16.12.3.1 ISSUING AGENCY: New Mexico Board of Nursing.
[16.12.3.1 NMAC - Rp, 16.12.3.1 NMAC, 10/1/2016]

16.12.3.2 SCOPE: Programs of nursing education preparing individuals for licensure in the state of New Mexico.
[16.12.3.2 NMAC - Rp, 16.12.3.2 NMAC, 10/1/2016]

16.12.3.3 STATUTORY AUTHORITY: Nursing Practice Act, Section 61-3-26 NMSA 1978 Comp.
[16.12.3.3 NMAC - Rp, 16.12.3.3 NMAC, 10/1/2016]

16.12.3.4 DURATION: Permanent.
[16.12.3.4 NMAC - Rp, 16.12.3.4 NMAC, 10/1/2016]

16.12.3.5 EFFECTIVE DATE: October 1, 2016, unless a later date is cited at the end of a section.
[16.12.3.5 NMAC - Rp, 16.12.3.5 NMAC, 10/1/2016]

16.12.3.6 OBJECTIVE: To safeguard life and health and promote the public welfare by regulating programs of nursing in the state of New Mexico as promulgated by the board. To promote the safe and effective practice of nursing by graduates of nursing education programs. To provide guidance for developing new nursing education programs. To facilitate continued improvement of established nursing education programs. To provide criteria for the evaluation of new and established nursing education programs. To grant recognition and approval that a program of nursing is meeting the required minimal standards and rules as determined by the board. To establish eligibility of graduates of programs of nursing to apply for licensure by examination.
[16.12.3.6 NMAC - Rp, 16.12.3.6 NMAC, 10/1/2016]

16.12.3.7 DEFINITIONS:
A. “Application”, form provided by the Board of Nursing (BON) to any potential nursing program to be used as the first process in opening a new program.
B. “Approval”, official or formal consent, confirmation or sanction.
C. “Associate degree program”, a formalized program of study, usually organized for completion within a two-year academic period, which prepares graduates for an associate degree in nursing and eligibility to take the national examination for registered nurses. The program is conducted as an integral department or division within a college or university.
D. “Baccalaureate degree program”, a formalized program of study, usually organized for completion within a four-year academic period, which prepares graduates for a degree in nursing and eligibility to take the national licensing examination for registered nursing. The program is conducted as an integral department or division within a university or college.
E. “Board”, New Mexico board of nursing.
F. “Clinical facilities”, institutions which are established for the delivery of nursing care services (hospital, extended care facilities, nursing homes, medical clinics, public health facilities, physician’s offices, outpatient clinics, etc.).
G. “Clinical preceptors”, nurses who have demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student.
H. “Clock/contact hour”, unit of measurement used by educational institutions to determine work load.
I. “Curriculum”, a course of study which is offered within a particular program.
J. “Director”, the nurse educator (regardless of the official title assigned by any specific institution who is delegated the administrative responsibility and authority for the direction of the basic educational program in nursing. An “administrator” shall be considered synonymous with “director” unless the institution has divided up authority between a program “director” and an administrator.
K. “Educational institution”, an institution within the educational system which is organized and accredited for teaching and study (university, high school, post-secondary, approved area vocational institution).
L. “High-fidelity”, provides the highest levels of realism. Scenarios may incorporate the above low- and medium-fidelity plus the use of computer-based equipment with automatic cues and responses.

M. “Involuntary closure”, mandatory closure by the board for failure of a program to meet the minimum requirements as established by the board.

N. “Low-fidelity”, the least realistic of available options. Scenarios may include but not limited to the use of static manikins, written case studies, simulated medication administration and other nursing tasks.

O. “Medium-fidelity”, scenarios may include use of low-fidelity resources noted above plus standardized (live) patients incorporation with increased realism. Automatic cues and responses (aside from simulation faculty & staff) remain absent.

P. “Must”, a requirement.

Q. “National licensing examination”, examination for licensure as provided by the national council of state boards of nursing.

R. “National nursing accreditation”, recognition of an institution of learning by a board recognized national nursing organization as maintaining prescribed standards requisite for its graduates to gain admission to other reputable institutions of higher learning or achieve credentials for professional practice.

S. “Parent institution”, an institution within the educational system which is organized and accredited for teaching and study (university, college, high school).

T. “Practical nurse program”, a formalized program, which prepares a graduate for a diploma or certificate and eligibility to take the national licensing examination for practical nursing. The program is conducted as an integral part of an educational institution.

U. “Pre-licensure program”, nursing education program that prepares an individual for the national licensing examination for registered nursing or practical nursing.

V. “Program”, the curriculum and all of the activities/functions that take place which are necessary to fulfill the purpose of nursing education.

W. “Recommendations”, statements which should guide programs of nursing in the development and direction of the program but which are not mandatory.

X. “Regulation and policies”, statements governing practice of the board of nursing in the approval of a program of nursing.

Y. “Requirements”, conditions which any program of nursing shall meet to obtain approval.

Z. “Shall”, mandatory; a requirement.

AA. “Should”, a suggestion or recommendation; not a requirement.

BB. “Simulation”, an experience that imitates the real environment, requiring individuals to demonstrate the procedural techniques, decision-making, and critical thinking needed to provide safe and competent patient care.

CC. “Supervision of part-time faculty without msn”, initial verification of instructor’s knowledge and skills in supervision of students in clinical settings, followed by periodic observation, direction and evaluation of instructor’s knowledge and skills related to supervision of students in clinical settings.

[16.12.3.7 NMAC - Rp, 16.12.3.7 NMAC, 10/1/2016]

16.12.3.8 TYPES OF APPROVAL:

A. Initial approval.

(1) Initial approval shall be granted as outlined in numbers 16.12.3.11 NMAC “requirements for the establishment of new programs and 16.12.3.12 NMAC “minimum standards for nursing programs” of these rules. Initial approval is valid from the time granted through the graduation of the first nursing class.

(2) The program shall have initial approval prior to recruiting and enrolling students into the nursing program.

(3) Immediately preceding graduation of the first nursing class, an approval site visit shall be made by representatives of the board to determine compliance with “minimum standards for nursing programs” and for consideration of continued approval.

(4) When a program fails to meet the minimum standard requirements with the initial graduating class then an initial approval with warning will be granted.

(5) Initial approval with warning.

(a) The program must correct all the identified deficiencies of the minimum standards not met.

(b) The board of nursing will evaluate the program for deficiencies of minimum standards.
B. Full approval.

1. Full approval status shall be granted after the board verifies through a site visit that the “minimum standards for nursing programs” have been met.

2. Full approval for a continuing period not to exceed ten years, shall be granted to nursing education programs if, in the opinion of the board, the program continues to demonstrate compliance with minimum standards for nursing programs.

   a. All currently board approved nursing programs shall achieve national nursing accreditation by January 1, 2018.
   b. New programs shall be required to achieve national nursing accreditation by two years after the graduation of the first cohort.
   c. Programs which have received accreditation from a board-recognized national nursing accreditation agency shall file evidence of initial accreditation with the board, and thereafter shall file notice of any change in program accreditation status and report from accrediting agency’s board of review; the board shall grant approval based upon evidence of such accreditation.
   d. Programs holding approval based upon national accreditation are also responsible for complying with “minimum standards for nursing programs”.
   e. Full approval for a continuing period not to exceed ten years, shall be granted to nursing programs with full national nursing accreditation.
   f. Programs that do not meet or maintain this requirement will be placed on full approval with warning.
   g. Full approval with warning.
      i. the program must correct all the identified deficiencies of the minimum standards not met;
      ii. nursing programs shall provide a corrective action plan (CAP);
      iii. full approval with warning shall not exceed two years;
      iv. any other discretion or conditions deemed necessary by the board may be imposed.

C. Conditional approval.

1. The nursing education program shall be placed on conditional approval not to exceed two years when there is evidence of substantial non-compliance with the “minimum standards for nursing programs” as specified in these rules.

2. When on conditional approval status, the nursing program shall cease admissions.

3. The following situations are cause for review or a site visit by the board to determine if the minimum standards for nursing programs are being met:
   a. complaints relating to violations of the “minimum standards for nursing programs”;
   b. denial, withdrawal or change of program accreditation status by a board-recognized national nursing accreditation agency or general academic accreditation agency;
   c. failure to obtain board approval of changes that require approval of the board under “program changes”;
   d. providing false or misleading information to students or the public concerning the nursing program;
   e. violation of the rules 16.12.3 NMAC;
   f. continuous disruptions in retaining a qualified director or faculty, resulting in disorganization and breakdown of supervision and teaching of students;
   g. non-compliance with the program’s stated philosophy, objectives, policies, and curriculum resulting in unsatisfactory faculty/student achievement;
   h. failure to provide clinical experiences necessary to meet the objectives of the nursing program;
   i. less than a passing rate of eighty percent of first time writers of the national licensing examination;
   j. when a program fails to maintain a passing rate of eighty percent of first time writers for one calendar year from January 1st through December 31st of the same year, a letter will be
sent to the program notifying them that they are not in compliance with the rules and to provide the board with an assessment of possible problem areas within six months;

(ii) when a program fails to maintain a passing rate of eighty percent of first time writers for two consecutive calendar years, a report addressing areas of concern with a plan for corrective action will be submitted to the board within six months and an evaluation visit may be required.

(4) Conditional approval is not renewable. Failure to correct deficiencies within the designated time period will result in withdrawal of approval and involuntary closure of the program by the board. Full approval status shall be granted after the board verifies through a site visit that correction of deficiencies have occurred within the designated time period.

(5) The board may deny approval or withdraw approval of a nursing education program that does not meet the “minimum standards for nursing programs.”

16.12.3.9 TYPES OF BOARD VISITS TO NURSING PROGRAMS:
A. Approval visit - visits made to programs of nursing by board representative(s) for the sole purpose of granting board approval.
B. Evaluation visit - visits made to programs of nursing by board representative(s), at the request of the board, for the purpose of evaluating a program’s progress and approval status.
C. Consultation visit - visits made to programs of nursing by the board representative(s), at the request of the program of nursing or educational institution. Requests to the board for consultation must be made, in writing, to the executive director of the board of nursing. Consultation visits are made at the expense of the program of nursing or educational institution.
D. Survey visit - may be done at the discretion of the board during any national accreditation visit.

16.12.3.10 GENERAL REQUIREMENTS:
A. Prior to the end of the approval period, a site visit shall be made by board representatives to all nursing education programs not nationally accredited or an evaluative visit may be conducted at the discretion of the board with any nursing program, as needed.
B. Representatives of the parent institution and nursing program shall be notified, in writing, regarding the approval status of the program.
C. A report of any official visit, made by board representative(s), shall be provided to the program of nursing and officials of the institution.
D. In the event that deficiencies are found, the board shall designate a reasonable time period to correct the deficiencies.
E. An annual report which includes information regarding compliance with 16.12.3.12 NMAC, minimum standards for nursing programs shall be submitted to the board by the nursing education program.

16.12.3.11 REQUIREMENTS FOR THE ESTABLISHMENT OF NEW NURSING PROGRAMS:
A. All programs not previously approved by the board are required to be approved by the board under the procedures prescribed in this section. Feasibility studies, proposals, and initial approvals shall be considered during a regularly scheduled board meeting.
B. Any institution considering the establishment of a pre-licensure nursing education program shall submit, a letter of intent, the resume and transcripts of the nursing program administrator, complete application form and feasibility study, at least 12 months in advance of the proposed opening date. The application, feasibility study and program proposal shall be prepared by a qualified nurse educator.

(1) The letter of intent shall state the parent institution’s intention of opening a nursing program and verify approval of the proposed program by the highest governing body of the institution.

(2) The completed application shall include attached evidence of national or regional accreditation of the parent institution.

(3) The feasibility study shall contain the following:
   (a) rationale for the establishment of the nursing program;
   (b) documentation of the need/demand for a new nursing program;
   (c) nursing manpower needs in the state and region;
   (d) impact on other nursing education programs in the state;
(e) definition of the target region from which the student population will be drawn; (f) availability of the proposed number of faculty and director; and (g) proposed clinical facilities detailing accessibility and documenting the plan for clinical facility use to provide educationally sound experiences. The effect on other nursing programs utilizing the facility must also be documented.

C. The feasibility study must be approved by the board before the proposal is submitted.

D. The proposal shall be submitted at least six months prior to the proposed opening date. The board of nursing shall approve the proposal upon submission of evidence that verifies the following:

1) compliance with “minimum standards for nursing programs;”
2) documentation of the parent institution to support the program in relation to:
   (a) plans for providing adequate support services including library audio/visual resources; classrooms, laboratory, offices, secretaries, and counseling; and
   (b) evidence of financial resources for planning, implementing and continuing the program.
3) tentative timetable for planning and implementing the entire program;
4) appointment of a qualified nurse director, as specified in the “minimum standards for nursing programs,” to be active full-time in the position six months prior to the starting date;
5) evidence of a sufficient number of qualified faculty, as specified in “minimum standards for nursing programs”; faculty shall be active in their positions no later than two months before the start of the first class.

E. Requirements for approval.

1) Following approval of the proposal, arrangements will be made for the initial approval visit for the purpose of verifying compliance with the minimum standards for nursing programs. A written report of the visit will be submitted to the board and to the institution.
2) The board shall advise the institution, in writing, regarding the approval/disapproval of the feasibility study, proposal, initial approval status, and may include specific requirements that must be met during the approval period.
3) The board of nursing may deny approval to a program that does not meet the “minimum standards for nursing programs.”

[16.12.3.11 NMAC - Rp, 16.12.3.11 NMAC, 10/1/2016]

16.12.3.12 MINIMUM STANDARDS FOR NURSING PROGRAMS:

**A. Administration and organization.**

1) The nursing education program shall be an integral part of an institution of higher education that is authorized by this state to confer credentials in nursing and that is also accredited by an accreditation agency recognized by the US department of education.
2) The nursing program shall obtain national nursing accreditation within two years of the first graduating class.
3) The nursing programs shall have status comparable with other academic units. There shall be an organizational chart which identifies the relationships, within and between the program and other administrative areas of the parent institution.
4) The administration of the parent institution shall provide adequate financial support for the nursing program.
5) The parent institution shall designate a qualified, nursing director who is licensed to practice as a registered nurse in New Mexico or in a compact state. The nursing program director shall have responsibility and authority comparable with the administrative position including but not limited to development, implementation, evaluation, administration and organization of the nursing program.
6) The nursing program shall have specific written policies available to students and the public regarding, but not limited to, admission, readmission, transfer, advanced placement, progression, graduation, withdrawal, dismissal, student rights and responsibilities, grievances, health and safety.
7) The nursing program shall provide accurate, complete and appropriate information to all students and prospective students about the program including, but not limited to:
   (a) nature of the program, including course sequence, prerequisites, co-requisites and academic standards;
   (b) length of the program;
   (c) current cost of the program;
transferability of credits to other public and private educational institutions in New Mexico; program teaching methods and supporting technology; current standing and any change in regional or national institutional accreditation status and national nursing accreditation status and board approval status.

Faculty and students shall participate in program planning, implementation, evaluation and continuous improvement.

B. Curriculum.

(1) The mission of the nursing unit shall be consistent with that of the parent institution.

(2) A nursing program shall develop and implement a curriculum that includes level objectives, course objectives; measurable learning outcomes for each course that:

   (a) reflect its mission and goals;
   (b) are logically consistent between and within courses;
   (c) are designed so that the students who complete the program will have the knowledge and skills necessary to function in accordance with the definition and scope of practice specified in New Mexico Nurse Practice Act.

(3) The curriculum shall extend over a period of time sufficient to provide essential, sequenced learning experiences which enable a student to develop nursing competence and shall evidence an organized pattern of instruction consistent with principles of learning and educational practice.

(4) Clinical experience shall provide opportunities for application of theory and for achievement of the stated objectives in a client care setting or simulation learning settings, and shall include clinical learning experience to develop nursing skills required for safe practice. In the client care clinical setting, the student/faculty ratio shall be based upon the level of students, the acuity level of the clients, the characteristics of the practice setting and shall not exceed 8:1. In the simulation setting there shall be nursing faculty who has received focused training in simulation pedagogy and techniques. Clinical evaluation tools for evaluation of students' progress, performance and learning experiences shall be stated in measurable terms directly related to course objectives. Simulation learning experiences may concurrently include the use of low, medium, and high fidelity experiences. Nursing programs shall:

   (a) establish clearly-defined simulation learning outcomes incorporating objective measures for success;
   (b) incorporate written, planned design of individual training experiences and shall include consideration of the educational and experiential levels of the learners;
   (c) make use of checklists for pre- and post-experience analysis and review;
   (d) may substitute up to a maximum of fifty percent of a clinical education experiences using simulation programs and practices;
   (e) have written simulation policies and procedures specific to the nursing education available to all faculty and pertinent staff. Simulation learning policies and procedures shall include evaluative feedback mechanisms for ongoing program improvement;
   (f) incorporate facilitated student-centered debriefing sessions upon the conclusion of simulation-based activities.

(5) The curriculum shall provide instruction in the discipline of nursing across the lifespan and include content relevant to national and local health care needs. Support courses shall be an integral part of the nursing curriculum.

(6) The nursing program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.

C. Program Director Requirements

(1) Prior to appointment, the program director shall:

   (a) hold a graduate degree in nursing;
   (b) hold a current registered nurse license to practice in New Mexico;
   (c) have work experience in clinical nursing practice;
   (d) have work experience as a nurse educator.

(2) The program director shall:

   (a) maintain a current registered nurse license to practice in New Mexico;
   (b) be afforded appropriate resources to accomplish the program mission, goals and expected program outcomes.
(c) have the authority and responsibility for administration of the program to include but not limited to budget management, workload assignments, management and supervision of faculty and staff, development and enforcement of policies, meeting regulatory and accreditation requirements, and development and implementation of curriculum.
(d) have at least 80% of obligated work time to administer the program.

[D] Faculty requirements.

(1) The administrator of the nursing program [and all nursing program faculty] shall hold a current license[s] to practice as a registered nurse[s] in New Mexico. [or in a compact state.]

(2) The administrator shall hold at least one graduate degree in nursing and shall have experience in nursing practice, nursing education, curriculum and nursing administration.

(a) A formal plan will be in place which will include an orientation to [college administration and] the nursing program [development, implementation and evaluation].

(b) Nursing faculty who teach full-time shall hold a graduate degree in nursing; faculty without a graduate degree may be employed for one year and then are required to complete a graduate degree within the next five years, an educational contract with evidence of progression will be submitted with program annual report.

(c) Nursing faculty who teach part time shall hold a minimum of a bachelor’s degree in nursing; faculty without a BSN may be employed for one year and then are required to complete a BSN completion program or msn program within five years, an educational contract with evidence of progression will be submitted with program annual report.

(i) Part time faculty without a graduate degree in nursing shall report to a master’s prepared faculty and evidence of routine supervision shall be documented.

(ii) Part-time faculty shall be oriented to the curriculum, and provided with instruction in didactic and clinical teaching strategies.

(3) Clinical preceptors are licensed as a nurse at or above the educational level for which the student is preparing.

(4) Personnel policies for nursing faculty shall be the same as those in effect for other faculty with the exception of:

(a)—at least eighty percent of the administrator assignment shall be spent in administration of the nursing program; additional administrative time should be given when preparing for accreditation, curriculum revision and other administrative related activities;

(b) nursing faculty workload shall be calculated by teaching clock/contact hour;

(c)—evidence of full time and part time faculty evaluation shall be in place.

(5) A nursing program shall maintain current and accurate faculty and student records.

(6) The nursing program will retain a qualified director and a sufficient number of qualified faculty to meet the outcomes and purposes of the nursing education program.

[F] Resources: The parent institution shall provide sufficient resources, services and facilities to operate the nursing program.

[F] The nursing education program will maintain a passing rate of eighty percent or above of first time writers of the national licensing exam.

[16.12.3.12 NMAC - Rp, 16.12.3.12 NMAC, 10/1/2016]

16.12.3.13 PROGRAM CHANGES REQUIRING BOARD OF NURSING APPROVAL: Major changes that affect the program’s compliance with the “minimum standards for nursing programs” require board approval.

[16.12.3.13 NMAC - Rp, 16.12.3.13 NMAC, 10/1/2016]

16.12.3.14 REQUIREMENTS FOR CLOSURE OF APPROVED NURSING PROGRAMS: Upon voluntary or involuntary closure, the school shall:

A. notify the board of the closure date of the program;
B. make provision for students to complete their nursing education;
C. notify the board of the location of the permanently stored program records;
D. discontinue admissions; and
E. a contingency closure plan which includes date of closure, provisions that will be made for students to complete their nursing education and the location of the permanently stored program records will be submitted to the board six months after the program is placed on a conditional approval.

F. the nursing program shall wait 12 months before the program can re-apply for initial nursing program approval.


16.12.3.15 NURSING EDUCATION ADVISORY COMMITTEE: The board of nursing may appoint a minimum of a seven-member advisory committee to make recommendations to the board regarding nursing education.

A. The advisory committee shall review applications for initial approval, survey/evaluation reports, annual reports, major curriculum changes, and shall submit reports and recommendations to the board.

B. The advisory committee shall provide consultation to nursing programs as requested or as directed by the board.

[16.12.3.15 NMAC - Rp, 16.12.3.15 NMAC, 10/1/2016]

HISTORY OF 16.12.3 NMAC:

Pre-NMAC History:

History of the Repealed Material:

Other History: 16 NMAC 12.3, Nursing and Health Care Related Providers & Nursing Educational Programs filed 12/10/1997 Renumbered, reformatted and amended to 16.12.3 NMAC effective 7/30/2001.