

Kansas State Board of Nursing Special Board Meeting Notice

Date: November 16, 2021 @ 10:00 a.m.

NOTE: The meeting will be held via Zoom. Link to access meeting to follow agenda.

AGENDA:

K.A.R. 60-1-102 - Approval procedure

K.A.R. 60-1-104 - Definitions

K.A.R. 60-2-101 - Requirements for initial approval

K.A.R. 60-2-102 - Reapproval requirements

K.A.R. 60-2-103 – Nursing program faculty and preceptor qualifications

K.A.R. 60-2-104 – Curriculum requirements

K.A.R. 60-2-105 - Clinical resources

K.A.R. 60-2-106 - Educational facilities

K.A.R. 60-2-107 – Student policies

K.A.R. 60-2-108 - Reports

You are invited to a Zoom webinar.

When: Nov 16, 2021 10:00 AM Central Time (US and Canada) Topic: Kansas State Board of Nursing - Board Meeting

Please click the link below to join the webinar:

 $\underline{https://us02web.zoom.us/j/86944979414?pwd=VjZ6bFN4VWRONndOQm5zZFNDTGZRUT09}$

Passcode: KsbnBoard

Or One tap mobile:

US: +13462487799,,86944979414#,,,,*536728730# or +16699006833,,86944979414#,,,,*536728730#

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Webinar ID: 869 4497 9414

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International numbers available: https://us02web.zoom.us/u/kjnjXuN5r

Proposed

Kansas State Board of Nursing Landon State Office Building 900 SW Jackson St., Suite 1051 Topeka, KS 66612-1230



Phone: 785-296-4929 Fax: 785-296-3929 www.ksbn.org

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 carry ED

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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.
- (1) "Distance learning" means the acquisition of knowledge and skills through information and instruction encompassing a variety of technologies.
- (I) "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)	<u>};</u>
implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008;	
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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 <u>nursing program</u> 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 nursing program is accredited by a national nursing accreditation agency, the resurvey next survey visit may be made in coordination with a national nursing accreditation agency visit. Each nursing program without national nursing accreditation shall be resurveyed have a survey visit every five years.
- (c) A resurvey or An unannounced <u>survey</u> site visit may be conducted at any time other than a scheduled survey visit if the board determines that there is eonsistent evidence reflecting deficiencies <u>any deficiency</u> in meeting the requirements or the board is determining whether or not deficiencies have <u>any deficiency has</u> been corrected by a <u>nursing</u> 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 nursing program may receive a site visit survey for evaluation and recommendation and be placed on conditional approval. The nurse nursing program administrator of the program shall appear before the board and present an analysis of the measures taken and an analysis of the reasons for the nursing program's pass rate below 75 80 percent.
- (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</u> practice act and <u>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 visit 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 <u>survey report and</u> 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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This regulation shall be effective on and after January 1, 2022. (Authorized by and K.S.A. 65-11	<u> 29;</u>
implementing K.S.A. 65-1118a and 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amende	d 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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- (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 student learning 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	hall 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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60-2-105. 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 learning experience and the clinical observational experience.
 - (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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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 or <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 or <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 <u>clinical</u> 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 <u>clinical</u> 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; amended P-_______.)

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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 for 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) for each facility member, the name, license number, academic credentials, employment date, and full-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 <u>opportunity for a hearing regarding the board's intent to remove the nursing program</u> 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; amende
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Agency

Proposec

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

Kansas State Board of Nursing

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. 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 П. 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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STATE OF KANSAS

J. G. SCOTT
Director
MELISSA RENICK
Assistant Director for Research
AMY DECKARD
Assistant Director for Fiscal Affairs



STAFF

LEGISLATIVE COORDINATING COUNCIL INTERIM COMMITTEES
STANDING COMMITTEES

LEGISLATIVE INQUIRIES

Kansas Legislative Research Department

Room 68-West — State Capitol Building — 300 SW Tenth Avenue — Topeka, Kansas 66612-1504 (785) 296-3181 ♦ www.kslegislature.org/klrd ♦ kslegres@klrd.ks.gov

September 20, 2021

Carol Moreland, Executive Administrator Board of Nursing 900 SW Jackson Street, Suite 1051 Topeka, KS 66612 RECEIVED SEP 2 2 2021

KSBN ADMINISTRATION

Re: KAR 60-1-102, approval procedure; KAR 60-1-104, definitions; KAR 60-2-101, requirements for initial approval; KAR 60-2-102, reapproval requirements; KAR 60-2-103, nursing program faculty and preceptor qualifications; KAR 60-2-104, curriculum requirements; KAR 60-2-105, clinical resources; KAR 60-2-106, educational facilities; KAR 60-2-107, student policies; KAR 60-2-108, reports.

Dear Administrator Moreland:

At its meeting on September 10, the Joint Committee on Administrative Rules and Regulations reviewed for public comment the rules and regulations listed above. The enclosed Committee report from that meeting does not contain comments for which a response from your agency is expected.

The enclosed report should be part of the public record on these regulations. An electronic version of this report has been sent to the agency representative who presented the proposed rules and regulations and is available on the Kansas Legislative Research Department (KLRD) website http://www.kslegresearch.org/KLRD-web/Committees/Committees/Committees-JCARR.html. The Committee may review the regulations the agency ultimately adopts, and it reserves any expression of legislative concern to that review. To assist in that final review, agencies are expected to respond to each question or comment of the Committee and to inform the Committee and its KLRD staff, in writing, at the time the rules and regulations are adopted and filed with the Secretary of State, of any and all changes that have been made following the public hearing. Agencies are expected to notify the Committee and KLRD, in writing, when the agency has adopted the regulations as permanent, delayed implementation of the regulations, or decided not to adopt any of the regulations.

Thank you for your attention to this matter. Please let us know if you have any questions.

Sincerely,

Jill A. Shelley,

Principal Research Analyst



Kansas Legislative Research Department

Providing nonpartisan, objective research and fiscal analysis for the Kansas Legislature since 1934

68-West-Statehouse | 300 SW 10th Ave. | Topeka, Kansas 66612-1504 (785) 296-3181

kslegres@klrd.ks.gov

kslegislature.org/klrd

September 15, 2021

To:

Kansas Legislature

From: Jill Shelley, Principal Research Analyst

Re:

Report of the September 10, 2021, Meeting of the Joint Committee on Administrative

Rules and Regulations

With this report, the Joint Committee on Administrative Rules and Regulations (Committee) provides its comments on rules and regulations reviewed at its meeting of September 10, 2021. Agencies are asked to respond to each comment or request for information; responses are compiled and maintained by staff of the Kansas Legislative Research Department.

General Comment

The Committee encourages all agencies to review their rules and regulations and, where possible, revoke those that are outdated, make requirements clearer, and remove unnecessary requirements.

Wildlife and Parks Commission

KAR 115-4-4a, wild turkey; legal equipment and taking methods; KAR 115-17-2, commercial sale of fishing bait; KAR 115-25-6, turkey; spring season, bag limit, permits, and game tags; KAR 115-25-14, fishing; creel limit, size limit, possession limit, and open season; KAR 115-30-3, personal flotation devices; recreational vessels.

The Committee had no comments.

Board of Emergency Medical Services

KAR 109-3-3, emergency medical responder; authorized activities; KAR 109-3-5, advanced emergency medical technician; authorized activities.

KAR 109-1-1, definitions; KAR 109-2-1, ambulance service operator; KAR 109-3-1, revoked (was standards for ambulance attendants); KAR 109-5-1, continuing education; KAR 109-5-3, continuing education approval for long-term providers; KAR 109-5-6, continuing education approval for

single-program provider; KAR 109-6-2, renewal of EMS provider and instructor-coordinator certificates; KAR 109-6-4, inactive certificate; KAR 109-7-1, schedule of fees; KAR 109-10-3, revoked (was late enrollment); KAR 109-10-6, revoked (was required training equipment and supplies); KAR 109-10-7, revoked (was distance learning); KAR 109-11-1a, emergency medical responder (EMR) course approval; KAR 109-11-3a, emergency medical technician (EMT) course approval; KAR 109-11-4a, advanced emergency medical technician (AEMT) course approval; KAR 109-11-6a, paramedic course approval; KAR 109-11-7, instructorcoordinator course approval; KAR 109-11-8, successful completion of a course of instruction; KAR 109-11-9, revoked (was instructor qualifications); KAR 109-15-1, reinstating EMS provider certificate after expiration; KAR 109-15-2, recognition of non-Kansas credentials; KAR 109-15-3, EMS provider certification; KAR 109-17-1, sponsoring organization; general requirements; program manager; KAR 109-17-2, sponsoring organization; application for approval; approval renewal; KAR 109-17-3, sponsoring organization; initial course of instruction; KAR 109-17-4, sponsoring organization; continuing education.

The Committee had no comments.

Board of Healing Arts

KAR 100-6-7, application for licensure pursuant to KSA 48-3406.

The Committee had no comments.

Department of Health and Environment

KAR 28-18-1, definitions; KAR 28-18-14, inspections; KAR 28-18-16, waste-retention lagoon or pond closure plan requirements; KAR 28-18-17, groundwater protection requirements for waste-retention lagoons or ponds and waste treatment facilities; KAR 28-18a-24, financial assurance for swine waste-retention lagoon or pond closure.

The Committee had no comments.

State Board of Nursing

KAR 60-1-102, approval procedure; KAR 60-1-104, definitions; KAR 60-2-101, requirements for initial approval; KAR 60-2-102, reapproval requirements; KAR 60-2-103, nursing program faculty and preceptor qualifications; KAR 60-2-104, curriculum requirements; KAR 60-2-105, clinical resources; KAR 60-2-106, educational facilities; KAR 60-2-107, student policies; KAR 60-2-108, reports.

The Committee had no comments.

Kansas Corporation Commission

KAR 82-11-2, enforcement procedures; KAR 82-11-3, transportation of natural and other gas by pipeline; annual reports and incident reports; KAR 82-11-4, transportation of natural and other gas by pipeline; minimum safety standards; KAR 82-11-6, procedures to ensure compliance with minimum safety standards; KAR 82-11-7, reporting requirements; KAR 82-11-10, drug and alcohol testing.

The Committee had no comments.

Department of Agriculture

KAR 4-34-24, sampling, testing, and harvest requirements; KAR 4-34-25, remediation; effective disposal; violations; KAR 4-34-29, negligent violations; corrective action plans.

The Committee had no comments.





office: 785-233-8638 fax: 573-636-9576



director@ksnurses.com www.ksnurses.com

October 20th, 2021

Dear Carol Moreland and KSBN Board,

On behalf of KSNA, I would like to extend our support of K.A.R. 60-2-102 Reapproval Requirements as written to maintain congruency between our learning institutions.

KSNA would request that we continue to analyze data and make the necessary modifications, if needed, related to impacts of the current pandemic on student success rates due to their simulations learning versus hands-on experience and the on-going nursing shortage in Kansas.

With support of K.A.R. 60-2-102, KSNA is fulfilling our mission to promote professional nursing and to advocate for the health and well-being of all people.

Thank you for your time and consideration.

Best Regards,

Kansas State Nurses Association Board of Directors

Kelly Sommers
Director, Kansas State Nurses Association
director@ksnurses.com



TO: Kansas State Board of Nursing

FROM: Terri Roberts JD, RN

DATE: October 25, 2021

SUBJ: Testimony on Proposed Regulations KAR 60-1-102 - KAR 60-2-108

Thank you for the opportunity to present testimony today on the changes being considered for the Boards role in regulating Kansas Schools of Nursing.

These are a long time in coming; I remember when the Boards attorney went into Executive Session for Attorney Client Privilege with the "Education Committee" about 4 years ago regarding the agencies processing of Schools of Nursing's review. In my 30 years' experience observing the agency Board meetings I had never seen such an action by the Boards AG assigned attorney. Only the Board staff and Education Committee members were allowed in that meeting that day, so what was said was not public, but today's proposed School of Nursing regulations—that Executive Session—was the impetus for revising and updating these regulations.

Before I begin, my testimony I would like to strongly encourage the Board members to review the following information and request data from the staff, because is not publically available/shared, but is relevant to the significant changes under consideration in these proposed regulations:

a. What are the percentages of 2nd time, 3rd time, 4th time and 5th time test takers that pass the licensure exam?
While I don't have that data, (this is just what I have gathered from conversations) I've heard that each time the failing cohort takes the exam, the number that pass is about 50%.

So if for example 100 in 2019 did not pass on the first licensure exam,

50 will pass the 2nd test (50%--50 not passing),

25 will pass the 3rd test, (50%--25 not passing),

12 will pass the 4th test, (50%--12 not passing),

6 will pass the 5th test, (50%--6 not passing)

Leaving 6 out of the 100 that have not yet passed the exam.

Does the Board of Nursing receive reports on this, and if so,

- o Are they shared with the public?
- o Are they shared with the respective Schools of Nursing?
- o Who does get to see them?

O

If I was a KSBN Board member I would want to know these statistics for Kansas, and I would ask. It will give you the big picture – the landscape regarding the pass rates in general and the schools performance from a different standard than "FIRST TIME PASS RATES" only. (See attached current public record of KSBN FIRST TIME PASS RATES by Schools of Nursing)

Additionally, overall in a Kansas year of graduations from both RN and LPN programs, what is the percentage of graduates who "never" pass their licensure exam? I can imagine that with those moving and taking their licensure exams out of state, this is somewhat challenging for tracking purposes, but it seems a worthy effort, since there is such an emphasis on "FIRST TIME PASS RATES" as the benchmark for Kansas Schools of Nursing. Maybe this is already done by the NCSBN and is provided in reports not available to the public.

b. Why hasn't the current regulations in effect with the 75% FIRST TIME PASS RATE for two consecutive years, in KAR 60-2-102 (e) (1), (2), (3) & (4)? been sufficient for inspiring Kansas Schools of Nursing towards the improvement for their FIRST TIME PASS RATES?

-What analysis has been conducted by staff, or anyone, to support the proposed changes in raising the FIRST TIME PASS RATES benchmark from 75% to 80% AND putting a School of Nursing on review the first year of falling below the 80%?

Additionally, smaller programs, with less number of graduates are impacted more heavily when a student or two students fail. Larger nursing programs with higher number of enrolled students are not necessarily impacted because the rate of passage is spread over a larger number of graduates.

Testimony on the proposed regulations:

KAR 60-2-102 Please give serious consideration to retaining the current regulations, KAR 60-2-102 (e) (1), (2), (3), (4) that provide an adequate intervention and timeline by the Board of Nursing for our Kansas Schools. I support the current regulations, without the proposed changes.

- ➤ What that would look like is that the Board members do not recommend adoption of KAR 60-2-102 at the Board Meeting when these are on the agenda. It is that simple. The current regulations on this matter would be retained and stay in place and govern.
- ➤ Since March 2020, nursing educators have had to be flexible and creative to be able to give their students clinical learning opportunities outside of their normal settings. This pandemic has not been easy for nursing educators and their students, as they had to pivot on short notice to simulation and on-line learning for their clinical experiences. This alone should give pause regarding more rigid

regulations for evaluating their performance in educating nursing students during a pandemic and without access to clinical settings for experiential learning.

➤ A letter dated January 13, 2020 from the Kansas Association of Community College Trustees (KACCT) expressed concern and requested flexibility regarding simulation and pass rates "given the challenges experienced over the past year by all Kansans and particularly nursing students." It was signed on behalf of 13 Community Colleges, and I have attached it to my testimony in case you had not seen it. (I suspect it might not have been dated properly, maybe should have been dated January 13, 2021).

KAR 60-2-104 Curriculum requirements. I recommend not adding the new proposed (5) intravenous fluid therapy section—for the sole reason that it is not on the PN NCLEX Test Plan. The NCLEX for PN's does not test for competency in IV administration, therefore should not be mandated for content to teach LPN's. The only IV reference in the test plan is highlighted in yellow, "Calculate and monitor intravenous (IV) flow rate. I have included the relevant section of the TEST PLAN below.

Pharmacological Therapies from PN NCLEX TEST Plan

https://www.ncsbn.org/2020 NCLEXPN TestPlan-English.pdf

Pharmacological Therapies – the LPN/VN provides care related to the administration of medications and monitors clients who are receiving parenteral therapies.

PHARMACOLOGICAL THERAPIES

Related Activity Statements from the Report of Findings from the 2018 LPN/VN Practice Analysis:

Linking the NCLEX-PN®

Examination to Practice

Perform calculations needed for medication administration

Reinforce education to client regarding medications

Evaluate client response to medication (e.g., adverse reactions, interactions, therapeutic effects)

Follow the rights of medication administration

Maintain medication safety practices (e.g., storage, checking for expiration dates, compatibility)

Reconcile and maintain medication list or medication administration record (e.g., prescribed medications, herbal supplements, over-the-counter medications)

Collect required data prior to medication administration (e.g., contraindications, desired therapeutic effects, current medications)

Administer medication by oral route

Administer intravenous piggyback (secondary) medications

Administer medication by gastrointestinal tube (e.g., g-tube, nasogastric (NG) tube, g-button,

j-tube)

Administer a subcutaneous, intradermal or intramuscular medication

Administer medication by ear, eye, nose, inhalation, rectum, vagina or skin route

Count narcotics/controlled substances and report discrepancies

Calculate and monitor intravenous (IV) flow rate

Monitor transfusion of blood product

Maintain pain control devices (e.g., epidural, patient control analgesia, peripheral nerve catheter)



Janary 13th, 2020

Kansas State Board of Nursing 900 SW Jackson St. # 1057 Topeka, KS 66612

Executive Administrator Moreland:

We are writing the Kansas State Board of Nursing (KSBN) to express our collective desire to continue the dialog with the Kansas Board of Nursing as we navigate through COVID-19. KSBN has been very accommodating to our institutions throughout this COVID-19 pandemic by allowing us to conduct lectures via zoom and other modalities without having to submit a curriculum change. KSBN has also allowed institutions to add virtual simulation to help meet some of the clinical requirements. Unfortunately, COVID-19 has had a dramatic impact on our nursing programs, including our inability to continue clinical training in hands-on health care settings. This has been challenging as many facilities have not allowed our students to receive training in the traditional hands on fashion. As a result, our faculty have not been able to spend as much time working directly with students and patients in an actual health care setting to ensure students' skills are adequately prepared for an actual health care setting. We have done our best to train using virtual training methodologies, but there is no substitution for students having the opportunity for hands-on learning. We understand the KSBN is considering implementing a change in clinical hour requirements that would establish a standard where at least 50% of clinical hours need to be provided to students in face-to-face settings. While we hope to never again face a pandemic like COVID-19, we feel there is a need to plan as if we may face another similar situation, and with this in mind we encourage KSBN to ensure that any changes related to clinical hours being required face-to-face also have an emergency provision which would allow this to be waived if another emergency arises.

Our sector is committed to ensuring a well-trained and high-quality health care workforce exists in Kansas and is ready to meet the healthcare needs of all Kansans. However, given the backdrop of COVID-19 and the challenges experienced within the past year and the pending increase in the KSBN program benchmark standard changes, we urge the KSBN to dialog with each nursing program to understand and identify any extenuating circumstances faced by each program during this unprecedented year. Please understand we are collectively writing to you, not to lower the standards that KSBN has set forth, but rather in hopes that the Board will exhibit some level of flexibility on the rigidness of the proposed standards and pass rates given the challenges experienced over the past year by all Kansans and particularly nursing students. Thank you for your time and consideration.

Cloud County Community College

Fort Scott Community College

Kansas Community College Presidents,

Butler County Community College Colby Community College Garden City Community College Neosho County Community College

Garden City Community College

Neosho County Community College

Fratt Community College

Kansas City Kansas Community College

Coffeyville Community College
Highland Community College
Johnson County Community College
Seward County Community College

National Council Licensure Examination for Registered Nurses Program Summary - All First Time Registered Nurse Candidates Educated in Kansas through December 31, 2020

	Program					
	Туре	2016	2017	2018	2019	2020
Program .		% Pass	% Pass	% Pass	% Pass	% Pass
Baker University	BSN	96.92	93.15	97.14	97.40	92.22
Barton County Community College	ADN	44.44	88.89	80.77	92.31	100.00
Benedictine College	BSN	68.18	100.00	88.00	100.00	93,33
Bethel College	BSN	84.44	80.00	85.71	89.66	86.36
Brown Mackie College – Kansas City	ADN	38.10	43.33	closed	closed	closed
Brown Mackie College - Salina	ADN	46.67	37.04	closed	100.00	closed
Butler Community College	ADN	89.57	88.98	92.66	87.30	87,40
Cloud County Community College	ADN	82.76	83.87	100.00	82.14	87.10
Coffeyville Community College	ADN	72,73	91.67	100.00	90.00	85.00
Colby Community College	ADN	72.97	62.16	72.73	83,33	77.78
Dodge City Community College	ADN	88,89	95.83	88.89	92,31	93,33
Donnelly College	ADN			New	60.00	. 77.78
Emporia State University	BSN	93.94	96.15	89.13	97.44	93.02
Fort Hays State University	BSN	95.00	89.13	83,72	82.35	89.19
Fort Scott Community College	ADN	88.00	78.95	100.00	70.00	77.78
Garden City Community College	ADN	79.19	87.50	91.30	74.19	84.2
Hesston College	ADN	86.00	86.49	closed	closed.	closed
Hesston College	BSN	no data	88.24	80.85	74.36	90.91
Highland Comm College Technical Center	ADN	97.74	100.00	100.00	66,67	75.00
Hutchinson Community College	ADN	70.42	85.33	88.75	83.08	85.00
Johnson County Community College	ADN	98.41	78.57	84.38	98.00	94.23
Kansas City Kansas Community College	ADN	73.27	73.75	77.50	79.79	85,0′
Kansas Wesleyan University	BSN	57.14	0.00	75.00	100.00	100.00
Labette Community College	ADN	82.35	92.59	100.00	100.00	89.60
Manhattan Area Technical College	ADN	87.50	100,00	100.00	90,24	93.33
Mid America Nazarene University	BSN	87.83	92.62	95.68	93.33	88.00
National American University (OP)	BSN	69.57	75.00	73.33	81.48	Closed
National American University (Wichita)	BSN	66.67	75.00	71.43	2019 grads combined w/ OP campus	
Neosho County Community College	ADN	77.88	77.78	74.80	68.00	82.83
Newman University	BSN	94.12	100.00	86.00	86.84	78.3
North Central Kansas Technical College - Hays	ADN	88.46	79.31	84.62	96,43	81.4
Pittsburg State University	BSN	89.19	94.29	98.68	91.03	92.9
Pratt Community College	ADN	31.25	83,33	no data	70.83	64.7
Rasmussen College	ADN	81.25	90.63	100.00	76.83	73.7
Rasmussen College	BSN		New	no data	93.75	77.7
Salina Area Technical College	ADN				New	84.6
Dainia ritoa 100iliioai Ooitogo	-25	6-	1	L	Educatio	

Program		% Pass				
Seward County Community College	ADN	88,89	73.33	73.33	74.07	52,63
University of Kansas Medical Center	BSN	87.76	93.14	97.00	83.74	88.03
University of St. Mary	BSN	83.05	91.80	95.65	92.98	96.67
Washburn University	BSN	80.74	85.38	90.70	89.78	86,89
Wichita State University	BSN	85.50	86.73	94.29	87.77	86.43
Kansas Pass Rate (RN)		78.56	82.10	88.90	86.6^	86.18^
National Pass Rate (U.S. Educated)	Out had not seen had had had held not now had	84.57	87.11	88.29	88.18	86.57**

^{*} Passing Standard increased April 2020 (last increase was 2013)

Pass Rates obtained from NCS Pearson, Inc. & National Council of State Boards of Nursing 1/6/2021

^ADN pass rate - 83.16; BSN pass rate - 88.79

**ADN pass rate - 82.80; BSN pass rate - 90.29 Programs at 100%

Denotes above Nat'l Average

National Council Licensure Examination for Practical Nurses Program Summary - All First Time Practical Nurse Candidates Educated in Kansas through December 31, 2020

	Program		1.		1	
	Туре	2016	2017	2018	2019	2020
Barton County Community College	PN	87.50	100.00	100.00	100.00	100.00
Brown Mackie College – Kansas City	PN	58.70				
(closed)			30.77	66,67	closed	closed
Brown Mackie College - Salina (closed)	PN	64.15	58.33	50.00	100.00	closed
Butler Community College	PN	100.00	100.00	95.38	100.00	95.83
Coffeyville Community College	PN	80.00	100.00	100.00	100.00	92.86
Colby Community College	PN	79.49	81.82	90.91	96,43	89.19
Dodge City Community College	PN	100.00	100.00	no data	no data	100.00
Donnelly College	PN	75.00	52.00	75.00	87.50	77.50
Flint Hills Area Technical College	PN	88.37	78.95	70.27	86.11	84.62
Garden City Community College	PN	95.65,	100.00	100.00	96.67	100.00
Highland Community College Technical	PN	97.30			94.12	
Center Center			100.00	88,89		94.12
Hutchinson Community College	PN	77.27	84.48	82,26	90.91	83.67
Johnson County Community College	PN	89,58	93,88	97.62	95.83	88.89
Kansas City Kansas Community College	PN	84,31	92.00	90.38	91.49	82.46
Labette Community College	PN	100.00	100.00	100.00	100.00	78.95
Manhattan Area Technical College	PN	94.74	87.50	100.00	100.00	86.21
Neosho County Community College	PN	94.81	92.86	87,21	93,42	94.12
North Central Kansas Technical College –	PN	96.43	100.00	100.00	100.00	93.33
North Central Kansas Technical College -	PN	100.00	96.88	94.44	92.31	96.97
Pratt Community College	PN	83.33	90.91	85.00	90.00	90.91
Salina Area Technical College	PN			New	80,00	74.07
Seward County Community College	PN	95,83	100.00	86.96	100.00	92.86
Washburn Institute of Technology	PN	90.70	94.03	98.28	87.88	93.75
WATC / WSU Tech	PN	83,05	78.69	83.50	80.67	82.26
Kansas Pass Rate (PN)		87.66	87,53	88.31	93,79	87.89
National Pass Rate (U.S. Educated)		83,73	83.85	85.91	86.18	83.08
Passing Standard Increased April 2014: no change	A 2017				~~	

Passing Standard Increased April 2014; no change 2017

Passing rates obtained from NCS Pearson, Inc. & National Council of State Boards of Nursing 1/6/2021

Denotes above Nat'l Average Programs at 100%