

This is an amendment to 16.12.3 NMAC, Sections 3, 7, 11, and 12 effective 1/1/2026.

16.12.3.3 STATUTORY AUTHORITY: Nursing Practice Act, Sections 61-3-10 and 61-3-26 NMSA 1978 Comp.

[16.12.3.3 NMAC - Rp, 16.12.3.3 NMAC, 10/1/2016, A 1/1/2026]

16.12.3.7 DEFINITIONS:

A. Definitions beginning with “A”:

(1) **“application”**, form provided by the board of nursing (BON) to any potential nursing program to be used as the first process in opening a new program;

(2) **“approval”**, official or formal consent, confirmation or sanction;

(3) **“artificial intelligence”**, means a broad category of existing, emerging, and future digital technologies that involved using algorithms to drive the behavior of agents, such as software programs, machines, and robotics. An artificial intelligence system shall not be labeled as or referred to as a nurse;

~~[(3)]~~ (4) **“associate degree program”**, a formalized program of study, usually organized for completion within a two-year academic period, which prepares graduates for an associate degree in nursing and eligibility to take the national examination for registered nurses. The program is conducted as an integral department or division within a college or university.

B. Definitions beginning with “B”:

(1) **“baccalaureate degree program”**, a formalized program of study, usually organized for completion within a four-year academic period, which prepares graduates for a degree in nursing and eligibility to take the national licensing examination for registered nursing. The program is conducted as an integral department or division within a university or college;

(2) **“board”**, New Mexico board of nursing.

C. Definitions beginning with “C”:

(1) **“clinical facilities”**, institutions which are established for the delivery of nursing care services (hospital, extended care facilities, nursing homes, medical clinics, public health facilities, physician’s offices, out-patient clinics, etc.);

(2) **“clinical hours”**, means the combination of no more than fifty percent simulation hours and skills lab hours combined with hours in clinical experiences;

~~[(2)]~~ (3) **“clinical preceptors”**, nurses who have been a nurse for at least two years and have demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student. The clinical preceptor shall not receive financial incentives from the nursing program for an assigned student.

~~[(3)]~~ (4) **“clock/contact hour”**, unit of measurement used by educational institutions to determine work load;

~~[(4)]~~ (5) **“curriculum”**, a course of study which is offered within a particular program.

D. Definitions beginning with “D”: **“director”**, the nurse educator (regardless of the official title assigned by any specific institution who is delegated the administrative responsibility and authority for the direction of the basic educational program in nursing. An “administrator” shall be considered synonymous with “director” unless the institution has divided up authority between a program “director” and an administrator.

E. Definitions beginning with “E”: **“educational institution”**, an institution within the educational system which is organized and accredited for teaching and study (university, high school, post-secondary, approved area vocational institution).

F. Definitions beginning with “F”: [RESERVED]

G. Definitions beginning with “G”: [RESERVED]

H. Definitions beginning with “H”: **High-fidelity**, provides the highest levels of realism.

Scenarios may incorporate the above low- and medium-fidelity plus the use of computer-based equipment with automatic cues and responses.

I. Definitions beginning with “I”: **“Involuntary closure”**, mandatory closure by the board for failure of a program to meet the minimum requirements as established by the board.

J. Definitions beginning with “J”: [RESERVED]

K. Definitions beginning with “K”: [RESERVED]

- L. Definitions beginning with “L”: “Low-fidelity”,** the least realistic of available options. Scenarios may include but not limited to the use of static manikins, written case studies, simulated medication administration and other nursing tasks.
- M. Definitions beginning with “M”:**
- (1) **“medium-fidelity”,** scenarios may include use of low-fidelity resources noted above plus standardized (live) patients incorporation with increased realism. Automatic cues and responses (aside from simulation faculty & staff) remain absent;
 - (2) **“must”,** a requirement.
- N. Definitions beginning with “N”:**
- (1) **“national licensing examination”,** examination for licensure as provided by the national council of state boards of nursing;
 - (2) **“national nursing accreditation”,** recognition of an institution of learning by a board recognized national nursing organization as maintaining prescribed standards requisite for its graduates to gain admission to other reputable institutions of higher learning or achieve credentials for professional practice.
- O. Definitions beginning with “O”: [RESERVED]**
- P. Definitions beginning with “P”:**
- (1) **“parent institution”,** an institution within the educational system which is organized and accredited for teaching and study (university, college, high school);
 - (2) **“practical nurse program”,** a formalized program, which prepares a graduate for a diploma or certificate and eligibility to take the national licensing examination for practical nursing. The program is conducted as an integral part of an educational institution;
 - (3) **“pre-licensure program”,** nursing education program that prepares an individual for the national licensing examination for registered nursing or practical nursing;
 - (4) **“program”,** the curriculum and all of the activities/functions that take place which are necessary to fulfill the purpose of nursing education;
 - (5) **“public health emergency”,** an executive order pursuant to the Public Health Emergency Response Act or an executive order invoked by gubernatorial powers under the All Hazards Emergency Management Act.
- Q. Definitions beginning with “Q”: [RESERVED]**
- R. Definitions beginning with “R”: [RESERVED]**
- (1) **“recommendations”,** statements which should guide programs of nursing in the development and direction of the program but which are not mandatory;
 - (2) **“regulation and policies”,** statements governing practice of the board of nursing in the approval of a program of nursing;
 - (3) **“requirements”,** conditions which any program of nursing shall meet to obtain approval.
- S. Definitions beginning with “S”:**
- (1) **“shall”,** mandatory; a requirement;
 - (2) **“should”,** a suggestion or recommendation; not a requirement;
 - (3) **“simulation”,** an experience that imitates the real environment, requiring individuals to demonstrate the procedural techniques, decision-making, and critical thinking needed to provide safe and competent patient care;
 - (4) **“supervision of part-time faculty without a graduate degree in nursing”,** initial verification of instructor’s knowledge and skills in supervision of students in clinical settings, followed by periodic observation, direction and evaluation of instructor’s knowledge and skills related to supervision of students in clinical settings.
- T. Definitions beginning with “T”: [RESERVED] “total program hours”, means the minimum combination of didactic and clinical hours required to complete a nursing program.**
- U. Definitions beginning with “U”: [RESERVED]**
- V. Definitions beginning with “V”: [RESERVED]**
- W. Definitions beginning with “W”: [RESERVED]**
- X. Definitions beginning with “X”: [RESERVED]**
- Y. Definitions beginning with “Y”: [RESERVED]**
- Z. Definitions beginning with “Z”: [RESERVED]**

[16.12.3.7 NMAC - Rp, 16.12.3.7 NMAC, 10/1/2016; A, 4/8/2021; A, 12/13/2022; A, 5/21/2024; A, 1/1/2026]

16.12.3.11 REQUIREMENTS FOR THE ESTABLISHMENT OF NEW NURSING PROGRAMS:

A. All programs not previously approved by the board are required to be approved by the board under the procedures prescribed in this section. Feasibility studies, proposals, and initial approvals shall be considered during a regularly scheduled board meeting.

(1) Programs which were previously approved and have been closed for more than six months shall follow the requirements for establishing a new program.

(2) Programs offering clinical experience or field experiences in the state of more than one semester shall apply for program approval by the board for clinical placement. Programs approved by another state board of nursing must meet the minimum standards set forth in 16.12.3.12 NMAC and shall submit any information required by the rules.

(a) After initial approval from the board, programs must submit an annual attestation of concurrence with the current rules.

(b) A program may not offer a clinical experience in the state without approval from the board and without submitting annual attestations.

B. Any institution considering the establishment of a pre-licensure nursing education program shall submit, a letter of intent, the resume and transcripts of the nursing program administrator, complete application form and feasibility study, at least 12 months in advance of the proposed opening date. The application, feasibility study and program proposal shall be prepared by a qualified nurse educator.

(1) The letter of intent shall state the parent institution's intention of opening a nursing program and verify approval of the proposed program by the highest governing body of the institution.

(2) The completed application shall include attached evidence of national or regional accreditation of the parent institution.

(3) The feasibility study shall contain the following:

(a) rationale for the establishment of the nursing program;

(b) documentation of the need/demand for a new nursing program;

(c) nursing ~~manpower~~ workforce needs in the state and region;

(d) impact on other nursing education programs in the state;

(e) definition of the target region from which the student population will be drawn;

(f) availability of the proposed number of faculty and director; and

(g) proposed clinical facilities detailing accessibility and documenting the plan for

clinical facility use to provide educationally sound experiences. The effect on other nursing programs utilizing the facility must also be documented.

(h) any correspondence with a state board of nursing related to program approval status.

C. The feasibility study must be approved by the board before the proposal is submitted.

D. The proposal shall be submitted at least six months prior to the proposed opening date. The board of nursing shall approve the proposal upon submission of evidence that verifies the following:

(1) compliance with "minimum standards for nursing programs;"

(2) documentation of the parent institution to support the program in relation to:

(a) plans for providing adequate support services including library audio/visual resources; classrooms, laboratory, offices, secretaries, and counseling; and

(b) evidence of financial resources for planning, implementing and continuing the program.

(3) tentative timetable for planning and implementing the entire program;

(4) appointment of a qualified nurse director, as specified in the "minimum standards for nursing programs," to be active full-time in the position six months prior to the starting date;

(5) evidence of a sufficient number of qualified faculty, as specified in "*minimum standards for nursing programs*"; faculty shall be active in their positions no later than two months before the start of the first class.

E. Requirements for approval:

(1) Following approval of the proposal, arrangements will be made for the initial approval visit for the purpose of verifying compliance with the minimum standards for nursing programs. A written report of the visit will be submitted to the board and to the institution.

(2) The board shall advise the institution, in writing, regarding the approval/disapproval of the feasibility study, proposal, initial approval status, and may include specific requirements that must be met during the approval period.

(3) The board of nursing may deny approval to a program that does not meet the “minimum standards for nursing programs.”
[16.12.3.11 NMAC - Rp, 16.12.3.11 NMAC, 10/1/2016; A, 5/21/2024; A, 1/1/2026]

16.12.3.12 MINIMUM STANDARDS FOR NURSING PROGRAMS:

A. Administration and organization:

(1) The nursing education program shall be an integral part of an institution of higher education that is authorized by this state to confer credentials in nursing and that is also accredited by an accreditation agency recognized by the US department of education.

(2) The nursing program shall obtain national nursing accreditation within two years of the first graduating class.

(3) The nursing programs shall have status comparable with other academic units. There shall be an organizational chart which identifies the relationships, within and between the program and other administrative areas of the parent institution.

(4) The administration of the parent institution shall provide adequate financial support for the nursing program.

(5) The parent institution shall designate a qualified, nursing director who is licensed to practice as a registered nurse in New Mexico or in a compact state. The nursing program director shall have responsibility and authority comparable with the administrative position including but not limited to development, implementation, evaluation, administration and organization of the nursing program.

(6) The nursing program shall have specific written policies available to students and the public regarding, but not limited to, admission, readmission, transfer, advanced placement, progression, graduation, withdrawal, dismissal, student rights and responsibilities, grievances, health and safety.

(7) The nursing program shall provide accurate, complete and appropriate information to all students and prospective students about the program including, but not limited to:

(a) nature of the program, including course sequence, prerequisites, co-requisites and academic standards;

(b) length of the program;

(c) current cost of the program;

(d) transferability of credits to other public and private educational institutions in New Mexico;

(e) program teaching methods and supporting technology;

(f) current standing and any change in regional or national institutional accreditation status and national nursing accreditation status and board approval status.

(8) The nursing program shall require primary source verification for education credit given for any pre-licensure program in their respective institution.

(9) Faculty and students shall participate in program planning, implementation, evaluation and continuous improvement.

B. Curriculum:

(1) The mission of the nursing unit shall be consistent with that of the parent institution.

(2) A nursing program shall develop and implement a curriculum that includes level objectives, course objectives; measurable learning outcomes for each course that:

(a) reflect its mission and goals;

(b) are logically consistent between and within courses;

(c) are designed so that the students who complete the program will have the knowledge and skills necessary to function in accordance with the definition and scope of practice specified in New Mexico Nurse Practice Act.

(3) The curriculum shall extend over a period of time sufficient to provide essential, sequenced learning experiences which enable a student to develop nursing competence and shall evidence an organized pattern of instruction consistent with principles of learning and educational practice.

(a) Practical nursing programs must offer 500 hours of instruction including a minimum of 250 hours of clinical hours (no greater than fifty percent of the clinical hours may be comprised from simulation hours) and clinical experiences.

(b) Programs preparing students to be a registered nurse must offer at least 1050 hours of instruction including a minimum of 650 hours of clinical (no greater than fifty percent of the clinical hours may be comprised from simulation hours) and clinical experiences.

(c) All programs offer clinical experiences by level or term with requisite didactic content. Students repeating either a didactic or clinical component do not need to repeat both to meet this rule.

(4) Clinical experience shall provide opportunities for application of theory and for achievement of the stated objectives in a client care setting or simulation learning settings, and shall include clinical learning experience to develop nursing skills required for safe practice. In the client care clinical setting, the student/faculty ratio shall be based upon the level of students, the acuity level of the clients, the characteristics of the practice setting and shall not exceed 8:1. ~~[In the simulation setting there shall be nursing faculty who has received focused training in simulation pedagogy and techniques.]~~ Clinical evaluation tools for evaluation of students' progress, performance and learning experiences shall be stated in measurable terms directly related to course objectives.

(a) Nursing program shall submit a report to the board listing all clinical sites by clinical unit and academic term for every academic term in which the program holds a clinical experience. The report is due 30 days after the end of the academic term. The following information is required:

- (i) name, address, and unit of the clinical site;
- (ii) name of course and name faculty with credentials;
- (iii) number of students at the unit; and
- (iv) hours and days of clinical.

(b) Clinical courses must concur within the same academic term of the didactic instruction.

(5) In the simulation setting there shall be nursing faculty who have received focused training in simulation pedagogy and techniques. Simulation learning experiences may concurrently include the use of low, medium, and high fidelity experiences. One hour of simulation clinical counts as one hour of clinical overall. Nursing programs shall:

(a) establish clearly-defined simulation learning outcomes incorporating objective measures for success;

(b) incorporate written, planned design of individual training experiences and shall include consideration of the educational and experiential levels of the learners;

(c) make use of checklists for pre- and post-experience analysis and review;

(d) may substitute up to a maximum of fifty percent of a clinical education experiences using simulation programs and practices;

(i) in the event of a public health emergency that negatively impacts access to clinical placement, nursing programs submit a major change notification increasing the simulation substitution to a maximum of seventy percent

(ii) the major change would be in effect for the period of the public health event ending when the health order is terminated;

(e) have written simulation policies and procedures specific to the nursing education available to all faculty and pertinent staff. Simulation learning policies and procedures shall include evaluative feedback mechanisms for ongoing program improvement;

(f) incorporate facilitated student-centered debriefing sessions upon the conclusion of simulation-based activities.

~~[(5)]~~ (6) The curriculum shall provide instruction in the discipline of nursing across the lifespan and include content relevant to national and local health care needs. Support courses shall be an integral part of the nursing curriculum.

~~[(6)]~~ (7) The nursing program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.

(8) The nursing program shall include a statement about the use of artificial intelligence in the curriculum including in the completion of assignments and the definition in the rules. The policy shall also include a statement assuring confidentiality in the clinical setting.

C. Program director requirements:

(1) Prior to appointment, the program director shall:

- (a) hold a graduate degree in nursing;
- (b) hold a current registered nurse license to practice in New Mexico;
- (c) have work experience in clinical nursing practice;
- (d) have work experience as a nurse educator.

(2) The program director shall:

- (a) maintain a current registered nurse license to practice in New Mexico;

(b) be afforded appropriate resources to accomplish the program mission, goals and expected program outcomes;

(c) have the authority and responsibility for administration of the program to include but not limited to budget management, workload assignments, management and supervision of faculty and staff, development and enforcement of policies, meeting regulatory and accreditation requirements, and development and implementation of curriculum;

(d) have at least eighty percent of obligated work time to administer the program.

D. Faculty requirements:

(1) The faculty of the nursing program shall hold a current unencumbered license to practice as a registered nurse in New Mexico.

(a) A formal plan will be in place which will include an orientation to nursing program.

(b) Nursing faculty who teach full-time shall hold a graduate degree in nursing; faculty without a graduate degree with a baccalaureate degree in nursing may be employed for one year and then are required to complete a graduate degree within the next five years; an educational contract with evidence of progression will be submitted with program annual report.

(c) Nursing faculty who teach part time shall hold a minimum of a bachelor's degree in nursing; faculty without a Bachelor of Science in Nursing BSN may be employed for one year and then are required to complete a BSN completion program or Master of Science in Nursing (MSN) program within five years, an educational contract with evidence of progression will be submitted with program annual report.

(i) Part time faculty without a graduate degree in nursing shall report to a master's prepared faculty and evidence of routine supervision shall be documented.

(ii) Part-time faculty shall be oriented to the curriculum, and provided with instruction in didactic and clinical teaching strategies.

(d) A program must have a minimum of two full time faculty, excluding the program director, and adequate faculty to meet the program outcomes.

(2) Clinical preceptors are licensed as a nurse at or above the educational level for which the student is preparing.

(3) Personnel policies for nursing faculty shall be the same as those in effect for other faculty with the exception of:

(a) nursing faculty workload shall be calculated by teaching clock/contact hour;

(b) evidence of full time and part time faculty evaluation shall be in place;

(4) A nursing program shall maintain current and accurate faculty and student records.

(5) The nursing program will retain a qualified director and a sufficient number of qualified faculty to meet the outcomes and purposes of the nursing education program.

E. Resources: The parent institution shall provide sufficient resources, services and facilities to operate the nursing program.

F. Complaints received by the agency about a program shall be sent to the program for a response;

(1) Student complaints about the minimum standards shall be reviewed by the nursing education advisory committee along with the response from the program.

(2) The nursing education advisory committee will make a recommendation of action to the board.

[F-] G. The nursing education program will maintain a passing rate of eighty percent or above of first time writers of the national licensing exam. Certain nursing programs in public higher education institutions may have a pass rate of seventy-five percent if criteria in Subparagraph (c) of Paragraph (4) of Subsection C of 16.12.3.8 NMAC.

[16.12.3.12 NMAC - Rp, 16.12.3.12 NMAC, 10/1/2016; A, 9/12/2017; A, 4/8/2021; A, 5/21/2024; A, 1/1/2026]