Opening a New Nursing Education Program – Lessons Learned
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Background
In the *Future of Nursing* report (IOM, 2010), one of the key recommendations was to increase the proportion of baccalaureate and higher degree-prepared nurses in the nation’s workforce to 80% by 2020. One of the barriers to preparing more baccalaureate-prepared nurses is a dearth of open seats in existing nursing education programs. Many established nursing education programs would like to expand but lack the fiscal, faculty, and/or clinical resources required to accomplish this.

This presentation is based on experiences in opening a prelicensure BSN program set in a private, church-affiliated 4-year college in central South Carolina. The program is nationally accredited by the CCNE and is expanding by adding an RN/BSN Completion Track this year. The purpose of this session is to explore the lessons learned through this journey so as to delineate several best practices when opening a new undergraduate nursing education program. These lessons also could be helpful to nursing education programs seeking to expand existing capacity.

Objectives
1. The learner will be able to identify a typical journey of a new BSN program from concept to reality.
2. The learner will be able to delineate at least 5 best practices when opening a new nursing education program.

One Program’s Journey
2006: Partnership signed between Lexington Medical Center & Newberry College to develop a BSN program at Newberry College
2007: Experienced nurse educator hired as inaugural chair to set up program; Nursing Board of Advisors (NBA) formed; prenursing freshmen admitted
2008: Feasibility study submitted to the SC Board of Nursing; site visit held
2009: Program initially approved by the SC Board of Nursing; 1st class of nursing majors admitted & started junior NUR classes in the fall
2010: 2nd class of junior NUR majors admitted; senior NUR classes added to curriculum; on-site visit conducted by CCNE evaluators
2011: Program granted national accreditation by the CCNE; first class graduates; all are licensed as RNs & employed in nursing by end of the year
2012: Second class graduates
2013: Third class graduates; admission requirements increased effective fall 2013 entering juniors
2014: Fourth class graduates; self study for CCNE reaccreditation begun
2015: Fifth class graduates; RN/BSN Completion track opened; on-site visit for reaccreditation conducted by CCNE evaluators
2016: NUR curriculum revisions coinciding with changes to the Newberry College Core requirements

Lessons Learned
✓ Use nurses on the Board of Advisors as consultants on the focus of curriculum, desired competencies of program graduates, suggestions for clinical experiences, etc.
✓ Educate non-nurse faculty and administration about the specifics of nursing education, including Board of Nursing regulations and ratios, accreditation, etc.
✓ Bring experienced nursing faculty on board early to shape the curriculum.
✓ Participate actively in the larger College community and in the local and statewide nursing communities.
✓ Monitor student input on a continuing basis, and include students in nursing unit governance.
✓ Don’t assume that something that works at one school automatically will be successful in the new program.
✓ Prepare students during their prenursing year(s) for the culture shock of NUR courses and testing, including the focus on application and analysis rather than on knowledge questions, plus the importance of a cumulative approach rather than compartmentalizing individual courses.
✓ Include opportunities for peer mentoring among students, with alumni helping senior students, seniors helping juniors, nursing majors helping prenursing students, and students from established NUR programs as guests in the classroom and/or SNA meetings.
✓ Include programming for strong & for at-risk students.
✓ Adhere to boundaries/requirements/standards.
✓ Collect data on all segments of the program and assess effectiveness each time a component is added or revised.
✓ Document the history of the program as it occurs.