Executive Administrator Report

Carol Moreland, MSN, RN

September 2021

NCSBN Upcoming Meetings:

- 2021 NCSBN NCLEX Conference is September 30 (virtual)
- 2021 NCSBN Basic Board of Nursing Investigator Training is October 25 28 (virtual)
- 2022 NCSBN EO & Attorney Forum is January 25, 2022 in Scottsdale, AZ
- 2022 Midyear Meeting is March 15 17, 2022 in St. Louis, MO
- NCSBN Basic Board of Nursing Investigator Training is March 29–31, 2022 in Rosemont,
- 2022 NCSBN APRN Roundtable is April 12, 2022 in Rosemont, IL
- 2022 NCSBN Discipline Case Management Conference is May 23–25, 2022 in Milwaukee, WI
- 2022 NCSBN Annual Meeting is August 17-19, 2022 in Chicago, IL

COVID-19 Agency Response:

- 70% of our employees have been teleworking effectively April 2020
- Changes we have made within the agency for safety include:
 - Video intercom installed at agency front door to gain access to the agency for nonemployees
 - The number in our lobby should be no more than 2 at a time due to social distancing requirements
 - We are highly recommending the public conduct their business with us via online services, mail, phone call or email
 - o If customers need to talk with someone, it is highly recommended they make an appointment so we can service them when they arrive. One person per appointment and no children or other adults are permitted
 - o Telephone appointments are also available
 - o We NO longer perform fingerprinting services in the agency
- I continue to be proud of the agency staff for their flexibility in these challenging times and their commitment to the mission of the Board
- COVID-19 vaccination has been made available for our staff if they choose
- May 14, 2021 I was notified by Secretary DeAngela Burns-Wallace, Secretary of Administration that the State of Kansas offices will return to normal operation beginning June 13, 2021. Agencies may continue to allow employees to work remotely as approved by the agency head, provided there is no disruption to agency operation.
- I gave the agency staff three options:
 - o <u>Traditional</u>: 5 eight-hour days, all in-person in the agency (no teleworking option). This will be required for some positions in the agency that require the position to

- work in the agency. This will be required for all new employees while on their probationary period.
- o <u>Hybrid</u>: 5 eight-hour days. The employee must work in-person in the agency a minimum of 8 hours a week and can telework the rest of the week. The majority of staff eligible have chosen this option.
- o <u>Flex schedule</u>: 4 ten-hour days. The employee must work in-person in the agency (no teleworking option).

Executive Order 21-22:

- Signed by Governor Kelly on April 27, 2021
- States any renewal fees, deadlines, or other requirements extended pursuant to Executive Order 21-09 (and its predecessor orders) shall remain extended until at least 15 days after the licensing authority provides notice to licensees through publication on the agency's website or through other electronic means regularly used by the agency to communicate with the agency's licensees
- Licenses that had/have an expiration date of March 31, 2020 through July 31, 2021 have an expiration date of August 28, 2021. These licenses will be lapsed if not renewed by August 29, 2021. This notice has been placed on our website on May 17,2021
- There will be NO extensions past this date, and this is clearly stated in the notice on our website.
- If any of these licenses lapse on August 29, 2021, the license will have to be reinstated and the licensee will not be able to work as a nurse until the license has been reinstated
- The required 30 hours of continuing nursing education must be completed at the time of renewal.
- Licensees can continue to renew at the normal expiration date

Nurse Licensure Compact (NLC) Updates:

- As of July 1, 2021, there are now 38 states and one territory (Guam) that have enacted the NLC
- A map is included with this report

Budget:

- Appropriated amounts requested were granted by the Legislature:
 - o FY 22: \$3,037,107
 - o FY 23: \$2,882,559
- Includes funding in FY 22 for the Enforcement Module and software and hardware updates for the data center
- FY 22 & 23 budget is due to be submitted to Division of the Budget on September 15, 2021

Regulation Revisions:

- Undergraduate nursing program regulations:
 - o Requested changes from the Department of Administration were made

- o Add implementation date of January 1, 2022 for each regulation
- O Notice of public hearing, the proposed regulations and the economic impact statement are attached to this report
- Scheduled to present to Joint Committee on Administrative Rules and Regulations on September 10
- All comments received will be presented to the Board to review and decide whether to adopt of make changes
- o If changes are made, the regulations start the process over

Meetings Attended:

- NCSBN Award Ceremony on July 29, 2021 virtually
 - Adrian Guerrero, CPM, Director of Operations received the Meritorious Service Award, which is granted to a member for significant contributions to the mission and vision of NCSBN
- NCSBN Annual Meeting on August 18 19, 2021 virtually
 - The news release from NCSBN with the results of the election and new business is attached to this report

Strategic Plan:

- The current strategic plan is from July 2019 through June 2022
- The Board determines the priorities, actions, and metrics for the July 2022 through June 2025
- In the past this was done at a Board retreat

Updates:

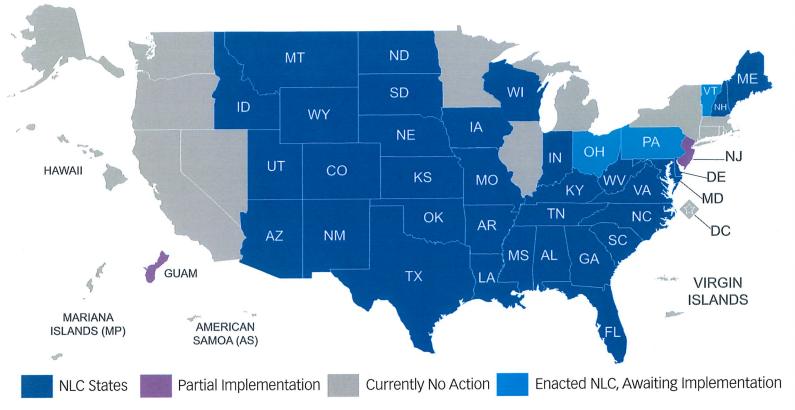
- Board member terms:
 - o Patricia Zeller, 07-01-2018 to 06-30-2022 (second term)
 - o Julianna Rieschick, 07-01-2021 to 06-30-2025 (second term)
 - o Rebecca Sander, 07-01-2016 to 06-30-2024 (second term)
 - o Gwendolyn Loyd, 07-01-2019 to 06-30-2023 (first term)
 - o Gita Noble, 07-01-2018 to 06-30-2022 (first term)
 - o Jade Ramsdell, 07-01-2019 to 06-30-2023 (first term)
 - o Andrea Watson, 7-1-2020 to 6-30-2024 (first term)
 - o Adri Gouldsmith, 7-1-2019 to 6-30-2023 (first term)
 - o Giovannie Gone, 7-1-2020 to 6-30-2024 (first term)
 - \circ Lori Owens 7-1/2021 6/30/2025 (First term new LPN board member)
 - o Melissa Oropeza 7/1/2021 − 6/30/2025 (First term − new APRN board member)
- <u>Board Member committee assignments</u>: The decision about committee assignment is made after the September meeting by the President and Vice President. You will then be notified via email of your committee assignments for December 2021 September 2022.
- Agency vacancies (strategic plan, priority 2): RN Investigators, Senior Administrative
 Assistants for Operations/e-Gov and Administration (Document Imager)

- Monitor fiscal impact of NLC implementation (strategic plan, priority 2): Continue to monitor monthly agency financial reports. No decrease in agency fee fund since implementation of NLC on 7/1/19.
- <u>Streamlining agency processes:</u> Every division is continuing to streamline their processes as much as possible, which makes teleworking more productive when the information is electronic.

Projects/Collaboration:

- Assisted with the orientation of Michelle Brown, new Education Secretary
- FY 2020 Annual Report with the new format placed on our website
- Worked with Arthur L. Davis to change the format for the three-year KSBN Strategic Plan. The draft is included in your Board packet for your review.





Pending NLC States

New Jersey (34): Pending implementation in 2021, tentatively. Date TBD. Nurses holding a multistate license in other NLC states may practice in NJ. NJ residents cannot obtain a multistate license until implementation completed.

Guam (35): Pending implementation in 2022, tentatively. Nurses holding a multistate license in other NLC states may practice in Guam. Guam residents cannot obtain a multistate license until implementation is complete.

Vermont (36): Pending implementation on Feb. 1, 2022. Vermont residents will be able to apply for a multistate license as of that date. Nurses in other NLC states with a multistate license may not practice in Vermont until implementation is complete.

Pennsylvania (37): NLC enacted July 1, 2021. Implementation date is TBD. Criminal background checks must also be implemented. PA residents cannot obtain a multistate license until implementation is completed. Nurses in other NLC states with a multistate license may not practice in PA until implementation is complete.

Ohio (38): NLC enacted July 1, 2021. The implementation date is Jan. 1, 2023. Ohio residents cannot obtain a multistate license until implementation is completed. Nurses in other NLC states with a multistate license may not practice in Ohio until implementation is complete.



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Laura Kelly, Governor

Carol Moreland, MSN, RN Executive Administrator

Kansas State Board of Nursing

The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and mental health technicians

Notice of Public Hearing on Proposed Administrative Regulations August 9, 2021

A public hearing will be conducted on October 25, 2021 from 10:30 am to 12:30 pm in room 509 of the Landon State Office Building, 900 SW Jackson Street, Topeka, KS 66612 to consider the adoption of proposed changes in ten existing regulations relating to undergraduate nursing education. If the building is not open to the public at the time of the hearing or if any member of the public would prefer to attend electronically, there is an option to join via a toll-free conference call, 1-877-278-8686 (access code: 633337).

This 60-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed regulations. All interested parties may submit written comments prior to the hearing to Carol Moreland, Executive Administrator, Kansas State Board of Nursing, 900 SW Jackson St., Suite 1051, Topeka, Kansas 66612 or by email to carol.moreland@ks.gov. All interested parties will be given a reasonable opportunity to present their views orally regarding the adoption of the proposed regulations during the public hearing. Phone comments will be taken by calling 1-877-278-8686 (access code: 633337) at the time of the hearing. To provide all parties an opportunity to present their views, it may be necessary to request that each participant limit any oral presentation to five minutes.

Any individual with a disability may request an accommodation to participate in the public hearing and may request the proposed regulations and economic impact statement in an accessible format. Requests for accommodation to participate in the hearing should be made at least five working days in advance of the hearing by contacting Jill Simons at (785) 296-5752. The north entrance to the Landon State Office Building is handicapped accessible. Handicapped parking is located at the north end of the Landon State Office Building, across the street from the north entrance to the building, and on Ninth Street, just around the corner from the north entrance to the building.

A summary of the proposed regulations and the economic impact follows. A copy of the proposed regulations and associated economic impact statement may be obtained by accessing the Kansas State Board of Nursing website at https://ksbn.kansas.gov or by contacting Carol Moreland, Executive Administrator of the Kansas State Board of Nursing, Landon State Office Building, 900 S.W. Jackson, St., Room 1051, Topeka, KS 66612, (785) 296-5752, or carol.moreland@ks.gov prior to the date of the hearing.

K.A.R. 60-1-102 – Approval procedure. Language has been added stating any institution wanting to establish a nursing program shall provide any information that the board requires to establish satisfactory proof that the institution will maintain the standards and curriculum of an approved nursing program and provide courses required for admission to the nursing program. This regulation shall be effective on and after January 1, 2022.

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- **K.A.R.** 60-1-104 **Definitions.** Language has been added for definitions of bilevel program, conditional approval, debriefing, nursing program administrator, one-plus-one program, online or distance learning, PN exit option, program evaluation plan, survey or site visit, and student learning outcomes. The following definitions was stricken: converted nursing education program, distance learning, and work study. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-101 Requirements for initial approval. Language has been added that states a nursing program administrator shall have oversight of the nursing program. Any applicant with an existing nursing program must submit the following: the nursing program outcomes and any nursing program outcomes not meeting the stated benchmark. If there are any outcomes not meeting the stated benchmark, a new nursing program shall not be approved. During an initial survey, a nursing program evaluation plan that addresses compliance with the nurse practice act and board regulations must be available. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-102 Reapproval requirements. Language has been changed to state the annual first-time licensure exam pass rates should be at 80%. If the nursing program has an annual pass rate of less than 80 percent for one year, the nursing program shall receive a written notice of concern from the board. If the nursing program has an annual pass rate of less than 80 percent for two consecutive years, the program may receive a survey for evaluation and recommendation and be placed on conditional approval. If the nursing program has an annual pass rate of less than 80 percent for three consecutive years for first-time candidates, the nursing program may be directed by the board to cease admissions. If the nursing program fails to meet the requirements for approval within the designated period of time, the nursing program shall be provided notice stating the deficiencies and the opportunity for a hearing if requested within 60 days from the date of service of the notice. If no hearing is requested timely, the nursing program shall be removed from the list of approved schools. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-103 Nursing program faculty and preceptor qualifications. Language was stricken from this regulation relating to the nursing program administrator and added to K.A.R. 60-1-104. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-104 Curriculum requirements. The language was added that each practical nursing program shall provide instruction and clinical learning experience in intravenous fluid therapy, including, at a minimum, didactic, supervised laboratory or supervised clinical practice as specified in K.A.R. 60-16-104. The language for the requirement of a program evaluation plan was stricken as that language was added to K.A.R. 60-1-104. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-105 Clinical resources. Language was changed to reflect that clinical observational experience must have a maximum of a 1:10 faculty-to-student ratio during the clinical learning experience. Language was added that simulation experiences shall constitute no more than 50 percent of the total hours for the clinical course. This regulation shall be effective on and after January 1, 2022.
- **K.A.R.** 60-2-106 Educational facilities. Language was added to provide the same services to online or distance learning students as available to in-person students. This regulation shall be effective on and after January 1, 2022.
- K.A.R. 60-2-107 Student policies. Language was added to clarify the nursing program shall have a clearly defined written student policy for the difference between the student role and the carrier ED

role. Language was changed to state the nursing program shall have a written policy providing information to all students regarding licensure disqualifications pursuant to K.S.A. 65-1120 and amendments thereto. This information shall be provided to each student before admission to the nursing program. This regulation shall be effective on and after January 1, 2022.

K.A.R. 60-2-108 – Reports. Language was added for the annual report to include hiring, retention and separation faculty statistics. Language was added to include in the annual report any plans for the future, including proposed changes to the nursing program, the total number of library holdings and number of holdings regarding nursing. Language was added to include in the annual report a list of the theory courses and the clinical courses in the curriculum. Statistics for each clinical course shall be reported that include the following: total number of hours, total number of clinical observation experience hours, total number of precepted hours, and total number of simulation experience hours. Language was added that if a nursing program fails to meet the requirements of the board or to submit required reports within a designated period of time, the nursing program shall be notified and given the opportunity for a hearing regarding the board's intent to remove the nursing program from the list of approved nursing programs. This regulation shall be effective on and after January 1, 2022.

Economic Impact Overview. These regulations may strengthen a nursing program's growth as the student outcomes and ability to pass the licensure exams should increase. An economic effect might be compliance costs to the nursing program to strengthen their curriculum and prepare their faculty better which would result in better student outcomes and the pass rate of their graduates on the licensure exam is 80% or above (an increase from 75% presently). There will be a positive economic impact for businesses and the general public when more graduates pass the licensure exam and enter the workforce. The positive economic impact for the graduates will be that they are better prepared to pass the licensure exam and enter the workforce.

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60-1-102. Approval procedure. (a) An Each institution contemplating the establishment of wanting to establish a school of nursing program shall meet the following requirements:

- (1) (a) Notify the board and supply such information as the board may require provide any information that the board requires to establish satisfactory proof that the institution will maintain the standards and curriculum of an approved nursing program;
- (2) (b) submit the name and qualifications of the nurse nursing program administrator to the board for approval by the board;
 - (3) (c) employ a qualified nurse nursing program administrator;
 - (4) (d) employ a second faculty member;
- (5) (e) have financial resources for faculty, other necessary personnel, equipment, supplies, counseling, and other services;
 - (6) (f) have adequate clinical and educational facilities to meet student learning outcomes;
- (7) (g) have courses required for provide general education available courses required for admission to the nursing program;
- (8) (h) submit an application with a detailed proposed three-year budget, curriculum plan, list of prospective faculty, organizational chart, organizing curricular framework, program objectives/outcomes outcomes, student and faculty policies, program evaluation plan, and contractual agreements for clinical facilities at least six months before enrollment of students; and
 - (9) (i) be approved before the admission of any students.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 1991 Supp. 65-1119; effective Jan. 1, 1966; amended Jan. 1, 1973; amended, E-74-29, July 1, 1974; modified, L. 1975, ch. 302, § 1, May 1, 1975; amended April 26, 1993; amended P-

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- 60-1-104. Definitions. Each of the following terms, as used in the board's regulations except articles 5, 6 and 17, shall have the meaning specified in this regulation:
- (a) "Affiliating agency" means an agency that cooperates with the nursing education program to provide facilities and clinical resources for selected student experiences.
- (b) "Approval" means the status granted by the board to a nursing program that provides evidence of both of the following:
- (1) The <u>nursing</u> program is operating on a sound educational basis that is consistent with the board's educational requirements as set forth <u>specified</u> in the nurse practice act <u>and the board's regulations</u>.
 - (2) The nursing program has no deficiencies that would adversely affect student learning outcomes.
- (c) "Articulation" means the process by which a registered professional nurse, licensed practical nurse, or mental health technician who is enrolled in a nursing education program is given credit for previous nursing or mental health technology education in nursing or mental health technology.
- (d) "Bilevel program" means a nursing program that has one application process, with faculty teaching practical nurse (PN) and registered nurse (RN) content from the first day of the nursing program. The student can opt out of the RN program, which is known as the PN exit option, take the national council license examination-practical nursing (NCLEX-PN), and become licensed as a PN; or the student can matriculate through the entire nursing program, take the national council license examination-registered nurse (NCLEX-RN), and become licensed as an RN.
- (e) "Capstone course" means an experiential nursing course for students to demonstrate integration of knowledge and professional nursing supervised by a preceptor during the final semester of the professional nursing program.
- (e) (f) "Clinical learning experience" means an active process in which the student participates in nursing activities while being guided by a member of the faculty.

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- (f) (g) "Clinical observational experience" means the process in which the student views health care interventions but does not participate in the interventions. Affiliating agency personnel are shall be responsible for patient care. However, a student may use any of the five senses while with the patient for the sole purpose of observing while as the agency professional who has assessed assesses and provided provides care to the patient supports the student. The instructor shall not be required to be present, but the students shall be included in the faculty-student ratio.
- (g) "Conditional approval" means the limited time status that the board imposes on a program if the board finds evidence that an approved nursing education program has failed to comply with educational requirements as set forth in the nurse practice act. When placed on conditional approval status, the program may be directed by the board to cease admissions.
- (h) "Community-based health care" means health care provided outside of hospitals and long-term care facilities, including public health departments, ambulatory health clinics, prenatal and well-baby clinics, hospice agencies, doctors' offices, industrial settings, homeless shelters, nursing centers, home health agencies, and patients' homes.
- (i) "Conditional approval" means the status that the board imposes on an approved nursing program for a limited time to comply after finding evidence that the nursing program no longer meets educational requirements as specified in the nurse practice act or the board's regulations. When placed on conditional approval, the nursing program may be directed by the board to limit or cease admissions.
- (i) (j) "Contractual agreement between a nursing education program and an affiliating agency" means a written contract or letter signed by the legal representatives for the nursing education program and the affiliating agency.
- (j) "Converted nursing education program" means an already existing approved program that offers a terminal credential different from the credential originally offered or a nursing education program that is offered by a parent institution different from the institution originally approved.

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- (k) "Criteria for unscheduled survey-visit" means those program characteristics indicating indications that the nursing program is not meeting board standards no longer meets the requirements in the nurse practice act or the board's regulations.
- (I) "Distance learning" means the acquisition of knowledge and skills through information and instruction encompassing a variety of technologies.
- (1) "Debriefing" means an activity that follows a simulation experience and is led by a facilitator.

 Participants' reflective thinking is encouraged and feedback is provided regarding the participants'

 performance while various aspects of the completed simulation are discussed. Participants are encouraged to explore emotions and question, reflect, and provide feedback to one another in order to facilitate the transfer of learning to future situations.
- (m) "Faculty degree plan" means the plan for a course of study leading to a degree appropriate for a teaching position.
- (n) "Faculty hire exception" means that a <u>nursing</u> program is allowed by the board to hire, on a limited-time basis and in accordance with K.A.R. 60-2-103(e)(2), an instructor who does not meet the faculty qualifications if no qualified individuals are available.
- (o) "Generic student" means one who enters at the beginning of the <u>a prelicensure</u> nursing education program and plans to complete the entire curriculum.
- (p) "Initial approval" means the approval period from the first admission of nursing students to the nursing program through the first full implementation of the curriculum and graduation.
- (q) "Loss of approval" means the status that results when the board withdraws its approval of a nursing program.
- (r) "National nursing accreditation agency" means either the national league for nursing accrediting emmission accreditation commission for education in nursing, the commission for nursing education accreditation, or the commission on collegiate nursing education.

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- (s) "Nursing program administrator" means an individual with successful experience in administration or teaching and with a graduate degree in nursing. However, an individual with successful experience in administration or teaching whose graduate degree is not in nursing and was conferred on or before July 1, 1999 shall be acceptable. This individual has the primary responsibility and dedicated time for effective and continuous oversight of a nursing program, including the following:
 - (1) Verification that the nursing program complies with the nursing act and the board's regulations;
 - (2) assurance that nursing program and educational outcomes are met;
- (3) assessment of and recommendations for material, human, and clinical resources for effective nursing program implementation;
 - (4) collaboration with faculty for continuous nursing program improvement; and
 - (5) responsibility for the development and implementation of the nursing program.
 - (t) "Nursing program" means practical nursing program or professional nursing program, or both.
- (u) "One-plus-one program" means a nursing program that includes two application processes, one for the practical nurse (PN) program and one for the registered nurse (RN) program. The first level has only PN content, and the student must obtain a PN license before continuing in the RN program.
- (v) "Online or distance learning" means the acquisition of knowledge and skills through information and instruction provided by means of a variety of technologies.
- (w) "PN exit option" means in the bilevel programs that there is one application process for the PN and RN programs. Therefore, a PN exit option allows students to opt out of the RN program at a designated point in the curriculum. At this point, these students apply for licensure and take the NCLEX-PN.
- (x) "Practical nursing education program" means a course of study in a technical school or college leading to a certificate and preparing an individual for licensure as a practical nurse.

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- (t)(y) "Preceptor" means a registered professional nurse who is not employed by the nursing education program but who provides clinical supervision for nursing students in nursing courses taken during the nursing education program. Nothing in this definition shall be construed to prohibit any contracted affiliating agency's registered professional nurses from assisting with clinical activities selected by the nursing education program faculty supervising a student in the clinical setting who is not employed as nursing faculty. The preceptor provides oversight of each student's patients and gives feedback to the student and clinical instructor. The nursing program faculty shall not be required to be in the affiliating agency's facilities but shall be immediately available by telephone.
- (u)(z) "Professional nursing education program" means a course of study preparing an individual for licensure as a registered professional nurse. This term shall include baccalaureate degree programs and associate degree programs.
- (1) A "baccalaureate degree program" shall be conducted in a four year college or university and shall lead to a baccalaureate degree with a major in nursing.
- (2) An "associate degree program" shall be conducted in a college or university and shall lead to an associate of arts, science, or applied science degree, each with a major in nursing.
- (aa) "Program evaluation plan" means a nursing program's written systematic methodology or plan for measuring and analyzing student learning outcomes and program outcomes against defined standards and timelines to determine effectiveness and provide for ongoing nursing program improvement.
- (v) (bb) "Refresher course" means an educational program for nurses whose licenses are inactive or have lapsed for more than five years.
- (w) (cc) "Review course" means an education offering used to prepare students for the licensing examination.
- (x) (dd) "Satellite program" means an existing, approved nursing education program that agrees to provide the resources that are lacking is offered at a location geographically separate from the parent

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nursing program. The students may spend a portion or all of their time at the satellite location. The curricula in all locations shall be the same, and the credential shall be given by the parent institution.

- (y) (ee) A "school of nursing" means a nursing education program. This term may include any of the following:
 - (1) A college;
 - (2) a school;
 - (3) a division;
 - (4) a department;
 - (5) an academic unit; or
 - (6) a program.
- (ff) "Simulation" means a teaching strategy utilizing technology to replace or amplify clinical situations with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.
- (gg) "Survey or site visit" means an in-person assessment of all components of a nursing program to validate information submitted by the nursing program or to follow up on the board's determination that there is consistent evidence reflecting deficiencies in meeting the requirements.
- (hh) "Student learning outcomes" means the achievement of expected knowledge, skills, and attributes demonstrated by students at course and program levels. Student learning outcomes are measured in classroom and experiential settings and are reported in individual and aggregate formats, including retention and graduation rates, performance on licensure and certification examinations, and employment rates.
- (z) (ii) "Transfer student" means one who is permitted to apply nursing courses completed at another institution to a nursing education program of study.

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(aa) "Work-study" means a cooperative education course in which the student earns academic credit through on the job practical work experience. Work study shall not replace the required nursing education program courses.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008; amended P-______.)

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60-2-101. Requirements for initial approval. (a) Administration and organization.

(1) The Each institution wanting to offer a nursing education program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide for the financial support of the nursing education program.

(2) Authority and responsibility for administering the nursing education program shall be vested in the nurse administrator of the nursing education program. A nursing program administrator shall have oversight of the nursing program.

(3) The <u>nursing</u> program shall be accredited, be part of an institution that is accredited, or be in the process of being accredited by an agency that is approved by the United States department of education.

(b) Application. Each new-or converted proposed nursing education program shall submit an initial application at least 60 days before a scheduled board meeting. The application shall include the following:

(1) The course of study and credential to be conferred;

(2) the name and title of the administrator of the nursing education program;

(3) the name of the controlling body;

(4) the name and title of the administrator of the controlling body;

(5) all sources of financial support;

(6) a proposed curriculum, as specified in K.A.R. 60-2-104, with the total number of hours of both theoretical and clinical instruction;

(7) the number, qualifications, and assignments of faculty members;

(8) a proposed date of initial admission of students to the nursing program;

(9) the number of admissions times students are to be admitted each year and the proposed number of students per admission;

(10) the admission requirements;

(11) a description of the clinical facilities;

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- (12) copies of the current school bulletin or catalog;
- (13) the name of each hospital and affiliating agency providing facilities for clinical experience. Each such hospital and affiliating agency shall be licensed, accredited, or approved by the appropriate entity or entities licensing or certifying body; and
- (14) signed contracts a contractual agreement or letters letter from each clinical facilities facility stating that they the clinical facility will provide clinical experiences for the nursing program's students: and
 - (15) for each applicant with any existing nursing programs, the following:
 - (A) The nursing program outcomes; and
- (B) any nursing program outcomes not meeting the stated benchmark. If any outcomes are not meeting the stated benchmark, a new nursing program shall not be approved.
- (c) Surveys. Each nursing education program shall be surveyed have a survey for initial approval by the board. An on-site A survey shall be conducted by the board to validate information submitted in the program's initial application before granting initial approval.
- (1) During an initial survey, the nurse nursing program administrator of the program shall make available the following:
- (A) The educational institution's Administrators administration, prospective faculty and students, clinical facility representatives, and support services personnel to discuss the nursing education program;
 - (B) minutes of faculty meetings;
 - (C) faculty and student handbooks;
 - (D) policies and procedures;
 - (E) curriculum materials;
 - (F) a copy of the nursing education program's budget; and
 - (G) affiliating agency each contractual agreements. agreement; and

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- (H) a nursing program evaluation plan that addresses compliance with the nurse practice act and board regulations.
- (2) The nurse nursing program administrator of the nursing education program or designated personnel shall take the survey team to inspect the nursing educational facilities, including satellite program facilities and library facilities.
- (3) Upon completion of the survey, the nurse nursing program administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting comments to errors, unclear statements, and omissions.
 - (d) Approval. Each nursing education program seeking approval shall perform the following:
 - (1) Submit a progress report that includes the following:
 - (A) Updated information in on all areas identified in the initial application;
 - (B) the current number of admissions and enrollments;
 - (C) the current number of qualified faculty; and
 - (D) detailed course syllabi; and
 - (2) have a survey site visit conducted by the board's survey team after the first graduation.
- (e) Denial of approval. If a nursing education program fails to meet the requirements of the board within a designated period of time, the <u>nursing</u> program shall be notified by the board's designee of the board's intent to deny approval.

This regulation shall be effective on and after January 1, 2022. (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1119; effective Jan. 1, 1966; amended Jan. 1, 1968; amended Jan. 1, 1972; amended Jan. 1, 1973; amended, E-74-29, July 1, 1974; modified L. 1975, Ch. 302, Sec. 2; modified, L. 1975, Ch. 396, Sec. 1, May 1, 1975; amended May 1, 1987; amended April 4, 1997; amended June 14, 2002; amended Jan. 24, 2003; amended Nov. 7, 2008; amended April 29, 2016; amended P-

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- 60-2-102. Reapproval requirements. (a) Based on the annual report, each nursing education program shall be reviewed for approval annually by the board and pay an the annual fee to the board specified in K.A.R. 60-4-103.
- (b) Each resurvey approval of a nursing education program shall be valid for not more than 10 years. If the <u>nursing</u> program is accredited by a national nursing accreditation agency, the resurvey <u>next survey</u> visit may be made in coordination with a national nursing accreditation agency visit. Each <u>nursing</u> program without national nursing accreditation shall be resurveyed <u>have a survey visit</u> every five years.
- (c) A resurvey or An unannounced survey site visit may be conducted at any time other than a scheduled survey visit if the board determines that there is consistent evidence reflecting deficiencies any deficiency in meeting the requirements or the board is determining whether or not deficiencies have any deficiency has been corrected by a nursing program on conditional approval status.
- (d) The deficiencies Each deficiency sufficient to warrant action by the board shall include the deficiencies specified in subsections (e) through (h). Failure to correct any deficiency within the prescribed period may result in the board's placement of the <u>nursing</u> program on conditional approval or may result in loss of approval.
- (e) (1) If the first-time candidates in a nursing education program have an annual pass rate on the licensure examination of less than 75 80 percent for two consecutive years one year, the nursing program shall receive a written notice of concern from the board.
- (2) The nursing education program shall have three months after the date of the written notice of concern to submit a written report analyzing all aspects of the education nursing program, identifying areas contributing to the pass rate and the nursing program's plan of action to improve the pass rate. The nursing program shall have one year after the date of the written notice to demonstrate evidence of implementing strategies to correct deficiencies any deficiency to bring the pass rate up to at least the 75 80 percent criterion.

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- (3) If the nursing education program has an annual pass rate of less than 75 80 percent for three two consecutive years, the <u>nursing program may receive a site visit survey</u> for evaluation and recommendation and be placed on conditional approval. The <u>nurse nursing program administrator of the program shall appear</u> before the board and present an analysis of the measures taken and an analysis of the reasons for the <u>nursing program's pass rate below 75 80 percent.</u>
- (4) If the nursing program has an annual pass rate of less than 80 percent for three consecutive years for first-time candidates, the nursing program may be directed by the board to cease admissions.
- (f) A <u>nursing</u> program that is accredited by a national nursing accrediting agency and is subsequently placed on warning or whose accreditation by the national nursing accreditation agency is withdrawn shall be scheduled immediately for a survey visit.
- (g) Failure to meet the requirements of the education statutes and regulations shall result in action by the board.
- (h) Each complaint involving educational education statutes and regulations reported to board members or staff shall initiate an investigation by the board and may require a survey visit, depending on the seriousness and number of complaints.
- (i) The nurse nursing program administrator of the nursing education program shall make the following information available during each survey site visit:
 - (1) Data about the nursing program, including the following:
 - (A) The number of students;
 - (B) the legal body responsible for policy and support of the nursing program;
 - (C) the organizational chart;
- (D) an audited fiscal report covering the previous two years, including a statement of income and expenditures;
 - (2) the nurse nursing program administrator's responsibilities;

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- (3) for each faculty member and preceptor, the following information:
- (A) Job descriptions;
- (B) selection policies;
- (C) orientation plan;
- (D) faculty organization by-laws;
- (E) number of full-time and part-time faculty and non-nursing faculty with academic credentials and assignments; and
 - (F) faculty-student clinical ratio;
 - (4) degree plan, if applicable;
 - (5) a copy of the current curriculum with the date of last revision;
 - (6) the testing process with test analysis and the written test procedure;
 - (7) a description of education facilities, including classrooms, offices, library, and computers;
 - (8) a list of clinical facilities;
 - (9) the number of students by classes; and
 - (10) the policies for students as listed in K.A.R. 60-2-107.
- (j) During each resurvey survey visit, the nurse nursing program administrator of the nursing education program shall make available the following:
- (1) The educational institution's administrators administration, faculty, support services personnel, and students;
 - (2) staff members of selected affiliating agencies;
 - (3) faculty minutes for at least the three previous years;
 - (4) faculty and student handbooks;
 - (5) student records;
 - (6) policies and procedures;

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- (7) curriculum materials;
- (8) a copy of the nursing education program's audited fiscal report covering the previous two years, including income and expenditures;
 - (9) affiliating agency contractual agreements;
- (10) program evaluation plan and evidence of <u>nursing</u> program effectiveness, <u>which shall address</u> compliance with the <u>nurse practice act and board regulations</u>; and
 - (11) the school's current catalog.
- (k) The nurse nursing program administrator of the nursing education program or designated personnel shall take the survey <u>visit</u> team to the nursing educational facilities, including satellite program facilities, library facilities, and clinical agencies.
- (l) Upon completion of the survey <u>visit</u>, the <u>nurse nursing program</u> administrator shall be <u>given a copy</u> of the survey report and asked to correct any inaccurate statements contained in the survey report, limiting comments to errors, unclear statements, and omissions.
- (m) If a nursing education program fails to meet the requirements for approval of the board within the a designated period of time, the nursing program shall be provided notice stating the deficiencies and the opportunity for a hearing if requested within 60 days from the date of service of the notice. If no hearing is requested timely, the nursing program shall be removed from the list of approved schools, shall be notified by the board's designee of the board's intent to deny reapproval. This notification shall be made pursuant to K.S.A. 77-512 and amendments thereto of the Kansas administrative procedures act and shall inform the program of its right to a hearing pursuant to the act.
- (n) The parent institution shall be responsible for securing and providing for the permanent custody and storage of records of all students and graduates.

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F7000500 K.A.R. 60-2-102 Page 5

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129;
implementing K.S.A. 65-1118a and 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov
7, 2008; amended P)

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60-2-103. <u>Nursing program</u> faculty and preceptor qualifications. (a) Professional nursing education programs.

- (1) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.
- (2) Each preceptor shall meet the following requirements:
- (A) Be licensed as a registered professional nurse in the state in which the individual is currently practicing nursing; and
- (B) complete a preceptor orientation, which shall include that includes information about the factors influencing pedagogical aspects of the student-preceptor relationship and course information.
- (3) Each <u>nursing</u> program shall have a written plan that includes the method of selection of preceptors, the roles of the faculty members and preceptors, and the methods of contact between faculty members and preceptors during the preceptorship.
 - (4) Each nurse faculty member shall have academic preparation and experience as follows:
- (A) The nurse administrator who is responsible for the development and implementation of the nursing education program shall have had successful experience in administration or teaching and shall have a graduate degree. Each person who is hired as a nurse administrator after July 1, 1999 shall have a graduate degree in nursing, except for any person whose graduate degree is conferred on or before July 1, 1999.
- (B)(A) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree. Each person who is hired as a nurse faculty member after July 1, 2001 shall have a graduate degree in nursing, preferably in the clinical area being taught, except for any person whose graduate degree is was conferred before July 1, 2001.
- (C)(B) Each nurse faculty member responsible for clinical instruction shall possess a graduate degree or provide to the board a faculty degree plan that projects completion of a graduate degree. Each person who is hired as a nurse faculty member responsible for clinical instruction after July 1, 2001 shall meet one of the following requirements:

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- (i) Have a graduate degree in nursing, preferably in the clinical area being taught, except for any person whose graduate degree is was conferred on or before July 1, 2001; or
- (ii) provide to the board a faculty degree plan that projects completion of a graduate degree with the graduate degree to be in nursing if the degree is projected to be completed after July 1, 2001.
 - (b) Practical nursing education programs.
 - (1) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.
 - (2) Each nurse faculty member shall have academic preparation and experience as follows:
- (A) The nurse administrator who is responsible for the development and implementation of the nursing education program shall have had successful experience in administration or teaching and shall have a graduate degree. Each person who is hired as a nurse administrator after July 1, 1999 shall have a graduate degree in nursing, except for any person whose graduate degree is conferred on or before July 1, 1999.
- (B)(A) Each nurse faculty member who is assigned the responsibility of a course shall hold a baccalaureate degree. Each person who is hired as a nurse faculty member after July 1, 2001 shall have a baccalaureate or higher degree in nursing, except for any person whose degree is was conferred on or before July 1, 2001.
- (C)(B) Each nurse faculty member responsible for clinical instruction shall possess a baccalaureate degree or provide to the board a faculty degree plan that projects completion of a baccalaureate degree. Each person who is hired as a nurse faculty member responsible for clinical instruction after July 1, 2001 shall meet one of the following requirements:
- (i) Have a baccalaureate or higher degree in nursing, except for any person whose degree is was conferred on or before July 1, 2001; or
- (ii) provide to the board a faculty degree plan that projects completion of a baccalaureate or higher degree, with the degree to be in nursing if the degree is projected to be completed after July 1, 2001.

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K.A.R. 60-2-103 Page 3

- (c)(1) For each nursing education program, each nurse nursing program administrator shall submit to the board the following:
- (A) A faculty qualification report for each faculty member newly employed. Faculty with a continuing appointment shall have an appropriate degree;
- (B) a faculty degree plan reflecting completion of the degree within six years for each instructor without the appropriate degree. Upon completion of the degree, a transcript showing completion of the nursing program shall be submitted to the board; and
- (C) notification and a rationale for each faculty member who is not following the degree plan as submitted.
- (2) The nurse nursing program administrator may request a faculty hire exception to be approved by the board's professional staff, if faculty meeting the criteria specified in this regulation are not available, by providing documentation of the following:
 - (A) A lack of qualified applicants;
 - (B) a rationale for the need to hire the applicant;
 - (C) the applicant's qualifications; and
 - (D) a plan for faculty recruitment.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 2001 Supp. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended P-

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60-2-104. Curriculum requirements. (a) The faculty in each nursing education program shall develop a curriculum to meet program and graduate student learning outcomes and fulfill these meet the following requirements:

- (1) Identify the competencies of the graduate for the level of nursing practice;
- (2) determine the approach and content for learning experiences;
- (3) direct clinical instruction as an integral part of the program; and
- (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or <u>student</u> <u>learning</u> outcomes of <u>for</u> nursing courses.
 - (b) The curriculum in each nursing education program shall include the following:
- (1) Content in the biological, physical, social, and behavioral sciences that provides a foundation for safe and effective nursing practice;
 - (2) the art and science of nursing; and
- (3) didactic content and clinical experience to meet the objectives or <u>student learning</u> outcomes specified in subsection (c) or (d).
- (c) Each professional nursing program shall provide instruction and clinical <u>learning</u> experience in the following areas:
- (1) The aspects of a safe, effective care environment, including the management of care, safety, and infection control;
- (2) health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease;
 - (3) psychosocial integrity, including coping, adaptation, and psychosocial adaptation; and
- (4) physiological integrity, including basic care and comfort, pharmacology, parenteral therapies, reduction of risk potential, and physiological adaptation.

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- (d) Each practical nursing program shall provide instruction and clinical <u>learning</u> experience in the following areas:
- (1) The aspects of a safe, effective care environment, including the coordination of care, safety, and infection control;
- (2) health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease;
 - (3) psychosocial integrity, including coping, adaptation, and psychosocial adaptation; and
- (4) physiological integrity, including basic care and comfort, pharmacology, reduction of risk potential, and physiological adaptation; and
- (5) intravenous fluid therapy, including, at minimum, didactic, supervised laboratory or supervised clinical practice as specified in K.A.R. 60-16-104.
 - (e) Minimum length of program.
- (1) Each practical nursing education program shall have a minimum of at least 15 credit hours in nursing courses or the equivalent in clock-hours.
- (2) Each professional nursing education program shall have a minimum of at least 30 credit hours in the nursing major.
- (f) The faculty in each nursing education program shall develop and implement a written program evaluation plan that meets the following requirements:
 - (1) Provides evidence of program evaluation and effectiveness; and
 - (2) is used for ongoing program improvement.
- (g) Each nursing education program shall submit major curriculum revisions for approval by the board at least 30 days before the board meetings. The <u>nursing</u> program shall have received board approval before implementation. Major curriculum revisions shall include the following:

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- (1) Any change in the plan of nursing curriculum organization involving philosophy, number of semesters of study, or the delivery method of nursing courses;
 - (2) any change in content requiring a change of clock-hours or credit hours in nursing courses; and
 - (3) any change in the number of students to be admitted to the nursing education program.
- (h) Each nursing education program shall submit minor other curriculum revisions of a course's content, title, objectives, or outcomes to the board's education specialist for approval, which shall be received by The nursing program before implementation shall not implement revisions before receiving approval from the board's education specialist. The information specified in this subsection shall be submitted in writing with the annual report.
- (i) The nurse administrator shall submit to the board office each change not requiring board approval under subsection (g) or (h). This information shall be submitted in writing with the annual report.
 - (j) Each nursing education program shall have an articulation plan.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129;
mplementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008;
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- 60-2-105. Clinical resources. (a) Written Each contractual agreements between the nursing education program and each affiliating agency agreement shall be signed and kept on file in the nursing education program office.
- (b) Clinical learning experiences and sites shall be selected to provide learning opportunities necessary to achieve the nursing education program objectives or student learning outcomes.
- (c) The faculty of each nursing education program shall be responsible for student learning <u>outcomes</u> and evaluation in the clinical area.
- (d) The nursing education program shall provide verification that each affiliating agency used for clinical instruction has clinical facilities that are adequate for the number of students served in terms of space, equipment, and other necessary resources, including an adequate number of patients or clients necessary to meet the <u>nursing</u> program objectives or outcomes.
- (e) A maximum of a 1:10 faculty-to-student ratio, including students at observational sites, shall be maintained during the clinical <u>learning</u> experience <u>and the clinical observational experience</u>.
 - (f) Clinical observational experiences.
- (1) The objectives or <u>student learning</u> outcomes for each <u>clinical</u> observational experience shall reflect observation rather than participation in nursing interventions.
- (2) Affiliating agencies in which <u>clinical</u> observational experiences take place shall not be required to be staffed by registered nurses.
- (3) <u>Clinical</u> observational experiences shall constitute no more than 15 percent of the total clinical hours for the <u>clinical</u> course, <u>unless approved by the board</u>.
 - (4) Simulation experiences shall constitute no more than 50 percent of the total hours for the clinical course.
- (g) Clinical <u>learning</u> experiences with preceptors shall be no more than 20 percent of the total clinical hours of the nursing <u>education</u> program. This prohibition shall not apply to the capstone course.
 - (h) Each affiliating agency used for clinical instruction shall be staffed independently of student

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Fig. 3. K.A.R. 60-2-105 Page 2

assignments.

(i) The number of affiliating agencies used for clinical <u>learning</u> experiences <u>and clinical observational</u>

<u>experiences</u> shall be adequate for meeting curriculum objectives of <u>and student learning</u> outcomes. The nursing <u>education</u> program faculty shall provide the affiliating agency staff with the organizing curriculum framework and <u>either</u> objectives of <u>and student learning</u> outcomes for clinical learning experiences <u>and clinical</u> <u>observational experiences</u> used.

(j) A sufficient number and variety of patients representing all age groups shall be utilized to provide clinical learning experiences that meet curriculum objectives or outcomes. If more than one nursing education program uses the same affiliating agency, the nursing education programs shall document the availability of appropriate clinical learning experiences for all students.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129;
implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended March 6, 2009;
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60-2-106. Educational facilities. (a) Classrooms, laboratories, and conference rooms shall be available when needed and shall be adequate in size, number, and type according to the number of students and the educational purposes for which the rooms are to be used.

- (b) Each nursing education program shall provide the following:
- (1) A physical facility that is safe and is conducive to learning;
- (2) offices space for counseling students in private that are is available and adequate in size, and number, and type to provide the faculty with privacy in counseling students;
 - (3) secure space for nursing student records; and
- (4) current technological resources and student support services for online or distance learning if online or distance learning is provided.
- (c) The library resources, instructional media, and materials shall be of sufficient recency, pertinence, level of content, and quantity as indicated by the curriculum to meet the needs of nursing students and faculty and shall be available to online or distance learning students.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended March 6, 2009; amended P-______.)

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60-2-107.	Student policies. (a)	Each nursing education program	shall have clearly	defined written	student
policies fo	or the following:				

- (1) Admission:
- (A) Generic students;
- (B) transfer students; and
- (C) articulation;
- (2) oral and written English proficiency in reference to K.A.R. 60-3-106;
- (3) readmission;
- (4) progression criteria;
- (5) counseling and guidance;
- (6) the difference between the student role versus and the employee role;
- (7) representation on faculty governance;
- (8) graduation;
- (9) refund policies governing all fees and tuition paid by students; and
- (10) ethical practices for the performance of activities including recruitment, admission, and advertising.
- (b) Each nursing education program shall have a written policy providing information to any student who may be subject to all students regarding licensure denial under disqualifications pursuant to K.S.A. 65-1120, and amendments thereto. The information shall be provided to each student before admission to the nursing education program.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 65-1119; effective April 4, 1997; amended Nov. 7, 2008; amended P-

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- 60-2-108. Reports. (a) An annual report and all applicable fees shall be submitted to the board by each nursing education program on or before June 30 of each year, and Each report shall include the following:
- (1) Changes in the nursing program policies, organizing curriculum framework, objectives or outcomes, and major and minor other curriculum changes;
 - (2) faculty responsibilities for required and elective nursing courses;
- (3) <u>for each facility member</u>, the name, license number, academic credentials, employment date, and full-time or part-time status of each member of the faculty;
- (4) for each preceptor, the name, license number, academic credentials, current clinical area of practice, and place where currently employed;
 - (5) the nurse administrator's teaching responsibilities;
 - (6) for each affiliating agency, the following information:
 - (A) The name;
 - (B) the location; and
 - (C) the student-faculty clinical ratio for the reporting period;
 - (7) statistics for generic, articulation, and transfer students, including the following:
 - (A) Admissions, readmissions, withdrawals, and graduations; and
 - (B) first-time pass rate for each of the last five years;
 - (8) faculty statistics, including name, number, and credentials hiring, retention, and separation;
- (9) the budget spent for library and audiovisual acquisitions to support the nursing program for the most recent year;
- (10) an audited fiscal report covering the previous two years, including a statement of income and expenditures;
 - (11) any complaints involving educational statutes and regulations;

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- (12) a response to the recommendations and requirements from the last annual report or last survey or site visit;
 - (13) any plans for the future, including proposed changes to the nursing program;
 - (14) a description of the practices used to safeguard the health and well-being of students; and
 - (15) a copy of the school's current catalog-;
 - (16) the total number of library holdings and number of holdings regarding nursing;
 - (17) a list of the theory courses and the clinical courses in the curriculum; and
 - (18) statistics for each clinical course, including the following:
 - (A) Total number of hours:
 - (B) total number of clinical observation experience hours;
 - (C) total number of precepted hours; and
 - (D) total number of simulation experience hours.
- (b) If the nursing education program fails to meet the requirements of the board or to submit required reports within a designated period of time, the <u>nursing</u> program shall be removed <u>notified</u> and given the opportunity for a hearing regarding the board's intent to remove the <u>nursing</u> program from the list of approved nursing education programs after receiving notice and being given an opportunity to be heard. These proceedings shall be conducted in accordance with the provisions of the Kansas administrative procedure act.

This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-1129; implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008; amended P-

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Kansas Administrative Regulations **Economic Impact Statement** For the Kansas Division of the Budget

Kansas State Board of Nursing

Agency

785-296-3068

Carol Moreland Agency Contact

Contact Phone Number

60-1-102, 60-1-104, 60-2-101, 60-2-102, 60-2-103, 60-2-104, 60-2-105, 60-2-106 60-2-107, 60-2-108 K.A.R. Number(s)

Submit a hard copy of the proposed rule(s) and regulation(s) and any external documents that the proposed Division of the Budget rule(s) and regulation(s) would adopt, along with the following to: 900 SW Jackson, Room 504-N

Topeka, KS 66612

Brief description of the proposed rule(s) and regulation(s). I.

These regulations explain the approval and re-approval process for RN and LPN programs. They also explain the administrator, faculty and preceptor qualifications, curriculum requirements, clinical resources required, educational facilities required, and student policies required. The content of the annual report each nursing program must submit is also explained.

Statement by the agency if the rule(s) and regulation(s) is mandated by the federal government II. and a statement if approach chosen to address the policy issue is different from that utilized by agencies of contiguous states or the federal government. (If the approach is different, then include a statement of why the Kansas rule and regulation proposed is different)

These regulations are not mandated by the federal government. The content of these regulations are similar to the requirements of Boards of Nursing in other states.

- Agency analysis specifically addressing following: III.
 - The extent to which the rule(s) and regulation(s) will enhance or restrict business A. activities and growth;

These regulations will not restrict business activities and growth. These regulations may strengthen a nursing program's growth as the student outcomes and ability to pass the licensure exam should increase.

The economic effect, including a detailed quantification of implementation and В. compliance costs, on the specific businesses, sectors, public utility ratepayers, individuals, and local governments that would be affected by the proposed rule and regulation and on the state economy as a whole;

The only economic effect might be compliance costs to the nursing program to strengthen their curriculum and prepare their faculty better so student outcomes are better and the pass rate of their graduates on the licensure exam is 80% or above (an

increase from 75% presently).

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- C. Businesses that would be directly affected by the proposed rule and regulation;
 BSN, ADN and PN programs in the state of Kansas.
- D. Benefits of the proposed rule(s) and regulation(s) compared to the costs;

 Student outcomes will be better, which will provide for more competent graduates. This will better protect the citizens of Kansas.
- E. Measures taken by the agency to minimize the cost and impact of the proposed rule(s) and regulation(s) on business and economic development within the State of Kansas, local government, and individuals;

There was input from nursing programs in the state into these revisions and we evaluated the regulations from other Boards of Nursing in the nation.

F. An estimate, expressed as a total dollar figure, of the total annual implementation and compliance costs that are reasonably expected to be incurred by or passed along to business, local governments, or members of the public.

\$This is very difficult to estimate. Most programs will not have any implementation and compliance costs as they already meet these goals. If the program needs to hire more faculty and estimate might be appr. \$60,000 - \$70,000 annually per faculty.

Do the above total implementation and compliance costs exceed \$3.0 million over any two-year period?

YES □ NO ☒

Give a detailed statement of the data and methodology used in estimating the above cost estimate.

On the average what a faculty member might be making annually and this varies from program to program.

Prior to the submission or resubmission of the proposed rule(s) and regulation(s), did the agency hold a public hearing if the total implementation and compliance costs exceed \$3.0 million over any two-year period to find that the estimated costs have been accurately determined and are necessary for achieving legislative intent? If applicable, document when the public hearing was held, those in attendance, and any pertinent information from the hearing.

YES □ NO ☒

G. If the proposed rule(s) and regulation(s) increases or decreases revenues of cities, counties or school districts, or imposes functions or responsibilities on cities, counties or school districts that will increase expenditures or fiscal liability, describe how the

state agency consulted with the League of Kansas Municipalities, Kansas Association of Counties, and/or the Kansas Association of School Boards.

Not applicable

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H. Describe how the agency consulted and solicited information from businesses, associations, local governments, state agencies, or institutions and members of the public that may be affected by the proposed rule(s) and regulation(s).

We had feedback from the program administrators of the nursing programs when these draft regulations were being discussed.

I. For environmental rule(s) and regulation(s) describe the costs that would likely accrue if the proposed rule(s) and regulation(s) are not adopted, as well as the persons would bear the costs and would be affected by the failure to adopt the rule(s) and regulation(s).

Not environmental regulations

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Aug. 23, 2021

NCSBN Elects National Leadership and Considers New Business with its Members at its 2021 Annual Meeting

FOR IMMEDIATE RELEASE

Media Contact: Dawn M. Kappel
Director, Marketing & Communications
312.525.3667 direct
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CHICAGO – The National Council of State Boards of Nursing (NCSBN), <u>www.ncsbn.org</u>, met virtually Aug. 18-19, 2021, to consider pertinent association business with its members. There were 58 member nursing regulatory bodies (MNRBs) represented by delegates.

NCSBN Board of Directors President Jay Douglas, MSM, RN, CSAC, FRE, executive director, Virginia Board of Nursing, noted, "NCSBN's 43rd annual meeting, the second held virtually, provided critical insights into leadership during turbulent times and a reminder that we are more alike than we might think we are. The pandemic, devastating to many, reminds us of the necessity and advantages of global engagement. Delegates demonstrated visionary leadership in the adoption of revised NCSBN Model Act and Rules and the Next Generation NCLEX test design. Both are examples of nursing regulators' attention to the future while continuing to stay focused on the mandate of public protection."

Significant actions approved by the MNRBs include:

- Adopted the proposed revisions to the NCSBN Model Practice Act & Rules, which provide an evidence-based framework of nursing statutes and regulations for nursing regulatory bodies to utilize during policy and advocacy discussions.
- Approved the Next Generation NCLEX® (NGN) test design and polytomous scoring methods
- · Elections to the Board of Directors:
 - o President-elect, Phyllis Johnson, MSN, RN, FNP-BC, executive director, Mississippi Board of Nursing
 - o Treasurer, Adrian Guerrero, CPM, director of operations, Kansas State Board of Nursing
 - o Area I Director, Susan VanBeuge, DNP, APRN, FNP-BC, FAANP, board president, Nevada State Board of Nursing
 - o Area II Director, Lori Scheidt, MBA-HCM, executive director, Missouri State Board of Nursing
 - o Area III Director, Karen C. Lyon, PhD, RN, ACNS, NEA, executive director, Louisiana State Board of Nursing
 - o Area IV Director, Karen Evans, MSN, RN-BC, SD-CLTC, CLC, executive director, Maryland Board of Nursing
- NCSBN delegates also elected a member of the Leadership Succession Committee (LSC):
 - Area III Member, Janice Hooper, PhD, RN, FRE, CNE, FAAN, ANEF, lead nursing consultant for education, Texas Board of Nursing

About NCSBN

Empowering and supporting nursing regulators across the world in their mandate to protect the public, NCSBN is an independent, not-for-profit organization. As a global leader in regulatory excellence, NCSBN champions regulatory solutions to borderless health care delivery, agile regulatory systems and nurses practicing to the full scope of their education, experience and expertise. A world leader in test development and administration, NCSBN's NCLEX® Exams are internationally recognized as the preeminent nursing examinations.

NCSBN's membership is comprised of the nursing regulatory bodies (NRBs) in the 50 states, the District of Columbia and four U.S. territories. There are three exam user members and 27 associate members that are either NRBs or empowered regulatory authorities from other countries or territories.

The statements and opinions expressed are those of NCSBN and not individual members.

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