

State-Level Nursing Education Regulation: A Policy Analysis of Undergraduate Accreditation Standards

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The Policy Analysis Team

- **Dr. Lachel Story** - a faculty member with 16 years of nursing education experience, 23 years of nursing practice experience, and 12 years of experience conducting mixed methods research
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Background

- Federal and state oversight of higher education and nursing education
 - Federal law requires states establish bodies to regulate higher education institutions
 - Nursing professional standards require state-level oversight of nursing education



Background

- State-level regulatory bodies
 - Boards of Nursing (BONs)
 - Option used by 48 out of 50 states
 - Also oversee nursing practice
 - Higher Education Boards (HEBs)
 - Also oversee all areas of higher education
 - Option used by the other 2 states



Purpose

1. Examine state undergraduate nursing accreditation standards for select cases
2. Identify differences and similarities within and across each selected regulatory body, state, and geographical region



Methods

- USM IRB approval
- Descriptive policy analysis
 1. Identified cases
 - a. BONs – New Jersey and Alabama
 - b. HEBs – New York and Mississippi
 2. Gathered accreditation standards from each state
 3. Developed policy analysis matrix that reflected major elements of the standards and SWOT components



Methods

- Descriptive policy analysis
 4. Reviewed standards first independently, entering data and interpretations into the template
 5. Collectively reviewed individual findings, interpreted results, and reconciled differences through an iterative process
 6. Examined results within and across regulatory body type, state, and region



Regulatory Body Type - Boards of Nursing

Differences

- Minimum program administrator and faculty qualifications
- Requirements published by the school
- Processes requiring student involvement
- Curriculum specificity
- Clinical agency involvement
- Faculty-student ratios
- Simulation clinical experiences
- Minimum NCLEX-RN pass rates
- Philosophy, mission, and organizing framework

Similarities

- No student admission requirements but require they are published
- Allowed for clinical experiences outside the state
- Resources
- Faculty responsibilities
- Annual reporting



Regulatory Body Type – Higher Education Boards

Differences

- Minimum program administrator, faculty, and preceptor qualifications
- Admission requirements
- Requirements published by the school
- Curriculum specificity
- Clinical experiences
- Simulation clinical experiences
- Faculty responsibilities
- Minimum NCLEX-RN pass rates
- Resources

Similarities

- Philosophy, mission, and organizing framework
- Faculty-student ratios
- Program evaluation



Results - State-Level Analysis

- Alabama
 - Extensive detailed guidance for curriculum, program evaluation, and student involvement
 - Less prescriptive regarding administrator and faculty qualifications, philosophy, mission, organizing framework, and objectives
 - No minimum admission requirements
 - Clinical agencies involved in setting faculty-student ratios
 - Sets requirements for RNs and faculty working with clinical students
 - Describes types of resources the institution should provide, but no definition of “sufficient support”
 - Provides guidance on calculating NCLEX-RN pass rates and requires graduates to take it within 6 months of graduation, but does not specify a minimum pass rate



Results - State-Level Analysis

- Mississippi
 - Specified faculty-student ratios, and only state to specify program ratios
 - Prescriptive regarding program administrator and faculty minimum qualifications and continuing education requirements
 - Only state that specified preceptor and non-nursing faculty minimum qualifications
 - Set minimum admission criteria, but allowed for admission of high-risk students who do not meet the criteria
 - Only state that limits clinical time spent in simulated experiences, requiring accreditation reviews when time exceeds 25%
 - No guidance regarding philosophy, mission, organizing framework, objectives, resources, and program evaluation
 - Sets minimum NCLEX-RN pass rates and degree completion rates
 - Only state that required detailed documentation for each standard



Results - State-Level Analysis

- New Jersey
 - Specified faculty control students' clinical experiences as opposed to healthcare agencies and are required to be involved in program evaluation
 - Only state that provided detailed guidelines regarding philosophy, mission, organizing framework, and objectives
 - Prescriptive regarding curriculum, policies, information required to be provided to students, and minimum NCLEX-RN pass rates
 - Indicated that financial resources be sufficient but did not define sufficient
 - Only state that does not follow national accreditation standards that require program routine reviews, including a self-study and site visit every 10 years unless issues are identified - NJ requires accreditation reviews every 8 years



Results - State-Level Analysis

- New York
 - Faculty control students' clinical experiences, not healthcare agencies
 - Congruence required between program objectives, instructional methods, and outcomes
 - Students should complete degrees in a reasonable timeframe and be fully informed about all costs involved in degree completion
 - Only state with language that was protective of students and faculty
 - Detailed numerous resources institutions are required to provide but did not define "sufficient"
 - Courses and curricular change required commissioner approval prior to implementation
 - Prescriptive regarding policies, curriculum, type of resources, student files, faculty responsibilities, information required to be provided to students, and minimum NCLEX-RN pass rates
 - Faculty workloads should be "reasonable" but did not define reasonable



Region - Northeast Differences

- Administrator educational qualifications
- Faculty qualifications
- Publication requirements
- Curriculum approval requirements
- Accreditation review timeline

Similarities

- Organizational structure
- Administrator authority
- Philosophy, mission, organizing framework, and objectives
- Faculty advancement and development
- Admission criteria
- Faculty-student clinical ratios
- No simulation requirements
- Specifies curriculum requirements



Region - Southeast

Differences

- Minimum faculty qualifications
- Admission criteria
- Faculty-student clinical ratios
- Curriculum
- Simulated clinical experiences requirements
- Resources
- Program evaluation
- NCLEX-RN pass rates
- Degree completion rates

Similarities

- Philosophy, mission, and organizing framework, and objectives
- Simulated clinical experiences



Take Home Points

- Many more differences than similarities
- Variations may increase vulnerability to underfunding, pressures for over-enrollment, clinical ratios that endanger patient safety, and overburden faculty
- Advantages and disadvantages to BONs versus HEBs
- Not all faculty qualification requirements are in line with current trends
- Requiring continuing education in states where it is not required for RN license renewal can ensure faculty development and promote quality education



Take Home Points

- Being more specific in state standards can ensure nursing programs are better resourced and staffed, which would likely improve program outcomes
- More flexibility with faculty-student ratios could promote innovation and maximize resources
- Being prescriptive regarding the percentage of simulated clinical experiences allowed can prevent overuse, but may suppress innovation
- Allowing more flexibility with clinicals outside the state of program origin could expand clinical opportunities and increase experience quality



Take Home Points

- Being extremely prescriptive can ensure consistency across programs but may minimize innovation
- Having state accreditation reviews in concert with national accreditation reviews increases efficiencies and decreases financial and personnel resource burden



Future Research

- Expand analysis to more states and regions
- Explore impact of these inconsistencies
- Analysis of graduate nursing education standards



Questions?

"Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction, and skillful execution; it represents the wise choice of many alternatives."

William A. Foster