

Division 21

Standards for Approval of Nursing Education Programs

OAR 851-021-0000

Purpose of Standards

To establish standards for nursing education programs that ensure graduates are prepared for safe nursing practice. To include the following:

- (1) Processes for the approval of new nursing education programs;
- (2) Accreditation requirements of nursing education programs;
- (3) Criteria for ongoing evaluation of established nursing education programs;
- (4) Standards for the operation of nursing education programs; and
- (5) Processes for denial or withdrawal of approval of nursing education programs that do not maintain compliance with OAR Chapter 851 Division 21.

Statutory/Other Authority: ORS 678.150, 678.340 & 678.360

Statutes/Other Implemented: ORS 678.150 & 678.360

History:

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Establishment and Approval of New Nursing Education Programs

- (1) Step 1 – Preliminary Development Application.
 - (a) The proposed program must submit the following documentation to the Board at least one year prior to the planned start date:
 - (A) Needs assessment highlighting the statewide need for the proposed nursing education program;
 - (B) Type of program including identification of proposed instructional modality and degree or certificate awarded;
 - (C) Planned student enrollment;
 - (D) Evidence of institutional accreditation by an agency recognized by the United States Department of Education;
 - (E) Evidence of dedicated financial resources for planning, implementation, and continuation of the program;
 - (F) Description of anticipated educational resources, including facilities, and technological learning resources;
 - (G) Description of anticipated clinical resources.
 - (H) Number of anticipated faculty and program administrators; and
 - (I) A proposed timeline for developing and initiating the program.

- (b) The Board, after review and consideration of the application, must either approve or deny permission to move forward with preliminary development.
- (2) Step 2 – Initial Approval for Admission of Students.
 - (a) The proposed program must provide the Board with evidence that the following program components and processes have been completed at least six months prior to the planned start date:
 - (A) Employment of a nursing administrator;
 - (B) Employment of nurse educators, other educators, and administrative support;
 - (C) Current institutional catalog, including information provided to students regarding program accreditation and approvals;
 - (D) The proposed curriculum plan;
 - (E) Evidence of adequate clinical placements for the program with supporting documentation.
 - (F) A systematic plan of evaluation of the curriculum and program;
 - (G) Policies related to admission, progression, retention, and graduation;
 - (H) Policies and strategies to address students' needs including accommodations, learning disabilities, English as an international language; and remediation tactics for students performing below standard and for when clinical errors occur;
 - (I) Practical nursing (PN) and associate degree nursing education programs must have a signed articulation agreement for program graduates into the next level of nursing education;
 - (J) Practical nursing and registered nursing (RN) education programs must provide a timeline for attainment of national nursing program accreditation; and
 - (K) Advanced Practice Registered Nursing (APRN) education programs must provide verification of candidacy for accreditation.
 - (b) If the Board grants initial approval:
 - (A) The program may begin recruitment and acceptance of students, and may admit one cohort of students per academic year until full approval is granted;
 - (B) Interim progress reports may be requested by the Board or its representative at any time; and
 - (C) If students are not admitted within twelve months of initial approval, the approval is expired.
 - (c) If the Board denies the initial approval the program may submit a revised initial approval application.
- (3) Step 3 – Full Approval of Program.
 - (a) Within six months following the graduation of the first cohort of students the program must:
 - (A) Submit a written report addressing their compliance with OAR 851-021-0040 through 851-021-0070.
 - (B) Undergo a site survey conducted by a representative of the Board.
 - (b) The full approval of a new program may be granted for four years, with subsequent approvals aligning with the frequency of national nursing accreditation surveys.
 - (c) If full approval is denied the program may request a hearing before the Board in accordance with the Administrative Procedures Act.

Statutory/Other Authority: ORS 678.150, ORS 678.340 & ORS 678.360

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NER 37-1977, f. & cert. ef. 7-18-77 NER
30-1976, f. & cert. ef. 1-27-76

851-021-0012

Accreditation Requirements of Nursing Education Programs

- (1) New nursing education programs must acquire national nursing accreditation from an agency approved by the United States Department of Education. This accreditation must occur within four years of the full approval of a new nursing education program.
- (2) Except as provided in (1) all nursing education programs must obtain national nursing education accreditation from an agency approved by the United States Department of Education by July 1st, 2029.
- (3) Nursing education programs must notify the Board of accrediting agency site visit dates within 30 days of scheduling the visit. A site survey will be conducted alongside the accrediting agency by a representative of the Board
- (4) All nursing education programs that are accredited or candidates for accreditation must submit to the Board:
 - (a) The program's most recent national nursing accreditation agency written self-study report;
 - (b) Any report or letter exchanged between the nursing education program and the national nursing education accreditation agency, including but not limited to: continuous improvement progress reports, substantive change notification and accreditation action letters, site visit reports and program response letters, and final site visit report; and
 - (c) Any notice of change in nursing education program or institutional accreditation status.
- (5) The documents listed in section (4) must be submitted to the Board within 30 days of completion or receipt by the nursing education program. The nursing education program must report any non-compliance with accreditation standards within five business days.
- (6) The Board may authorize a program survey for:
 - (a) Failure to submit documentation as listed in section (4) above.
 - (b) Failure to achieve or maintain national nursing accreditation.

851-021-0015

Continuing Board Approval of Nursing Education Programs

- (1) All nursing education programs must continue to meet the standards outlined in OAR Chapter 851 Division 21 to maintain approval.
- (2) Nursing education programs will be surveyed on a cycle which aligns with their national nursing accreditation. As part of the survey process the nursing education program must:
 - (a) Submit a written self-study report. Nationally accredited nursing programs may submit their accreditation self-study report; and,

- (b) Undergo a site survey conducted by a representative of the Board.
- (3) Following receipt of the accrediting agency site visit report and documentation of accreditation status the Board will determine continuing approval status and timeline.
- (4) The Board may direct a representative to perform a survey at any time, related to potential or identified violations of OAR Chapter 851 Division 21. This includes, but is not limited to:
 - (a) Denial, withdrawal or change of program or educational institution accreditation status.
 - (b) Complaints from students, faculty, and clinical agencies; or
 - (c) Annual report data indicating concerns about the stability of the program.
- (5) If the board determines an institution does not meet requirements for approved programs, the board shall issue to the institution written notice that specifies the defect and the time within which the institution must correct the defect. The board shall withdraw approval from an institution that fails to correct the defect specified within the period of time prescribed in the notice. The institution may request and if requested shall be granted a hearing before the board in the manner required for contested cases under ORS Chapter 183.
- (6) The Board may withdraw approval for the nursing education program if deficiencies are not corrected within the allotted time.

Statutory/Other Authority: ORS 678.150, ORS 678.340, & ORS 678.360

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NER 37-1977, f. & cert. ef. 7-18-77

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Reports and Approvals

- (1) Programs must complete an annual report as directed by the Board representative.
- (2) Programs must notify the Board representative in writing within 30 days following a:
 - (a) Change in the nurse administrator;
 - (b) Change of administrative control within the educational institution, with the rationale for the change and anticipated impact on the nursing program;
 - (c) Plan to move the entire program to a new location. This notification must include:
 - (A) Address of the new location;
 - (B) Rationale for moving the nursing program;
 - (C) Anticipated date of completed move; and,
 - (D) Anticipated impact on curriculum delivery, other nursing programs, clinical partners, students and faculty.
 - (d) Change in availability of adequate clinical experiences that result in alteration of student progression;
 - (e) Change in accreditation status of the nursing program or the educational institution; or,
 - (f) Reduction in the financial support for the program that impact curriculum delivery, student progression or program operations.
- (3) When a nursing education program anticipates a substantive change to an educational track, such change must be submitted to the Board for approval at a minimum of 90 days prior to implementation.
 - (a) A substantive change includes, but is not limited to, changes in:

- (A) Overall length of the program;
 - (B) Alteration of 25% of nursing curriculum course credits;
 - (C) Program outcomes; or,
 - (D) Opening or closing of an educational track, at the same level of licensure
 - (b) The nursing education program must submit for approval either their accreditation substantive change report or a reporting including:
 - (A) Rationale for proposed changes including the anticipated effect on faculty, students, education and clinical resources, and facilities;
 - (B) Presentation of the differences between the current curriculum and the proposed curriculum;
 - (C) A timetable for implementation of change; and,
 - (D) Plan for evaluation of the change.
 - (c) The nursing education program may not implement the change until approved by the Board.
- (4) Approved nursing programs that intend to offer a PN exit or option, that is not a standalone PN program, must submit to the Board for approval evidence of how the program meets the standards prescribed for PN programs outlined in OAR 851-021-0050(5). The nursing education program must receive approval at least six months prior to allowing the PN option.
- (5) When an approved nursing education program intends to add an extended campus site or addition of distance education technology, the program must notify the Board and provide the following information:
- (a) Description of the proposed education facilities or distance education technology
 - (b) Plan for ensuring adequate qualified faculty
 - (c) Evidence of available clinical resources
 - (d) Evidence of dedicated financial resources for planning, implementation, and continuation of the program; and,
 - (e) Tentative timeline for planning, initiating and evaluating
- (6) A nursing education program may apply to implement an innovative approach that significantly alters the approved curriculum, model for clinical experiences, or faculty-to-student ratio. A letter of intent must be submitted to the Board for approval six months prior to the planned implementation. The letter of intent must include the following information:
- (a) Description of the proposed project, including purpose and rationale.
 - (b) Identification of the standards affected by the proposed innovative approach.
 - (c) Description of mechanisms and procedures for student safety and learning effectiveness.
 - (d) Plan for evaluation of the project and reporting findings back to the Board.
 - (e) Tentative time schedule for planning, initiating, and evaluating the program.
- (7) Nursing programs may request approval for appointment by exception of nurse administrators or faculty who do not meet the qualifications outlined in OAR 851-021-0045(4). Programs must submit in writing the rationale for the request. Exception requests must be approved before the individual assumes the program assignment. The Board representative may grant approvals in the following circumstances:
- (a) The education and experience qualifications are deemed equivalent to the requirements;
 - (b) The individual is pursuing the needed qualifications. Reports on progress toward meeting the minimum qualifications must be provided as requested by the Board representative; or,
 - (c) The individual is appointed for one year. The appointment may be extended annually for a maximum of two times.

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NER 4-1985, f. & cert. ef. 7-10-85

851-021-0035

Closing of an Approved Nursing Education Program

- (1) When the educational institution anticipates the voluntary closing of a nursing education program, it must notify the Board in writing stating the reason, plan for teach out and transfer, and date of the intended closing. The educational institution must follow closing procedures as per OAR 583-030-0061.
- (2) The program must continue to meet the standards in OAR 851-021-0040 through 851-021-0070 until closure.
- (3) When the Board denies or withdraws approval of a program, the educational institution must comply with the following procedures:
 - (a) The program must close after the institution has made a reasonable effort to assist in the transfer of students to other approved nursing education programs. A timeframe for the transfer process must be established by the Board; and
 - (b) The date on which the last student was transferred must be the closing date of the program unless otherwise designated by the Board.

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851-021-0040

Nursing Education Program Organization and Administration

- (1) The educational institution offering nursing education programs must:
 - (a) Maintain all required approvals through the State of Oregon; and
 - (b) Be institutionally accredited by an agency approved by the United States Department of Education.
- (2) The program must have adequate faculty, staff, physical, technological, and fiscal resources for the development, implementation, stability, and continuation of the program.
- (3) The educational institution must ensure the Nurse Administrator has institutional authority, control, and administrative responsibility for the program, including:
 - (a) Ensuring adherence with all regulatory standards;
 - (b) Leadership within the faculty for the development, implementation, and evaluation of the program, including curriculum and instructional delivery;
 - (c) Appointment of qualified faculty and coordination of appropriate teaching assignments;
 - (d) Participation in institutional policy and program decisions that affect the nursing

- program;
 - (e) Participation in preparation and administration of the program budget;
 - (f) Ensuring faculty member orientation and professional development; and,
 - (g) Have sufficient time provided for carrying out administrative responsibilities to ensure the nursing education program meets the standards of OAR Chapter 851, Division 21.
- (4) The policies of the educational institution and the nursing education program must be congruent, fair, equitable, current, and published. The following must be accessible to all applicants and students:
- (a) Admission and re-admission policies;
 - (b) Grading policies;
 - (c) Policy on advanced placement, articulation agreements, and transfer of credits;
 - (d) Criteria for successful progression in the program, including graduation requirements;
 - (e) The number of credits required for completion of the program;
 - (f) Tuition, fees, and other program costs; and,
 - (g) Appeal, grievance and complaint policies.
- (5) Nursing education programs must establish mechanisms for student input into and participation in decisions related to the nursing education program.
- (6) The following records must be maintained and made available for review for a period of twenty years:
- (a) Student complaints and grievances filed with the program.
 - (b) Reports relating to education, preparation, licensing, and continuing education (CE) of all faculty as established in OAR 851-021-0045.
 - (c) Curriculum, syllabi, program of study, and student handbooks

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NER 3-1983, f. & cert. ef. 12-1-83

NER 37-1977, f. & cert. ef. 7-18-77

NER 30-1976, f. & cert. ef. 1-27-76

851-021-0045

Nursing Faculty

- (1) Nursing education program faculty must include a sufficient number of qualified nurse educators and nurse educator associates to meet the learning outcomes of the program.
- (a) The final evaluation of student learning outcomes in the classroom or clinical experience must be made by a faculty member.
 - (b) Nursing faculty must be academically and experientially qualified for their program assignment.
 - (c) A program may have no more than 25% of its full-time faculty comprised of nurse educator associates and faculty appointed by exception according to OAR 851-021-0025(4).
- (2) Program appointments and qualifications include:

- (a) The nurse administrator. The nurse administrator is responsible and accountable for the nursing education program, regardless of the official title assigned by the institution. The nurse administrator must:
 - (A) Hold an active RN license in Oregon;
 - (B) Hold at least a graduate degree in nursing; and
 - (C) Have two years full-time experience as a nurse educator or in an administrative position in an academic nursing education program.
 - (b) The nurse educator. The nurse educator is responsible for the development, implementation, and evaluation of the nursing program curriculum. This may include a full-time, part-time, or adjunct faculty regardless of institutional rank. The nurse educator must:
 - (A) Hold an active RN license in Oregon;
 - (B) Hold at least a graduate degree in nursing or a baccalaureate degree in nursing and graduate or doctoral degree in a related field. If teaching in a PN program only, the nurse educator may hold a baccalaureate degree in nursing; and
 - (C) Document competency in teaching through experience, educational preparation, or CE.
 - (c) The nurse educator associate. The nurse educator associate may contribute to classroom and clinical instruction in collaboration with and under the direction of the nurse educator. The nurse educator associate must:
 - (A) Hold an active RN license in Oregon; and
 - (B) Hold at least a baccalaureate degree in nursing.
 - (d) The non-nurse faculty. Non-nurse faculty may teach within the nursing curriculum or other required courses with embedded nursing outcomes. These faculty must:
 - (A) Hold at least a graduate degree; and
 - (B) Be academically and experientially qualified for assigned teaching responsibilities.
- (3) In addition to the requirements in section (2) APRN program administrators and faculty must meet the following qualifications for APRN programs:
- (a) A program administrator of an NP education program must have a current national certification with the same population focus of the education program.
 - (b) A program administrator of a CRNA education program must have a current national CRNA certification.
 - (c) A program administrator of a CNS education program must have a current national certification with the same population focus as the education program, unless a national certification for the population focus or subject matter does not exist.
 - (d) All nursing faculty teaching APRN core courses must hold an active Oregon APRN license.
- (4) The nurse administrator has authority to make faculty appointments within these rules without Board approval or notification.
- (5) The nursing education program must ensure that faculty are provided orientation and mentorship in their assigned roles.
- (6) Nurse faculty members must have the authority and responsibility to:
- (a) Design, implement, and evaluate the program outcomes and overall curriculum;
 - (b) Develop and evaluate nursing program policies, including student admission, progression, and graduation policies;
 - (c) Evaluate student learning outcomes in didactic and clinical settings;
 - (c) Provide timely feedback to students on progression within a course and the program;
 - (e) Provide opportunity for students to evaluate teaching effectiveness, courses, and the program;
 - (f) Provide clear guidance to clinical partners on learning outcomes, expected competencies, and learning level of students assigned to the clinical experience;
 - (g) Implement a plan for on-going course-specific and comprehensive program evaluation; and

- (h) Maintain documentation of professional development activities that demonstrate links between periodic evaluation of competency, professional goals, planned professional development activities, and completion of these activities.
- (7) Nurse faculty members must engage in professional development related to their professional role or teaching responsibilities. The educational institution and nurse administrator must provide support for faculty in developing and maintaining competence in assigned teaching responsibilities and nursing practice.
- (8) Faculty to student ratios in clinical experience for prelicensure PN/RN education:
 - (a) Nursing education programs must develop policies surrounding the faculty-to-student ratios in each clinical experience setting utilized by the program. In determining faculty-to-student ratios programs must consider:
 - (A) Learning outcomes;
 - (B) Experience of the faculty member;
 - (C) Level of student;
 - (D) Context of care;
 - (E) Number, type, and condition of clients; and
 - (F) Adequacy of ratio to allow nurse faculty to:
 - (i) Assess the students ability to function safely in the experience;
 - (ii) Select and guide the student experience; and
 - (iii) Evaluate student performance and learning.
 - (b) In clinical experiences where the nurse faculty provides direct supervision of the nursing student, a nurse faculty member may be responsible for up to eight students. Faculty members providing supervision must remain in the same facility as the student group for the duration of their clinical experiences.
 - (c) In clinical experiences where students are directly supervised by an employee of the agency, the faculty may oversee up to 12 students. The faculty remains responsible for the evaluation of student learning and must be available for in-person participation with facility staff.
 - (d) Nursing programs may develop and utilize Dedicated Education Units (DEU), using clinical preceptors and a modified faculty-to-student ratio. Programs and DEU's must adhere to the following guidelines:
 - (A) Faculty must orient and provide on-going guidance for clinical preceptors related to the program goals, teaching strategies, learning outcomes, and expected competencies of the students;
 - (B) Clinical preceptors must be selected according to written criteria developed by faculty and agreed to by a responsible person in the practice site;
 - (C) Faculty are not required to remain in the same facility as the student group throughout the clinical experience shift but must be available for the clinical preceptor and students at the practice site, as defined in program policy;
 - (D) The faculty member must confer with each clinical preceptor and student (individually or in groups) regularly during the nursing practice experience as defined in program policy; and,
 - (E) Each clinical preceptor in the DEU may have oversight of no more than two students at one time.
 - (e) Nursing programs may offer students a precepted final practicum experience.. The faculty-to-student ratio for this experience must allow for appropriate assessment and evaluation of student learning and support the achievement of course outcomes and may not exceed one faculty for fifteen students per group.
 - (A) The clinical preceptor may have supervision of one student at a time during the provision of care.
 - (B) The faculty member is not required to be consistently on site, but must be available for in-person participation with the clinical preceptor and student while the student is involved in the learning experience
 - (C) Evaluation of student learning and achievement of course or program outcomes

remains with the faculty member.

- (9) Clinical preceptors may be assigned to work directly with students. Nursing education programs must ensure that:
- (a) Clinical preceptors are licensed at or above the level of licensure that an assigned student is seeking. Additionally, for APRN programs:
 - (A) For NP and CNS programs, the preceptor must be licensed as a licensed independent practitioner, and have practiced in a comparable practice focus; or
 - (B) For CRNA programs, the preceptor must be licensed as a CRNA or an anesthesiologist.
 - (b) Preceptors have demonstrated competency related to their area of assigned clinical teaching responsibilities.
 - (c) Preceptors are provided written information about student preparation and expected learning outcomes.

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NER 30-1976, f. & cert. ef. 1-27-76

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Curriculum

- (1) The mission, goals, and expected program outcomes must be consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.
- (2) Curriculum must:
 - (a) Prepare the student to achieve the nursing competencies necessary at the level of licensure for safe practice based on current standards of care.
 - (b) Reflect the identified mission, goals, and learning outcomes of the nursing education program.
 - (c) Identify learning outcomes at the course and program level that show alignment and progression throughout the program.
 - (d) Include learning activities that support student achievement of identified outcomes;
 - (e) Include a clinical component, sufficient to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and demonstrate safe nursing practice; and
 - (f) Include within PN and RN programs:
 - (A) The one-hour pain management education program described in ORS 413.572 or an equivalent pain management education program
 - (B) A minimum of two hours of education related to cultural competency

- (3) The clinical component can occur in any setting where students may impact a health outcome. Over the course of the program, clinical must:
 - (a) Occur in a variety of settings;
 - (b) Be sufficient in experience to allow for students to meet course and program outcomes;
 - (c) Integrate patient safety principles;
 - (d) Include the implementation of evidence-based practices;
 - (e) Focus on the provision of patient-centered, culturally competent care;
 - (f) Include collaboration and communication with professional teams; and,
 - (g) Promote clinical judgement.
- (4) Programs may use simulation as part of the clinical component. When utilized, the nursing program must:
 - (a) Ensure simulation learning has adequate fiscal, human, technologic, and physical space resources to support the learning environment;
 - (b) Follow national simulation standards;
 - (c) Designate a simulation coordinator who is academically and experientially qualified. This individual must demonstrate continued expertise and competence in the use of simulation while managing the program;
 - (d) Have a written plan for orienting faculty to simulation;
 - (e) Ensure faculty involved in simulation have initial training in the use of simulation. Initial simulation training must include:
 - (A) Introduction to simulation based learning experiences;
 - (B) Foundations of scenario design and curriculum integration;
 - (C) Introduction to pre brief and debrief;
 - (D) Debriefing for clinical judgement; and
 - (E) Introduction to assessment and evaluation of simulation based education.
 - (f) Have written procedures for the method of debriefing each simulated activity;
 - (g) Provide a mechanism for students to evaluate the simulation experience in an ongoing basis; and
 - (h) Ensure that no more than 50% of traditional clinical hours are replaced with simulation.
- (5) Practical Nurse Programs:
 - (a) PN program curricula must meet all educational institution requirements for and culminate in the award of a certificate or diploma.
 - (b) Must deliver curriculum consistent with practice of practical nursing as described in OAR 851-045-0050 in a supervised practice that occurs at the direction and under the supervision of the RN or licensed independent practitioner with the authority to make changes to the plan of care.
 - (c) The PN program curricula must include content related to the following concepts:
 - (A) Creating and maintaining a safe environment of care;
 - (B) Demonstrating professional, legal, and ethical behavior in nursing practice;
 - (C) Collecting data and performing focused nursing assessments of the health status of a client;
 - (D) Participating in the planning of the nursing care needs of a client;
 - (E) Participating in the development and modification of the nursing care plan;
 - (F) Providing safe, evidence-based, clinically competent, culturally sensitive, and patient-centered care for the promotion, restoration and maintenance of wellness in a variety of care settings or, for palliation across the lifespan;
 - (G) Functioning as a member of the interdisciplinary healthcare team;
 - (H) Using technology to facilitate communication, manage information, and document care;
 - (I) Providing cost-effective nursing care and participating in quality improvement strategies;
 - (J) Participating in health teaching and counseling to promote, attain, and maintain the optimum health level of an individual;

- (K) Assisting in the evaluation of a patient's response to nursing interventions and the identification of that client needs; and,
 - (L) Assigning and providing oversight to assistive personnel and other PN.
- (6) Registered Nurse Programs:
- (a) RN program curricula must meet all educational institution requirements for and culminate in the award of an associate, baccalaureate, or masters degree.
 - (b) Must deliver curriculum consistent with the practice of registered nursing as described in OAR 851-045-0060.
 - (c) RN programs that wish to offer a practical nursing exit-option, must follow the process outlined in OAR 851-021-0025(4)
 - (d) The RN program curricula must include content related to the following concepts:
 - (A) Creating and maintaining safe and effective environment of nursing care;
 - (B) Demonstrating professional, legal, and ethical behavior in nursing practice;
 - (C) Using clinical judgment in nursing practice to assess the health status of clients to identify health care problems;
 - (D) Prescribing nursing interventions and assessing responses to those interventions in order to direct, manage, delegate, and supervise nursing care for clients;
 - (E) Establishing outcomes to meet identified health care needs and providing safe, clinically competent, culturally sensitive, client-centered and evidence-based care to promote, restore and maintain wellness in a variety of care settings or, for palliation across the lifespan;
 - (F) Providing culturally sensitive and evidence-based teaching, counseling, and advocacy for clients;
 - (G) Participating within and providing leadership for an interdisciplinary team;
 - (H) Assigning and supervising other members of the healthcare team;
 - (I) Applying leadership skills to identify the need for and to promote change;
 - (J) Using communication and information technology effectively and appropriately to collaborate with other health professionals in the management of health care;
 - (K) Applying and integrating principles of community health and community-based care into practice;
 - (L) Integrating concepts of resource utilization, quality improvement and systems to enhance care delivery; and,
 - (M) Delegating nursing interventions that may be performed by others as defined in OAR Chapter 851 Division 6.
 - (e) Baccalaureate and entry-level master's programs must also include content related to:
 - (A) Applying epidemiological, social, and environmental data and principles to identify and implement health promotion goals and strategies for communities and populations;
 - (B) Leading and effecting change through participation in teams and beginning application of management knowledge;
 - (C) Identifying and implementing measures to improve access to healthcare for individuals and underserved groups;
 - (D) Using the principles and practice of research to validate and improve nursing care for individuals, families, and groups; and,
 - (E) Using teaching-learning principles develop outcomes and provide formative and summative feedback to others.
- (7) Advanced Practice Nurse Programs:
- (a) APRN program curricula must meet all educational institution requirements for and culminate in the award of doctoral degree.
 - (b) Must prepare students for the role of nurse practitioner (NP), certified registered nurse anesthetist (CRNA), or clinical nurse specialist (CNS).
 - (c) Must deliver curriculum consistent with advanced practice nursing role and

- population foci as described in OAR Chapter 851 Division 055.
- (d) The APRN program curricula must include content related to the following:
- (A) Advanced health assessment which includes assessment of all human systems, advanced assessment techniques, concepts and approaches;
 - (B) Advanced physiology and pathophysiology, including general principles that apply across the lifespan;
 - (C) Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents;
 - (D) Health promotion, health maintenance, differential diagnosis and management of diseases across all practice settings appropriate to program focus; and
 - (E) Basic understanding of the principles of independent decision making in the identified role.

Statutory/Other Authority: ORS 678.150, ORS 678.340 & ORS 678.360

Statutes/Other Implemented: ORS 678.150 & ORS 678.360

History:

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NB 4-1996, f. & cert. ef. 9-3-96

NB 1-1990, f. & cert. ef. 4-2-90, Renumbered from 851-020-0056

NB 3-1988, f. & cert. ef. 7-5-88

NER 2-1985, f. & cert. ef. 4-5-85

NER 37-1977, f. & cert. ef. 7-18-77

NER 30-1976, f. & cert. ef. 1-27-76

851-021-0051

Exception Requests for Clinical Experiences Due to Unforeseen Circumstances

- (1) A nursing education program may request an exception to OAR 851-021-0050(3) and (4) when unforeseen circumstances, such as a work stoppage affecting healthcare services, pandemic, natural disaster, or other extraordinary event, prevent students from obtaining greater than 25% of their scheduled clinical placements within an academic term. Routine or reasonably foreseeable difficulties in securing clinical placements are not a basis for requesting an exception.
- (2) Exception Request Requirements:
- (a) The nursing program administrator of the affected nursing program must submit a written exception request to the Board representative.
 - (b) The written request must include the following:
 - (A) A description of the unforeseen circumstance leading to the lack of clinical placements and the anticipated impact on student progression;
 - (B) The anticipated duration of the circumstances, if known, and the dates of the academic term affected;
 - (C) A breakdown of the types of clinical placements (cohort or final practicum) affected, the number of students affected, the total clinical clock hours for the current academic term, and the total planned clinical hours for the program;
 - (D) A plan which outlines how students will meet course and program outcomes following substitutions in planned clinical experiences. Substitutions may include: mid-fidelity and high-fidelity simulation and virtual simulation. The plan must describe the following:
 - (i) Any changes in the use of simulation to meet educational requirements.
 - (ii) Transition strategies to virtual learning platforms, if applicable.

- (iii) Other course or programmatic strategies implemented to address the clinical placement gap.
- (3) The Board representative will review the exception request and will approve or deny the request based on the adequacy of the plan and compliance with this rule. Programs may not implement substitutions until receipt of approval.
- (4) Exceptions will be granted for no more than a single academic term. Programs may submit a new exception request if the unforeseen circumstances persist beyond the approved duration.

Statutory/Other Authority: ORS 678.150, ORS 678.340 & ORS 678.360

Statutes/Other Implemented: ORS 678.150

History:

[BN 1-2025, temporary adopt filed 01/16/2025, effective 01/16/2025 through 07/14/2025](#)

851-021-0055

Program Responsibilities for Students

- (1) Prior to admission, student applicants must be informed of:
 - (a) Current signed agreements for the articulation of program graduates into the next level of nursing education.
 - (b) Potential and anticipated transportation and distance requirements for any clinical component.
 - (c) Admission, readmission, transfer, progression, dismissal, and graduation policies, consistent with those of the educational institution.
- (2) While in the program of study, the nursing education program must ensure students:
 - (a) Comply with all clinical component requirements as defined by the Oregon Health Authority per OAR Chapter 409 Division 30; and,
 - (b) Have access to support services of the program and the educational institution.
- (3) Practical nursing and associate degree nursing education programs must maintain an articulation agreement for graduates into the next level of nursing education.
- (4) Nursing education programs must have a documented process in place for student remediation of clinical incidents.
- (5) The use of a single or high stakes exam may not be used as a sole determinant of a student's graduation or progression in a nursing education program.

Statutory/Other Authority: ORS 678.150, ORS 678.340 & ORS 678.360

Statutes/Other Implemented: ORS 678.150 & ORS 678.360

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NB 4-1996, f. & cert. ef. 9-3-96

NB 1-1990, f. & cert. ef. 4-2-90, Renumbered from 851-020-0068

851-021-0065

Facilities and Resources

- (1) Nursing education program facilities must ensure fiscal, technologic, academic support services and physical space to ensure program outcomes are met.
- (2) Resources must be comparable and available to nursing students on all campuses where the program is offered.

- (3) Selection of clinical component sites must be based on documented criteria established by the program.
- (4) There must be a current documented, formal affiliation agreement that is in effect between the authorities responsible for the educational program and the clinical component site. The agreement must state that faculty members have the authority and responsibility to select appropriate learning experiences in collaboration with the clinical site.

Statutory/Other Authority: ORS 678.150 & ORS 678.360

Statutes/Other Implemented: ORS 678.150, ORS 678.340 & ORS 678.360

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NB 1-1990, f. & cert. ef. 4-2-90, Renumbered from 851-020-0076

NER 4-1985, f. & cert. ef. 7-10-85

851-021-0070

Outcomes and Evaluation

- (1) The nursing education program must have a current, written systematic plan of evaluation and show evidence of ongoing periodic review of the entire program.
- (2) The plan of evaluation must include:
 - (a) Course outcomes and program outcomes;
 - (b) Program effectiveness;
 - (c) NCLEX® pass rate data;
 - (e) Overall curriculum design, including consideration of clinical experiences and simulation;
 - (f) Faculty qualifications and ability to achieve course and program outcomes; and,
 - (g) Review of resources, including human, fiscal, technologic, and physical space to support the number of enrolled students, instructional delivery, and achievement of program learning outcomes.
- (3) There must be evidence that faculty review data and make decisions regarding ongoing program improvement based on the analysis.
- (4) Nursing education programs working towards accreditation must maintain the following NCLEX standards:
 - (a) A minimum of 80% first-time pass rate for the most recent 12-month period; or,
 - (b) An average 80% first-time pass rate, based on the total number of test-takers, for the most recent 36-month period; or
 - (c) A 90% total pass rate or higher, based on the total number of test-takers, for the most recent 12 months; or,
 - (d) An average 90% total pass rate or higher, based on the total number of test-takers, for the most recent 36-month period.

Statutory/Other Authority: ORS 678.150, ORS 678.340 & ORS 678.360

Statutes/Other Implemented: ORS 678.150 & ORS 678.360

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NB 1-1990, f. & cert. ef. 4-2-90, Renumbered from 851-020-0081
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851-021-0090

Standards for Out-of-State Pre-licensure Nursing Programs Offering Educational Experiences in Oregon

- (1) All out-of-state pre-licensure nursing programs that offer education with Oregon-based clinical placements must notify the Board prior to offering placements in Oregon. This notification must include:
 - (a) Information regarding the type of program and level of licensure
 - (b) Evidence of program approval by their home-jurisdiction Board of Nursing;
 - (c) Anticipated annual Oregon student enrollment; and,
 - (d) Attestation of affiliation agreements with Oregon clinical sites;
- (2) Out of state programs are required to resubmit the information required in section (1) of this rule annually.

Statutory/Other Authority: ORS 678.031, ORS 678.150, ORS 678.340 & ORS 678.360

Statutes/Other Implemented: ORS 678.031, ORS 678.150, ORS 678.340 & ORS 678.360

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