



## Summary of Changes to Chapter 4723-5, Ohio Administrative Code (OAC)

In January 2017, the Board of Nursing agreed to continue with the proposed amendments to Chapter 4723-5, OAC. Once the Rule filing process is complete, the proposed amendments will become effective on or about April 1, 2017. Below is a summary of the current amendments. This summary is for discussion purposes only and is not a comprehensive assessment of all Chapter 4723-5, OAC, requirements.

### Rule 4723-5-01, OAC: Definitions

(B), The term "Advanced standing" as used within Chapter 4723-5, OAC, has been changed to mean credit given to a student for prior nursing courses or transfer credit. For example, a RN associate degree program may accept a nutrition course completed by a transfer student at another institution, or a nursing course from a previously attended program. The definition requires that the program have a written "policy" for the granting of "advanced standing." The policy is required by Rule 4723-5-12, OAC.

(C) The term "Accelerated program" is a new definition that means a "program or track of an existing program that accepts applicants with a non-nursing baccalaureate or higher degree, and provides the student with the program's pre-license nursing education program curriculum. These programs or program tracks must span a minimum of fifty-two weeks of clinical courses. Previous to this new definition, these types of programs fell under the "Advanced Standing" definition and were required to span a minimum of twelve months of clinical course work. As stated above, an accelerated program or program track must now span a minimum of fifty-two weeks.

*Definitions were added for patient simulation and three different fidelity levels for patient simulation. A program must readily and clearly distinguish these three fidelity levels when simulation is used.*

(Y) The term "Patient simulation" means the replication of a real world patient in situ through accurate representations of patient cues and stimuli that a student is to observe, analyze, interact, and respond to with right nursing judgments and actions. The replication may be provided through the use or combination of low fidelity, mid or moderate fidelity, or high fidelity experiences.

(Q) The term "High Fidelity" has been defined for use within Chapter 4723-5, OAC. "High fidelity" means experiences using full scale computerized patient simulators, virtual reality or standardized patients that are extremely realistic and provide a high level of interactivity and realism for the learner.

(V) The term "Mid or moderate fidelity" means experience that are more technologically sophisticated, such as computer-based self-directed learning systems simulations in which the participant relies on a two-

dimensional focused experience to problem solve, perform a skill, and make decisions, or which use mannequins that are more realistic than static low-fidelity ones and have breath sounds, heart sounds and/or pulses.

(U) The term "Low fidelity" means experiences such as case studies, role-playing, using partial task trainers or static mannequins to immerse students in a clinical situation or practice of a specific skill.

**Rule 4723-5-02, OAC: General Information**

No change

**Rule 4723-5-03, OAC: Change in Control of a Program**

No change

**Rule 4723-5-04, OAC: Procedure for Board Determination of a Program's Status**

No change

**Rule 4723-5-05, OAC: Program reports to the Board**

(A), Programs required to submit an Annual Report to the Board have been expanded to include those programs for which the Board **continued** its "Conditional" approval. These are programs that are maintained on Conditional approval rather than being progressed to Full approval. Programs that are within their initial Conditional approval period, those that have not yet graduated their first cohort of students through do not submit. Therefore, programs with Full, Provisional, or continued Conditional approval are required to submit Annual Reports to the Board.

**Rule 4723-5-06, OAC: Survey Visits, Reports, and Response by the Administrator of a Program to a Survey Visit Report.**

(C), The amended paragraph is a technical change, to refer to the "Education Program PN PreSurvey Visit Form" and the "Education Program RN Presurvey Visit Form."

**(Rule sequencing skips 5-07 and goes to 5-08)**

**Rule 4723-5-08, OAC: Requirements for Seeking Conditional Approval**

(A), The amended paragraph contains technical changes that include changing an agency title from "board of regents" to "department of higher education."

(C), The amended paragraph contains technical changes that refer to the "PN New Program Proposal Application" and "RN New Program Proposal Application." Also (C)(5)(i) changes records "retention" plan to records "maintenance" plan.

(J), The paragraph was amended to require a program on Conditional approval to, not less than seven business days following the originally

identified implementation date, to submit a written request to the Board for an extension of the implementation date.

**Rule 4723-5-09, OAC: Organization and Administration of the Program**

*(A), below, was amended to clarify the program's plan of organization and administration, making the language more direct.*

(A) The program shall have and implement a plan of organization and administration that clearly shows:

- (1) The relationship between the program and the controlling agency;
- (2) How faculty and students are involved in determining academic and program policies and procedures, planning curriculum, and program evaluation;
- (3) How faculty are involved in implementing academic and program policies and procedures.

(D)(1)(b), was amended to require a program's controlling agency to ensure that a qualified registered nurse assumes the position of program administrator or interim program administrator within the specified timeframe [rather than appointing an individual to the position who may assume their responsibilities at a later date].

(D)(3)(a), was amended to allow for a RN who meets the associate administrator qualifications and has a master's degree, but does not have an earned doctoral degree, to serve as an interim administrator for a baccalaureate nursing program for a period of time not to exceed one year.

**Rule 4723-5-10, OAC: Qualifications of Administrators, Faculty, Teaching Assistants and Preceptors for a Registered Nursing Education Program**

Amendments to this Rule are limited to technical changes, referencing renamed subparagraphs of the Definitions Rule.

**Rule 4723-5-11, OAC: Qualifications of Administrators, Faculty, Teaching Assistants and preceptors for a Practical Nursing Education Program**

Amendments to this Rule are limited to technical changes, referencing renamed subparagraphs of the Definitions Rule.

**Rule 4723-5-12, OAC: Program Policies**

No change

**Rule 4723-5-13, OAC: Curriculum for a Registered Nursing Education Program**

*This Rule pertains to the "Curriculum" and not a student's admission or progression through the Program's established curriculum. The curriculum itself is generally a consistent framework, through which students enter, progress through in accordance with the program's written policies.*

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The minimum length of the curriculum is two years of full-time study with each year being 30 weeks, unless the curriculum is an accelerated curriculum or a stand-alone curriculum that is truncated for advanced standing. Below are examples of each:

- An Associate Degree Program establishes a curriculum that spans two years of full-time study and each year consists of a minimum 30 weeks. This is a two-year curriculum.
- An Associate Degree Program establishes a two-year curriculum of full-time study and each year consists of at least 30 weeks. Students may enter the two-year Curriculum at various places within the two-year curriculum dependent on the Program's implementation of its advanced standing policy. This is a two-year curriculum.
- A RN program designed for individuals who hold non-nursing baccalaureate degrees, and its curriculum is compressed or "accelerated" to provide nursing courses in a manner that enables the student to complete program requirements sooner than later. The curriculum must span a minimum of 52 weeks of clinical course work.
- A RN diploma program is designed to admit only current LPNs who are given credit for their prior nursing courses. The curriculum must at span at least 45 weeks of clinical course work.

(D)(2), was amended to allow for an exchange in hours between laboratory experiences and clinical experiences within a specific course, provided the laboratory and clinical experiences are sufficient for student opportunity to achieve the behavior objectives and requirements established in the course. *It is important to note that faculty and program administrators must maintain records that reflect the hours planned for laboratory and clinical within a specific course as well as the number of laboratory hours and clinical hours that were actually provided to students in the course, as well as documentation of each student's achievement of behavioral objectives within the course.*

(D)(3), requires the curriculum clinical courses to collectively include clinical experiences in providing care to patients across the lifespan, conception to death, with the exception of the obstetrical patient, the immediate newborn and pediatrics. Programs utilizing high or mid or moderate fidelity simulation obstetrical, immediate newborn, and pediatric simulation laboratory experiences, **may** use those experiences instead of providing clinical experience in those periods of lifespan.

(F), was amended, adding specific subject content to the minimum curriculum:

- (F)(2)(v) "Prioritization and resource allocation."
- (F)(6)(j) "Nursing informatics"
- (F)(7) "Humanities" .....gender identity, sexuality...

(F)(8) is the subparagraph that addresses the provision of a combination of clinical and laboratory experiences concurrent with the theory instruction. The amendments to this subparagraph:

- Requires the laboratory and clinical experience to be "**directly relevant**" to the applied theoretical and behavioral objectives of each clinical course, are sufficient for students to practice their cognitive, psychomotor and affective skills, and "**are sufficient for students to effectively demonstrate their ability to meet the course's nursing behavioral outcomes.**"
- The laboratory and clinical experiences must provide the student the opportunity to achieve technical skills including skills related to IV therapy.
- The laboratory and clinical experiences, must provide the faculty with input from the teaching assistant, if applicable, the opportunity to effectively evaluate and document the student's achievement of each course's specified behavioral outcomes.
- Programs that use high or mid or moderate fidelity patient simulation for the specific lifespan periods of obstetrics, immediate newborn care, and/or pediatrics [within any specific course] instead clinical experience for that specific lifespan period must have faculty or teaching assistants conducting the simulation who have demonstrated knowledge skills and abilities necessary to conduct the simulation obtained from a recognized body of knowledge relative to the simulation. The program must maintain the faculty and/or teaching assistants documentation of having obtained the knowledge and skills necessary to provide the simulation. In providing the simulation in this manner, the program must adhere to all requirements of paragraph (F)(8) of Rule 4723-5-13, OAC.
- The faculty or teaching assistant providing the patient simulation may also utilize computer technology specialists to assist in operating the computer equipment.

#### **Rule 4723-5-14, OAC: Curriculum for a Practical Nursing Education Program**

*This Rule pertains to the "Curriculum" and not a student's admission or progression through the Program's established curriculum. The curriculum itself is generally a consistent framework, through which students enter, progress through and complete the in accordance with the program's written policies.*

(D), was amended to also require that the curriculum plan include the units of credit or number of academic or clock hours allotted to theory, laboratory and clinical experiences "within each course."

(D)(1), requires the curriculum to span a minimum length of thirty weeks of full-time study, including examination time.

(D)(2), was amended to permit an exchange in hours between laboratory experiences and clinical experiences within a specific course, provided the laboratory and clinical experiences are sufficient for student opportunity to achieve the behavioral objectives and requirements established in the course. It is important to note that faculty and program administrators are required to maintain records that reflect the hours planned for laboratory and clinical within a specific course, the number of laboratory hours and clinical hours that were actually provided to students in the course, and documentation of each student's achievement of behavioral objectives within the course.

(D)(3), was amended to require the curriculum clinical courses to collectively include clinical experiences in providing care to patients across the lifespan, conception to death, with the exception of the obstetrical patient, the immediate newborn and pediatrics. Programs utilizing high or mid or moderate fidelity simulation obstetrical, immediate newborn, and pediatric simulation laboratory experiences, **may** use those experiences instead of providing clinical experience in those periods of lifespan.

(E)(2), was amended, adding specific subject content to the minimum curriculum that addresses **gender identity, and sexuality**.

(E)(12), was amended to require the program to provide a combination of clinical and laboratory experiences concurrently with the related theory instruction that:

- Are "**directly relevant**" to the applied theoretical and behavioral objectives of each clinical course, are sufficient for students to practice their cognitive, psychomotor and affective skills, and "**are sufficient for students to effectively demonstrate their ability to meet the course's nursing behavioral outcomes.**"
- The laboratory and clinical experiences must provide the student the opportunity to achieve technical skills including skills related to IV therapy.
- The laboratory and clinical experiences, must provide the faculty with input from the teaching assistant, if applicable, the opportunity to effectively evaluate and document the student's achievement of each course's specified behavioral outcomes.
- Programs that use high or mid or moderate fidelity patient simulation for the specific lifespan periods of obstetrics, immediate newborn care, and/or pediatrics [within any specific course] instead of clinical experience for that specific lifespan period must have faculty or teaching assistants conducting the simulation who have demonstrated knowledge skills and abilities necessary to conduct the simulation obtained from a recognized body of knowledge relative to the simulation. The program must maintain the faculty and/or teaching assistants documentation of having obtained the knowledge and skills necessary to provide the simulation. In providing the simulation in this manner, the program must adhere to all requirements of paragraph (E)(12)) of Rule 4723-5-14, OAC.
- The faculty or teaching assistant providing the patient simulation may also utilize computer technology specialists to assist in operating the computer equipment.

(F)(4), pertains to IV therapy. It continues to require programs to provide didactic, laboratory, and supervised clinical practice that includes nursing care of individuals receiving intravenous therapy, including the clinical experience that provides students the opportunity to achieve technical skills including skills related to intravenous therapy. Although the specific list of clinical skills are no longer required, programs must provide students with a course or integrated course content in IV therapy that includes laboratory and clinical experiences in IV therapy.

**Rule 4723-5-15, OAC: Evaluation Plan of the Program**

(A)(9), was revised to change the word "Retention" to "Maintenance" of program records...

**Rule 4723-5-17, OAC: Program Contractual Relationships**

(C)(2), was amended with technical change to reference another Rule.

**Rule 4723-5-19, OAC: Responsibilities of Faculty Teaching a Nursing Course**

(A), was amended to incorporate the changes made to Rules 5-13 and 5-14 and to establish a baseline regarding the number of clinical and laboratory hours provided within a course as follows:

Each course syllabus or outline must include the total number of clinical and laboratory hours (combined) to be provided to students-**AND**- of the combined clinical and laboratory hours the total number of "planned" clinical hours and the total number of "planned" laboratory hours.

(E) Requires that after the course is taught, the responsible faculty must compare the number of planned clinical hours with the number of clinical hours actually provided to students, and to report this data to the administrator; and to also compare the number of planned laboratory hours with the number of laboratory hours actually provided to students and report this data to the administrator.

(F) The data reported under (E) above must be prepared in a **chart form**, contain the following, and will be maintained by the administrator and submitted with the program annual report:

Name of the course

Dates through which the course was taught

Name of faculty responsible for teaching the course

Number of planned clinical hours (beginning of course)

Number of clinical hours actually provided to students (end of course)

Number of planned laboratory hours (beginning of course)

Number of laboratory hours actually provided to students during the course (end of course)

**Rule 4723-5-20, OAC: Responsibilities of Faculty, Teaching Assistants and Preceptors in a Clinical Setting**

No change

**Rule 4723-5-21, OAC: Program Records**

(A), was amended to expand the records and specific record content that are to be maintained for currently enrolled students:

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- Clinical experience evaluation record must be maintained for each clinical course. This record must document the student's achievement of the specific behavioral and cognitive skills and outcomes to successfully complete the course and to engage in safe and effective nursing care.
- Laboratory records for each course regarding nursing care of obstetrical patients, immediate newborns and pediatric patients, where high fidelity or mid or moderate fidelity simulation is used, that reflect the student's achievement of the specific behavioral and cognitive skills and outcomes to successfully complete the course and to engage in safe and effective nursing practice.
- Laboratory experience evaluation records for each course containing laboratory hours that are not patient simulated obstetric, immediate newborn or pediatric experiences with high or mid or moderate fidelity simulation. The laboratory experience evaluation records must reflect the student's achievement of the specific behavioral and cognitive skills and outcomes to successfully complete the course and to engage in safe and effective nursing practice.

(D), was amended regarding the records for each faculty and teaching assistant currently utilized by the program. The verification of licensure at the time of a faculty or teaching assistant's appointment must be retained, unless it has been reviewed at a previous survey visit. Programs must continue to document verification of the license at renewal.

**Rule 4723-5-23, OAC: Program NLCLEX Rates**

(B), was amended with respect to progressive sanctions for programs that incur NCLEX pass rates less than 95% of the national average for first time test candidates within a calendar year. The pool of candidates on which the pass rate calculation will be based is limited to the program test candidates who attempted the NCLEX for the first time within six months of program completion.

*This Rule will be implemented with 2017 test candidates and will be calculated in 2018. It will be imperative for programs to discuss with their students the importance of accurately entering their program completion month and year at **the time the candidate registers with Pearson VUE.***

**Rule 4723-5-24, OAC: Closure of a Program**

No change

**Rule 4723-5-25, OAC: Submission of False, Misleading or Deceptive Information or Documents**

No change