

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 National League for Nursing Accrediting Commission, Inc. (NLNAC).

STANDARD I. Mission and Administrative Organization

1. National Standards

a. CCNE

Standard I: Program Quality: Mission and Governance

b. NLNAC

Standard 1: Mission and Administrative Capacity

2. State Specific Requirements

a. Minimum education requirements for administrators are:

Associate degree programs – Master's in nursing from a regionally accredited institution and a minimum of one year of clinical experience.

Baccalaureate and higher degree programs – Doctorate with one graduate degree in nursing from a regionally accredited institution and a minimum of one year of clinical experience. It is preferred that second level administrators (i.e. associate/assistant dean/director) hold a doctorate with one graduate degree in nursing.

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

c. All – satisfy a criminal history background check.

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. CCNE
 - Standard I: Program Quality: Mission and Governance
 - Standard II: Program Quality: Institutional Commitment and Resources
 - Standard III: Program Quality: Curriculum, Teaching-Learning Practices, and Individual Student Learning Outcomes
 - Standard IV: Program Effectiveness: Aggregate Student Performance and Faculty Accomplishments
 - b. NLNAC
 - Standard 1: Mission and Administrative Capacity
 - Standard 2: Faculty and Staff
 - Standard 4: Curriculum
2. State Specific Requirements
- a. All faculty in nursing programs must have a master's degree with a major in nursing and a minimum of one year of clinical experience as a registered nurse.
 - b. The majority of faculty in graduate nursing programs must have earned doctorates in nursing or a related field from regionally accredited institutions.
 - c. All nursing faculty (full-time, part-time, and adjunct) must hold an unencumbered license to practice in Mississippi.
 - d. All nursing faculty (full-time, part-time and adjunct) must satisfy a criminal history background check.
 - e. 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 of experience.
 - f. All faculty must implement an annual professional development plan.

Required Documentation for Faculty

- 1. Transcripts (degrees; certifications)
- 2. Curriculum Vitae
- 3. R.N. License & Advanced Practice RN License, if appropriate
- 4. Criminal History Background Check or signed affidavit
- 5. Annual Professional Development Plan
- 6. Validation of 10 contact hours by academic year
- 7. Faculty Exception supporting documentation

Faculty Exception to Educational Requirement (2.a; 2.b):

Exceptions may be granted by the IHL Director of Nursing Education within the following parameters (APPENDIX A). Any deviation from the exception requirements must be approved by the IHL Director of Nursing Education.

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 acceptance letter from the School of Nursing where the faculty is enrolled.

Request for Faculty Exception must be submitted to the IHL Director of Nursing Education two weeks prior to the beginning of each semester (Fall, Spring, & Summer), or at the time of hire 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 (2.c; 2.d; 2f.).

Licensure (2.c)

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 Education, Experience & Licensure (2.c; 2.d; 2.e)

The school of nursing will maintain documentation validating preceptors' education, clinical experience, and licensure. Types of documentation may include a letter from the clinical agency or individual forms signed by preceptor and clinical agency.

Annual Professional Development Plan (2.f)

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.

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. CCNE

Standard I: Program Quality: Mission and Governance

b. NLNAC

Standard 3: Students

2. State Specific Requirements

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

1. An ACT composite score of 18 and a 2.0 grade point average.
2. Students with less than the required ACT composite score must have completed a minimum of 12 semester hours, including Anatomy and Physiology, with a 2.5 grade point average before being admitted. They must have made at least a grade of “C” in Anatomy and Physiology courses.
3. Students who have previously earned a baccalaureate or higher degree may enter without an ACT by completing all the course prerequisites to the nursing major with a grade of “C” or better and having an overall grade point average of 2.5.

b. Minimum admission criteria for state-supported bachelor of science 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 and a 2.0 grade point average.
2. Students with less than the required ACT composite score must complete all the course prerequisites to the nursing major with at least a grade of “C” and have an overall grade point average of 3.0.
3. R.N. students and students enrolling for a second baccalaureate degree may enter without an ACT by completing all the course prerequisites to the nursing major with at least a grade of “C” and having an overall grade point average of 2.5.
4. Baccalaureate nursing programs in independent institutions may establish admission criteria which support the goals and aims of individual independent institutions.

c. Each school is permitted an allowance of 10 percent of the previous fall’s nursing program admissions for high risk students who do not meet the criteria.

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.

Required Documentation for Students

1. Official ACT scores

2. Transcripts – validating GPA

STANDARD IV. Curriculum

1. National Standards
 - a. CCNE
Standard III: Program Quality: Curriculum, Teaching-Learning Practices, and Individual Student Learning Outcomes
 - b. NLNAC
Standard 4: Curriculum
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).

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 roster and faculty.

STANDARD V. Resources

1. National Standards
 - a. CCNE
Standard II: Program Quality: Institutional Commitment and Resources
 - b. NLNAC
Standard 5: Resources
2. State Specific Requirements
None

STANDARD VI. Outcomes

1. National Standards
 - a. CCNE
Standard IV: Program Effectiveness: Aggregate Student Performance and Faculty Accomplishments
 - b. NLNAC
Standard 6: 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, and best practices.
 - c. Certification Pass Rates: Annual certification exam pass rates for all test takers (1st and repeat) will be at 80 percent 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 IHL Director of Nursing Education in January, following receipt of the December cumulative report from the Board of Nursing (APPENDIX B).
3. Each school of nursing will enter the program benchmark and their annual degree completion rate in the annual report submitted by October 15 (APPENDIX C; APPENDIX D).

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 below.**

Standard I. Mission and Administrative Organization

2. Nurse Administrator

- a. Minimum education requirements – 30 days
- b. Unencumbered License to practice in Mississippi – Immediately
- c. Criminal history background check – 30 days

Standard II. Faculty and Staff

2. Faculty

- a. Education requirements –30 days
One year clinical experience as a registered nurse –Immediately
- b. Majority of faculty in graduate nursing programs must have earned doctorates in nursing or a related field –30 days
- c. Unencumbered license to practice in Mississippi – Immediately
- d. Criminal history background check – 30 days
- e. Preceptors academically/experientially prepared – Immediately
One year clinical experience as a registered nurse – Immediately

- f. Annual professional development plan – 30 days

Standard III. Students

- 2. a. Admission Criteria for associate degree nursing programs – 120 days (4 months)
- 2. b. Admission Criteria for state supported bachelor of science nursing programs – 120 days (4 months)
- 2. c. High Risk Admissions – 120 days (4 months)

Standard IV. Curriculum

- 2. a. Student/Faculty Ratios
 - 1. 15 to 1 for total enrollment – 30 days
 - 2. 10 to 1 for clinical lab that requires direct supervision – 30 days
 - 3. 15 to 1 for those courses that do not require direct supervision – 30 days

Standard VI. Outcomes

- 2. a. NCLEX-RN® Pass Rates – annually
- 2. b. Degree Completion Rates – annually
- 2. c. Certification Pass Rates – annually

Outcomes

If the outcome(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 April. If the outcome(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 April. If the outcome(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 IHL 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 five (5) copies of the self-study report to the IHL 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 IHL 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 IHL Director of Nursing Education.**

The IHL 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 IHL 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 NLNAC and CCNE visits.
- g. Upon receipt of the site visit report from the PERT, the IHL 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 IHL Director of Nursing Education, the nurse administrator's response will be appended to the report. The PERT will review the appended report and provide further recommendations to the IHL Director of Nursing Education.
- h. The IHL Director of Nursing Education will send 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 IHL Director of Nursing Education will hold the site visit report and recommendation from the AREC pending the final report from the national accrediting body.
- j. The IHL 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 IHL Director of Education upon receipt of letter of confirmation of national site visit dates.
- b. Send five (5) copies of the self-study report, catalog, and other material to the IHL Director of Nursing Education at the same time the information is sent to the national nursing accrediting body.
- 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. 5).
 - iii. Official student records to verify that standards have been met (sufficient quantity from each program will be determined by the PERT). Student files to include: GPA and ACT, or GPA and transcripts verifying eligibility.
 - 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 IHL 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 IHL 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 IHL 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.
- e. Collect and edit the site visit report to assure completeness and clarity and send copy, signed by all members, to the IHL Director of Nursing Education within one week after the site visit.
- f. Review the state accreditation site visit report and recommendations for each school of nursing with the AREC.
- g. Maintain a copy of the complete site visit report to include PERT signatures until the accreditation process is complete.

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 IHL Director of Nursing Education.
- c. The AREC will provide a recommendation to the IHL Director of Nursing Education regarding the accreditation status of the nursing program.
- d. 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 (CCNE; NLNAC). Substantive change requests must include correspondences from NLNAC or CCNE and the Southern Association of Colleges and Schools – Commission on Colleges (SACS-COC). Additionally, the following information will be sent to the IHL 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 IHL 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 IHL 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	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

	<p>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 IHL Director of Nursing Education

The IHL 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 IHL 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 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 April.

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 IHL 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 IHL Director of Nursing Education (APPENDIX E). Upon receipt of the institution's completed Stage I application, the Director of Nursing Education carries out the following:
 - 1.2.1 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.

- 1.2.2 Facilitates the process for public comment.
- 1.2.3 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.
- 1.2.4 The IHL Board of Trustees issues the decision to either approve or disapprove the OASA recommendation for Stage I.
- 1.2.5 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:

- 1.3 Approval from the institution's governing/coordinating board.
- 1.4 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 involvement in the planning process.
- 1.5 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.
- 1.6 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.
- 1.7 Current institutional catalog or electronic access.
- 1.8 Philosophy/mission and goals of the institution.
- 1.9 Vision and purpose for establishing a new nursing program.
- 1.10 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.
- 1.11 Detailed description of educational, financial (to include budget), operational, management, and physical resources to offer the proposed nursing education program.
- 1.12 Sources for potential students and identification of any nursing programs within a fifty-mile radius.
- 1.13 Data on potential qualified faculty.

- 1.14 Availability of supporting academic courses consistent with institutional accreditation requirements and nursing program type.
- 1.15 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 consult 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 F)
- b. Stage II application and self-study report (APPENDIX G)

Criteria

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

- 2.1 Appointment of a qualified nursing education program administrator 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. Two or more faculty members employed must have teaching experience in a nursing education program. One or more faculty members 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. Two or more faculty members employed must have teaching experience in a nursing education program. One or more faculty members 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) and meet all requirements of the affiliated clinical agencies.

Must satisfy a criminal history background check.

The majority of faculty teaching in a masters or doctoral degree program must hold a doctorate in nursing or a related field.

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 IHL 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) and meet all requirements of the affiliated clinical agencies.

Must satisfy a criminal history background check.

The majority of faculty teaching in a masters or doctoral degree program must hold a doctorate in nursing or a related field.

2.3 Evidence that the nursing educational unit's administrator and faculty have developed the following:

2.3.1 Philosophy, mission, goals, and 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 offered in the first year of the nursing program curriculum;

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 Quality support services including registrar, admissions, testing, counseling, student personnel services, safety and maintenance, printing and duplicating, secretarial and clerical, etc.;
- 2.4.2 The health and welfare of students;
- 2.4.3 Sufficient 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 H)
 - 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 nursing 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. 22-24).

- 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 to the Director of Nursing Education;
 - 2.5.3 The PERT report will be provided to the institution;
 - 2.5.4 The institution may submit a written response to the PERT report to the Director of Nursing Education.
- 2.6 The Director of Nursing Education shall submit the PERT report, Stage II application and self-study materials, and any written response from the institution to the Accreditation Review Panel (ARP) for consideration.
 - 2.6.1 The Accreditation Review Panel shall consider the information provided and make a recommendation of either approval or disapproval for Stage II Initial Accreditation to the Director of Nursing Education.
 - 2.6.2 The Director of Nursing Education and Office of Academic and Student Affairs (OASA) shall review the recommendation of the ARP 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 I):

- 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 submit the PERT site visit report, the NCLEX-RN® pass rates of the first class, graduation completion rates, information on graduate employment, and national nursing accreditation site visit report to the Accreditation Review Panel (ARP) for consideration.
- 3.4 The ARP shall make a recommendation of either approval or disapproval for Stage III Full Accreditation to the Director of Nursing Education.
- 3.5 The Director of Nursing Education and OASA shall review the recommendation of the ARP and prepare a recommendation by OASA to submit to the IHL Board of Trustees for a final decision.
- 3.6 Written notification of the IHL Board of Trustees' decision regarding full accreditation shall be sent to the institution by the Director of Nursing Education.
- 3.7 If full accreditation is denied or deferred, recommendations relative to the areas needing further development will accompany the notification and the institution may reapply. The program may remain on initial accreditation at this time.
- 3.8 The program may reapply for full accreditation with the next graduating class.
- 3.9 If full accreditation is denied following reapplication based on data from the next graduating class, specific conditions for continuation with initial accreditation will apply.

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

I. IHL 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 consultation 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 IHL Director of Nursing Education;
 - b. Electronic copies of the self-study and required materials sent to the IHL Director of Nursing Education via email or flash drive for distribution.
6. Stage III information requirement -- submits application and required information on NCLEX-RN® and graduate employment to the IHL Director of Nursing Education for distribution.
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 IHL Director of Nursing Education on all of the above.

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 three members, with one appointed as the team leader.

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 Accreditation Review Panel and 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 to the IHL Director of Nursing Education.

IV. Accreditation Review Panel

The Accreditation Review Panel (ARP) is a broad based group from the nursing community as a whole that serves to consider new nursing program applications and to make recommendations for approval or disapproval to the IHL Director of Nursing Education and the Office of Academic and Student Affairs for review in preparing a recommendation by OASA to the IHL Board of Trustees.

1. Appointment -- following a call for nominations, Accreditation Review Panel members will be appointed by the OASA.
2. Composition -- the following positions are appointed to represent varied perspectives across the state's nursing community.
 - MS Council of Deans and Directors of Schools of Nursing (MCDDSN)
 - Vice-Chair
 - Member-at-Large
 - Representatives from the following:

MS Hospital Association	MS Board of Nursing
MS Office of Nursing Workforce	Nurse Clinician
MS Professional Nursing Organization	
3. Terms -- members serve staggered, rotating terms (to be determined).
4. Duties of the Accreditation Review Panel related to new nursing program applications include the following:
 - a. Assure that the process of peer evaluation has been carried out according to the established procedure;
 - b. Evaluate findings from the site visit report compared to the self-study and catalog;
 - c. Consider findings from public comments submitted by the IHL Director of Nursing Education;
 - d. Make recommendation for accreditation status (Stage II or III) to the IHL Director of Nursing Education.

V. 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**

APPENDIX A
Faculty Exception Form

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

Request for Faculty Exception

The Request for Faculty Exception requires prior approval and should be submitted to the Director of Nursing Education at least two weeks before the beginning of each semester, or at the time of hire within a given semester, for **new** and **continuing** faculty exception(s) and faculty who have completed their degree the previous semester. **New requests must include supporting documentation.**

FAX (601.432.6225), email (jmccrory@mississippi.edu) or mail form Request for Faculty Exception form to Janette S. McCrory, Director of Nursing Education, MS Institutions of Higher Learning, 3825 Ridgewood Road, Jackson, Mississippi, 39211.

Name of School of Nursing: _____

Semester: Fall ____ Spring: ____ Summer: ____ Year: 20__ **Total Number of Faculty FTE's:** _____

Name, Credentials, & License #	University/College & Grad. Program Currently Enrolled*	Degree Start & Completion Date (Projected)	% of FTE & Program (ADN, BSN, MSN, DNP, PhD)	Type of Request N=New 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 administrator of the unit in nursing, I am responsible for having the following information for each faculty exception available on site at all times:

- Official verification of enrollment in a graduate nursing program for new faculty exceptions.
- Official verification of course enrollment at beginning of each semester and an official college transcript at the end of each semester indicating course completion for continuing and completed faculty exceptions.
- Verification of an unencumbered RN license to practice in Mississippi and another state, if appropriate.
- Verification of a satisfactory criminal history background check.
- Meet all other state specific requirements.

Signature of Dean/Director: _____ **Date:** _____

APPENDIX B

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 IHL 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 C

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 D).
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 2007	Fall 2009	Summer 2007	Spring 2010	Fall 2007	Spring 2010
Spring 2008	Fall 2010	Summer 2008	Spring 2011	Fall 2008	Spring 2011
Spring 2009	Fall 2011	Summer 2009	Spring 2012	Fall 2009	Spring 2012

*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.

*Reporting of degree completion rates is not required for doctoral degree nursing program.

APPENDIX D

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

_____ Study skills

_____ Science background

_____ Instructor/student conflict

_____ Writing skills

_____ Math skills

_____ Verbal skills

_____ Computer skills

_____ Clinical performance

_____ Test taking skills

_____ Other List _____

_____ 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 E

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 F

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 G

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 H

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 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 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 J

CCNE Procedure Manual

Procedures for Accreditation of Baccalaureate and Graduate Degree Nursing Programs (2009).

<http://www.aacn.nche.edu/accreditation/pdf/Procedures.pdf>

APPENDIX K

NLNAC Procedure Manual

NLNAC Accreditation Manual (2008). <http://www.nlnac.org/manuals/Manual2008.htm>

GLOSSARY

AREC - Accreditation Review and Evaluation Committee.

ARP – Accreditation Review Panel.

COI – Community of Interest.

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 a defined period of time.

Graduate – masters’ degree nursing program.

High risk students - students who do not meet one or more program specific admission requirements.

MCDDSN - Mississippi Council of Deans and Directors of Schools of Nursing.

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

PERT - Peer Evaluation Review Team.

PIP- Performance Improvement Plan.