

BEFORE THE BOARD OF NURSING
DEPARTMENT OF LABOR AND INDUSTRY
STATE OF MONTANA

In the matter of the amendment of) NOTICE OF PUBLIC HEARING ON
ARM 24.159.604, 24.159.605,) PROPOSED AMENDMENT,
24.159.606, 24.159.608, 24.159.609,) ADOPTION, AND REPEAL
24.159.611, 24.159.612, 24.159.625,)
24.159.630, 24.159.632, 24.159.635,)
24.159.640, 24.159.650, 24.159.655,)
24.159.659, 24.159.662, 24.159.665,)
24.159.666, and 24.159.670 nursing)
education programs, the adoption of)
NEW RULE I waiver of faculty)
qualifications, and the repeal of ARM)
24.159.601, 24.159.615, 24.159.656,)
24.159.674, 24.159.677, and)
24.159.680 nursing education)
programs)

TO: All Concerned Persons

1. On March 20, 2015, at 10:00 a.m., a public hearing will be held in the Basement Conference Room, 301 South Park Avenue, Basement Floor, Helena, Montana, to consider the proposed amendment, adoption, and repeal of the above-stated rules.

2. The Department of Labor and Industry (department) will make reasonable accommodations for persons with disabilities who wish to participate in this public hearing or need an alternative accessible format of this notice. If you require an accommodation, contact the Board of Nursing (board) no later than 5:00 p.m., on March 13, 2015, to advise us of the nature of the accommodation that you need. Please contact Cynthia Gustafson, Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513; telephone (406) 841-2380; Montana Relay 1 (800) 253-4091; TDD (406) 444-2978; facsimile (406) 841-2305 or nurse@mt.gov (board's e-mail).

3. GENERAL STATEMENT OF REASONABLE NECESSITY: The board established a committee to review the nursing education program rules and provide suggested rule revisions to the board. The committee met between October 2013 and April 2014, and the board reviewed the committee's final recommendations on July 24, 2014, and determined it is reasonably necessary to amend and repeal the nursing education program rules in subchapter six to align with current state and national nursing education standards.

The board is also amending these rules to eliminate outdated, redundant, and unnecessary provisions and provide consistency, simplicity, better organization, and ease of use for nursing students, educators, program administrators, and regulators

who review programs to ensure compliance with the board's standards. Where additional specific bases for a proposed action exist, the board will identify those reasons immediately following that rule.

4. The rules proposed to be amended provide as follows, stricken matter interlined, new matter underlined:

24.159.604 GUIDING PRINCIPLES, EDUCATIONAL OBJECTIVES, AND EXPECTED OUTCOMES OF NURSING EDUCATION PROGRAMS PROGRAM STANDARDS ~~(1) The faculty of the nursing education program shall develop and approve guiding principles, educational objectives, and expected outcomes that are consistent with those of the parent institution and with the statutes and rules governing the practice of nursing.~~
~~(2) The guiding principles and expected outcomes must be included in the program catalog or otherwise made available to students.~~
(1) All programs shall meet these standards:
(a) The purpose and outcomes of the program shall be consistent with accepted standards of nursing practice appropriate for graduates of the type of program offered and be made available to prospective and current students in public documents.
(b) The input of stakeholders shall be considered in developing and evaluating the purpose and outcomes of the program.
(c) The program shall implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.
(d) The curriculum shall provide didactic and clinical learning experiences consistent with program outcomes.
(e) Faculty and students shall participate in program planning, implementation, evaluation, and continuous improvement.
(f) The program administrator shall be a professionally and academically qualified RN with institutional authority and administrative responsibility for the program.
(g) Professionally, academically, and clinically qualified nurse faculty shall be sufficient in number and expertise to accomplish program outcomes and quality improvement.
(h) The fiscal, human, physical, clinical, and technical learning resources shall be adequate to support program processes, security, and outcomes.
(i) Program information communicated by the program shall be accurate, complete, consistent, and readily available.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: This rule's title and content was confusing to readers and inconsistent with current nursing education terminology. The board is amending the title and defining the required nursing education standards to clarify the board's expectations

for all nursing education programs. The amendments will make the board's review of these programs clearer and easier to enforce.

24.159.605 ORGANIZATION AND ADMINISTRATION OF NURSING EDUCATION PROGRAMS (1) Parent institutions conducting a nursing program must be accredited by the appropriate regional accrediting bodies, which are listed in ARM 24.159.615 an accrediting agency that is recognized by the U.S. Department of Education.

~~(2) All clinical facilities (agencies) with which the program maintains cooperative agreements for use as clinical laboratories must have licensure, approval, or accreditation appropriate to each agency.~~

~~(a) Cooperative agreements between nursing programs and clinical facilities must be current, in writing, signed by the responsible officers of each, and must include the following:~~

~~(i) faculty responsibilities for teaching and clinical supervision of students, including responsibilities for planning and supervising learning experiences;~~

~~(ii) a reasonable time frame for contract termination to ensure completion of the current semester or quarter of student clinical experiences;~~

~~(iii) agency's roles and responsibilities for student oversight and communication with faculty;~~

~~(iv) student responsibilities; and~~

~~(v) expectations regarding the health status of students and faculty.~~

~~(3) (2) The organizational structure of the nursing program must be comparable to similar programs of the parent institution.~~

~~(4) (3) Institutional policies governing the nursing program must be consistent with those policies governing other educational programs of the parent institution.~~

~~(5) (4) The board encourages nursing faculty and administration to participate in governance of the parent institution. Policies governing faculty employment, promotion, and tenure must be in writing and consistent with those of the parent institution.~~

~~(6) (5) A nursing education The program must provide students with written policies and demonstrate evidence of following these policies regarding:~~

~~(a) through (d) remain the same.~~

~~(7) remains the same, but is renumbered (6).~~

~~(8) Faculty members or other qualified persons shall be responsible for providing academic advice to students.~~

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: To more accurately fulfill the purpose of this rule, the board is relocating clinical facility requirements, cooperative agreements, and faculty responsibilities to rules that specifically address such topics. These amendments will also address confusion regarding which accrediting bodies nursing programs are subject to.

24.159.606 EDUCATIONAL FACILITIES FOR NURSING EDUCATION PROGRAMS (1) through (3) remain the same.

~~(a) adequate supplies and equipment, including computer resources and audio-visual aids necessary to achieve program outcomes; and~~

~~(b) adequate and convenient access by students and faculty to library and information resources, including sufficient titles, periodicals, computer data bases, and similar media resources necessary to achieve program outcomes.~~

~~(4) Clinical experiences must be:~~

~~(a) delineated in and applicable to the expected outcomes of the program; and~~

~~(b) under the control and supervision of the nursing faculty.~~

~~(5) Each program director, with faculty input, shall determine appropriate student to instructor ratios in the clinical setting. The ratio must provide safe, accessible, and appropriate supervision based on client health status, care setting, and student level of preparation. The ratio must not exceed ten students to one instructor.~~

(4) All clinical agencies with which the program maintains cooperative agreements for use as clinical learning experiences must have licensure, approval, or accreditation appropriate to each agency.

(a) Cooperative agreements between nursing programs and clinical agencies must be current, in writing, signed by the responsible officers of each, and must set forth the following:

(i) faculty responsibilities for teaching and clinical supervision of students, including responsibilities for planning and supervising learning experiences;

(ii) a reasonable time frame for contract termination to ensure completion of the current semester or quarter of student clinical experiences;

(iii) agency's roles and responsibilities for student oversight and communication with faculty;

(iv) student responsibilities; and

(v) health requirements of students and faculty.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: The board determined it is reasonably necessary to amend this rule to ensure that programs provide rationale for how the choice of educational facilities achieves the program's defined outcomes. Additionally, the board refined the requirements at ARM 24.159.605(2) for clinical agencies and cooperative agreements, and is adding them at (4) for ease in understanding and use.

24.159.608 PLACEMENT OF AN OUT-OF-STATE NURSING STUDENT IN A MONTANA CLINICAL PRACTICE SETTING (1) ~~The Montana board shall approve the placement of a student enrolled in an out-of-state nursing education pre-licensure program to undertake for clinical practice in a Montana facility must be approved by the Montana Board of Nursing or by its executive director.~~

(2) The request for placement of an out-of-state student in a Montana clinical practice setting must be submitted to the board in writing, ~~a minimum of two months prior to the proposed placement.~~ The request must be signed by the director of the

out-of-state nursing education program. The request for a clinical placement in Montana must include:

(a) documentation of an out-of-state nursing education program's unconditional board approval and accreditation by ~~CCNE or NLNAC~~ a national nursing accrediting agency approved by the U.S. Department of Education;

(b) through (g) remain the same.

(h) verification from relevant directors of Montana ~~nursing education~~ programs that placement of the out-of-state student in the identified Montana clinical practice setting will not displace a Montana nursing student;

~~(i) verification from the Montana clinical practice setting of the facility's ability to accommodate the out-of-state student, without displacing a clinical student from any Montana nursing education program; and~~

~~(j) (i) copy of the written agreement between the out-of-state nursing education program and the facility where the Montana clinical practice setting is located, which identifies preceptor(s), primary liaison, and out-of-state clinical faculty. The agreement must specify the responsibilities and delineate the functions of each entity in ensuring a quality educational experience for the out-of-state student; and~~

~~(j) (i) any out-of-state faculty member who is involved in the direct care of a patient in Montana must hold an unencumbered Montana license.~~

(3) The clinical preceptors, working with the out-of-state nursing faculty and the student in the Montana clinical practice setting, must meet the qualifications outlined by ~~ARM 24.159.655 and 24.159.665~~. The preceptor is responsible for ensuring that the out-of-state student complies with all Montana laws and rules related to nursing.

(4) Out-of-state faculty member(s) are responsible for ensuring safe, accessible, and appropriate preceptor supervision of the out-of-state student's Montana clinical practice experience. ~~Out-of-state faculty member(s) must hold an unencumbered active nursing license and meet the requirements of ARM 24.159.662 for practical nursing faculty or ARM 24.159.659 for registered nursing faculty, with the single exception of Montana nursing licensure.~~

(5) Montana board staff may conduct a site visit at the proposed clinical practice setting, either before or during the out-of-state student placement, ~~upon 48-hour notice to the involved parties.~~

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

REASON: The board has determined it is unnecessary to formally review all out-of-state requests from nursing programs at board meetings. The board is amending (1) to shift this approval process to the board's executive officer, based on the qualifications of that position. To address confusion as to the types of nursing education programs needing approval, the board is specifying in (1) that approval is needed for out-of-state pre-licensure programs. In response to questions, the board is adding (2)(j) to clarify when out-of-state faculty members need to hold a Montana nursing license.

24.159.609 PROGRAM EVALUATION (1) All nursing programs must have and follow a written, systematic plan for evaluation and ongoing assessment of student learning, published program outcomes, and compliance with board rules ~~for nursing education programs~~. The plan must effectively support the ~~planning process for the program and specify responsibilities, time frames, and procedures for evaluating each aspect of the program~~ achievement of the expected program outcomes and provide evidence of a system of continuous quality improvement.

(2) and (2)(a) remain the same.

(b) measurable aggregate program outcomes; including:

(i) NCLEX pass rate with five-year trend data;

(ii) student and alumni satisfaction with the program;

(iii) employer satisfaction with graduates of the program; and

(iv) program completion rates, including the program entry point and time period to completion as specified by the program.

(c) through (g) remain the same.

~~(3) At a minimum, the plan must include outcome expectations and data related to:~~

~~(a) NCLEX pass rate, including five-year trend data;~~

~~(b) student and alumni satisfaction with the program;~~

~~(c) employer satisfaction with graduates of the program;~~

~~(d) graduation rates; and~~

~~(e) adequacy of the physical and fiscal resources of the program.~~

(4) remains the same, but is renumbered (3).

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

24.159.611 PROGRAM CLOSURE AND RECORDS STORAGE (1) A ~~nursing education~~ program may close voluntarily or may be closed involuntarily due to withdrawal of board approval. Prior to closure, the ~~nursing education~~ program must ~~provide for:~~

(a) ~~maintenance of~~ maintain the standards for nursing education during the transition to closure;

(b) prepare and execute a plan that addresses the transition or placement for ~~of~~ students who have not completed the program; and

(c) make arrangements for the secure storage and access to academic records and transcripts.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: Recognizing the possibility for programs to close, the board is amending this rule to clearly delineate the board's expectations of programs in the closure process. Given that there are more students than positions in nursing education programs in Montana and nationally, the board concluded that this rule is not realistic in requiring programs to place students who have not completed the

programs. Therefore, the board is amending (1)(b) to require that programs prepare and execute plans to address students' transition or placement.

24.159.612 PROGRAM ANNUAL REPORT (1) An annual report for the current academic year ending June 30 must be submitted by September 1 of each year, except in the year in which the program submits a self-study report to the board or a national nursing accrediting agency. ~~The format and number of copies to be submitted to the board office will be determined by the board.~~

(2) remains the same.

(a) enrollment and graduation data for the ~~report year~~ (academic year), including:

(i) ~~number of full-time and part-time students~~ in each program track if more than one track; and

(ii) ~~student demographic data,~~ including in-state and out-of-state residency, race/ethnicity, and gender; ~~and~~

~~(iii) number of practical nurses entering the registered nursing education program.~~

~~(b) NCLEX pass rates for first time testers;~~

~~(c) (b) number of student positions available in the nursing education program, number of students accepted to program, and number of unfilled student positions and number of qualified applicants not accepted;~~

~~(d) (c) number names and qualifications of full-time and part-time faculty, including number of and Clinical Resource Registered Nurses (CRRNs);~~

~~(e) (d) number names of faculty on board waiver and dates of each waiver period;~~

~~(f) (e) summary of substantive changes reported to the board during the past year, pursuant to ARM 24.159.635; and~~

~~(g) (f) description of progress made by program on improvements recommended by the board or program's accrediting body; and~~

~~(g) other information as requested by the board.~~

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: Because the board takes its review of annual reports very seriously, the board is amending this rule to clarify for the programs exactly what the board will monitor each year. The amendments also allow the board necessary flexibility to request other information annually from programs, which may relate to current and ongoing trends or program specific issues of the board's interest.

24.159.625 ESTABLISHMENT OF A NEW NURSING EDUCATION PROGRAM (1) ~~The first phase of establishing a new nursing education program is Phase I, notice of intent.~~ The applicant shall notify the board of the intent to establish a new ~~or expanded nursing education~~ program by providing the following information for a Phase I application:

~~(a) results of an assessment of the need for the proposed nursing education program, including identification of potential employment opportunities for program graduates;~~

~~(b) type of educational program and proposed timetable for initiating the program;~~

~~(c) total proposed student enrollment;~~

~~(d) list of proposed faculty positions and faculty qualifications;~~

~~(e) description of proposed clinical opportunities that will meet expected outcomes for student training needs in each course with a clinical component;~~

~~(f) identification of financial, physical, personnel, and other resources necessary for the planning, implementation, and continuation of the program;~~

~~(g) proposed procedure for marketing program to potential students and eligibility requirements for student admission to the program;~~

~~(h) proposed transition plan for students who may transfer to the program;~~

~~(i) description of how the proposed program may affect existing nursing programs that share the proposed clinical sites, and indication that plans and the needs assessment regarding the proposed program have been shared with the directors of existing affected programs in the state;~~

~~(j) letter of commitment from the governing institution that outlines financial, physical, personnel, and other resources that will be devoted to the proposed nursing education program; and~~

~~(k) letters of support for proposed program from communities of interest.~~

(a) results of a needs assessment, including identification of potential and available students and employment opportunities for program graduates;

(b) commitment by the governing institution of sufficient financial and other resources necessary for the planning, implementation, and continuation of the program;

(c) evidence of governing institution approval and support;

(d) evidence of community support;

(e) type of program proposed;

(f) description of proposed clinical opportunities and availability of resources;

(g) availability of a qualified faculty and program director;

(h) total proposed student enrollment;

(i) a proposed timeline for initiating the program;

(j) description of how the proposed program may affect existing programs that share the proposed clinical sites; and

(k) indication that plans and the needs assessment regarding the proposed program have been shared with the directors of all programs in the state.

(2) remains the same.

(3) The next step is Phase II, application for initial approval for admission of students. The applicant shall provide the following information to the board:

(a) name of a qualified nurse administrator who has been appointed to administer the ~~nursing education~~ program;

(b) list of sufficient qualified faculty, CRRNs, and administrative staff to develop and initiate the program;

~~(c) name of qualified consultant(s), if applicable, who has worked with nurse administrators and faculty to develop program and curriculum;~~

- (d) remains the same, but is renumbered (c).
- (i) and (ii) remain the same.
- (e) remains the same, but is renumbered (d).
- (f) (e) description of use of each clinical site by other nursing education programs;
- (g) through (j) remain the same, but are renumbered (f) through (i).
- (4) ~~The~~ Prior to Phase II approval, the board shall conduct an onsite program inspection prior to Phase II approval visit to verify the information in the written report and ascertain the readiness of the program to admit students.
- (5) ~~For programs under the jurisdiction of the Montana Board of Regents, the board will notify the Montana Board of Regents of pending board approval of the proposed program and, after receiving notification of the program's approval from the Board of Regents, will finalize Phase II approval.~~
- (6) remains the same, but is renumbered (5).
- (7) (6) The last step is Phase III, ~~continued program~~ full approval of the program. The board shall grant ~~continued~~ full approval of a nursing education program upon:
 - (a) submission by the program of a self-study report, any applicable fees per ARM 24.159.401, and completion of a site survey by the board, ~~following the graduation of the first class of students; and that verifies that the program is in compliance with the board's nursing education standards.~~ The visit is to be held following the graduation of the first class of students.
 - (b) ~~a board finding that the program is in substantial compliance with the nursing education program rules.~~
 - (8) (7) ~~When the board does not grant continued program approval in Phase III, the program is subject to~~ The board may grant full approval, conditional approval, or ~~denial of~~ deny approval, as outlined in ARM 24.159.640.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: Nursing programs have consistently declared that the current process to establish new education programs is very confusing to educational institutions. The board is amending this rule to clarify this process and assist the board in its regulatory obligation to approve new programs.

24.159.630 CONTINUED APPROVAL OF NURSING EDUCATION PROGRAMS (1) The board shall evaluate approved nursing education programs for continued approval by monitoring and analyzing program performance through:

- (a) remains the same.
- (b) accreditation visits and reports; ~~and~~
- (c) annual reports; and
- (c) remains the same, but is renumbered (d).
- (i) through (iii) remain the same.
- (iv) ~~trend~~ data regarding NCLEX performance.
- (2) ~~Continued program approval will be granted upon the board's verification that the program is in substantial compliance with the board's nursing education~~

~~program rules. Programs shall maintain annual NCLEX pass rates for first-time test takers that are no less than ten percentage points below the national average. If a program's pass rate is ten percentage points or more below the national average pass rate, the program must submit a report analyzing the variance and a plan to meet the pass rate requirement.~~

~~(3) NCLEX pass rates are calculated each calendar year for first-time test takers.~~

~~(a) The first year a program's average pass rate is ten percentage points or more below the national average pass rate, the program will be issued a letter of notice from the board.~~

~~(b) The second consecutive year a program's average pass rate is ten percentage points or more below the national average pass rate, the program will be placed on conditional approval status by the board per ARM 24.159.640. The program must submit to the board a written plan to improve the pass rate.~~

~~(c) The third consecutive year a program's average pass rate is ten percentage points or more below the national average pass rate, the program must submit a self-study report to the board. The board may also perform a site visit.~~

~~(d) Compliance with this rule for RN programs having less than 21 students per year and PN programs having less than 15 students per year will be based upon two consecutive years of NCLEX pass rates for first-time test takers.~~

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: The board determined it is reasonably necessary to amend this rule as it has been a source of confusion for the board and the programs during NCLEX score reviews. Additionally, the current rule obligates the board to put a program on conditional approval in the second year of low scores, and the board lacks the leverage to place a program on conditional approval for the first year of low NCLEX scores. After recently dealing with the confusion in evaluating a few board-approved programs, the board is now amending this rule to provide the board appropriate flexibility and discretion in determining whether to place a program on conditional approval status. The board is also amending the rule to require that a program with a below-average pass rate must submit an analysis of the problem and a plan to meet the requirement.

~~24.159.632 NURSING EDUCATION PROGRAM SURVEYS (1) To ensure ongoing compliance with the board's statutes and rules, those approved nursing education programs not accredited by a national nursing accreditation agency recognized by the U.S. Department of Education must be surveyed onsite and reevaluated for continued approval at least every ten five years and in conjunction with the program's visit from an approved, recognized national nursing accreditation body. If the program is not nationally accredited, the board must perform site visits at least every five years. Each time a program survey is performed, the entire program is evaluated for all components under board jurisdiction.~~

~~(2) Before a an onsite survey, a school that is not nationally accredited must submit a self-study report to the board office providing evidence of compliance with~~

~~the appropriate nursing education requirements rules. The school must forward the number of copies and format of the self-study report and related documents as determined by the board, to the board office at least 60 days before a scheduled site visit. If a program holds national nursing accreditation, the board will accept the same self-study report and related documents submitted to the accrediting body. The board will designate the number of copies required, which shall be submitted to the board office at least 60 45 days before the scheduled site visit onsite survey.~~

(3) ~~The onsite survey is performed by a qualified site visitor and the board's executive director or education consultant and a qualified site visitor on dates mutually agreeable to the board and the program. The site visitor must have expertise in relation to the type of program being reviewed.~~

(a) ~~The surveyors' draft report must should be made available to the program within 30 20 days of the site visit onsite survey.~~

(b) ~~The program may submit a written response to the draft survey report within 20 14 days to address identified program deficiencies and to present supplemental information.~~

(c) ~~Taking into account the supplemental information provided by the program, the surveyors will finalize the survey report within 30 days of the program response. The final survey report will be made available to the program within ten days of report submission to the board.~~

(d) ~~The program may submit a written response to the final survey report only for clarification and correction of survey findings within 30 days of receipt of the final report. The program's response to the final survey report may not be more than ten pages in length, and if supplemental information or a response to the draft or final survey report is not submitted in compliance with these rules, it may be returned to the program or disregarded by the board.~~

(4) ~~The board shall review the final survey report and the program's responses before making any program response and make a finding regarding whether the program is in substantial program's compliance with the nursing education program rules.~~

(5) ~~Following the board's review and decision, the board must send written notification regarding approval or withdrawal of approval of the program and the board's recommendations to the program director and the leadership of the parent institution will be notified of the finding, and the program status will be placed on the board web site.~~

(6) ~~The board office shall issue a certificate of approval to all schools continuing to meet the minimum nursing program requirements.~~

(7) remains the same, but is renumbered (6).

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: The board is amending this rule to only require board site visits for programs without national nursing accreditation. This amendment will decrease unnecessary work for the board and recognize accredited programs as a standard the board encourages. The amendments will also clarify the timeline and responsibilities of the board and the program in the survey process. The board

anticipates a more straightforward process with less confusion for the programs when coordinating visits from the board and accrediting bodies, and for program directors that have requested clarification.

24.159.635 REQUIREMENTS FOR REPORTING ON CHANGES AFFECTING PROGRAM INCLUDING PROGRAM EXPANSION SUBSTANTIVE CHANGES (1) The program director or academic chief officer is required to ~~notify~~ report to the board of any proposed substantive change affecting the nursing education program that may affect the program's compliance with the nursing education rules. Substantive changes include, but are not limited to:

- (a) changes in legal status, control, or ownership of the parent institution;
- (b) change in accreditation or approval status of the program or the program's parent institution;
- (c) through (e) remain the same.
- (f) change in program director; ~~or~~
- (g) major reduction in financial or other program resources; or
- (h) additional enrollment changes that require increases to the program's resources or that may affect the availability of clinical settings.

~~(2) For programs under the jurisdiction of the Montana Board of Regents, the board will make a recommendation to the Montana Board of Regents concerning the substantive change.~~

~~(3)~~ (2) Prior board Board approval is required for program expansion prior to additional enrollment changes that require increases to the program's resources or that may affect the availability of clinical settings. Only programs in full board approval status may make such a request program expansion. A The request for program expansion must be submitted a minimum of 30 days prior to the board meeting, at which the ~~expansion~~ additional enrollment changes will be considered. For proposed ~~program expansion~~ additional enrollment changes, the following information must be included:

- (a) remains the same.
- (b) ~~budgeted faculty positions~~ the anticipated number of students;
- (c) ~~availability evidence~~ of adequate clinical and academic facilities for the program to support the additional enrollment;
- (d) evidence of adequate financial resources adequate for the planning, implementation, and continuation maintenance of the program expansion enrollment changes;
- (e) evidence of the need for ~~program expansion~~ the additional enrollment changes;
- (f) ~~anticipated expansion in student population~~ evidence of adequate faculty resources;
- (g) tentative timetable for planning and initiating the ~~program~~ enrollment changes;
- (h) description of how the ~~proposed expansion~~ additional enrollment may affect the existing nursing programs in the state, and indication that plans and the feasibility study regarding the ~~proposed expansion~~ additional enrollment have been shared with the directors of existing Montana programs;

- (i) curriculum modifications required to accommodate the targeted student population; and
- ~~(j) evidence showing the program's NCLEX pass rates being at or above the national average for at least three of the last five years; and~~
- ~~(k) (j) a plan for continued assessment using the program evaluation plan.~~
- (4) remains the same, but is renumbered (3).

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: The programs have expressed confusion to the board regarding which program changes must be reported to the board. The board believes the amendments will clarify the board's expectations for programs when there is a substantive change, or changes that affect a program's compliance with board rules.

24.159.640 CONDITIONAL APPROVAL, WITHDRAWAL OF APPROVAL, OR DENIAL (1) remains the same.

~~(2) Change in approval status may be given for a specific time period. The board may require a special report and/or repeat the site visit during the period of the change in approval status.~~

~~(3) (2)~~ The board may place a program on conditional approval when the board determines that an approved nursing education program is not in substantial compliance with the board rules for nursing education programs. The board will work with the governing academic institution to determine a mutually agreed upon time frame for may require the submission of an action plan, subject to board approval, to correct the identified program deficiencies.

~~(4) If the school does not correct the deficiencies within the time period and in the manner specified by the action plan, the board may require that the school stop admitting students until the deficiencies are corrected.~~

~~(5) (3)~~ The board shall withdraw approval if a program fails to correct deficiencies within the time specified or in accordance with a board-approved action plan. When approval is withdrawn, the board shall remove the program from the list of approved programs and notify the applicable national accrediting body, NCSBN, and the NCSBN testing services that the program is no longer approved. Whenever approval has been withdrawn, the program may not recruit or admit students prospectively without specific board approval.

~~(6) (4)~~ Programs notified of a change in board A program denied approval or given less than full approval status may request a hearing within 60 days is entitled to notice and a hearing to contest the decision under the same procedures provided licensees, in accordance with the Montana Administrative Procedure Act and Title 37, chapter 1, part 3, MCA.

~~(7) (5)~~ Once a program corrects deficiencies, the board shall reinstate the program to conditional or approval status, as deemed appropriate by the board for a minimum of one year or until the board determines the program has achieved sufficient compliance with these rules.

~~(8) The board may not consider a program on conditional status for any type of program expansion.~~

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: In recent years, the board has placed several programs on conditional approval status, and the process was confusing for the school and the board. The programs are very concerned when board approval is changed, as it affects student admission, recruitment of students and faculty, and national accreditation standing. The board is amending this rule to clearly delineate the process the board will follow in decisions relating to a change of approval status.

24.159.650 NURSING EDUCATION PROGRAM DIRECTOR

~~(1) Baccalaureate and associate degree RN programs~~ A program must be administered by a full-time program directors director who shall be responsible for program administration. The directors of the professional programs shall possess the following licensure, education, and experience qualifications:

~~(a) remains the same.~~

(b) a graduate degree in nursing from a nationally recognized accredited program;

~~(b) remains the same, but is renumbered (c).~~

~~(c) (d) at least two years of experience in nursing education, including didactic and clinical teaching at the level of the program's highest terminal degree; and~~

~~(d) (e) educational preparation or experience in registered nursing education, teaching, and learning principles for adult education, including but not limited to curriculum development and administration.~~

~~(2) The director is responsible to ensure that all faculty, CRRNs, and preceptors meet the requisite qualifications and maintain current records of those faculty qualifications, licenses, and evaluations.~~

(2) The program director is responsible for:

(a) ensuring that all faculty, CRRNs, and preceptors meet the requisite qualifications and maintaining current records of those qualifications and performance evaluations;

(b) ensuring that clinical agency contracts are executed periodically, according to institutional or program policy;

(c) faculty assignments and evaluations;

(d) managing educational resources; and

(e) compliance with board rules.

~~(3) The director is responsible to ensure that clinical agency contracts are executed periodically, according to institutional or program policy, and contracts include at least the following elements:~~

~~(a) clinical agency responsibilities related to supervision or guidance of students;~~

~~(b) clinical agency requirements for student criminal history or health, such as immunizations, Tuberculosis testing, and any necessary follow-up, as required by the agency;~~

~~(c) nursing education program requirements for student criminal history or health, such as immunizations, Tuberculosis testing, and any necessary follow-up actions, as required by the program's student policies; and~~

~~(d) clinical agency requirements for scheduling of students for clinical experiences.~~

~~(4) The director of the baccalaureate program shall possess a doctorate in nursing or a related field, from a nationally recognized accredited program, with preparation in education and administration. If a master's degree is not held, one of the graduate degrees must be in nursing.~~

~~(a) The board may allow an exception to the educational requirement of a doctorate for a period not to exceed one academic year. Such an exception would require the interim director to hold at least a master's degree in nursing.~~

~~(5) The director of the associate degree RN program shall possess a master's degree in nursing or public health with a major in nursing, from a nationally recognized accredited program, with preparation in education and administration.~~

~~(6) Practical nursing education programs must be administered by a full-time program director who shall devote a minimum of 50 percent time to administrative activities and shall possess the following qualifications:~~

~~(a) a current unencumbered license to practice as a registered nurse in the state of Montana;~~

~~(b) a master's degree with a major in nursing or a minimum of a baccalaureate degree in nursing, supplemented by courses in curriculum development, principles and methods of teaching, and measurement and evaluation;~~

~~(c) at least two years of experience in nursing practice; and~~

~~(d) at least two years of experience in nursing education, including didactic and clinical teaching in the level of preparation of program graduates.~~

~~(7) remains the same, but is renumbered (3).~~

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: National standards have changed for directors of nursing programs, and national nursing accreditation bodies no longer require a doctoral degree for nursing program directors of baccalaureate programs. The board determined it is reasonably necessary to amend this rule in accordance with those changes, and to delete confusing language on clinical agencies that is being relocated more appropriately in ARM 24.159.606. This amendment will clearly delineate program director responsibilities, and assist in program evaluation for the board.

24.159.655 NURSING EDUCATION PROGRAM FACULTY

RESPONSIBILITY (1) There must be a sufficient number of qualified faculty to meet the purposes and objectives of the nursing program. Faculty includes all nurses employed by the program to provide didactic and/or clinical/laboratory experiences, ~~except clinical~~ Clinical resource nurses (CRRNs) and preceptors are not considered faculty.

(2) Clinical and didactic faculty, ~~CRRNs, and preceptors~~ shall hold unencumbered Montana nursing licenses to practice nursing.

- (3) through (7) remain the same.
- (a) ~~planning, implementing, and evaluating learning experiences based on each course's objectives;~~
- (b) remains the same.
- (c) ~~providing for student and peer evaluation of teaching effectiveness; and~~
- (d) ~~participating in the selection of new faculty and the promotion and tenure of other existing faculty.~~
- (8) remains the same.
- (9) ~~Written job descriptions and performance expectations must be available for each position. When providing direct patient care, no more than ten students may be supervised at a time by a faculty member.~~
- (10) ~~Personnel policies must be in writing and must include selection, appointment, promotion, and faculty development.~~

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: The board determined it is reasonably necessary to amend and reorganize provisions of ARM 24.159.659, 24.159.662, and this rule, while adopting New Rule I, to provide clearer guidelines for nursing programs and the board requirements for program faculty.

24.159.659 FACULTY FOR REGISTERED NURSING EDUCATION PROGRAMS (1) through (1)(b) remain the same.

- (c) ~~except as otherwise provided in this rule these rules, hold at least a master's graduate degree with a major in nursing, or a doctorate in nursing, from a nationally accredited program.~~
- (2) ~~Faculty members who do not meet faculty qualifications may be considered by the board and if approved, shall not exceed the number or percentage specified by this rule.~~
- (3) ~~Faculty members not holding any master's degree will have three years from the date of board approval of waiver to obtain a master's degree in nursing, as set forth by the faculty qualifications.~~
- (4) ~~For each faculty member who does not meet the education requirements of (1), the program director shall immediately notify the board in writing of the hire of the nonmaster's prepared faculty member along with a plan to address compliance with the education requirements.~~
- (5) ~~Failure to comply with this rule constitutes noncompliance with board rules, and will subject the program to action deemed appropriate by the board, including loss of the program's approval.~~
- (6) ~~A maximum of 10 percent or two faculty members, whichever is greater based on FTE, may come under the exception at any point in time at a given school.~~
- (7) ~~When providing direct patient care, no more than ten students may be supervised at a time by a faculty member. The number of students must be determined by the educational and clinical resources and faculty sufficient to meet the goals of the program and the requirements of the board.~~

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: See REASON for ARM 24.159.655.

24.159.662 FACULTY FOR PRACTICAL NURSING EDUCATION

PROGRAMS (1) All nursing faculty for practical nursing programs, including part-time, shall hold at least one of the following degrees from a nationally accredited program:

(a) a baccalaureate degree in nursing, supplemented with coursework in curriculum development, principles and methods of teaching, and measurement and evaluation;

(b) a master's degree in nursing; or

(c) a doctorate degree in nursing or a related field.

(a) hold a current unencumbered license to practice professional nursing in Montana;

(b) have at least two years of experience in nursing practice; and

(c) hold a minimum of a baccalaureate degree in nursing.

(2) Faculty members shall:

(a) have at least two years experience in nursing practice; and

(b) hold a current unencumbered license to practice professional nursing in the state of Montana.

(3) When providing direct patient care, no more than ten students may be supervised at a time by a faculty member. The number of students must be determined by the educational and clinical resources and faculty sufficient to meet the goals of the program and the requirements of the board, including ARM 24.159.666, pertaining to the use of CRRNs.

(4) A maximum of ten percent or two faculty members, whichever is greater, based on full-time equivalents, may qualify under an exception at any point in time at a given school.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: See REASON for ARM 24.159.655.

24.159.665 CLINICAL PRECEPTORS IN NURSING EDUCATION

PROGRAMS (1) remains the same.

(2) Preceptor utilization is limited to no more than 20 percent of a student's total clinical hours in the program.

(3) remains the same, but is renumbered (2).

(a) remains the same.

(b) selecting the individual preceptors and ensuring appropriate preceptor qualifications and scope of responsibility;

(c) and (d) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: Following recent input of nursing program directors and the rules committee review of the rules, the board concluded that use of preceptors for educational purposes should not be limited to 20 percent of the total clinical hours. The board believes this restriction hinders nursing program ability to take advantage of clinical learning opportunities such as dedicated education units in clinical facilities, which nursing research literature has recently shown to improve student learning. Additionally, nursing programs do not always have the ability to select the preceptor, as this is done in partnership with the clinical facility.

24.159.666 USE OF CLINICAL RESOURCE REGISTERED NURSES (CRRNS) IN NURSING EDUCATION PROGRAMS (1) ~~CRRNs may be used to enhance, but not replace, faculty-directed clinical learning experiences.~~ A clinical resource registered nurse (CRRN) is an RN with an unencumbered Montana nursing license who provides supervision, demonstration, and collaborative evaluation of student performance in a clinical or laboratory setting. ~~The CRRN is solely responsible for students and must have no concurrent clinical responsibilities.~~

(2) CRRNs may be used to enhance, but not replace, faculty-directed clinical learning experiences. The supervising faculty member is responsible for all students in the clinical setting, including those supervised by the CRRNs. The maximum number of nursing students a CRRN may supervise at any one time is ten.

(3) ~~Although a CRRN is not considered to be a faculty member of a program, a CRRN may be used by the program to maintain a ten-to-one student-to-instructor supervision ratio in a clinical setting.~~ The CRRN is solely responsible for students and must have no concurrent clinical responsibilities.

(4) remains the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: The board notes that this is a rule unique to Montana as other states do not generally use the term "CRRN" or have this type of position in nursing programs. The board is therefore amending this rule to specifically define the term as separate from nursing faculty member requirements, for those nursing programs that seek national accreditation from outside agencies.

24.159.670 CURRICULUM GOALS AND GENERAL REQUIREMENTS FOR NURSING EDUCATION PROGRAMS (1) remains the same.

(2) The faculty shall develop, review, and update the curriculum on an ongoing basis. The curriculum ~~for nursing educational programs~~ must meet the following general criteria:

(a) reflect the guiding principles, organizational framework, purpose, and educational objectives of the ~~nursing education~~ program and be consistent with the statutes and rules governing the practice of nursing, as well as the national standards and codes of ethics for nursing practice;

(b) through (4) remain the same.

(5) For each clinical credit hour, there shall be at least two hours of applied laboratory experience.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

5. The proposed new rule provides as follows:

NEW RULE I WAIVER OF FACULTY QUALIFICATIONS (1) Programs may hire a limited number of faculty members who do not meet the educational qualifications as noted in ARM 24.159.659 and 24.159.662. In the event that this occurs, the program must immediately notify the board in writing of the hire and include a written plan for meeting that qualification.

(2) Programs may employ a maximum of ten percent or two faculty members, whichever is greater, based on total faculty FTE, who do not hold a graduate degree in nursing (for registered nurse education programs) or a baccalaureate degree in nursing (for practical nurse education programs). Those individuals shall have no more than five years from the date of employment to obtain the requisite degree.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: The board proposes to adopt this new rule to allow nursing programs to hire faculty who are still completing the degree requirements for RN or LPN faculty. The board is incorporating provisions from ARM 24.159.659 and 24.159.662, as well as a new provision allowing for five-year waivers instead of three-year ones. The board is increasing the waiver period to align with the recent trend in nursing education to prepare nurses at the graduate level for a DNP (doctorate of nursing practice), instead of an MN (masters in nursing). The DNP takes longer to complete, and the board has found that Montana programs benefit meaningfully when able to utilize waivers to meet the board's minimum standards for employing qualified educators.

6. The board proposes to repeal the following rules:

24.159.601 STATEMENT OF PURPOSE FOR NURSING EDUCATION PROGRAM RULES found at ARM page 24-16471.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: The board is repealing this rule to eliminate unnecessary provisions. Noting there is no requirement to explain the overall purpose of rules, the board concluded that this explanatory rule is unnecessary.

24.159.615 RECOGNIZED ACCREDITATION BODIES found at ARM page 24-16477.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, 37-8-302, MCA

REASON: The board is repealing this unnecessary rule because the names of accrediting bodies routinely change, and the requirement that parent institutions are accredited by a national accrediting body approved by the U.S. Department of Education is adequately addressed in amendments to ARM 24.159.605.

24.159.656 FACULTY QUALIFICATION REPORT found at ARM page 24-16497.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-204, 37-8-301, 37-8-302, MCA

REASON: The board concluded that the faculty qualification report was a burden on the school and on the board, and did not serve the purpose of ensuring that programs meet the nursing faculty requirements in ARM 24.159.659. Programs typically submit the qualifications once a faculty member is hired and the board then "rubber stamps" its approval of the faculty member. Repealing this rule will not impact the program's responsibility to hire only those faculty members who meet the board's requirements.

24.159.674 PROFESSIONAL NURSING CURRICULUM SPECIFIC TO BACCALAUREATE DEGREE found at ARM page 24-16505.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: The board does not distinguish nursing practice for professional nurses on the basis of academic preparation. Graduates of a baccalaureate degree nursing program or an associate degree nursing program are both eligible for licensure as RNs and the definition of professional nursing in 37-8-102, MCA, does not differentiate regarding an applicant's preparation.

There is also no distinction in the administrative rules of the practice of registered nurses in subchapter 12. The board concluded this rule is not needed now or in the immediate future, especially with the amendment proposed to ARM 24.159.604(1)(a), to require that programs address current RNs practice standards.

24.159.677 PROFESSIONAL NURSING CURRICULUM SPECIFIC TO ASSOCIATE DEGREE found at ARM page 24-16506.

AUTH: 37-8-202, 37-8-301, MCA
IMP: 37-8-202, 37-8-301, MCA

REASON: See REASON for ARM 24.159.674.

24.159.680 CURRICULUM REQUIREMENTS FOR PRACTICAL NURSING PROGRAMS found at ARM page 24-16507.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-202, 37-8-301, MCA

REASON: The board determined this rule is not necessary to determine the quality of programs for LPN education, as this is primarily based upon the definition of LPN practice in 37-8-102(8), MCA, and because the proposed amendment to ARM 24.159.604(1)(a) will require programs to address the current practice standards for LPNs if the program leads to LPN licensure.

7. Concerned persons may present their data, views, or arguments either orally or in writing at the hearing. Written data, views, or arguments may also be submitted to the Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513, by facsimile to (406) 841-2305, or e-mail to nurse@mt.gov, and must be received no later than 5:00 p.m., March 27, 2015.

8. An electronic copy of this notice of public hearing is available at www.nurse.mt.gov (department and board's web site). The department strives to make the electronic copy of this notice conform to the official version of the notice, as printed in the Montana Administrative Register, but advises all concerned persons that in the event of a discrepancy between the official printed text of the notice and the electronic version of the notice, only the official printed text will be considered. In addition, although the department strives to keep its web site accessible at all times, concerned persons should be aware that the web site may be unavailable during some periods, due to system maintenance or technical problems, and that technical difficulties in accessing or posting to the e-mail address do not excuse late submission of comments.

9. The board maintains a list of interested persons who wish to receive notices of rulemaking actions proposed by this board. Persons who wish to have their name added to the list shall make a written request that includes the name, e-mail, and mailing address of the person to receive notices and specifies that the person wishes to receive notices regarding all board administrative rulemaking proceedings or other administrative proceedings. The request must indicate whether e-mail or standard mail is preferred. Such written request may be sent or delivered to the Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513; faxed to the office at (406) 841-2305; e-mailed to nurse@mt.gov; or made by completing a request form at any rules hearing held by the agency.

10. The bill sponsor contact requirements of 2-4-302, MCA, do not apply.

11. With regard to the requirements of 2-4-111, MCA, the board has determined that the amendment of ARM 24.159.604, 24.159.605, 24.159.606, 24.159.608, 24.159.609, 24.159.611, 24.159.612, 24.159.625, 24.159.630, 24.159.632, 24.159.635, 24.159.640, 24.159.650, 24.159.655, 24.159.659, 24.159.662, 24.159.665, 24.159.666, and 24.159.670 will not significantly and directly impact small businesses.

With regard to the requirements of 2-4-111, MCA, the board has determined that the adoption of NEW RULE I will not significantly and directly impact small businesses.

With regard to the requirements of 2-4-111, MCA, the board has determined that the repeal of ARM 24.159.601, 24.159.615, 24.159.656, 24.159.674, 24.159.677, and 24.159.680 will not significantly and directly impact small businesses.

Documentation of the board's above-stated determinations is available upon request to the Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513, facsimile (406) 841-2305, or e-mail nurse@mt.gov.

12. Tyler Moss, attorney, has been designated to preside over and conduct this hearing.

BOARD OF NURSING
HEATHER O'HARA, RN, PRESIDENT

/s/ DARCEE L. MOE
Darcee L. Moe
Rule Reviewer

/s/ PAM BUCY
Pam Bucy, Commissioner
DEPARTMENT OF LABOR AND INDUSTRY

Certified to the Secretary of State February 17, 2015