

# **NORTH DAKOTA BOARD OF NURSING**



## **SURVEY PROCESS FOR NURSING EDUCATION PROGRAMS**

# INTRODUCTION

**The North Dakota Nurse Practices Act NDCC Chapter 43-12.1-17 (1)** requires that the Board adopt rules establishing standards for in-state nursing education programs leading to initial or advanced licensure. A nursing education program may not be provided in this state unless the Board has approved the program. The Board shall approve, review, and re-approve nursing education programs in this state.

The procedural aspects of nursing education program approval are specified in the form of administrative rules. The rules are known collectively as North Dakota Administrative Code (NDAC) Article 54-03.2 Standards for Nursing Education Programs.

This procedure manual is based upon NDAC 54-03.2 and provides details related to the approval process of nursing education programs. The Nurse Practices Act and NDAC 54-03.2 reflected in this manual are available at [www.ndbon.org](http://www.ndbon.org). The following Chapters specifically apply to the survey process of the Board.

## INITIAL APPROVAL

**54-03.2-08-02. Initial requirements of a new nursing education program.** The sponsor institution shall employ a qualified nurse administrator to develop the program and submit a written application for approval to the board at least six months before the proposed starting date or at such earlier time as the board and the nursing program may agree. The written application must include evidence of meeting the requirements in article 54-03.2. Three copies of the proposal for the new program must be submitted to the board.

**54-03.2-08-03. First survey visit.** After the proposal has been received, a survey of the nursing education program must be made by the board's designee(s). A written copy of the surveyors' report must be submitted to the nursing program nurse administrator.

**54-03.2-08-04. Board review and initial approval.** The board shall act on the application and the surveyors' report within three months of the survey. The program must be notified in writing of the board's decision whether to grant or deny initial approval. The board may continue initial approval status as specified in section 54-03.2-07-02.

**54-03.2-08-05. Admission of students.** Students may be admitted to the program only after initial approval has been granted by the board according to section 54-03.2-07-02. The number of students admitted to a program must be determined by:

1. Number of qualified faculty;
2. Adequate educational facilities and resources; and
3. Availability of appropriate practice sites.

# CONTINUING COMPLIANCE

**NDAC 54-03.2-07-01. Evaluation of compliance with the standards for nursing education programs.** Evaluation of continuing compliance with the standards of nursing education involves the submission of a pre-survey report by the nursing education program and a survey by a board representative. This process includes the following elements:

1. Dates mutually acceptable to the board and the nursing program will be set at least three months in advance of the scheduled survey;
2. No less than one month prior to a survey, a program must submit a narrative pre-survey report that provides evidence of compliance with the standards of nursing education;
3. Unscheduled surveys may be conducted at the discretion of the board;
4. The program shall schedule survey activities;
5. The surveyor(s) shall make a verbal report to the program at the end of the survey;
6. The surveyors' written report shall be sent to the program prior to the review by the board;
7. The board shall assess a fee for each program surveyed; and
8. Written notification of the board action regarding the program approval must be sent to the nurse administrator.

**NDAC 54-03.2-07-09. Continuing compliance.**

1. Each program shall submit an annual report to the board providing requested information pertaining to the time period between July first and June thirtieth
2. A program with continuing compliance shall be re-evaluated:
  - a. At a minimum of every five years to ensure compliance with the standards for nursing education;
  - b. At the request of the nursing education program; or
  - c. At the discretion of the board.

# **BOARD OF NURSING**

## **“SURVEYOR” QUALIFICATIONS**

### **NDAC 54-03.2-07-01. Evaluation of compliance with the standards for nursing education programs.**

Evaluation of continuing compliance with the standards of nursing education involves a survey by a board representative. A surveyor must:

1. Be a registered nurse with a current and unencumbered nursing license issued from the Board.
2. Have a minimum of a master’s degree in nursing.
3. Have a minimum of 2 years of experience each in nursing education and practice.

A copy of the following must be on file in the Board office for each surveyor and available to the programs and the public upon request:

- a) A current curriculum vitae
- b) Academic transcripts with master’s degree (or higher) posted
- c) A completed/signed Surveyor Qualification Requirement Form which includes :
  - Attestation related to knowledge of NDAC 54-03.2 Standards for Nursing Education Programs
  - Conflict of Interest Disclosure

# SURVEYS

The Board conducts two types of surveys to assess programmatic compliance with established standards.

The two types of surveys are:

1. On-site Survey
2. Paper/Interim Survey

Each of the survey types requires a pre-survey report from the program.

Nursing programs should use the *NDAC 54-03.2, Standards for Nursing Education Programs* as the template for the narrative Self-Study Report provided to the NDBON. *Chapter 54-03.2-07-01, Evaluation of compliance with the standards for nursing education programs*, specifically addresses the rules related to the process of continuing compliance evaluation.

## **Article 54-03.2 Standards for Nursing Education Programs**

1. The purpose and outcomes of the nursing education program must be consistent with the Nurse Practices Act and administrative rules and other relevant statutes.
2. The purpose and outcomes of the nursing education program must be consistent with generally accepted standards of nursing practice appropriate for graduates of the type of nursing program education offered.
3. The input from the community of interest must be considered in the development and evaluation of the purpose and outcomes of the program.
4. The nursing education program shall implement a comprehensive systematic plan for ongoing evaluation that is based on program and student learning outcomes and incorporates continuous improvement.
5. The faculty and students shall participate in program planning, implementation, evaluation and continuous improvement.
6. The curriculum must be evidence-based and provide diverse learning experiences consistent with program and student learning outcomes.
7. The fiscal, human, physical, and learning resources must be adequate to support program processes and outcomes.
8. The nursing education program administrator must be a registered nurse who is academically qualified and has institutional authority with administrative responsibility for the program.
9. Academically and clinically qualified and registered nurse faculty must be sufficient in numbers and expertise to accomplish program outcomes and quality improvement.
10. Program information communicated by the nursing education program must be fair, accurate, inclusive, consistent and readily available to the public.

## **Chapter 54-03.2-01 General Provisions**

- Statement of Intent
- Standards for Nursing Education

## **Chapter 54-03.2-02 Organization and Administration**

- Accreditation Requirements
- Organizational Design
- Nursing Education Program Organizational Design
- Nursing Education Program Consistency with Sponsor Institution
- Nursing Education Program Evaluation
- Financial Support

## **Chapter 54-03.2-03 Nurse Administrator**

- Administrator Responsibilities
- Practical or Associate Degree Nurse Education Program Administrator Qualifications
- Baccalaureate or Master's Degree Nurse Education Program Administrator Qualifications
- Doctoral Degree Nurse Education Program Administrator Qualifications
- Employment of Academically Unqualified Administrator

## **Chapter 54-03.2-04 Faculty**

- Faculty Responsibilities
- Faculty Policies
- Practical or Associate Degree Nurse Education Program Faculty Qualifications
- Baccalaureate or Master's Degree Nurse Education Program Faculty Qualifications
- Doctoral Degree Nurse Education Program Faculty Qualifications
- Nonnursing Faculty Qualifications
- Preceptors
- Employment of Academically Unqualified Faculty
- Faculty Development Program

## **Chapter 54-03.2-05 Students**

- Student Policies

## **Chapter 54-03.2-06 Curriculum**

- General Curriculum
- Programmatic Changes
- Practice Sites
- Nursing Education Program Curriculum

## **Chapter 54-03.2-07 Nursing Education Program Approval**

- Evaluation of Compliance with the Standards for Nursing Education Programs
- Performance of Graduates on Licensing Examination
- Initial Approval Status
- Full Approval Status
- Program Delivery
- Conditional Approval Status
- Withdrawal of Approval
- Reinstatement of Approval Status
- Certificate of Approval
- Publishing Approval Status
- Continuing Compliance

## ON-SITE SURVEY

Representatives of the Board (surveyors) travel to the campus to survey the environment and interview administrators, faculty, students and key individuals from the community of interest.

A. **The Pre-Survey Report:** This pre-survey is submitted to the Board at least six weeks prior to the on-site survey. The pre-survey report must follow the guidelines delineated in the *Survey Process for Nursing Education Programs* manual.

1. The report will be prepared utilizing the appendices and guidance presented in this manual. Repetitive information may be addressed by referring to specific pages of other portions of the report or other documents.
2. Information in the pre-survey report that refers to other documents must specify the correct document and page that conforms to the narrative description.
3. A table of contents must be included at the beginning of the report.
4. The pre-survey report shall have no more than 100 total pages of narrative not including the appendices for each program. The report must have 1-inch margins, a font size greater than or equal to 10, and must be double-spaced (tables may be single-spaced).
5. Copies of documents that are referenced in the report must accompany the report.
6. The following table lists the documents/exhibits to be provided by the program, as well as the timing and format for their submission:

Items (electronic preferred, hardcopy accepted)	Pre-survey	On-site
Pre-survey report and appendices	X	
CCNE/ACEN/CNEA/HLC verifications	X	
College Catalog	X	
Policy Handbook	X	
Faculty Handbook	X	
Student Handbook	X	
Course Syllabi	X	X
Agency Contracts	X	X
Liability Insurance verification	X	X
Item (electronic and hardcopy accepted)	Pre-survey	On-site
Examples- student work	X	X
Course texts/media (List or online access)	X	X
Faculty Files	X	X
Student Files	X	X
Meeting Minutes: for the past year (nursing department & other committees)	X	

B. **Board Procedures and Responsibilities:** Qualified Board surveyors conduct the on-site survey. In the event that Board surveyors are unavailable for the on-site survey, the Board may hire a qualified individual to conduct the on-site survey. Qualifications of surveyors are clearly delineated on page 4. Surveyors must not be involved in any manner with the program that is being evaluated and signed conflict of interest and disclosure statements must be on file in the Board office.

1. Surveyors and the program administrator will agree on mutually acceptable dates for the survey at least three months in advance.
2. Surveyors are responsible for arranging travel and lodging for the survey.
3. Costs incurred by surveyors relative to the survey will be paid by the Board.
4. Surveyors will prepare an exit report and will present it orally to the program after conclusion of the survey as scheduled outlining which rules are “met”, “met progressing”, “partially met”, or “not met.”
5. Surveyors will provide a written draft copy of the survey report to the program administrator within six weeks or as agreed following completion of the survey. Program administrators may review the survey report and communicate non substantive changes within five business days.
6. The final draft copy of the written survey report is presented to the Nursing Education Committee at its next regular meeting. The Nursing Education Committee will discuss the findings of the surveyors and formulate a recommendation regarding program re-approval. This recommendation is then forwarded to the full Board at its next regular meeting for consideration and decision-making regarding re-approval of the program(s). If there is not a convened NEC meeting, surveyors will take recommendations directly to the Board.
7. The Board must provide an opportunity for the program administrator or designee to attend the Board meeting at which the survey report is presented. Following the Board meeting, the North Dakota Board of Nursing will issue written notification of Board action taken and approval status for each nursing program (NDAC 54-03.2.07). This notification will be mailed directly to the program administrator within three weeks following the Board meeting.

C. **Program Procedures and Responsibilities:** The program administrator is the primary contact person responsible for communication with the Board before, during, and after the on-site survey.

1. The program administrator and surveyors will agree on mutually acceptable dates for the survey at least three months in advance.
2. The program will offer a tentative schedule for the processes and activities of the on-site survey. As necessary, schedule adjustments can be made at the start of the survey or at any time prior to commencement of the survey upon mutual agreement between the program and Board surveyors.
3. A program approval fee must be submitted to the Board with the pre-survey report. The Board requires a nonrefundable approval fee of \$ 750 per program. This \$750 fee is assessed for each distinct academic program level within an institution, as well as for each campus/site within a collaborative program or consortium.



4. The program must provide a locked room for surveyor review of program materials and on-site exhibits. This secure room shall be furnished with internet access and necessary password information-and sufficient space to allow optimal access to on-site exhibit materials.
5. The program is responsible for providing appropriate escort for surveyors to all scheduled meetings. Escorts do not attend the meetings, unless specifically requested by the surveyors to do so.
6. The program is responsible for providing luncheon (noon) meals, as well as the breaks for surveyors.
7. At the conclusion of the on-site survey, the program administrator must complete a list of persons interviewed during the on-site survey (see appendices for template).
8. The following is a list of appointments/interviews to be incorporated within the on-site survey timeframe:
  - Campus President
  - VP for Academic Affairs
  - VP for Student Affairs
  - VP of Finance
  - Dean of College/School in which the nursing department is situated
  - Nursing Program Administrator (also program/level coordinators if applicable)
  - Nursing Faculty
  - Nursing Students (didactic settings and clinical sites)
  - Lab/Simulation areas
  - Clinical Sites/Agencies (key administrative personnel)
  - Distance Site Personnel and Students (if applicable)
  - Members of Community of Interest (e.g., advisory committee members)
9. The program administrator will be provided with a written draft copy of the survey report within six weeks or as agreed following completion of the survey. Program administrators may review the survey report and must communicate non substantive changes within five business days.

## PAPER/INTERIM SURVEY

The administrator of a currently approved nursing program provides a detailed interim pre-survey report and supporting exhibits to the Board office for review. There is no associated survey activity on-site for paper surveys.

According to NDAC 54-03.2-07-09(2), a program with continuing compliance shall be re-evaluated at a minimum of every five years to ensure compliance with the rules established for nursing education. A program that holds national nursing accreditation may seek the Board's approval through a paper survey process if the following criteria are met:

- ❖ The program received full Board approval following an on-site survey of not more than five years ago;
- ❖ The quality indicators remain constant as evidenced by information received by the Board (e.g., graduation rates, enrollment trends, absence of major programmatic changes); and
- ❖ NCLEX pass rate for first-time test takers has remained at or above 80% in three of the last four years.

A. **Pre-survey Report:** This report must arrive in the Board office at least six weeks prior to the scheduled Board meeting at which the action on program re-approval will take place. This report must follow the guidelines delineated in the *Survey Process for Nursing Education Programs* manual.

1. The report will be prepared utilizing the appendices and guidance presented in this manual. Repetitive information may be addressed by referring to specific pages of other portions of the report or other documents.
2. Information in the pre-survey report that refers to other documents must specify the correct document and page that conforms to the narrative description.
3. A table of contents must be included at the beginning of the report.
4. The pre-survey report shall have no more than 100 total pages of narrative not including the appendices for each program. The report must have 1-inch margins, a font size greater than or equal to 10, and must be double-spaced (tables may be single-spaced).
5. Copies of documents that are referenced in the report must accompany the report.
6. The following items must be provided electronically (or hard copy if needed) by the program within the pre-survey interim report:

<b>Item (electronic preferred or may submit hardcopy, if needed)</b>
Pre-survey report and appendices
CCNE/ACEN/CNEA/HLC accreditation verifications, as applicable
College Catalog
Policy Handbook
Faculty Handbook
Student Handbook
Course Syllabi
Meeting Minutes: for the past year (nursing department & other committees)

B. **Board Procedures and Responsibilities:** Board surveyors will conduct the review of the pre-survey report and related submitted materials. Qualifications of Board surveyors charged with conducting the review are clearly delineated on page 4. Surveyors reviewing submitted materials must not be involved in any manner with the program that is being evaluated, and signed conflict of interest and disclosure statements must be on file in the Board office.

1. Surveyors and the program administrator will agree on a mutually acceptable date for receipt of the pre-survey report and associated materials into the Board office.
2. Surveyors will prepare an exit report and will present it orally to the program at the conclusion of the review, outlining which rules are “met”, “met progressing”, “partially met”, or “not met.”
3. Surveyors will provide a written draft copy of the survey report to the program administrator within 10 business days or as agreed following completion of the survey. Program administrators may review the survey report and communicate non substantive changes within five business days.
4. The final written survey report is presented to the Nursing Education Committee at its next regular meeting. The Nursing Education Committee will discuss the findings of the surveyors and formulate a recommendation regarding program re-approval. This recommendation is then forwarded to the full Board at its next regular meeting for consideration and decision-making regarding re-approval of the program(s). If there is not a convened NEC meeting, surveyors will take recommendations directly to the Board.
5. The Board must provide an opportunity for the program administrator or designee to attend the Board meeting at which the survey report is presented. Following the Board meeting, the North Dakota Board of Nursing will issue written notification of Board action taken and approval status for each nursing program (NDAC 54-03.2.07). This notification will be mailed directly to the program administrator within three weeks following the Board meeting. If full re-approval is not granted by the Board, the Board may require an on-site survey based upon the results of the paper/interim survey report.

C. **Program Procedures and Responsibilities:** The program administrator is the primary contact person responsible for communication with the Board before, during, and after the paper/interim survey process.

1. The program administrator and surveyors will agree on a mutually acceptable date for receipt of the pre-survey report and associated materials into the Board office.
2. A program re-approval fee must be submitted to the Board with the pre-survey report. The Board requires a nonrefundable re-approval fee of \$500 per program. This \$500 fee is assessed for each distinct academic program level within an institution, as well as for each campus/site within a collaborative program or consortium.
3. The program administrator will be provided with a written draft copy of the survey report within 10 business days or as agreed following completion of the survey. Program administrators may review the survey report and must communicate non substantive changes within five business days.

## **Collaborative (Joint) Surveys with Accreditation Organizations**

The North Dakota Board of Nursing will conduct joint onsite evaluations with accreditation organizations. To coordinate the survey process between the two organizations the following steps will be completed:

- The administrator of the program will contact the Board of Nursing (BON) staff indicating a joint survey is amenable to the program and the accreditation organization.
- The Board of Nursing surveyors will agree to conduct a joint survey.
- The administrator of the program will obtain the contact information for the accreditation surveyors and forward the relevant information to the board of nursing staff.
- Once the contact information is received, the surveyors will contact the team leader of the accreditation organization.
- The tentative agendas for the survey will be shared with each organization.
- Whenever possible the survey teams will conduct interviews and review clinical sites simultaneously.
- For the convenience of the program, the verbal exit report of the onsite evaluation may be conducted jointly prior to completion of the survey.

# **Due Process in Cases of Disagreement Regarding Survey Findings**

In rare instances, there may be a case of disagreement between the surveyors and the program administrator regarding some aspect of the final survey findings. In such an instance, the following *Due Process* measures are available:

- The program administrator (and/or appropriate designee) may be invited to the Board meeting to present further clarification to the Board; or
- The program administrator (and/or appropriate designee) may submit a letter of rebuttal to be considered by the Board; or
- The program administrator may choose to take both of the above measures.

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