

Mississippi Nursing Degree Programs

Accreditation Standards Procedure Manual



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I. INTRODUCTION

A. Authority:

The revised "Accreditation Standards and Rules and Regulations for Mississippi Nursing Degree Programs" are promulgated in accordance with (a) and (b), Miss. Code (2008 Supp.) §37-129-1, et seq., which empowers and requires the Board of Trustees of State Institutions of Higher Learning (the Board) to:

- a) Establish by rules and regulations and promulgate uniform standards for accreditation of schools of nursing in the state of Mississippi (1) in so far as concerns the eligibility of graduates of such schools to take the examination prescribed by law to become registered nurses authorized to practice the profession of nursing as registered nurses in Mississippi, and (2) in so far as concerns student nurses attending such schools being eligible to participate in any student nurse scholarship program or other program of assistance now existing or hereafter established by legislative enactment;
- b) Issue to such schools of nursing upon an annual basis certificates of accreditation as may be proper under such standards.

The Board, in recognizing that each unit in nursing offering nursing degree programs has individual characteristics and goals, maintains that each shall implement its own philosophy, purposes, and objectives. All programs in nursing shall be based on sound educational principles under the guidance of a competent faculty. The total program of nursing education shall meet the required standards of accreditation as prescribed by the Board. Mississippi nursing schools (units in nursing) should prepare students for nursing careers according to the type of program that they offer. Rigid conformity to a specific and fixed curriculum is not expected. Rather, the Board approves programs which are of superior caliber and encourages creative and intelligent experimentation based on sound principles.

B. Purposes for Accreditation:

The purposes for accreditation of nursing education programs are:

- (1) To set minimum standards for educational programs preparing nurses for practice at all levels.
- (2) To grant official recognition to new and established nursing education programs that meet established standards.
- (3) To ensure that graduates are prepared for safe, current, and appropriate scope of practice relative to type of nursing education program and state laws governing nursing.
- (4) To encourage continuing program improvement through assessment, evaluation and consultation.

II. STANDARDS FOR ACCREDITATION

All Nursing Education Programs must be located in or otherwise accredited as a post-

secondary educational institution with appropriate local and state governing boards' approval to grant the appropriate degree or certificate. The educational institution must be regionally accredited by the Southern Association of Colleges and Schools, Commission on Colleges (SACS-COC).

All Nursing Education Programs must be accredited by a national nursing education accrediting body approved by the United States Department of Education. National accreditation ensures the quality and integrity of associate, baccalaureate, graduate and doctoral degree nursing programs and holds nursing programs accountable to the educational community, the nursing profession and the public. The accrediting bodies for professional nursing education are the Commission on Collegiate Nursing Education (CCNE) and the Accreditation Commission for Education in Nursing (ACEN). The accrediting body for the nurse anesthesia programs is the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).

STANDARD I. Mission and Administrative Organization

1. National Standards

a. ACEN

Standard 1: Mission and Administrative Capacity

Standard 4: Curriculum

b. CCNE

Standard I: Program Quality: Mission and Governance

Standard II: Program Quality: Institutional Commitment and Resources

2. State Specific Requirements

a. Minimum education requirements for administrators are:

Associate degree programs – Master's in nursing from a regionally accredited institution.

Baccalaureate and higher degree programs – Doctorate in nursing or a related field with a master's degree in nursing from a regionally accredited institution.

b. All – unencumbered current license to practice in Mississippi.

c. All – satisfy a criminal history background check.

d. All – minimum of five (5) years of experience in a registered nursing education program to include teaching, curriculum development and program evaluation.

e. All – leadership, management, and/or administrative experience in the discipline of nursing.

f. All – a minimum of two years of clinical experience.

Required Documentation for Nurse Administrator

1. Transcripts (degrees; certifications)

2. Curriculum Vitae

3. Criminal History Background Check or signed affidavit

4. RN License

STANDARD II. Faculty and Staff

1. National Standards

a. ACEN

Standard 1: Mission and Administrative CapacityStandard 2: Faculty and Staff

b. CCNE

Standard I: Program Quality: Mission and GovernanceStandard II: Program Quality: Institutional Commitment and ResourcesStandard IV: Program Effectiveness: Assessment and Achievement of ProgramOutcomes

2. State Specific Requirements

- a. All nursing faculty (full-time, part-time and adjunct) in nursing programs must have a minimum of a master's degree with a major in nursing and a minimum of one year of clinical experience as a registered nurse.
- b. All nursing faculty (full-time, part-time and adjunct) must hold an unencumbered license to practice in Mississippi.
- c. All nursing faculty (full-time, part-time and adjunct) must satisfy a criminal history background check.
- d. All full-time nursing faculty must implement an annual professional development plan, which includes ten (10) contact hours of continuing education each academic year. Part-time and adjunct faculty must satisfy the professional development requirement in accordance with their designated FTE.
- e. The majority of nursing faculty in graduate nursing programs must also have earned doctorates in nursing or a related field from regionally accredited institutions.
- f. Preceptors shall be academically/experientially prepared at or beyond the level for which the preceptor service is rendered and shall have a minimum of one year experience.
- g. All non-nurse faculty (interdisciplinary) must be academically/experientially prepared at or beyond the level for which teaching/clinical service is rendered, shall have a minimum of one year experience in the related field of study and satisfy a criminal history background check.

Required Documentation for Faculty

1. Transcripts (degrees; certifications)

2. Curriculum Vitae
3. R.N. License & Advanced Practice RN License, if appropriate
4. Certification (i.e. Role Specific – FNP, PMHNP, GNP, etc.)
5. Criminal History Background Check or signed affidavit
6. Annual Professional Development Plan
7. Validation of 10 contact hours by academic year
8. Faculty Exception supporting documentation

Required Documentation for Preceptors

1. Education verification
2. Clinical experience verification
3. R.N. License & Advanced Practice RN License, if appropriate
4. Certification (i.e. Role Specific – FNP, PMHNP, GNP, etc.)

Faculty Exception to Educational Requirement (2.a, 2.b, 2.c & 2.d):

Exceptions may be granted by the Director of Nursing Education within the following parameters (APPENDIX A).

1. Exception faculty must be continuously enrolled in a graduate degree nursing program. Official verification of course enrollment should be submitted to the school of nursing at the beginning of each semester, and an official transcript indicating course completion to the school of nursing at the end of each semester. New faculty exception requests must also include an official acceptance letter from the School of Nursing where the faculty is enrolled.

Request for Faculty Exception must be submitted to the Director of Nursing Education two weeks prior to the beginning of each semester (Fall, Spring & Summer), or prior to hire date within a given semester.

2. Faculty enrolled in an RN-MSN program must have completed a minimum of fifty percent of total credit hours of program of study before consideration will be given for approval of faculty exception. A letter is required from the school of nursing where the faculty is enrolled validating fifty percent completion of credit hours of program of study (in addition to copies of current official transcripts on file at school of nursing).
3. The maximum time allowed to complete the graduate program is three years.
4. Faculty exceptions are limited to a total of 15 percent of the teaching faculty, excluding the nurse administrator (Dean or Director), OR one exception for programs with six or fewer teaching faculty. Faculty that fall under the exception clause must meet all other state specific faculty requirements.

Licensure (2.b)

Faculty with clinical teaching responsibilities (precepted or directed) in other states must hold an unencumbered registered nurse (R.N.) license recognized in that state, in addition to Mississippi.

Preceptors (2.f) & Non-Nurse Faculty (2.g) Requirements

The school of nursing will maintain documentation validating non-nurse faculty (interdisciplinary) and preceptors' education, clinical experience, and licensure (if appropriate). Types of documentation may include a letter from the clinical agency or individual forms signed by preceptor and clinical agency, current copy of RN/APRN/other professional license and certifications.

Annual Professional Development Plan (2.d)

All full-time faculty must implement an annual professional development plan that may include personal and professional goals, actions, and activities, and evaluation for goal attainment. The plan must have been approved by the administrator of the nursing program or designee AND must total a minimum of ten contact hours per academic year. The ten contact hours may include a combination of course work, professional educational presentations, and/or attendance at continuing education offerings. One semester credit hour of academic course work equates to 15 contact hours.

Part-time and adjunct faculty must satisfy the professional development requirement in accordance with their designated FTE and as required by the institution.

Method of validating contact hours is determined by the nurse administrator or designee (examples: CEU certificates, sign-in list, agendas for presenters, etc.).

STANDARD III. Students

1. National Standards

a. ACEN

Standard 3: Students

b. CCNE

Standard I: Program Quality: Mission and Governance

2. State Specific Requirements

a. Associate Degree Nursing Programs.

Minimum admission criteria for associate degree nursing programs are as follows:

1. An ACT composite score of 18 and a 2.0 GPA.
2. Students without the required ACT composite score must have completed a minimum of 12 semester hours in the nursing major, including Anatomy and Physiology, with at least a grade of "C" and have a minimum 2.5 GPA before being admitted.
3. All students must satisfy a criminal history background check.
4. Each school is permitted an allowance of 10 percent of the previous fall's nursing program admission for high risk students who do not meet the criteria.

b. Bachelor Degree Nursing Programs.

Minimum admission criteria for bachelor degree nursing programs are as follows:

1. An ACT composite score of 21. Students with the required ACT composite score must also have at least a grade of “C” in each prerequisite course to the nursing major and a 2.0 GPA.
 2. Students without the required ACT composite score must complete all the course prerequisites to the nursing major with at least a grade of “C” and a GPA of 2.5.
 3. Student with a registered nurse (R.N.) license may enter without an ACT by completing all the course prerequisites to the nursing major with at least a grade of “C” and have a GPA of 2.0.
 4. Baccalaureate nursing programs in private educational institutions may establish admission criteria which support the goals and aims of their institution.
 5. All students must satisfy a criminal history background check.
 6. Each school is permitted an allowance of 10 percent of the previous fall’s nursing program admission for high risk students who do not meet the criteria.
- c. Graduate Degree Nursing Programs.
Minimum admission criteria for graduate degree nursing programs (MSN & DNP) are as follows:
1. An analytic score of at least 3.0 on the Graduate Records Exam (GRE).
 2. Minimum 3.0 GPA for the most recent nursing degree.
 3. Private educational institutions may establish admission criteria which support the goals and aims of their institution.
 4. All students must hold an unencumbered registered nursing (R.N.) license to practice in the state in which the student will perform clinical.
 5. All students must satisfy a criminal history background check.

Graduate Degree Nursing Programs with Post-Graduate APRN Programs

Post-Graduate APRN programs will adhere to the admission criteria requirements of the university and nursing program, and national nursing accreditation standards.

Required Documentation for Students

1. Official ACT scores
2. Transcripts – validating GPA
3. Official GRE scores
4. RN/APRN license and certification
5. Criminal history background check

High Risk Students

High risk students are those who do not meet one or more program specific minimum admission requirements. Each school of nursing will maintain a list of the previous fall admission numbers and numbers of high risk students admitted.

STANDARD IV. Curriculum

1. National Standards

- a. ACEN
Standard 4: Curriculum
 - b. CCNE
Standard II: Program Quality: Institutional Commitment and Resources
Standard III: Program Quality: Curriculum and Teaching-Learning Practices
2. State Specific Requirements
- a. Undergraduate student-to-faculty ratios must be:
 - 1.No more than 15 to 1 for total enrollment.
 - 2.No more than 10 to 1 for clinical laboratory courses that require direct supervision.
 - 3.No more than 15 to 1 for those courses that do not require direct supervision (i.e. precepted experiences).
 - b. Graduate student-to-faculty ratios must be:
 1. No more than 15 to 1 for total enrollment.
 2. No more than 15 to 1 in graduate clinical courses.
 3. No more than 2 to 1 for advanced practice clinical courses that require direct supervision.
 4. No more than 6 to 1 for advanced practice clinical courses that do not require direct supervision (i.e. precepted experiences).
 - c. Undergraduate Simulation Clinical Hours:
 1. 25% or less of traditional clinical hours substituted with simulation clinical hours in each individual clinical course does not require approval.
 2. 26% up to 50% of traditional clinical hours substituted with simulation clinical hours in each individual clinical course requires approval.
 3. No more than 50% of traditional clinical hours can be substituted with simulation clinical hours in each individual clinical course.

Required Documentation

Validation of student-to-faculty ratios must be maintained in the school of nursing each semester.

1. Total enrollment and number of faculty.
2. Copy of all clinical rotation schedules for supervised student clinical groups.
3. Copy of all precepted course rosters and faculty.

Request for 50% Simulation Clinical Hours (26% up to 50%)

NCSBN National Simulation Study: A Longitudinal, Randomized, Controlled Study Replacing Clinical Hours with Simulation in Prelicensure Nursing Education (Journal of Nursing Regulation, 5(2), July 2014 Supplement) findings “provides substantial evidence that up to 50% simulation can be effectively substituted for traditional clinical experience in all prelicensure core nursing courses under conditions comparable to those described in the study” (p. S38).

State of Mississippi approved registered nursing programs may have up to 25% of traditional clinical hours substituted with simulation clinical hours in each individual clinical course. Simulation clinical hours must not exceed a 1:1 ratio for substitution of traditional clinical hours, and no more than a 10:1 student-to-faculty ratio for simulation clinical experiences. Schools of nursing may request approval of 26% and up to 50% of simulation clinical hours substituted for traditional clinical hours in each individual clinical course by submitting electronically through the secure site Deans and Directors Login <http://www.mississippi.edu/nursing/login/> the Request for Simulation Clinical Hours and Focused Report documenting compliance with requirements for approval. The request and report must be submitted three months prior to the proposed implementation date. A focused-site visit (one day) will be scheduled to validate compliance with requirements. All travel expenses will be reimbursed directly to the state site visitors by IHL at the current state rate (travel, lodging and meals). IHL/Office of Finance and Administration will send an invoice to the school of nursing to reimburse IHL.

Required Documentation for Approval of Simulation Clinical Hours

1. Request for Simulation Clinical Hours and Focused Report (Electronic Submission/Secure Site)
 - a. Request (Appendix B example)
 - b. Focused Report
 - i. Simulation Guidelines (Appendix C example)
 - ii. Simulation Faculty Preparation (Appendix D example)
 - iii. Program Preparation (Appendix E example)
 - iv. Confirmation
2. Focused Site Visit Schedule
 - a. Meet with Nurse Administrator
 - b. Meet with Simulation Director/Coordinator
 - c. Meet with Faculty teaching in clinical courses with simulation hours
 - d. Tour of Simulation Lab/Facility
3. Documents Available for On-Site Review
 - a. Accreditation Status (IHL, ACEN, CCNE, COA, SACS-COC & Other)
 - b. Nurse Administrator File(s)
 - c. Simulation Director/Coordinator File
 - d. Faculty Files (clinical courses)
 - e. Clinical Courses: Syllabi, Course Schedules, & Evaluation Tools
 - f. Simulation Policies, Procedures, and Guidelines
 - v. Nursing Student Handbook
 - vi. Nursing Faculty Handbook
 - g. NCSBN Simulation Guidelines – Evidence
 - h. NCSBN Faculty Preparation Checklist – Evidence
 - i. NCSBN Program Preparation Checklist – Evidence
 - j. Additional documents upon request

STANDARD V. Resources

1. National Standards
 - a. ACEN
Standard 1: Mission and Administrative Capacity
Standard 5. Resources
 - a. CCNE
Standard II: Program Quality: Institutional Commitment and Resources
2. State Specific Requirements
None

STANDARD VI. Outcomes

1. National Standards
 - a. ACEN
Standard 6: Outcomes
 - b. CCNE
Standard IV: Program Effectiveness: Assessment and Achievement of Program Outcomes
2. State Specific Requirements
 - a. NCLEX Pass Rates: Annual NCLEX pass rates for all test takers (1st and repeat) will be at 80 percent or above over a three-year period.
 - b. Degree Completion Rates: Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, program history, best practices, and will be within 150 percent of the stated program length over a three-year period.
 - b. Certification Pass Rates:
 1. Annual nurse practitioner certification exam pass rates for all test takers (1st and repeat) will be at 80 percent or above over a three-year period.
 2. Annual nurse anesthesia certification exam pass rates for all test takers (1st and repeat) will be at 80% or above over a three-year period.

Required Documentation

1. Maintain official copies of the Mississippi Board of Nursing NCLEX-RN® reports for a three (3) year period.
2. Calculation of NCLEX-RN® pass rates for the calendar year will be sent to the Director of Nursing Education in January, following receipt of the December cumulative report from the Board of Nursing (APPENDIX F).
3. Each school of nursing will enter the program benchmark and their annual degree completion rate with data, and nurse practitioner/nurse anesthesia certification rate with data in the annual report submitted by October 15 (APPENDIX G; APPENDIX H).

III. RULES AND REGULATIONS FOR ACCREDITATION

A. CONFIDENTIALITY OF ACCREDITATION INFORMATION

All data, observations, conversations, conclusions, reports, and minutes relating to accrediting activities are CONFIDENTIAL. Acceptance of an invitation to be a site visitor constitutes a contractual agreement to safeguard the confidentiality of accrediting data. Therefore, observations made during the visit, in the self-evaluation report, the site visitors' report, correspondence between the unit in nursing and the Board, as well as discussions and recommendations of the Accreditation Review and Evaluation Committee, are all confidential and privileged communications.

It is essential not to divulge any information from these sources, to avoid leaving where they may be read by others, and to refrain from discussing findings during the visiting experience with colleagues or others in one's own institution or elsewhere.

Reports concerning statistical, personnel, and program data, as well as other materials required by the Board, shall be submitted when requested.

B. CONFLICT OF INTEREST

All individuals involved in any aspect of state accreditation activities are expected to recognize relationships in which they may have a potential conflict of interest, and to remove themselves from deliberations concerning institutions and programs when such conflicts exist. Conflicts of interest include, but are not limited to, current or former employment by the institution whose program is being evaluated, current employment in an institution that is located in close proximity to or in direct competition with the institution whose program is being evaluated, and/or attended the institution whose program is being evaluated.

C. TYPES OF ACCREDITATION

The Board shall grant to a state nursing degree program one of the following types of accreditation, based on the evaluation of annual reports documenting compliance with the state nursing accreditation standards:

1. Initial Accreditation

- a. Granted when the program is in compliance with all standards for a new program. Permission is granted to admit students and the next review is in the final semester of the first class in conjunction with the initial national visit.
- b. Denied when the program does not meet all standards for a new program. The program may reapply at any time.

2. Continuing Accreditation

- a. **Full Accreditation.** National accreditation and state specific requirements have been met.
- b. **Accreditation with Conditions.** National standards and/or state specific requirements have not been fully met.

- (1) National Accreditation. When one or more national standards are not met, the program's state accreditation status will be the same as that designated by the national accrediting body. The program must

satisfactorily address the area(s) of concern/deficiency and demonstrate compliance within the designated time frame set forth by the national accrediting body.

- (2) **State Specific Requirements.** When one or more state specific requirements are not met, the program must satisfactorily address the area(s) of concern/deficiency through the development of a performance improvement plan. Upon program notification of noncompliance, the state specific requirement must be achieved **within the time frame set forth by the Director of Nursing Education, Office of Academic and Student Affairs.**

Performance Improvement Plan & Progress Report

If the standard(s) is/are not met, the program will submit a performance improvement plan (PIP) by June 30 following official notification after the annual Board meeting in May. If the standard(s) is/are still not met by the next year, the program will submit a PIP progress report by June 30 following official notification after the annual Board meeting in May. If the standard(s) is/are not met following two full years on a PIP, a recommendation of Accreditation with Statement of Warning will be made by IHL Director of Nursing Education, Office of Academic and Student Affairs, to the Board of Trustees.

- c. **Accreditation with Statement of Warning.** The performance improvement plan has not resulted in program compliance with standard(s). A follow up focused visit, by members selected by the IHL Office of Academic and Students Affairs' Nursing Education Unit, is scheduled within three months of statement of warning. A final performance improvement plan is due within 12 months of the issue of the warning that addresses the recommendations made by the state site visit team.
3. **Accreditation Denied/Withdrawn.** If a program is not in compliance with national standards and/or state specific requirements as specified in the time frame identified under Accreditation with Statement of Warning, the recommendation for the withdrawal of accreditation will be made by the IHL Director of Nursing Education, Office of Academic and Student Affairs, to the Board of Trustees.

Closure of Nursing Education Program and Storage of Records

If a nursing education program is closed due to withdrawal of the Board of Trustees' approval, provision will be made for:

- a. Maintenance of the standards for nursing education during the transition to closure.
- b. Placement for students who have not completed the program.
- c. Arrangement for the secure storage and access to academic records and transcripts.

D. ACCREDITATION PROCESS

The national accreditation process will be conducted according to the policies and procedures outlined by the accrediting body.

1. **State Accreditation.** State accreditation site visits will be conducted in conjunction with national accreditation site visits. Each school of nursing will submit a copy of the notification letter from the accrediting body regarding the date of the site visit and a copy of the site visit schedule to the Director of Nursing Education.

Each school of nursing will notify the national accrediting body that a state accreditation site visit will be made in conjunction with the national site visit. Information should include the authority of the Mississippi Board of Trustees of State Institutions of Higher Learning (the Board), which is empowered and required by state statute to: (a) establish by rules and regulations and promulgate uniform standards for accreditation of schools of nursing in the state of Mississippi; and (2) issue to such schools of nursing upon an annual basis certification of accreditation as may be proper under such standards.

2. **Self-Review and Self-Study Report.** Each school of nursing must submit three (3) to five (5) hard and electronic copies of the self-study report to the Director of Nursing Education in accordance with the time frame required by national accrediting body.
3. **Peer Evaluation Review Team.** The selection of a Peer Evaluation Review Team (PERT) for each state accreditation visit is the responsibility of the Director of Nursing Education in collaboration with the Chair of the Accreditation Review and Evaluation Committee (AREC).
 - a. Composition of the PERT will consist of two or more visitors from the nursing education community, with one member appointed as Chair.
 - b. PERT members will be selected based on experience and professional knowledge of the program that is being evaluated. However, this does not preclude the dean/director/faculty of an associate degree program evaluating a baccalaureate or higher degree program, and the dean/faculty of baccalaureate or higher degree program evaluating an associate degree program.
 - c. PERT members who may have a conflict of interest regarding any issue pertaining to the school of nursing, must recuse themselves from the team and a new member(s) appointed.
4. **Responsibilities of the Director of Nursing Education.** The Director of Nursing Education is responsible for performing the following duties:

- a. Plan with each administrator of the unit in nursing the accreditation site visit schedule for state site visitors. Visits will be in conjunction with the national accreditation site visit.
- b. Select two or more state site visitors and a chair, in collaboration with the chair of the Accreditation Review and Evaluation Committee (AREC).
- c. Request that the unit in nursing's self-study, along with any other materials, be submitted to the Director of Nursing Education at least six weeks prior to the scheduled visit.
- d. Submit the following to the school:
 - i. List of materials needed to document and supplement the self-study report.
 - ii. Names of prospective PERT members.
- e. Submit the following to the PERT:
 - i. Self-study and any other appropriate state accreditation materials.
 - ii. College catalog and/or electronic link.
 - iii. Any other reports submitted by the nursing unit.
 - iv. State travel vouchers and any other Board required documentation and/or forms.
- f. Participate on the State Accreditation Team for initial and continuing ACEN, CCNE and COA visits.
- g. The Director of Nursing Education will send the preliminary site visit report back to the nurse administrator of the education unit in nursing for review and correction of any errors in factual data. When the report is returned to the Director of Nursing Education, the nurse administrator's response will be appended to the report. .
- h. The Director of Nursing Education will discuss the site visit report to the Chair of the Accreditation Review and Evaluation Committee (AREC) of the Mississippi Deans and Directors of Schools of Nursing (MCDDSN) at least two weeks in advance of the January or June meeting.
- i. The Director of Nursing Education will hold the site visit report and accreditation status recommendation pending the final report from the national accrediting body.
- j. The Director of Nursing Education, within the Office of Academic and Students Affairs, will send a letter of notification regarding the School of Nursing's accreditation status to the College/University President and Dean/Director of the School of Nursing.

5. Responsibilities of the School of Nursing.

- a. Notify the Director of Nursing Education upon receipt of letter of confirmation of national site visit dates.
- b. Send three (3) to five (5) copies of the self-study report (hard and electronic), catalog (hard or electronic), and other material to the Director of Nursing Education at the same time the information is sent to the national nursing accrediting body. Ensure all provided electronic links are accessible.
- c. Additional material available during state site visit should include:

- i. Nurse Administrator(s) files(s) to include: transcripts, certifications, curriculum vita, validation of Mississippi RN license (other states if applicable), and criminal history background check or signed affidavit.
 - ii. Faculty files to include: transcripts, certifications, curriculum vita, validation of Mississippi RN and APRN license (other states if applicable), criminal history background check or signed affidavit, and an annual professional development plan to include 10 contact hours by academic year. Faculty who have been granted a “Faculty Exception” should have additional documentation on file (refer to Faculty Exception to Educational Requirement, p. 6).
 - iii. Official student records to verify that standards have been met (sufficient quantity from each program will be determined by the PERT). Based on program type, student files must include: GPA, ACT, transcripts, GRE, license and certification, and a criminal history background check.
 - iv. Faculty/Student clinical rotation schedules.
- d. Reserve hotel rooms for PERT six weeks prior to site visit. Notify each PERT member by email regarding the reservation confirmation number.
 - e. Submit a tentative agenda for the site visit to the Director of Nursing Education.
 - f. Provide directions to the school of nursing to PERT members.
 - g. Submit copies of any further correspondences from the national accrediting body to the Director of Nursing Education following the site visit.
 - h. Submit a copy of the final accreditation status report received from the national accrediting body to the Director of Nursing Education.
 - i. Send the Director of Nursing Education the name, address, phone/fax number, and email address of the contact person to send the invoice for reimbursement for state site visitors travel expenses. All travel expenses will be reimbursed directly to the state site visitors by IHL at the current state rate (travel, lodging, and meals). IHL/Office of Finance and Administration will send an invoice to the school of nursing to reimburse IHL.
6. **Responsibilities of the Peer Evaluation Review Team (PERT).**
Although one visitor is designated as the chair, visitors work together closely and share responsibility for all aspects of the visit.

Each PERT member is expected to be knowledgeable about the accreditation process and the Mississippi Nursing Degree Programs Accreditation Standards and Procedure Manual.

In addition, it is important for each PERT member to be thoroughly conversant with the content of the self-study report, any other evaluative reports, and for

materials submitted by the unit in nursing in advance. Any information needed for clarification should be requested from the IHL Director of Nursing.

It is advisable for the PERT members to allocate time prior to the visit to discuss the self-study report and to outline the procedures to be followed during the visit.

Objectivity is of prime importance during the evaluation process. Each aspect of the program must be evaluated only in terms of the evidence presented as it relates to the requirements for accreditation.

The PERT members' role during the accreditation visit is to clarify, amplify, and verify the information submitted by the unit in nursing in relation to the state standards for accreditation.

The chair of the PERT should assume the following responsibilities:

- a. Act as official spokesperson for the PERT.
- b. Coordinate planning and allocate responsibilities for various activities to assure optimum utilization of team members and at the same time assure adequate coverage of all areas during the visit.
- c. Assure that the site visit report supplements and complements the program's self-study report and that evidence presented relates to the program's objectives and state standards.
- d. Participate in a final conference with the administrator of the unit in nursing and any others that the administrator desires to have present. Corrections of any errors in the factual data can be made at this time by the PERT chair.

The PERT members should assume the following responsibilities:

- a. Conduct a site visit of the nursing program to verify, clarify, and amplify the self-study prepared by the unit in nursing so that the evaluators of reports and site visit results will have a clear and complete picture of the program(s) in nursing.
- b. Evaluate each program on the basis of information that is received from the school's self study, progress report, the site visitors' report, and the school catalog and other materials submitted by the school.
- c. Prepare a report that includes the verification of data, documentary statements, and additional descriptive material essential to a clear and concise picture of state specific requirements.

NOTE: PERT members should not request materials from the college for personal use -- only to supplement the self-study.

7. Responsibilities of the Accreditation Review and Evaluation Committee (AREC)

- a. The AREC will meet in January and June for review of state accreditation site visit reports and recommendations for each school of nursing, with additional meetings scheduled as needed.

- b. The AREC will be informed of the outcome of the site visit from the chair of the AREC and Director of Nursing Education.
- c. The AREC will review the accreditation procedure manual in February of each year.

IV. CHANGES IN EXISTING NURSING PROGRAMS/REPORTS

Schools of Nursing must submit to the IHL Director of Nursing Education a copy of any report (substantive, etc.) sent and received from the national nursing accrediting body (ACEN, CCNE or COA). Substantive change requests must include correspondences from ACEN, CCNE, COA and the Southern Association of Colleges and Schools – Commission on Colleges (SACS-COC). Additionally, the following information will be sent to the Director of Nursing Education:

Action	Requirement
Annual Report	Complete annual report forms by October 15
Change in ownership	Notification letter
Change in directors/deans	Notification letter
Markedly altering the curriculum	Detailed description with review by the Director of Nursing Education and AREC
Adding a new teaching site	Detailed description of educational, financial, operational, management, and physical resources to offer program with review by Director of Nursing Education and AREC
National accreditation	Copy of notification
Change in accreditation status	Copy of notification (Institutional or Program)
Decision made to discontinue the program	<p>The Board shall be notified in writing of the intention of the controlling institution. If the remaining students continue in the program, adequate faculty and educational standards shall be maintained until the last student has completed the program. This date shall be the official closing date of the nursing program. Disposition of all students' permanent transcripts and final records shall be made in accordance with institutional policy. A representative of the Board shall visit the nursing program and assist in making arrangements for proper closure and, if necessary, for the transfer of students.</p> <p>An institution desiring to reopen an educational unit in nursing or a nursing program shall reapply for approval of a newly planned program.</p>
Request of information	Information requested by Director of Nursing Education

The Director of Nursing Education will report to MS Council of Deans and Directors any notification of and request for substantive changes.

The Director of Nursing Education will complete a yearly program evaluation on each school of nursing based on annual report data submitted by the school, accreditation site visit reports (state and national), and other pertinent information.

The Director of Nursing Education will submit a report to the Board annually that will include selected data from the Schools of Nursing Annual Report data to include:

1. Admission, enrollment and graduation data
2. NCLEX-RN® pass rates
3. Student/Faculty ratios
4. Faculty vacancies
5. Degree completion rates
6. Graduation data by program and degree
7. Graduate program enrollment by clinical practice role
8. Nurse practitioner and nurse anesthetist certification rates
9. National accreditation status and schedule
10. Other data

The IHL Director of Nursing will prepare recommendations for approval of annual accreditation status for schools of nursing to the Board during the annual meeting in May.

V. CRITERIA FOR ESTABLISHING A PROGRAM OF PROFESSIONAL NURSING IN THE STATE OF MISSISSIPPI

The three stages to be completed in the development of a new professional nursing program in Mississippi are as follows:

STAGE I - DECLARATION OF INTENT/NEED

Process

- 1.1 An institution considering the establishment of a state-accredited unit in nursing shall request a meeting with the Director of Nursing Education to discuss procedure and requirements for submission of Stage I documentation.
- 1.2 The institution submits the application for Stage I and the required documentation to the Director of Nursing Education (APPENDIX I). Upon receipt of the institution's completed Stage I application, the Director of Nursing Education carries out the following:
 - 1.2.1 Submit to Deans and Directors for feedback.
 - 1.2.2 Submits information to the Office of Academic and Student Affairs (OASA) to determine that all required information is included as specified in the Stage I criteria.
 - 1.2.3 Facilitates the process for public comment.
 - 1.2.4 Collaborates with OASA to submit a summary of the Declaration of Intent and public comment with a recommendation of either approval or disapproval to the IHL Board of Trustees.
 - 1.2.5 The IHL Board of Trustees issues the decision to either approve or disapprove the OASA recommendation for Stage I.
 - 1.2.6 Sends a letter to the institution informing them of the Board of Trustees' decision explaining the following:

Decision of approval - allows the institution to begin work on Stage II.

Decision of disapproval - provides a rationale for the decision. The institution may revise the application and resubmit it to the Board of Trustees at a later date or abandon its intention to establish a nursing program.

Criteria

The application for Stage I should include the following information:

- 1.2 Approval from the institution's governing/coordinating board.
- 1.3 Establishment of a local advisory committee to provide input into a nursing program, which includes representation from nursing education, nursing practice, health care facilities, educational agencies, and the community; inclusion of evidence of advisory committee of local stakeholders involvement in the planning process.
- 1.4 Evidence of obtaining professional advice from qualified nurse educator(s) who is/are involved in administering an accredited nursing program(s) and/or an approved national nursing accrediting body.
- 1.5 Substantive evidence of need for establishment of a new program of nursing to include qualitative and quantitative data from the Community of Interest (COI) and key stakeholders such as local educational institutions, community organizations, local health care agencies, and other appropriate sources/entities.
- 1.6 Current institutional catalog or electronic access.
- 1.7 Philosophy/mission and goals of the institution.
- 1.8 Vision and purpose for establishing a new nursing program.
- 1.9 Evidence of full institutional accreditation by the Commission on Colleges of the Southern Association of Colleges and Schools, Mississippi Commission on College Accreditation, and any other pertinent accrediting body.
- 1.10 Detailed description of educational, financial (to include budget), operational, management, and physical resources to offer the proposed nursing education program.
- 1.11 Sources for potential students and identification of any nursing programs within a fifty-mile radius.
- 1.12 Data on potential qualified faculty.
- 1.13 Availability of supporting academic courses consistent with institutional accreditation requirements and nursing program type.
- 1.14 Tentative timeline for the development and implementation of the nursing program, to include the employment of a qualified nursing program administrator no less than one year prior to the admission of students.

STAGE II - QUALIFY FOR INITIAL ACCREDITATION (permission to admit students)

Process for Stage II Preparation

Following approval by the Board of Trustees to establish a new nursing program, the institution shall contact the Director of Nursing Education regarding Stage II application completion to include procedure, requirements, and due dates for the following:

- a. Stage II progress report (APPENDIX J)
- b. Stage II application and self-study report (APPENDIX K)

Criteria

The Stage II application and self-study report should include the following information:

- 2.1 Appointment of a qualified nursing education program administrator no less than one year before the anticipated admission of students with vita included.

Criteria for Administrators for Mississippi Schools of Nursing:

- 2.1.1 Satisfy all other state specific requirements as outlined in Standard I.
- 2.1.2 Have a minimum of three (3) years of experience in a registered nursing education program to include teaching, curriculum development, and program evaluation.
- 2.1.3 Have leadership, management, and/or administrative experience in the discipline of nursing.
- 2.2 Appointment of sufficient qualified nursing faculty members for the first full year of operation no less than six months before the anticipated date for admission of students.

For a pre-licensure nursing program the following shall apply:

- 2.2.1 **Associate Degree Program.** A minimum of four qualified fulltime faculty members for an associate degree program. Each nurse faculty member shall hold a current unencumbered license to practice as a registered nurse in Mississippi and satisfy all other state specific requirements as outlined in Standard II. Two or more faculty members employed must have teaching experience in a nursing education program. At least one faculty member must have documented competence and a minimum of one year clinical experience in each of the following areas:

Adult Health Nursing
Maternal Child Nursing
Psychiatric /Mental Health Nursing

Competence is defined as academic and clinical preparation of faculty, which includes degree specialization, specialty coursework, nationally recognized certifications, or other preparation sufficient to address the major concepts included in courses they will teach.

- 2.2.2 **Baccalaureate Degree Program.** A minimum of five qualified faculty members for a baccalaureate degree program. Each nurse faculty member shall hold a current unencumbered license to practice as a registered nurse in Mississippi and satisfy all other state specific requirements as outlined in Standard II. Three or more faculty members employed must have teaching

experience in a nursing education program. At least one faculty member must have documented competence and a minimum of one year clinical experience in each of the following areas:

Adult Health Nursing
 Maternal Child Nursing
 Psychiatric/Mental Health Nursing
 Community /Public Health Nursing

Competence is defined as academic and clinical preparation of faculty, which includes degree specialization, specialty coursework, nationally recognized certifications, or other preparation sufficient to address the major concepts included in courses they will teach.

2.2.3 **Qualified faculty is defined as:**

Master's or higher degree with a major in nursing and a major, clinical focus, specialty or certification in adult health, maternal-child, psychiatric/mental health, or community/public health nursing.

OR

Master's or higher degree with a major in nursing and at least five years (within the last ten) of clinical and/or teaching experience in one of the specified required areas of adult health, maternal-child, psychiatric/mental health, or community/public health nursing (only one of the qualified faculty for each program type may be employed meeting this criteria).

Must hold an unencumbered license to practice nursing in the state of Mississippi (and other states, if applicable), satisfy all other state specific requirements and meet all requirements of the affiliated clinical agencies.

Must satisfy a criminal history background check.

For a post-licensure nursing program the following shall apply:

2.2.4 **Post-licensure Nursing Programs.** The appointment of sufficient qualified nursing faculty will be determined by the Director of Nursing Education and AREC in accordance with type of program and national nursing specialty organization, and standards for accreditation.

2.2.5 **Qualified faculty is defined as:**

Master's or higher degree with a major in nursing and a minimum of one year of clinical experience as a registered nurse.

Must hold an unencumbered license to practice nursing in the state of Mississippi (and other states, if applicable), satisfy all other state specific requirements and meet all requirements of the affiliated clinical agencies.

Must satisfy a criminal history background check.

The majority of faculty in graduate nursing programs must also have doctorates in nursing or a related field from regionally accredited institutions.

- 2.3 Evidence that the nursing educational unit's administrator and faculty have developed the following:
 - 2.3.1 Philosophy/mission, goals, and expected program outcomes for the nursing educational unit that are congruent with those of the parent institution;
 - 2.3.2 Course sequence of the nursing educational unit including general education requirements and pre-requisites;
 - 2.3.3 Overall curriculum, to include but not limited to:
 - 2.3.3.1 Course descriptions, student learning outcomes for each course including unit objectives, and learning activities for all courses;
 - 2.3.3.2 Incorporation of established professional standards, guidelines, and competencies;
 - 2.3.3.3 Evaluation methodologies, which are varied and measure student learning and program outcomes;
 - 2.3.3.4 Practice learning environments that are appropriate to achieve student learning and program outcomes;
 - 2.3.4 Nursing program budget which has been approved by the institutional process;
 - 2.3.5 Organizational chart of the parent institution representing the relationship of the nursing educational unit to the parent institution;
 - 2.3.6 Admission, promotion, and graduation policies for the nursing educational unit and justification if different from other institutional requirements;
 - 2.3.7 Systematic plan of evaluation for the nursing educational unit to ensure program effectiveness in fulfilling mission, goals, program and student learning outcomes, reflective of national accreditation standards.
- 2.4 Provisions by the sponsoring institution for the following:
 - 2.4.1 Adequate support services including but not limited to registrar, admissions, testing, counseling etc.
 - 2.4.2 The health and welfare of students;
 - 2.4.3 Sufficient program and faculty support including but not limited to staff, fiscal, physical, technological and learning resources;
 - 2.4.4 Approved affiliation agreements with institutions and clinical practice learning environments at which student learning will occur that:
 - are legally binding agreements
 - require completion of the clinical agency form (APPENDIX L)
 - ensure faculty responsibility for students and student learning experiences
 - contain termination clauses
 - provide for periodic review and revision as necessary;

- 2.4.5 Accreditation by a national and regional accrediting body approved by the United States Department of Education.

Process Following Stage II Submission

See Roles, Responsibilities, and Procedure for Approval of a New Professional Nursing Program (pp. 24-25).

- 2.5 The Peer Evaluation Review Team (PERT) will be appointed.
- 2.5.1 The PERT will evaluate the Stage II self-study report and make a site visit according to the established time frame;
- 2.5.2 The PERT will submit a written report. ;
- 2.5.3 The report will be provided to the institution by the Director of Nursing Education;
- 2.5.4 The institution may submit a written response to the report to the Director of Nursing Education.
- 2.6 The Director of Nursing Education shall review the report, Stage II application and self-study materials, and any written response from the institution.
- 2.6.2 The Director of Nursing Education and Office of Academic and Student Affairs (OASA) shall review the recommendation of the PERT and prepare a recommendation by OASA to submit to the IHL Board of Trustees for a final decision.
- 2.6.3 Written notification of the IHL Board of Trustees' decision regarding initial accreditation shall be sent to the institution by the Director of Nursing Education.
- 2.6.4 If accreditation is denied or deferred, recommendations relative to the areas needing further development will accompany the notification and the institution may reapply.

STAGE III - QUALIFY FOR FULL ACCREDITATION

Process

Once Initial Accreditation requirements have been satisfied, the following is necessary in order to achieve Full Accreditation status (APPENDIX M):

- 3.1 A PERT shall be appointed and a site visit scheduled during the last semester of the first class or in conjunction with the initial national nursing accreditation site visit.
- 3.2 The PERT report will be held until all graduates of the first class have taken the NCLEX-RN®.
- 3.3 The Director of Nursing Education shall review the PERT site visit report, the NCLEX-RN® pass rates of the first class, nurse practitioner certification pass rates, nurse anesthetist certification pass rates, graduation completion rates, information on graduate employment, and national nursing accreditation site visit report.

- 3.4 The Director of Nursing Education and OASA shall prepare a recommendation by OASA to submit to the IHL Board of Trustees for a final decision.
- 3.5 Written notification of the IHL Board of Trustees' decision regarding full accreditation shall be sent to the institution by the Director of Nursing Education.
- 3.6 If full accreditation is denied, reason for denial will accompany the notification. The program must cease to admit students. Provisions will be made for closure of the program (Closure of Nursing Program and Storage of Records, p. 12).
- 3.7 The program may apply for initial accreditation (Stage II – Qualify for Initial Accreditation, pp. 19-22).

Roles, Responsibilities and Procedure for Approval of a New Professional Nursing Program

I. Director of Nursing Education

The Director of Nursing Education serves within the IHL Office of Academic and Student Affairs to administer the accreditation process for all Mississippi professional nursing programs.

Duties related to new nursing program applications include the following:

1. Provide information to interested institutions regarding process and criteria.
2. Collect, edit, and distribute all materials submitted as part of the approval process.
3. Ensure that the process for public comment is carried out.
4. Work cooperatively with the Office of Academic and Student Affairs to prepare appropriate materials and recommendations for consideration by the Board of Trustees.

II. Institution seeking the establishment of a program of professional nursing

1. Follows Stage I process and criteria to obtain approval.
2. Following approval of Stage I -- follows Stage II process and criteria and submits the required application and information.
3. Following approval of Stage II -- follows Stage III process and submits required application and information.
4. Complies with all established time lines and due dates.
5. Stage II self-study report requirement -- provides the following:
 - a. Five (5) hard copies sent directly to the Director of Nursing Education;
 - b. Electronic copies of the self-study and required materials sent to the Director of Nursing Education via email or flash drive for distribution.
6. Stage III information requirement -- submits application and required information on NCLEX-RN® pass rates, nurse practitioner certification pass rates, nurse anesthetist certification pass rates, graduation completion rates, graduate employment and national nursing accreditation site visit report to the Director of Nursing Education.
7. Stage II and III site visits -- the nursing program administrator is responsible for the following provisions:
 - a. Reimbursement to site visitors for expenses associated with housing, travel and meals at the state rate;
 - b. Hotel reservations for site visitors;
 - c. Travel for site visitors from the hotel to the site and all intra-visit travel;
 - d. Agenda for the site visit sent to the PERT leader six weeks in advance for approval;
 - e. Technology needs;
 - f. Communication with the Director of Nursing Education.

III. Peer Evaluation Review Team

The Peer Evaluation Review Team (PERT) is composed of nurse educators or administrators who have completed a state site visitor training session. Site visitors are

appointed by the Director of Nursing Education and the Accreditation Review and Evaluation Committee Chair based on geographic location and expertise. The PERT will consist of two or more members, with one appointed as the team chair. The Director of Nursing Education will participate on the PERT for initial and continuing ACEN and CCNE visits.

PERT duties related to new nursing programs include the following:

1. Participate in a 2.5 to 3 day site visit.
2. Work as a team to clarify, verify, and amplify program materials as presented in the self study.
3. Gather data and information for use by the IHL Board of Trustees to assess whether the program is in compliance with the Criteria for Establishing a Professional Nursing Program in the state of Mississippi, Stage II and III.
4. Submit a written site visit report of findings.

IV. IHL Board of Trustees

The Mississippi Board of Trustees of State Institutions of Higher Learning is empowered and required by state statute with the sole authority to determine the approval/accreditation status of a state nursing program.

VI. REVISION DATES

July 1, 1992

July 1, 1993

April 1995-amended

June 1998-amended

July 1999-amended

November 2002

September 2004

November 2007

November 2009

September 2010

September 2011

July 2013

August 2013 – *Edited official name change from NLNAC to ACEN & website page 37*

December 2015

July 2017

APPENDIX A
Faculty Exception Form

**BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI**

Request for Faculty Exception requires prior approval for new and continuing faculty (fulltime, part-time, & adjunct) and must be submitted to the IHL Director of Nursing Education at least two weeks before the beginning of each semester prior to employment or prior to employment if hired during the semester. Employment of exception faculty is contingent on being continuously enrolled and successfully completing the courses. Exception faculty must report their inability to fulfill this obligation and will immediately be ineligible for employment. The form should be submitted for faculty who have completed their degree the previous semester. A letter of decision will be sent following review of the request and supporting documentation. **New and continuing** requests must include supporting documentation with the form.

New Faculty Request:

- Official verification of enrollment in a graduate nursing program (Evidence: copy of letter of acceptance from School of Nursing).
- Official verification (transcript) of course enrollment at beginning of each semester and at the end of each semester indicating course completion (Evidence: transcript for previous semester showing successful progression and transcript for current semester verifying continued enrollment).
- Official verification (transcript) of BSN degree (Evidence: transcript from university where degree was conferred).
- RN-MSN requires submission of official verification from University/College of BSN level course completion (Evidence: letter from School of Nursing Dean/Director).
- Verification of an unencumbered RN license to practice in Mississippi and another state, if appropriate (Evidence: current copy of license verification form from Board of Nursing).
- Verification of a satisfactory criminal history background check (Evidence: copy of criminal history background check document).
- Verification of date of employment (Evidence: copy of work schedule to include date of employment and class/clinical assignments).
- Meet all other state specific requirements.

Continuing Faculty Request:

- Official verification (transcript) of course enrollment at beginning of each semester and at the end of each semester indicating course completion (Evidence: transcript for previous semester showing successful progression and transcript for current semester verifying continued enrollment).
- Verification of an unencumbered RN license to practice in Mississippi and another state, if appropriate (Evidence: current copy of license verification form from Board of Nursing).
- Verification of date of employment for each semester (Evidence: copy of work schedule to include date of employment and class/clinical assignments).
- Meet all other state specific requirements.

Submit Request for Faculty Exception form with all supporting documents by mail, FAX (601.432.6225), or email (jmccrory@mississippi.edu) to:

Dr. Janette S. McCrory
Director of Nursing Education
MS Institutions of Higher Learning
3825 Ridgewood Road
Jackson, Mississippi 39211

Revised October 2015

Request for Faculty Exception

Name of School of Nursing: _____

Semester: Fall ____ Spring: ____ Summer: ____ Year: 20__

Current Number & FTE of Employed Faculty: #: _____ **FTE:** _____

Exception(s) Request:

Name, Credentials, & License #	University/College & Grad. Program Currently Enrolled*	Degree Start & Projected Completion Date	FTE & Program: ADN, BSN, MSN, DNP, PhD	Type of Request N=New or C=Continue	Degree Completed Date

*Specify type of graduate program: RN-MSN; MSN; DNP; PhD; Other (list type). RN-MSN requires submission of official verification from University/College of BSN level course completion.

I understand that as the administrator of the unit in nursing, I am responsible for having the required documentation for each approved new and continuing faculty exception available on site at all times. I acknowledge that approval by the Director of Nursing Education is required before employing the exception faculty each semester.

Signature of Nursing Dean/Director

Date

Revised October 2015

APPENDIX B
Request for Simulation Clinical Hours Form

**BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI**

Request for Simulation Clinical Hours from 26% up to 50% in substitution for traditional clinical hours in each individual clinical course requires prior approval and must be submitted to the IHL Director of Nursing Education at least three months prior to implementation date. A letter of decision will be sent following review of the request, documentation, and outcome of site visit. Submit Request for Simulation Clinical Hours and Focused Report through the secure site Deans and Directors Login

<http://www.mississippi.edu/nursing/login/>

Name of School of

Nursing: _____

Program

Type(s): _____

Proposed Implementation Date:

Accreditation Status:

- Mississippi Institutions of Higher Learning (IHL)
- Accreditation Commission for Education in Nursing (ACEN)
- Commission on Collegiate Nursing Education (CCNE)
- Commission on Accreditation of Nurse Anesthesia Educational Programs (COA)
- Southern Association of Colleges and Schools – Commission on Colleges (SACSCOC)
- Others/specify:

Clinical Courses Requesting Simulation Substitution	Total Clinical Hours	Traditional Clinical Hours	Simulation Clinical Hours

Signature of Nursing Dean/Director

Date

APPENDIX C
NCSBN Simulation Guidelines
**BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI**

Simulation Guidelines

Scope and Purpose

The following guidelines are meant to help: 1) boards of nursing (BONs) in evaluating the readiness of prelicensure nursing programs in using simulation as a substitute for traditional clinical experience; 2) nursing education programs in the establishment of evidence-based simulation programs for the undergraduate nursing curriculum.

Definitions

Simulation: A technique, not a technology, to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspect of the real world in a fully interactive manner (Gaba, 2004).

Traditional Clinical Experience: Practice in an inpatient, ambulatory care, or community setting where the student provides care to patients under the guidance of an instructor or preceptor.

Guidelines	Evidence	Resources
There is commitment on the part of the school for the simulation program.	<ul style="list-style-type: none"> •Letter of support from administrators stating the program has their backing and will be given the resources to sustain the program on a long-term basis. 	
	<ul style="list-style-type: none"> •Budgetary plan for sustainability and ongoing faculty training is in place. 	
	<ul style="list-style-type: none"> •Written short-term and long term objectives for integrating simulation into the undergraduate curriculum and evaluating the simulation program. 	
Program has appropriate facilities for conducting simulation	<ul style="list-style-type: none"> •A description of the physical space for conducting simulations including the lab, storage/staging areas and a place for debriefing. 	
Program has the educational and technological resources and equipment to meet the intended objectives	<ul style="list-style-type: none"> •Program has a plan that describes the simulation resources and equipment that will be used to achieve the objectives. 	See Scenario Resources Document
Lead faculty and sim lab personnel are qualified to conduct simulation.	<ul style="list-style-type: none"> •Submission of CVs and evidence of qualifications such as: simulation conferences attended, coursework on simulation instruction, certification in simulation instruction, training by a consultant or targeted work with an experienced mentor. 	<ul style="list-style-type: none"> •SIRC Courses •Simulation Preparation Programs •Webinars and presentations based on <i>INASCL Standards of Best Practice: Simulation</i> •CHSE Certification •Three-Step Program at Boise State •Textbooks: Jeffries (2007) <i>Simulations in Nursing Education: From Conceptualization to Evaluation</i>; Jeffries (2013) <i>Clinical Simulations: Advanced Concepts, Trends, and Possibilities</i>; and Palaganas, J.C., Maxworthy, J.C., Epps, C. A., Mancini, M.E. (2015). <i>Defining Excellence in Simulation Programs</i>
Faculty are prepared to lead simulations.		<ul style="list-style-type: none"> •See NCSBN Simulation Faculty Preparation Checklist
Program has an understanding of policies and processes that are a part of the simulation experience.	<ul style="list-style-type: none"> •Policies describing the following, include, but are not limited to: method of debriefing; plan for orienting faculty; qualifications of faculty and sim lab personnel; plan for training new faculty; evaluation methods. 	<ul style="list-style-type: none"> •Socratic Method of Debriefing •See NCSBN Program Preparation Checklist •INASCL Standards

Source: NCSBN Simulation Guidelines for Prelicensure Nursing Programs, October 2015, Volume 6/Issue 3 available from www.journalofnursingregulation

APPENDIX D
NCSBN Faculty Preparation Checklist

**BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI**

Faculty Preparation Checklist

- The simulation program is based on educational theories associated with simulation, such as experiential learning theory.
- The faculty members are prepared by following the INACSL *Standards of Best Practice: Simulation*.
- A tool for evaluating simulation-based learning experiences has been designed based on the INACSL *Standards of Best Practice: Simulation* evaluation methods.
- The program curriculum sets clear objectives and expected outcomes for each simulation-based experience, which are communicated to students prior to each simulation activity.
- The faculty members are prepared to create a learning environment that encourages active learning, repetitive practice, and reflection and to provide appropriate support throughout each activity.
- The faculty members are prepared to use facilitation methods congruent with simulation objectives/expected outcomes.
- The program utilizes a standardized method of debriefing observed simulation using a Socratic methodology.
- A rubric has been developed to evaluate the students' acquisition of KSAs (knowledge, skills, and attitudes) throughout the program.
- The program has established a method of sharing student performance with clinical faculty.
- The program collects and retains evaluation data regarding the effectiveness of the facilitator.
- The program collects and retains evaluation data regarding the effectiveness of the simulation experience.
- The program provides a means for faculty members to participate in simulation-related professional development, such as webinars, conferences, journals, clubs, readings, and certifications such as certified health care simulation educator (CHSE), and participation in NLN Sim Leaders/Sigma Theta Tau International (STTI) Nurse Faculty Leadership Academy (NFLA) with a focus on simulation.

Source: NCSBN Simulation Guidelines for Prelicensure Nursing Programs, October 2015, Volume 6/Issue 3 available from www.journalofnursingregulation

APPENDIX E
NCSBN Program Preparation Checklist

**BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI**

Program Preparation Checklist

- The school has created a framework that provides adequate resources (fiscal, human, and material) to support the simulation.
- Policies and procedures are in place to ensure quality-consistent simulation experiences for the students.
- The simulation program has an adequate number of dedicated trained simulation faculty members to support the learners in simulation-based experiences.
- The program has job descriptions for simulation faculty members/facilitators.
- The program has a plan for orienting simulation faculty members to their roles.
- The program uses a needs assessment to determine what scenarios to use.
- The simulation program provides subject-matter expertise for each scenario debriefing.
- The program and faculty members incorporate the INACSL *Standards of Best Practice: Simulation*.
- The program has appropriate designated physical space for education, storage, and debriefing.
- The faculty members have a process for identifying what equipment or relevant technologies are needed for meeting program objectives.
- The program has adequate equipment and supplies to create a realistic patient care environment.
- The faculty use evaluative feedback for quality improvement of the simulation program.
- The administration has a long-range plan for anticipated use of simulation in the forthcoming years.

Source: NCSBN Simulation Guidelines for Prelicensure Nursing Programs, October 2015, Volume 6/Issue 3 available from www.journalofnursingregulation

APPENDIX F

Calculation of NCLEX-RN® Pass Rates

Standard VI. 2.a. NCLEX Pass Rates: Annual NCLEX pass rates for all test takers (1st and repeat) will be at 80 percent or above over a three-year period.

For reporting purposes, submit a copy of the NCLEX-RN® Pass Rate with calculations for the calendar year to the Director of Nursing Education in January.

Calculation of NCLEX-RN® Pass Rates by Calendar Year

1. Use the December cumulative end of year report from the Board of Nursing (National Council Licensure Examination report) to calculate pass rates for the calendar year.
2. Use the following formula to calculate the pass rate for your school of nursing.
3. Submit a copy of the pass rate with calculations in January.

Formula: $b + c/a = \text{NCLEX Pass Rate}$

- a. ____ 1st writes during calendar year (CY) 20__
- b. ____ 1st writes in 20__ who passed during same CY 20__
- c. ____ 1st writes in 20__ who repeated (any # of times) and passed during same CY 20__

APPENDIX G

Calculation of Degree Completion Rates

Standard VI. 2.b. Degree Completion Rates: Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, program history, and best practices.

For reporting purposes, report the percentage of students within 150 percent of the stated program length (the length of the program adjusted to begin with the first required nursing course).

Calculation of Degree Completion Rate by End of Summer Term

1. Use the Exit Interview Form to track students' reasons for non-completion (APPENDIX H).
2. Count only students who did not graduate due to failure to meet program outcomes or dismissal based on program policies and procedures.
3. Do not count students who left for personal reasons other than failure to meet program outcomes or dismissal, such as change in major, relocation, health issues, etc.
4. Undergraduate/Graduate Full-time Plan of Study

Example for 4 Semester Program

Class Admitted	Graduate in 150% of Time	Class Admitted	Graduate in 150% of Time	Class Admitted	Graduate in 150% of Time
Spring 2012	Fall 2014	Summer 2011	Spring 2014	Fall 2011	Spring 2014
Spring 2013	Fall 2015	Summer 2012	Spring 2015	Fall 2012	Spring 2015
Spring 2014	Fall 2016	Summer 2013	Spring 2016	Fall 2013	Spring 2016

*4 semester program length @ 150% = 6 semesters

*Part-time plan of study would be calculated in the same manner @150% of total time length of the program.

*Graduate programs – each school tracks 150% of the greatest length within the cohort.

APPENDIX H

Exit Interview Form

MS Council of Deans and Directors of Schools of Nursing

Name (Optional) _____

Course Name and Number _____

Date _____

Exit Interview

1. Reason for Exit Interview: ___ Academic ___ Clinical ___ Other List _____

2. Are you eligible to be readmitted? ___ Yes ___ No

3. What are your future plans?

_____ Reapply to the nursing program

_____ Change career goals List _____

_____ Other _____

4. Check the factors listed below which played a role in your not continuing in the nursing program:

_____ Academic factors

_____ Reading comprehension

_____ Science background

_____ Writing skills

_____ Verbal skills

_____ Clinical performance

_____ Other List _____

_____ Study skills

_____ Instructor/student conflict

_____ Math skills

_____ Computer skills

_____ Test taking skills

_____ Personal factors

_____ Personal illness/crisis

_____ Time management

_____ Other List _____

_____ Family factors

_____ Family illness/crisis

_____ Child care

_____ Other List _____

_____ Work related factors

_____ Worked too many hours List # of hours/week _____

_____ Other List _____

_____ Financial factors

_____ No financial support

_____ Limited financial support

_____ Other List _____

5. Did you seek assistance from faculty/counselor for help with the above areas? Yes No
If no, was help available to you? Yes No

6. What could have been done to assist you in successfully completing this nursing program?

APPENDIX I

Board of Trustees of State Institutions of Higher Learning
Establishment of a Professional Nursing Program in the State of Mississippi

Nursing Program Application for
Stage I Declaration of Intent/Need

Legal name of
proposed school or program: _____

Address: _____

Legal name of
sponsoring institution
(University or College): _____

Address: _____

Name and title of chief
administrative officer
of sponsoring institution: _____

Agencies by which sponsoring
institution is accredited: _____

Request for consultation with Board staff
Preferred dates for initial conference: _____

Members of advisory committee and title and/or reason for representation on committee:

Professional sources consulted on feasibility of establishing program:

Required information is listed in the Mississippi Nursing Degree Programs Accreditation Standards Procedure Manual entitled "Criteria for Establishing a Program of Professional Nursing in the State of Mississippi" (<http://www.mississippi.edu>).

Attach additional pages as needed to provide support for Stage I Criteria.

APPENDIX J

Board of Trustees of State Institutions of Higher Learning
Establishment of a Professional Nursing Program in the State of MississippiNursing Program Application for
Stage II Progress Report

Following permission to establish a new nursing program and prior to filing an application for initial accreditation, the institution should seek consultation with the Director of Nursing Education and shall file a progress report not less than six months before the planned date of the opening of the unit in nursing. The Progress Report should address the program's status in meeting the requirements listed under Stage II in preparation for filing the application for Stage II (Qualify for Initial Accreditation).

APPENDIX K

Board of Trustees of State Institutions of Higher Learning
Establishment of a Professional Nursing Program in the State of Mississippi

Nursing Program Application for
Stage II Qualify for Initial Accreditation

Application Process-The Stage II application form should be completed and accompanied by a self study of supporting documentation addressing all Stage II criteria according to the established time frame.

Official name of sponsoring institution _____

Address _____

Phone Number _____

This institution declares its intention to establish and conduct a nursing program in accordance with the laws governing education in Mississippi and the standards, rules, and regulations established by the Board of Trustees.

We understand that following review of Stage II materials and a site visit, a recommendation will be made to the Board of Trustees regarding approval or disapproval of Stage II. A Board of Trustees' decision of approval will allow admission of students. A Board of Trustees' decision of disapproval will provide information on areas needing further development.

We also understand that, once initial accreditation is achieved, additional terms must be met within an established time frame in order to achieve full accreditation.

Signature of President/Chief Institutional Officer _____

Date _____

APPENDIX L

Board of Trustees of State Institutions of Higher Learning
Establishment of a Professional Nursing Program in the State of Mississippi

Stage II Clinical Agency Form

Directions-Complete a separate form for each clinical agency.

Include a legally binding agreement with appropriate signatures for each selected agency that

- Ensures faculty responsibility for students and their learning experiences;
- Contains termination clauses;
- Provides for periodic review and revision as necessary.

Name of facility _____

Address _____

Phone number _____

Contact person _____

Accreditation _____

Services/clinical areas available _____

Type of Unit	# of beds	Average daily census	# of students allowed on unit

APPENDIX M

Board of Trustees of State Institutions of Higher Learning
 Establishment of a Professional Nursing Program in the State of Mississippi

Nursing Program Application for
 Stage III Qualify for Full Accreditation

This application should provide evidence that all National Accreditation Standards and State Specific Requirements have been met.

A survey visit will be scheduled with the Director of Nursing Education and nursing representatives during the last semester of the first year or in conjunction with the initial national site visit. All prior recommendations must have been successfully addressed.

All materials and reports concerning the program will be reviewed and evaluated by the Accreditation Review and Evaluation Committee. All accreditation standards must be met in order to achieve the status of full accreditation.

The Director of Nursing Education will provide written feedback regarding accreditation status to the school.

This institution has met all state accreditation standards and requests the classification of full accreditation.

Official name and address of sponsoring institution and nursing program:

Signed: _____

Title: _____

Date: _____

Information listed in Stage III of the "Criteria for Establishing a School of Professional Nursing in the State of Mississippi" must accompany this application.

APPENDIX N

ACEN Procedure Manual

ACEN Accreditation Manual (2016). <http://www.acenursing.net/manuals/Policies.pdf>

APPENDIX O

CCNE Procedure Manual

Procedures for Accreditation of Baccalaureate and Graduate Degree Nursing Programs (2017).
<http://www.aacn.nche.edu/ccne-accreditation/Procedures.pdf>

APPENDIX P

COA Procedure Manual

Accreditation Policies and Procedure (2017). Council on Accreditation of Nurse Anesthesia Educational Programs. <http://home.coa.us.com/accreditation/Pages/Accreditation-Policies,-Procedures-and-Standards.aspx>

GLOSSARY

Competence - academic and clinical preparation of faculty, which includes degree specialization, specialty coursework, nationally recognized certifications, or other preparation sufficient to address the major concepts included in courses they will teach.

Degree Completion Rate - percentage of students who graduate within 150 percent of the stated program length over a three-year period.

Graduate Degree Program – masters' or clinical doctorate degree nursing program.

Non-Nurse Faculty – Non-nurses who are academically qualified and teach a nursing course/clinical such as a dietician, pharmacologist, or physiologist.

Nurse Administrator – as defined by the institution and state accreditation standards, and may include other program administrators, in addition to the Dean or Director.

Post-Graduate APRN Programs – A post-masters or post-doctoral certificate program that prepares APRNs in one or more of the following roles: certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), clinical nurse specialist (CNS), and certified nurse practitioner (CNP).

Simulation - An activity or event replicating clinical hours using scenarios, high fidelity manikins, medium fidelity manikins, standardized patients, role playing, skills stations, and computer-based critical thinking simulations (Hayden, Jefferies, Kardong-Edgren & Spector, 2009).

Traditional Clinical Experience – Practice in an inpatient, ambulatory care, or community setting where the student provides care to patients under the guidance of an instructor or preceptor (Alexander, et al., 2015).