

**ALABAMA BOARD OF NURSING**

**New Nursing Program Application Phase I**

<b>Governing Institution</b>	<b>Information</b>	<b>Contact Information</b>
<b>Name</b>		<b>Phone:</b> <b>Email address:</b>
<b>Address</b>		
<b>New Program Name</b>		
<b>Type of Program Requested</b>		
<b>Type of degree/certificate awarded</b>		
<b>College</b>		
<b>Address (if different from above)</b>		
<b>President</b>		<b>Phone:</b> <b>Email address:</b>
<b>Dean</b>		<b>Phone:</b> <b>Email address:</b>
<b>Nursing Director</b>		<b>Phone:</b> <b>Email address:</b>

RULES	DATA TO BE SUBMITTED IN NARRATIVE AS EVIDENCE												
<b>A. Letter of Intent</b>	Content should include: <ul style="list-style-type: none"> <li>• Governing institution information</li> <li>• Accrediting agencies (national , state, and/or specialty)</li> <li>• Type of nursing program to be established</li> </ul>												
<b>B. Feasibility Study</b>													
<b>I. Purpose of establishing the new nursing education program.</b>	Content should include: The need for the nursing program <ul style="list-style-type: none"> <li>➤ Type of health disorders of constituents</li> <li>➤ Health care needs of constituents</li> <li>➤ Number of residents and type of prevalent health conditions</li> <li>➤ The number of vacant nursing positions in the area, state, nation</li> <li>➤ The number of graduates produced in the area annually</li> <li>➤ The number of facilities in the area that employ nurses</li> <li>➤ Job placement rates in the area</li> </ul>												
<b>II. Availability of health care agencies with sufficient practice experiences to support the program. Letters of commitment and contract proposals are accepted documents for inclusion to demonstrate meeting the standard.</b>	<ul style="list-style-type: none"> <li>➤ Type and number of acute care facilities, number of beds, services provided</li> <li>➤ Type and number of skilled care facilities, number of beds, services provided</li> <li>➤ Type of long term care/assisted living facilities, home health/community based facilities.</li> <li>➤ Copy of affiliation agreement/clinical contracts</li> </ul> Comments:												
<b>III. Enrollment projections and identification of potential students.</b>	Recruitment Strategies/Plan and Timeline <ul style="list-style-type: none"> <li>➤ Target groups (high school, Community Colleges, Health care facilities, PCTs, etc.)</li> <li>➤ Preparation/Remediation classes</li> <li>➤ Projected Enrollment</li> <li>➤ Recruitment Data to be included/Timeline (Grid is just an example (below) of information to be included):</li> </ul> <table border="1" data-bbox="821 1276 1906 1417"> <thead> <tr> <th data-bbox="821 1276 1312 1330">Strategy</th> <th data-bbox="1312 1276 1612 1330">Number of students recruited</th> <th data-bbox="1612 1276 1906 1330">Anticipated Date of recruitment</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Strategy	Number of students recruited	Anticipated Date of recruitment									
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	<ul style="list-style-type: none"> <li>➤ Include a 5 year projection and Gantt Chart</li> </ul>
<p><b>IV. Availability of adequate educational facilities and practice sites for clinical learning experiences throughout the life span including evidence of clinical space availability for additional new students in the area.</b></p>	<p>Data from below sources indicate that resources are sufficient to meet the outcomes of the nursing education program.</p> <p>Is there adequate classroom space?</p> <ul style="list-style-type: none"> <li>➤ Describe the space</li> <li>➤ Provide a diagram of space</li> <li>➤ Provide a utilization chart <ul style="list-style-type: none"> <li>➤ Does lab space allow students adequate time to practice skills?</li> <li>➤ Is lab manned?</li> <li>➤ Are the hours flexible enough to promote student utilization?</li> <li>➤ Are computer labs/study rooms available for student use? What are the hours of operation?</li> <li>➤ Do students have access to on-line databases?</li> <li>➤ Are they adequate?</li> <li>➤ Are the journals on the library shelves current?</li> <li>➤ What processes are used to determine journal subscriptions or which books are ordered?</li> <li>➤ What support/clerical services are available for faculty/students?</li> <li>➤ Are clinical contracts/agency agreements current?</li> <li>➤ Do clinical contracts/agency agreements reflect settings that will facilitate accomplishment of clinical/ program objectives?</li> </ul> </li> <li>➤ Number of clinical sites for student rotation</li> <li>➤ Number of student clinical days available in each practice setting and at each clinical site (Medical Surgical, Critical Care, Women’s Health, Pediatric etc.)</li> <li>➤ Copies of signed clinical agency agreements for each clinical site</li> <li>➤ Provide a proposed master clinical rotation/staffing grid</li> </ul> <p>Other</p>
<p><b>V. Assurance of adequate financial resources to support the initial and continuing program including submission of the proposed initial budget continuing budget. Financial statements of the</b></p>	<p>Data from below sources indicate that resources are sufficient to meet the outcomes of the nursing education program.</p> <p>Provide evidence that the program director and faculty had input into preparing the budget (Budget minute meetings, Request for faculty or staff positions, etc.)</p>

<p><b>governing institution for the past two fiscal years are accepted documents for inclusion to demonstrate evidence of financial stability of the governing institution.</b></p>	<p>What percentage of total operating costs is designated for faculty salary?</p> <ul style="list-style-type: none"> <li>➤ Proposed Initial Budget (Start-Up) for new program</li> <li>➤ Proposed Budget for the next fiscal year after approval</li> <li>➤ Budget for each program as well as, the combined program to include the monies allocated for each type program and total expenditures if indicated.</li> <li>➤ Governing Institutions Fiscal Statements for the past two years.</li> </ul>
<p><b>VI. Plan and resources for recruiting and employing projected number of qualified faculty for theoretical and clinical instruction.</b></p>	<p>Proposed number of faculty</p> <ul style="list-style-type: none"> <li>➤ Congruent with teaching model</li> <li>➤ Recruitment plan and timeline</li> <li>➤ Student to teacher ratio for class, lab, clinical</li> <li>➤ Teaching delivery model</li> <li>➤ Faculty Qualifications Required</li> </ul> <ul style="list-style-type: none"> <li>➤ Total Number of faculty: _____</li> <li>➤ Percentage of faculty with an active unencumbered Alabama registered nurse license.</li> <li>➤ Percentage of faculty with a MSN</li> <li>➤ Percentage of faculty with a master's in a related area</li> <li>➤ Percentage of faculty with a DNP</li> <li>➤ Percentage of faculty with PhD</li> <li>➤ Other: _____</li> </ul> <p><b>Prior years of experience in nursing practice</b>  <b>Prior years of experience in formal nursing education</b>  <b>Academically and Experientially qualified to teach in area</b></p> <ul style="list-style-type: none"> <li>➤ Percentage of faculty with Work experience only in area in which they teach.</li> <li>➤ Percentage of faculty with Educational preparation only in area in which they teach.</li> <li>➤ Percentage of faculty with work and academic preparation in area in which they teach.</li> <li>➤ Job Descriptions</li> <li>➤ Curriculum Vitaes</li> </ul>
<p><b>VII. Timeline for planning and implementation of the proposed program.</b></p>	<p>a) Gantt Chart depicting time-line of project schedule</p>

	Comments:
<b>VIII. Determination of the demand for graduates of specific proposed program in geographical area.</b>	<p>Number of residents and type of prevalent health conditions  Morbidity/mortality rates in city/county/ state  Health care needs of constituents</p> <ul style="list-style-type: none"> <li>➤ The number of vacant nursing positions in the area, state, nation</li> <li>➤ The number of graduates produced in the area annually</li> <li>➤ The number of facilities in the area that employ nurses</li> <li>➤ Job placement rates in the area</li> <li>➤ Type of health disorders of constituents</li> </ul> <p>Comments</p>
<b>IX. Impact on Existing nursing programs within a fifty (50) mile radius of the proposed program.</b>	<ul style="list-style-type: none"> <li>➤ Number of students admitted in other programs</li> <li>➤ Number of qualified students turned away</li> <li>➤ Type of student being recruited/admitted (citizens, non us citizens, non-traditional, etc.)</li> <li>➤ Anticipated outcomes for the citizens of Alabama</li> </ul> <p>Comments:</p>
<b>X. Organizational structure of the governing institution and placement of proposed nursing education program within the overall organization.</b>	<p>Organizational chart that depicts the authority, responsibility, and channels of communication of the nursing program to the governing institution and other comparable programs within the governing institution.</p> <p>Organizational chart is current Date: _____</p> <p>Include the following documents:</p> <ul style="list-style-type: none"> <li>➤ Job description are congruent with Org chart</li> <li>➤ Current organizational chart</li> <li>➤ Proposed Organizational Chart</li> </ul> <p>Comments:</p>
<b>XI. An articulation plan, including agreements, that addresses the transition of students and graduates to other educational institutions.</b>	<p>Explain in narrative:</p> <ul style="list-style-type: none"> <li>➤ Articulation Agreements</li> <li>➤ Transferability of courses</li> <li>➤ Mobility Tracts</li> </ul> <p>Comments:</p>

<b>C. The Board shall review the letter of intent, feasibility study and supporting documentation for completeness and compliance with the rules and regulation.</b>	<b>Documents submitted</b>	<b>Compliant with the Rules</b>	<b>Additional information required</b>
	Letter of Intent		
	Feasibility Study		
	Supporting Documents		

**Please return completed application, with all necessary documentation and check for the \$1,500.00 application fee, to:**

**Alabama Board of Nursing  
 Attention: Nursing Education Programs  
 PO Box 303900  
 Montgomery, Alabama 36130**