Picial recognition of nursing education programs that meet standards established by the board of nursing (BON; National Council of State Boards of Nursing [NCSBN], 2004). Nursing licensure in the United States is a two-pronged system:

1. The graduate must show evidence of graduating from a BON-

- 1. The graduate must show evidence of graduating from a BON-approved nursing program.
- 2. The graduate must pass the NCLEX® licensure examination. By graduating students and making them eligible to take

licensure. Further, BONs are better positioned than national accreditation agencies to understand the specific jurisdiction's education issues, such as a lack of clinical sites or a faculty shortage. Additionally, BONs have the legal authority to close nursing programs that do not meet standards; accreditors do not. Recently, the number of fraudulent nursing programs has increased, and BONs are strategically positioned to work closely w2. What we have the programs are strategically positioned to work closely w2. What we have the programs has increased.

(IOM, 2011) report recommends that by 2020, 80% of the RN workforce be educated at the baccalaureate level. Concomitantly, nursing needs to meet future workforce needs, to prepare nurses for new practice models, and to address the critical faculty shortage (NCSBN, 2010). Yet, many RN-to-BSN, nursing master's, and other nursing programs used for degree advancement require graduation from a program accredited by the national nursing accrediting bodies before admission. Therefore, if BONs required national nursing accreditation in their approval processes for continued approval, program standardization would promote articulation and assist students in achieving higher levels of nursing education.

Assessing Nursing Program Approval

In 2010, the National Council of State Boards of Nursing's (NCSBN) Board of Directors convened a committee to assess the state of prelicensure nursing program approval in BONs and to make recommendations based on current and future needs. The committee members included seven board members from BONs, who were educators; five BON staff personnel, including two executive directors; an NCSBN Board of Directors liaison; and staff members from NCSBN. Over 2 years, the committee took several

accredited by a national nursing accreditation agency (see Figure 2). When comparing the number of programs accredited by the CCNE (Commission on Collegiate Nursing Education, 2012) or NLNAC (National League for Nursing Accrediting Commission, 2012) to the number of approved programs (NCSBN, 2012b), the committee found that in 2012, 96% of all baccalaureate and master's entry programs and 80% of diploma programs are accredited by the national nursing accrediting agencies. However, only 52% of associate-degree programs are nationally accredited. This percentage is particularly concerning because 57% of all RN first-time NCLEX test takers in 2011 graduated from associate-degree programs (NCSBN, 2011b). Even more striking, only 10% of practical nursing programs were nationally accredited. Thus, many students graduate from a program but will not be able to advance their education in nursing.

As part of this inquiry on program approval, representatives from CCNE and NLNAC met with the committee to discuss their processes, such as ongoing monitoring procedures and specifics about their accreditation reports. The committee reviewed the processes of approval in BONs and described some of the BON issues. The representatives stressed the importance of ongoing communication between CCNE and NLNAC and the jurisdictions regarding the approval status of programs. The committee discussed some possible collaborative goals, such as establishing guidelines for joint site visits of accreditors and BONs to nursing programs.

sources by sharing data collection, and aid nurses in advancing their education. Because program approval is core to the licensure model in nursing, the committee also recommended that BONs continue to have authority over nursing program approval, make independent initial approval decisions, and make the final decision on continuing approval considering the data from CCNE and NLNAC. The recommendations include:

BONs shall have statutory authority over nursing programs. To foster more consistency and be in harmony with the 2010 *F* report (IOM, 2011), all RN and LPN nursing programs should be accredited by a national nursing organization by January 1, 2020.

BONs shall make initial prelicensure nursing program approval decisions, making site visits as needed since they are in a position to understand the local issues.

BONs may accept national nursing accreditation for continued approval decisions and are encouraged to use accreditation self-studies to decrease redundancy, though BONs may require additional data. BONs might make site visits for continued approval, when deemed necessary. If BONs make site visits, they are encouraged to make them jointly with the national nursing accreditors to enhance collaboration and a mutual understanding of each other's roles. The committee, with input from the ac-

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