**Alabama Board of Nursing**

**Nursing Education Program**

**Self-Compliance Evaluation Tool**

**General Information**

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| --- | --- |
| **Governing Institution** | Click or tap here to enter text. |
| **Governing Institution Administrator** | Click or tap here to enter text. |
| **Nursing Education Program** | Click or tap here to enter text. |
| **Nursing Education Program Administrator**  **Contact Information (telephone number and e-mail)** | Click or tap here to enter text.  Click or tap here to enter text.  Click or tap here to enter text. |
| **Program Licensure Type** | Choose an item. |
| **Program Degree Type** | Choose an item. |
| **RN-Program Code** | Click or tap here to enter text. |
| **PN-Program Code** | Click or tap here to enter text. |
| **Type of Evaluation** | Choose an item. |
| **Date of Submission of Self-Compliance Evaluation Tool** | Click or tap to enter a date. |
| **Purpose of Survey** | Choose an item. |
| **ABN Administrative Code §610-X-3** | Choose an item. |

**All Evaluation Criteria delineated within this document are specified within the ABN Administrative Code §610-X-3-.02 Standards for Approval, ABN Administrative Code §610-X-3-.03 Outcome Standards, and ABN Administrative Code §610-X-3-.05 Additional Requirements for Advanced Practice Nursing Education Programs.**

| **Evaluation Criteria/ ABN Administrative Code §610-X-3** | **Examples of Sources of Evidence** | **Expected Outcome** | **Evidence** |
| --- | --- | --- | --- |
| **Governing Institution** | | | |
| 610-X-3-.02(2) The governing institution, nursing program administrator, and nursing faculty are accountable for the standards, processes, and outcomes of the nursing education program. | Job responsibilities delineated within job descriptions  Systematic Plan of Evaluation (SPE) and/or other evaluative processes including evaluations utilized by the nursing education program  Nursing education program input into the governing institution’s institutional effectiveness process  Minutes of meetings | Documentation provides evidence that the governing institution, nursing program administrator, and nursing faculty are accountable for  the standards, processes, and outcomes of the nursing education program. |  |
| 610-X-3-.02(3) The governing institution offering the nursing program shall be:  (a) A postsecondary education institution that is authorized to offer nursing education and is accredited by an organization recognized by the U.S. Department of Education.  (b) Approved and licensed by the appropriate State of Alabama education agency(ies), as required by law. | Letters of accreditation from the accrediting agency indicating reaffirmation date, next reaffirmation, and findings/status  Websites of accrediting agencies  Governing institution’s website  Catalog/bulletin for governing institution  Approval and licensure documentation by the appropriate State of Alabama Education agency(ies) | The governing institution is accredited by an organization recognized by the US Department of Education.  The governing institution is approved and licensed by the appropriate Alabama state agency(ies), as required by law. |  |
| 610-X-3-.02(4) The governing institution shall provide support and resources sufficient to ensure achievement of student learning and program outcomes. Resources include, but are not limited to:   1. Financial. | Nursing education program budget | Financial resources are sufficient to ensure achievement of student learning and program outcomes. |  |
| 610-X-3-.02(4)(b) Education program physical facilities, if appropriate. | Description of physical facilities  **Educational Facilities Tool** | Physical facilities are sufficient to ensure achievement of student learning and program outcomes. | Simulation facilities addressed under Simulation ABN Administrative Code §610-X-3-.02(12)6.(ii) |
| 610-X-3-.02(4)(c) Instructional and learning equipment. | Description of instructional and learning equipment  Inventories of instructional and learning equipment/materials  Website for library/learning resource center | Instructional and learning equipment are sufficient to ensure achievement of student learning and program outcomes. | Simulation educational and technological resources and equipment addressed under Simulation ABN Administrative Code §610-X-3-.02(12)6 (ii) |
| 610-X-3-.02(4)(d) Technology, to include simulation tools. | Description of technology | Technology is sufficient to ensure achievement of student learning and program outcomes. | Simulation educational and technological resources and equipment addressed under Simulation Learning Experiences ABN Administrative Code §610-X-3-.02(12)6.(ii) |
| 610-X-3-.02(4)(e) Administrative, instructional, and support personnel. | Description of administrative, instructional and support personnel | Administrative, instructional, and support personnel are sufficient to ensure achievement of student learning and program outcomes. | Instructional personnel addressed under the Nursing Education Program – ABN Administrative Code §610-X-3-.02(8). |
| 610-X-3-.02(5) The governing institution’s administrator or program administrator shall notify the Board, in writing, of any substantive changes in the program, including, but not limited to: | Documentation of formal submissions of substantive changes to the Alabama Board of Nursing | Substantive changes are reported to the Alabama Board of Nursing in a timely manner. |  |
| 1. Nursing program administrator. |  |  |  |
| 1. Governing institution administrator, President, CEO, Chancellor, or Provost. |  |  |  |
| 1. Governance structure of the institution. |  |  |  |
| 1. Accreditation status and accreditation status reports related to the governing institution or nursing education program. |  |  |  |
| 1. Ownership or merger of governing institution. |  |  |  |
| 1. Name of the governing institution or nursing education program. |  |  |  |
| 1. Relocation of the governing institution or nursing education program. |  |  |  |
| 1. Significant curriculum changes. |  |  |  |
| 1. Intent to close a program. |  |  |  |
| 1. Expanding or collapsing, combining, or separating programs, including, but not limited to, prelicensure programmatic changes, and clinical/role populations preparing advanced practice registered nurses in an approved graduate nursing   education degree program,  specialty, or sub-specialty track. |  |  |  |
| 1. Reduction in nursing program faculty size exceeding thirty percent. |  |  |  |
| 1. Annual turnover in faculty greater than thirty percent. |  |  |  |
| 1. The percentage of total nursing faculty (full-time, clinical, adjunct, part-time, and other) employed at the institution as full-time faculty falls below thirty percent. |  |  |  |
| 1. Utilization of virtual or simulation lab in lieu of a ‘hands-on’ lab for anatomy and physiology lab. |  |  |  |
| 1. Utilization of virtual or simulation lab in lieu of any required direct clinical hours for national certification examination |  |  |  |
| 610-X-3-.02(6) There shall be an organizational chart that depicts the authority, responsibility, and channels of  communication between the nursing program and the governing institution and other comparable programs within the governing institution. | Governing institution’s organizational chart  If applicable, the nursing education program’s organizational chart. | The organizational chart(s) depicts the authority, responsibility, and channels of communication to the governing organization and other programs. |  |
| **Nursing Education Program** | | | |
| 610-X-3-.02(1) All Alabama prelicensure nursing education programs and advanced practice nursing education programs, including Alabama distance nursing education programs, must be approved by the Alabama Board of Nursing and accredited by a national nursing accrediting agency recognized by the U.S. Department of within five (5) years of Approval by the Board, in the case of a new program. If a program is unable to satisfy this requirement as the result of ineligibility for accreditation due to the existence of a deficiency or order issued by the Alabama Board of Nursing  pursuant to this Chapter, the program shall establish candidacy for accreditation within six (6) months of successful resolution of the deficiency or satisfaction of the terms of the Order. Alabama advanced practice nursing education programs in operation prior to December 31, 2020, are considered in approved status. Advanced practice nursing education programs established in Alabama on or after January 1, 2021, shall obtain Board approval prior to implementation.  (a) Practical nursing programs may satisfy the programmatic accreditation requirements by obtaining accreditation through the Council on Occupational Education (COE). | Letters from the accrediting agency for each applicable nursing program including date of last visit, next visit, accreditation status/stipulations  Websites of accrediting agencies  Governing institution’s website  Nursing education program’s website  Catalog/bulletin for governing institution | ABN approval of the nursing education program.  Accreditation by a national nursing accrediting agency recognized by the U.S. Department of Education. |  |
| 610-X-3-.02(7) A nursing education program shall be administered by a qualified program administrator who is accountable for the planning, implementation, and evaluation of the program.  (a) Minimum qualifications of a nursing program administrator shall include:  1. An active, unencumbered Alabama registered nurse license or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  2. An earned graduate degree in nursing. Nursing program administrators for advanced practice nursing education programs should be doctoral prepared.  3. Academic and experiential qualifications to administer a nursing education program. | Job description for nursing program administrator  Qualifications of nursing program administrator including licensure, graduate degree in nursing and academic and experiential qualifications | The program administrator is qualified and accountable for the planning, implementation and evaluation of the program.  The nursing program administrator holds an active unencumbered Alabama registered nurse license, or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  The nursing program administrator holds the appropriate graduate degree.  The nursing program administrator possesses academic and experiential qualifications to administer a nursing program. |  |
| 610-X-3-.02(8) The governing institution and nursing program administrator shall provide sufficient numbers of qualified faculty to ensure that curriculum implementation and expected program outcomes are achieved and aligned with national nursing accrediting standards. Thirty-Five percent of the total faculty, excluding adjunct faculty, are employed at the Institution as full-time faculty. Minimum qualifications of nurse faculty shall include:  (a) An active, unencumbered Alabama registered nurse license or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  (b) An earned graduate degree in nursing or a related health field.   1. Academic and experiential qualifications to teach in the area assigned.   610-X-3-.03(7) The Board may review and analyze various sources of information regarding program performance, including, but not limited to:  (d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  2. Sufficient type and number of faculty, to include retention and turnover. | Number of full-time faculty  Number of part-time faculty  Number of students enrolled in each program  Description of sharing of faculty, if applicable  Job Descriptions for nursing faculty indicating minimum qualifications  **Qualifications of Faculty Form**  Percentage of the nursing faculty with an Alabama or multistate registered nurse license issued by a party state, as defined in Chapter 4 of ABN rules  Faculty retention and turnover calculation  Workload policies and calculations  Current teaching assignments for faculty | Sufficient numbers of qualified faculty are employed to ensure that curriculum implementation and expected program outcomes are achieved.  Thirty-five percent of the total faculty, excluding adjunct faculty, are employed at the Institution as full-time faculty.  The nursing faculty have an active, unencumbered Alabama registered nurse license or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  Faculty have master’s degrees in nursing or an appropriate health field.  The faculty has academic and experiential qualifications to teach in the area assigned. |  |
| 610-X-3-.02(10) All faculty are provided formal orientation and educated in basic instruction of teaching, adult learning principles, curriculum development, test item writing and simulation standards, as appropriate to the faculty position.  (a) The program shall provide substantive and periodic workshops and presentations devoted to faculty development. | Documentation of formal faculty orientation and education in delineated components  Orientation checklist  Orientation manual  Policies/procedures related to professional development  **Faculty Development**  **Provided by the Nursing Education Program form**  **New Orientation and Education Documentation for Faculty form** | Documentation of formal faculty orientation and education as appropriate to the faculty.  Substantive and periodic workshops and presentations devoted to faculty are provided by the program. position. |  |
| 610-X-3-.02(11) Faculty participate in and are accountable for curriculum development, implementation, and evaluation. | Job Descriptions for nursing faculty  Minutes of meetings    Systematic plan of evaluation | Faculty participate in and are accountable for curriculum development, implementation, and evaluation. |  |
| 610-X-3-.02(13) The governing institution, nursing program administrator, and nursing faculty are accountable for selecting and evaluating the teaching methods, delivery modalities, and processes used to achieve expected program outcomes. | Description of teaching methods and delivery modalities utilized to provide instruction  Systematic plan of evaluation  Nursing education program input into the governing institution’s institutional effectiveness process    Course and clinical evaluations including simulation evaluations  Faculty evaluations  Minutes of meetings | Administration and faculty are accountable for the selection and evaluation of the delivery of instruction and achievement of program outcomes. |  |
| **Curriculum** | | | |
| 610-X-3-.02(12) The curriculum of a nursing education program shall:  (a) Enable the student to develop the knowledge, skills, and abilities necessary for the level, scope and standards of competent nursing practice expected at the level of licensure, approval, or certification. | Student Learning Outcomes  Program Outcomes  Description of applicable nursing standards on which the program is based:   * AACN’s Essentials of Baccalaureate Nursing Education * Pre-licensure QSEN Competencies * NLN Competencies for Graduates * National Task Force on Quality Nurse Practitioner Education * Evaluation of student learning and program outcomes | Students develop the knowledge, skills, and abilities necessary for the level, scope and standards of competent nursing practice expected at the level of licensure, approval, or certification as delineated within student learning/ program outcomes.  The curriculum incorporates appropriate nationally recognized standards and expected outcomes. |  |
| 610-X-3-.02(12)(b) Provide evidence-based, outcome-focused, and culturally-sensitive theoretical and clinical experiences specific to the expected scope of practice of graduates from each type of nursing education program. | Documentation of how the curriculum provides evidence-based, outcome-focused, and culturally-sensitive theoretical and clinical experiences specific to the graduate’s expected scope of practice  Student Learning Outcomes  Program Outcomes  **Nursing Curriculum Courses**  **Non-Nursing Courses**  Nursing course materials  **Clinical Affiliations Grid Form** | The curriculum provides evidence-based, outcome-focused, and culturally-sensitive theoretical and clinical experiences specific to the graduate’s expected scope of practice. |  |
| 610-X-3-.02(12)(c) Ensure distance education methods are consistent with the curriculum plan. | Description of distance learning’s consistency with the curriculum plan  **Nursing Curriculum Courses**  **Non-Nursing Courses**  Distance education policies and procedures  Evaluations of nursing courses offered via distance education | Distance education methods are consistent with the curriculum plan. |  |
| 610-X-3-.02(12) The curriculum of a nursing education program shall:  (d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  1.Liberal arts and sound foundation in biological, physical, social, and behavioral sciences supportive of the nursing education program.  2. Anatomy and physiology with a corresponding lab. Utilizing a ‘virtual lab’ in lieu of a ‘hands-on’ lab is considered a substantive change and requires Board notification.  8. Microbiology for students pursuing an associate or baccalaureate degree. | Curriculum plan indicating courses required per term.  **Nursing Curriculum Courses**  **Non-Nursing Courses**  Virtual or hands-on labs for anatomy and physiology | The curriculum plan complies with the ABN curriculum standards for liberal arts and sciences supportive of the nursing program as set forth in this chapter. |  |
| 610-X-3-.02(12)(d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  3. Nursing foundations, health assessment, pharmacology, nutrition, and community-based nursing. | **Nursing Curriculum Courses**  **Non-Nursing Courses**  Course descriptions  Nursing course materials | Nursing foundations, health assessment, pharmacology, nutrition, and community-based nursing are incorporated into the curriculum. |  |
| 610-X-3-.02(12)(d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  4. History and trends of nursing, cultural diversity, legal and ethical responsibilities, and nursing scope of practice responsibilities, including leadership, management, delegation, and health care delivery systems. | **Nursing Curriculum Courses**  **Non-Nursing Courses**  Course descriptions  Nursing course **Syllabus**/Description  Curriculum plan document for each course | History and trends of nursing, cultural diversity, legal and ethical responsibilities, and nursing practice responsibilities, including leadership, management, delegation, and health care delivery systems are incorporated into the curriculum. |  |
| 610-X-3-.02(12)(d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  7. Safe and Effective Care Environment, Health Promotion, prevention of illness, and health maintenance, Psychosocial Integrity, and Physiological Integrity across the lifespan. | **Nursing Curriculum Courses**  **Non-Nursing Courses**  Nursing course materials  **Clinical Affiliations Grid**  Clinical assignments and schedules  Simulation schedules | The curriculum incorporates:   * Safe and Effective Care Environment * Health Promotion and Maintenance * Psychosocial Integrity   Physiological Integrity |  |
| 610-X-3-.02(16) Scores on external exams shall not be utilized as the sole criterion for barring a student from graduating from the nursing program who otherwise, has successfully completed all required coursework. | Policies regarding utilization of external examinations  Nursing course materials | Scores on external exams are not utilized as the sole criterion for barring a student from graduating from the nursing program who otherwise has successfully completed all required coursework. |  |
| **Clinical Learning Experiences** | | | |
| 610-X-3-.02(12) The curriculum of a nursing education program shall:  (d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  5.Theoretical and clinical learning experiences across the lifespan in the areas of adult medical/surgical, maternal/ infant, child/pediatric, and psychiatric/mental health and community health nursing that includes simulation, laboratory time, and direct patient care in a licensed health care setting. Provided however, that Community Health clinical experiences may be conducted in a non-licensed setting. This does not prohibit additional experience in licensed non-health care settings. At least 50% of clinical experiences shall include direct patient care and include a variety of clinical settings sufficient to meet program outcomes.  610-X-3-.03(7) The Board may review and analyze various sources of information regarding program performance, including, but not limited to:  (d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  3. Clinical learning experiences that are sufficient to achieve program outcomes (goals and course objectives) through the practice of nursing care or observational experiences. | **Nursing Curriculum form**  Course descriptions  Nursing course materials  **Clinical Affiliations Grid**  Clinical assignments and schedules  Simulation schedules  Percentage of direct care clinical experiences  Nursing Course Descriptions Table  Nursing course materials | The program incorporates a wide variety of clinical experiences across the lifespan within the curriculum.  At least 50% of the clinical experiences are direct patient care.  Clinical learning experiences are sufficient to achieve program outcomes |  |
| 610-X-3-.02 (14) Clinical supervision or preceptorship of students complies with the standards set forth in this chapter.  (a) Clinical learning experiences shall be supervised by a registered nurse with knowledge of educational strategies and subject matter and who is experienced in the clinical technologies essential to the safe practice of nursing.  (b) The clinical supervisor or assigned clinical faculty shall hold an active, unencumbered license to practice professional nursing in Alabama, or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  610-X-3-.02(17) For Licensed Practical nursing students, a Clinical Resource LPN may be used to enhance, but not replace, faculty-directed clinical learning experiences. The supervising faculty member remains responsible for all students in the clinical setting, including those supervised by CRLPNs. | **Qualifications of Faculty and Clinical Supervisors Form**  Job Descriptions for faculty and clinical supervisors  Faculty and clinical supervisor evaluations  Nursing course materials  Clinical schedules including supervising personnel  Documents regarding the preceptorship experience for students and preceptors  Clinical Supervisors Summary  Percentage of clinical supervisors have an Alabama or multistate registered nurse license issued by a party state, as defined in Chapter 4 of the ABN rules.  Description of the utilization of a Clinical Resource LPN, if applicable  Clinical evaluation tools | Clinical supervision of students complies with the standards set forth in this chapter.  Clinical supervisors and assigned clinical faculty have appropriate qualifications including knowledge of educational strategies and subject matter and experience in clinical technologies.  The clinical supervisor or assigned clinical faculty holds an active, unencumbered license to practice professional nursing in Alabama, or a multistate registered nurse license issued by a party state, as defined in Chapter 4 of these rules.  A Clinical Resource LPN, if utilized for practical nursing students, enhances faculty-directed clinical learning experiences but the supervising faculty member remains responsible for all students in the clinical setting, including those supervised by the CRLPNs. |  |
| 610-X-3-.02 (14) Clinical supervision or preceptorship of students complies with the standards set forth in this chapter.  (c) The clinical supervisor or assigned clinical faculty shall be readily accessible to assign or prescribe a course of action, provide procedural guidance, direction, and evaluation for students engaged in the clinical learning experience. | Job description for clinical supervisor  Guidelines for clinical supervisors  Clinical evaluation tools  Evaluation of clinical supervisors | The clinical supervisor is readily available to assist and evaluate students engaged in clinical learning experiences. |  |
| 610-X-3-.02 (14)(d) The faculty-student ratio in clinical learning experiences shall be collaboratively determined by the professional nursing faculty, the School of Nursing administration, and the professional nurse administrator, or designee, in the clinical agency. In licensed hospitals that provide inpatient acute care, the faculty to student ratio shall not exceed 1:8 during clinical learning experiences. The faculty-student ratio shall be determined according to the:    1. Complexity of the educational experience.  2. Acuity of the patient(s).  3. Physical layout of the clinical setting.  4. Student’s level of knowledge and skills necessary to provide safe patient care.  (e) The nursing education program shall work with clinical agencies for the planning, implementation, and evaluation of clinical experiences. | Documentation reflecting involvement and input of clinical affiliates  Clinical schedules displaying instructor to student ratio in inpatient acute care facilities  Evaluation of clinical learning experiences by clinical facilities, if applicable | Documentation reflects involvement and input of clinical affiliates.  Clinical schedules indicate appropriate instructor to student ratios for clinical experiences.  The nursing education program collaborates with the clinical agencies in planning, implementation, and evaluation of clinical experiences. |  |
| 610-X-3-.02 (14)(f) Clinical learning experiences shall include the development of skills in clinical reasoning, management of care for groups of patients, and delegation to and supervision of other health care personnel performed in acute care and a variety of health care settings. | Nursing course materials  Clinical schedules  **Clinical Affiliations Grid**  Clinical evaluation tools  Students’ written clinical assignments  Documents regarding the preceptorship experience for students and preceptors | Clinical experiences are available in a wide variety of settings allowing students to develop skills in clinical reasoning, management of patients, delegation, and supervision of other health care personnel.  Students’ clinical assignments promote the development of clinical reasoning.  Clinical evaluations of students show evidence of student mastery of increasingly complex clinical reasoning skills, management of care for groups of patients, and delegation to and supervision of other health care personnel. |  |
| 610-X-3-.02 (14)(g) Nursing faculty shall maintain responsibility and accountability for planning, implementation, and evaluation of all student clinical learning experiences. | Description of process utilized to ensure faculty maintain responsibility and accountability for the planning, implementation, and evaluation of student clinical learning experiences when clinical supervisors are utilized.  Job Descriptions for faculty and clinical supervisors/  preceptors  Faculty and Clinical Supervisors evaluations  Nursing course materials  Clinical Schedules  Clinical Evaluation Tools  Documents regarding the preceptorship experience for students and preceptors | Nursing faculty are responsible and accountable for the planning, implementation, and evaluation of clinical learning experiences. |  |
| 610-X-3-.02(15) Nursing programs that offer only simulations or clinical testing do not meet the requirements for providing clinical learning experiences for nursing students. | Nursing course materials  **Clinical Affiliation Grid**  Clinical schedules  Simulation schedules | Clinical learning experiences include direct patient care. |  |
| **Simulation Learning Experiences** | | | |
| 610-X-3-.02(12) The curriculum of a nursing education program shall:  (d) The curriculum course work of a prelicensure nursing education program shall have didactic and clinical learning experiences which include but are not limited to:  6. Simulation learning experiences conducted according to acceptable faculty training standards and guidelines which incorporate clinical objectives, student debriefing, and evaluation are acceptable components of the clinical experience. Unless otherwise authorized by the Board, simulation shall not comprise more than 50% of the clinical learning experience for any course or patient population. Programs utilizing simulation shall ensure:  (iv) Simulation activities and evaluation criteria are linked to programmatic outcomes.  (vi) Students shall evaluate the simulation experience on an ongoing basis | **Simulation Grid**  Documentation of faculty training in simulation.  Nursing course materials  Clinical assignments and schedules  Simulation schedules  % of clinical learning experiences achieved with simulation.  Describe simulation activities and linkage to student learning outcomes and program outcomes.    Student evaluations of simulation learning experiences  Systematic plan of evaluation | Simulation experiences incorporate acceptable standards including clinical objectives, debriefing and evaluation and do not comprise more than 50% of the clinical learning experiences.  Simulation activities and evaluation criteria are linked to programmatic outcomes.  Students will evaluate simulation learning experiences on an ongoing basis. |  |
| 610-X-3-.02(12)(d)6. Simulation learning experiences conducted according to acceptable faculty training standards and guidelines which incorporate clinical objectives, student debriefing, and evaluation are acceptable components of the clinical experience. Unless otherwise authorized by the Board, simulation shall not comprise more than 50% of the clinical learning experience. Programs utilizing simulation shall ensure:  (i)There shall be a budget that will sustain the simulation activities and training of the faculty. | Budgeted amount for simulation activities and faculty training | The budget is adequate to sustain the simulation activities and faculty training. |  |
| 610-X-3-.02(12)(d)6. Simulation learning experiences conducted according to acceptable faculty training standards and guidelines which incorporate clinical objectives, student debriefing, and evaluation are acceptable components of the clinical experience. Unless otherwise authorized by the Board, simulation shall not comprise more than 50% of the clinical learning experience. Programs utilizing simulation shall ensure:  (ii) Appropriate facilities for conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation. | Description of facilities, technology, and equipment utilized to conduct simulation  Inventory of simulation resources and equipment | Facilities, technology, and equipment utilized to conduct simulation learning experiences are adequate to meet the simulation learning experience objectives. |  |
| 610-X-3-.02(12)(d)6. Simulation learning experiences conducted according to acceptable faculty training standards and guidelines which incorporate clinical objectives, student debriefing, and evaluation are acceptable components of the clinical experience. Unless otherwise authorized by the Board, simulation shall not comprise more than 50% of the clinical learning experience. Programs utilizing simulation shall ensure:  (iii) Faculty involved in simulations, both didactic and clinical, are oriented and have training in the use of simulation.  (v)The simulation activities are managed by or management duties are assigned to an individual who demonstrates continued expertise and competence in the use of simulation through:  a. Certification as Certified Healthcare  Simulation Educator; or  b. Completion of two years of experience in healthcare simulation or completion of one or more credit-bearing or continuing education courses regarding healthcare simulation which includes content specific to all of the four domains in the current version of the Certified  Healthcare Simulation Educator Examination Blueprint. | **Simulation Grid**  Discussion of faculty involvement in simulation  Documentation of faculty orientation and professional development in simulation  Documentation of simulation expertise and competence in simulation for individual responsible for managing simulation  CV for individual responsible for management of simulation | Faculty involved in simulation learning experiences are oriented and receive professional development in simulation.  The individual responsible for managing simulation demonstrates expertise and competence in the utilization of simulation through education in healthcare simulation or is certified as a healthcare simulation educator by August 1, 2024. |  |
| **Policies and Procedures** | | | |
| 610-X-3-.02(9) Institutional and program policies, procedures, and other publications, whether written or electronic, shall:  (a) Be written, accurate, and consistent as published, and publicly available. | Governing institution’s and/or nursing education program’s website  Catalog/bulletin for governing institution  Nursing program/student handbook  Nursing course materials | Policies and procedures are written, accurate, and consistent as published, and publicly available. |  |
| 610-X-3-.02(9)(b) Address students’ abilities to assume clinical assignments including, but not limited to, educational preparedness and physical, mental, and emotional behaviors. | Governing institution’s and/or nursing education program’s website  Catalog/bulletin for governing institution  Nursing program/student handbook  Nursing course materials | Educational, physical, mental, and emotional requirements to assume clinical assignments are published and available for students. |  |
| 610-X-3-.02(9)(c) Provide opportunities for students to regularly participate in the development, evaluation, and continuous improvement of the program. | Minutes from meetings attended by students, if applicable  Student evaluations of components of the nursing education program | Students regularly participate in the development, evaluation, and continuous improvement of the program. |  |
| 610-X-3-.02(9)(d) Provide for processes to manage and learn from student near misses and errors. | Written procedures for tracking of student near misses and errors  Documentation of actions taken to negate similar near misses and errors from recurring | Processes are in place to track and negate student near misses and errors. |  |
| 610-X-3-.02(9)(e) Provide for student remediation strategies at the beginning of each course and ensure students are aware of how to seek help. | Describe remediation strategies available at the beginning of each course  Nursing program/student handbook  Nursing course materials | Remediation strategies are available at the beginning of each course for students. |  |
| 610-X-3-.02(9)(f) Programs shall hold students accountable for professional behavior, including honesty and integrity while in their program of study.  610-X-3-.03(3) Programs shall develop, maintain, and adhere to their written plan for the systematic evaluation of the program that is comprehensive, demonstrates ongoing evaluation, is based on program outcomes, and incorporates continuous improvement. The systematic evaluation plan shall include:  (d) A mechanism for accountability for academic integrity. | Catalog/bulletin/  student handbook for governing institution  Nursing program/student handbook  Nursing course materials  Clinical evaluation tools  Documentation of students being held accountable for professional behavior | Students are held accountable for professional behavior.  A mechanism addressing accountability for academic integrity is published. |  |
| 610-X-3-.02(9) Institutional and program policies, procedures, and other publications, whether written or electronic, shall:  (g) Provide for availability of assistance for students with disabilities. | ADA policies and procedures  ADA documentation  ADA website | Assistance is provided for students with disabilities. |  |
| 610-X-3-.03(4) Programs shall maintain and produce, at the Board’s request:  (a) An articulation plan for program graduates.  (b) A plan for accepting new or transfer students that ensures that due consideration is given to all prior general and nursing coursework that an incoming student has completed successfully with other accredited institutions. | Articulation plan(s)  Admission and transfer policies and procedures addressing prior general education and nursing coursework | The program maintains and produces, at the Board’s request, an articulation plan for program graduates.  Admission and transfer policies and procedures provide for consideration of all prior general and nursing coursework successfully completed at other accredited institutions of higher education. |  |
| **Outcomes** | | | |
| 610-X-3-.03(1) Graduates shall demonstrate theoretical and clinical competence for entry into practice. | Documentation validating theoretical and clinical competence of graduates  Licensure/ certification pass rates | Graduates demonstrate theoretical and clinical competence for entry into practice. |  |
| 610-X-3-.03(2) The Board-calculated prelicensure annual pass rate for each prelicensure program shall be published by the Board annually. | The Alabama Board of Nursing prelicensure annual pass rate | The licensure pass rate for each prelicensure program as published by the ABN. |  |
| 610-X-3-.03(3) Programs shall develop, maintain, and adhere to their written plan for the systematic evaluation of the program that is comprehensive, demonstrates ongoing evaluation, is based on program outcomes, and incorporates continuous improvement. The systematic evaluation plan shall include:  a) Collection, aggregation, analysis, and trending of data  b) Programmatic outcomes, levels of achievement, evaluative criteria, assignment of responsibility, frequency of assessment, methods of assessment, actions taken, and quantitative data collected  (c) Ongoing evaluation and revisions based on the evaluation.  610-X-3-.03(7) The Board may review and analyze various sources of information regarding program performance, including, but not limited to:  (c) Results of ongoing program evaluation.  (d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  5. Trend data/action planning related to overall NCLEX performance and advanced practice certification exam performance.  6. Performance improvement initiatives related to program outcomes. | **Evaluation Instruments Utilized by the Nursing Education Program**  Systematic plan of evaluation (SPE) and/or other evaluative processes  Nursing education program input into the governing institution’s institutional effectiveness process.  Performance improvement initiatives implemented as a result of the latest evaluation by:   * Governing institution * ABN * Nursing accrediting body   Minutes of meetings  Trended NCLEX performance  Certification pass rate | The written plan for systematic evaluation of the program and/or other evaluative processes are comprehensive, demonstrates ongoing evaluation, is based on the program outcomes, incorporates continuous improvement, and includes the components as delineated.  The systematic plan of evaluation (SPE) and/or other evaluative processes document collection, aggregation, analysis, and trending of data.  Systematic plan of evaluation (SPE) and/or other evaluative processes incorporate the programmatic outcomes, levels of achievement, evaluative criteria, assignment of responsibility, frequency of assessment, methods of assessment, actions taken, and quantitative data collected.  The systematic plan of evaluation (SPE) and/or other evaluative processes  document ongoing evaluation and revisions based on the evaluation.  NCLEX performance or advanced practice certification exam performance is trended and accompanied by applicable action planning.  Program improvement initiatives relating to program outcomes are documented |  |
| 610-X-3-.03(7)(d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  1. Student retention, attrition, and on-time program completion rates. | Student retention, attrition, and on-time program completion rates. | Analysis of sources of information regarding program performance.  Student retention, attrition, and on-time program completion rates are documented within the evaluative processes. |  |
| **ABN Oversight** | | | |
| 610-X-3-.03(5) Approved Nursing Education Programs shall be evaluated for continuing approval by the Board not less than every five (5) years, but may be evaluated more frequently based on deficiencies, identified areas of concern, or receipt of a complaint.  a) Additional oversight of new programs shall take place throughout the first five (5) years of operation. This may include progress reports every 6 months on program, leadership, consistency of faculty, numbers of students, and trends of NCLEX pass rates, as well as the regularly collected annual reports.  610-X-3-.03(7) The Board may review and analyze various sources of information regarding program performance, including, but not limited to:  (a) Periodic Board survey visits, as necessary. | Documentation received from the ABN following the last site visit  Progress report prepared by new nursing education programs to include, but not limited to:   * Program leadership * Faculty consistency * Number of students * Licensure pass rates | Approved Nursing Education Programs are evaluated for continuing approval by the Board not less than every five (5) years, but may be evaluated more frequently based on deficiencies, identified areas of concern, or receipt of a complaint.  Survey visits are conducted to determine compliance with standards delineated within the Administrative Code.  The ABN will provide additional oversight of new programs throughout the first five years of operation.  . |  |
| 610-X-3-.03(6) Nursing programs shall complete the Nursing Education Annual Report in a format specified by the Board within the time specified.  610-X-3-.03(7) The Board may review and analyze various sources of information regarding program performance, including, but not limited to:  (d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  (8) Education Program Annual Report | Last Education Annual Report submitted to the ABN | Nursing Education Annual Reports are submitted on time to the Board of Nursing and are complete. |  |
| 610-X-3-.03(7)(b) Board-recognized national nursing accreditation site visit reports, to include results of findings, pass rates, and other pertinent documents. The Board may accept all or partial evidence prepared by a program to meet national nursing accreditation requirements. The nursing program shall:  1. Submit to the Board copies of accreditation related correspondence from the national nursing accrediting agency within 30 days of receipt. | Latest correspondence from nursing accrediting agency | Analysis of sources of information regarding program performance.    Reports/  correspondence from Board-recognized national nursing accreditation site visit reports include results of findings, pass rates, and other pertinent information.  The nursing education program shall submit copies of accreditation related correspondence from the national nursing accrediting agency within 30 days of receipt. |  |
| 610-X-3-.03(7)(d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  4. Degree of compliance with nursing program accrediting body requirements for national licensure examination pass  rates as calculated and determined by the nursing program accrediting body. | NCLEX pass rates  Licensure pass rate requirements stipulated by the nursing accrediting body | The nursing education program’s licensure pass rates are in compliance with the licensure pass rate requirements stipulated by the nursing accrediting body. |  |
| 610-X-3-.03(7)(d) Other sources of evidence regarding achievement of program outcomes, including, but not limited to:  7. Program complaints/ grievance review and resolution. | ABN records  Log of student grievances and resolution for last 2 years | Student grievances are handled by the nursing education program and governing institution appropriately and in a timely fashion, according to institutional guidelines. |  |
| 610-X-3-.03 (9). Continuing approval will be granted upon the Board’s verification that the program is in compliance with the Board’s nursing education administrative rules in Chapter 610-X-3. |  | The nursing education program will be in compliance with the ABN nursing education administrative rules. |  |
| **Additional Requirements for Advanced Practice Nursing Education Programs** | | | |
| 610-X-3-.05(1) Alabama advanced practice nursing education programs in operation prior to December 31, 2020, are considered in approved status. Advanced practice nursing education programs established in Alabama on or after January 1, 2021, shall obtain Board approval prior to implementation. | Alabama Board of Nursing correspondence | Advanced practice nursing education programs in Alabama are Board approved prior to implementation of the program. |  |
| 610-X-3-.05(2) The nursing education program shall ensure that clinical agencies, preceptors, planning, implementation, and evaluation of clinical experiences are provided for and/or available to students. | Nursing course materials  Documentation of the provision of   * Clinical agencies availability * Preceptors * Planning, implementation, and evaluation of clinical experiences | The nursing education program ensures that clinical agencies, preceptors, planning, implementation, and evaluation of clinical experiences are provided for and/or available to students. |  |
| 610-X-3-.05(3) Students shall have content and supervised experiences in accordance with national accreditation, certification, and advanced practice nursing education requirements and standards for the advanced practice registered nurse role and patient population. | Nursing course materials  Documentation of content and supervised experiences in accordance with national accreditation, certification, and advanced practice nursing education requirements and standards for the advance practice registered nursing role and patient population. | Students have content and supervised experiences in accordance with national accreditation, certification, and advanced practice nursing education requirements and standards for the advanced practice registered nurse role and patient population. |  |
| 610-X-3-.05(4) Dual role and patient population foci: advanced practice registered nurse programs shall include and address content and clinical experiences for both roles and patient populations. Students shall have documented clinical hours in accordance with certification agency requirements for each role and patient population. | Nursing course materials  Documentation of   * Content and clinical experiences for both roles and patient populations in dual role and patient population programs. * Clinical hours in accordance with certification agency requirements for each role and patient population. | Advanced practice registered nurse programs with dual role and patient population foci include and address content and clinical experiences for both roles and patient populations.  Students have documented clinical hours in accordance with certification agency requirements for each role and patient population. |  |
| (a) Clinical hours between role and patient population must be documented and addressed as to the clinical preparation for the two areas of practice. | Nursing course materials  Documentation of clinical hours between role and patient population as to the clinical preparation for the two areas of practice. | Clinical hours between role and patient population are documented and addressed as to the clinical preparation for the two areas of practice. |  |
| 610-X-3-.05(5) A copy of the current advanced practice curriculum and a copy of the clinical rotation plan shall be available to the Board on request. | Curriculum plan  Nursing course materials  Clinical schedules | A copy of the current advanced practice curriculum and a copy of the clinical rotation plan is available to the Board on request. |  |