

# Nurse Administrator Orientation



*Welcome Nurse Administrators!*



**Dr. Alison Bradywood**  
Executive Director  
(564-669-9688)



**Dr. Gerianne Babbo**  
Director, Nursing Education  
(360-791-4607)



**Dr. Sarah Bear**  
Nursing Education Consultant  
(360-489-5693)



**Dr. Kathy Bay**  
Nursing Education Consultant  
(564-669-4975)

# WABON Education Unit

**Dr. Mary Sue Gorski**  
Director, Advanced Practice &  
Research  
(360-915-3334)

**Reuben Argel**  
Nursing Assistant Programs  
360-819-0967

**Judy Soeum**  
Health Services Consultant  
(564-669-1015)

**Emily Mulanax**  
Administrative Assistant  
(360-724-1667)



# AGENDA

Topic		Slide #
1.	<b>Introductions</b>	4
2.	<b>Washington State Board of Nursing (WABON ) Roles and Responsibilities</b>	5
3.	<b>RCW vs. WAC</b>	8
4.	<b>Nursing Program Approval Panel (NPAP)</b>	12
5.	<b>Systematic Evaluation Plan (SEP)</b>	18
6.	<b>Incident Reporting</b>	28
7.	<b>Nursing Education Program Requirements</b>	33
	<i>Program</i>	34
	<i>Students</i>	37
	<i>Faculty</i>	40
	<i>Faculty Degree Exemption</i>	46

Topic		Slide #
8.	<b>Clinical &amp; Practice Experiences</b>	48
	<i>Requirements</i>	49
	<i>Ratios</i>	52
	<i>Proctors &amp; Preceptors</i>	53
9.	<b>Curriculum</b>	58
10.	<b>Substantive Change Requests (SCR)</b>	64
11.	<b>Nurse Technician</b>	70
12.	<b>Ongoing BON Actions</b>	78
13.	<b>Simulation &amp; Innovation</b>	84-87
14.	<b>Website &amp; Electronic Forms</b>	88-89
15.	<b>Contact Information</b>	90

# Purpose of the Orientation

- Provide brief overview of the Nursing Education WACs, BON, and the Nursing Program Approval Panels (NPAP)
- Promote understanding of the WACs for Nursing Education  
(246-840-500 to 246-840-571)
- Answer any questions

What would you like to learn today?

# **Washington State Board of Nursing (WABON)**

## **Roles and Responsibilities**



## Nursing Education Programs WABON Responsibilities

### Role: Protection of the Public

→ The WABON does so through its responsibilities in the review and approval of education programs.

### Responsibilities

1. Write Rules

2. Scope of Practice

3. Advisory Opinions

4. Interpretative Statements

5. Nursing Education

6. Licensing & Continuing Competency

7. Research

8. Discipline



## Role and Responsibilities continued...

Responsibilities, as stated in RCW 18.79.110:

- Approve nursing education programs
- Establish minimum standards
- Determine the need for size, type of program, and the geographical location
- Criteria for licensing by endorsement & those educated outside US
- Ability to write rules

# **RCW vs. WAC**



# RCW vs. WAC

Revised Code of Washington	Washington Administrative Code
Legislature develops	State Agency (BON) develops
Statutes = RCWs	Rules = WACs
Sets the direction for state agencies and rules	Developed according to prescribed laws for rule-making (RCW 34.05 APA)



Oh, Nurse Educator

Who writes WACs?  
Can you give an  
example?



Oh, Nurse Educator

What's another name  
for RCW?



# **Nursing Program Approval Panel (NPAP)**

# Nursing Education Panels

## **Nursing Program Approval Panel (NPAP) A**

Dr. Ajay Mendoza, Chair  
Dr. Sharon Fought, PT  
Patty Cochrell, PT  
Dr. Fionnuala Brown, PT  
Julie Benson, PT  
Dr. Teri Woo, PT

## **Nursing Program Approval Panel (NPAP) B**

Dr. Kim Tucker, Chair  
Ella Guilford, BONM  
Dr. Mary Baroni, PT  
Karen Joiner, PT  
Dr. Joan Owens, PT  
Dr. Cheryl Osler, PT

# Philosophy governing approval of nursing education programs.

## WAC 246-840-500

Quality nursing education provides foundation for safe and effective practice

Established minimum standards

Accessible

Promote student and faculty diversity

Flexibility developing and implementing its philosophy, purposes, objectives

Congruence in program activities with philosophy, purposes, objectives

# Purpose of Board of Nursing approval of nursing education programs.

## WAC 246-840-505



Assure preparation for safe & effective practice



Provide criteria for the approval, development, evaluation, and improvement of nursing education programs



Facilitate interstate endorsement of graduates from Board of Nursing approved programs



Graduates are educationally prepared for licensure



Distance learning programs equivalent to in-state



Assure international educated nurses' prep is equivalent to in-state programs

Located in post secondary educational institution

Approval of WSAC or SBCTC to grant degrees/certificates

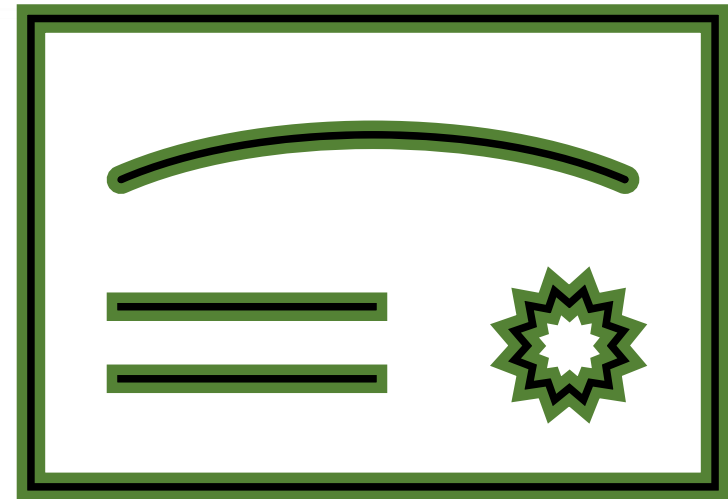
NE programs located in an institution approved by DoE as a regional or national accrediting body

On or before Jan. 1, 2020, all NE programs must have national accreditation; new programs within 4 years

NE programs not having national accreditation must disclose info to students in all publications

## Accreditation of Nursing Education Programs

**WAC 246-840-511**





A large, light gray circular graphic containing a stylized illustration of a hand holding a telephone receiver. The hand is orange and yellow, and the receiver is white with a red top. A black coiled cord extends from the bottom of the receiver. The background of the circle is a gradient from light gray at the top to a darker gray at the bottom. The overall slide has a white background with decorative elements: a blue circle in the top left, an orange circle in the middle left, a green line in the top right, and a green line in the bottom left. At the bottom center, there are yellow dashed lines and an orange circle.

Oh, Nurse Educator

Describe the  
composition of an  
NPAP

# **Systematic Evaluation Plan (SEP)**

# Standards and evaluation of nursing education programs.

## WAC 246-840-512



<b>Meet</b>	Meet minimum standards in WAC 246-840-511 through WAC 246-840-556
<b>Implement</b>	Implement a written, comprehensive, systematic plan for ongoing evaluation
<b>Assure</b>	Assure that program information that is communicated by the program is accurate, complete, and consistent

# The Systematic Evaluation Plan (SEP)

## Purpose

- ❖ It is the pathway that leads you from where you are now as a program to where you want to go...

What matters to your program?

How do you respond to barriers and failure?

How do you extend achievement into continual growth?



# The Systematic Evaluation Plan (SEP)



Based on outcomes data and input from multiple sources health care partners. from faculty, students, and consumers



Incorporates continuing improvement goals and measures goals and measure



Include evaluative criteria, methods used to evaluate, frequency of evaluation, assignment of responsibility, and measurable indicators or benchmarks of effectiveness for the nursing education program and instruction.

# The Systematic Evaluation Plan (SEP)

## Based on Outcomes

**Student  
attrition &  
completion  
rates**

**Facility,  
resource &  
service surveys  
by faculty and  
students**

**Faculty,  
student,  
graduate  
satisfaction  
surveys**

**Faculty  
workload  
surveys &  
evaluations**

# The Systematic Evaluation Plan (SEP)

## Based on Outcomes

**Program &  
student  
learning  
outcomes data,  
includes EPSLO**

**Didactic and  
clinical course  
effectiveness  
each time a  
course is taught**

**NCLEX  
Certification  
Examinations  
and trends**

## Example SEP

### Appendix E: Systematic Evaluation Plan

<b>STANDARD V: CULTURE OF LEARNING AND DIVERSITY – Curriculum and Evaluation Processes</b>							
<p>Faculty design program curricula to create a culture of learning that fosters the human flourishing of diverse learners through professional and personal growth and supports the achievement of expected student learning outcomes. Professional nursing standards and other professional standards appropriate to the program type are foundational curricular elements and are clearly integrated throughout the curriculum. Teaching, learning and evaluation processes take into consideration the diverse learning needs of students and are designed to support student achievement of learning outcomes. Distance learning programs are held to the same curricular, teaching/learning, and evaluation standards as campus-based programs. The program’s culture of learning and diversity related to the implementation of curriculum and teaching/learning/evaluation processes is evident through the creation of a positive learning environment and achievement of the following associated quality indicators.</p>							
Quality Indicators	Goal / Benchmark	Assessment Timeline	Assessment Methods	Analysis & Trending of Data	Goal or Benchmark met?	Quality Improvement (QI) Plan Action Plan	Location of Evidence Type & Date Responsible Persons
<b>V-I. Technology, including the use of distance education technology as applicable, is used effectively to support the teaching, learning, and evaluation process.</b>		<b>AY: 2022-23</b>  Student Exit Survey is administered in summer 2024 for 2022-23 cohort and results were reviewed in Summer 2024.  Faculty Satisfaction Survey is administered in fall quarter and results are evaluated the same fall.	Review and evaluate Student Exit Survey results.	Student survey results:  1. XX% of respondents agreed orientation to technology was available to me. (N=X/X) 2. XX% of respondents agreed that technology support was available to me. (N=X/X) 3. XX% of respondents agreed that information for technology requirements and policies for online education are clear, accurate, consistent, and accessible on the college website. (N=X/X)	N/A	Actions taken to address student survey results included:	Documents stored on network drive Annual SEP review and faculty meetings Catalog degree map Student exit survey results Faculty satisfaction survey results ADN, Tenured Faculty
			Review and evaluate Faculty Satisfaction Survey results.	Faculty survey results:  1. 83% of respondents agreed that orientation to instructional technology is available to me. (N=5/6) 2. 83% of respondents agreed that support in the use of instructional technology is available to me. (N=5/6)	1. Yes 2. Yes	Actions taken to address faculty survey results included:  a. New faculty are paired with a senior faculty to receive mentorship and training in their first quarter of teaching.	



Appendix E: Systematic Evaluation Plan

	<p>80% of students agree or strongly agree that:</p> <ol style="list-style-type: none"> <li>1. Orientation to technology was available to me.</li> <li>2. Technology support was available to me.</li> <li>3. Information for technology requirements and policies for online education are clear, accurate, consistent, and accessible on the college website.</li> </ol>	<p><b>AY: 2023-24</b></p> <p>Student Exit Survey is administered in summer 2025 for 2023-24 cohort and results were reviewed in Summer 2025.</p> <p>Faculty Satisfaction Survey is administered in fall quarter and results are evaluated the same fall.</p>	<p>Review and evaluate Student Exit Survey results.</p>	<p>Student survey results:</p> <ol style="list-style-type: none"> <li>1. XX% of respondents agreed orientation to technology was available to me. (N=X/X)</li> <li>2. XX% of respondents agreed that technology support was available to me. (N=X/X)</li> <li>3. XX% of respondents agreed that information for technology requirements and policies for online education are clear, accurate, consistent, and accessible on the college website. (N=X/X)</li> </ol>	N/A	<p>Actions taken to address student survey results included:</p>
	<p>80% of faculty agree or strongly agree that:</p> <ol style="list-style-type: none"> <li>1. Orientation to instructional technology is available to me</li> <li>2. Support in the use of instructional technology is available to me</li> </ol>		<p>Review and evaluate Faculty Satisfaction Survey results.</p>	<p>Faculty survey results:</p> <ol style="list-style-type: none"> <li>1. 93% of respondents agreed that orientation to instructional technology is available to me. (N=13/14)</li> <li>2. 93% of respondents agreed that support in the use of instructional technology is available to me. (N=13/14)</li> </ol>	<ol style="list-style-type: none"> <li>1. Yes</li> <li>2. Yes</li> </ol>	<p>Actions taken to address faculty survey results included:</p> <p>Continue to support faculty through mentorship model. The program also created lab and clinical lead roles to help mentor adjuncts in those courses and experiences.</p>
				<p>Review and evaluate Student Exit Survey results.</p>	<p>Student survey results:</p> <ol style="list-style-type: none"> <li>1. XX% of respondents agreed orientation to technology was available to me. (N=X/X)</li> <li>2. XX% of respondents agreed that technology support was available to me. (N=X/X)</li> <li>3. XX% of respondents agreed that information for technology requirements and policies for online education are clear, accurate, consistent, and accessible on the college website. (N=X/X)</li> </ol>	N/A

<p><b>AY: 2024-25</b></p> <p>Student Exit Survey is administered in summer 2026 for 2024-25 cohort and results were reviewed in Summer 2026.</p> <p>Faculty Satisfaction Survey is administered in fall quarter and results are evaluated the same fall.</p>	<p>Review and evaluate Faculty Satisfaction Survey results.</p>	<p>Faculty survey results:</p> <ol style="list-style-type: none"> <li>1. XX% of respondents agreed that orientation to instructional technology is available to me. (N=X/X)</li> <li>2. XX% of respondents agreed that support in the use of instructional technology is available to me. (N=X/X)</li> </ol>	N/A	<p>Actions taken to address faculty survey results included:</p>
--	---	--	-----	--

[Example SEP](#)

# The Systematic Evaluation Plan (SEP)

## Evaluation

Document analysis of  
data and action taken

Changes must be  
evidence-based

Evaluate evaluation  
methods



Oh, Nurse Educator

Why is utilizing a SEP  
so important for your  
nursing education  
program?

# Incident Reporting

# Reporting and Recordkeeping

## WAC 246-840-513

Report within two business days to BON (the form link is located on our website)

**Patient harm** Anything that impairs or adversely affects the health, safety, or well-being of the patient. Harm includes physical, mental, emotional and sexual, abuse, exploitation, neglect or abandonment.

**Unreasonable risk of patient harm** An act or failure to act, which is below the standard of care for what a reasonably prudent nurse would do in similar circumstances, thereby creating a risk of harm to the patient, whether or not actual harm resulted.

Diversion of legend drugs or controlled substances

Must also keep a log of:

Reports by patient, family, student, faculty, or healthcare provider addressing above

Any medication errors

Use the principles of just culture, fairness, and accountability in the implementation and use of all incident reporting logs Use these principles in implementation and use of all incident reporting logs to determine cause and contributing factors, prevent future occurrences, facilitate student learning, and for program improvement.

# North Carolina Board of Nursing (NCBON)

## STUDENT PRACTICE EVENT EVALUATION TOOL (SPEET)

Event(s): \_\_\_\_\_ Event Number: \_\_\_\_\_

Criteria	Human Error	At Risk Behavior			Reckless Behavior		Score
	0	1	2	3	4	5	
<b>G</b> General Nursing Practice	No prior counseling for practice related issues	Prior counseling for single non-related practice issue	Prior counseling for single "related" issue	Prior counseling for "same" issue	Prior counseling for multiple related or non-related practice issues	Prior counseling for same or related issue with no or little evidence of improvement	
<b>U</b> Understanding expected based on program level, course objectives/outcomes	Has knowledge, skill and ability - Incident was accidental, inadvertent, or an oversight	Task driven/rote learning or wrong action for this circumstance	Failed to demonstrate appropriate understanding of options/resources or Aware of safety issues but in this instance cut corners	Understands rationale but failed to recognize situations in terms of overall picture or to prioritize actions or in this instance, failed to obtain sufficient info or consult before acting	Able to recognize potential problems. In this instance "negligent" or failed to act according to standards. Risk to client outweighed benefits.	Knows or should have known correct action, role and limitations. In this instance action was "gross negligence/ unsafe act" and demonstrated no regard for patient safety.	
<b>I</b> Internal Program or Agency Policies/standards/inter-disciplinary orders	Unintentional breach or no policy/standard/order available	Policy not enforced or cultural norm or common deviation of staff or policy/order misinterpreted	Student cut corners or deviated in this instance from policy/standard/order as time saver. No evidence or suggestion of a pattern of behavior.	Aware of policy/standard/ order but ignored or disregarded to achieve perceived expectations of faculty, staff, patient or others. May indicate pattern or single event.	Disregarded policy/standard/order for own personal gain	Maliciously disregarded policy/standard/order	
<b>D</b> Decision/choice	Accidental/mistake/inadvertent error	Advantages to patient outweighed risk	Emergent situation - quick response required	Non-emergent situation. Chose to act/not to act without weighing options or utilizing resources. Used poor judgment.	Clearly a prudent student would not have done. Unacceptable risk to patient/agency/public. Disregard for patient safety.	Conscious choice. Put own interest above that of patient/agency/public. Egregious choice. Neglected red flags	
<b>E</b> Ethics/credibility/accountability	Identified own error and self-reported. Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Admitted to error and accepts responsibility. Identifies opportunities for improvement and develops action plan for ensuring incident will not be repeated.	Acknowledged role in error but attributes to circumstances and/or blames others to justify action/inaction. Cooperative during investigation. Demonstrates desire to improve practice.	Denies responsibility until confronted with evidence. Reluctantly accepts responsibility. Made excuses or made light of occurrence. Marginally cooperative during investigation.	Denied responsibility despite evidence. Indifferent to situation. Uncooperative and/or dishonest during investigation.	Took active steps to conceal error or failed to disclose known error.	

Criteria Score: \_\_\_\_\_

Mitigating Factors – check all identified	Aggravating Factors – check all identified
Unavailable resources (inadequate supplies/equipment)	Especially heinous, cruel, and/or violent act
Interruptions/chaotic environment/emergencies – frequent interruptions/distractions	Knowingly created risk for more than one client
Inadequate supervision by faculty or preceptor	Threatening/bullying behaviors
Inappropriate assignment by faculty or preceptor	Prior formal student disciplinary record for practice issue(s)
Non-supportive environment – interdepartmental/staff/student conflicts	Other (identify)
Lack of response by other departments/providers	
Other (identify)	
<b>Total # mitigating factors identified</b>	<b>Total # aggravating factors identified</b>

Criteria Score (from page 1)	
Mitigating factors (subtract 1 point for 1 – 3 factors; 2 points for 4 – 6 factors; and 3 points for 7 or more factors)	
Aggravating factors (add 1 point for each identified factor)	
<b>Total Overall Score</b>	

Human Error	At-Risk Behavior	Reckless Behavior
# criteria in green= ____	# criteria in yellow= ____	# criteria in red = ____
IF 3 or more criteria in Green OR Address event by consoling student and/or improvement plan with student	IF 3 or more criteria in yellow OR Address event by coaching student, and/or developing remedial improvement plan with student	IF 3 or more criteria in red OR Consider disciplinary action and/or remedial event with student

Evaluator: \_\_\_\_\_

School Name: \_\_\_\_\_

Date of Event: \_\_\_\_\_

NCBON Consultant: \_\_\_\_\_

Action Taken: \_\_\_\_\_

**NOTE: This SPEET is NOT used if event involves misconduct such as: academic cheating, confidentiality, fraud, theft, drug abuse, diversion, boundary issues, sexual misconduct, mental/physical impairment. Instead, these are managed through established mechanisms outside of this clinical framework.**

Human Error = Inadvertently doing other than what should have been done; a slip lapse, mistake.  
 At-Risk Behavior = Behavioral choice that increases risk where risk is not recognized or is mistakenly believed to be justified.  
 Reckless Behavior = Behavioral choice to consciously disregard a substantial and unjustifiable risk.  
 Consoling = Comforting, calming, supporting student while examining event.  
 Coaching = Supportive discussion with the student on the need to engage in safe behavioral choices.  
 Remedial Action = Actions taken to aid student including education, training assignment to program level-appropriate tasks.  
 Counseling = A first step disciplinary action; putting the student on notice that performance is unacceptable.  
 Disciplinary Action = Punitive deterrent to cause student to refrain from undesired behavioral choices.





## Washington State Board of Nursing Incident Report Form

Per [WAC 246-840-513](#) use this form to report events involving a student or faculty member that the program has reason to believe resulted in patient harm, an unreasonable risk of patient harm, or diversion of legend drugs or controlled substances.

The Washington State Board of Nursing (WABON) collects this data and uses it in accordance with [WAC 246-840-513](#). The WABON may also publish reports using unidentifiable aggregate data from this form.

For assistance filling out this form, please contact the WABON Education Unit at [WABONEducationUnit@doh.wa.gov](mailto:WABONEducationUnit@doh.wa.gov).

Information collected via this form may be subject to release in accordance with [RCW 42.56](#) (Public Records Act).

Incident Report Form	
<b>1. Program Information</b>	
<b>Program Name:</b> Click or tap here to enter text.	<b>Name of Person Filling the Form:</b> Click or tap here to enter text.
<b>Email Address:</b> Click or tap here to enter text.	<b>Phone Number:</b> Click or tap here to enter text.
<b>2. Incident Information</b>	
<b>Incident Date:</b> Click or tap to enter a date.	<b>The name of students(s) or faculty members involved in the event:</b> Click or tap here to enter text.
	<b>The name of the clinical faculty member responsible for the student's clinical experience:</b> Click or tap here to enter text.
<b>Did the incident involve a nurse preceptor?</b> <input type="checkbox"/> Yes, the incident involved a nurse preceptor. If yes, enter the number of years of nursing experience: Click or tap here to enter text. <input type="checkbox"/> No, the incident did not involve a nurse preceptor.	
<b>Did the incident involve a staff nurse?</b> <input type="checkbox"/> Yes, the incident involved a staff nurse. <input type="checkbox"/> No, the incident did not involve a staff nurse.	
<b>What shift was the student working when the incident occurred?</b> Click or tap here to enter text.	<b>How far into the shift did the incident occur?</b> Click or tap here to enter text.



## Washington State Board of Nursing Incident Report Form

Select the type of incident from the list:

1. Unreasonable risk of harm: An act or failure to act, which is below the standard of care for what a reasonably prudent nurse would do in similar circumstances, thereby creating a risk of harm to the patient, whether or not actual harm resulted.
2. Patient harm: Anything that impairs or adversely affects the health, safety, or well-being of the patient. Harm includes physical, mental, emotional and sexual abuse, exploitation, neglect, or abandonment.
3. Alleged diversion of legend or controlled substances: A claim or assertion that an individual misappropriated any legend drug or controlled substance.
4. Other:  
Please describe if the incident does not fall under one of the above categories

### 3. Incident Description

Enter a description of the incident:

Description of the incident

What immediate actions were taken as a result of this incident?

Description of corrective action

What was the patient plan of care and patient outcome as a result of this incident?

Description of patient outcome

Was a root-cause analysis of the incident completed and logged?

Yes     No, but will complete analysis and log by (estimated date): Click or tap to enter a date.

Was a student remediation plan developed?  Yes  No

If yes, describe the student remediation plan below:

Description of remediation plan

Please submit a completed form to [WABONEducationUnit@doh.wa.gov](mailto:WABONEducationUnit@doh.wa.gov).

## Oh, Nurse Educator

Why do we use a just culture model in nursing practice and education?

Describe situations where you would use mandatory reporting to the BON.



# **Nursing Education Program Requirements**

## Nursing Education Programs WAC Requirements

### **WAC 246-840-514**

#### **Purpose and outcomes for approved nursing education programs.**

- 1) Stated Clearly, available in writing to the public
- 2) Consistent with expectations in chapter 18.79 RCW and WACs 246-840-...
- 3) Expected outcomes consistent with parent institution and accepted nursing standards
- 4) **Includes input of stakeholders in developing and evaluating the purpose and expected outcomes of the program.**

# Nursing Education Programs WAC Requirements

## **WAC 246-840-516**

### **Organization & Administration for all programs**

- 1) Integral part of accredited parent institution
- 2) Parent institution shall provide financial support and resources
- 3) Nursing faculty and students contribute to academic policies and procedures, curriculum and evaluation
- 4) Qualified nurse administrator with clear institutional authority and administrative responsibilities



Oh, Nurse Educator

Why does the public  
need to know the  
purpose and expected  
outcomes of the nursing  
program?

Students  
WAC Requirements

**WAC 246-840-519**

**Student Requirements, all programs**

*Should be reflected in the Student Handbook!*

- 1) Professional behavior including academic honesty and integrity
- 2) Written policies and procedures available and communicated
- 3) Lists multiple policies and procedures: questions on these?

Examples: admission, progression, dismissal of students; student rights and responsibilities; medication administration and faculty role; clinical practice expectations; direction on licensing exam and so on

Students  
WAC Requirements

**WAC 246-840-521**

**Student Requirements, prelicensure**

**Provide written information on the legal role of Nursing  
Technician  
(prior to completion of first clinical course)**

**More on this coming up!**

Students  
WAC Requirements

**WAC 246-840-522**

**Student Requirement, RN to BSN and Graduate**

- 1) Nursing student must be licensed as an RN in each state, or obtain an MSL, where practice experiences occur
- 2) Must provide graduate students information on national certification requirements as appropriate

## Faculty WAC Requirements

### **WAC 246-840-523**

#### **Faculty Requirements, all programs**

##### 7) Faculty Responsibilities

- a) Input into purpose and outcomes
- b) Curriculum
- c) Policies
- d) Academic advising/guidance
- e) Evaluating student achievement
- f) Selecting, guiding evaluating student learning activities
- g) Activities to improve own competence
- h) Clinical site selection/evaluation



Faculty  
WAC Requirements

**WAC 246-840-524**

**Faculty Degree Requirements, PN**

**Minimum of baccalaureate degree  
with a major in nursing**

Faculty  
WAC Requirements

**WAC 246-840-526**

**Faculty Degree Requirements, prelicensure or RN to BSN**

- 1) Minimum of a graduate degree in nursing  
OR
- 2) Bachelor's degree in nursing AND graduate degree in health or education related field

Faculty  
WAC Requirements

**WAC 246-840-527**

**Faculty Degree and Licensing Requirements, APRN**

- 1) Active, unencumbered WA state APRN license
- 2) Minimum of a graduate degree in nursing
- 3) Two years of clinical experience as a nurse practitioner, nurse midwife, nurse anesthetist or CNS and
- 4) Current knowledge, competence, and certification in the role

Faculty  
WAC Requirements

**WAC 246-840-528**

**Faculty Degree Requirements, Graduate not APRN**

1) Graduate degree in nursing at or above the program level being taught

OR

2) Bachelor's degree in nursing AND graduate degree in health or education related field

AND

3) Demonstrated specialization, expertise, or preparation and experience for course being taught



Oh, Nurse Educator

How would the NA  
document the faculty  
requirements?

# Exception to nursing faculty degree requirement, prelicensure

## WAC 246-840-529

- (1)(a) Despite aggressive recruitment efforts, it has been unable to attract properly qualified faculty

*Provide job announcement*

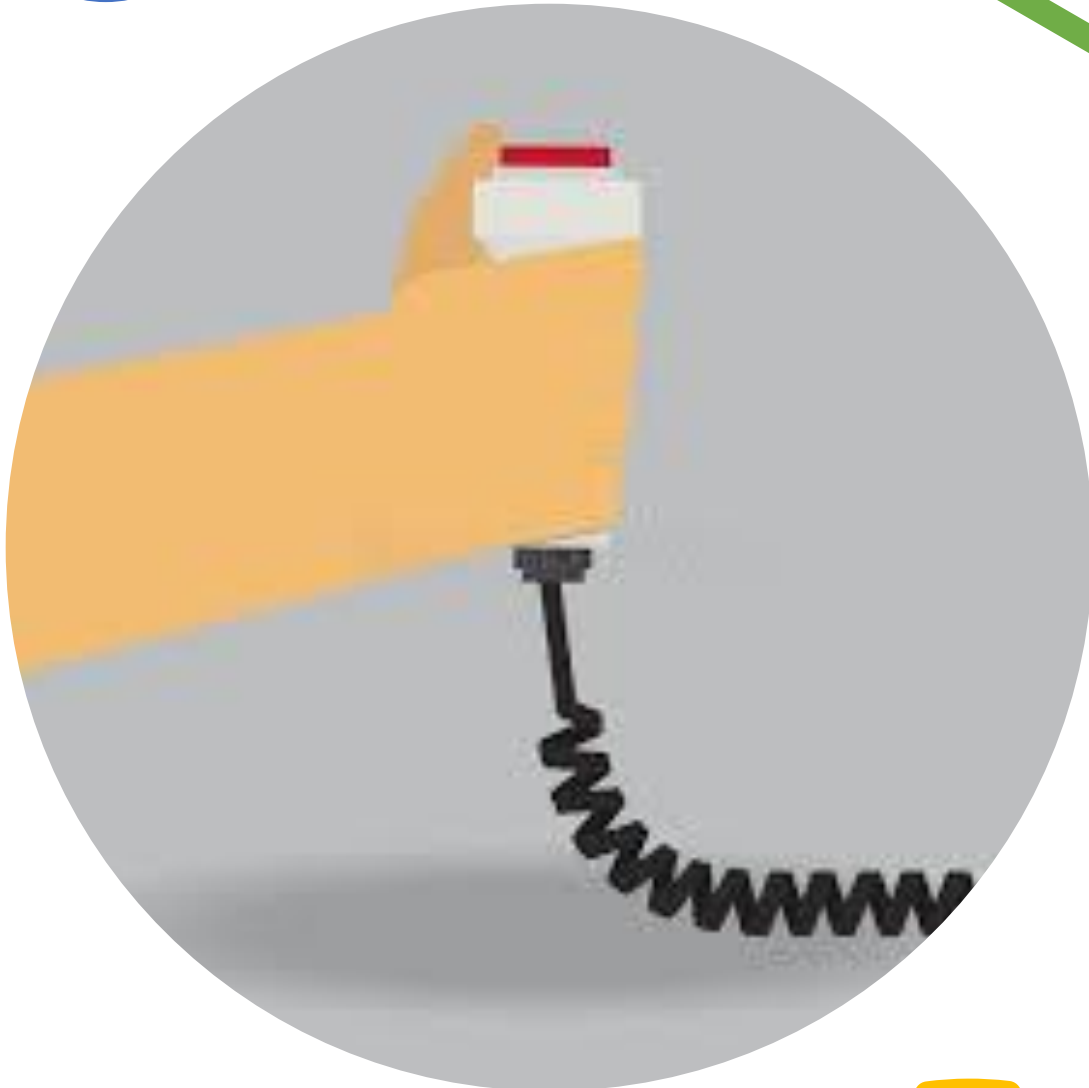
### **Classroom or Laboratory**

- (1)(b) Teach ONE year or less OR be currently enrolled in nursing, health related, or education related graduate program

### **Clinical**

- Minimum of baccalaureate with major in nursing
- Current clinical experience of at least **three** years in clinical **subject**



A circular inset image showing a hand holding a telephone receiver. The hand is yellow, and the receiver is white with a red top. A black coiled cord is attached to the bottom of the receiver. The background of the circle is light gray. The overall slide has a white background with decorative elements: a blue circle in the top left, a green line in the top right, a green line in the bottom left, and a yellow sun-like shape with an orange circle at the bottom center.

## Oh, Nurse Educator

Are any of the following qualifications eligible for a faculty waiver?

- BSN with 1 year of clinical experience.
- ADN with 3 years of clinical experience.
- An ADN graduate who is in the first quarter of an ADN-DNP program.

# **Clinical & Practice Experiences**



## Clinical and Practice Experiences WAC Requirements

### **WAC 246-840-531 (1)**

#### **Clinical and Practice Experiences**

- 1)(a) Faculty planned clinical or practice experiences supporting program outcomes
- i. 300 hours for PN
  - ii. 500 hours for associate degree
  - iii. 600 hours for BSN
  - iv. 500 hours for Master's level nurse practitioner
  - v. 1000 hours for doctoral level nurse practitioner
- 1)(c) Skills lab **does not count** towards these hours!

## Clinical and Practice Experiences WAC Requirements

### **WAC 246-840-531(2)**

#### **Clinical and Practice Experiences**

2)(a) Post licensure-faculty planned practice experiences supporting program outcomes.

2)(b)

i. 100 hours for RN to BSN nursing education programs

ii. 100 hours for Graduate nursing education programs

3) Faculty plan experiences based on prep and skill level of student

4) Faculty plan, oversee, and evaluate student experiences

***Practice Experience examples: indirect and direct patient care, patient or population teaching, leadership and change projects, QI projects***

## **Automated Drug Delivery Devices (ADDD)**

# **WAC 246-945-450**

*Need a Policy for Students*

If a facility provides a clinical opportunity for nursing students enrolled in a Washington state nursing BON approved nursing program, a nursing student may access the ADDD only under the following conditions:

- 1) Nursing programs shall provide students with orientation and practice experiences that include demonstration of competency of skills prior to using an ADDD;
- 2) Nursing programs, health care facilities, and pharmacies shall provide adequate training for students accessing ADDD; and
- 3) The BON approved nursing programs, health care facilities, and pharmacies shall have policies and procedures for nursing students to provide medication administration safely, including:
  - a) Access and administration of medications by nursing students based on student competencies;
  - b) Orientation of students and faculty to policies and procedures related to medication administration and distribution systems; and
  - c) Reporting of student medication errors, near misses and alleged diversion.

# Faculty to Student Ratios

WAC 246-840-532

## PN & Prelicensure:

1:10 in direct patient care clinical settings

1:15 for practice experiences that are observational or precepted and for skills practice lab

## RN to BSN

1:15 in clinical and practice settings

## Advanced registered nurse practitioner programs

1:6 in clinical and practice settings

## Graduate Nursing education programs (not leading to APRN)

1:15 in clinical and practice settings

Preceptors, Proctors definitions  
WAC 246-840-533

**Preceptors and Proctors are used to enhance clinical AFTER nursing program adequately prepares students, confirmed by faculty**

1)

- a) **Preceptor:** practicing licensed nurse providing instruction & supervision
- b) **Interdisciplinary preceptor:** practicing HC provider providing instruction and supervision
- c) **Proctor:** hold active credential in an identified profession  
RCW 18.130.040 – monitors students during exam, skill, or practice delivery

## Preceptors, Proctors definitions WAC 246-840-533

### **Preceptors will:**

- Precept no more than 2 students at any one time
- Have an active, unencumbered license at or above student level
- At least ONE year of clinical practice as licensed nurse at or above student level
- Be oriented to the course and student learning objectives
- Be oriented to the role expectations of faculty, preceptor, and student
- Are not a member of student's immediate family

## Preceptors, Proctors definitions WAC 246-840-533

### **Interdisciplinary preceptors will:**

- Have an active, unencumbered license in area of practice
- Have the educational preparation and at least ONE year of experience
- Be oriented to the course and student learning objectives
- Be oriented to the role expectations of faculty, preceptor, and student
- Is not a member of student's immediate family

## Preceptors, Proctors definitions WAC 246-840-533

### **Proctors will:**

- Have educational and experiential preparation for task or skill being proctored
- Have an active, unencumbered credential in one of the identified professions (RCW 18.130.040)
- Be used on rare, short-term occasions. Faculty has deemed safe for student to receive direct supervision from the proctor
- Is not a member of the student's immediate family

### **Nursing education faculty are:**

- Responsible for supervision AND evaluation
- Must confer with each preceptor AND student at least once during the beginning, middle, and end of the course.



**(7) A practice/academic partnership model may be used to permit practice hours as a nursing technician, as defined in WAC 246-840-010(30), to be credited toward direct care nursing program clinical hours, and academic credit.**

## Oh, Nurse Educator

How often and when does a nurse preceptor, student, and faculty confer?

- a) Twice during the preceptorship, anytime.
- b) Three times during the preceptorship, anytime.
- c) Three times, beginning, middle, and end.

# Curriculum

**Curriculum  
WAC Requirement**

**Curriculum, all**

**WAC 246-840-537**

**Curriculum will be**

- 1) Sufficient for students to develop knowledge, skills and professional identity for their education preparation level
  
- (4) Clinical and practice experiences must provide opportunities to care for diverse ethnic and cultural backgrounds
  
- (7) External nursing examinations can not be the sole basis for progression/graduation.

## Curriculum WAC Requirement

### Curriculum, PN

#### WAC 246-840-539

#### **Curriculum will**

- (1) Include prerequisite classes transferable to colleges and universities in WA
- (2) Be planned, implemented, and evaluated by faculty
- (5) Provide a systematic approach to clinical decision making
- (6)(d) teach scope of practice decision tree
  - (g) concepts and clinical in geriatrics, med-surg, mental health across lifespan
  - (h) concepts of ante/intra/postpartum and newborn care. Assisting role L&D
- (8)(b) PN programs teaching IV therapy shall prepare graduates for national certification

## Curriculum WAC Requirement

### Curriculum, prelicensure

#### WAC 246-840-541

#### **Curriculum will**

- 1)(c) include theory and clinical in med-surg and mental health across lifespan using a systematic approach to clinical decision making
- (d) include scope of practice decision tree
- (f) planned, implemented, and evaluated by faculty

#### **Baccalaureate and Master's also will include:**

- (2)(a) theory and clinical in community and public health
- (b) research principles and application of statistics
- (c) leadership, IDT coordination, QI, care coordination/case management
- (3)(b) Include clinical experiences at each stage of the human life cycle with opportunities to provide direct care for those with acute and chronic illnesses, pharmacological and parenteral therapies, and pain management.

Curriculum  
WAC Requirement

**Curriculum, RN to BSN; Masters in Nursing Education**

**WAC 246-840-542**

Curriculum will

- (1) Not duplicate diploma or associate degree courses or content
- (2) Provide sufficient exposure to science and liberal arts
- (3) Allow student to apply new concepts at the bachelor's or master's level (WAC 246-840-541)
- (4) Include course or content related to role differences and transitions



## Oh, Nurse Educator

Who owns the curriculum?

How can that be reflected  
for approval/accreditation  
site visitors?



# **Substantive Change Requests (SCR)**

# Substantive Change Requests (SCR)

WAC 246-840-554

## **(3) Submitted at least three months prior to implementation**

### **Examples of why you'd submit a SCR**

- (a)(i) Institutional changes: legal status, ownership, resources
- (ii) Faculty below required levels for clinical
- (iii) Faculty expertise/experience are not adequate
- (iv) Changes in number of students admitted requiring one or more additional clinical or practice groups or faculty to student ratio concerns

### **Other examples needing SCR**

Major curriculum revision (delivery method, conceptual framework)

Changes in curriculum meaning- program goals, terminal objectives, course objectives and descriptions

Change in total program credits or addition/deletion of satellite campus

**Note: Moving content from one course to another does not need SCR**

**Information provided must include letter of explanation, rationale and anticipated effect on program (faculty workload, students, resources, clinical experiences), timeline, evaluation plan**



## Washington State Nursing Program Substantive Change Request

<b>Name of Nursing Program, College, or University</b> <i>Click or tap here to enter text.</i>	<b>Program (Track)</b> <i>Click or tap here to enter text.</i>
<b>Date Submitted</b> <i>Click or tap to enter a date.</i>	<b>Date for proposed change to be effective</b> <i>Click or tap to enter a date.</i>
<b>Nurse Administrator/Program Director</b> <i>Click or tap here to enter text.</i>	<b>Provost of Institution's Email</b> <i>Click or tap here to enter text.</i>
<b>President of Institution's Email</b> <i>Click or tap here to enter text.</i>	<b>Vice President of Instruction's Email</b> <i>Click or tap here to enter text.</i>
<p>The Nursing program listed above is requesting approval from the Washington State Board of Nursing for the following Substantive Change. See <a href="#">WAC 246-840-554(3)</a>.</p> <p><b>Changes that do not require board approval: Movement of content from one course to another; formatting changes in syllabi.</b></p>	
<p>Change in (check all that apply)</p> <p><input type="checkbox"/> Legal status, control, ownership or resources of the institution</p> <p><input type="checkbox"/> Faculty composition of clinical or clinical simulation</p> <p><input type="checkbox"/> Faculty composition when experience or experiences are not adequate to teach these specific areas</p> <p><input type="checkbox"/> Required faculty to student ratios in clinical</p> <p><input type="checkbox"/> The number of students admitted</p> <p><input type="checkbox"/> Addition or deletion of a satellite or extended campus</p> <p><input type="checkbox"/> Major curricular revision or changes in the length of the program</p> <p><input type="checkbox"/> Program credits</p> <p><input type="checkbox"/> Curricular delivery method</p> <p><input type="checkbox"/> Nursing model or conceptual framework</p> <p><input type="checkbox"/> Curriculum that changes the meaning or direction of the curriculum</p> <p><input type="checkbox"/> Curricular scope and sequence. (Include course number, description, outcomes, and topical outlines)</p>	
<p><b>I attest that the information provided to the Washington State Board of Nursing accurately reflects nursing program credits and curriculum.</b></p>	
<hr/> <b>Signature of Nurse Administrator</b>	<hr/> <b>Date</b>

### Substantive Change Request (SCR) Brief Summary of Intent

**Instructions for Completion:**

1. *Hover your cursor over bolded titles to view "cues" on things to consider when completing each section. Be succinct in your responses.*
2. *Review the WAC criteria by clicking on the provided link below.*
3. *In some sections you will have the opportunity to share a narrative and/or insert or fill in a table. Please use whichever format fits the needs of your program change.*

[WAC 246-840-554\(3\)](#) Any proposed substantive nursing education program change must be presented to the commission for approval at least three months prior to implementation.

**Explanation** WAC 246-840-554(3)(b)(i)

*Click here to briefly explain your SCR. (Hover over "explanation" for more information.)*

**Rationale** WAC 246-840-554(3)(b)(ii)

*Click here to briefly explain the rationale for your SCR. (Hover over "rationale" for more information.)*

### Anticipated Effect of SCR on Program

**Faculty workload**

*Click here to enter a narrative for how the SCR would affect the current faculty workload OR insert your own workload document. (Hover over "faculty workload" for more information.)*

*Optional: To highlight specific changes, you may use the table below in addition to or in place of the above narrative.*

Current Faculty Workload	Faculty Workload After Change
<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>

**Students**

*Click here to explain the impact that the SCR will have on students. (Hover over "students" for more information.)*

**Resources**

*Click here to enter a narrative for how the SCR will impact or enhance current resources for your program. (Hover over "resources" for more information.)*

**Facilities**

*Click here to enter a narrative for how your SCR will impact or enhance your current program facilities. (Hover over "facilities" for more information.)*

### Clinical or Practice Experiences

[Click here to enter a narrative for how your SCR will impact or enhance your program's clinical or practice experiences. \(Hover over "clinical or practice experiences" for more information.\)](#)

Optional: To highlight specific changes, you may use the table below in addition to or in place of the above narrative. Click on individual boxes to add content.

Course/Clinical Placement	Credits/Clinical Hours	Student/Faculty Ratio	Instructor	Time
<a href="#">Click in each box</a>	.	.	.	.
.	.	.	.	.
.	.	.	.	.
.	.	.	.	.
.	.	.	.	.
.	.	.	.	.
.	.	.	.	.

### **Summary** WAC 246-840-554(3)(b)(iii)

[Click here to provide a summary explaining the difference between the current practice and proposed change if applicable. Use the space below to provide a table/grid if necessary.](#)

[In addition to or in place of the narrative above, you may insert a table or grid here. To insert, copy table from original document, right click in this box, select paste "keep source formatting".](#)

### **Timeline** WAC 246-840-554(3)(b)(iv)

[Click here to enter your program's timeline for implementation of the change.](#)

### **The methods of evaluation to be used to determine the effect of the change**

WAC 246-840-554(3)(b)(v)

[Click here to enter the methods of evaluation to be used to determine the effect of the change. \(Hover over "methods" for more information\)](#)

**Before submitting, please hover to review helpful information.**

Please email your submission of this document to [WABONEducationUnit@doh.wa.gov](mailto:WABONEducationUnit@doh.wa.gov).

## Table of Contents

<b>Table of Contents</b>	<b>2</b>
<b>Section One: Program Overview</b>	<b>3</b>
<b>General Information</b>	<b>3</b>
<b>Introduction</b>	<b>4</b>
Clover Park Technical College Nursing Program – Governing Organization and Community	4
Nursing Student Population	4
Current Faculty Cohort	5
Program Length and Delivery	5
<b>Section Two: Curriculum Change to the Practical Nursing Program</b>	<b>6</b>
<b>Summary of Proposal</b>	<b>6</b>
Situation:	6
Background:	6
Assessment	7
Recommendation	7
<b>Nursing Program Mission, Vision and Goals</b>	<b>8</b>
<b>Admission to CPTC Nursing Program</b>	<b>9</b>
Practical Nursing Application Process	10
Prerequisite Courses	10
<b>Practical Nursing Program Curriculum</b>	<b>10</b>
<b>Section Three: Appendices</b>	<b>12</b>
Appendix A – Anticipated Program Effects	12
Appendix B – Crosswalk of WAC 246-840-539 and PN Curriculum	13
Appendix C – Summary Grid: Current Practice vs. Proposed Change	14
Appendix D – Timeline for Implementation of Change	15
Appendix E – Methods of Evaluation	16
Appendix F: Program Outcomes and Practical Nursing Curriculum Map	17
Appendix G: Complete Teachout Timeline	24
Appendix H – Clover Park Technical College Assessment Plan Learning	29
Appendix I - Distance Learning Alignment for Hybrid Courses: WAC 246-840-546	30
Appendix J: Disease Process and Pharmacotherapy Content	36
Appendix K: Lab Skills by Quarter	42
Appendix L: Program Learning Outcomes, CPTC Core Abilities and NLN Course Crosswalk	43
<b>Section Four: References</b>	<b>46</b>

Oh, Nurse Educator

**How far in advance  
should a SCR be  
submitted?**

- a) 6 months
- b) 1 month
- c) 3 months

# **Nurse Technician**

# Nurse Technician WAC Requirements

## Definitions

### WAC 246-840-010

30) "Nursing technician"(NT) means a nursing student preparing for RN/LPN licensure who meets the qualifications for licensure under RCW 18.79.340

- NT is employed in a hospital licensed under chapter 70.41 RCW
- or a nursing home licensed under chapter 18.51 RCW, or clinic.

16) "Good standing" as applied to a nursing technician, means the nursing technician is enrolled in a registered nursing program approved by the BON and is successfully meeting all program requirements.



# Nurse Technician WAC Requirements

## **Educator Responsibilities**

### **WAC 246-840-521**

The nursing education program shall provide the student in a prelicensure registered nursing program with:

- 1) Written information on the legal role of the nursing technician as defined in WAC 246-840-010 and 246-840-840
- 2) The information must be provided prior to the time of completion of the first clinical course and shall clearly advise the student of his or her responsibilities, if he or she chooses to be employed as a nursing technician.
- 3) Provide to the employer and the BON written documentation when a nursing technician is no longer considered to be in good standing as defined in WAC 246-840-010(16).



## Nurse Technician WAC Requirements

### Employers Responsibilities

WAC 246-840-890

- 1) Verify enrollment in a nursing program
- 2) Verify that the nursing technician continues to qualify as a nursing technician and continues to be in good standing within three weeks of completion of each academic term (semester or quarter).
- 3) Obtain and maintain written documentation of the specific nursing functions that the nursing technician may perform from the approved nursing program.
- 4) Follow their own guidelines, policies, principles and procedures relating to nursing technicians.

## Nurse Technician WAC Requirements

### **Supervising RN**

**WAC 246-840-880**

- 1) Is accountable at all times for the client
- 2) Is responsible at all times for the nursing process ...
- 3) Maintains awareness of care activities & client assessment
- 4) Shall be immediately available at all times to the nursing technician.
- 5) Shall have knowledge of the specific functions a nurse technician can perform.

**Nursing Technician Registration  
Education Verification**

Complete section one and two of this form and have your school complete section three.

<b>Section One— Demographic - To be completed by the applicant.</b>			
Name (First, Middle, Last):			
Birth date:	E-mail address:		
Address:		City:	
State:	ZIP code:	Phone number:	
<b>Section Two—Employment Information - To be completed by the applicant.</b>			
Name of Hospital, clinic, or nursing home:			
Location of Hospital, clinic, or nursing home:			
<b>Section Three—To be completed by your nursing school.</b>			
Name of Director of Nursing or Designee:			
Job of person authorized to sign for nursing school:			
Name of nursing school:			
Address:		City:	
State:	ZIP code:	Phone number:	
<input type="checkbox"/> Currently enrolled in good standing in a registered nurse bachelor of science or associate degree program (passing all courses required for the registered nurse program.)			
<input type="checkbox"/> Currently enrolled in good standing in a license practical nurse program (passing all courses required for the licensed practical nurse program.)			
Anticipated graduation date _____ (mm/dd/yyyy)			
Graduated on _____ (mm/dd/yyyy)			
I certify the above information is a true and accurate reflection of the enrollment records for this nursing technician applicant.			
Signature of Director of Nursing or Designee: _____			Date: _____

**Nursing Technician Registration  
Employer Verification**

Please complete section one of this form and forward to your employer to complete section two.

<b>Section One—To be completed by the applicant.</b>		
Name of Applicant:	Date of Birth:	
Address:		
City:	State:	Zip Code:
<b>Section Two—To be completed by the employer.</b>		
Name of Director of Nursing or Designee:		
Job Title:	Phone (enter 10 digit #):	
Name of hospital, clinic, or nursing home:		
Address:		
City:	State:	Zip Code:
Check one:		
<input type="checkbox"/> Hospital licensed under <a href="#">chapter 70.41 RCW</a> <input type="checkbox"/> Nursing home licensed under <a href="#">chapter 18.51 RCW</a>		
<input type="checkbox"/> Clinic— list type of clinic. _____		
I certify the above named individual has been offered a position at our facility to perform as a nursing technician registered under <a href="#">chapter 18.79 RCW</a> .		
Signature of Director of Nursing or Designee:		Date:

# Student Responsibilities

WAC 246-840-870

- 1) May function only under the direct supervision of a registered nurse who has agreed to act as supervisor and is immediately available.
- 2) May gather information about patients and administer care to patients.
- 3) May not assume ongoing responsibility for assessments, planning, implementation, or evaluation of the care of patients.
- 4) May never function independently, act as a supervisor, or delegate tasks to licensed practical nurses, nursing assistants, or unlicensed personnel.
- 5) **May not administer** chemotherapy, blood or blood products, intravenous medications, scheduled drugs, nor carry out procedures on central lines.
- 6) **May not perform** any task or function that does not appear on the verification sent to the nursing technician's employer by the nursing program in which the nursing technician is enrolled.

If the nursing technician is requested to perform any task not verified by the nursing program, the **nursing technician must inform their supervisor that the task or function is not within their scope and must not perform the task.**



Oh, Nurse Educator

What is the  
responsibility of the NP  
regarding NT?

# Ongoing BON Actions

## Ongoing BON Actions

### Approval of NE Programs

#### WAC 246-840-556 & 246-840-558

- BON may accept accreditation from a DoE recognized nursing accreditation body
- Program must submit copies of documents submitted to CCNE, CNEA, ACEN at the time self study is sent to the accrediting body
- Submit to the BON within 30 days all documents received from the accrediting body
- Notify the BON of change in program or institution accreditation within 30 days
- BON may grant approval not to exceed 10 years

## Ongoing BON Actions

### Program Reviews

- 5 – 10 years
- Complaints
- Loss of Accreditation
- Failure to obtain BON approval for substantive changes
- Providing false or misleading information to students or the public
- Inability to secure or retain a qualified director or faculty.
- Noncompliance with the program's stated purpose, objectives, policies, and curriculum.
- Failure to provide clinical experiences necessary to meet the objectives of the nursing program.
- Faculty student ratio in direct patient care greater than 1:10.
- Failure to maintain an average NCLEX® examination annual passing rate of eighty percent.



## BON Actions

### Notification

- Letter of Decision
- Letter of Determination

## BON Actions

### **Program Right to Appeal (RCW 34.05)**

#### **WAC 246-840-562**

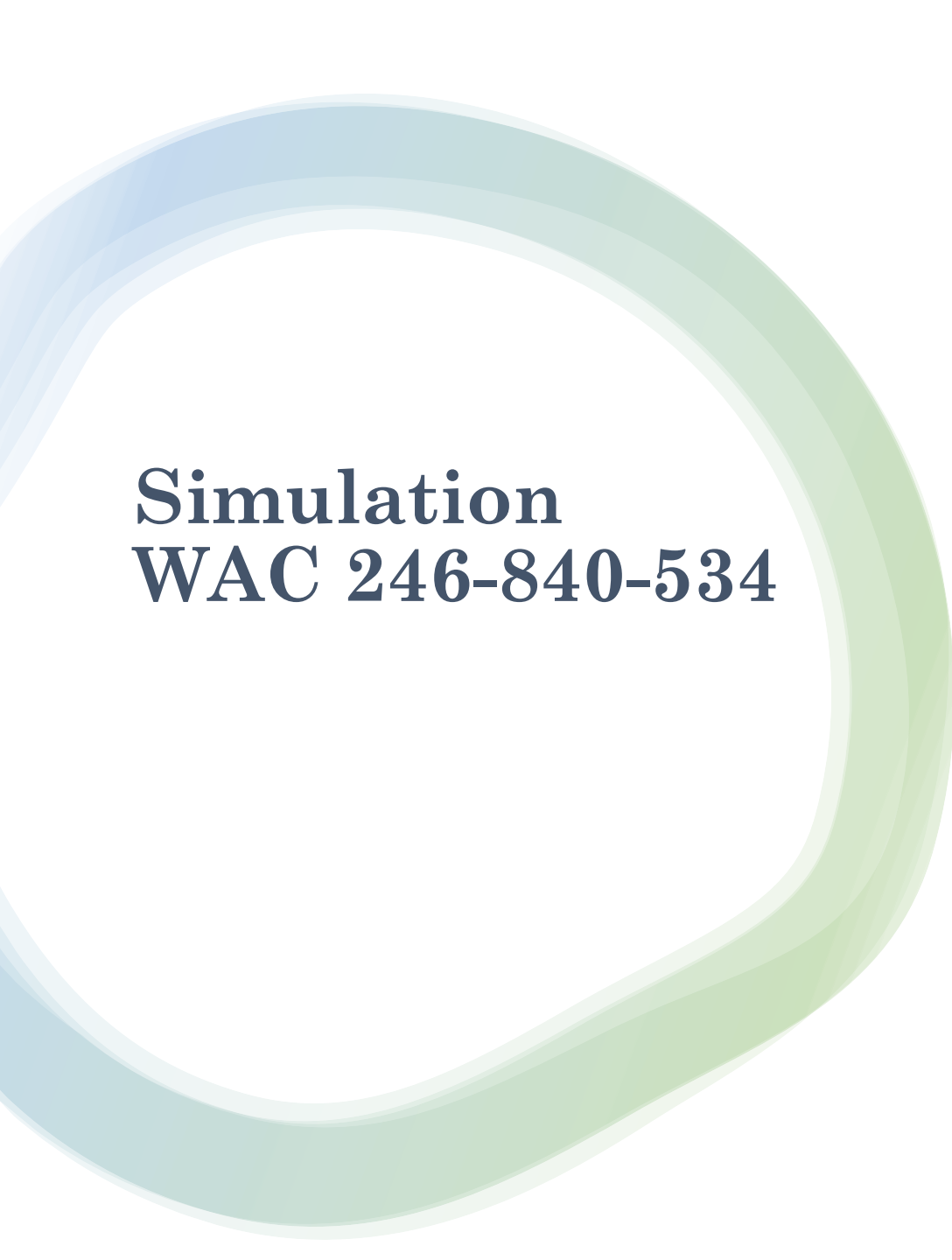
- Not Letters of Decision or Statement of Deficiencies
  
- Yes, to Letters of Determination
  - Directions on appeal process included in letter.

## BON Actions

### Approval Outcomes

- Recommendation/suggestions
- Statement of Deficiencies/Plan of Correction
- Conditional Approval
- Intent to Withdraw Approval
- Withdrawal of Approval

# **Simulation & Innovation**



# Simulation

## WAC 246-840-534

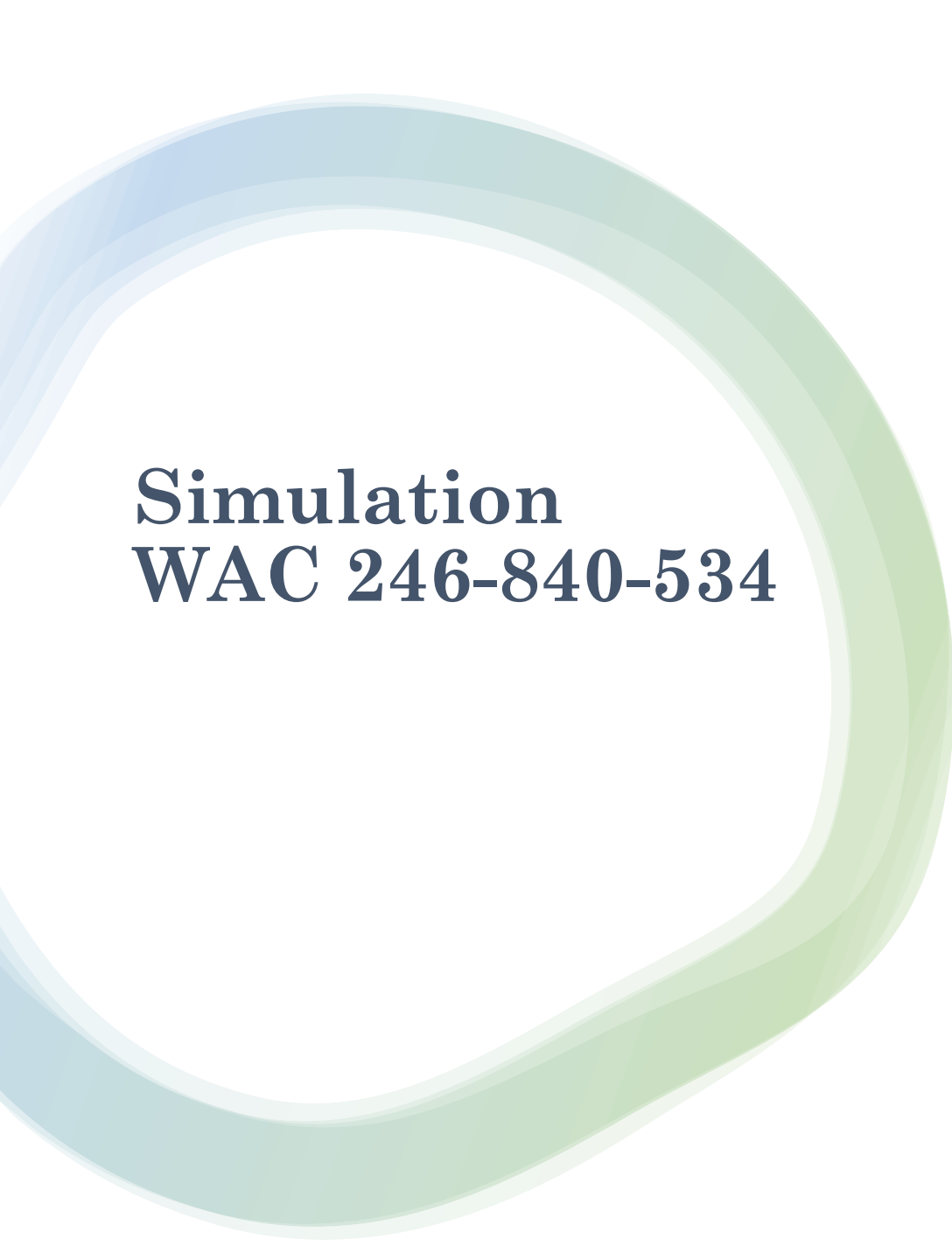
## Structure

### **LPN, RN, or RN to BSN programs may:**

- Use to substitute for traditional clinical experiences
- Up to 50% of clinical hours for a course

### **Simulation is a strategy, not a technology**

- Replicate real world in fully interactive manner (this is not a skills lab!)
- Shall have an organizing framework providing adequate fiscal, human, technological, and material resources
- Simulation manager
- Qualified simulation faculty who are trained in use of simulation.
- Budget for simulation activities and training of faculty
- Appropriate facilities, educational and technological resources and equipment



# Simulation

## WAC 246-840-534

### Outcomes

- Simulation must be linked to programmatic outcomes
- Must be reported to BON in annual report
- Written policies and procedures on:
  - Short-term and long-term plans for integrating simulation into curriculum
  - Method of debriefing each simulated activity
  - Plan for orienting faculty to simulation
  - Criteria to evaluate simulation activities by students and faculty



# WABON Education Unit Website Review

<https://nursing.wa.gov/education>

**Nursing Education, Student Nurse Preceptor, Dean and Director Resources, RN & LPN Graduation Resources, Hire a Nurse Tech, Nurse Assistant Training**

<p><b>Nursing Education Page</b></p> <p>Information for Education Programs, Information for Students, Approved Nursing Education Programs, Nursing Program Complaints</p>	<p><b>Dean and Director Resources Page</b></p> <p>Contains materials to assist Nurse Administrators in meeting program requirements</p>
Information for Education Programs:	Upcoming meeting dates
Forms for programs	Information & guidance on program requirements
Plan of correction information	Examples of completed program forms
Incident report form	Forms & resources for licensing new graduates
Education reports	Helpful links to external resources
	Site visit preparation materials



# Electronic Forms and Resources

## [Education Program Forms | Washington State Board of Nursing](#)

- [Exception to Faculty Degree Requirements Form](#)
- [Nurse Administrator Application](#)
- [Incident Report Form](#)
- [Substantive Change Request \(SCR\) Form](#)
- [Innovation Application](#)
- [In-State Program Application](#)
- [Refresher Program Application](#)

## [Examples of Completed Forms](#)

- [Substantive Change Request \(SCR\)](#)
- [New Program Application Feasibility Study](#)
- [Systematic Evaluation Plan \(SEP\)](#)

## [Plan of Correction | Washington State Board of Nursing](#)

- [Plan of Correction Template](#)

## [Education Reports | Washington State Board of Nursing](#)

## [Education Data Dashboard | Washington State Board of Nursing](#)



# Emailing to WABON

For any files, information, and follow-ups submitted to the WABON, please send directly to our universal email at [WABONEducationUnit@doh.wa.gov](mailto:WABONEducationUnit@doh.wa.gov)

Not using the [WABONEducationUnit@doh.wa.gov](mailto:WABONEducationUnit@doh.wa.gov) bypasses our quality control mechanisms.

You are welcome to cc our Nursing Education team in the emails!

The background of the slide is a light-colored surface covered with numerous small, light-brown wooden blocks. Each block has a dark grey question mark printed on its top surface. The blocks are scattered across the entire page, creating a pattern of question marks.

## Website References

Education Website

<https://nursing.wa.gov/education>

NCLEX/LICENSING Information

<https://nursing.wa.gov>

Email questions

[WABONEducationUnit@DOH.WA.GOV](mailto:WABONEducationUnit@DOH.WA.GOV)