Nurses should sit on committees, boards, and legislative committees and I do not believe nurses at the associate level are aware of the power they hold as the largest profession in healthcare.	Section 4 (a) (ii) (B) Integration of legal and ethical issues and professional responsibilities into didactic and clinical experiences;	<u>Reject</u> the comment requesting the addition of a separate nursing leadership and policy class. Although not a stand-alone class per Section 4 (a)(ii)(B), all programs are required to include instruction on professional responsibilities.
Public Comment 4 - Bob Hart, Crook County Trauma Program Manager / Received November 1, 2021			

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4-A	The proposed changes to chapter 6 all look good. Keep up the great work.		Comment supports proposed revisions. No change requested.
Public Comment 6 - Sherrill Smith, Dean UW School of Nursing / Received October 12, 2021			
5-A	To further clarify (either here or later) this is a rate calculated annually? And, not sure about ACEN, but CCNE also allows for 80% 3 year average as standard OR 80% for all test-takers, not just first time.	Section 2 (n) "NCLEX Pass Rate" means the percentage of a program's student candidates who take the NCLEX (at both the PN and RN levels) and pass on the first attempt.	<u>Reject</u> the comment recommending NCLEX scores be averaged over a 3-year period in congruence with CCNE accreditation standards. NCLEX scores are a lagging indicator of program quality. ¹ Although CCNE allows a 3-year average, both ACEN and NLN CNEA require 80% pass rate averaged over a one-year timeframe. It is important all programs are held to the same standard regardless of accrediting agency.
Public Comment 7 - Stacey Stanek, Director of Nursing CWCC / Received October 16, 2021			
7-A	I wanted to be absolutely certain that skill and competency performance is not considered simulation by the Chapter 6 definition. It appears these are separate activities--but I want to be sure.	Section 5 (a) A prelicensure nursing education program may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours per course. A program that uses simulation shall adhere to the standards set in this section.	<u>Reject</u> the comment recommending change to the maximum number of hours that can be completed via simulation. There is substantial evidence that up to 50% simulation can be effectively substituted for traditional clinical experience in any prelicensure course. ¹
Public Comment 8 - Marneé Crawford, Director of Nursing NWC / Received October 12, 2021			
8-A	For out-of-state programs, Section 7, I wondered if the idea of giving WY students precedence in clinical settings ever came up in the conversation. For example, giving Wyoming students the first opportunity to obtain clinical experiences at Cheyenne Regional before allowing Colorado or another out-of-state entity to schedule their students. This is in reference to Montana's practice of requiring out of state clinical experiences	Section 7. <u>Host State/Jurisdiction Nursing Education Programs.</u>	<u>Reject</u> the comment requesting Wyoming-based programs have precedence in clinical placement. Per Section 8 (a)(ii)(C) prelicensure programs seeking to operate in Wyoming must submit a statement of intent that outlines (C) Potential effects on other established programs in Wyoming which shall include:

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	to be approved by each program using the site to confirm that the out of state students do not displace the in-state students. The Montana State Board of Nursing requires that I show evidence of obtaining this approval from each program before gaining approval from the Montana Board to send students into Billings for clinical experiences. In a reverse example, I'd like to for us to consider requiring an out of state entity, such as MSU-Billings, to gain NWC approval prior to their notification to the WSBON (7.17) when they are wanting to use Cody Regional Hospital for their BSN experiences so that our Wyoming ADN and BSN students are not displaced. From my perspective, this is particularly important for our rural state's programs who have limited clinical agency resources.		(I) An analysis of the current usage of potential clinical site(s) in the area; and (II) A projection of how the addition of the program will impact use of clinical site(s) by established programs.
Public Comment 9 - Blake Halladay, Director Nightingale School of Nursing / Received November 24, 2021			
9-A	Remove "..and established" We encourage the BON to defer education regulation/oversight of accredited programs to the accrediting bodies. Since the BON requires existing programs to be accredited (see 3.15), BON oversight creates unnecessary double regulation. The BON's expertise and primary focus is to regulate the practice of nursing. Education regulation is best handled by education experts, in this case nursing education accrediting bodies. Regulation by the BON of new nursing education programs that are actively seeking accreditation is acceptable in order to guide the program to accreditation, to allow the graduates of these new programs to gain licensure in the state, and to allow the new program to meet initial accreditation requirements. Full approval	Section 1 (a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;	<u>Reject</u> the comment requesting the Board "defer education regulation/oversight of accredited programs to the accrediting bodies." Per § 33-21-122 The WSBN has responsibility for approval and oversight of nursing education programs. These include (xi) Develop and enforce uniform and reasonable standards for nursing education programs as stated in board rules and regulations; (xii) Approve nursing education programs that meet the prescribed standards of the board; and (xiii) Deny or withdraw approval of nursing education programs that fail to meet the prescribed standards of the board.

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	should be defined as a program that is accredited by a nursing education accrediting body. If a program loses accreditation, then it is suggested that the BON again regulate the program for a set time until either accreditation is again achieved, or the program is closed.		
9-B	Suggested change: "NCLEX Pass Rate means the percentage of a program's student candidates who pass the NCLEX at the rate requirement set by that program's nursing education programmatic accreditor. For non-accredited programs, NCLEX Pass Rate means the percentage of a program's student candidates who take the NCLEX and pass at a percentage requirement set by the WYBON." Note: We encourage the BON to defer education regulation for accredited programs to the accrediting body.	Section 1 (n) "NCLEX Pass Rate" means the percentage of a program's student candidates who take the NCLEX (at the PN or RN levels) and pass on the first attempt.	<u>Reject</u> the comment recommending change to the language defining NCLEX pass rate. Per the requirements of this chapter, all programs must be accredited and the WSBN has responsibility for approval and oversight of nursing education programs. Per § 33-21-122(b) The board of nursing may make, adopt, amend, repeal and enforce reasonable rules and regulations for the proper administration and enforcement of this act; and (xi) Develop and enforce uniform and reasonable standards for nursing education programs as stated in board rules and regulations.
9-C	Clarification is needed here regarding "accepted standards." The standards of what organization? We encourage the BON to defer education regulation of accredited programs to the nursing education accrediting bodies. Either clarify the language with: "Are consistent with accreditation standards..." or remove Subsection ii entirely as it is redundant of Subsection i, and unclear as to what standards a program must be consistent with.	Section 3 (a) (ii) Accepted standards governing the practice of nursing appropriate for graduates of the type of program offered.	<u>Reject</u> the comment recommending a change in language to "Are consistent with accreditation standards..." The broad language used in this section is deliberate as these rules include post-licensure programs which have requirements outside of accreditation standards.
9-D	Note: The US DOE no longer differentiates between regional and national accreditation. Remove "...regional or national..."	Section 3 (b) (i) Parent institution by a regional or national accrediting association for postsecondary institutions recognized by the United States Department of Education; and	<u>Accept</u> suggested modification to rule language for Section 3 (b) to read: (i)Parent institution by a regional or national accrediting association for postsecondary institutions an accrediting body recognized by the United States

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			Department of Education for postsecondary institutions; and
9-E	Note: Why include postlicensure? Does the BON have authority to regulate education programs that do not change the scope of practice of a licensed nurse? The BON's primary purpose is to regulate the practice of nursing; if an education program does not change the legal scope of practice of a licensed nurse, why regulate such a program?	Section 6 (a) Any program with legal domicile within Wyoming shall obtain and maintain Board approval for any prelicensure or post-licensure program as pursuant to Sections 8 through 13 of this chapter.	<u>Reject</u> the comment indicating the Board does not have the authority for oversight of post-licensure programs. Although past iterations of Ch 6 rules have been silent on post-licensure programs, the WSBN has responsibility for approval and oversight of all nursing education programs. Per § 33-21-122(b) The board of nursing may make, adopt, amend, repeal and enforce reasonable rules and regulations for the proper administration and enforcement of this act; and (xi) Develop and enforce uniform and reasonable standards for nursing education programs as stated in board rules and regulations.
9-F	Clarify with "...shall meet the standards required of the program's home state's/jurisdiction's nursing education programs."	Section 7 (b) (i) Programs seeking to operate a prelicensure program in Wyoming shall meet the same standards required of home state/jurisdiction nursing education programs. Programs shall:	<u>Reject</u> the comment "...shall meet the standards required of the program's home state's/jurisdiction's nursing education programs." For consistency of regulation, all nursing education programs seeking to operate in Wyoming shall meet the same standard.

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9-G	Change to: "Obtain and maintain home state Board approval." Note: The NCSBN encourages cross-state collaboration. Host states are encouraged to trust and accept the jurisdiction of Home states, therefore it is unnecessary for approved programs to gain additional BON approvals in Host states. This creates additional unnecessary barriers to the entry to nursing thereby further exacerbating the already critical nursing shortage.	Section 7 (b) (i) (A) Obtain and maintain Board approval;	<u>Reject</u> the comment and recommended language, "...it is unnecessary for approved programs to gain additional BON approvals in Host states." Individual board of nursing determine if recommendations made by NCSBN are in the best interest of their individual state. For consistency of regulation, all nursing education programs seeking to operate in Wyoming shall meet the same standard.
9-H	Unclear, similar to Line 3.4, "...programmatic 7.15.21 WSBN Crosswalk Ch. 6 Page 28 of 57 education programs; and reporting standards" of what organization?	Section 7 (b)(i) (B) Maintain programmatic and reporting standards for prelicensure nursing education programs; and	<u>Accept</u> suggested modification to rule language for Section 7 (b)(i) to read: (B) Maintain programmatic and reporting standards for prelicensure nursing education programs as defined in Sections 3, 4, and 9 ; and
9-I	Note: This is not possible, please remove this subsection. Host states are not eligible to apply to the NCSBN for NCLEX codes for out of state programs. Only Home state Boards of Nursing are allowed to apply for program NCLEX codes.	Section 7 (b)(i) (C) Instruct students to use the NCLEX program code corresponding to a Wyoming Board approved program.	<u>Reject</u> the comment and recommended language, "Host states are not eligible to apply to the NCSBN for NCLEX codes for out of state programs. Only Home state Boards of Nursing are allowed to apply for program NCLEX codes." NCSBN has authorized Wyoming to obtain individual NCLEX codes for any program approved by the WSBN. This represents a change in policy for NCSBN.
9-J	Change to: "Prelicensure programs planning to use Wyoming clinical facilities shall submit the following:..." Note: Per your stated rationale, prelicensure programs receive oversight by the state that approves the program (i.e., the Home state), therefore additional permission and	Section 7 (b) (ii) Prelicensure programs seeking permission to either use a Wyoming clinical facility for a portion of a class or to place an individual student for a	<u>Reject</u> the comment and recommended language, "Prelicensure programs planning to use Wyoming clinical facilities shall submit the following:..."

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	oversight is not required. However, notification to the Host state BON is acceptable.	precepted experience shall submit the following:	<p>Prelicensure programs operating in Wyoming (regardless of legal domicile) must meet the same standards required of home/state jurisdiction programs.</p> <p>Programs with legal domicile outside of Wyoming who only seek to schedule a portion of clinical training (such as a clinical experience at the State hospital or a one-semester preceptorship) are not considered to be operating in Wyoming. An exception for these programs is offered in support of NCSBN’s ideal of cross-state collaboration. These limited clinical experiences do not require formal Board approval or oversight.</p>
9-K	Clarify: This section is unclear in its jurisdiction. The Wyoming State Board of Nursing does not have authority over “all prelicensure programs.” Clarify with: “Prelicensure programs approved by the Board...”	<p>Section 9</p> <p>(a) NCLEX Results. All prelicensure programs shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.</p>	<p><u>Accept</u> suggested modification to rule language for Section 9 (a) to read:</p> <p>(a) NCLEX Results. All prelicensure programs operating in Wyoming shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.</p>
9-L	Add further clarification for accredited programs: “Accredited prelicensure programs shall demonstrate NCLEX pass rates consistent with the program’s nursing education programmatic accreditation standards.” Note: As per your stated rationale, bring this section into alignment with programmatic accreditor standards (CCNE, ACEN, and NLN CNEA). For example, CCNE does not restrict programs to the use of first-time pass rate metrics; rather it takes a more current and comprehensive approach and provides multiple methodologies to measure NCLEX pass rates.	<p>Section 9</p> <p>(a) NCLEX Results. All prelicensure programs shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.</p> <p>(ii) Within three (3) months of receiving NCLEX results below the eighty percent (80%) requirement, the program shall submit a plan to the Board for assessment</p>	<p><u>Reject</u> the comment and recommended language, “Accredited prelicensure programs shall demonstrate NCLEX pass rates consistent with the program’s nursing education programmatic accreditation standards.”</p> <p>NCLEX scores are a lagging indicator of program quality.¹ Although CCNE allows a 3-year average, both ACEN and NLN CNEA require 80% pass rate averaged over a one-year timeframe. It is important all programs are held to the same standard regardless of accrediting agency.</p>

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		and improvement including expected outcomes and timelines.	
9-M	Change to: “The Board may initiate a complaint as pursuant to Section 13 for programs that lose programmatic accreditation.”	Section 9 (a) (iii) The Board may initiate a complaint as pursuant to Section 13 for programs with NCLEX rates that remain below eighty percent (80%) for a period of two (2) years.	<u>Reject</u> the comment and recommended language, “The Board may initiate a complaint as pursuant to Section 13 for programs that lose programmatic accreditation.” NCLEX scores are a lagging indicator of program quality. ¹ As one of the only quantitative measures it is an important stand-alone quality measure. Section 9 (a)(iii) provides a consistent measurement all prelicensure programs operating in Wyoming must meet. Section 13 indicates a complaint may be made against a program if any requirements of this chapter have not been met – including loss of accreditation.
9-N	Again, jurisdiction is unclear. Clarify with: “Programs approved by the Board shall...”	Section 9 (b) Annual Report. All programs, excluding those with provisional approval, shall submit an annual report on or before October 31 in a format specified by the Board.	<u>Accept</u> suggested modification to rule language for Section 9 to read: (b) Annual Report. All programs operating in Wyoming , excluding those with provisional approval, shall submit an annual report on or before October 31 in a format specified by the Board.

¹Spector, N., Silvestre, J., Alexander, M., Martin, B., Hooper, J. I., Squires, A., & Ojemeni, M. (2020). NCSBN regulatory guidelines and evidence-based quality indicators for nursing education programs. *Journal of Nursing Regulation*, 11(3), S1-S64. [https://www.journalofnursingregulation.com/article/S2155-8256\(20\)30075-2/pdf](https://www.journalofnursingregulation.com/article/S2155-8256(20)30075-2/pdf)

Wyoming State Board of Nursing Administrative Rules Crosswalk
Ch 6: Standards for Nursing Education Programs

Proposed Chapter 6 Rules		Current Chapter 6 Rules	Rationale for Change	Comments
BOX 1				
1.1	Section 1. Statement of Purpose. These Board Rules are adopted to implement the Board’s authority to:	Section 1. <u>Statement of Purpose.</u> These Board Rules are adopted to implement the Board’s authority to:	Minor change to language that does not impact intent.	
1.2	(a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;	(a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;		
1.3	(b) Ensure graduates of programs are prepared for safe and effective nursing practice; and	(b) Ensure that graduates of programs are prepared for safe and effective nursing practice; and		
1.4	(c) Ensure candidates are educationally prepared for certification, licensure, and recognition.	(c) Ensure candidates are educationally prepared for certification, licensure, and recognition.		
BOX 2				
2.1	Section 2 Definitions.	Section 2. <u>Definitions.</u>		
2.2	(a) “Administrator” means the nurse educator who has administrative responsibility or authority for the direction of a program.	(a) “Administrator” means the nurse educator who has administrative responsibility or authority for the direction of a program.	Unchanged from current rules.	
2.3	(b) “Articulation Agreement” means an educational partnership between nursing education programs allowing students to receive credit for their prior degree.		Previously not defined or referenced as such. Source ¹	
2.4	(c) “Clinical Learning Experience” means planned activities in nursing practice that prepare students to understand, perform, and refine professional competencies at the appropriate program level. These experiences include direct and indirect patient care, simulation, standardized patient experiences, or any nursing intervention that		Previously not defined or referenced as such. Source ²	

	influences health care outcomes.			
2.5	(d) “Committee” means the Education Committee of the Wyoming State Board of Nursing.	(b) “Committee” means the Practice and Education Committee of the Board.	Definition updated to reflect current committees for the WSBN.	
2.6	(e) “Cost” means those expenses the Board or investigating committee incurs in a hearing to deny, refuse to renew, reactivate, reinstate, revoke, restrict, place conditions upon, or suspend a license or program approval pursuant to Wyoming Statute §§ 33-21-138 through 144 and includes, but is not limited to hearing officer fees, service fees, subpoena fees, reporter fees, lay and expert witness and consultant fees, travel and per diem expenses, deposition costs and other costs and expenses incurred in the investigation, discovery, preparation, and hearing of any disciplinary matter.		Previously not defined or referenced as such.	
2.7	(f) “Debriefing” means an activity following an experiential learning experience. Activity is led by a facilitator, encourages participant’s reflective thinking, and provides feedback regarding the participant’s performance.		Previously not defined or referenced as such. Source ³	
2.8		(c) “Distance Education” means instruction offered by any means where the student and faculty are in separate physical locations. Teaching methods may be synchronous or asynchronous and shall facilitate and evaluate learning in compliance with approved statutes and regulations.	Definition broadened to define all methods of delivery. See definition for “Methods of Delivery”	
2.9	(g) “Encumbered License” means a license with current discipline, condition, or restriction.	(d) “Encumbered license” means a license with a current discipline, condition, or restriction.	Mistake in language corrected. No change in meaning.	

2.10	(h) “Faculty” means an educator employed, paid, or contracted by the program whether full-time, part-time, adjunct, or labeled as a substitute.		Previously not defined or referenced as such.	
2.11	(j) “Home State/Jurisdiction” means the state/jurisdiction where the program has legal domicile.		Previously not defined or referenced as such. Source ⁴	
2.12	(k) “Host State/Jurisdiction” means the state/jurisdiction outside of the home state/jurisdiction where students participate in didactic coursework and/or clinical experiences.		Previously not defined or referenced as such. Source ⁴	
2.13	(l) “Methods of Delivery” means the methods used by faculty to facilitate and evaluate learning in compliance with approved statutes and regulations. Methods of delivery include:		Previously not defined or referenced as such. Source ⁵	
2.14	(i) “Traditional Education” means student and instructor are physically in the same location at the same time (e.g., face-to-face). This method of delivery may be web-enhanced/supported.			
2.15	(ii) “Distance Education” means student and instructor are not physically in the same location. Instruction uses synchronous or asynchronous technology to support regular and substantive interactions between the instructor and students. Instructional methods may include but are not limited to one-way or two-way transmissions, audio, video, the internet, or computer technologies.			
2.16	(iii) “Hybrid Education” means instruction that uses both distance and traditional education methods of delivery.			

2.17	(m) “Multi-State License” means a license to practice nursing issued by a home state licensing board authorizing the licensed nurse to practice in all party states under a privilege to practice.		Previously not defined or referenced as such. Source ⁶	
2.18	(n) “NCLEX Pass Rate” means the percentage of a program’s student candidates who take the NCLEX (at the PN or RN levels) and pass on the first attempt.		Previously not defined or referenced as such. Source ^{2,5}	
2.19	(o) “Nurse Administrator” means the nurse with responsibility and authority for the administrative and instructional activities of a nursing education unit and nursing programs within the governing organization (e.g., dean, chairperson, director, etc.).		Previously not defined or referenced as such.	
2.20	(p) “Parent Institution” means the organization or agency responsible for the administration and operation of the program.	(f) “Parent Institution” means the organization or agency responsible for the administration and operation of the program.	Unchanged from current rules.	
2.21	(q) “Plan of Correction” means a written report in which a program details plans for compliance with relevant statutes and regulations.		Previously not defined or referenced as such.	
2.22	(r) “Post-Licensure” means an educational program leading to degree completion of an undergraduate, graduate, or terminal degree in nursing once licensure as a registered nurse has been attained.		Previously not defined or referenced as such.	
2.23	(s) “Preceptor” also known as partners in education, means a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.	(e) “Preceptor” also known as partners in education, means a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.	Unchanged from current rules.	

2.24	(t) “Prelicensure” means initial educational program in nursing leading to entry-level licensure as a RN or LPN.		Previously not defined or referenced as such.	
2.25	(u) “Program” means a nursing or nursing related health education program at any level.	(g) “Program” means nursing education program.	Clarifies language to include all levels of licensure.	
2.26		(h) “Program Compliance Report” means a report generated by the program in which the program reports its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.	Term updated to “Self-Evaluation Plan” to better match language used by nursing accreditation agencies such as ACEN.	
2.27		(j) “Self-Study Evaluation” means an evaluation generated by the program in which the program evaluates its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.	Removed to better match language used by nursing accreditation agencies such as ACEN.	
2.28	(v) “Simulation” means a technique to replace or amplify real clinical experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.		Previously not defined or referenced as such. Source ³ Ch. 2 (j)	
2.29	(w) “Self-Evaluation Plan” means a comprehensive, written plan for initial and ongoing self-evaluation of program requirements and outcomes. This plan is based on the standards and rules identified in this chapter and the program’s identified accrediting body.		Decreases redundant information in body of rules by moving to definitions. Source ⁵	

BOX 3				
3.1	Section 3. General Standards for Nursing Education Programs. All nursing education programs operating in Wyoming shall meet these requirements.	Section 3. <u>Standards of Nursing Education.</u>	Language change to better match focus of section.	
3.2	(a) Purpose and outcomes are consistent with:	(a) All programs shall adopt purposes and outcomes which:	Simplifies language. Source ³	
3.3	(i) The Wyoming Nurse Practice Act, Board Rules, and other state and federal laws; and	(i) Are consistent with the Act, Board Rules, and other state laws;	Language updated to include federal laws.	
3.4	(ii) Accepted standards governing the practice of nursing appropriate for graduates of the type of program offered.	(ii) Are consistent with the accepted standards governing the practice of nursing appropriate for graduates of the type of program offered; and	Minor language change; no change to intent.	
3.5		(iii) Were developed utilizing stakeholder input.	Removed to decrease redundant requirements for programs. These are nursing accreditation standards and are required of all programs as part of the accreditation process.	
3.6		(b) <u>Administration and Organization.</u> The parent institution and program shall:		
3.7		(i) Establish statements of purpose, philosophy, and outcomes which are consistent with those of the parent institution and nursing standards;		
3.8		(ii) Establish and adopt an organizational design which clearly delineates the lines of authority, responsibility, and channels of communication based on stakeholder input;		
3.9		(iii) Ensure faculty and students participate in program planning, implementation, evaluation, and continuous improvement;		

3.10		(iv) Provide adequate resources to support the program’s processes, goals, and outcomes which include, but are not limited to: fiscal, human (qualified administrative, instructional, and support personnel), physical (facilities and equipment), clinical, and technical learning resources;		
3.11		(v) Implement written policies, congruent with the policies of the parent institution, which are reviewed periodically; and		
3.12		(vi) Provide students the opportunity to acquire and demonstrate the knowledge, skills, and abilities required for safe and effective nursing practice, in theory and clinical experience, through faculty supervision.		
3.13	(b) Current accreditation or approval to pursue accreditation, of:	(c) <u>Accreditation Requirements.</u>		
3.14	(i) Parent institution by an accrediting body recognized by the United States Department of Education for postsecondary institutions; and	(i) The parent institution shall be accredited by a U.S. Department of Education regionally or nationally recognized institutional accrediting agency.	Minor language change to reflect NCSBN model rule language and updated requirements from the US Dept. of Education. Source ³	
3.15	(ii) Program by a national nursing accreditation agency recognized by the Board.	(ii) The Board shall not require the program to obtain national accreditation as a condition for approval, but it is encouraged.	National nursing accreditation promotes standardized program quality and assures national standards are met. This promotes articulation to the next level of nursing education. Source ^{7,8}	

3.16	(c) The parent institution or program shall notify the Board of any changes affecting their respective accreditation status within thirty (30) days.	(iii) The parent institution or program shall notify the Board of any changes affecting their respective accreditation status.	Added expectation of time for response to current rule language.	
3.17	(d) Prior to any clinical learning experiences, the parent institution shall execute a written contract with the cooperating clinical facility establishing and defining:	Sect 4 (iii) (B) A written contract or agreement shall be executed by the parent institution conducting the program and the cooperating clinical facility or agency. The contract shall be executed by the responsible individual(s) of each party, and shall set forth the responsibilities of each party.	Simplified language and clarifies specific information required for any clinical learning experience.	
3.18	(i) The responsibilities of each party;		Clarifies program responsibilities regarding contracts. Source ⁵	
3.19	(ii) The period of the agreement; and			
3.20	(iii) Conditions under which renewal, renegotiation, or termination could take place;			
3.21	(e) The parent institution shall maintain a copy of each executed contract and provide it to the Board upon request.			
BOX 4				
4.1	Section 4. Programmatic Standards for Wyoming Nursing Education Programs.	Section 4. <u>Programmatic Standards for Prelicensure Programs.</u>	Change in language to include all Wyoming nursing education programs.	
4.2	(a) <u>Curriculum.</u>	(a) <u>Curriculum.</u>		
4.3	(i) Overview. The curriculum for all programs shall enable the student to develop the nursing knowledge, skills, and abilities necessary for the level, scope, and standards of competent nursing practice expected at the level of licensure or recognition. The program shall revise its curriculum to maintain a program	(i) <i>Overview.</i> The curriculum of the program shall enable the student to develop the nursing knowledge, skills, and abilities necessary for the level, scope, and standards of competent nursing practice expected at the level of licensure or recognition. The program shall revise its curriculum to maintain a program that reflects advances in health care and its	Change in language to include all Wyoming nursing education programs. Past rules were silent post-licensure programs.	

	reflecting advances in health care and its delivery.	delivery.		
4.4	(ii) Principles. The curriculum, as defined by nursing education, professional, and practice standards, shall include:	(ii) <i>Principles</i> . Based on nursing education, professional, and practice standards, the curriculum shall include:	Minor language change to mirror NCSBN Model Rules. Source ¹	
4.5	(A) A sound foundation in biological, physical, social, and behavioral sciences;		Reflects quality indicator identified in NCSBN Delphi study. Source ⁹	
4.6	(B) Integration of legal and ethical issues and professional responsibilities into didactic and clinical experiences;		Reflects quality indicator identified in NCSBN Delphi study. Source ⁹	
4.7	(C) Learning experiences that promote the development of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;	(A) Experiences that promote the development and subsequent demonstration of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;	Change in language to reflect the addition of post-licensure programs to this section, which may not include a clinical component.	
4.8	(D) Evidence-based learning experiences and methods of instruction, including distance education methods if used, consistent with the written curriculum plan;	(B) Evidence-based learning experiences and methods of instruction, including distance education methods if used, consistent with the written curriculum plan;	Unchanged from current rules.	
4.9		(D) Written statements of specific, measureable, theoretical, and clinical outcomes/competencies for each course; and	Removed - competency is prescriptive and not reflected in current NCSBN recommended language and recommendations.	

4.10	(E) Delivery of instruction consistent with the program curriculum plan, which enables students to meet the goals, competencies, and outcomes of the program; and	(E) Delivery of instruction consistent with the program curriculum plan, which enables students to meet the goals, competencies, and outcomes of the program.	Unchanged from current rules.	
4.11	(F) Instruction on the Wyoming Nurse Practice Act and Administrative Rules which shall include:		Knowledge of Wyoming laws and rules are intended to educate students and protect the public.	
4.12	(I) The mission and purpose of the Wyoming State Board of Nursing relative to licensure, discipline, practice, and nursing education program approval;			
4.13	(II) Nurse licensure process in Wyoming including eligibility, temporary permits, renewal, continued competency, and inactive status;			
4.14	(III) The purpose of the Nurse Licensure Compact (NLC) and requirements for a multi-state license;			
4.15	(IV) The scope of practice for nurses and Certified Nurse Aides in Wyoming; and			
4.16	(v) The process and potential reasons for disciplinary action.			
4.17	(iii) Prelicensure Curriculum. The curriculum of prelicensure programs shall include didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social, and economic backgrounds.	(C) Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social, and economic backgrounds;	Unchanged but relocated to specify requirements are specific to prelicensure programs.	

4.18	(iv) APRN Curriculum. The curriculum of the APRN nursing education program must prepare the graduate to practice in one of the four identified APRN roles, i.e., CRNA, CNM, CNS or CNP, and at least one of the six population foci, i.e., family/ individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/gender-related, or psychiatric /mental health. The APRN curriculum shall include:		Past rules were silent on APRN requirements. Source ³ (11.4.1. Required Criteria for APRN Education Programs).	
4.19	(A) Three separate graduate level courses (the APRN core) in:			
4.20	(I) Advanced physiology and pathophysiology, including general principles that apply across the lifespan;			
4.21	(II) Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and			
4.22	(III) Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.			
4.23	(B) Instruction in diagnosis and management of disorders across settings and body systems appropriate to the APRN focus; and			
4.24	(C) Instruction in the principles for clinical decision making in the identified role.			

4.25	(v) APRN programs preparing for two population foci or combined nurse practitioner/clinical nurse specialist shall include content and clinical experience in both functional roles and population foci.			
4.26	(vi) There shall be provisions for the recognition of prior learning and advanced placement in the curriculum for individuals who hold a graduate degree as an APRN and are seeking preparation in a different role or population focus. Post-masters nursing students shall complete the requirements of the APRN program through a formal graduate level certificate or degree in the desired role and population focus. Certificate students must meet the same APRN outcome competencies required of other students.			
4.27	(b) Clinical Learning Experiences.	(iii) Clinical Experience.	Language updated to fit definition.	
4.28	(i) Prelicensure.			
4.29	(A) The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.	(A) The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.	Unchanged from current rules.	
4.30	(B) Faculty supervised clinical practice shall include:	(C) Faculty supervised clinical practice shall include development of skills in direct patient care; making clinical judgments; care and management of both individuals and groups of patients across the lifespan; and delegation to, supervision of, and collaboration with as appropriate to level of	Change in format only to improve clarity.	
4.31	I Development of skills in direct patient care;			
4.32	II Making clinical judgments; and			
4.33	III Care and management of both individuals and groups of patients across the lifespan.			

4.34	IV Delegation to, supervision of, and collaboration with, as appropriate to level of education, other health care providers.	education, other health care providers.		
4.35	(C) Measurement of student competency shall focus on student demonstration of care management and decision-making skills when providing patient care in a variety of clinical settings with diverse patients.	(D) Measurement of students' competencies shall focus on the students' demonstration of care management and decision making skills when providing patient care in a variety of clinical settings with diverse patients.	Change in language to improve clarity. No change in meaning.	
4.36		(iv) <i>Faculty/Student Ratio.</i>	Removed - requirement is prescriptive and not reflected in current NCSBN recommended language and recommendations.	
4.37		(A) The program shall consider the following factors in determining the faculty/student ratio in clinical settings, including: clinical site, level of student, type of clinical experience, contractual agreement with the agency, program, and curricular objectives and the faculty's teaching experience.		
4.38	(D) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.		Language clarifies the need for faculty involvement in a clinical course. Source ^{3,9}	
4.39	(I) The student/faculty ratio shall not exceed eight (8) students to one (1) faculty member for clinical learning experiences involving direct patient care.	(B) Faculty/student ratio shall be a maximum of 1:8 for clinical experiences.	Language updated to reflect change in definition. Intent is unchanged.	
4.40	(II) When preceptors are used in a clinical setting, one (1) preceptor shall supervise a maximum of one (1) student. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.	(C) When preceptors are used in a clinical setting, the preceptor/student ratio shall be 1:1. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.	Language updated for clarity. Intent is unchanged.	

4.41	(ii) APRN. Each instructional track/major shall have a minimum of five hundred (500) supervised clinical hours or as required for national certification exam. The supervised experience shall relate directly to the role and population focus, including pharmacotherapeutic management of patients.		Past rules were silent on APRN requirements. Source ³ (11.4.1. Required Criteria for APRN Education Programs).	
4.42	(c) Administrator Responsibilities. The nurse administrator shall:	(b) <u>Administrator Responsibilities</u> . The nurse administrator shall:	Unchanged from current rules.	
4.43	(i) Have continuous, active, daily, and direct responsibility and authority at all locations for the nursing program;		Reflects the importance of the depth and scope of the program administrator's role. Source ⁵	
4.44	(ii) Oversee the daily governing organization, nursing education unit, and nursing program matters such as, but not limited to, personnel matters, student matters, curricular matters, and resource matters; and	(i) Be responsible for the administration, planning, implementation, evaluation, and improvement of the program; and	Updated to reflect language in NCSBN Model Rules. Source ³	
4.45	(iii) Have adequate time and resources on a daily basis at all locations to administer the nursing program.	(ii) Dedicate appropriate time and resources to meet the needs of the program and the students, which should result in reduced teaching responsibilities.		
4.46	(d) Administrator Qualifications. The administrator shall have the education and experience necessary to direct the program in preparing graduates for the safe practice of nursing. All program administrators shall:	(c) <u>Administrator Qualifications</u> . The administrator shall have education and experience necessary to direct the program preparing graduates for the safe practice of nursing.	Correction in language. Intent is unchanged.	
4.47	(i) Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN license;	(B) Hold an active, unencumbered Wyoming RN license;	Compact language added.	

4.48	(ii) Have at least five (5) years of experience practicing nursing; and	(C) Have at least five (5) years of experience practicing nursing; and	Unchanged from current rules.	
4.49	(iii) Have experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.	(D) Experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.	Correction in language. Intent is unchanged.	
4.50	(iv) The associate degree and/or practical nursing program administrator shall have a minimum of a master's degree in nursing.	(i) In associate degree and/or practical nursing programs, the administrator shall: (A) Have a minimum of a master's degree in nursing;	Unchanged from current rules.	
4.51	(v) The baccalaureate nursing program administrator shall have a doctoral degree in nursing or related field.	(ii) In baccalaureate nursing programs, the administrator shall meet the qualifications in Section 4(c)(i) and have a doctoral degree in nursing or related field.	Unchanged from current rules.	
4.52	(vi) The post-licensure nursing program administrator shall have a doctoral degree in nursing or related field.		Past rules were silent on post-licensure requirements. Source ³ 6.1.2 (2)(b)	
4.53	(vii) The APRN program administrator may have responsibility for the oversight of multiple program tracks. This administrator shall:		Past rules were silent on post-licensure requirements. Source ³ (11.4.1. Required Criteria for APRN Education Programs).	
4.54	(A) Have a doctoral degree in nursing or related field; and			
4.55	(B) Hold current national certification as an APRN.			
4.56	(viii) The APRN program shall also appoint a lead faculty member for each track to coordinate the educational component specific to that track, including curriculum development.			

	This lead faculty member shall:			
4.57	(A) Meet APRN faculty qualifications defined in Section 4, (f) and (j); and			
4.58	(B) Hold current national certification in the same role and population focus.			
4.59	(e) Programmatic Faculty Standards. All programs shall:	(d) <u>Faculty and Preceptors.</u> (i) <i>Principles.</i>	Preceptor information moved to separate section to clarify requirements.	
4.60	(i) Employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program;	(A) The program shall employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program. A minimum of 50% of the part-time faculty shall also hold a graduate degree with a major in nursing.	Faculty qualifications moved to a separate section to clarify requirements.	
4.61	(ii) Develop clear workload policies comparable to those of an approved program of equivalent size and type;		NCSBN Evidence-based warning sign includes unclear workload policies. Source ⁹	
4.62	(iii) Provide substantive, periodic workshops or presentations devoted to faculty development;		NCSBN Evidence-based quality indicator. Source ⁹	
4.63	(iv) Provide formal mentoring by established peers for new full-time and part-time faculty; and			
4.64	(v) Provide formal orientation for new adjunct faculty.			
4.65	(f) Faculty Standards. All faculty shall:	(ii) <i>Faculty Qualifications.</i> Nursing faculty shall hold an active, unencumbered Wyoming RN license and be experientially qualified. Faculty shall also meet the	Compact language added.	
4.66	(i) Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN			

	license;	following educational requirements:		
4.67	(ii) Demonstrate pedagogical competence by:	(d)(ii) ...Faculty shall also meet the following educational requirements:	Simplifies language and clarifies meaning by combining requirements for all faculty and moving information on pedagogic preparation. NCSBN Evidence-based quality indicator. Source ⁹	
4.68	(A) A graduate degree in nursing education; or	(A) Full-time faculty: (I) Graduate degree in nursing education; (II) Graduate degree in nursing and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date; or		
4.69	(B) A minimum of ten (10) hours of educational preparation obtained within six (6) months of the hire date which shall include:	(III) Obtain a graduate degree in nursing within five (5) years of hire date and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date. The administrator shall immediately notify the Board in writing of the hire of the non- graduate prepared faculty member along with a plan for compliance with the requirements.		
4.70	(I) Methods of instruction including the use of technology;			
4.71	(II) Teaching in clinical practice settings;			
4.72	(III) Teaching in simulation settings;			
4.73	(IV) How to conduct assessments, including test item writing; and			
4.74	(V) Management of the educational environment such as legal and ethical issues, diversity, and incivility.			
4.75	(g) Prelicensure Faculty. Full and part-time prelicensure faculty shall meet the following educational requirements:		Clarifies differences between prelicensure and post-licensure faculty.	
4.76	(i) Graduate degree in nursing; or	(A) Full-time faculty: (I) Graduate degree in nursing education;	NCSBN Evidence-based quality indicator recommends graduate degree for all faculty. ⁹ Allowing faculty to obtain this degree while	
4.77	(ii) Obtain a graduate degree in nursing within five (5) years of hire date. The administrator shall:	(II) Graduate degree in nursing and successfully complete at least ten (10) clock hours of educational preparation in		

4.78	(A) Notify the Board, in writing, within thirty (30) days of the hire of a non-graduate prepared faculty member; and	principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date; or	working in a teaching role is a compromise for rural areas.	
4.79	(B) Submit a written plan, within six (6) months of the date of hire, outlining how this faculty member will obtain a graduate degree within the specified timeframe.	<p>(III) Obtain a graduate degree in nursing within five (5) years of hire date and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date.</p> <p>The administrator shall immediately notify the Board in writing of the hire of the non-graduate prepared faculty member along with a plan for compliance with the requirements.</p> <p>(B) Part-time faculty:</p> <p>(I) Minimum of a baccalaureate degree with a major in nursing; and</p> <p>(II) Successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date.</p>		
4.80	(iii) Adjunct or part-time clinical faculty shall be educationally prepared with a minimum of a baccalaureate degree in nursing.			
4.81	(iv) A minimum of fifty percent (50%) of the full-time faculty shall hold a graduate degree with a major in nursing.	(A) A minimum of 50% of the part-time faculty shall also hold a graduate degree with a major in nursing.	Moved information for clarity. Requirement extended to only full-time. NCSBN Evidence-based quality indicator recommends 100% of faculty hold a graduate degree in nursing. ⁹ The 50% requirement is a	

			compromise for rural areas.	
4.82	(h) Post-Licensure Faculty. Faculty teaching in a post-licensure program shall be educationally prepared with a graduate degree in nursing.		Past rules were silent on requirements for post-licensure faculty.	
4.83	(j) APRN Faculty. Faculty teaching in an APRN program shall:		Past rules were silent on requirements for APRN faculty. Source ³ (11.4.1. Required Criteria for APRN Education Programs).	
4.84	(i) Be educationally prepared with a graduate degree in nursing; and			
4.85	(ii) Demonstrate at least two (2) years of APRN clinical experience;			
4.86	(k) Interprofessional Faculty. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.		Past rules were silent on requirements for interprofessional faculty members such as pharmacists teaching pharmacology courses.	
4.87	(l) Preceptors.		Moved to clarify requirement differences between faculty and preceptors.	
4.88	(i) Preceptors may be used to enhance faculty-directed clinical learning experiences.	(c) (B) Preceptors may be used to enhance faculty-directed clinical learning experiences. Criteria for selecting preceptors shall be in writing.	Simplified language. No change to intent.	
4.89	(ii) Programs shall clearly define the role and performance expectations for preceptors with respect to teaching, supervision, and student evaluation.		Clarify the role of the preceptor based on accreditation standards. Source ¹⁰	
4.90	(iii) Preceptors shall:	(iii) <i>Preceptors Qualifications</i> . Preceptors shall:		

4.91	(A) Hold a current unencumbered license as an RN or APRN or unencumbered privilege to practice in the jurisdiction where the clinical practicum is conducted; and	(A) Hold an active, unencumbered nursing license in the jurisdiction where the clinical experience occurs; and	NCSBN model language that is supportive of licensing providers based on the location of the patient. ³ This statement also recognizes preceptors may not always be nurses.	
4.92	(B) Demonstrate competency related to the area of assigned clinical teaching responsibilities.	(B) Demonstrate competencies related to the area of assigned clinical teaching responsibilities and will serve as role models and educators for students.	Simplified language of current requirement. No change to intent.	
4.93	(m) Students.	(d) <u>Students</u> .	Unchanged from current rules.	
4.94	(i) The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences.	(i) The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences.	Simplified language of current requirement. No change to intent.	
4.95	(ii) The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study.	(ii) The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study. All policies relevant to applicants and students shall be readily available in writing.	Change in format to clarify meaning. Intent is unchanged.	
4.96	(iii) All policies relevant to applicants and students shall be readily available in writing.			
4.97		(iii) Students shall meet health standards and criminal background check requirements established by the program.	Removed. This is a programmatic responsibility.	
4.98	(n) Program Evaluation.	(h) <u>Program Evaluation</u> .	Unchanged from current rules.	
4.99	(i) The program shall implement a self-evaluation plan which is updated at least yearly and shall be submitted to the Board upon request.	(i) <i>Overview</i> . The program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.	Added self-evaluation plan to definitions to remove redundant language. Criteria	

			provided to guide minimum expectations for updating plan and submission.		
4.100	(ii) The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.		Clarifies process of collaborative model for program review and decreases burden on programs. Source ¹¹		
4.101	(A) If the evaluation report to the national nursing education accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the standards pursuant to this chapter are found in the report.				
4.102		(ii) <i>Principles.</i> The program evaluation shall include the methodology, frequency, assignment of responsibility, and evaluative criteria in the following areas:	Requirements are redundant to the accreditation process.		
4.103		(A) Protection of patient safety. Including, but not limited to: tracking of medication errors, unusual/sentinel events, or training in QSEN competencies;			
4.104		(B) Student retention, attrition, and on-time program completion rates;			
4.105		(C) NCLEX pass rates which are at least 75% for one year for graduates taking the examination for the first time for pre-licensure programs;		Requirements for NCLEX scores has been moved to Section 9.	
4.106		(D) Trend data/action related to NCLEX performance or certification exam;			
4.107		(E) Assessment of faculty performance;			

4.108		(F) Trend data/action planning related to employer and graduate satisfaction;	Requirements are redundant to the accreditation process.	
4.109		(G) Program complaints/grievance review and resolution; and		
4.110		(H) Program improvement initiatives related to program outcomes.		
BOX 5				
5.1	Section 5. Standards for Simulation in Prelicensure Programs.		Past rules have been silent on requirements for simulation.	
5.2	(a) A prelicensure nursing education program may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours per course. A program that uses simulation shall adhere to the standards set in this section.		Evidence-based quality indicators. Source ⁹	
5.3	(b) Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation.		Reflects current NCSBN model rule language and recommendations for simulation. Source ³	
5.4	(c) The program shall have appropriate facilities for conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation.			
5.5	(d) Faculty involved in simulation shall have training in the use of simulation.			
5.6	(e) The program shall have written policies and procedures on the following:			

5.7	(i) Method of debriefing each simulated activity; and			
5.8	(ii) Plan for orienting faculty to simulation.			
5.9	(f) The program shall develop criteria to evaluate the simulation activities, including student evaluation of simulation experience.			
BOX 6				
6.1	Section 6. Home State/Jurisdiction Nursing Education Programs.		Past rules were silent on definition and requirements for in-state programs, including post-licensure.	
6.2	(a) Any program with legal domicile within Wyoming shall obtain and maintain Board approval for any prelicensure or post-licensure program as pursuant to Sections 8 through 13 of this chapter.			
BOX 7				
7.1	Section 7. Host State/Jurisdiction Nursing Education Programs.		Rules are updated to reflect increase in distance-based education programs in WY.	
7.2	(a) When acting as the host state (i.e., the parent institution has legal domicile outside of Wyoming), all programs shall document current registration with the Wyoming Department of Education or National Council for State Authorization Reciprocity Agreement (SARA) approval.	Sect 12 (b)(ii)	Parent institution's current registration with the Wyoming Department of Education or be designated as a participating institution by the National Council for State Authorization Reciprocity Agreements (SARA);	Section relocated – minor change to language that does not impact intent.
7.3	(b) Prelicensure.			Careful oversight assures prelicensure programs meet WY standards.
7.4	(i) Programs seeking to operate a prelicensure program in Wyoming shall meet the same standards required of home state/jurisdiction			

	nursing education programs. Programs shall:			
7.5	(A) Obtain and maintain Board approval;			
7.6	(B) Maintain general, programmatic, and reporting standards for prelicensure nursing education programs as defined in Sections 3, 4, and 9; and			
7.7	(C) Instruct students to use the NCLEX program code corresponding to a Wyoming Board approved program.			
7.8	(ii) Prelicensure programs seeking permission to either use a Wyoming clinical facility for a portion of a class or to place an individual student for a precepted experience shall submit the following:		NCSBN recommends when possible, prelicensure programs can receive oversight by the state that approves the program. Source ¹²	
7.9	(A) Description of the planned educational experience;			
7.10	(B) Rationale for the use of Wyoming facilities;			
7.11	(C) Documentation of home/state jurisdiction program approval; and			
7.12	(D) Documentation of faculty / preceptor licensure.			
7.13	(I) Faculty who teach only didactic content or supervise a student/preceptor pair, where direct patient care is not provided, shall be licensed in the home state.		NCSBN supports the home state responsibility in licensing didactic faculty while recognizing practice	

7.14	(II) Preceptors and faculty providing patient care in Wyoming shall have an active, unencumbered Wyoming, or multi-state RN or APRN license.		takes place where the patient is located. Source ¹²	
7.15	(c) Post-Licensure. Post-licensure programs are not required to have Board approval but shall:		Notification of this basic program/student information assures WSBN is notified of students providing care in WY facilities.	
7.16	(i) Notify the Board in writing when a student will be completing a clinical learning experience in Wyoming.			
7.17	(ii) Execute a written contract with the cooperating clinical facility as defined in Section 3, (d) and (e).			
7.18		Section 12. <u>Out-of State Program(s)/Course(s) Including Distance Education.</u>	Section removed and re-written to standardize requirements that now include post-licensure programs.	
7.19		(a) <u>Pre-Licensure Out-of-State Program Approval.</u> An out-of-state program seeking to provide students with pre-licensure clinical learning experiences in Wyoming shall obtain Board approval.		
7.20		(i) The Board may accept an out-of-state programs that has been approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located. Such approval shall meet or exceed approval requirements established in this chapter.		
7.21		(ii) If an out-of-state program is not approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located, the program shall apply for Board approval.		
7.22		(b) <u>Out-of-State Course Approval.</u>		
7.23		(i) <i>Timeline.</i> At least two (2) months prior to the start date of the clinical course, an out-of-state program shall submit a completed course approval application.		

7.24		(ii) <i>Application Requirements.</i> The applicant shall provide:		
7.25		(A) Parent institution’s current registration with the Wyoming Department of Education or be designated as a participating institution by the National Council for State Authorization Reciprocity Agreements (SARA);		
7.26		(B) Proof of parent institution’s accreditation by an accrediting body recognized by the United States Secretary of Education for pre-licensure programs;		
7.27		(C) Proof of faculty and preceptors qualifications identified in Section 4; and		
7.28		(D) Course and student information.		
7.29		(iii) <i>Reporting Obligations.</i> Programs with approval clinical placements in Wyoming shall be required to complete an abbreviated annual education report.		
BOX 8				
8.1	Section 8. Process for Approval of New Programs.	Section 5 <u>Process for Approval of New Programs</u>	Unchanged from current rules.	
8.2	(a) Step 1 – Submit new program proposal	(a) <u>Step 1 – Submit new program proposal</u>		
8.3	(i) <i>Timeframe.</i> At least nine (9) months prior to admitting students, the parent institution shall submit to the Board a statement of intent to establish a program and a proposal.	(i) <i>Timeframe.</i> At least fifteen (15) months prior to admitting students, the parent institution shall submit to the Board a statement of intent to establish a program and a proposal.	Timeline updated to allow new programs to complete the approval process within a 9 month period.	
8.4	(ii) <i>Statement of Intent.</i> The statement of intent shall address:	(ii) <i>Statement of Intent.</i> The statement of intent shall address:	Unchanged from current rules.	

8.5	(A) Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;	(A) Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;	Unchanged from current rules.	
8.6	(B) Employment opportunities for program graduates within the geographic region(s) of the proposed program; and	(B) Employment opportunities for program graduates; and	Minor change in language to clarify requirement. No change to intent.	
8.7	(C) Potential impact on other established programs in Wyoming which shall include:	(C) Potential effects on other programs in Wyoming.	Clarifications of requirements to assure all programs are reviewed using similar criteria.	
8.8	(I) An analysis of the current usage of potential clinical site(s) in the area; and			
8.9	(II) A projection of how the addition of the program will impact use of clinical site(s) by established programs.			
8.10	(iii) Proposal. The proposal shall address how the program would comply with the standards of nursing education defined in this Chapter. At a minimum, the proposal shall include:	(iii) <i>Proposal</i> . The proposal shall address how the program will comply with the standards of nursing education identified in Section 3. At a minimum, the proposal shall include:	Minor change to language that does not impact intent.	
8.11	(A) Purpose, mission, and level of the proposed program;	(A) Purpose, mission, and level of the proposed program;	Unchanged from current rules.	
8.12	(B) Evidence of parent institution and other pertinent governing bodies approval and support;	(B) Evidence of parent institution and other pertinent governing bodies approval and support;	Unchanged from current rules.	
8.13	(C) Accreditation status of the parent institution;	(C) Accreditation status of the parent institution;	Unchanged from current rules.	

8.14	(D) Selection of a national nursing accreditation agency recognized by the Board;		Accreditation is a required element for all programs. Establishment of which agency is an important component of programmatic development.	
8.15	(E) Organizational structure of the educational institution documenting the relationship of the program within the parent institution;	(D) Organizational structure of the educational institution documenting the relationship of the program within the parent institution;	Unchanged from current rules.	
8.16	(F) Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;	(E) Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;	Unchanged from current rules.	
8.17	(G) Documentation of adequate academic facilities, including access to a library;	(F) Documentation of adequate academic facilities and staff to support the program;	Clarification of requirement. Source ⁹	
8.18	(H) Description of proposed instructional modalities and resources to support these modalities;		Each type of instructional modality (online, face-to-face, or simulation) has unique resource needs. Source ⁹	
8.19	(J) Source and description of adequate clinical resources for the level of program;	(G) Source and description of adequate clinical resources for the level of program;	Unchanged from current rules.	
8.20	(K) Availability of qualified administrator and faculty;	(H) Availability of qualified administrator and faculty;	Unchanged from current rules.	
8.21	(L) Evidence of community support demonstrated by letters of support from proposed clinical site(s) and community	(J) Evidence of community support;	Clarifies evidence required to demonstrate community support.	

	leaders;			
8.22	(M) Anticipated student population and enrollment;	(K) Anticipated student population; and	Past rules did not collect data on anticipated student numbers.	
8.23	(N) Proposed time line for planning and initiating the program; and	(L) Proposed time line for planning and initiating the program; and	Unchanged from current rules.	
8.24	(O) If the parent organization operates program(s) in another jurisdiction(s) the applicant shall submit:		A program that currently operates in other jurisdictions and is not meeting the quality indicators identified here or with these warning signs is at risk for student and programmatic failure. Source ⁹	
8.25	(I) NCLEX or certifying exam results for the past three (3) years for graduates taking the examination for the first time;			
8.26	(II) The most recent program accreditation report;			
8.27	(III) Documentation of full approval by a nursing or educational regulatory agency that provides oversight of the program, such as a board of nursing from the home state/jurisdiction; and			
8.28	(IV) Documentation of any complaints or grievances from students, clinical facilities, or the public within the past three (3) years and evidence of resolution.			
8.29	(iv) The applicant shall respond to any Board requests for additional information.		Clarifies program responsibilities to demonstrate compliance with required criteria.	

8.30	(v) New program application shall not be considered for prelicensure programs operating in Wyoming or any other jurisdiction(s) that cannot demonstrate a three (3) year average NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time.		NCLEX scores are a lagging or late indicator of program quality. Source ^{7,9}	
8.31	(vi) Board Action. After reviewing the initial proposal, the Board may grant or deny permission to submit an application for developmental approval.	(iv) <i>Board Action.</i> After review of the initial proposal, the Board may grant or deny permission to proceed to submit an application for provisional approval.	Minor change to language that does not impact intent.	
8.32		(b) <u>Step 2 – Preparation for Submission of the Application for Provisional Approval.</u>	Step removed for clarity	
8.33		(i) <i>Timeline.</i> Between fifteen (15) and twelve (12) months prior to admitting students, the parent institution shall prepare for submission of the application for provisional approval.		
8.34	(c) Step 2 – Submit Request for Developmental Approval.	(c) <u>Step 3 – Submit Application for Provisional Approval.</u>	Minor language change that better describes the process with no change in intent.	
8.35	(i) Timeline. At least six (6) months prior to admitting students, the parent institution shall submit a request for developmental approval.	(i) <i>Timeline.</i> At least twelve (12) months prior to admitting students, the parent institution shall submit a provisional application which demonstrates that the requirements in subsection (b) are met.	Timeline updated to allow new programs to complete the approval process within a 9-month period.	

8.36	(ii) Request for Developmental Approval. The request for developmental approval shall include verification the following program components and processes have been addressed:	(ii) <i>Preparation</i> . The parent institution shall:	With removal or the <i>Preparation of Submission</i> step this clarifies the requirements.	
8.37	(A) Appoint/hire an administrator pursuant to Section 4 and notify the Board of that appointment;	(A) Appoint/hire an administrator;	Allows the WSBN to provide feedback on qualification of administrator.	
8.38	(B) Provide evidence the nursing program is actively seeking accreditation from a national nursing accreditation agency recognized by the Board;		Accreditation is now a required element for all programs.	
8.39	(C) Develop a written, proposed program plan in accordance with the standards defined in Sections 3 and 4. In addition, the proposed program plan shall include:	(B) Develop a written proposed program plan in accordance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. In addition, the proposed program plan shall include:	Simplified the language. Intent is unchanged.	
8.40	(I) Program content;	(I) Program content;	Unchanged from current rules.	
8.41	(II) Schedule (course sequence);	(II) Schedule (course sequence);		
8.42	(III) Course descriptions;	(III) Course descriptions;		
8.43	(IV) Contracts for clinical sites;	(IV) Contracts for clinical sites;		
8.44	(V) Development of a self-evaluation plan as defined in Section 2 (w);	(V) Self-study evaluation; and		Minor change to language that does not impact intent.
8.45	(VI) Course syllabi; and	(VI) Course syllabi.	Unchanged	
8.46	(VII) Identification of faculty needed, including number and experiential qualifications.		Adequate number of qualified faculty is a quality measure. Source ⁹	

8.47	(D) Establish student policies for admission, progression, retention, remediation and graduation; and	(C) Establish student policies for admission, progression, retention, and graduation; and	Remediation added – this is an indicator of program quality. Source ⁷	
8.48	(E) Request the Board conduct a site visit.	(D) Request that the Board conduct a site-visit.	Minor change to language that does not impact intent.	
8.49	(iii) Site Visit. A representative of the Board shall complete an on-site survey of the proposed program, pursuant to Section 11.		Defines the timing of the site-visit and supports a collaborative model for approval in conjunction with the accrediting agency. Source ⁷	
8.50	(iv) Committee Review. In determining whether to recommend approve of the application the Committee shall consider all evidence, including, but not limited to:		Clarifies what documents and information may be included in the program review.	
8.51	(A) The proposed program plan;			
8.52	(B) The survey report;			
8.53	(C) Comments from the petitioning institution;			
8.54	(D) Public comments; and			
8.55	(E) The status of other nursing programs operated by the parent institution.			
8.56	(v) The Committee may recommend the Board grant or deny developmental approval. If the Committee recommends denial, the parent institution may request in writing, a hearing within one hundred eighty (180) days.	(i) <i>Committee Review.</i> After reviewing the application for provisional approval, the Committee may recommend that the Board grant or deny provisional approval. If the Committee recommends denial, the parent institution may request in writing a hearing within 180 days.	Minor change to language that does not impact intent.	

8.57	(vi) Board Action. After review, the Board may grant or deny developmental approval. Developmental approval shall remain valid until the Board reviews the program following graduation of the first class and submission of the results of NCLEX or applicable certification exam.	(ii) <i>Board Action.</i> After review of the application for provisional approval, the Board may grant or deny provisional approval. Provisional approval shall be valid for twenty-four (24) months following graduation of the first cohort.	Decreasing time allowed for provisional approval assures timely review of a program with poor results on NCLEX for first graduating class.	
8.58	(d) Step 3 – Preparation for Admission of Students.	(d) <u>Step 4 – Preparation for Admission of Students.</u>	Unchanged from current rules.	
8.59	(i) Timeline. At least three (3) months prior to admitting students, the parent institution shall prepare for the admission of students.	(i) <i>Timeline.</i> Between twelve (12) months and six (6) months prior to admitting students, the parent institution shall prepare for the admission of students.	Timeline updated to allow new programs to complete the approval process within a 9 month period.	
8.60	(ii) Preparation. The parent institution shall notify the Board when the following conditions have been met:		Clarification of steps that must be taken before students are admitted.	
8.61	(A) There are sufficient qualified nurse educators pursuant to Section 4 and the Board has been notified of those appointments;	(ii) <i>Preparation.</i> The parent institution shall hire sufficient faculty and notify the Committee of those appointments.	Change in language for clarity. No change in intent.	
8.62	(B) Readiness for clinical instruction meeting the rules pursuant to Section 4 (b) including;		Provides an objective measurement of readiness to admit students.	
8.63	(I) Signed clinical contracts with adequate clinical placement for the maximum number of students enrolled at one time; and			
8.64	(II) Clinical facilities and equipment for practice of skills and simulation.			

8.65	(C) There is evidence of academic and student services that will allow the program to meet planned objectives and the needs of students;			
8.66	(D) The parent institution has received approval to operate a nursing education program by an accrediting body recognized by the United States Department of Education; and			
8.67	(E) There is at least one (1) signed agreement for the articulation of undergraduate students to proceed to the next level of nursing education. The program(s) selected for the agreement shall:		Articulation agreements promote mobility and facilitate seamless transfer for students. At least 32 states have broad articulation agreements. ¹³	
8.68	(I) Meet the requirements for accreditation approval pursuant to Section 3 (b); and			
8.69	(II) Allow the student to complete their education while retaining Wyoming residency.			
8.70	(F) There is evidence of readiness for admission of students.		Allows for additional areas of concern to be addressed.	
8.71	(iii) Site Visit. The Board may request an on-site survey of the proposed program.		An additional site visit may be necessary to assure the program meets the rules outlined in this chapter.	
8.72	(iv) Board Review. After verifying all components and processes are complete and in place, the Board shall notify the program it	(vii) <i>Committee Review.</i> After verifying all components and processes are complete and in place, the Committee shall notify the program	Update in language for clarity. No change in intent.	

	may admit students.	that it may admit students.		
8.73	(e) Step 4 – Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.	(e) <u>Step 5 – Program Reporting Obligations Following Admission of Students.</u> After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.	Unchanged from current rules.	
8.74	(f) Step 5 – Submit Request for Initial Full Approval.	(f) <u>Step 6 – Submit Application for Initial Full Approval.</u>	Update in language for clarity. No change in intent.	
8.75	(i) Timeline. Within six (6) months after graduation of the first cohort, the program shall submit a request for initial full approval.	(i) <i>Timeline.</i> Within eighteen (18) months after graduation of the first cohort, the program shall submit an application for initial full approval which includes a self-study evaluation and participate in a site-visit to be conducted by the Board.	Update in language to support a collaborative model for approval in conjunction with the accrediting agency. ⁷ Timeline changed to better reflect current process and encourage programs who meet requirements to apply for full approval.	
8.76	(ii) Self-Evaluation Plan. The program shall develop and submit an updated self-evaluation plan.		Allows programs to submit updated plan that accounts for needed changes based on student outcome and NCLEX results.	
8.77	(iii) Site Visit. A representative of the Board shall conduct an on-site survey of the program.		Further defines the process of the site-visit and supports a collaborative model for approval in conjunction	

			with the accrediting agency. Source ⁷	
8.78	(iv) Committee Review. The Committee shall consider all evidence, including the self-evaluation plan, the survey report, comments from the petitioning institution, and public comments in considering the request for full approval. The Committee may recommend the Board grant or deny approval. If the Committee recommends denial, the parent institution may request in writing a hearing within 180 days.	(ii) <i>Committee Review.</i> After reviewing the application for initial full approval, the Committee may recommend that the Board grant or deny initial full approval. If the Committee recommends denial, the program may request in writing a hearing within 180 days.	Update in language, clarifies all potential sources of information.	
8.79	(v) Board Action. After review of the request for initial full approval, the Board may grant or deny initial full approval.	(iii) <i>Board Action.</i> After review of the application for initial full approval, the Board may grant or deny initial full approval.	Unchanged from current rules.	
BOX 9				
9.1	Section 9. Reports and Notification.			
9.2	(a) NCLEX Results. All prelicensure programs operating in Wyoming shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.		Reflects quality indicator identified in NCSBN Delphi study. Source ⁹ Brings NCLEX score expectations into alliance with those of CCNE / ACEN	
9.3	(i) LPN and RN pass rates shall be evaluated separately.		Assure equal representation of information for all program types.	

9.4	(ii) Within three (3) months of receiving NCLEX results below the eighty percent (80%) requirement, the program shall submit a plan to the Board for assessment and improvement including expected outcomes and timelines.		Provides reporting requirements for programs not meeting the quality benchmarks and possible action on program approval.	
9.5	(iii) The Board may initiate a complaint as pursuant to Section 13 for programs with NCLEX rates that remain below eighty percent (80%) for a period of two (2) years.			
9.6	(b) Annual Report. All programs operating in Wyoming, excluding those with provisional approval, shall submit an annual report with the date and format specified by the Board.	<p>Section 7. Annual Report. All programs, excluding those with provisional approval, shall submit an annual report on or before October 31 to the Board. The annual report shall include:</p> <ul style="list-style-type: none"> (a) Program compliance report; (b) Projected program changes; (c) Faculty data forms; and (d) Current college catalog. 	Simplify program reporting requirements.	
9.7	(c) The program shall submit a copy of any accreditation related correspondence with the national nursing accrediting agency to the Board within Thirty (30) days of receipt.		NCSBN Model Rules. ³	
9.8	(d) Unplanned Program Changes. The program shall notify the Board in writing within thirty (30) days of significant, unplanned program changes including, but not limited to:		Clarifies reporting requirements.	
9.9	(i) Change in accreditation status;			
9.10	(ii) Change in the nurse administrator of the program;			

9.11	(iii) Appointment of new faculty members; or			
9.12	(iv) Any unanticipated, substantive change reported to the nursing accrediting agency.			
9.13	(e) Planned Program Changes. The program shall notify the Board of any planned, substantive change in curriculum or program. This notice shall occur in writing, at least two (2) months prior to planned implementation.			
BOX 10				
10.1	Section 10. Process for Continuing Full Approval.	Section 6. <u>Process for Continuing Full Approval.</u>	Unchanged from current rules.	
10.2	(a) Timeline. Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the requirements of this chapter.	(a) <u>Evaluation of Program.</u> Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.	Update in language for clarity. No change in intent.	
10.3		(b) <u>Timeline.</u> (i) If the program is accredited by a national nursing accreditation agency, the evaluation process shall occur at least every ten (10) years. (ii) If the program is not accredited by a national nursing accreditation agency, the Board shall evaluate the program at least every five (5) years.	Removed. Accreditation is required for all programs.	
10.4	(b) Evaluation Process. The evaluation process shall include submission of a self-evaluation plan and may include a site visit by representative(s) of	(c) <u>Evaluation Process.</u>	Additional information required regarding the self-study evaluation to	

	the Board and a request for public comment. This evaluation may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending accreditation review.	(i) <i>Nationally Accredited Programs.</i> If the program is accredited by a national nursing accreditation agency, the evaluation process may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending review. The Board may accept the self-study evaluation submitted to the accrediting body. The program shall submit the results of accrediting body survey to the Board.	support a collaborative model for review. Source ⁷	
10.5		(ii) <i>Non-Nationally Accredited Programs.</i> If the program is not accredited by a national nursing accreditation agency, the Board shall review and analyze various sources of information regarding program performance including, but not limited to: (A) Review of annual reports since the last evaluation; (B) Self-study evaluation; and (C) Site-visit.	Removed. Accreditation is required for all programs.	
10.6	(c) Self-Evaluation Plan. The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.		Clarifies process of collaborative model for review. Source ⁹	
10.7	(i) If the report to the accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the requirements of this chapter are found in the report.			
10.8	(d) Determination of Approval Status.			

10.9	(i) Committee Review. The Committee shall review and analyze various sources of evidence regarding program performance, including, but not limited to:		Prior rules were silent on the evaluation of documentation used for approval review.	
10.10	(A) Periodic Board survey visits and/or reports;			
10.11	(B) Annual report data;			
10.12	(C) National nursing accreditation survey report and accreditation-related correspondence; and			
10.13	(D) The report of ongoing self-evaluation.			
10.14	(ii) Committee Action. After reviewing the evaluation documentation, the Committee may recommend the Board grant or deny continuing approval.			
10.15	(iii) Board Action. After review of the Committee recommendation, the Board may grant or deny continued full approval.			
10.16	(A) If the Board recommends denial, a formal complaint will be initiated pursuant to Section 13.			
BOX 11				
11.1	Section 11. Site Visit Conducted by the Board.	Section 8. <u>Site Visit Conducted by the Board.</u>	Unchanged from current rules.	
11.2	(a) Pre-Site Visit Process.	(a) <u>Pre-Site Visit Process.</u>		

11.3	(i) Any site visit shall be scheduled at least three (3) months in advance on a mutually acceptable date. The visit may be scheduled in conjunction with the national nursing accreditation body survey visit.	(i) Any site visit shall be scheduled at least three (3) months in advance on a mutually acceptable date. The visit may be scheduled in conjunction with the national nursing accreditation body survey visit.	Clarifies process of collaborative model for review. Source ⁹	
11.4	(ii) Thirty (30) days prior to the scheduled site visit, the program shall submit the self-evaluation or plan of correction to the Board.	(ii) Thirty (30) days prior to the scheduled site visit, the program shall submit the self-study evaluation or plan of correction to the Board.	Unchanged from current rules.	
11.5	(iii) The Board representative shall use a site visit template to assess program quality indicators and warning signs.		Use of a template will allow objective assessment of quality indicators and warning signs identified in the NCSBN Delphi study. Source ⁹	
11.6	(iv) The program shall be asked to participate in scheduling site visit activities.	(iv) The program shall schedule all site visit activities.	The Board shall retain control over what activities are scheduled.	
11.7	(b) Post Site Visit Report.	(b) <u>Post Site Visit Report.</u>	Unchanged from current rules.	
11.8	(i) Following a site visit, the Board shall provide a report of its findings to the program.	(i) Following a site visit, the Board shall provide a report of its findings to the program.		
11.9	(ii) The program may respond to the report with additional information within ninety (90) days.	(ii) The program may respond to the report with additional information within ninety (90) days.		
11.10		(iii) Following review of the program's response, the Board shall issue a final decision. Written notification of the final decision shall be sent to the parent institution and the administrator.	Removed. Board decision to approve or deny approval includes a review of multiple facets of the program.	

BOX 12				
12.1	Section 12. Periodic Evaluation.			
12.2	(a) Periodic Evaluation. Periodic evaluation and site visit may be initiated at any time. Warning signs that may trigger this review may include, but are not limited to:		Warning signs identified in NCSBN Delphi study may lead to program failure. Because NCLEX scores are identified as a lagging indicator, these other factors may lead to a program review. Source ⁹	
12.3	(i) Denial, withdrawal or change of program or institution accreditation status;			
12.4	(ii) Turnover of program administrators, defined by more than three (3) in a five (5) year period;			
12.5	(iii) Frequent nursing faculty turnover or cut in the number of nursing faculty;			
12.6	(iv) Failure to achieve NCLEX pass rate requirement defined in Section 9 (a) or decreasing trend in NCLEX pass rates;			
12.7	(v) Evidence of non-compliance with remediation plan by programs with deficiencies or violations;			
12.8	(vi) Significant complaint(s) or grievances from students, faculty, clinical facilities, or the public;			
12.9	(vii) Knowingly providing false or misleading information to students or the public concerning the nursing program; or			
12.10	(viii) The Board being in possession of information indicating the program may not be in compliance with the requirements of this chapter.			

BOX 13				
13.1	Section 13. Denying and Withdrawing Approval.	Section 9. <u>Denial or Withdrawal of Approval for Programs.</u>	Section updated by the Wyoming Attorney General's Office staff to better describe the process of denying and withdrawing program approval.	
13.2	(a) Complaint Review Process. Any person may submit a complaint to the Board that a nursing education program has failed to meet the requirements of this chapter.			
13.3	(i) The Board staff may initiate complaints on their own motion.			
13.4	(ii) Complaints must contain the name, address, and signature of the person making the complaint.			
13.5	(iii) The Board shall assign each complaint to the Committee for review and to make a recommendation.			
13.6	(iv) The Board shall notify the nursing education program of the complaint by mail.			
13.7	(b) Committee Review.			
13.8	(i) Upon receiving a complaint, the Committee shall review the complaint to determine if it merits investigation.			
13.9	(ii) The Committee may request additional information from the nursing education program or meet informally with the nursing education program.			
13.10	(c) Notice of Deficiency.	(b) <u>Notice of Deficiency(s).</u> The written notice shall: (i) Enumerate or identify the deficiency(s); and (ii) Based on the number and		

		severity of deficiency(s), establish a reasonable period of time to correct the deficiency(s), not to exceed (18) months.		
13.11	(i) If the Committee believes the complaint states a valid claim that a nursing education program has failed to meet the requirements of this chapter, the Committee shall send a notice of deficiency to the nursing education program's administrator identifying and briefly explaining the program's deficiency.	(a) <u>Noncompliance.</u> If the Committee finds that a program is not in compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4, the Committee shall provide written notice of deficiency(s) to the administrator of the parent institution and the administrator.		
13.12	(ii) The nursing education program shall have thirty (30) days to respond to a notice of deficiency with a written plan to correct the deficiency or explanation why there is no deficiency.	(c) <u>Program Response to Notice of Deficiency(s).</u> Within thirty (30) days from the date of mailing the notice of deficiency(s), the administrator shall: (i) Submit a plan of correction to the Committee for review; or (ii) Request a hearing before the Board.		
13.13	(d) Committee Recommendation and Notice of Intent.			
13.14	(i) After investigating the allegations in the complaint and receiving any response from the nursing education program, the Committee may recommend the Board:	(d) <u>Committee Review.</u> After reviewing the plan of correction, the Committee may:		
13.15	(A) Deny approval of a nursing education program;			
13.16	(B) Withdraw approval of a nursing education program; or	(iv) Recommend withdrawal of program approval.		
13.17	(C) Place conditions and restrictions on approval of a nursing education program	(i) Recommend withdrawal of program approval.		

	for failing to meet the requirements of this chapter.	(ii) Recommend that the Board conduct a site visit of the program;		
		(iii) Recommend conditional approval pending submission of a revised plan of correction; and/or		
13.18	(ii) If the Committee recommends the Board deny approval of a nursing education program, withdraw approval of a nursing education program, or place conditions and restrictions on approval of a nursing education program, the Committee shall notify the applicant of its recommendation.	(e) <u>Program's Request for Hearing.</u> If the Committee recommends withdrawal of program approval, the program may request in writing a hearing within 180 days.		
13.19	(iii) The Notice of Intent shall contain:			
13.20	(A) A brief description of the facts or conduct the Committee alleges warrant its recommendation;			
13.21	(B) Citations to the applicable sections of this chapter the Committee alleges the nursing education program violated;			
13.22	(C) Notice that the nursing education program may respond in writing to the allegations within thirty (30) days of the date the Committee mailed the Notice of Intent; and			
13.23	(D) Notice that an applicant may request a hearing before the Board if the nursing education program responds in writing within thirty (30) days of the date the Committee mailed the Notice of Intent.			
13.24	(e) Program's Response to Notice of Intent. The nursing education program shall have thirty (30) days from the date the Committee mailed the Notice of Intent to respond. The applicant may:			

13.25	(i)	Request the Board hold a hearing on the Committee's recommendation;		
13.26	(ii)	Request the Board table consideration of the application; or		
13.27	(iii)	Withdraw their application.		
13.28	(f)	Program's Failure to Respond to Notice of Intent. If a nursing education program fails to timely respond to the Notice of Intent, the Board may accept the Committee's recommendation.		
13.29	(g)	Notice of Hearing.		
13.30	(i)	Upon receipt of a written request for a hearing from a nursing education program, the Board shall conduct a hearing. Board staff shall serve a Notice of Hearing on the nursing education program at least thirty (30) days prior to the hearing.		
13.31	(ii)	The Notice of Hearing shall contain:		
13.32	(A)	A brief statement of the matters asserted, including the Committee's recommendation, the facts upon which the Committee's recommendation is based, and the sections of this chapter that the Committee alleges the nursing education program failed to meet;		
13.33	(B)	The time, place, and nature of the hearing;		
13.34	(C)	The legal authority and jurisdiction for the hearing; and		
13.35	(D)	The applicable burden and standard of proof.		

13.36	(h) Contested Case. A hearing officer shall preside over the formal contested case hearing and shall conduct the hearing according to the Wyoming Administrative Procedure Act and Chapter 2 of the Office of Administrative Hearings rules concerning contested proceedings as referenced in Chapter 1, Section 6.			
13.37	(j) Burden of Proof. The Committee shall bear the burden to prove by clear and convincing evidence the nursing education program failed to meet the requirements of this chapter.			
13.38	(k) Board Order.			
13.39	(i) The Board may resolve a complaint by denying approval of a nursing education program, withdrawing approval of a nursing education program, or imposing conditions on a nursing education program's approval.			
13.40	(ii) The Board shall issue a written order. The order shall be sent to the nursing education program by regular U.S. mail.	(i) Dismiss the written notice of deficiency(s);		
13.41		(ii) Order the program to submit a plan of correction, including reporting obligations;		
13.42		(iii) Conduct a site visit of the program;		
13.43		(iv) Approve the Committee's recommendation;		
13.44		(v) Withdraw full approval and order a plan of correction placing the program on conditional approval; and/or		
13.45		(vi) Withdraw approval of the program.		
13.46	(iii) No Board action shall be effective until the date the written order is approved by the Board and entered into the administrative record.			

13.47	(l) Dismissal or Default. If a nursing education program fails to appear at a noticed hearing, the Committee may request the Board enter default against the program.			
13.48	(i) In entering a default, the Board may:			
13.49	(A) Order the allegations in the Committee's recommendation to be taken as true for the purposes of the hearing; or			
13.50	(B) Order the nursing education program may not present evidence on specific issues in the case.			
13.51	(ii) The nursing education program may request the Board lift its entry of default. The Board may lift its entry of default if the program demonstrates good cause for failing to appear at the noticed hearing.			
13.52	(m) Lawful Service. There shall be a presumption of lawful service of any communication required by these rules if sent to the last known address of the nursing education program by regular U.S. mail.			
13.53	(n) Voluntary Surrender. A nursing education program may petition the Board in writing to voluntarily withdraw their program approval in Wyoming. The Board may accept the program's voluntary surrender at a public meeting.			
13.54	(o) Petition for Judicial Review. Petitions for judicial review from decisions or orders of the Board are governed by the Wyoming Administrative Procedure Act and the Wyoming Rules of Appellate Procedure.			
BOX 14				
14.1	Section 14. Reinstatement. A program may petition for reinstatement of approval by submitting evidence of compliance with the requirements of this chapter.	Section 10. <u>Reinstatement.</u> A program may petition for reinstatement of approval by submitting evidence of	Unchanged from current rules.	

		compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.		
BOX 15				
15.1	Section 15. Closure of Nursing Education Program.	<u>Section Closure of Nursing Education Program.</u>		
15.2		(a) <u>Voluntary Closing.</u>	Process for requesting a voluntary surrender is moved to Section 13.	
15.3		(i) When the parent institution decides to close a program, it shall notify the Board in writing stating the reason(s) for closure, the plan for discontinuation, and the intended date of closure.		
15.4	(a) When closing a program, the parent institution shall:	(ii) When closing a program, the parent institution shall:	Unchanged from current rules.	
15.5	(i) Continue the program until the last class enrolled is graduated; or	(A) Continue the program until the last class enrolled is graduated; or		
15.6	(ii) Assist in the transfer of students to other Board-approved programs; and	(B) Assist in the transfer of students to other Board-approved programs; and		
15.7	(iii) Advise the Board of the arrangements for secure storage and access to academic records and transcripts.	(c) <u>Storage of Records.</u> The Board shall be advised of the arrangements for storage of permanent records.	Updated to reflect language in NCSBN Model Rules. Source ³	
15.8	(b) The program shall meet the requirements of this chapter until the date of closure.	(iii) The program shall meet the standards of nursing education and the programmatic standards identified in Sections 3 and 4 until the date of closure.	Minor update in language for clarity. No change in intent.	
15.9	(c) The date of closure is the date on the degree, diploma, or certificate of the last graduate or the date on which the last student was transferred.	(ii) The date of closure is the date on which the last student was transferred.	Updated to reflect language in NCSBN Model Rules. Source ³	

15.10	(d) Closing as a Result of Withdrawal of Approval. Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program.	(b) <u>Closing as a Result of Withdrawal of Approval.</u> (i) Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program and transfer of students to other Board-approved programs.	Information on transfer of students moved to an earlier section as it is applicable to any program that is closing.	
BOX 16				
16.1	Section 16. Approval of Certification Courses.	Section 13. <u>Approval of Certification Courses.</u>		
16.2	(a) The Board shall establish standards and approve certification courses for:	(a) The Board shall establish standards and approve certification courses for CNA II, MA-C, and LPN IV.	Home Health Aide been added. Minor change in formatting with no change to intent.	
16.3	(i) CNA II;			
16.4	(ii) Home Health Aides;			
16.5	(iii) Medication Aide-Certified (MA-C); and			
16.6	(iv) LPN Intravenous (IV) Certification.			
16.7		(b) Board-approved courses shall be offered and administered by:	Removed. It is established in (a) the Board shall establish the standards and approve courses.	
16.8		(i) A program in a post-secondary institution of higher learning in Wyoming;		
16.9		(ii) Board-approved program;		
16.10		(iii) An approved provider of continuing education; or		
16.11		(iv) A licensed health care facility.		
16.12	(b) The Board shall review and approve nurse refresher courses.		Past rules were silent on approval of these courses.	

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CHAPTER 6

STANDARDS FOR NURSING EDUCATION PROGRAMS

Section 1. Statement of Purpose. These Board Rules are adopted to implement the Board's authority to:

- (a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;
- (b) Ensure graduates of programs are prepared for safe and effective nursing practice; and
- (c) Ensure candidates are educationally prepared for certification, licensure, and recognition.

Section 2. Definitions.

- (a) "Administrator" means the nurse educator who has administrative responsibility or authority for the direction of a program.
- (b) "Articulation Agreement" means an educational partnership between nursing education programs allowing students to receive credit for their prior degree.
- (c) "Clinical Learning Experience" means planned activities in nursing practice that prepare students to understand, perform, and refine professional competencies at the appropriate program level. These experiences include direct and indirect patient care, simulation, standardized patient experiences, or any nursing intervention that influences health care outcomes.
- (d) "Committee" means the Education Committee of the Wyoming State Board of Nursing.
- (e) "Cost" means those expenses the Board or investigating committee incurs in a hearing to deny, refuse to renew, reactivate, reinstate, revoke, restrict, place conditions upon, or suspend a license or program approval pursuant to Wyoming Statute §§ 33-21-138 through 144 and includes, but is not limited to hearing officer fees, service fees, subpoena fees, reporter fees, lay and expert witness and consultant fees, travel and per diem expenses, deposition costs and other costs and expenses incurred in the investigation, discovery, preparation, and hearing of any disciplinary matter.
- (f) "Debriefing" means an activity following an experiential learning experience. Activity is led by a facilitator, encourages participant's reflective thinking, and provides feedback regarding the participant's performance.
- (g) "Encumbered License" means a license with current discipline, condition, or restriction.

(h) “Faculty” means an educator employed, paid, or contracted by the program whether full-time, part-time, adjunct, or labeled as a substitute.

(j) “Home State/Jurisdiction” means the state/jurisdiction where the program has legal domicile.

(k) “Host State/Jurisdiction” means the state/jurisdiction outside of the home state/jurisdiction where students participate in didactic coursework and/or clinical experiences.

(l) “Methods of Delivery” means the methods used by faculty to facilitate and evaluate learning in compliance with approved statutes and regulations. Methods of delivery include:

(i) “Traditional Education” means student and instructor are physically in the same location at the same time (e.g., face-to-face). This method of delivery may be web-enhanced/supported.

(ii) “Distance Education” means student and instructor are not physically in the same location. Instruction uses synchronous or asynchronous technology to support regular and substantive interactions between the instructor and students. Instructional methods may include but are not limited to one-way or two-way transmissions, audio, video, the internet, or computer technologies.

(iii) “Hybrid Education” means instruction that uses both distance and traditional education methods of delivery.

(m) “Multi-State License” means a license to practice nursing issued by a home state licensing board authorizing the licensed nurse to practice in all party states under a privilege to practice.

(n) “NCLEX Pass Rate” means the percentage of a program’s student candidates who take the NCLEX (at the PN or RN levels) and pass on the first attempt.

(o) “Nurse Administrator” means the nurse with responsibility and authority for the administrative and instructional activities of a nursing education unit and nursing programs within the governing organization (e.g., dean, chairperson, director, etc.).

(p) “Parent Institution” means the organization or agency responsible for the administration and operation of the program.

(q) “Plan of Correction” means a written report in which a program details plans for compliance with relevant statutes and regulations.

(r) “Post-Licensure” means an educational program leading to degree completion of an undergraduate, graduate, or terminal degree in nursing once licensure as a registered nurse has been attained.

(s) “Preceptor” also known as partners in education, means a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.

(t) “Prelicensure” means initial educational program in nursing leading to entry-level licensure as a RN or LPN.

(u) “Program” means a nursing or nursing related health education program at any level.

(v) “Simulation” means a technique to replace or amplify real clinical experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.

(w) “Self-Evaluation Plan” means a comprehensive, written plan for initial and ongoing self-evaluation of program requirements and outcomes. This plan is based on the standards and rules identified in this chapter and the program’s identified accrediting body.

Section 3. General Standards for Nursing Education Programs. All nursing education programs operating in Wyoming shall meet these requirements.

(a) Purpose and outcomes are consistent with:

(i) The Wyoming Nurse Practice Act, Board Rules, and other state and federal laws; and

(ii) Accepted standards governing the practice of nursing appropriate for graduates of the type of program offered.

(b) Current accreditation, or approved to pursue accreditation, of:

(i) Parent institution by an accrediting body recognized by the United States Department of Education for postsecondary institutions; and

(ii) Program by a national nursing accreditation agency recognized by the Board.

(c) The parent institution or program shall notify the Board of any changes affecting their respective accreditation status within thirty (30) days.

(d) Prior to any clinical learning experiences, the parent institution shall execute a written contract with the cooperating clinical facility establishing and defining:

(i) The responsibilities of each party;

(ii) The period of the agreement; and

(iii) Conditions under which renewal, renegotiation, or termination could take place.

(e) The parent institution shall maintain a copy of each executed contract and provide it to the Board upon request.

Section 4. Programmatic Standards for Wyoming Nursing Education Programs.

(a) Curriculum.

(i) Overview. The curriculum for all programs shall enable the student to develop the nursing knowledge, skills, and abilities necessary for the level, scope, and standards of competent nursing practice expected at the level of licensure or recognition. The program shall revise its curriculum to maintain a program reflecting advances in health care and its delivery.

(ii) Principles. The curriculum, as defined by nursing education, professional, and practice standards, shall include:

(A) A sound foundation in biological, physical, social, and behavioral sciences;

(B) Integration of legal and ethical issues and professional responsibilities into didactic and clinical experiences;

(C) Learning experiences that promote the development of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;

(D) Evidence-based learning experiences and methods of instruction, including distance education methods if used, consistent with the written curriculum plan;

(E) Delivery of instruction consistent with the program curriculum plan, which enables students to meet the goals, competencies, and outcomes of the program; and

(F) Instruction on the Wyoming Nurse Practice Act and Administrative Rules which shall include:

(I) The mission and purpose of the Wyoming State Board of Nursing relative to licensure, discipline, practice, and nursing education program approval;

(II) Nurse licensure process in Wyoming including eligibility, temporary permits, renewal, continued competency, and inactive status;

(III) The purpose of the Nurse Licensure Compact (NLC) and requirements for a multi-state license;

(IV) The scope of practice for nurses and Certified Nurse Aides in Wyoming; and

(V) The process and potential reasons for disciplinary action.

(iii) Prelicensure Curriculum. The curriculum of prelicensure programs shall include didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social, and economic backgrounds.

(iv) APRN Curriculum. The curriculum of the APRN nursing education program must prepare the graduate to practice in one of the four identified APRN roles, i.e., CRNA, CNM, CNS, or CNP, and at least one of the six population foci, i.e., family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related, or psychiatric/mental health. The APRN curriculum shall include:

(A) Three separate graduate level courses (the APRN core) in:

(I) Advanced physiology and pathophysiology, including general principles that apply across the lifespan;

(II) Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and

(III) Advanced pharmacology which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.

(B) Instruction in diagnosis and management of disorders across settings and body systems appropriate to the APRN focus; and

(C) Instruction in the principles for clinical decision making in the identified role.

(v) APRN programs preparing for two population foci or combined nurse practitioner/clinical nurse specialist shall include content and clinical experience in both functional roles and population foci.

(vi) There shall be provisions for the recognition of prior learning and advanced placement in the curriculum for individuals who hold a graduate degree as an APRN and are seeking preparation in a different role or population focus. Post-masters nursing students shall complete the requirements of the APRN program through a formal graduate level certificate or degree in the desired role and population focus. Certificate students must meet the same APRN outcome competencies required of other students.

(b) Clinical Learning Experiences.

(i) Prelicensure.

(A) The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no

equivalent program, clinical hours scaled relative to an approved program.

(B) Faculty supervised clinical practice shall include:

- (I) Development of skills in direct patient care;
- (II) Making clinical judgments; and
- (III) Care and management of both individuals and groups of patients across the lifespan; and
- (IV) Delegation to, supervision of, and collaboration with, as appropriate to level of education, other health care providers.

(C) Measurement of student competency shall focus on student demonstration of care management and decision-making skills when providing patient care in a variety of clinical settings with diverse patients.

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

(I) The faculty/student ratio shall not exceed eight (8) students to one (1) faculty member for clinical learning experiences involving direct patient care.

(II) When preceptors are used in a clinical setting, one (1) preceptor shall supervise a maximum one (1) student. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.

(ii) APRN. Each instructional track/major shall have a minimum of five hundred (500) supervised clinical hours or as required for national certification exam. The supervised experience shall relate directly to the role and population focus, including pharmacotherapeutic management of patients.

(c) Administrator Responsibilities. The nurse administrator shall:

(i) Have continuous, active, daily, and direct responsibility and authority at all locations for the nursing program;

(ii) Oversee the daily governing organization, nursing education unit, and nursing program matters such as, but not limited to, personnel matters, student matters, curricular matters, and resource matters; and

(iii) Have adequate time and resources on a daily basis at all locations to administer the nursing program.

(d) Administrator Qualifications. The administrator shall have the education and experience necessary to direct the program in preparing graduates for the safe practice of nursing.

All program administrators shall:

(i) Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN license;

(ii) Have at least five (5) years of experience practicing nursing; and

(iii) Have experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.

(iv) The associate degree and/or practical nursing program administrator shall have a minimum of a master's degree in nursing.

(v) The baccalaureate nursing program administrator shall have a doctoral degree in nursing or related field.

(vi) The post-licensure nursing program administrator shall have a doctoral degree in nursing or related field.

(vii) The APRN program administrator may have responsibility for the oversight of multiple program tracks. This administrator shall:

(A) Have a doctoral degree in nursing or related field; and

(B) Hold current national certification as an APRN.

(viii) The APRN program shall also appoint a lead faculty member for each track to coordinate the educational component specific to that track, including curriculum development. This lead faculty member shall:

(A) Meet APRN faculty qualifications defined in Section 4, (f) and (j);
and

(B) Hold current national certification in the same role and population focus.

(e) Programmatic Faculty Standards. All programs shall:

(i) Employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program;

(ii) Develop clear workload policies comparable to those of an approved program of equivalent size and type;

(iii) Provide substantive, periodic workshops or presentations devoted to faculty development;

(iv) Provide formal mentoring by established peers for new full-time and part-time faculty; and

(v) Provide formal orientation for new clinical faculty.

(f) Faculty Standards. All faculty shall:

(i) Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN license;

(ii) Demonstrate pedagogical competence by:

(A) A graduate degree in nursing education; or

(B) A minimum of ten (10) hours of educational preparation obtained within six (6) months of the hire date which shall include:

(I) Methods of instruction including the use of technology;

(II) Teaching in clinical practice settings;

(III) Teaching in simulation settings;

(IV) How to conduct assessments, including test item writing;

and

(V) Management of the educational environment such as legal and ethical issues, diversity, and incivility.

(g) Prelicensure Faculty. Full and part-time prelicensure faculty shall meet the following educational requirements:

(i) Graduate degree in nursing; or

(ii) Obtain a graduate degree in nursing within five (5) years of hire date. The administrator shall:

(A) Notify the Board, in writing, within thirty (30) days of the hire of a non-graduate prepared faculty member; and

(B) Submit a written plan, within six (6) months of the hire date, outlining how this faculty member will obtain a graduate degree within the specified timeframe.

(iii) Adjunct or part-time clinical faculty shall be educationally prepared with a minimum of a baccalaureate degree in nursing.

(iv) A minimum of fifty percent (50%) of the full-time faculty shall hold a graduate degree with a major in nursing.

(h) Post-licensure Faculty. Faculty teaching in a post-licensure program shall be educationally prepared with a graduate degree in nursing.

(j) APRN Faculty. Faculty teaching in an APRN program shall:

(i) Be educationally prepared with a graduate degree in nursing; and

(ii) Demonstrate at least two (2) years of APRN clinical experience.

(k) Interprofessional Faculty. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.

(l) Preceptors.

(i) Preceptors may be used to enhance faculty-directed clinical learning experiences.

(ii) Programs shall clearly define the role and performance expectations for preceptors with respect to teaching, supervision, and student evaluation.

(iii) Preceptors shall:

(A) Hold a current unencumbered license as an RN or APRN or unencumbered privilege to practice in the jurisdiction where the clinical practicum is conducted; and

(B) Demonstrate competency related to the area of assigned clinical teaching responsibilities.

(m) Students.

(i) The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences.

(ii) The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study.

(iii) All policies relevant to applicants and students shall be readily available in writing.

(n) Program Evaluation.

(i) The program shall implement a self-evaluation plan which is updated at least yearly and shall be submitted to the Board upon request.

(ii) The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.

(A) If the evaluation report to the national nursing education accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the standards pursuant to this chapter are found in the report.

Section 5. Standards for Simulation in Prelicensure Programs.

(a) A prelicensure nursing education program may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours per course. A program that uses simulation shall adhere to the standards set in this section.

(b) Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation.

(c) The program shall have appropriate facilities for conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation.

(d) Faculty involved in simulations shall have training in the use of simulation.

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

(i) Method of debriefing each simulated activity; and

(ii) Plan for orienting faculty to simulation.

(f) The program shall develop criteria to evaluate the simulation activities, including student evaluation of simulation experience.

Section 6. Home State/Jurisdiction Nursing Education Programs.

(a) Any program with legal domicile within Wyoming shall obtain and maintain Board approval for any prelicensure or post-licensure program as pursuant to Sections 8 through 13 of this chapter.

Section 7. Host State/Jurisdiction Nursing Education Programs.

(a) When acting as the host state (i.e., the parent institution has legal domicile outside of Wyoming), all programs shall document current registration with the Wyoming Department of Education or National Council for State Authorization Reciprocity Agreement (SARA) approval.

(b) Prelicensure.

(i) Programs seeking to operate a prelicensure program in Wyoming shall meet the same standards required of home state/jurisdiction nursing education programs. Programs shall:

(A) Obtain and maintain Board approval;

(B) Maintain general, programmatic, and reporting standards for prelicensure nursing education programs as defined in Sections 3, 4, and 9; and

(C) Instruct students to use the NCLEX program code corresponding to a Wyoming Board approved program.

(ii) Prelicensure programs seeking permission to either use a Wyoming clinical facility for a portion of a class or to place an individual student for a precepted experience shall submit the following:

(A) Description of the planned educational experience;

(B) Rationale for the use of Wyoming facilities;

(C) Documentation of home state/jurisdiction program approval; and

(D) Documentation of faculty/preceptor licensure.

(I) Faculty who teach only didactic content or supervise a student/preceptor pair, where direct patient care is not provided, shall be licensed in the home state.

(II) Preceptors and faculty providing patient care in Wyoming shall have an active, unencumbered Wyoming, or multi-state RN or APRN license.

(c) Post-Licensure.

(i) Post-licensure programs are not required to have Board approval but shall:

(A) Notify the Board in writing when a student will be completing a clinical learning experience in Wyoming.

(B) Execute a written contract with the cooperating clinical facility as defined in Section 3, (d) and (e).

Section 8. Process for Approval of New Programs.

(a) Step 1 – Submit new program proposal.

(i) Timeframe. At least nine (9) months prior to admitting students, the parent

institution shall submit to the Board a statement of intent to establish a program and a proposal.

(ii) Statement of Intent. The statement of intent shall address:

(A) Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;

(B) Employment opportunities for program graduates within the geographic region(s) of the proposed program; and

(C) Potential impact on other established programs in Wyoming which shall include:

(I) An analysis of the current usage of potential clinical site(s) in the area; and

(II) A projection of how the addition of the program will impact use of clinical site(s) by established programs.

(iii) Proposal. The proposal shall address how the program would comply with the standards of nursing education defined in this chapter. At a minimum, the proposal shall include:

(A) Purpose, mission, and level of the proposed program;

(B) Evidence of parent institution and other pertinent governing bodies approval and support;

(C) Accreditation status of the parent institution;

(D) Selection of a national nursing accreditation agency recognized by the Board;

(E) Organizational structure of the educational institution documenting the relationship of the program within the parent institution;

(F) Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;

(G) Documentation of adequate academic facilities, including access to a library;

(H) Description of proposed instructional modalities and resources to support these modalities;

(J) Source and description of adequate clinical resources for the level of program;

- (K) Availability of qualified administrator and faculty;
- (L) Evidence of community support demonstrated by letters of support from proposed clinical site(s) and community leaders;
- (M) Anticipated student population and enrollment;
- (N) Proposed time line for planning and initiating the program; and
- (O) If the parent organization operates program(s) in another jurisdiction(s) the applicant shall submit:
 - (I) NCLEX or certifying exam results for the past three (3) years for graduates taking the examination for the first time;
 - (II) The most recent program accreditation report;
 - (III) Documentation of full approval by a nursing or educational regulatory agency that provides oversight of the program, such as a board of nursing from the home state/jurisdiction; and
 - (IV) Documentation of any complaints or grievances from students, clinical facilities, or the public within the past three (3) years and evidence of resolution.
- (iv) The applicant shall respond to any Board requests for additional information.
- (v) New program application shall not be considered for prelicensure programs operating in Wyoming or any other jurisdiction(s) who cannot demonstrate a three (3) year average NCLEX pass rate of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time.
- (vi) Board Action. After reviewing the initial proposal, the Board may grant or deny permission to submit an application for developmental approval.
- (b) Step 2 – Submit Request for Developmental Approval.
 - (i) Timeline. At least six (6) months prior to admitting students, the parent institution shall submit a request for developmental approval.
 - (ii) Request for Developmental Approval. The request for developmental approval shall include verification the following program components and processes have been addressed:
 - (A) Appoint/hire an administrator pursuant to Section 4 and notify the

Board of that appointment;

(B) Provide evidence the nursing program is actively seeking accreditation from a national nursing accreditation agency recognized by the Board;

(C) Develop a written, proposed program plan in accordance with the standards of nursing education and the programmatic standards as defined in Sections 3 and 4. In addition, the proposed program plan shall include:

(I) Program content;

(II) Schedule (course sequence);

(III) Course descriptions;

(IV) Contracts for clinical sites;

(V) Development of a self-evaluation plan as defined in Section 2 (w);

(VI) Course syllabi; and

(VII) Identification of faculty needed, including number and experiential qualifications.

(D) Establish student policies for admission, progression, retention, remediation and graduation; and

(E) Request that the Board conduct a site-visit.

(iii) Site-visit. A representative of the Board shall complete an on-site survey of the proposed program, pursuant to Section 11.

(iv) Committee Review. In determining whether to recommend approve of the application the Committee shall consider all evidence, including, but not limited to:

(A) The proposed program plan;

(B) The survey report;

(C) Comments from the petitioning institution;

(D) Public comments; and

(E) The status of other nursing programs operated by the parent institution.

(v) The Committee may recommend the Board grant or deny developmental approval. If the Committee recommends denial, the parent institution may request in writing, a hearing within one-hundred eighty (180) days.

(vi) Board Action. After review, the Board may grant or deny developmental approval. Developmental approval shall remain valid until the Board reviews the program following graduation of the first class and submission of the results of NCLEX or applicable certification exam.

(c) Step 3 – Preparation for Admission of Students.

(i) Timeline. At least three (3) months prior to admitting students, the parent institution shall prepare for the admission of students.

(ii) Preparation. The parent institution shall notify the Board when the following conditions have been met:

(A) There are sufficient qualified nurse educators pursuant to Section 4 and the Board has been notified of those appointments;

(B) Readiness for clinical instruction meeting the rules pursuant to Section 4 (b) including;

(I) Signed clinical contracts with adequate clinical placement for the maximum number of students enrolled at one time; and

(II) Clinical facilities and equipment for practice of skills and simulation.

(C) There is evidence of academic and student services that will allow the program to meet planned objectives and the needs of students;

(D) The parent institution has received approval to operate a nursing education program by an accrediting body recognized by the United States Department of Education; and

(E) There is at least one (1) signed agreement for the articulation of undergraduate students to proceed to the next level of nursing education. The program(s) selected for the agreement shall:

(I) Meet the requirements for accreditation approval stipulated in Section 3 (b); and

(II) Allow the student to complete their education while retaining Wyoming residency.

(F) There is evidence of readiness for admission of students.

(iii) Site-visit. The Board may request an on-site survey of the proposed

program.

(iv) Board Review. After verifying all components and processes are complete and in place, the Board shall notify the program it may admit students.

(d) Step 4 – Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.

(e) Step 5 – Submit Request for Initial Full Approval.

(i) Timeline. Within six (6) months after graduation of the first cohort, the program shall submit a request for initial full approval.

(ii) Self-Evaluation Plan. The program shall develop and submit an updated self-evaluation plan.

(iii) Site-visit. A representative of the Board shall conduct an on-site survey of the program.

(iv) Committee Review. The Committee shall consider all evidence, including the self-evaluation plan, the survey report, comments from the petitioning institution, and public comments in considering the request for full approval. The Committee may recommend the Board grant or deny approval. If the Committee recommends denial, the parent institution may request in writing a hearing within one-hundred eighty (180) days.

(v) Board Action. After review of the request for initial full approval, the Board may grant or deny initial full approval.

Section 9. Reports and Notification.

(a) NCLEX Results. All prelicensure programs operating in Wyoming shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.

(i) LPN and RN pass rates shall be evaluated separately.

(ii) Within three (3) months of receiving NCLEX results below the eighty percent (80%) requirement, the program shall submit a plan to the Board for assessment and improvement including expected outcomes and timelines.

(iii) The Board may initiate a complaint as pursuant to Section 13 for programs with NCLEX rates that remain below eighty percent (80%) for a period of two (2) years.

(b) Annual Report. All programs operating in Wyoming, excluding those with provisional approval, shall submit an annual report with the date and format specified by the Board.

(c) The program shall submit a copy of any accreditation related correspondence with the national nursing accrediting agency to the Board within thirty (30) days of receipt.

(d) **Unplanned Program Changes.** The program shall notify the Board in writing within thirty (30) days of significant, unplanned program changes including, but not limited to:

- (i) Change in accreditation status;
- (ii) Change in the nurse administrator of the program;
- (iii) Appointment of new faculty members; or
- (iv) Any unanticipated, substantive change reported to the nursing accrediting agency.

(e) **Planned Program Changes.** The program shall notify the Board of any planned, substantive change in curriculum or program. This notice shall occur in writing, at least two (2) months prior to planned implementation.

Section 10. Process for Continuing Full Approval.

(a) **Timeline.** Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the requirements of this chapter.

(b) **Evaluation Process.** The evaluation process shall include submission of a self-evaluation plan and may include a site-visit by a representative(s) of the Board and a request for public comment. This evaluation may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending accreditation review.

(c) **Self-Evaluation Plan.** The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.

(i) If the report to the accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the requirements of this chapter are found in the report.

(d) **Determination of Approval Status.**

(i) **Committee Review.** The committee shall review and analyze various sources of evidence regarding program performance, including, but not limited to:

- (A) Periodic Board survey visits and/or reports;
- (B) Annual report data;
- (C) National nursing accreditation survey report and accreditation-

related correspondence; and

(D) The report of ongoing self-evaluation.

(ii) Committee Action. After reviewing the evaluation documentation, the Committee may recommend the Board grant or deny continuing approval.

(iii) Board Action. After review of the Committee recommendation, the Board may grant or deny continued full approval.

(A) If the Board recommends denial, a formal complaint will be initiated pursuant to Section 13.

Section 11. Site Visit Conducted by the Board.

(a) Pre-Site Visit Process.

(i) Any site visit shall be scheduled at least three (3) months in advance on a mutually acceptable date. The visit may be scheduled in conjunction with the national nursing accreditation body survey visit.

(ii) Thirty (30) days prior to the scheduled site visit, the program shall submit the self-evaluation or plan of correction to the Board.

(iii) The Board representative shall use a site visit template to assess program quality indicators and warning signs.

(iv) The program shall be asked to participate in scheduling site visit activities.

(b) Post Site Visit Report.

(i) Following a site visit, the Board shall provide a report of its findings to the program.

(ii) The program may respond to the report with additional information within ninety (90) days.

Section 12. Periodic Evaluation.

(a) Periodic Evaluation. Periodic evaluation and site visit may be initiated at any time. Warning signs that may trigger this review may include, but are not limited to:

(i) Denial, withdrawal or change of program or institution accreditation status;

(ii) Turnover of program administrators, defined by more than three (3) in a five (5) year period;

(iii) Frequent nursing faculty turnover or cut in the number of nursing faculty;

(iv) Failure to achieve NCLEX pass rate requirement defined in Section 9 (a) or decreasing trend in NCLEX pass rates;

(v) Evidence of non-compliance with remediation plan by programs with deficiencies or violations;

(vi) Significant complaint(s) or grievances from students, faculty, clinical facilities, or the public;

(vii) Knowingly providing false or misleading information to students or the public concerning the nursing program; or

(viii) The Board being in possession of information indicating the program may not be in compliance with the requirements of this chapter.

Section 13. Denying and Withdrawing Approval.

(a) Complaint Review Process. Any person may submit a complaint to the Board that a nursing education program has failed to meet the requirements of this chapter.

(i) The Board staff may initiate complaints on their own motion.

(ii) Complaints must contain the name, address, and signature of the person making the complaint.

(iii) The Board shall assign each complaint to the Committee for review and to make a recommendation.

(iv) The Board shall notify the nursing education program of the complaint by mail.

(b) Committee Review.

(i) Upon receiving a complaint, the Committee shall review the complaint to determine if it merits investigation.

(ii) The Committee may request additional information from the nursing education program or meet informally with the nursing education program.

(c) Notice of Deficiency.

(i) If the Committee believes the complaint states a valid claim that a nursing education program has failed to meet the requirements of this chapter, the Committee shall send a notice of deficiency to the nursing education program's administrator identifying and briefly explaining the program's deficiency.

(ii) The nursing education program shall have thirty (30) days to respond to a notice of deficiency with a written plan to correct the deficiency or explanation why there is no

deficiency.

(d) Committee Recommendation and Notice of Intent.

(i) After investigating the allegations in the complaint and receiving any response from the nursing education program, the Committee may recommend the Board:

(A) Deny approval of a nursing education program;

(B) Withdraw approval of a nursing education program; or

(C) Place conditions and restrictions on approval of a nursing education program for failing to meet the requirements of this chapter.

(ii) If the Committee recommends the Board deny approval of a nursing education program, withdraw approval of a nursing education program, or place conditions and restrictions on approval of a nursing education program, the Committee shall notify the applicant of its recommendation.

(iii) The Notice of Intent shall contain:

(A) A brief description of the facts or conduct the Committee alleges warrant its recommendations;

(B) Citations to the applicable sections of this chapter the Committee alleges the nursing education program violated;

(C) Notice that the nursing education program may respond in writing to the allegations within thirty (30) days of the date the Committee mailed the Notice of Intent; and

(D) Notice that an applicant may request a hearing before the Board if the nursing education program responds in writing within thirty (30) days of the date the Committee mailed the Notice of Intent.

(e) Program's Response to Notice of Intent. The nursing education program shall have thirty (30) days from the date the Committee mailed the Notice of Intent to respond. The applicant may:

(i) Request the Board hold a hearing on the Committee's recommendation;

(ii) Request the Board table consideration of the application; or

(iii) Withdraw their application.

(f) Program's Failure to Respond to Notice of Intent. If a nursing education program fails to timely respond to the Notice of Intent, the Board may accept the Committee's

recommendation.

(g) Notice of Hearing.

(i) Upon receipt of a written request for a hearing from a nursing education program, the Board shall conduct a hearing. Board staff shall serve a Notice of Hearing on the nursing education program at least thirty (30) days prior to the hearing.

(ii) The Notice of Hearing shall contain:

(A) A brief statement of the matters asserted, including the Committee's recommendation, the facts upon which the Committee's recommendation is based, and the sections of this chapter that the Committee alleges the nursing education program failed to meet;

(B) The time, place, and nature of the hearing;

(C) The legal authority and jurisdiction for the hearing; and

(D) The applicable burden and standard of proof.

(h) Contested Case. A hearing officer shall preside over the formal contested case hearing and shall conduct the hearing according to the Wyoming Administrative Procedure Act and Chapter 2 of the Office of Administrative Hearings rules concerning contested proceedings as referenced in Chapter 1, Section 6.

(j) Burden of Proof. The Committee shall bear the burden to prove by clear and convincing evidence the nursing education program failed to meet the requirements of this chapter.

(k) Board Order.

(i) The Board may resolve a complaint by denying approval of a nursing education program, withdrawing approval of a nursing education program, or imposing conditions on a nursing education program's approval.

(ii) The Board shall issue a written order. The order shall be sent to the nursing education program by regular U.S. mail.

(iii) No Board action shall be effective until the date the written order is approved by the Board and entered into the administrative record.

(l) Dismissal or Default. If a nursing education program fails to appear at a noticed hearing, the Committee may request the Board enter default against the program.

(i) In entering a default, the Board may:

(A) Order the allegations in the Committee's recommendation to be taken as true for the purposes of the hearing; or

(B) Order the nursing education program may not present evidence on specific issues in the case.

(ii) The nursing education program may request the Board lift its entry of default. The Board may lift its entry of default if the program demonstrates good cause for failing to appear at the noticed hearing.

(m) Lawful Service. There shall be a presumption of lawful service of any communication required by these rules if sent to the last known address of the nursing education program by regular U.S. mail.

(n) Voluntary Surrender. A nursing education program may petition the Board in writing to voluntarily withdraw their program approval in Wyoming. The Board may accept the program's voluntary surrender at a public meeting.

(o) Petition for Judicial Review. Petitions for judicial review from decisions or orders of the Board are governed by the Wyoming Administrative Procedure Act and the Wyoming Rules of Appellate Procedure.

Section 14. Reinstatement. A program may petition for reinstatement of approval by submitting evidence of compliance with the requirements of this chapter.

Section 15. Closure of Nursing Education Program.

- (a) When closing a program, the parent institution shall:
- (i) Continue the program until the last class enrolled is graduated; or
 - (ii) Assist in the transfer of students to other Board-approved programs; and
 - (iii) Advise the Board of the arrangements for secure storage and access to academic records and transcripts.

(b) The program shall meet the requirements of this chapter until the date of closure.

(c) The date of closure is the date on the degree, diploma, or certificate of the last graduate or the date on which the last student was transferred.

(d) Closing as a Result of Withdrawal of Approval. Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program.

Section 16. Approval of Certification Courses.

- (a) The Board shall establish standards and approve certification courses for:

- (i) CNA II;
 - (ii) Home Health Aides;
 - (iii) Medication Aide-Certified (MA-C); and
 - (iv) LPN Intravenous (IV) Certification.
- (b) The Board shall review and approve nurse refresher courses.

CHAPTER 6

STANDARDS FOR NURSING EDUCATION PROGRAMS

Section 1. Statement of Purpose. These Board Rules are adopted to implement the Board's authority to:

- (a) Provide criteria and procedures for the development, evaluation, approval, and improvement of new and established programs;
- (b) Ensure ~~that~~ graduates of programs are prepared for safe and effective nursing practice; and
- (c) Ensure candidates are educationally prepared for certification, licensure, and recognition.

Section 2. Definitions.

(a) "Administrator" means the nurse educator who has administrative responsibility or authority for the direction of a program.

(b) ~~"Committee"~~ means ~~the Practice and Education Committee of the Board.~~ "Articulation Agreement" means an educational partnership between nursing education programs allowing students to receive credit for their prior degree.

(c) ~~"Distance Education"~~ means ~~instruction offered by any means where the student and faculty are in separate physical locations. Teaching methods may be synchronous or asynchronous and shall facilitate and evaluate learning in compliance with approved statutes and regulations.~~ "Clinical Learning Experience" means planned activities in nursing practice that prepare students to understand, perform, and refine professional competencies at the appropriate program level. These experiences include direct and indirect patient care, simulation, standardized patient experiences, or any nursing intervention that influences health care outcomes.

(d) ~~"Encumbered license"~~ means ~~a license with a current discipline, condition, or restriction.~~ "Committee" means the Education Committee of the Wyoming State Board of Nursing.

(e) ~~"Preceptor"~~ also known as ~~partners in education,~~ means ~~a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.~~ "Cost" means those expenses the Board or investigating committee incurs in a hearing to deny, refuse to renew, reactivate, reinstate, revoke, restrict, place conditions upon, or suspend a license or program approval pursuant to Wyoming Statute §§ 33-21-138 through 144 and includes, but is not limited to hearing officer fees, service fees, subpoena fees, reporter fees, lay and expert witness and consultant fees, travel and per diem expenses, deposition costs and other costs and expenses incurred in the investigation, discovery, preparation, and hearing of any disciplinary matter.

(f) ~~"Parent Institution"~~ means ~~the organization or agency responsible for the administration and operation of the program.~~ "Debriefing" means an activity following an

experiential learning experience. Activity is led by a facilitator, encourages participant’s reflective thinking, and provides feedback regarding the participant’s performance.

(g) “Program” means nursing education program. “Encumbered License” means a license with current discipline, condition, or restriction.

(h) “Program Compliance Report” means a report generated by the program in which the program reports its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. “Faculty” means an educator employed, paid, or contracted by the program whether full-time, part-time, adjunct, or labeled as a substitute.

(j) “Self Study Evaluation” means an evaluation generated by the program in which the program evaluates its compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. “Home State/Jurisdiction” means the state/jurisdiction where the program has legal domicile.

(k) “Host State/Jurisdiction” means the state/jurisdiction outside of the home state/jurisdiction where students participate in didactic coursework and/or clinical experiences.

(l) “Methods of Delivery” means the methods used by faculty to facilitate and evaluate learning in compliance with approved statutes and regulations. Methods of delivery include:

(i) “Traditional Education” means student and instructor are physically in the same location at the same time (e.g., face-to-face). This method of delivery may be web-enhanced/supported.

(ii) “Distance Education” means student and instructor are not physically in the same location. Instruction uses synchronous or asynchronous technology to support regular and substantive interactions between the instructor and students. Instructional methods may include but are not limited to one-way or two-way transmissions, audio, video, the internet, or computer technologies.

(iii) “Hybrid Education” means instruction that uses both distance and traditional methods of delivery.

(m) “Multi-State License” means a license to practice nursing issued by a home state licensing board authorizing the licensed nurse to practice in all party states under a privilege to practice.

(n) “NCLEX Pass Rate” means the percentage of a program’s student candidates who take the NCLEX (at the PN or RN levels) and pass on the first attempt.

(o) “Nurse Administrator” means the nurse with responsibility and authority for the administrative and instructional activities of a nursing education unit and nursing programs within the governing organization (e.g., dean, chairperson, director, etc.).

(p) “Parent institution” means the organization or agency responsible for the

administration and operation of the program.

(q) “Plan of Correction” means a written report in which a program details plans for compliance with relevant statutes and regulations.

(r) “Post-licensure” means an educational program leading to degree completion of an undergraduate, graduate, or terminal degree in nursing once licensure as a registered nurse has been attained.

(s) “Preceptor” also known as partners in education, means a licensed nurse or other health professional who may serve as teacher, mentor, role model, or supervisor in a clinical setting.

(t) “Prelicensure” means initial educational program in nursing leading to entry-level licensure as a RN or LPN.

(u) “Program” means a nursing or nursing related health education program at any level.

(v) “Simulation” means a technique to replace or amplify real clinical experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.

(w) “Self-Evaluation Plan” means a comprehensive, written plan for initial and ongoing self-evaluation of program requirements and outcomes. This plan is based on the standards and rules identified in this chapter and the program’s identified accrediting body.

Section 3. Standards of Nursing Education. General Standards for Nursing Education Programs. All nursing education programs operating in Wyoming shall meet these requirements.

(a) ~~Standards of Nursing Education. All programs shall adopt purposes and outcomes which:~~ Purpose and outcomes are consistent with:

(i) ~~Are consistent with the Act, Board Rules, and other state laws;~~ The Wyoming Nurse Practice Act, Board Rules, and other state and federal laws; and

(ii) ~~Are consistent with the accepted standards governing the practice of nursing appropriate for graduates of the type of program offered; and~~ Accepted standards governing the practice of nursing appropriate graduates of the type of program offered.

(iii) ~~Were developed utilizing stakeholder input.~~

(b) ~~Administration and Organization. The parent institution and program shall:~~ Current accreditation, or approved to pursue accreditation, of:

~~(i) Establish statements of purpose, philosophy, and outcomes which are consistent with those of the parent institution and nursing standards; Parent institution by an accrediting body recognized by the United States Department of Education for postsecondary institutions; and~~

~~(ii) Establish and adopt an organizational design which clearly delineates the lines of authority, responsibility, and channels of communication based on stakeholder input; Program by a national nursing accreditation agency recognized by the Board.~~

~~(iii) Ensure faculty and students participate in program planning, implementation, evaluation, and continuous improvement;~~

~~(iv) Provide adequate resources to support the program's processes, goals, and outcomes which include, but are not limited to: fiscal, human (qualified administrative, instructional, and support personnel), physical (facilities and equipment), clinical, and technical learning resources;~~

~~(v) Implement written policies, congruent with the policies of the parent institution, which are reviewed periodically; and~~

~~(vi) Provide students the opportunity to acquire and demonstrate the knowledge, skills, and abilities required for safe and effective nursing practice, in theory and clinical experience, through faculty supervision.~~

~~(c) Accreditation Requirements. The parent institution or program shall notify the Board of any changes affecting their respective accreditation status within thirty (30) days.~~

~~(i) The parent institution shall be accredited by a U.S. Department of Education regionally or nationally recognized institutional accrediting agency.~~

~~(ii) The Board shall not require the program to obtain national accreditation as a condition for approval, but it is encouraged.~~

~~(iii) The parent institution or program shall notify the Board of any changes affecting their respective accreditation status.~~

~~(d) Prior to any clinical learning experiences, the parent institution shall execute a written contract with the cooperating clinical facility establishing and defining:~~

~~(i) The responsibilities of each party;~~

~~(ii) The period of the agreement; and~~

~~(iii) Conditions under which renewal, renegotiation, or termination could take place.~~

~~(e) The parent institution shall maintain a copy of each executed contract and provide it to the Board upon request.~~

Section 4. Programmatic Standards for Prelicensure Programs. Programmatic Standards for Wyoming Nursing Education Programs.

(a) Curriculum.

(i) Overview. ~~The curriculum of the program for all programs~~ shall enable the student to develop the nursing knowledge, skills, and abilities necessary for the level, scope, and standards of competent nursing practice expected at the level of licensure or recognition. The program shall revise its curriculum to maintain a program ~~that~~ reflects advances in health care and its delivery.

(ii) Principles. ~~Based on nursing education, professional, and practice standards, the curriculum shall include:~~ The curriculum, as defined by nursing education, professional, and practice standards, shall include:

(A) ~~Experiences that promote the development and subsequent demonstration of evidence-based clinical judgment, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;~~ A sound foundation in biological, physical, social, and behavioral sciences;

(B) ~~Evidence-based learning experiences and methods of instruction, including distance education methods if used, consistent with the written curriculum plan;~~ Integration of legal and ethical issues and professional responsibilities into didactic and clinical experiences;

(C) ~~Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social, and economic backgrounds;~~ Learning experiences that promote the development of evidence-based clinical judgement, skill in clinical management, and the professional commitment to collaborate in continuously improving the quality and safety of the healthcare system for patients;

(D) ~~Written statements of specific, measureable, theoretical, and clinical outcomes/competencies for each course; and~~ Evidence-based learning experiences and methods of instruction, including distance education methods if used, consistent with the written curriculum plan;

(E) Delivery of instruction consistent with the program curriculum plan, which enables students to meet the goals, competencies, and outcomes of the program; and

(F) Instruction on the Wyoming Nurse Practice Act and Administrative Rules which shall include:

(I) The mission and purpose of the Wyoming State Board of Nursing relative to licensure, discipline, practice, and nursing education program approval;

(II) Nurse licensure process in Wyoming including eligibility, temporary permits, renewal, continued competency, and inactive status;

(III) The purpose of the Nurse Licensure Compact (NLC) and requirements for a multi-state license;

(IV) The scope of practice for nurses and Certified Nurse Aides in Wyoming;
and

(V) The process and potential reasons for disciplinary action.

(iii) *Clinical Experience.* Prelicensure Curriculum. The curriculum of prelicensure programs shall include didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social, and economic backgrounds.

(A) ~~The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.~~

(B) ~~A written contract or agreement shall be executed by the parent institution conducting the program and the cooperating clinical facility or agency. The contract shall be executed by the responsible individual(s) of each party, and shall set forth the responsibilities of each party.~~

(C) ~~Faculty supervised clinical practice shall include development of skills in direct patient care; making clinical judgments; care and management of both individuals and groups of patients across the lifespan; and delegation to, supervision of, and collaboration with as appropriate to level of education, other health care providers.~~

(D) ~~Measurement of students' competencies shall focus on the students' demonstration of care management and decision making skills when providing patient care in a variety of clinical situations and care settings.~~

(iv) *Faculty/Student Ratio.* APRN Curriculum. The curriculum of the APRN nursing education program must prepare the graduate to practice in one of the four identified APRN roles, i.e., CRNA, CNM, CNS, or CNP, and at least one of the six population foci, i.e., family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related, or psychiatric/mental health. The APRN curriculum shall include:

(A) ~~The program shall consider the following factors in determining the faculty/student ratio in clinical settings, including: clinical site, level of student, type of clinical experience, contractual agreement with the agency, program, and curricular objectives and the faculty's teaching experience. Three separate graduate level courses (the APRN core) in:~~

(I) Advanced physiology and pathophysiology, including general principles that apply across the lifespan;

(II) Advanced health assessment which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and

(III) Advanced pharmacology which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.

(B) Faculty/student ratio shall be a maximum of 1:8 for clinical experiences. Instruction in diagnosis and management of disorders across settings and body systems appropriate to the APRN focus; and

(C) When preceptors are used in a clinical setting, the preceptor/student ratio shall be 1:1. The faculty shall not supervise more than sixteen (16) preceptor/student pairs. Instruction in the principles for clinical decision making in the identified role.

(v) APRN programs preparing for two population foci or combined nurse practitioner/clinical nurse specialist shall include content and clinical experience in both functional roles and population foci.

(vi) There shall be provisions for the recognition of prior learning and advanced placement in the curriculum for individuals who hold a graduate degree as an APRN and are seeking preparation in a different role or population focus. Post-masters nursing students shall complete the requirements of the APRN program through a formal graduate level certificate or degree in the desired role and population focus. Certificate students must meet the same APRN outcome competencies required of other students.

(b) Administrator Responsibilities. ~~The administrator shall:~~ Clinical Learning Experiences.

(i) ~~Be responsible for the administration, planning, implementation, evaluation, and improvement of the program; and~~ Prelicensure.

(A) The program shall provide clinical hours comparable to those provided by an approved program of equivalent size and program type or, in the case of no equivalent program, clinical hours scaled relative to an approved program.

(B) Faculty supervised clinical practice shall include:

(I) Development of skills in direct patient care;

(II) Making clinical judgements; and

(III) Care and management of both individuals and groups of patients across the lifespan; and

(IV) Delegation to, supervision of, and collaboration with, as appropriate to level of education, other health care providers.

(C) Measurement of student competency shall focus on student demonstration of care management and decision-making skills when providing patient care in a variety of clinical settings with diverse patients.

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

(I) The student/faculty ratio shall not exceed eight (8) students to one (1) faculty member for clinical learning experiences.

(II) When preceptors are used in a clinical setting, one (1) preceptor shall supervise a maximum one (1) student. The faculty shall not supervise more than sixteen (16) preceptor/student pairs.

(ii) ~~Dedicate appropriate time and resources to meet the needs of the program and the students, which should result in reduced teaching responsibilities.~~ APRN. Each instructional track /major shall have a minimum of five hundred (500) supervised clinical hours or as required for national certification exam. The supervised experience shall relate directly to the role and population focus, including pharmacotherapeutic management of patients.

(c) ~~Administrator Qualifications.~~ The administrator shall have education and experience necessary to direct the program preparing graduates for the safe practice of nursing. Administrator Responsibilities. The nurse administrator shall:

(i) ~~In associate degree and/or practical nursing programs, the administrator shall:~~ Have continuous, active, daily, and direct responsibility and authority at all locations for the nursing program;

(A) ~~Have a minimum of a master's degree in nursing;~~

(B) ~~Hold an active, unencumbered Wyoming RN license;~~

(C) ~~Have at least five (5) years of experience practicing nursing; and~~

(D) ~~Experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.~~

(ii) ~~In baccalaureate nursing programs, the administrator shall meet the qualifications in Section 4(c)(i) and have a doctoral degree in nursing or related field.~~ Oversee the daily governing organization, nursing education unity, and nursing program matters such as, but not limited to, personnel matters, student matters, curricular matters, and resource matters; and

(iii) Have adequate time and resources on a daily basis at all locations to administer the nursing program.

(d) ~~Faculty and Preceptors.~~ Administrator Qualifications. The administrator shall have the education and experience necessary to direct the program in preparing graduates for the safe practice of nursing. All program administrators shall:

(i) ~~Principles.~~ Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN license;

(A) ~~The program shall employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program. A minimum of 50% of the part time faculty shall also hold a graduate degree with a major in nursing.~~

(B) ~~Preceptors may be used to enhance faculty directed clinical learning experiences. Criteria for selecting preceptors shall be in writing.~~

(ii) ~~*Faculty Qualifications.* Nursing faculty shall hold an active, unencumbered Wyoming RN license and be experientially qualified. Faculty shall also meet the following educational requirements: Have at least five (5) years of experience practicing nursing; and~~

(A) ~~Full time faculty:~~

(I) ~~Graduate degree in nursing education;~~

(II) ~~Graduate degree in nursing and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date; or~~

(III) ~~Obtain a graduate degree in nursing within five (5) years of hire date and successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date. The administrator shall immediately notify the Board in writing of the hire of the non-graduate prepared faculty member along with a plan for compliance with the requirements.~~

(B) ~~Part time faculty:~~

(I) ~~Minimum of a baccalaureate degree with a major in nursing; and~~

(II) ~~Successfully complete at least ten (10) clock hours of educational preparation in principles and methods of teaching, learning, and evaluation of performance outcomes within six (6) months of hire date.~~

(iii) ~~*Preceptors Qualifications.* Preceptors shall: Have experience in teaching and knowledge of learning principles for adult education, including nursing curriculum development, administration, and evaluation.~~

(A) ~~Hold an active, unencumbered nursing license in the jurisdiction where the clinical experience occurs; and~~

(B) ~~Demonstrate competencies related to the area of assigned clinical teaching responsibilities and will serve as role models and educators for students.~~

(iv) ~~The associate degree and/or practical nursing program administrator shall have a minimum of a master's degree in nursing.~~

(v) ~~The baccalaureate nursing program administrator shall have a doctoral degree in nursing or related field.~~

(vi) The post-licensure nursing program administrator shall have a doctoral degree in nursing or related field.

(vii) The APRN program administrator may have responsibility for the oversight of multiple program tracks. The administrator shall:

(A) Have a doctoral degree in nursing or related field; and

(B) Hold national certification as an APRN.

(viii) The APRN program shall also appoint a lead faculty member for each track to coordinate the educational component specific to that track, including curriculum development. This lead faculty member shall:

(A) Meet APRN faculty qualifications defined in Section 4, (f) and (j); and

(B) Hold current national certification in the same role and population focus.

(e) Students: Programmatic Faculty Standards. All programs shall:

(i) ~~The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences. Employ sufficient qualified faculty, both in number and expertise, to meet the purpose, philosophy, and outcomes of the program;~~

(ii) ~~The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study. All policies relevant to applicants and students shall be readily available in writing. Develop clear workload policies comparable to those of an approved program of equivalent size and type;~~

(iii) ~~Students shall meet health standards and criminal background check requirements established by the program. Provide substantive, periodic workshops or presentations devoted to faculty development;~~

(iv) Provide formal mentoring by established peers for new full-time and part-time faculty; and

(v) Provide formal orientation for new adjunct faculty.

(f) Program Evaluation: Faculty Standards. All faculty shall:

(i) ~~Overview. The program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement. Hold an active, unencumbered, single state Wyoming or multi-state RN or APRN license;~~

(ii) ~~Principles. The program evaluation shall include the methodology, frequency,~~

~~assignment of responsibility, and evaluative criteria in the following areas: Demonstrate pedagogical competence by:~~

~~(A) Protection of patient safety. Including, but not limited to: tracking of medication errors, unusual/sentinel events, or training in QSEN competencies; A graduate degree in nursing education; or~~

~~(B) Student retention, attrition, and on-time program completion rates; A minimum of ten (10) hours of educational preparation obtained within six (6) months of hire date which shall include:~~

~~(I) Methods of instruction including the use of technology;~~

~~(II) Teaching in clinical practice settings;~~

~~(III) Teaching in simulation settings;~~

~~(IV) How to conduct assessments, including test item writing; and~~

~~(V) Management of the educational environment such as legal and ethical issues, diversity, and incivility.~~

~~(C) NCLEX pass rates which are at least 75% for one year for graduates taking the examination for the first time for pre-licensure programs;~~

~~(D) Trend data/action related to NCLEX performance or certification exam;~~

~~(E) Assessment of faculty performance;~~

~~(F) Trend data/action planning related to employer and graduate satisfaction;~~

~~(G) Program complaints/grievance review and resolution; and~~

~~(H) Program improvement initiatives related to program outcomes.~~

~~(g) Prelicensure Faculty. Full and part-time prelicensure faculty shall meet the following educational requirements:~~

~~(i) Graduate degree in nursing; or~~

~~(ii) Obtain a graduate degree in nursing within five (5) years of hire date. The administrator shall:~~

~~(A) Notify the Board, in writing, within thirty (30) days of the hire of a non-graduate prepared faculty member; and~~

~~(B) Submit a written plan, within six (6) months of the date of hire, outlining~~

how this faculty member will obtain a graduate degree within the specified time frame.

(iii) Adjunct or part-time clinical faculty shall be educationally prepared with a minimum of a baccalaureate degree in nursing.

(iv) A minimum of fifty percent (50%) of the full-time faculty shall hold a graduate degree with a major in nursing.

(h) Post-licensure Faculty. Faculty teaching in a post-licensure program shall be educationally prepared with a graduate degree in nursing.

(j) APRN Faculty. Faculty teaching in an APRN program shall:

(i) Be educationally prepared with a graduate degree in nursing; and

(ii) Demonstrate at least two (2) years of APRN clinical experience.

(k) Interprofessional Faculty. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.

(l) Preceptors.

(i) Preceptors may be used to enhance faculty-directed clinical learning experiences.

(ii) Programs shall clearly define the role and performance expectations for preceptors with respect to teaching, supervision, and student evaluation.

(iii) Preceptors shall:

(A) Hold a current unencumbered license as an RN or APRN or unencumbered privilege to practice in the jurisdiction where the clinical practicum is conducted; and

(B) Demonstrate competency related to the area of assigned clinical teaching responsibilities.

(m) Students.

(i) The program shall admit students based upon the number of faculty, available educational facilities, resources, and the availability of clinical learning experiences.

(ii) The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study.

(iii) All policies relevant to applicants and students shall be readily available in writing.

(n) Program Evaluation.

(i) The program shall implement a self-evaluation plan which is updated at least yearly and shall be submitted to the Board upon request.

(ii) The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.

(A) If the evaluation report to the national nursing education accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the standards pursuant to this chapter are found in the report.

Section 5. Process for Approval of New Programs. Standards for Simulation in Prelicensure Programs.

(a) ~~Step 1— Submit New Program Proposal.~~ A prelicensure nursing education program may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours per course. A program that uses simulation shall adhere to the standards set in this section.

~~(i) —Timeframe.~~ At least fifteen (15) months prior to admitting students, the parent institution shall submit to the Board a statement of intent to establish a program and a proposal.

~~(ii) —Statement of Intent.~~ The statement of intent shall address:

~~(A) —~~ Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;

~~(B) —~~ Employment opportunities for program graduates; and

~~(C) —~~ Potential effects on other programs in Wyoming.

~~(iii) —Proposal.~~ The proposal shall address how the program will comply with the standards of nursing education identified in Section 3. At a minimum, the proposal shall include:

~~(A) —~~ Purpose, mission, and level of the proposed program;

~~(B) —~~ Evidence of parent institution and other pertinent governing bodies approval and support;

~~(C) —~~ Accreditation status of the parent institution;

~~(D) —~~ Organizational structure of the educational institution documenting the relationship of the program within the parent institution;

~~(E) —~~ Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;

~~(F) — Documentation of adequate academic facilities and staff to support the program;~~

~~(G) — Source and description of adequate clinical resources for the level of program;~~

~~(H) — Availability of qualified administrator and faculty;~~

~~(J) — Evidence of community support;~~

~~(K) — Anticipated student population; and~~

~~(L) — Proposed time line for planning and initiating the program.~~

~~(iv) *Board Action.* After review of the initial proposal, the Board may grant or deny permission to proceed to submit an application for provisional approval.~~

~~(b) Step 2 — Preparation for Submission of the Application for Provisional Approval. Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation.~~

~~(i) *Timeline.* Between fifteen (15) and twelve (12) months prior to admitting students, the parent institution shall prepare for submission of the application for provisional approval.~~

~~(ii) *Preparation.* The parent institution shall:~~

~~(A) — Appoint/hire an administrator;~~

~~(B) — Develop a written proposed program plan in accordance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. In addition, the proposed program plan shall include:~~

~~(I) — Program content;~~

~~(II) — Schedule (course sequence);~~

~~(III) — Course descriptions;~~

~~(IV) — Contracts for clinical sites;~~

~~(V) — Self study evaluation; and~~

~~(VI) — Course syllabi.~~

~~(C) — Establish student policies for admission, progression, retention, and graduation; and~~

~~(D) — Request that the Board conduct a site visit.~~

(c) Step 3—Submit Application for Provisional Approval. The program shall have appropriate facilities for conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation.

(i) ~~Timeline.~~ At least twelve (12) months prior to admitting students, the parent institution shall submit a provisional application which demonstrates that the requirements in subsection (b) are met.

(ii) ~~Committee Review.~~ After reviewing the application for provisional approval, the Committee may recommend that the Board grant or deny provisional approval. If the Committee recommends denial, the parent institution may request in writing a hearing within 180 days.

(iii) ~~Board Action.~~ After review of the application for provisional approval, the Board may grant or deny provisional approval. Provisional approval shall be valid for twenty-four (24) months following graduation of the first cohort.

(d) Step 4—Preparation for Admission of Students. Faculty involved in simulations shall have training in the use of simulation.

(i) ~~Timeline.~~ Between twelve (12) months and six (6) months prior to admitting students, the parent institution shall prepare for the admission of students.

(ii) ~~Preparation.~~ The parent institution shall hire sufficient faculty and notify the Committee of those appointments.

(iii) ~~Committee Review.~~ After verifying all components and processes are complete and in place, the Committee shall notify the program that it may admit students.

(e) Step 5—Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort. The program shall have written policies and procedures on the following:

(i) Method of debriefing each simulated activity; and

(ii) Plan for orienting faculty to simulation.

(f) Step 6—Submit Application for Initial Full Approval. The program shall develop criteria to evaluate the simulation activities, including student evaluation of simulation experience.

(i) ~~Timeline.~~ Within eighteen (18) months after graduation of the first cohort, the program shall submit an application for initial full approval which includes a self study evaluation and participate in a site visit to be conducted by the Board.

(ii) ~~Committee Review.~~ After reviewing the application for initial full approval, the Committee may recommend that the Board grant or deny initial full approval. If the Committee recommends denial, the program may request in writing a hearing within 180 days.

(iii) ~~Board Action.~~ After review of the application for initial full approval, the Board may grant or deny initial full approval.

Section 6. Annual Report. All programs, excluding those with provisional approval, shall submit an annual report on or before October 31 to the Board. The annual report shall include: **Home State/Jurisdiction Nursing Education Programs.**

(a) ~~Program compliance report;~~ Any program with legal domicile within Wyoming shall obtain and maintain Board approval for any prelicensure or post-licensure program as pursuant to Sections 8 through 13 of this chapter.

(b) ~~Projected program changes;~~

(c) ~~Faculty data forms; and~~

(d) ~~Current college catalog.~~

Section 7. Process for Continuing Full Approval. Host State/Jurisdiction Nursing Education Programs.

(a) ~~Evaluation of Program.~~ Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4. When acting as the host state (i.e., the parent institution has legal domicile outside of Wyoming), all programs shall document current registration with the Wyoming Department of Education or National Council for State Authorization Reciprocity Agreement (SARA) approval.

(b) ~~Timeline.~~ Prelicensure.

(i) ~~If the program is accredited by a national nursing accreditation agency, the evaluation process shall occur at least every ten (10) years.~~ Programs seeking to operate a prelicensure program in Wyoming shall meet the same standards required of home state/jurisdiction nursing education programs. Programs shall:

(A) Obtain and maintain Board approval;

(B) Maintain general, programmatic, and reporting standards for prelicensure nursing education programs as defined in Sections 3, 4, and 9; and

(C) Instruct students to use the NCLEX program code corresponding to a Wyoming Board approved program.

(ii) ~~If the program is not accredited by a national nursing accreditation agency, the Board shall evaluate the program at least every five (5) years.~~ Prelicensure programs seeking permission to either use a Wyoming clinical facility for a portion of a class or to place an individual student for a precepted experience shall submit the following:

(A) Description of the planned educational experience;

- (B) Rationale for the use of Wyoming facilities;
- (C) Documentation of home state/jurisdiction program approval; and
- (D) Documentation of faculty/preceptor licensure.

(I) Faculty who teach only didactic content or supervise a student/preceptor pair, where direct patient care is not provided, shall be licensed in the home state.

(II) Preceptors and faculty providing patient care in Wyoming shall have an active, unencumbered Wyoming, or multi-state RN or APRN license.

(c) Evaluation Process, Post-Licensure.

(i) ~~*Nationally Accredited Programs.* If the program is accredited by a national nursing accreditation agency, the evaluation process may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending review. The Board may accept the self study evaluation submitted to the accrediting body. The program shall submit the results of accrediting body survey to the Board.~~ Post-licensure programs are not required to have Board approval but shall:

(A) Notify the Board in writing when a student will be completing a clinical learning experience in Wyoming.

(B) Execute a written contract with the cooperating clinical facility as defined in Section 3, (d) and (e).

(ii) ~~*Non-Nationally Accredited Programs.* If the program is not accredited by a national nursing accreditation agency, the Board shall review and analyze various sources of information regarding program performance including, but not limited to:~~

(A) ~~Review of annual reports since the last evaluation;~~

(B) ~~Self study evaluation; and~~

(C) ~~Site visit.~~

(d) ~~Committee Review. After reviewing the evaluation documentation, the Committee may recommend that the Board grant or deny continuing approval. If the Committee recommends denial, the program may request in writing a hearing within 180 days.~~

(e) ~~Board Action. After review of the evaluation documentation, the Board may grant or deny continuing approval to the program.~~

Section 8. Site Visit Conducted by the Board. Process for Approval of New Programs.

(a) Pre-Site Visit Process. Step 1 – Submit new program proposal.

~~(i) At least three (3) months prior to the site visit, the Board shall notify the program of the site visit. Timeframe. At least nine (9) months prior to admitting students, the parent institution shall submit to the Board a statement of intent to establish a program and a proposal.~~

~~(ii) Thirty (30) days prior to the scheduled site visit, the program shall submit the self-study evaluation or plan of correction to the Board. Statement of Intent. The statement of intent shall address:~~

(A) Rationale for the establishment of the program including documentation of the present and future need for the program in Wyoming;

(B) Employment opportunities for program graduates within the geographic region(s) of the proposed program; and

(C) Potential impact on other established programs in Wyoming which shall include:

(I) An analysis of the current usage of potential clinical site(s) in the area; and

(II) A projection of how the addition of the program will impact use of clinical site(s) by established programs.

~~(iii) The program shall schedule all site visit activities. Proposal. The proposal shall address how the program would comply with the standards of nursing education defined in this chapter. At a minimum, the proposal shall include:~~

(A) Purpose, mission, and level of the proposed program;

(B) Evidence of parent institution and other pertinent governing bodies approval and support;

(C) Accreditation status of the parent institution;

(D) Selection of a national nursing accreditation agency recognized by the Board;

(E) Organizational structure of the educational institution documenting the relationship of the program within the parent institution;

(F) Evidence of financial resources adequate for the planning, implementation, and continuation of the program including budgeted faculty and support positions;

(G) Documentation of adequate academic facilities, including access to a library;

(H) Description of proposed instructional modalities and resources to support these modalities;

(J) Source and description of adequate clinical resources for the level of

program;

- (K) Availability of qualified administrator and faculty;
- (L) Evidence of community support demonstrated by letters of support from proposed clinical site(s) and community leaders;
- (M) Anticipated student population and enrollment;
- (N) Proposed time line for planning and initiating the program; and
- (O) If the parent organization operates program(s) in another jurisdiction(s) the applicant shall submit:

- (I) NCLEX or certifying exam results for the past three (3) years for graduates taking the examination for the first time;

- (II) The most recent program accreditation report;

- (III) Documentation of full approval by a nursing or educational regulatory agency that provides oversight of the program, such as a board of nursing from the home state/jurisdiction; and

- (IV) Documentation of any complaints or grievances from students, clinical facilities, or the public within the past three (3) years and evidence of resolution.

- (iv) The applicant shall respond to any Board requests for additional information.

- (v) New program application shall not be considered for prelicensure programs operating in Wyoming or any other jurisdiction(s) who cannot demonstrate a three (3) year average NCLEX pass rate of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time.

- (vi) Board Action. After reviewing the initial proposal, the Board may grant or deny permission to submit an application for developmental approval.

- (b) Post Site Visit Report. Step 2 – Submit Request for Developmental Approval.

- (i) Following a site visit, the Board shall provide a report of its findings to the program. Timeline. At least six (6) months prior to admitting students, the parent institution shall submit a request for developmental approval.

- (ii) The program may respond to the report with additional information within ninety (90) days. Request for Developmental Approval. The request for developmental approval shall include verification the following program components and processes have been addressed:

(A) Appoint/hire an administrator pursuant to Section 4 and notify the Board of that appointment;

(B) Provide evidence the nursing program is actively seeking accreditation from a national nursing accreditation agency recognized by the Board;

(C) Develop a written, proposed program plan in accordance with the standards of nursing education and the programmatic standards as defined in Sections 3 and 4. In addition, the proposed program plan shall include:

(I) Program content;

(II) Schedule (course sequence);

(III) Course descriptions;

(IV) Contracts for clinical sites;

(V) Development of a self-evaluation plan as defined in Section 2 (w);

(VI) Course syllabi; and

(VII) Identification of faculty needed, including number and experiential qualifications.

(D) Establish student policies for admission, progression, retention, remediation and graduation; and

(E) Request that the Board conduct a site-visit.

~~(iii) Following review of the program's response, the Board shall issue a final decision. Written notification of the final decision shall be sent to the parent institution and the administrator. Site-visit. A representative of the Board shall complete an on-site survey of the proposed program, pursuant to Section 11.~~

(iv) Committee Review. In determining whether to recommend approve of the application the Committee shall consider all evidence, including, but not limited to:

(A) The proposed program plan;

(B) The survey report;

(C) Comments from the petitioning institution;

(D) Public comments; and

(E) The status of other nursing programs operated by the parent institution.

(v) The Committee may recommend the Board grant or deny developmental approval. If the Committee recommends denial, the parent institution may request in writing, a hearing within one-hundred eighty (180) days.

(vi) Board Action. After review, the Board may grant or deny developmental approval. Developmental approval shall remain valid until the Board reviews the program following graduation of the first class and submission of the results of NCLEX or applicable certification exam.

(c) Step 3 – Preparation for the Admission of Students.

(i) Timeline. At least three (3) months prior to admitting students, the parent institution shall prepare for the admission of students.

(ii) Preparation. The parent institution shall notify the Board when the following conditions have been met:

(A) There are sufficient qualified nurse educators pursuant to Section 4 and the Board has been notified of those appointments;

(B) Readiness for clinical instruction meeting the rules pursuant to Section 4 (b) including;

(I) Signed clinical contracts with adequate clinical placement for the maximum number of students enrolled at one time; and

(II) Clinical facilities and equipment for practice of skills and simulation.

(C) There is evidence of academic and student services that will allow the program to meet planned objectives and the needs of students;

(D) The parent institution has received approval to operate a nursing education program by an accrediting body recognized by the United States Department of Education; and

(E) There is at least one (1) signed agreement for the articulation of undergraduate students to proceed to the next level of nursing education. The program(s) selected for the agreement shall:

(I) Meet the requirements for accreditation approval stipulated in Section 3 (b);

(II) Allow the student to complete their education while retaining Wyoming residency.

(F) There is evidence of readiness for admission of students.

(iii) Site-visit. The Board may request an on-site survey of the proposed program.

(iv) Board Review. After verifying all components and processes are complete and in place, the Board shall notify the program it may admit students.

(d) Step 4 – Program Reporting Obligations Following Admission of Students. After admission of students, the program shall submit quarterly narrative progress reports to the Board or as requested until graduation of the first cohort.

(e) Step 5 – Submit Request for Initial Full Approval.

(i) Timeline. Within six (6) months, after graduation of the first cohort, the program shall submit a request for initial full approval.

(ii) Self-Evaluation Plan. The program shall develop and submit an updated self-evaluation plan.

(iii) Site-visit. A representative of the Board shall conduct an on-site survey of the program.

(iv) Committee Review. The Committee shall consider all evidence, including the self-evaluation plan, the survey report, comments from the petitioning institution, and public comments in considering the request for full approval. The Committee may recommend the Board grant or deny approval. If the Committee recommends denial, the parent institution may request in writing a hearing within one-hundred eighty (180) days.

(v) Board Action. After review of the request for initial full approval, the Board may grant or deny initial full approval.

Section 9. Denial or Withdrawal of Approval for Programs. Reports and Notification.

(a) Noncompliance. ~~If the Committee finds that a program is not in compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4, the Committee shall provide written notice of deficiency(s) to the administrator of the parent institution and the administrator.~~ NCLEX Results. All prelicensure programs operating in Wyoming shall demonstrate NCLEX pass rates of eighty percent (80%) or higher for all graduates of the program taking the examination for the first time between January 1 and December 31 in any jurisdiction.

(i) LPN and RN pass rates shall be evaluated separately.

(ii) Within three (3) months of receiving NCLEX results below the eighty percent (80%) requirement, the program shall submit a plan to the Board for assessment and improvement including expected outcomes and timelines.

(iii) The Board may initiate a complaint as pursuant to Section 13 for programs with NCLEX rates that remain below eighty percent (80%) for a period of two (2) years.

(b) Notice of Deficiency(s). ~~The written notice shall:~~ Annual Report. All programs operating in Wyoming, excluding those with provisional approval, shall submit an annual report with the date and format specified by the Board.

(i) ~~Enumerate or identify the deficiency(s); and~~

(ii) ~~Based on the number and severity of deficiency(s), establish a reasonable period of time to correct the deficiency(s), not to exceed (18) months.~~

(c) Program Response to Notice of Deficiency(s). ~~Within thirty (30) days from the date of mailing the notice of deficiency(s), the administrator shall:~~ The program shall submit a copy of any accreditation related correspondence with the national nursing accrediting agency to the Board within thirty (30) days of receipt.

(i) ~~Submit a plan of correction to the Committee for review; or~~

(ii) ~~Request a hearing before the Board.~~

(d) Committee Review. ~~After reviewing the plan of correction, the Committee may:~~ Unplanned Program Changes. The program shall notify the Board in writing within thirty (30) days of significant, unplanned program changes including, but not limited to:

(i) ~~Recommend approval of the plan of correction;~~ Change in accreditation status;

(ii) ~~Recommend that the Board conduct a site visit of the program;~~ Change in the nurse administrator of the program;

(iii) ~~Recommend conditional approval pending submission of a revised plan of correction; and/or~~ Appointment of new faculty members; or

(iv) ~~Recommend withdrawal of program approval.~~ Any unanticipated, substantive change reported to the nursing accrediting agency.

(e) Program's Request for Hearing. ~~If the Committee recommends withdrawal of program approval, the program may request in writing a hearing within 180 days.~~ Planned Program Changes. The program shall notify the Board of any planned, substantive change in curriculum or program. This notice shall occur in writing, at least two (2) months prior to planned implementation.

(f) Board Action. ~~Upon a recommendation from the Committee or following a hearing, the Board may:~~

(i) ~~Dismiss the written notice of deficiency(s);~~

(ii) ~~Order the program to submit a plan of correction, including reporting obligations;~~

- (iii) ~~Conduct a site visit of the program;~~
- (iv) ~~Approve the Committee's recommendation;~~
- (v) ~~Withdraw full approval and order a plan of correction placing the program on conditional approval; and/or~~
- (vi) ~~Withdraw approval of the program.~~

Section 10. Reinstatement. ~~A program may petition for reinstatement of approval by submitting evidence of compliance with the standards of nursing education and the programmatic standards identified in Sections 3 and 4.~~ **Process for Continuing Full Approval.**

(a) Timeline. Programs with full approval status shall be evaluated at least every ten (10) years to ensure continuing compliance with the requirements of this chapter.

(b) Evaluation Process. The evaluation process shall include submission of a self-evaluation plan and may include a site-visit by a representative(s) of the Board and a request for public comment. This evaluation may be made in conjunction with the national nursing accreditation visit. The program shall notify the Board of the dates of an impending accreditation review.

(c) Self-Evaluation Plan. The evaluation report prepared by the program for the national nursing education accreditation body may be substituted in lieu of the required self-evaluation plan.

(i) If the report to the accreditation body is submitted in lieu of the self-evaluation plan, the program must submit an addendum addressing where the requirements of this chapter are found in the report.

(d) Determination of Approval Status.

(i) Committee Review. The committee shall review and analyze various sources of evidence regarding program performance, including, but not limited to:

- (A) Periodic Board survey visits and/or reports;
- (B) Annual report data;
- (C) National nursing accreditation survey report and accreditation-related correspondence; and
- (D) The report of ongoing self-evaluation.

(ii) Committee Action. After reviewing the evaluation documentation, the Committee may recommend the Board grant or deny continuing approval.

(iii) Board Action. After review of the Committee recommendation, the Board may grant or deny continued full approval.

(A) If the Board recommends denial, a formal complaint will be initiated pursuant to Section 13.

Section 11. Closure of Nursing Education Program. Site Visit Conducted by the Board.

(a) Voluntary Closing. Pre-Site Visit Process.

(i) When the parent institution decides to close a program, it shall notify the Board in writing stating the reason(s) for closure, the plan for discontinuation, and the intended date of closure. Any site visit shall be scheduled at least three (3) months in advance on a mutually acceptable date. The visit may be scheduled in conjunction with the national nursing accreditation body survey visit.

(ii) When closing a program, the parent institution shall: Thirty (30) days prior to the scheduled site visit, the program shall submit the self-evaluation or plan of correction to the Board.

(A) Continue the program until the last class enrolled is graduated; or

(B) Assist in the transfer of students to other Board-approved programs.

(iii) The program shall meet the standards of nursing education and the programmatic standards identified in Sections 3 and 4 until the date of closure. The Board representative shall use a site visit template to assess program quality indicators and warning signs.

(iv) The date of closure is the date on the degree, diploma, or certificate of the last graduate or the date on which the last student was transferred. The program shall be asked to participate in scheduling site visit activities.

(b) Closing as a Result of Withdrawal of Approval. Post Site Visit Report.

(i) Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program and transfer of students to other Board-approved programs. Following a site visit, the Board shall provide a report of its findings to the program.

(ii) The date of closure is the date on which the last student was transferred. The program may respond to the report with additional information within ninety (90) days.

(c) Storage of Records. The Board shall be advised of the arrangements for storage of permanent records.

Section 12. Out-of-State Program(s)/Course(s) Including Distance Education. Periodic Evaluation.

(a) Pre-Licensure Out-of-State Program Approval. An out-of-state program seeking to

~~provide students with pre-licensure clinical learning experiences in Wyoming shall obtain Board approval. Periodic Evaluation. Periodic evaluation and site visit may be initiated at any time. Warning signs that may trigger this review may include, but are not limited to:~~

~~(i) The Board may accept an out of state programs that has been approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located. Such approval shall meet or exceed approval requirements established in this chapter. Denial, withdrawal, or change of program or institution accreditation status;~~

~~(ii) If an out of state program is not approved by the regulatory body, such as a board of nursing, in that jurisdiction where the program is located, the program shall apply for Board approval. Turnover of program administrators, defined by more than three (3) in a five (5) year period;~~

~~(iii) Frequent nursing faculty turnover or cut in the number of nursing faculty;~~

~~(iv) Failure to achieve NCLEX pass rate requirement defined in Section 9 (a) or decreasing trend in NCLEX pass rates;~~

~~(v) Evidence of non-compliance with remediation plan by programs with deficiencies or violations;~~

~~(vi) Significant complaint(s) or grievances from students, faculty, clinical facilities, or the public;~~

~~(vii) Knowingly providing false or misleading information to students or the public concerning the nursing program; or~~

~~(viii) The Board being in possession of information indicating the program may not be in compliance with the requirements of this chapter.~~

~~(b) Out-of-State Course Approval.~~

~~(i) *Timeline.* At least two (2) months prior to the start date of the clinical course, an out of state program shall submit a completed course approval application.~~

~~(ii) *Application Requirements.* The applicant shall provide:~~

~~(A) Parent institution's current registration with the Wyoming Department of Education or be designated as a participating institution by the National Council for State Authorization Reciprocity Agreements (SARA);~~

~~(B) Proof of parent institution's accreditation by an accrediting body recognized by the United States Secretary of Education for pre-licensure programs;~~

~~(C) Proof of faculty and preceptors qualifications identified in Section 4; and~~

~~(D) Course and student information.~~

(iii) ~~Reporting Obligations. Programs with approval clinical placements in Wyoming shall be required to complete an abbreviated annual education report.~~

Section 13. Approval of Certification Courses. Denying and Withdrawing Approval.

(a) ~~The Board shall establish standards and approve certification courses for CNA II, MA-C, and LPN IV.~~ Complaint Review Process. Any person may submit a complaint to the Board that a nursing education program has failed to meet the requirements of this chapter.

(i) The Board staff may initiate complaints on their own motion.

(ii) Complaints must contain the name, address, and signature of the person making the complaint.

(iii) The Board shall assign each complaint to the Committee for review and to make a recommendation.

(iv) The Board shall notify the nursing education program of the complaint by mail.

(b) ~~Board approved courses shall be offered and administered by:~~ Committee Review.

(i) ~~A program in a post secondary institution of higher learning in Wyoming;~~ Upon receiving a complaint, the Committee shall review the complaint to determine if it merits investigation.

(ii) ~~A Board approved program;~~ The Committee may request additional information from the nursing education program or meet informally with the nursing education program.

(iii) ~~An approved provider of continuing education; or~~

(iv) ~~A licensed health care facility.~~

(c) Notice of Deficiency.

(i) If the Committee believes the complaint states a valid claim that a nursing education program has failed to meet the requirements of this chapter, the Committee shall send a notice of deficiency to the nursing education program's administrator identifying and briefly explaining the program's deficiency.

(ii) The nursing education program shall have thirty (30) days to respond to a notice of deficiency with a written plan to correct the deficiency or explanation why there is no deficiency.

(d) Committee Recommendation and Notice of Intent.

(i) After investigating the allegations in the complaint and receiving any response from the nursing education program, the Committee may recommend the Board:

(A) Deny approval of a nursing education program;

(B) Withdraw approval of a nursing education program; or

(C) Place conditions and restrictions on approval of a nursing education program for failing to meet the requirements of this chapter.

(ii) If the Committee recommends the Board deny approval of a nursing education program, withdraw approval of a nursing education program, or place conditions and restrictions on approval of a nursing education program, the Committee shall notify the applicant of its recommendation.

(iii) The Notice of Intent shall contain:

(A) A brief description of the facts or conduct the Committee alleges warrant its recommendations;

(B) Citations to the applicable sections of this chapter the Committee alleges the nursing education program violated;

(C) Notice that the nursing education program may respond in writing to the allegations within thirty (30) days of the date the Committee mailed the Notice of Intent; and

(D) Notice that an applicant may request a hearing before the Board if the nursing education program responds in writing within thirty (30) days of the date the Committee mailed the Notice of Intent.

(e) Program's Response to Notice of Intent. The nursing education program shall have thirty (30) days from the date the Committee mailed the Notice of Intent to respond. The applicant may:

(i) Request the Board hold a hearing on the Committee's recommendation;

(ii) Request the Board table consideration of the application; or

(iii) Withdraw their application.

(f) Program's Failure to Respond to Notice of Intent. If a nursing education program fails to timely respond to the Notice of Intent, the Board may accept the Committee's recommendation.

(g) Notice of Hearing.

(i) Upon receipt of a written request for a hearing from a nursing education program, the Board shall conduct a hearing. Board staff shall serve a Notice of Hearing on the nursing education program at least thirty (30) days prior to the hearing.

(ii) The Notice of Hearing shall contain:

(A) A brief statement of the matters asserted, including the Committee's recommendation, the facts upon which the Committee's recommendation is based, and the sections

of this chapter that the Committee alleges the nursing education program failed to meet:

- (B) The time, place, and nature of the hearing;
- (C) The legal authority and jurisdiction for the hearing; and
- (D) The applicable burden and standard of proof.

(h) Contested Case. A hearing officer shall preside over the formal contested case hearing and shall conduct the hearing according to the Wyoming Administrative Procedure Act and Chapter 2 of the Office of Administrative Hearings rules concerning contested proceedings as referenced in Chapter 1, Section 6.

(j) Burden of Proof. The Committee shall bear the burden to prove by clear and convincing evidence the nursing education program failed to meet the requirements of this chapter.

(k) Board Order.

(i) The Board may resolve a complaint by denying approval of a nursing education program, withdrawing approval of a nursing education program, or imposing conditions on a nursing education program's approval.

(ii) The Board shall issue a written order. The order shall be sent to the nursing education program by regular U.S. mail.

(iii) No Board action shall be effective until the date the written order is approved by the Board and entered into the administrative record.

(l) Dismissal of Default. If a nursing education program fails to appear at a noticed hearing, the Committee may request the Board enter default against the program.

(i) In entering a default, the Board may:

(A) Order the allegations in the Committee's recommendation to be taken as true for the purposes of the hearing; or

(B) Order the nursing education program may not present evidence on specific issues in the case.

(ii) The nursing education program may request the Board lift its entry of default. The Board may lift its entry of default if the program demonstrates good cause for failing to appear at the noticed hearing.

(m) Lawful Service. There shall be a presumption of lawful service of any communication required by these rules if sent to the last known address of the nursing education program by regular U.S. mail.

(n) Voluntary Surrender. A nursing education program may petition the Board in writing to voluntarily withdraw their program approval in Wyoming. The Board may accept the

program's voluntary surrender at a public meeting.

(o) Petition for Judicial Review. Petitions for judicial review from decisions or orders of the Board are governed by the Wyoming Administrative Procedure Act and the Wyoming Rules of Appellate Procedure.

Section 14. Reinstatement. A program may petition for reinstatement of approval by submitting evidence of compliance with the requirements of this chapter.

Section 15. Closure of Nursing Education Program.

(a) When closing a program, the parent institution shall:

(i) Continue the program until the last class enrolled is graduated; or

(ii) Assist in the transfer of students to other Board-approved programs; and

(iii) Advise the Board of the arrangements for secure storage and access to academic records and transcripts.

(b) The program shall meet the requirements of this chapter until the date of closure.

(c) The date of closure is the date on the degree, diploma, or certificate of the last graduate or the date on which the last student was transferred.

(d) Closing as a Result of Withdrawal of Approval. Within thirty (30) days of a Board order withdrawing approval of a program, the parent institution shall submit a written plan for termination of the program.

Section 16. Approval of Certification Courses

(a) The Board shall establish standards and approve certification courses for:

(i) CNA II;

(ii) Home Health Aides;

(iii) Medication Aide-Certified (MA-C); and

(iv) LPN Intravenous (IV) Certification.

(b) The Board shall review and approve nurse refresher courses.