

CHAPTER 6301
BOARD OF NURSING
PROGRAM APPROVALS

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6301.0100 DEFINITIONS.

Subpart 1. **Scope.** For the purpose of parts 6301.0100 to 6301.2410, the following terms have the meanings given them.

Subp. 2. **Advanced standing.** "Advanced standing" means academic credit granted a licensed practical nurse in recognition of prior nursing education and nursing experience.

Subp. 3. [Repealed, 28 SR 218]

Subp. 4. **Approval.** "Approval" means authority granted by the board for a controlling body to offer a program designed to prepare students to meet the nursing education requirements for licensure as practical, professional, or advanced practice nurses in Minnesota.

Subp. 5. **Board.** "Board" means the Board of Nursing.

Subp. 6. **Board review panel.** "Board review panel" means the group convened under Minnesota Statutes, section 214.10, to review investigations of alleged noncompliance with rules.

Subp. 7. **Clinical setting.** "Clinical setting" means the place where, or through which, faculty and students have access to one or more patients. Simulated clinical learning activities controlled by the faculty do not meet this definition.

Subp. 7a. **Comparable organizations.** A foreign accrediting organization is a "comparable organization" under this chapter if it only accredits those programs that meet or exceed the

performance standards for nursing education programs in part 6301.2330. A foreign accrediting organization that accredits programs that do not meet such standards is not a comparable organization.

Subp. 7b. **Competence.** "Competence" means the application of knowledge, ethics, and the interpersonal, decision-making, and psychomotor skills expected for the practice role, within the regulatory context of public health, safety, and welfare.

Subp. 8. **Controlling body.** "Controlling body" means a school or organization falling within the provisions of Minnesota Statutes, sections 148.171 to 148.285 and meeting the requirements of part 6301.2340, subpart 1.

Subp. 9. [Repealed, 41 SR 599]

Subp. 10. **Director.** "Director" means the registered professional nurse responsible for developing a proposed program or for implementing a program. This title is used regardless of the official title given to the person by the controlling body.

Subp. 11. **Faculty.** "Faculty" means the director and other individuals designated by the controlling body as having ongoing responsibility for teaching or evaluating student learning in the program.

Subp. 11a. **High-fidelity simulation.** "High-fidelity simulation" means a simulation conducted with computerized patient mannequins, virtual reality, or standardized patients and designed to provide a high level of interactivity and realism.

Subp. 11b. **Lead faculty.** "Lead faculty" means the advanced practice registered nurse responsible for providing direct oversight for the advanced practice program in a role and population focus.

Subp. 12. [Repealed, 28 SR 218]

Subp. 12a. **Learning activities.** "Learning activities" means the experiences designed by faculty to meet the outcomes of the program including basic standards for competence.

Subp. 13. [Repealed, 35 SR 1974]

Subp. 14. [Repealed, 35 SR 1974]

Subp. 15. **Nursing personnel.** "Nursing personnel" means those nurses and unlicensed assistive personnel, exclusive of nursing students, who provide care to patients.

Subp. 16. [Repealed, 41 SR 599]

Subp. 17. **Patient.** "Patient" means a person or group of persons of any age, including a pregnant person and a fetus, who is receiving or needs to receive care from a nurse.

Subp. 18. **Practical program.** "Practical program" means a program designed to prepare students for licensure as practical nurses.

Subp. 19. **Professional program.** "Professional program" means a program designed to prepare students for licensure as registered nurses.

Subp. 19a. **Advanced practice program.** "Advanced practice program" means a graduate program or postgraduate program designed to prepare students for licensure as advanced practice registered nurses.

Subp. 19b. **Population focus.** "Population focus" means the categories of population foci, as defined in Minnesota Statutes, section 148.171, subdivision 12b.

Subp. 20. **Program.** "Program" means a course of study offered by a controlling body that prepares students to practice practical nursing, professional nursing, or advanced practice nursing.

Subp. 21. **Safety.** "Safety" means a condition resulting from nursing actions that include the skill and judgment necessary to protect against physical or psychosocial hurt, injury, loss, danger, or risk of harm.

Subp. 21a. **Simulation.** "Simulation" means a learning activity that replicates a patient situation using a planned course of events and applies evidence-based best practices in nursing education to improve or validate competence.

Subp. 22. **Survey.** "Survey" means collecting and analyzing information to assess compliance with rules. Information may be collected by several methods, including review of written reports and materials, on-site observation and review of materials, or in-person or telephone interviews and conferences.

Subp. 23. [Repealed, 41 SR 599]

Statutory Authority: *MS s 148.191; 148.251; 148.292; 148.296*

History: *12 SR 102; 28 SR 218; 35 SR 1974; 41 SR 599*

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6301.0300 Subpart 1. [Repealed, 35 SR 1974]

Subp. 2. [Repealed, 28 SR 218]

Subp. 3. [Repealed, 7 SR 1751]

Subp. 4. [Repealed, 7 SR 1751]

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6301.1700 Subpart 1. [Repealed, 35 SR 1974]

Subp. 2. [Repealed, 15 SR 838]

Subp. 3. [Repealed, 15 SR 838]

Subp. 4. [Repealed, 15 SR 838]

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6301.1800 [Repealed, 35 SR 1974]

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6301.1900 Subpart 1. [Repealed, 35 SR 1974]

Subp. 2. [Repealed, 35 SR 1974]

Subp. 3. [Repealed, 35 SR 1974]

Subp. 4. [Repealed, 35 SR 1974]

Subp. 5. [Repealed, 35 SR 1974]

Subp. 6. [Repealed, 35 SR 1974]

Subp. 7. [Repealed, 35 SR 1974]

Subp. 8. [Repealed, 35 SR 1974]

Subp. 9. [Repealed, 28 SR 218]

Subp. 10. [Repealed, 35 SR 1974]

Subp. 11. [Repealed, 35 SR 1974]

Subp. 12. [Repealed, 35 SR 1974]

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6301.2000 [Repealed, 35 SR 1974]

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6301.2100 [Repealed, 35 SR 1974]

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6301.2200 [Repealed, 35 SR 1974]

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6301.2300 SCOPE OF RULES.

This chapter applies to new applications for program approval and to currently approved practical, professional, and advanced practice programs offered in Minnesota. Nothing in this chapter restricts faculty from designing or implementing curricula more comprehensively than required under this chapter.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974; 41 SR 599*

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6301.2310 PURPOSE OF NURSING EDUCATION PROGRAM APPROVAL.

This chapter establishes requirements for practical, professional, and advanced practice nursing programs conducted under Minnesota Statutes, sections 148.171 to 148.285, in order to:

A. promote the safe practice of nursing by enforcing education and practice standards for individuals seeking licensure as advanced practice registered nurses, registered nurses, and licensed practical nurses;

- B. grant approval to nursing education programs that the board determines have met the standards;
- C. provide information to graduates on meeting the educational and legal requirements for licensure;
- D. ensure continuous evaluation and improvement of nursing education programs; and
- E. provide the public and prospective students with a list of nursing programs that meets the standards established by the board.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974; 41 SR 599*

Published Electronically: *December 22, 2016*

6301.2320 PURPOSE FOR NURSING EDUCATION STANDARDS.

The purpose for nursing education standards is to:

- A. provide a framework for preparing safe and competent graduates for entry into practical, professional, and advanced practice nursing;
- B. provide criteria for the development, evaluation, and improvement of new and established nursing education programs; and
- C. ensure candidates are educationally prepared for licensure and recognition at the appropriate level.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974; 41 SR 599*

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6301.2330 NURSING EDUCATION STANDARDS.

All nursing education programs shall meet the standards in this part.

- A. The controlling body and program have administrative and resource capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.
- B. The purpose and outcomes of the nursing program must be consistent with the "Nurse Practice Act," other relevant statutes, and board rules.
- C. The purpose and outcomes of the nursing program must be consistent with evidence-informed standards of nursing practice appropriate for graduates of the type of nursing program offered.
- D. The input of stakeholders shall be considered in developing and evaluating the purpose and outcomes of the nursing program.

E. The nursing program must perform periodic comprehensive self-evaluation for quality improvement.

F. The curriculum must provide diverse learning activities, including learning activities in clinical settings, that are consistent with program outcomes.

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

H. The nursing program director must be a professionally and academically qualified registered nurse with institutional authority and administrative responsibility for the program.

I. Professionally, academically, and clinically qualified registered nurse faculty must be sufficient in number and expertise to accomplish program outcomes and quality improvement.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974; 41 SR 599*

Published Electronically: *December 22, 2016*

6301.2340 REQUIRED CRITERIA FOR NURSING EDUCATION PROGRAMS.

Subpart 1. **Controlling body.** The controlling body proposing a program or continuing a program must:

A. be a Minnesota public or private postsecondary educational institution that is accredited by a regional or national accrediting association for postsecondary institutions recognized by the United States Department of Education; and

B. provide adequate fiscal, human, physical, clinical, and technical learning resources to support program processes, security, and outcomes.

Subp. 1a. **Nondegree granting program.** An advanced practice program that is operated by a nondegree granting body must provide documentation of the following:

A. approval from the Minnesota Office of Higher Education to provide postsecondary education in Minnesota;

B. an agreement with a controlling body as defined in subpart 1;

C. the degrees awarded to graduates of the program by each educational institution; and

D. that students were enrolled as of January 1, 2015.

Subp. 2. **Organization and administration.** The organization, administration, and implementation of the nursing education program shall be consistent with this chapter, Minnesota Statutes, sections 148.171 to 148.285, and other applicable statutes and rules.

Subp. 3. **Nursing education program.**

A. The nursing education program must:

- (1) be an integral part of a governing academic institution;
- (2) implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and stakeholder input regarding competence and safety. The ongoing evaluation plan must provide for continuous improvement;
- (3) provide a curriculum to enable the student to develop the competence necessary for the level, scope, and standards of nursing practice consistent with the type of licensure;
- (4) ensure students of practical and professional programs:
 - (a) have learning activities with faculty oversight to acquire and demonstrate competence in clinical settings with patients across the life span and with patients throughout the whole wellness, acute, and chronic illness continuum;
 - (b) have diverse learning activities including clinical simulations to acquire and demonstrate competence. The faculty must have oversight over the learning activities; and
 - (c) provide input into the development, implementation, and evaluation of the program;
- (5) ensure students of advanced practice programs:
 - (a) have learning activities to acquire and demonstrate competence in clinical settings with patients in at least one population focus. The faculty must have oversight over the learning activities;
 - (b) have diverse learning activities, including clinical simulations, to acquire and demonstrate competence. The faculty must have oversight over the learning activities;
 - (c) who are prepared for more than one population focus or combined roles have content and clinical experience in both functional roles and population foci; and
 - (d) provide input into the development, implementation, and evaluation of the program;
- (6) ensure the director of practical and professional programs:
 - (a) is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes;
 - (b) has a graduate degree in nursing from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher Education Accreditation or its successors, or by a comparable organization if the graduate degree is from an educational institution from a foreign country;
 - (c) has a current unencumbered Minnesota registered nurse license and current registration;
 - (d) is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes;

(e) provides effective leadership to the program in achieving its mission, goals, and expected program outcomes;

(f) is given adequate time and resources to fulfill the role and responsibilities;

(g) communicates information about the program that is accurate, complete, consistent, and readily available; and

(h) informs the board within 30 days of a change in the director, the name of the program, the name of the controlling body, the address of the program at each site where the program is offered, the addition or termination of a site of the program, the address of the controlling body, or control of the program. Changes in control of the program include sharing control with another body, deleting a body from sharing control, transferring control in whole or in part to another body, or merging programs formerly controlled by other bodies;

(7) ensure the director of the advanced practice program:

(a) is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes;

(b) has a doctoral degree from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher Education Accreditation or its successors, or by a comparable organization if the graduate degree is from a foreign country;

(c) effective January 1, 2025, holds a graduate degree with a major in nursing and a doctorate in nursing or a health-related field from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council of Higher Education Accreditation or successors, or by a comparable organization if the graduate degree is from a foreign country;

(d) has a current unencumbered Minnesota registered nurse license and current registration;

(e) is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes;

(f) provides effective leadership to the program in achieving its mission, goals, and expected program outcomes;

(g) is given adequate time and resources to fulfill the role and responsibilities;

(h) communicates information about the program that is accurate, complete, consistent, and readily available; and

(i) informs the board within 30 days of a change in the director, the lead faculty member of a program track, the name of the program, the name of the controlling body, or the address of the program at each site where the program is offered; the addition or termination of a site of the program; or a change in the address of the controlling body or control of the program.

Changes in control of the program include sharing control with another body, deleting a body from sharing control, transferring control in whole or in part to another body, or merging programs formerly controlled by other bodies;

(8) ensure advanced practice nursing program faculty who coordinate or lead a program track are:

(a) educationally prepared;

(b) nationally certified in the same role and population focus; and

(c) hold an unencumbered license as a registered nurse and as an advanced practice registered nurse with current registration in Minnesota;

(9) ensure general principles for faculty include:

(a) academic preparation for the areas in which they teach;

(b) experiential preparation in the areas they teach;

(c) sufficiency in number to support the program outcomes;

(d) provision of opportunities for ongoing development in the science of education;

(e) nursing faculty in practical and professional nursing programs hold unencumbered licensure as a registered nurse with current registration in Minnesota;

(f) nursing faculty in advanced practice nursing programs hold unencumbered licensure as a registered nurse and as an advanced practice registered nurse with current registration in Minnesota; and

(g) nonnursing faculty are sufficient in number, utilization, and credentials to meet program goals and outcomes;

(10) ensure practical nursing program faculty have a baccalaureate or graduate degree in nursing from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher Education Accreditation or successors, or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country;

(11) ensure professional nursing program faculty have a graduate degree for full-time faculty and the majority of part-time faculty hold a graduate degree from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher Education Accreditation or successors, or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country. If the major of the graduate degree is not in nursing, the faculty must hold a baccalaureate degree with a major in nursing;

(12) ensure advanced practice nursing program faculty have a graduate degree in a health-related field in a clinical specialty from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher

Education Accreditation or successors, or by a comparable organization if the graduate-level degree is from a foreign country;

(13) effective January 1, 2025, ensure advanced practice nursing faculty have a baccalaureate or graduate degree with a major in nursing and a graduate degree in nursing or a health-related field in a clinical specialty from a regionally or nationally accredited college or university recognized by the United States Department of Education, by the Council for Higher Education Accreditation or successors, or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country;

(14) ensure nursing faculty in advanced practice nursing programs are educationally prepared and nationally certified in the same role and population focus if curricular content and student learning activities are specific to an identified role and population focus;

(15) ensure responsibilities of nursing faculty include:

(a) developing, implementing, evaluating, and updating the purpose, philosophy, objectives, and organizational framework of the nursing education program;

(b) designing, implementing, and evaluating the curriculum using a written plan;

(c) developing, evaluating, and revising student admission, progression, retention, and graduation policies within the policies of the governing body;

(d) participating in academic advising and guidance of students;

(e) planning and providing theoretical, clinical, and simulated clinical learning activities that reflect an understanding of the philosophy, objectives, and curriculum of the nursing education program; and

(f) evaluating student achievement of curricular objectives and outcomes related to nursing knowledge and practice;

(16) maintain minimum standard on the practical or professional licensure examination of greater than 75 percent for candidates from the program who, during any January 1 through December 31 period, wrote the licensing examination for the first time; and

(17) ensure associate degree professional nursing programs provide advanced standing and transition experiences for qualified licensed practical nurses.

B. High-fidelity simulation may be used in part to meet the requirements of item A, subitem (4), units (a) and (b), when:

(1) equipment and resources, including the number of nursing faculty, to support student learning are sufficient;

(2) nursing faculty with documented education and training in the use of simulation develop, implement, and evaluate the simulation experience;

(3) the design, implementation, and evaluation of the simulation is based on nationally recognized evidence-based standards for simulation;

(4) the simulation provides an opportunity for each student to demonstrate clinical competence while in the role of the nurse;

(5) prebriefing and debriefing are conducted by nursing faculty with subject matter expertise and training in simulation using evidence-based techniques; and

(6) high-fidelity simulation is utilized for no more than half of the time designated for meeting clinical learning requirements.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974; 41 SR 599*

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6301.2350 GRANTING APPROVAL.

Subpart 1. **Program accreditation for practical and professional programs.** All Board of Nursing-approved practical and professional nursing education programs must provide evidence of current accreditation by a national nursing accrediting body recognized by the United States Department of Education or the Council for Higher Education Accreditation or its successors by January 1, 2018, or must have achieved candidacy status leading to such accreditation and demonstrated satisfactory progression toward obtaining the accreditation.

Subp. 1a. **Program accreditation for advanced practice programs.** All Board of Nursing-approved advanced practice nursing education programs must provide evidence of current accreditation by a national nursing or nursing-related accrediting body recognized by the United States Department of Education or the Council for Higher Education Accreditation or successors.

Subp. 2. **Initial program approval.** The board shall grant initial approval to nursing education programs that demonstrate compliance with part 6301.2360, subpart 5.

Subp. 3. **Continuing program approval.** The board shall continue approval for programs that comply with all applicable rules including the survey requirements in part 6301.2360, subparts 2 and 3.

Statutory Authority: *MS s 14.386; 148.191*

History: *35 SR 1974; 38 SR 1279; 41 SR 599*

Published Electronically: *December 22, 2016*

6301.2360 SURVEYS; COMPLIANCE WITH STANDARDS AND CRITERIA.

Subpart 1. **Board notification.** The board shall notify the director of the time allowed for supplying the information regarding compliance with rules, including time allowed for completing board-supplied forms and providing materials and reports. The board shall give the director prior notice for all on-site surveys; however, notice may not be given for all on-site observations.

Subp. 2. **Survey for evidence of compliance with nursing education standards.** All Board of Nursing-approved nursing education programs must provide evidence of current accreditation by a national nursing accrediting body approved by the United States Department of Education or the Council for Higher Education Accreditation or its successors as specified in part 6301.2350, subparts 1 and 1a. All reports and communication with accrediting bodies must be submitted to the board including:

- A. evidence of current accreditation;
- B. accreditation reports; and
- C. any correspondence related to the status of the program's accreditation.

Subp. 3. **Survey to evidence compliance with additional statutes and board rules.** The program director must submit the following annual reports on:

- A. advanced standing;
- B. workers' compensation coverage;
- C. affirmation of compliance with program approval rules including licensure status of faculty and clinical requirements; and
- D. minimum nursing education program data set recognized by the board.

Subp. 4. **Survey for licensure examination success rates for practical and professional nursing programs.** If the success rates are 75 percent or less for candidates from the program who, during any calendar year, wrote the licensing examination for the first time, the board must take one of the actions described in items A to C and publish the actions, including a report to the accrediting body.

A. Require a plan of corrective action: If success rates are 75 percent or less for one calendar year, the board shall require the director to identify factors that are potentially affecting the low success rate on the licensure examination. The director shall submit a plan of corrective action by a specified date. The plan of action must be on a board-supplied form and include the signature of the director and another institutional administrative academic representative. If in the following year the success rate is above 75 percent, no action by the board is required.

B. Survey for corrective action: If success rates are 75 percent or less for any two consecutive calendar years, the board shall notify the director of an on-site survey to identify additional factors affecting the low success rate and review progress on the plan for corrective action submitted the previous year. The survey must include the director, faculty, students, and an institutional administrative academic representative of the institution. The director shall submit a revised plan of corrective action by a specified date. The plan of corrective action must be on a board-supplied form and include the signature of the director and another institutional administrative academic representative. If in the following year the success rate is above 75 percent, no action is required by the board.

C. Survey for compliance with board rules: If success rates are 75 percent or less for any three consecutive calendar years, the board shall require the director and another institutional administrative academic representative to meet with a committee of board members and board staff for an on-site survey for compliance with all applicable rules and for the implementation of the plan for corrective action submitted the previous year. Upon completion of the survey, the board shall take action in compliance with subpart 9.

Subp. 5. **Survey for initial approval of new nursing education program.** An educational institution intending to establish a nursing education program in Minnesota must be surveyed as outlined in items A to C.

A. Phase I - Intent to establish program.

(1) An educational institution under Minnesota Statutes, section 148.251, subdivision 1, must submit a letter of intent to establish a new nursing education program. The letter of intent must be submitted by the qualified director of the proposed program. Documentation in the letter of intent to establish a program must:

- (a) be submitted 12 months prior to the intended start date of the program;
- (b) include name, address, and current accreditation of the governing body;
- (c) provide rationale for establishing the nursing education program;
- (d) present a timetable for development and implementation of the nursing program;
- (e) provide evidence of adequate financial support and resources;
- (f) document availability of adequate academic facilities;
- (g) include impact of the proposed nursing education program on other nursing programs in the area; and
- (h) provide documentation of authorization by the designated review board for that educational institution to develop and implement a program.

(2) The board must approve the document of intent.

(3) Until a controlling body has received initial approval to conduct a program, representatives of the body shall use the term "proposed" in all references to the nursing program.

B. Phase II - Program development leading to initial approval.

(1) The director of the proposed program must submit an application for approval documenting compliance with education standards and criteria specified in this chapter.

(2) Board members must conduct a site visit when the application demonstrates compliance with nursing education standards and criteria specified in this chapter.

(3) Board site visitors must submit a recommendation to the board to grant initial approval or deny initial approval.

(4) The institution must not conduct nursing coursework until the board approves the recommendation for initial approval. This restriction does not prevent the controlling body from conducting nonnursing courses or from providing continuing education to nursing personnel.

(5) After receiving initial approval, the director must submit all required board annual reports including all reports and communication regarding candidacy for national nursing education accreditation or nursing-related accreditation.

C. Phase III - Continuing approval. Under Minnesota Statutes, section 148.251, subdivision 3, the board must survey initially approved nursing programs, and continue approval for the program if the program is in compliance with board rules, including:

(1) meeting the minimum first-time licensure examination success rate as required by subpart 4; and

(2) acquiring national nursing education accreditation or nursing-related accreditation, as required by subpart 6.

Subp. 6. **Survey required.** Under Minnesota Statutes, section 148.251, subdivision 3, the board must survey all nursing programs to determine if the board will continue approval. For approval to be continued, a nursing program must be in compliance with all board rules and must:

A. follow the accreditation cycle and process for initial or continuation of accreditation of the national nursing education accrediting or nursing-related accrediting body recognized by the United States Department of Education or the Council for Higher Education Accreditation or successors;

B. allow board members and board staff to accompany surveyors on the accrediting site visit if the board chooses to conduct joint visits;

C. submit a national nursing accrediting or nursing-related accrediting body self-study to the board;

D. submit a copy of all communication between the program and the national nursing accrediting or nursing-related accrediting body; and

E. submit required annual board reports.

Subp. 7. **Approval.** The board must act to continue approval if the program:

A. receives initial or continuing national nursing or nursing-related education accreditation; and

B. is in compliance with all other board rules and statutes.

Subp. 8. **Program survey.** The board must survey the program for compliance with one or more applicable rules if:

A. requirements for approval are changed or added;

B. the board has reason to believe there is a lack of compliance with the rules; or

C. the board has reason to believe program personnel are submitting false or misleading information or engaging in fraudulent practices to obtain or maintain approval.

Subp. 9. **Board action following survey.** The board shall take one of the following actions upon completion of a survey:

A. notify the director in writing that compliance with the rules has been determined; or

B. notify the director in writing of allegations of lack of compliance with one or more rules. The notice must inform the director that either a conference will be held with a board review panel, or a contested case hearing will be held according to Minnesota Statutes, chapter 14, and contested case rules in parts 1400.5010 to 1400.8400. If a conference is held with a board review panel, and the review panel finds that the allegations are:

(1) untrue, then the board shall dismiss the matter;

(2) true, and representatives of the program consent, then the panel shall submit a report to the board; or

(3) true, but the representatives of the program do not consent to submission of a report to the board, then the review panel must initiate a contested case hearing according to Minnesota Statutes, chapter 14, and contested case rules in parts 1400.5010 to 1400.8400.

Subp. 10. **Board action following conference or hearing.**

A. Upon receipt of the report of the review panel or hearing officer, the board shall take one of the following actions:

(1) notify the director in writing that compliance with all rules has been determined;

(2) issue a reprimand without changing the approval status if the program is in compliance either at the time of convening the review panel or hearing or by the time the board reviews the report of the panel or hearing;

(3) revoke approval and remove the program from the list of approved programs or deny approval to an applicant if the board finds the program has had a reasonable opportunity to correct the deficiency and has failed to do so; or

(4) issue a correction order. The correction order shall specify the date by which the deficiencies must be corrected. The correction order expires on that date.

B. If the deficiencies are corrected before the expiration of the correction order, the director must be notified in writing that the board has found the program to be in compliance with the applicable rules.

C. If the deficiencies are not corrected before expiration of the correction order, the director must be notified that a conference with a board review panel may be held, or that a contested case hearing may be held according to Minnesota Statutes, chapter 14, and contested case rules in parts 1400.5010 to 1400.8400.

(1) The purpose of the review panel or hearing is to determine if the deficiency was corrected prior to expiration of the correction order.

(2) If the deficiency was not corrected prior to expiration of the correction order, the board shall either remove the program from the list of approved programs or deny approval to an applicant and report the action to the accrediting body.

Statutory Authority: *MS s 14.386; 148.191*

History: *35 SR 1974; 38 SR 1279; 41 SR 599*

Published Electronically: *December 22, 2016*

6301.2370 VOLUNTARY CLOSURE OF NURSING EDUCATION PROGRAMS.

Subpart 1. **Voluntary closure.** If a nursing education program closes voluntarily, the director must:

A. give notice to the board of the planned closing date within 15 days of a decision to voluntarily close the program;

B. submit a written plan for terminating the nursing program with the notice of closure;

C. ensure that the nursing program is maintained, including the nursing faculty, until the last student is transferred or completes the program;

D. maintain standards for nursing education during the transition to closure;

E. provide placement for students who have not completed the program; and

F. notify the board of closure within 15 days after the actual date of closure.

Subp. 2. **Ending approval.** The board shall act to end approval after receipt of the notice of voluntary closure, effective on the actual date of voluntary closure.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974*

Published Electronically: *June 27, 2011*

6301.2380 DENIAL OR WITHDRAWAL OF APPROVAL.

A. The board shall deny initial approval if it determines that a new nursing education program will be unable to meet the standards for nursing education.

B. The board shall withdraw approval if it determines that a nursing education program:

(1) fails substantially to meet the standards for nursing education; or

(2) fails to correct the identified deficiencies within the time specified.

C. If a nursing education program is removed from the approved list, the governing body must provide for the completion of the program for students currently enrolled by placing the students in an approved program.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974*

Published Electronically: *June 27, 2011*

6301.2390 REINSTATEMENT OF APPROVAL.

The board may reinstate approval if the program submits evidence of compliance with nursing education standards within the specified time frame set by the board.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974*

Published Electronically: *June 27, 2011*

6301.2400 ACADEMIC RECORDS.

The director must identify arrangements for the secure storage and access to academic records and transcripts for the next 50 years in the event that the program closes or the approval of the program is revoked. This includes providing the name of the educational institution, hospital, or other organization that will be responsible for furnishing copies of the students' academic records to graduates for that period of time.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974*

Published Electronically: *June 27, 2011*

6301.2410 INNOVATIVE APPROACHES IN NURSING EDUCATION.

Subpart 1. **Application.** A nursing education program may apply to implement an innovative approach by complying with this part. Nursing education programs approved to implement innovative approaches shall continue to provide quality nursing education that prepares graduates to practice safely, competently, and ethically within the scope of practice as defined in Minnesota Statutes.

Subp. 2. **Purpose.** The purpose of applying for exemption from certain rules is to:

A. foster innovative models of nursing education to address the changing needs in health care;

B. ensure that innovative approaches are conducted in a manner consistent with the board's role of protecting the public; and

C. ensure that innovative approaches conform to the quality outcome standards and core education criteria established by the board.

Subp. 3. **Eligibility.** To be eligible for the exemption, the program must:

- A. hold full board approval without conditions;
- B. have no substantiated complaints in the past two years; and
- C. have no rule violations in the past two years.

Subp. 4. **Application.** The following information must be provided to the board at least 30 calendar days prior to a board meeting:

- A. identifying information, including name of nursing program, address, responsible party, and contact information;
- B. a brief description of the current program, including accreditation and board approval status;
- C. length of time for which the exemption is requested;
- D. description of the innovative approach, including objectives;
- E. brief explanation of why the program wants to implement an innovative approach at this time;
- F. explanation of how the proposed innovation differs from approaches in the current program;
- G. rationale with available evidence supporting the innovative approach;
- H. identification of resources that support the proposed innovative approach;
- I. expected impact the innovative approach will have on the program, including administration, students, faculty, and other program resources;
- J. plan for implementation, including timeline and the impact on current students;
- K. plan for evaluation of the proposed innovation, including measurable criteria and outcomes, method of evaluation, and frequency of evaluation; and
- L. additional application information as requested by the board.

Subp. 5. **Standards for approval.** The application must meet the following standards:

- A. the eligibility criteria in subpart 3, and application criteria in subpart 4;
- B. the innovative approach will not compromise the quality of education or safe practice of students;
- C. resources are sufficient to support the innovative approach;
- D. rationale with available evidence supports the implementation of the innovative approach;
- E. the implementation plan is reasonable to achieve the desired outcomes of the innovative approach;

F. the timeline provides for a sufficient period to implement and evaluate the innovative approach; and

G. the plan for periodic evaluation is comprehensive and supported by appropriate methodology.

Statutory Authority: *MS s 148.191*

History: *35 SR 1974*

Published Electronically: *October 11, 2013*