

# Commonwealth of Massachusetts Board of Registration in Nursing

## Change in the Sequence of Curriculum

### Board Regulation, 244 CMR 6.07(1)(e)

A Program must obtain Board approval prior to the implementation of a revisions to the curriculum, resulting in a major change in the sequence of the majority of courses offered or an increase, decrease or substitution in the number of credit hours or the number of clock hours either in content or methods of delivery to meet nursing program outcomes.

Approval requests must be submitted by nursing education programs (programs) in accordance with current Board guidelines a minimum of three months before the planned implementation date for such changes. Board approval is not required for editorial changes, redistribution of content within a course or changes in electives.

### Section A.

Please complete ALL of the following sections.

#### Parent Institution Information

Date:	
Parent Institution:	
Address:	
City, State, Zip:	
Chief Executive Officer Name and Credentials:	
Email:	

#### Parent Institution Accreditation Status

Agency:	
Last Review:	
Outcome:	
Next Review:	

#### Nursing Education Program Information

Nursing Education Program:	
Address:	
City, State, Zip:	
Nurse Administrator Name and Credentials:	
Email:	
Nursing Program Type:	<input type="checkbox"/> Practical <input type="checkbox"/> Associate Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Baccalaureate <input type="checkbox"/> Direct Entry Masters

#### Nursing Program Accreditation Status

Nursing Accreditation Agency:	
Last Review (Accreditation Cycle and Year):	
Outcome:	<input type="checkbox"/> Initial Accreditation <input type="checkbox"/> Not Accredited <input type="checkbox"/> Continuing Accreditation
	<input type="checkbox"/> Continuing Accreditation with Conditions Follow-Up Report due: _____
	<input type="checkbox"/> Continuing Accreditation with Warning Follow-Up Report/Follow-Up Visit due: _____
	<input type="checkbox"/> Continuing Accreditation for Good Cause Follow-Up Report/Follow-Up Visit due: _____
Next Review (Accreditation Cycle and Year):	

### Nursing Program Options

Program Option Name:	
Location Name:	
Delivery Method:	<input type="checkbox"/> Face-to-Face <input type="checkbox"/> Hybrid <input type="checkbox"/> Distance Education
Percentage of Nursing Credits Delivered by Distance Education:	<input type="checkbox"/> 0% <input type="checkbox"/> 1–24% <input type="checkbox"/> 25–49% <input type="checkbox"/> 50–100%
Current Student Enrollment	

Program Option Name:	
Location Name:	
Delivery Method:	<input type="checkbox"/> Face-to-Face <input type="checkbox"/> Hybrid <input type="checkbox"/> Distance Education
Percentage of Nursing Credits Delivered by Distance Education:	<input type="checkbox"/> 0% <input type="checkbox"/> 1–24% <input type="checkbox"/> 25–49% <input type="checkbox"/> 50–100%
Current Student Enrollment	

Program Option Name:	
Location Name:	
Delivery Method:	<input type="checkbox"/> Face-to-Face <input type="checkbox"/> Hybrid <input type="checkbox"/> Distance Education
Percentage of Nursing Credits Delivered by Distance Education:	<input type="checkbox"/> 0% <input type="checkbox"/> 1–24% <input type="checkbox"/> 25–49% <input type="checkbox"/> 50–100%
Current Student Enrollment	

**Current Total Nursing Program Student Enrollment (all program options/cohorts/locations combined)**

Current Student Enrollment:	
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**Current Total Number of Faculty**

Full-time:	
Part-time:	

**Section B. Curriculum Change Information**

Provide a brief narrative for each question/prompt. **This section should not exceed 50 pages.**

**Implementation Date**

Month/Date/Year:

Provide a brief description of why the program faculty decided to change the curriculum.

Narrative:

Describe the desired outcomes of the curriculum change

Narrative:

Describe how potential and enrolled students will be informed of the anticipated change and the plan for transition.

Narrative:

Describe the faculty involvement in developing the new/revised curriculum. [244 CMR 6.04(4)(a)]

Narrative:

## New/Revised Curriculum

Describe how the sciences, arts, humanities and foundations of the profession are incorporated into the new curriculum. [244 CMR 6.04(4)(a)]

Narrative:

Are there any changes to the amount of time required to complete the program requirements? [244 CMR 6.04(4)(b)(1)]

Narrative:

Describe how the new/revised curriculum includes experiences that promote nursing judgement, leadership and management skills and promote role socialization consistent with the level of licensure. [244 CMR 6.04(4)(a)]

Narrative:

How does the new/revised curriculum and instructional processes reflect principles of learning and educational practice? [244 CMR 6.04(4)(b)(2)]

Narrative:

Which professional nursing standards, guidelines, and competencies were used to develop/revise the curriculum? How does this differ from the previous curriculum? [244 CMR 6.04(4)(b)]

Narrative:

How does the new/revised curriculum include didactic and clinical content relevant to national and local health care needs across the lifespan? [244 CMR 6.04(4)(b)]

Narrative:

How does the new/revised curriculum and instructional processes reflect current standards of practice? [244 CMR 6.04(4)(b)]

Narrative:

## New/Revised Curriculum

**For Registered Nursing Programs:** Total number of credit hours [244 CMR 6.04(4)(b)(4)]

Narrative:

**For Practical Nursing Programs:** Total number of hours of theory, laboratory and clinical practice. Number of hours allocated to nursing courses and clinical experiences. hours [244 CMR 6.04(4)(b)(4)]

Narrative:

Describe any changes to the end-of-program or course student learning outcomes [244 CMR 6.04(4)(b)(2)]

Narrative:

How are the end-of-program SLOs used to organize the new/revised curriculum and guide the evaluation of student achievement expected at defined points in the program? [244 CMR 6.04(4)(b)(3)]

Narrative:

Describe how the evaluation methodologies reflect established professional and practice competencies and measure the achievement of the end-of-program SLOs. [244 CMR 6.04(4)(b)(4)]

Narrative:

### Description of New/Revised Curriculum

Delivery Method:	<input type="checkbox"/> Face-to-Face <input type="checkbox"/> Hybrid <input type="checkbox"/> Distance Education
Percentage of Nursing Credits Delivered by Distance Education:	<input type="checkbox"/> 0% <input type="checkbox"/> 1–24% <input type="checkbox"/> 25–49% <input type="checkbox"/> 50–100%
Length of Academic Term (in weeks; e.g., 15 weeks):	
Total Credits/Hours:	
Nursing Credits:	
General Education/Prerequisites:	

Has the length of the program changed? If so, describe the changes. [244 CMR 6.04(4)(b)(1)]

Narrative:

Will the total number of credits or clock hours changed? If so, describe the changes. [244 CMR 6.04(4)(b)(4)]

Narrative:

Describe how the program length will be consistent with generally accepted academic standards and credit hours. Please cite specific policies, as applicable. [244 CMR 6.04(4)(b)(4)]

Narrative:

Describe the credit-to-contact hour ratios for didactic/lectures, laboratory, simulation and clinical experiences (e.g., 1:1 for didactic, 1:2 for laboratory/simulation, and 1:3 for clinical components). [244 CMR 6.04(4)(b)(4)]

Narrative:

Has there been a significant change in the total number of didactic or clinical/practice hours? If so, describe and include a rationale. Please complete the Curriculum table below.

Narrative:

**Curriculum table:**

Program Option Name:		Click here to enter text.			
Type of Course (Science, Art, Humanity, Nursing)	Course Number and Title	Credit Hours	Clock hours for each component (if applicable)  # Weeks/semester	credit-to-contact hour ratios for didactic/lectures, laboratory, and clinical experiences (e.g., 1:1 for didactic, 1:2 for laboratory/simulation, and 1:3 for clinical components)	<b>For clinical hours only:</b> please delineate the <b>total time</b> and <b>percentage</b> of the total time spent in: 1.Direct Patient Care 2. High Fidelity Simulated Experiences 3. Virtual Experience 4. Other learning opportunities such as case studies
Click here to enter text.	Click here to enter text.		Didactic Laboratory Simulation Clinical	Didactic Laboratory Simulation Clinical	1.Direct Patient Care 2. High Fidelity Simulated Experiences 3. Virtual Experiences 4. Other learning opportunities such as case studies; care plans and/or care mapping
Click here to enter text.	Click here to enter text.		Didactic Laboratory Simulation Clinical	Didactic Laboratory Simulation Clinical	1.Direct Patient Care 2. High Fidelity Simulated Experiences 3. Virtual Experiences 4. Other learning opportunities such as case studies; care plans and/or care mapping

Will clinical learning experiences be impacted by the change? If so, describe.

Narrative:

Describe any substitution of credited clinical clock hours with high fidelity simulation.

Narrative:

Will the delivery method be changed from the previous curriculum? If so, describe and include the rationale.

Narrative:

How many, if any, nursing courses will be delivered via distance education?

## New/Revised Curriculum

Narrative:

Has any substantive nursing content been added to or eliminated from the program of study? If so, describe and include a rationale.

Narrative:

Describe how the proposed change is consistent with trends in health care delivery, nursing education and the National Council Licensure Examination (NCLEX™).

Narrative:

Describe how learning activities, instructional materials, and evaluation methods are consistent with the end-of-program SLOs.

Narrative:

Describe how the curriculum revisions will be implemented, including a description of the teach-out plan for the previous curriculum.

Narrative:

Describe any changes, if any, to the learning resources accessible to faculty and students.

Narrative:

Provide, *if applicable*, any additional commentary of how the change in the nursing program affects the program's compliance with 244 CMR 6.04.

Narrative:

## Section C. Outcomes

Please complete ALL of the following sections for the three (3) most recent years. For expected levels of achievement (ELAs), include a timeline (e.g., 70% of students will complete the program in 150% of the program length).

<b>First-time Performance on Licensure/Certification Examination Aggregated for Entire Program</b>
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## New/Revised Curriculum

Expected Level of Achievement	Year	Licensure Examination Pass Rate
	20__	%
<input type="checkbox"/> Same as above	20__	%
<input type="checkbox"/> Same as above	20__	%

Performance on Program Completion – Aggregated for Entire Program		
Expected Level of Achievement	Year	Program Completion Rate
	20__	%
<input type="checkbox"/> Same as above	20__	%
<input type="checkbox"/> Same as above	20__	%

Performance on Job Placement – Aggregated for Entire Program		
Expected Level of Achievement	Year	Program Completion Rate
	20__	%
<input type="checkbox"/> Same as above	20__	%
<input type="checkbox"/> Same as above	20__	%

Admission Rates Reported on Annual Reports – Aggregated for Entire Program		
Expected Level of Achievement	Year	Number of Admissions
	20__	%
<input type="checkbox"/> Same as above	20__	%
<input type="checkbox"/> Same as above	20__	%

## Section D. Required Documentation

(to be included as an Appendix)

- ☐ Curriculum Revision Worksheet (included on next page)
- ☐ Previous and current course and program SLOs
- ☐ Table demonstrating leveled course SLOs leading to the achievement of the end of program SLOs
- ☐ Comparative analysis of curriculum content with the applicable *test Plan for the NCLEX Examination* to show the linkage of the curriculum to the NCLEX examination.
- ☐ Current and new (if applicable) course descriptions
- ☐ Documentation of final approval from the parent institution (if applicable)
- ☐ Documentation of final approval, acceptance, or notification of the substantive change from the institutional accrediting agency (if applicable)
- ☐ Documentation of final approval, acceptance, or notification of the substantive change from the nursing program accrediting agency (if applicable)
- ☐ Documentation of institutional accreditor and or state regulatory agency approval for distance education (if applicable)

Signature:	
Date	

## Curriculum Revision Worksheet

Previous Curriculum Content			
Total number of credits/hours required for program completion:			
Total number of nursing credits/hours:			
Total number of general education/prerequisites credits/hours:			
Nursing Credits			
Indicate "X" if this course was deleted, significantly modified, or substituted in the new curriculum	Course Prefix, Number, and Title	Number of Credits/Hours	Course Topics/Content (provide a brief description)
<b>Total Number of Nursing Credits/Hours Deleted or Substituted:</b>			

\*Add additional rows as necessary

## Curriculum Revision Worksheet

New/Revised Curriculum Content			
Total number of credits/hours required for program completion:			
Total number of nursing credits/hours:			
Total number of general education/prerequisites credits/hours:			
Nursing Credits			
Indicate "X" if this course is a new addition, a significantly modified course from the previous curriculum, or a substitution of a course from the previous curriculum	Course Prefix, Number, and Title	Number of Credits/Hours	Course Topics/Content (provide a brief description)
<b>Total Number of Credits/ Hours Added, Revised, or Substituted:</b>			

\*Add additional rows as necessary

## Curriculum Revision Worksheet

Nursing Course Delivery Method					
Previous Curriculum			New/Revised Curriculum		
Delivery Method (Face-to-Face, Hybrid, or Distance Education)	Course Prefix, Number, and Title	Number of Credits/ Hours	Delivery Method (Face-to-Face, Hybrid, or Distance Education)	Course Prefix, Number, and Title	Number of Credits/ Hours

\*Add additional rows as necessary