

CHAPTER TWO LICENSURE: RN, LPN, AND LPTN

SECTION I QUALIFICATIONS

- A. Good moral character.
- B. Completion of an approved high school course of study or the equivalent as determined by the appropriate educational agency.
- C. Completion of the required approved nursing education program. (LPN and LPTN requirements may be waived if applicant is determined to be otherwise qualified.)
- D. The Arkansas State Board of Nursing (ASBN) may refuse to admit to the examination any candidate and refuse to issue a license, certificate, or registration to any applicant if the license, practice privilege, certificate, or registration of such person has been revoked or suspended or placed on probation and not reinstated by the jurisdiction which took such action.
- E. Effective January 1, 2000, no person shall be eligible to receive or hold a license issued by the Board if that person has pleaded guilty or nolo contendere to, or been found guilty by any court in the State of Arkansas, or of any similar offense by a court in another state, or of any similar offense by a federal court of any offense listed in ACA §17-87-312.

SECTION II EXAMINATION

A. ELIGIBILITY

The applicant shall meet the licensure requirements of the Board.

B. APPLICATION

1. Applications for examination shall be completed, certified, and filed with the Board prior to the examination.
2. Examination applications shall be notarized. The application shall not be acceptable if the director or chairman of an educational program has certified the applicant prior to date of completion.
3. Applicants for licensure by examination shall not be deemed eligible to take the licensure examination until such time that the results of the state and federal criminal background checks have been received.

C. FEE

1. The examination fee shall accompany the application.
2. The examination fee (first time or retake) is not refundable.
3. The fees for the state and federal criminal background checks are the responsibility of the applicant and shall be submitted to the Arkansas State Police with the application for same.
4. The fees are determined by the Arkansas State Police and the FBI and are not refundable.

D. PASSING SCORE

The passing score on the licensure examination shall be determined by the Board.

E. FAILING SCORE AND ELIGIBILITY TO RETAKE THE EXAMINATION

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1. Any applicant whose score falls below the passing score shall fail the examination.
2. Persons failing the examination will be responsible for preparing to retake the examination.
3. The frequency and number of retests by unsuccessful candidates shall be determined by the Board.
4. Applicants retaking the examination shall have state and federal criminal background checks within the past twelve months on file with the Board.

F. RESULTS

1. Examination results shall not be released until a copy of the applicant's transcript is received from the school.
2. Examination results shall be mailed to all applicants and to their respective schools.

G. INTERNATIONALLY EDUCATED NURSES

1. The applicant must present evidence of:
 - a. Graduation from an approved or accredited school of nursing. The Board may waive this requirement for LPN and LPTN applicants provided they are otherwise qualified.
 - b. Licensure or proof of eligibility for licensure in the country of graduation.
 - c. Theory and practice in medical, surgical, pediatric, obstetric, and psychiatric nursing which is substantially similar in length and content to that in equivalent Arkansas Board approved nursing programs at the time of application as verified by a credentials review agency.
 - d. State and federal criminal background checks within the past twelve months on file with the Board.
 - e. Credentials review that includes verification of the candidate's education, training, experience, and licensure with respect to the statutory and regulatory requirements for the nursing profession, as well as oral and written competence in English.
2. LPN applicants must have evidence of all the foregoing with the exception of psychiatric nursing, in which theory only is required.
3. Transcripts and certificates which are not in English must be accompanied by a certified translation.
4. Applicants shall be required to take such licensure examinations as required of Arkansas Board approved nursing programs.

H. EQUIVALENCIES

1. LPN to LPTN: Candidates holding LPN licensure may, with the approval of the Board's representative, take the requisite psychiatric nursing courses in a Board approved LPTN program to meet the Board's requirements for LPTN licensure by examination at the time of application.
2. LPTN to LPN: Candidates holding LPTN licensure who completed Arkansas Board approved LPTN programs after March 18, 1980, may be admitted to the LPN licensure examination provided they are otherwise qualified.
3. RN examination failures: Graduates of Board approved RN programs, upon submission of an official transcript directly from the school, and a copy of their RN examination failure results, may be admitted to the LPN licensure examination provided they are otherwise qualified.
4. Portion of RN Program: Candidates who have completed equivalent courses in a state approved program of nursing may be admitted to the LPN licensure examination provided they are otherwise qualified. Evidence must be provided verifying successful completion of classroom instruction and clinical practice substantially similar to the minimum requirements for practical nursing programs.

SECTION III **INTERSTATE NURSE LICENSURE COMPACT**

A. DEFINITIONS OF TERMS IN THE COMPACT

For the purpose of the Compact:

1. "Board" means party state's regulatory body responsible for issuing nurse licenses.
2. "Information system" means the coordinated licensure information system.
3. "Primary state of residence" means the state of a person's declared fixed permanent and principal home for legal purposes; domicile.
4. "Public" means any individual or entity other than designated staff or representatives of party state Boards or the National Council of State Boards of Nursing, Inc.
5. "Alternative program" means a voluntary, non-disciplinary monitoring program approved by a nurse

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- licensing board.
6. "Coordinated Licensure Information System" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of state nurse licensing boards.
 7. "Home state" means the party state which is the nurse's primary state of residence.
 8. "Multi-state licensure privilege" means current, official authority from a remote state permitting the practice of nursing as either a registered nurse or a licensed practical/vocational nurse in such party state.
 9. "Nurse" means a registered nurse or licensed practical nurse, as those terms are defined by each party's state practice laws.
 10. "Party state" means any state that has adopted this Compact.
 11. "Remote state" means a party state, other than the home state,
 - (a) where the patient is located at the time nursing care is provided, or,
 - (b) in the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located.
 12. "Current significant investigative information" means:
 - (a) investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
 - (b) investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.
 13. Licensed Practical Nurse or Licensed Vocational Nurse means a person who has been licensed as an LPN or LVN by a party state licensing board.

Other terms used in these rules are to be defined as in the Interstate Compact.

B. ISSUANCE OF A LICENSE BY A COMPACT PARTY STATE

For the purpose of this Compact:

1. A nurse applying for a license in a home party state shall produce evidence of the nurses' primary state of residence. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include but is not limited to:
 - a. Driver's license with a home address;
 - b. Voter registration card displaying a home address; or
 - c. Federal income tax return declaring the primary state of residence.
2. A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed thirty (30) days.
3. The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the thirty (30) day period in section B.2. shall be stayed until resolution of the pending investigation.
4. The former home state license shall no longer be valid upon the issuance of a new home state license.
5. If a decision is made by the new home state denying licensure, the new home state shall notify the former home state within ten (10) business days and the former home state may take action in accordance with that state's laws and rules.
6. Party states shall recognize and honor either the LPN or LVN title used for Licensed Practical Nurses and Licensed Vocational Nurses, respectively.
7. No applicant for initial licensure will be issued a compact license granting a multi-state privilege to practice unless the applicant first obtains a passing score on the applicable NCLEX examination or any predecessor examination used for licensure.

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C. LIMITATIONS ON MULTISTATE LICENSURE PRIVILEGE

Home state Boards shall include in all licensure disciplinary orders and/or agreements that limit practice and/or require monitoring the requirement that the licensee subject to said order and/or agreement will agree to limit the licensee's practice to the home state during the pendency of the disciplinary order and/or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from both the home state and such other party state Boards.

D. INFORMATION SYSTEM

1. Levels of access
 - a. The public shall have access to nurse licensure information limited to:
 - (1) The nurse's name;
 - (2) Jurisdiction(s) of licensure;
 - (3) License expiration date(s);
 - (4) Licensure classification(s) and status(es);
 - (5) Public emergency and final disciplinary actions, as defined by contributing state authority; and
 - (6) The status of multistate licensure privileges.
 - b. Non-party state Boards shall have access to all Information System data except current significant investigative information and other information as limited by contributing party state authority.
 - c. Party state Boards shall have access to all Information System data contributed by the party states and other information as limited by contributing non-party state authority.
2. The licensee may request in writing to the home state Board to review the data relating to the licensee in the Information System. In the event a licensee asserts that any data relating to him or her is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The Board shall verify and within ten (10) business days correct inaccurate data to the Information System.
3. The Board shall report to the Information System within ten (10) business days:
 - a. Disciplinary action, agreement, or order requiring participation in alternative programs or which limit practice or require monitoring (except agreements and orders relating to participation in alternative programs required to remain nonpublic by contributing state authority);
 - b. Dismissal of complaint, and
 - c. Changes in status of disciplinary action, or licensure encumbrance.
4. Current significant investigative information shall be deleted from the Information System within ten (10) business days upon report of disciplinary action, agreement, or order requiring participation in alternative programs or agreements which limit practice or require monitoring or dismissal of a complaint.
5. Changes to licensure information in the Information System shall be completed within ten (10) business days upon notification by a Board.

SECTION IV ENDORSEMENT

A. ELIGIBILITY

1. An applicant for licensure by endorsement must meet the requirements of the Board at the time of graduation.
2. An applicant licensed in another state after January 1950 must have taken a state board licensing examination and achieved a passing score.
3. LPTN applicants will be accepted from California and Kansas only.
4. Internationally educated nurses practicing in other states may appeal to the Board for licensure if not otherwise qualified.

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B. EQUIVALENCIES

1. RN examination failures: Graduates of Board approved RN programs, holding LPN licensure by examination in other jurisdictions, may be endorsed provided they are otherwise qualified.
2. Canadian Registered Nurses licensed by NLN State Board Test Pool Examination in the following provinces during the years indicated: Alberta, 1952-1970; British Columbia, 1949-1970; Manitoba, 1955-1970; Newfoundland, 1961-1970; Nova Scotia, 1955-1970; Prince Edward Island, 1956-1970; Quebec (English language), 1959-1970; and Saskatchewan, 1956-1970. These applicants may be endorsed provided they are otherwise qualified.
3. Portion of RN Program: Candidates who have completed equivalent courses in a state approved program of nursing may be endorsed provided they are otherwise qualified. Evidence must be provided verifying successful completion of classroom instruction and clinical practice substantially similar to the minimum requirements for practical nursing programs.

C. APPLICATION

1. Applications must be completed, certified, , and filed with the Board.
2. Endorsement certification will be accepted from the state of original licensure only.
3. Applicants for licensure by endorsement shall not be issued a permanent license to practice until such time that the results of the state and federal criminal background checks have been received.

D. FEE

1. The endorsement fee must accompany the application.
2. The fees for the state and federal criminal background checks are the responsibility of the applicant and shall be submitted to the Arkansas State Police with the application for same.
3. The fees are not refundable.

SECTION V **CRIMINAL BACKGROUND CHECK**

- A. No application for issuance of an initial license will be considered without state and federal criminal background checks by the Arkansas State Police and the Federal Bureau of Investigation.
- B. Each applicant shall sign a release of information on the criminal background check application and licensure applications and shall be solely responsible for the payment of any fees associated with the state and federal criminal background checks to the Arkansas State Police.
- C. Upon completion of the state and federal criminal background checks, the Identification Bureau of the Arkansas State Police shall forward all information obtained concerning the applicant in the commission of any offense listed in ACA §17-87-312.
- D. The state and federal criminal background checks conducted by the Arkansas State Police and the Federal Bureau of Investigation shall have been completed no earlier than twelve (12) months prior to the application for an initial license issued by the ASBN and at any other time thereafter that the Board deems necessary.
- E. The ASBN shall not issue a permanent license until the state and federal criminal background checks conducted by the Arkansas State Police and the Federal Bureau of Investigation have been completed.
- F. A request to seek waiver of the denial of licensure pursuant to the provisions of ACA §17-87-312 may be made to the ASBN by:
 1. The affected applicant for licensure; or
 2. The person holding a license subject to revocation.

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- G. The request for a waiver shall be made in writing to the Executive Director or the designee within thirty (30) calendar days after notification of denial of a license. The request for waiver shall include, but not be limited to the following:
 - 1. Certified copy of court records indicating grounds for conviction; and
 - 2. Any other pertinent documentation to indicate surrounding circumstances.
- H. If an individual notifies ASBN in writing that he or she desires a hearing regarding their request for a waiver, the ASBN will schedule the individual for a hearing pursuant to the Arkansas Administrative Procedures Act.
- I. In compliance with Act 1393 of 2003, whenever a criminal background check is performed on a person under the provisions of the criminal background check requirement contained in the Arkansas Code for licensure, the person may be disqualified for licensure if it is determined that the person committed a violation of any sexual offense formerly proscribed under ACA §§5-14-101 through 5-14-127 that is substantially equivalent to any sexual offense presently listed in Arkansas Code §§5-14-101 through 5-14-127 and is an offense screened for in a criminal background check.

SECTION VI **TEMPORARY PERMITS**

A. ENDORSEMENT AND EXAM APPLICANTS

- 1. ASBN shall be authorized to issue a temporary permit for a period not exceeding six months. This temporary permit shall be issued only to those applicants who meet all other qualifications for licensure by the ASBN.
- 2. The temporary permit shall immediately become invalid upon receipt of information obtained from the state or federal criminal background check indicating any offense listed in ACA §17-87-312 or upon notification to the applicant or ASBN of results on the first licensure examination he or she is eligible to take after the permit is issued.
- 3. Falsification of the applicant's criminal record history shall be grounds for disciplinary action by the Board.

B. FEES AND APPLICATIONS

- 1. The temporary permit fee shall be submitted with the application.
- 2. The fee is not refundable.

SECTION VII **CONTINUING EDUCATION**

Each person holding an active license or applying for reinstatement of a license under the provisions of the *Nurse Practice Act* shall be required to complete certain continuing education requirements prior to licensure renewal or reinstatement.

A. DECLARATION OF COMPLIANCE

Each nurse shall declare his or her compliance with the requirements for continuing education at the time of license renewal or reinstatement. The declaration shall be made on the form supplied by the Board.

B. AUDITS OF LICENSEES

- 1. The Board shall perform random audits of licensees for compliance with the continuing education requirement.
- 2. If audited, the licensee shall prove participation in the required continuing education during the 24-months immediately preceding the renewal date by presenting photocopies of original certificates of completion to the Board.
- 3. The licensee shall provide evidence of continuing education requirements within thirty (30) calendar days from the mailing date of the audit notification letter sent from the Board to the last known address of the licensee.

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C. CONTINUING EDUCATION REQUIREMENT STANDARDS

1. Standards for Renewal of Active Licensure Status. Licensees who hold an active nursing license shall document completion of one of the following during each renewal period:
 - a. Fifteen (15) practice focused contact hours from a nationally recognized or state continuing education approval body recognized by the ASBN; or
 - b. Certification or re-certification during the renewal period by a national certifying body recognized by the ASBN; or
 - c. An academic course in nursing or related field; and
 - d. Provide other evidence as requested by the Board.
2. Standards for Nurses on Inactive Status. Nurses who have their license placed on inactive status have no requirements for continuing education.
3. Standards for Reinstatement of Active Licensure Status
 - a. Nurses reinstating a nursing license to active status after five years or less shall document completion of the following within the past two (2) years:
 - i) Twenty (20) practice focused contact hours within the past two years from a nationally recognized or state continuing education approval body recognized by the ASBN, or
 - ii) Certification or re-certification by a national certifying body recognized by the ASBN; or
 - iii) An academic course in nursing or related field; and/or
 - iv) Provide other evidence as requested by the Board.
 - b. Nurses reinstating a nursing license to active status after greater than five years shall document completion of the following within the past two (2) years:
 - i) Twenty (20) practice focused contact hours within the past two years from a nationally recognized or state continuing education approval body recognized by the Arkansas State Board of Nursing, or
 - ii) Certification or re-certification by a national certifying body recognized by the ASBN; or
 - iii) An academic course in nursing or related field; and
 - iv) A refresher course approved by the ASBN; or
 - v) An employer competency orientation program, and
 - vi) Provide other evidence as requested by the Board.
4. The Board may issue a temporary permit to a nurse during the time enrolled in a Board approved nursing refresher course or an employer competency orientation program upon submission of an application, fees, and verification of enrollment in such program.
5. Continuing education hours beyond the required contact hours shall not be “carried over” to the next renewal period.

D. RESPONSIBILITIES OF THE INDIVIDUAL LICENSEE

1. It shall be the responsibility of each licensee to select and participate in those continuing activities that will meet the criteria for acceptable continuing education as specified in ACA §17-87-207 and these rules.
2. It shall be the licensee’s responsibility to maintain records of continuing education as well as documented proof such as original certificates of attendance, contact hour certificates, academic transcripts or grade slips and to submit copies of this evidence when requested by the Board.
3. Records shall be maintained by the licensee for a minimum of two consecutive renewal periods or four years.

E. RECOGNITION OF PROVIDERS

1. The Board shall identify organizations, agencies, and groups that shall be recognized as valid approval bodies/providers of nursing continuing education. The recognition may include providers approved by national organizations and state agencies with comparable standards.
2. The Board shall work with professional organizations, approved nursing schools, and other providers of continuing educational programs to ensure that continuing education activities are available to nurses in Arkansas.

F. ACTIVITIES ACCEPTABLE FOR CONTINUING EDUCATION

1. Activities presented by recognized providers which may be acceptable include: national/ regional educational conferences, classroom instruction, individualized instruction (home study/programmed instruction), academic courses, and institutional based instruction; and

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2. The content shall be relevant to nursing practice and provide for professional growth of the licensee.
3. If participation is in an academic course or other program in which grades are given, a grade equivalent to "C" or better shall be required, or "pass" on a pass/fail grading system. An academic course may also be taken as "audit", provided that class attendance is verified by the instructor.

G. ACTIVITIES WHICH ARE NOT ACCEPTABLE AS CONTINUING EDUCATION

1. In-service programs. Activities intended to assist the nurse to acquire, maintain, and/or increase the competence in fulfilling the assigned responsibilities specific to the expectations of the employer.
2. Refresher courses. Programs designed to update basic general knowledge and clinical practice, which consist of a didactic and clinical component to ensure entry-level competencies into nursing practice.
3. Orientation programs. A program by which new staff are introduced to the philosophy, goals, policies, procedures, role expectations, physical facilities, and special services in a specific work setting. Orientation is provided at the time of employment and at other times when changes in roles and responsibilities occur in a specific work setting.
4. Courses designed for lay people.

H. INDIVIDUAL REVIEW OF A CONTINUING EDUCATION ACTIVITY PROVIDED BY A NON-RECOGNIZED AGENCY/ORGANIZATION

1. A licensee may request an individual review by:
 - a. Submitting an "Application for Individual Review"; and
 - b. Paying a fee.
2. Approval of a non-recognized continuing educational activity shall be limited to the specific event under consideration.

I. FAILURE TO COMPLY

1. Any licensee who fails to complete continuing education or who falsely certifies completion of continuing education shall be subject to disciplinary action, non-renewal of the nurse's license, or both, pursuant to ACA §17-87-207 and A.C.A §17-87-309(a)(1) and (a)(6).
2. If the Board determines that a licensee has failed to comply with continuing education requirements, the licensee will:
 - a. Be allowed to meet continuing education requirements within ninety (90) days of notification of non-compliance.
 - b. Be assessed a late fee for each contact hour that requirements are not met after the ninety (90) day grace period and be issued a Letter of Reprimand. Failure to pay the fee may result in further disciplinary action.

SECTION VIII **RENEWALS**

A. Each person licensed under the provisions of the *Nurse Practice Act* shall renew biennially.

1. Thirty (30) days prior to the expiration date, the Board shall mail a renewal application to the last known address of each nurse to whom a license was issued or renewed during the current period.
2. The application shall be completed before the license renewal is processed.
3. The fee for renewal shall accompany the application.
4. The fee is not refundable.
5. Pursuant to Act 996 of 2003 and upon written request and submission of appropriate documentation, members of the Armed Forces of the United States who are Arkansas residents and are ordered to active duty to a duty station located outside of this state shall be allowed an extension without penalty or assessment of a late fee for renewing the service members nursing license. The extension shall be effective for the period that the service member is serving on active duty at a duty station located outside of this state and for a period not to exceed six months after the service member returns to the state.

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B. LAPSED LICENSE

1. The license is lapsed if not renewed or placed in inactive status by the expiration date.
2. Failure to receive the renewal notice at the last address of record in the Board office shall not relieve the licensee of the responsibility for renewing the license by the expiration date.
3. Any licensee whose license has lapsed shall file a renewal application and pay the current renewal fee and the late fee.
4. Any person practicing nursing during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

C. INACTIVE STATUS

1. Any licensee in good standing, who desires to retire temporarily from the practice of nursing in this state, shall submit a request in writing and the current license shall be placed on inactive status from the date of expiration.
2. While inactive, the licensee shall not practice nursing nor be subject to the payment of renewal fees.
3. When the licensee desires to resume practice, he or she shall request a renewal application, which shall be completed and submitted with a reinstatement fee and the renewal fee and must meet those requirements outlined in Section VII.
4. When disciplinary proceedings have been initiated against an inactive licensee, the license shall not be reinstated until the proceedings have been completed.

D. RETIRED NURSE

1. Any licensee in good standing, who desires to retire for any length of time from the practice of nursing in this state, shall submit a request in writing, surrender the current license, and pay the required fee and the current license shall be placed on inactive status and a retired license issued.
2. A retired license shall be renewed biennially following submission of a renewal application and fee.
3. Fees are non-refundable.
4. While retired, the licensee shall not practice nursing, however:
 - a. A registered nurse with a retired license may use the title "Registered Nurse", or the abbreviation "RN"; and
 - b. A practical nurse with a retired license may use the title "Licensed Practice Nurse", or the abbreviation "LPN"; and
 - c. A psychiatric technician nurse with a retired license may use the title "Licensed Psychiatric Technician Nurse", or the abbreviation "LPTN".
5. When the licensee desires to resume practice, he or she shall request a renewal application, which shall be completed and submitted with a reinstatement fee and the active renewal fee. The licensee must also meet those requirements outlined in Section VII.
6. If the retired license is allowed to lapse, the licensee shall not hold himself or herself out as an RN, LPN, or LPTN and shall pay a reinstatement fee in addition to the fee required for renewal of the retired license.
7. When disciplinary proceedings have been initiated against a retired licensee, the license shall not be reinstated until the proceedings have been completed.

- E. The licensee may be required to submit to a state and federal criminal background check if the Board deems it necessary.

SECTION IX **DUPLICATE LICENSE**

- A. A duplicate license or certificate shall be issued when the licensee submits a statement to the Board that the document is lost, stolen, or destroyed, and pays the required fee.
- B. The license will be marked "duplicate".

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SECTION X
CERTIFICATION/VERIFICATION TO ANOTHER JURISDICTION

Upon payment of a certification/verification fee, a nurse seeking licensure in another state may have a certified statement of Arkansas licensure issued to the Board of Nursing in that state.

SECTION XI
NAME OR ADDRESS CHANGE

- A. A licensee, whose name is legally changed, shall be issued a replacement license following submission of the current license, along with a notarized statement, copy of marriage license, or court action, and the required fee.
- B. A licensee, whose address changes from the address appearing on the current license, shall immediately notify the Board in writing of the change.

Effective May 1, 2008

CHAPTER SIX

STANDARDS FOR NURSING EDUCATION PROGRAMS

SECTION I

APPROVAL OF PROGRAMS

This chapter presents the Standards established by the Arkansas State Board of Nursing for nursing education programs that lead to licensure.

A. NEW PROGRAM LEADING TO LICENSURE

1. Prerequisite Approval
 - a. An institution, seeking to establish a new nursing program leading to licensure, shall submit a letter of intent to the Board.
 - (1) An applicant for a baccalaureate, diploma, associate degree, or practical nurse program shall comply with the approval process of appropriate state education approval authority.
 - (2) The parent institution shall be a post-secondary institution approved by the Arkansas Department of Higher Education or hospital approved by the Arkansas Department of health of a consortium of such institutions.
 - (3) An applicant for an Advanced Practice Nursing (APN) program shall comply with the "Criteria and Procedures for Preparing Proposals for New Programs," established by the Arkansas Department of Higher Education.
 - (4) Appropriate professional accreditation of the new APN program is considered to be deemed status as approved by the Board.
 - (5) Out of state nurse programs shall meet the requirements of the Arkansas Department of Higher Education and be approved by the Arkansas State Board of Nursing.
 - b. The institution must submit a current feasibility study, that is signed by the appropriate administrative officers, and includes the following:
 - (1) Purpose for establishing the program;
 - (2) Type of educational program to be established;
 - (3) Relationship to the parent institution, including an organizational chart;
 - (4) Mission, philosophy, purposes, and accreditation status of the parent institution;
 - (5) Evidence that the parent institution has authorization or is in the process of obtaining authorization to conduct a program of nursing; or the approval status of parent institution;
 - (6) Financial statement of the parent institution for the past two fiscal years;
 - (7) A proposed budget for each year of the program's implementation;
 - (8) Documented need and readiness of the community to support the program, including surveys of potential students, employment availability, and potential employers;
 - (9) Source and numbers of potential students and faculty;
 - (10) Proposed employee positions including support staff;
 - (11) Proposed clinical facilities for student experiences, including letters of support from all major facilities expected to be used for full program implementation, including evidence of clinical space for additional students;
 - (12) Letters of support from approved nursing and health-related programs using the proposed clinical facilities;
 - (13) Proposed physical facilities including offices, classrooms, technology, library, and laboratories;
 - (14) Availability of the general education component of the curriculum or letter of agreement, if planned, from another institution; and
 - (15) A timetable for initiating the program, including required resources, and plans for attaining initial approval.
 - (16) Other information as requested by the Board.
 - c. A representative of the Board shall conduct an on-site survey and complete a report.
 - d. The Board shall review all prerequisite documents during a regularly scheduled Board meeting.
 - e. The Board may grant, defer, or deny Prerequisite Approval.

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- f. After receiving Prerequisite Approval status, the institution may:
 - (1) Advertise for students; and
 - (2) Proceed toward compliance by following the Education Standards for Initial Approval.

2. Initial Approval

- a. The institution shall secure a nurse administrator of the program.
- b. The nurse administrator shall plan the program and
 - (1) Assure compliance with Board standards and recommendations;
 - (2) Address prerequisite recommendations;
 - (3) Prepare detailed budget;
 - (4) Employ qualified faculty and support staff;
 - (5) Prepare a program organizational chart showing lines of authority;
 - (6) Design the program's sequential curriculum plan;
 - (7) Develop student, faculty, and support staff policies and procedures;
 - (8) Attain agency affiliation agreements;
 - (9) Verify that proposed physical facilities are in place; and
 - (10) Submit documentation to the Board that Initial Approval Standards are met.
- c. A Board representative shall validate readiness of the program to admit students and prepare a report.
- d. The Board shall review all documents for Initial Approval during a regularly scheduled Board meeting.
- e. The Board may grant, defer or deny Initial Approval.
- f. After receiving Initial Approval, the program:
 - (1) May admit students;
 - (2) Shall proceed toward compliance by following the Education Standards for Full Approval; and
 - (3) Shall follow the same standards as those of established programs in terms of annual activities, projects, and reports.

3. Full Approval

- a. Before graduation of the first class, a Board representative shall validate compliance with the Standards and prepare a report.
- b. The report and documentation shall be reviewed during a regularly scheduled Board meeting.
- c. The Board may grant, defer, or deny Full Approval.

B. ESTABLISHED PROGRAM THAT PREPARES GRADUATES FOR LICENSURE

1. Continued Full Approval

- a. A survey will be periodically conducted to review the program for continued compliance with the Standards. An on-site or paper survey for a program includes:
 - (1) A newly established program shall have an on-site survey three (3) years after receiving initial Full Approval.
 - (2) An established professional or practical nurse program that has continued accreditation status with a national nursing accreditation organization and has maintained a NCLEX-RN[®] or NCLEX-PN[®] pass rate of at least 75% shall have a paper survey every five (5) years thereafter.
 - (3) An established professional or practical nurse program that does not meet the criteria for accreditation with a national nursing education accreditation organization or has failed to maintain at least a 75% pass rate on the NCLEX-RN[®] or NCLEX-PN[®] shall have an on site survey visit every five (5) years thereafter.
 - (4) An established Master's program in advanced practice nursing shall notify the Board of the program's continued national nursing accreditation status, which will serve as deemed status for Board approval.
- b. The survey report and documentation shall be submitted to the Board and reviewed during a regularly scheduled Board meeting.
- c. The Board may grant, defer, or deny Continued Full Approval.

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2. Conditional Approval
 - a. If areas of noncompliance with standards are not corrected in the timeframe established by the Board, the Board shall award Conditional Approval.
 - b. Information regarding a nursing program requested by the Board shall be provided by the parent institution.
 - c. A representative of the Board shall conduct an on-site survey and complete a written report.
 - d. Additional information available to the Board may be considered.
 - e. The Board shall review all documents during a regularly scheduled Board meeting.
 - f. The Conditional Approval status shall be in effect for a maximum of one (1) year to correct noncompliance deviations from the standards, unless otherwise determined by the Board.
 - g. The program and parent institution shall receive written notification of noncompliance deviations and the Board action.
 - h. The Board may grant continued Conditional Approval, Full Approval, or withdraw the program's approval.
3. Satellite Campus
 - a. Satellite campus programs shall be approved by the Board prior to implementation.
 - (1) Continued Full Approval program may submit a proposal for a satellite campus program.
 - (2) The proposal shall reflect requirements for prerequisite approval of a new program.
 - b. The Board may grant, defer, or deny approval.
 - c. All approved satellite campus programs shall maintain the same standards as the parent program.
 - d. Each satellite campus' data will be included in the program's annual report and five-year survey report.
4. Distant Learning Sites
 - a. Distant learning sites shall be approved by the Board prior to utilization.
 - b. Each distant learning site's data shall be included in the program's annual report and five-year survey report.
5. Out of state programs shall be Board approved prior to implementing clinical rotations in Arkansas healthcare facilities.

SECTION II **PROGRAM REQUIREMENTS**

A. ADMINISTRATION AND ORGANIZATION

1. Institutional Accreditation
The parent institution shall be approved by the appropriate state body.
2. Institutional Organization
 - a. The parent institution shall be a post-secondary educational institution, hospital, or consortium of such institutions.
 - b. The institutional organizational chart shall indicate lines of authority and relationships with administration, the program, and other departments.
 - c. The program shall have at least equal status with comparable departments of the parent institution.
3. Program Organization
 - a. The program shall have a current organizational chart.
 - b. The program shall have specific current job descriptions for all positions.

B. PHILOSOPHY AND GRADUATE COMPETENCIES

1. The philosophy of the program shall be in writing and consistent with the mission of the parent institution.
2. Graduate competencies shall be derived from the program's philosophy.
3. The philosophy and graduate competencies shall serve as the framework for program development and maintenance.

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C. RESOURCES

1. Financial Resources
 - a. There shall be adequate financial support to provide stability, development, and effective operation of the program.
 - b. The director of the program shall administer the budget according to parent institutional policies.
 - c. The director shall make budget recommendations with input from the faculty and staff.
2. Library and Learning Resource Center
 - a. Each program and each satellite campus shall have a library or learning resource center with the following:
 - (1) Current holdings to meet student educational needs, faculty instructional needs, and scholarly activities.
 - (2) Budget plan for acquisitions of printed and multi-media materials.
 - (3) Written process for identifying and deleting outdated holdings.
 - (4) Resources and services accessible and conveniently available.
 - b. The library of a baccalaureate, diploma, associate degree, or practical nurse program shall be under the direction of a qualified master's degreed librarian.

D. FACILITIES

1. Classrooms and Laboratories
 - a. Each program and satellite campus shall have a clinical skills laboratory equipped with necessary educational resources.
 - b. Classrooms and laboratories shall be:
 - (1) Available at the scheduled time;
 - (2) Adequate in size for number of students;
 - (3) Climate controlled, ventilated, lighted; and
 - (4) Equipped with seating, furnishings and equipment conducive to learning and program goals.
 - c. Adequate storage space shall be available.
 - d. Facilities shall be in compliance with applicable local, state, and federal rules and regulations related to safety and the Americans with Disabilities Act.
2. Offices
 - a. The director of the program shall have a private office.
 - b. Faculty members shall have adequate office space to complete duties of their positions and provide for uninterrupted work and privacy for conferences with students.
 - c. There shall also be adequate:
 - (1) Office space for clerical staff;
 - (2) Secure space for records, files, equipment, and supplies; and
 - (3) Office equipment and supplies to meet the needs of faculty and clerical staff.
3. Clinical Facilities
 - a. Clinical facilities and sites shall provide adequate learning experiences to meet course objectives.
 - b. Clinical sites shall be adequately staffed with health professionals.
 - c. The program shall have a current and appropriate written agreement with each clinical site.
 - d. Written agreements shall include a termination clause and be reviewed annually.
 - e. Students shall receive orientation to each clinical site.

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E. PERSONNEL

1. Program Director
 - a. The program director shall have a current unencumbered registered nurse license to practice in Arkansas and be employed full time.
 - b. The practical nursing program director shall have a minimum of a baccalaureate degree in nursing. Directors appointed prior to January 1, 2004, shall be exempt for the duration of their current position.
 - c. The baccalaureate, diploma or associate degree program director shall have a minimum of a master's degree in nursing.
 - d. The program director shall have previous experience in clinical nursing practice and/or education.
 - e. The program director's primary responsibility and authority shall be to administer the nursing program.
 - (1) The program director shall be accountable for program administration, planning, implementation, and evaluation.
 - (2) Adequate time shall be allowed for relevant administrative duties and responsibilities.
 - f. The licensure examination application shall be authorized by the nursing program director to assure the applicant has completed the program.
2. Faculty and Assistant Clinical Instructors
 - a. Faculty shall hold a current unencumbered registered nurse license to practice in Arkansas.
 - b. Faculty shall have had previous experience in clinical nursing.
 - c. Faculty teaching in a baccalaureate, diploma, associate degree, or practical nurse program shall have a degree or diploma above the type of education program offered.
 - d. Nurses serving as assistant clinical instructors in a baccalaureate, diploma, associate degree, or practical nurse program may have a degree or diploma at or above the type of education program offered.
 - e. Assistant clinical instructors shall:
 - (1) Be under the direction of faculty;
 - (2) Hold a current unencumbered license to practice in Arkansas; and
 - (3) Have a minimum of one year experience in the clinical area.
 - f. All faculty shall maintain education and clinical competencies in areas of instructional responsibilities.
 - g. Non-nurse faculty shall meet the requirements of the parent institution.
 - h. Faculty shall be organized with written policies, procedures, and, if appropriate, standing committees.
 - i. Nursing faculty policies shall be consistent with parent institutional policies.
 - j. Program specific policies shall be developed by nursing faculty.
 - k. A planned program specific orientation for new faculty shall be in writing and implemented.
 - l. Consideration shall be given to safety, patient acuity, and the clinical area in determining the necessary faculty to student ratio for clinical experiences. The faculty to student ratio in clinical experiences shall be no greater than 1:10.
 - m. The minimum number of faculty shall be one (1) full-time member in addition to the director.
 - n. Faculty meetings shall be regularly scheduled and held. Minutes shall be maintained in writing.
 - o. Faculty members shall participate in program activities as per policies and procedures.
3. Support Staff

There shall be secretarial and other support staff sufficient to meet the needs of the program.

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F. PRECEPTORS

1. Preceptor Utilization
 - a. Preceptors shall not be utilized in foundation or introductory courses.
 - b. Preceptors shall not be considered in clinical faculty-student ratio. The ratio of preceptor to student shall not exceed 1:2.
 - c. There shall be written policies for the use of preceptors, that include:
 - (1) Communications between the program and preceptor concerning students;
 - (2) Duties, roles, and responsibilities of the program, preceptor, and student; and
 - (3) An evaluation process.
 - d. All preceptors shall be listed on the annual report by area, agency, and number of students precepted.
2. Preceptor Criteria
 - a. Baccalaureate, diploma, associate degree, or practical nurse program student preceptors shall hold a current unencumbered license to practice as a registered nurse in Arkansas. Practical nurse student preceptors shall hold a current unencumbered license to practice as a registered nurse, licensed practical nurse, or licensed psychiatric technician nurse in Arkansas.
 - b. Preceptors shall have a minimum of one-year experience in the area of clinical specialty for which the preceptor is utilized.
 - c. Preceptors shall participate in evaluation of the student.
3. Student Criteria
 - a. Precepted students shall be enrolled in courses specific to the preceptor's expertise.
 - b. Precepted students shall have appropriate learning experiences prior to the preceptorship.
 - c. There shall be no reimbursement to students for the educational preceptorship.
4. Faculty Criteria
 - a. Program faculty shall be responsible for the learning activity.
 - b. Program faculty shall be available for consultation with student and preceptor.
 - c. Program faculty shall be responsible for the final evaluation of the experience.

G. STUDENTS

1. Admissions, Readmissions, and Transfers
 - a. There shall be written policies for admission, readmission, transfer, and advanced placement of students.
 - b. Admission criteria shall reflect consideration of potential to complete the program and meet standards to apply for licensure (See ACA §17-87-312).
 - c. Students who speak English as a second language shall meet the same admission criteria as other students and shall pass an English proficiency examination.
 - d. Documentation of high school graduation or an equivalent, as determined by the appropriate educational agency, shall be an admission requirement.
2. Progression and Graduation: There shall be written policies for progression and graduation of students.
3. Student Services
 - a. Academic and financial aid services shall be accessible to all students.
 - b. If health services are not available through the parent institution, a plan for emergency care shall be in writing.
 - c. There shall be provision for a counseling and guidance program separate from nursing faculty.
4. Appeal Policies: Appeal policies shall be in writing and provide for academic and non-academic grievances.
5. Program Governance: Students shall participate in program governance as appropriate.

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H. STUDENT PUBLICATIONS

1. Publications shall be current, dated, and internally consistent with parent institution and program materials.
2. The following minimum information shall be available in writing for prospective and current students:
 - a. Approval status of the program granted by the Board;
 - b. Admission criteria;
 - c. Advanced placement policies;
 - d. Curriculum plan;
 - e. Program costs;
 - f. Refund policy;
 - g. Financial aid information; and
 - h. Information on meeting eligibility standards for licensure, including information on ACA §17-87-312 and that graduating from a nursing program does not assure ASBN's approval to take the licensure examination.
3. The student handbook shall include the following minimum information:
 - a. Philosophy and graduate competencies;
 - b. Policies related to substance abuse, processes for grievances and appeal, grading, progression, and graduation; and
 - c. Student rights and responsibilities.

I. EDUCATIONAL PROGRAM

1. The education program shall include curriculum and learning experiences essential for the expected entry level and scope of practice.
 - a. Curriculum development shall be the responsibility of the nursing faculty.
 - b. Curriculum plan shall be organized to reflect the philosophy and graduate competencies.
 - c. Courses shall be placed in a logical and sequential manner showing progression of knowledge and learning experiences.
 - d. Courses shall have written syllabi indicating learning experiences and requirements.
 - e. Theory content shall be taught concurrently or prior to related clinical experience.
 - f. Clinical experiences shall include expectations of professional conduct by students.
 - g. Curriculum plans for all programs shall include appropriate content in:
 - (1) Introduction to current federal and state patient care guidelines;
 - (2) Current and emerging infectious diseases;
 - (3) Emergency preparedness for natural and man made disasters;
 - (4) Impact of genetic research and cloning;
 - (5) End of life care; and
 - (6) Legal and ethical aspects of nursing, including the *Arkansas Nurse Practice Act*.
2. The curriculum plan for practical nurse programs shall include:
 - a. Theoretical content and clinical experiences that focus on:
 - (1) Care for persons throughout the life span including cultural sensitivity;
 - (2) Restoration, promotion, and maintenance of physical and mental health; and
 - (3) Prevention of illness for individuals and groups.
 - b. The length of the practical nurse curriculum shall be no less than ten (10) calendar months which includes at least thirteen hundred (1300) contact hours.
 - c. Theory content may be in separate courses or integrated and shall include at least the following:
 - (1) Anatomy and physiology;
 - (2) Nutrition;
 - (3) Pharmacology and intravenous therapy;
 - (4) Growth and development throughout the life span;
 - (5) Fundamentals of nursing;
 - (6) Gerontological nursing;
 - (7) Nursing of adults;
 - (8) Pediatric nursing;
 - (9) Maternal/infant nursing;
 - (10) Mental health nursing; and
 - (11) Principles of management in long term care, including delegation.
 - d. Clinical experiences shall be in the areas of:

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- (1) Fundamentals of nursing;
 - (2) Nursing of adults;
 - (3) Pediatric nursing;
 - (4) Gerontological nursing;
 - (5) Maternal/infant nursing;
 - (6) Mental health;
 - (7) Administration of medications, including intravenous therapy; and
 - (8) Management in long term care, including delegation.
3. The curriculum plan for baccalaureate, diploma, or associate degree nurse programs shall include:
- a. Theoretical content and clinical experiences that focus upon:
 - (1) The prevention of illness and the restoration, promotion, and maintenance of physical and mental health;
 - (2) Nursing care based upon assessment, analysis, planning, implementing, and evaluating; and
 - (3) Care for persons throughout the life span, including cultural sensitivity.
 - b. Course content may be in separate courses or integrated and shall include at least the following:
 - (1) Biological and physical sciences content:
 - a. Chemistry;
 - b. Anatomy and physiology;
 - c. Microbiology;
 - d. Pharmacology;
 - e. Nutrition; and
 - f. Mathematics.
 - (2) Behavioral science and humanities content:
 - a. Psychology;
 - b. Sociology;
 - c. Growth and Development;
 - d. Interpersonal relationships;
 - e. Communication; and
 - f. English composition.
 - (3) Nursing science content:
 - a. Medical surgical adult;
 - b. Pediatrics;
 - c. Maternal/Infant;
 - d. Gerontology;
 - e. Mental Health;
 - f. Leadership, including nursing management and delegation; and
 - g. Baccalaureate programs shall include community health.
 - (4) Clinical experiences shall be in the areas of:
 - a. Medical/surgical;
 - b. Pediatrics;
 - c. Maternal/infant;
 - d. Mental health;
 - e. Gerontology;
 - f. Leadership and management, including delegation;
 - g. Rehabilitation; and
 - h. Baccalaureate programs shall include clinical in community health.

J. PROGRAM EVALUATION

1. Faculty shall be responsible for program evaluation.
2. A systematic evaluation plan of all program aspects shall be in writing, implemented, and include: philosophy and graduate competencies, curriculum, policies, resources, facilities, faculty, students, graduates, and employer evaluation of graduates.
3. The outcomes of the systematic evaluations shall be used for ongoing maintenance and development of the program.
4. Appropriate records shall be maintained to assist in overall evaluation of the program after graduation.
5. The systematic program evaluation plan shall be periodically reviewed.
6. Students shall evaluate the courses, instructors, preceptors, and clinical experiences throughout the program, and the overall program after graduation.

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K. RECORDS

1. Transcripts of all students enrolled in the program shall be maintained according to policies of the parent institution.
 - a. Transcripts shall reflect courses taken.
 - b. The final transcript shall include:
 - (1) Dates of admission;
 - (2) Date of separation or graduation from the program;
 - (3) Hours/credits/units earned, degree, diploma, or certificate awarded;
 - (4) The signature of the program director, registrar, or official electronic signature; and
 - (5) The seal of the school or be printed on security paper or an official electronic document.
 - c. Current program records shall be safely stored in a secure area.
 - d. Permanent student records shall be safely stored to prevent loss by destruction and unauthorized use.

SECTION III

REPORTS, LICENSURE EXAMINATION PERFORMANCE, AND CLOSURE

A. REPORTS

1. Annual report: An annual report shall be submitted in a format and date determined by the Board.
2. Special reports/requests: The Board shall be notified in writing of major changes affecting the program, including but not limited to:
 - a. School name;
 - b. Director of Program; and
 - c. Ownership or merger of parent institution.
3. Curriculum changes:
 - a. Baccalaureate, diploma, associate degree, or practical nurse program changes – Major changes of curriculum or standards shall be reported to the Board prior to implementation, including but not limited to:
 - (1) Philosophy, competencies, and objectives.
 - (2) Reorganization of curriculum.
 - (3) Increase or decrease in length of program.
 - b. Practical Programs – Major changes of curriculum and standards shall be approved prior to implementation, including but not limited to:
 - (1) Philosophy, competencies, and objectives;
 - (2) Reorganization of curriculum; and
 - (3) Increase or decrease in length of program.
4. Pilot programs/projects that differ from the current approved program shall be approved prior to implementation.

B. LICENSURE EXAMINATION PERFORMANCE

1. The student pass rate on the licensure examination shall be calculated on an annual calendar year.
2. The program shall maintain a minimum pass rate of 75% for first-time examination candidates.
3. Any program with a pass rate below 75% shall:
 - a. First year:
 - (1) Receive a letter of concern; and
 - (2) Provide the Board with a report analyzing all aspects of the program. The report shall identify and analyze areas contributing to the low pass rate and include plans for resolution which shall be implemented.
 - b. Second consecutive year:
 - (1) Receive a letter of warning; and
 - (2) Program director and parent institution representative shall present a report to the Board. The report shall identify and analyze the failure of first year corrections and additional plans for resolution of the low pass rate.

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- c. Third consecutive year:
 - (1) Be placed on conditional approval; and
 - (2) Conditional approval will be granted until two consecutive years of an above 75% pass rate is achieved or until the Board withdraws approval status for noncompliance with the education standards.

C. PROGRAM CLOSURE

- 1. Voluntary
 - a. The parent institution shall submit a letter of intent for closure at least six (6) months prior to the closure. The letter shall include:
 - (1) Date of closure; and
 - (2) Plan for completion of currently enrolled students.
 - b. The Board must approve closure plan prior to implementation.
 - c. All classes and clinical experiences shall be provided until current students complete the program or parent institution provides for transfer to another acceptable program.
 - d. Records of a closed program shall be maintained by the parent institution and be in compliance with federal and state laws. The institution shall notify the Board of arrangements for the storage of permanent student and graduate records.
- 2. Mandatory
 - a. Upon Board determination that a program has failed to comply with educational standards and approval has been withdrawn, the parent institution shall receive written notification for closure of the program. The notification shall include:
 - (1) The reason for withdrawal of approval;
 - (2) The date of expected closure; and
 - (3) A requirement for a plan for completion of currently enrolled students or transfer of students to another acceptable program.
 - b. Records of a closed program shall be maintained by the parent institution and be in compliance with federal and state laws. The institution shall notify the Board of arrangements for the storage of permanent student and graduate records.
- 3. A program that has had withdrawal of their approval status may apply as a new program after one year from official closure date.

Effective May 1, 2008