

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

In the matter of the proposed)	NOTICE OF PUBLIC HEARING
amendment of ARM 8.32.801,)	ON PROPOSED AMENDMENT,
8.32.802, 8.32.804, 8.32.806,)	ADOPTION AND REPEAL
8.32.807, 8.32.1102, 8.32.1103,)	
8.32.1108, 8.32.1109, 8.32.1110,)	
8.32.1111, 8.32.1112, 8.32.1113,)	
8.32.1114, 8.32.1116, the proposed)	
adoption of new rules I-III, and)	
the proposed repeal of 8.32.803,)	
8.32.1115 and 8.32.1117, relating)	
to nursing education programs -)	
approval requirements)	

TO: All Concerned Persons

1. On December 19, 2002, at 9:00 a.m., a public hearing will be held in room 438 of the Park Avenue Building, 301 South Park Avenue, Helena, Montana to consider the proposed amendment, adoption, and repeal of the above-stated rules.

2. The Department of Labor and Industry will make reasonable accommodations for persons with disabilities who wish to participate in this public hearing or who need an alternative accessible format of this notice. If you require an accommodation, contact the Board of Nursing no later than 5:00 p.m., December 11, 2002, to advise us of the nature of the accommodation that you need. Please contact Jill Caldwell, Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513; telephone (406) 841-2342, Montana Relay 1-800-253-4091; TDD (406) 444-2978; facsimile (406) 841-2343; e-mail dlibsdnur@state.mt.us.

3. The Board believes there is reasonable necessity for rulemaking on the subject of nursing education programs to provide all Montana nursing schools and programs with approval requirements that are clear, concise and therefore, more readily followed. This project is the culmination of nearly three years of cooperative and progressive meetings between Board members, Board staff, and representatives of the Montana schools of nursing. The schools and/or programs represented at the meetings included Montana State University-Bozeman, Billings-College of Technology-MSU, Carroll College, Butte-Division of Technology-MT, Great Falls-College of Technology-MSU, Helena-College of Technology-UM, Miles Community College, Salish Kootenai College, Missoula-College of Technology-UM, Butte-MT Tech of the U of M, and Montana State University-Northern.

This rulemaking project represents the consensus view of the Board and the schools on Board guidelines and requirements for nursing schools, programs and faculty. The nursing schools had approached the Board, expressing a great deal of confusion

as to exactly what the Board expected of the schools for initial and continued approval of schools, curricula, and faculty, and what documentation is necessary to submit to the Board. The existing rules as written are apparently unclear and the Board believes they may not provide adequate notice to the schools of the requirements for school approval. The proposed changes address the areas of concern raised by the various nursing programs, staff and the Board. The proposed amendments, adoptions and repeals of this notice are also part of the Board and Department's ongoing comprehensive rule review in an effort to reduce confusion, eliminate redundancy and archaic language, and increase the overall effectiveness in application of the rules.

The proposed rule changes are based on researched evidence and accreditation requirements for nursing education programs. The proposed changes continue to meet the requirements of other U.S. boards of nursing for initial licensure and preparation for entry level practice. It is important for Montana program graduates to meet the educational requirements of any state in which they may seek licensure, and not just the requirements set forth in Montana.

This statement of reasonable necessity applies to all the rule changes proposed. Additional reasons will be noted as applicable.

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

8.32.801 APPLICATION FOR INITIAL APPROVAL (1) An educational institution wishing to establish a program in nursing and to secure initial approval shall:

~~(2) Submit to the board of nursing, at least two calendar years in advance of expected opening date, a statement of intent to establish a program in nursing. Report of a feasibility study is required at least one calendar year prior to the expected opening date. Any exceptions must be approved by the full board.~~

(3)(2) The feasibility study will is required at least one calendar year before the expected implementation date and must include at least the following information:

(a) Nursing manpower studies population data within the past three years and workforce supply and demand data from the past year documenting the need for the program as it relates to plans for total state resources and nursing education needs within the state-;i

(b) through (d) remain the same.

(e) Availability of adequate clinical and academic facilities for the program-;i

~~(f) Availability of adequate academic facilities for the program-~~

(g)(f) Evidence of financial resources adequate for the planning, implementation and continuation of the program-;i

(h)(g) Anticipated student population-;i

(i)(h) Tentative time table for planning and initiating

the program; and

(j) remains the same, but is renumbered (i).

~~(4)(3)~~ When the data submitted in the feasibility study ~~is~~ are reviewed, the board may request additional information ~~or~~ and may conduct a ~~survey site visit~~ to evaluate the information submitted as the board may deem necessary.

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

~~(6)(5)~~ ~~Initial approval may be applied for when~~ The following conditions have been must be met prior to application for initial program approval:

(a) a qualified nurse administrator has been appointed and there are plans for sufficient qualified faculty to initiate the program; and

(b) remains the same.

~~(7)(6)~~ Between six months and one year following the feasibility study, the board shall review and conduct a site visit utilizing the initial application and feasibility study for of the proposed program, and the board may grant initial approval following board review. Any communications from the board must be sent to the program director and the leadership of the parent institution. The program may then admit students who shall be eligible upon completion of the program to take the licensing examination.

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

~~(9)(8)~~ Following graduation of the first class, a ~~self-evaluation self-study~~ report of compliance with the ~~current Standards for Montana Schools of Professional or Practical Nursing ARM Title 8, chapter 32, subchapter 11,~~ shall be submitted and a ~~survey site~~ visit shall be made for consideration of full approval of the program.

(9) Only materials received at least 30 days before the next scheduled board meeting will be considered by the board.

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

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

8.32.802 SURVEY AND CONTINUED APPROVAL OF SCHOOLS ~~(1)~~ The board will review an application, related materials and site visit reports for initial approval or continued approval of professional or practical nursing programs only at times when the board is in formal session. Materials and site visit reports shall be in the board office 30 days prior to the board meeting.

~~(2)(1)~~ To insure ensure continuing ongoing compliance with the law and the board's ~~of nursing's minimum standards statutes and rules,~~ all approved nursing education programs will must be ~~surveyed site visited~~ and reevaluated for continued approval at least every ~~four~~ 10 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 approval site visits at least every five years.

~~(3)~~ The board, as a part of the initial and continuing approval process, will schedule a site visit to the program

~~being reviewed.~~

~~(4)(2) Prior to Before a site visit, a school will must submit a self-evaluation narrative self-study report to the board office which provides providing evidence of compliance with the appropriate nursing education standards requirements. The school will must forward six four copies of the self-evaluation narrative self-study report and six four copies of the school catalog to the board office by February 1 of the year in which a program visit is scheduled at least 60 days before a scheduled site visit. If a program holds national nursing accreditation, the self-study report used for the accrediting body must also be submitted to the board office at least 60 days before the scheduled site visit.~~

~~(5)(3) The site visit will be made is performed by representatives of the board a qualified site visitor and the board's executive director on dates mutually agreeable to the board and the school.~~

~~(a) Announcement of a site visit will be sent to schools three months in advance of the visit.~~

~~(b)(a) Schools will be asked to must participate in scheduling the site visit activities.~~

~~(c)(b) A draft of tThe site visit visitor's report will must be made available to the school for review and corrections in statistical data within 60 days of the site visit.~~

~~(c) The school may submit a written response to the site visitor's report for clarification and correction within 30 days of receipt of the report.~~

~~(d) Site visit reviewers will must include, but will not be limited to, the executive director of the board and an outside reviewer with expertise in relation to the type of program being reviewed.~~

~~(6) The school's self evaluation report of compliance with the board's standards and the report of the site visit will be submitted to the board one month prior to the board meeting date on which the review is scheduled.~~

~~(4) The board shall review the self-study report. Materials and site visit reports must be in the board office at least 30 days before the next scheduled board meeting.~~

~~(7)(5) Following the board's review and decision, the board must send written notification regarding approval of the program and the board's recommendations will be sent to the dean, program director or coordinator of the program and the leadership of the parent institution.~~

~~(8)(6) The board office shall issue A a certificate of approval will be issued to all schools that continue continuing to meet the minimum nursing program standards requirements. The dates of approval will be on the certificate.~~

~~(9) The procedure for conditional approval will be affected if the board determines the school does not meet all of the requirements of the law and nursing program standards. A conditionally approved school is one which fails to meet the requirements of 37-8-202, MCA, and ARM 8.32.801 through 8.32.807, and the Standards for Montana Schools of Professional Nursing or Practical Nursing. The procedure which follows will~~

~~be used (in accordance with ARM 8.32.802) for placing a school on conditional approval or removing it from conditional approval:~~

~~(a) If a school does not meet the standards set for the school, the board may place that school on conditional approval.~~

~~(b) Conditional approval 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 conditional approval.~~

~~(c) The school will be notified of the conditional approval status and the time and manner in which it must correct the deficiencies.~~

~~(d) If the school does not correct the deficiencies, the board may require the school to stop admitting students until the deficiencies are corrected.~~

~~(e) For continued non compliance of the standards, approval of the school will not be given and it will be removed from the approved school list.~~

~~(f) The school has the right to request a hearing in accordance with the Montana Administrative Procedure Act and Title 37, chapter 1, part 3, MCA, upon notification of lack of approval to admit students or removal of approval status.~~

~~(g) Once a school has corrected the deficiencies, it will be reinstated to full approval status.~~

~~(10)(7) The board may site-visit A a program may be visited at any time within the usual four year interval as deemed necessary by the board or at the request of the school.~~

(8) Each nursing program must maintain an annual NCLEX pass rate that is not 10 percentage points or more below the national average pass rate for first-time test takers.

(a) The first year a program's average pass rate is 10 percentage points or more below the national average, the program will be issued a letter of notice from the board.

(b) The second consecutive year a program's average pass rate is 10 percentage points or more below the national average, the program will be placed on conditional approval by the board. 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 10 percentage points or more below the national average, the program must submit a self-study report to the board. The board will also perform a site visit.

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

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

REASON: The Board proposes the amendment of this rule so that it allows schools to coordinate their national accreditation visits with those required by the Board. This will replace visits every four years for those schools that have national accreditation. For those programs that do not have national accreditation, the visits will be made at least every 5 years. This is a decrease, but the Board feels it can adequately monitor programs through other means. The Board retains the right to visit a school sooner than 5 or 10 years if a problem

is detected in the interim reporting.

This rule also requires schools to maintain a pass rate on the national exam of no more than 10% or more below the national pass rate average. For example: if the national average for first time testers is 85%, and the program's pass rate is 75% one year and 73% the next year, the Board must take action. If the pass rate is 76%, the board would watch the trends, but not take action on the program's approval status, unless other problematic outcome quality indicators were present that required Board action. This rule defines the steps that will be taken if a pass rate falls significantly below the national average, uses a non-arbitrary figure to which the programs agreed, and takes into account the relatively small sizes of some Montana nursing programs. The Board believes this is reasonably necessary since the NCLEX exam is a determinant of entry-level competency in nursing and failure of the exam will prevent an individual from obtaining licensure.

8.32.804 FACULTY QUALIFICATION REPORT (1) The school must submit a faculty qualification report form will be submitted for each newly employed faculty member on a form provided by the board when the faculty appointment becomes effective. Such forms are available from the board office and on the board's website and must be used by the school.

(2) The education committee of the board shall accept or reject the faculty qualifications and make recommendations for ratification by the full board record will be submitted when the faculty appointment becomes effective.

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

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

8.32.806 ANNUAL REPORT (1) An annual report for the preceding current academic year shall must be submitted by June 1 of each year, except in the year in which the program submits a self-study report. Four copies will must be submitted to the board office.

(2) The annual report will must provide current data for interim evaluation of the school by the full board. and will the The report must include:

(a) progress during the past year toward achievement of the school's program's stated goals and the program's goals for the forthcoming year;

(b) remains the same.

~~(c) any special reports and board communications submitted during the last year;~~

~~(d)~~(c) any changes during the last year in the following areas:

(i) qualifications or major responsibilities of the dean or program director and/or faculty;

~~(ii) qualifications or major responsibilities of faculty members;~~

~~(iii)~~(ii) policies or practices used for selection, promotion progression and graduation of students;

- ~~(iv)~~(iii) practices followed in safeguarding the health and well-being of the students; and
- ~~(v)~~(iv) curriculum plan, course descriptions, resources and facilities;
- ~~(vi)~~ course descriptions;
- ~~(vii)~~ resources; and
- ~~(viii)~~ facilities.
- (d) a summary of clinical agency contractual arrangements on a board furnished form; and
- (e) a list of current faculty and identification of those faculty members on education waiver, to include:
 - (i) the date the board approved the waiver for each faculty member on waiver;
 - (ii) the date the faculty member completed the waiver requirements; and
 - (iii) the current number and percentage of faculty on waiver to the total full-time equivalents in the nursing program;
- ~~(c) clinical agency contractual arrangements, to include a full list of all current agencies used for placement of students, approximate number of students per agency per semester, and any potential difficulties related to over-utilization by nursing students in any listed agency. Agencies new to the program must be identified on a form furnished by the board;~~
- ~~(f) a list of current faculty, including identification of those faculty members who are on waiver (those who do not meet required faculty qualifications), to include:~~
 - ~~(i) the date of the board approved waiver for each faculty member on waiver; and~~
 - ~~(ii) the current number and percentage of faculty on waiver to the total FTE's in the nursing program.~~
- ~~(g)~~(f) a report of faculty members' pertinent professional development (major activities to maintain expertise) for the past year. This does not include standard agency requirements such as basic life support, blood-borne pathogens, etc.;
- (h) remains the same, but is renumbered (g).
- ~~(i)~~(h) enrollment in the nursing program each year for the past five years;
- ~~(j)~~(i) number of graduations from the nursing program each year for the past five years;
- ~~(k) performance of students on state board examinations for the past five years (using data provided by the board office);~~
- ~~(l)~~(j) a statement from the program director indicating that the nursing program's budget is sufficient to meet program needs ~~(included on cover sheet of annual report form provided by board office);~~
- ~~(m)~~(k) four current copies of the school catalog and student handbook; and
- ~~(n)~~(l) goals for forthcoming year current program evaluation plan with measurable goals and data to support the evaluation of attaining those goals.

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

REASON: The annual reports will no longer be required in years that the school submits a self-study report. These requirements were in policy, but there has been increased confusion about the requirements, and schools of nursing wanted to see them in rule.

8.32.807 SPECIAL REPORTS (1) A special written report to the board must be submitted prior to initiation regarding The program director is required to notify the board of any proposed substantive change affecting the nursing education program. Substantive changes include, but are not limited to:

(a) substantive changes that significantly affect the administration, curriculum, students, faculty, clinical or education facilities changes in legal status, control, ownership or resources of the institution;

(b) the program's planned response to the changes change in accreditation or approval status;

(c) any potential difficulties related to over utilization by nursing students in any listed agency. significant change in faculty composition or size;

(d) significant change in teaching affiliations including, but not limited to, clinical affiliations or partnerships;

(e) significant enrollment, progression and graduation rates and other program outcome indicators;

(f) major curriculum revisions;

(g) change in degree offerings or program options;

(h) additional geographic sites or locations; and

(i) any expansion defined by the board.

(2) The substantive change report must document how, if at all, the change affects the program's compliance with the board's statutes and rules.

(3) Continued approval of the program is contingent upon the program director's apprising the board of substantive changes.

(4) The program director shall contact the board office to determine whether a particular change constitutes a substantive change for submitting a report to the board.

(5) Fourteen copies of the special report will must be sent to the board office for distribution to board members and staff. The special report will be considered by the board at the first regularly scheduled meeting that occurs more than 29 days following receipt of the special report at the board office. No further information will be considered by the board if not submitted at least 30 days before the meeting.

(6) For proposed program expansion, at least the following information must be included:

(a) purpose and classification of program;

(b) availability of qualified faculty;

(c) budgeted faculty positions;

(d) availability of adequate clinical and academic facilities for the program;

(e) evidence of financial resources adequate for the

planning, implementation, and continuation of the program;

(f) anticipated student population and impact or relationship to current student population, including plans for student academic and financial support;

(g) tentative timetable for planning and initiating the program;

(h) consideration of how the proposed expansion may affect the existing nursing programs in the state, and indication that plans and the feasibility study regarding the proposed expansion have been shared with the directors of existing Montana programs;

(i) population data within the past three years and workforce supply and demand data from the past year documenting the need for the program change as it relates to plans for total state resources and nursing education needs within the state;

(j) curriculum modifications required to accommodate the targeted student population; and

(k) evidence showing the program's NCLEX pass rates being at or above the national average for at least three of the last five years.

~~(3)(7) The board must shall approve, accept or deny the request prior to initiation of any requested change changes submitted prior to initiation of the change, unless the program is instructed otherwise by the board.~~

~~(4)(8) Other reports as may be Any additional information requested by the board for information will must be provided by the schools program in the period and manner specified by the board.~~

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

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

REASON: In addition to the reasonable necessity statement in paragraph three, the Board finds it necessary to amend this rule to clarify that to ensure sufficient preparation in advance of a Board meeting, additional information will not be accepted by the Board less than 30 days prior to the meeting. Deliberations by the Board must occur with adequate preparation by the Board members.

8.32.1102 STATEMENT OF PURPOSE (1) These standards requirements provide a basis for the state board of nursing to evaluate and approve nursing education programs and a format for nursing faculty and administrators to plan, implement and evaluate nursing education for the following professional and practical nursing programs:

(a) professional baccalaureate degree education for RN preparation;

(b) professional associate degree education for RN preparation; and

(c) associate degree education or certification for practical nursing education preparation.

(2) The following rules ~~must~~ set forth general ~~standards requirements~~ regarding all nursing education and specific

~~standards requirements~~ regarding:

(a) ~~curricula for:~~

(i) ~~professional baccalaureate degree education for RN preparation;~~

(ii) ~~professional associate degree education for RN preparation;~~ and

(iii) ~~associate degree education or certification for practical nurse educational nursing preparation programs;~~

(b) ~~faculty qualifications and responsibilities;~~ and

(c) ~~administrative roles and functions.~~

(3) These rules represent ~~minimal standards~~ minimum requirements. The board shall interpret ~~the standards~~ these rules to ~~insure~~ ensure that minimum ~~standards requirements~~ are met and to allow ~~faculty~~ flexibility to determine the scope, limits and direction of the nursing education program. ~~The board shall revise these standards periodically to meet the ever-changing health care needs of society and the continuing development of nursing education.~~

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

IMP: 37-8-301, MCA

REASON: These changes are necessary because current programs are offering different degrees or certificates, with associate degrees being offered for both practical and registered nurses. This rule simply clarifies and reflects the changes in education degrees offered.

8.32.1103 PHILOSOPHY, PURPOSE, ORGANIZATIONAL FRAMEWORK AND EDUCATIONAL OBJECTIVES, AND EXPECTED OUTCOMES

(1) The faculty of the nursing educational program shall develop and approve statements of philosophy, ~~purpose, organizational framework~~ and educational objectives, and expected outcomes that are consistent with those of the parent institution and with the ~~laws statutes and rules~~ governing the practice of nursing.

(2) The philosophy ~~statement~~ must include statements about nursing practice, and nursing education ~~and the graduate of the program.~~

(3) ~~The statements of philosophy, purpose, organizational framework and educational objectives must be used to plan, implement and evaluate the total program.~~

(4)(3) The ~~philosophy statement~~ above information must be included in the program catalog or otherwise made available to students. ~~Students must participate in program policy development.~~

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

IMP: 37-8-301, MCA

8.32.1108 PROGRAM EVALUATION (1) All nursing programs must have a formal evaluation plan developed by the faculty that is conducted on a regular basis and must include opportunity for student participation.

(2) Evaluations must ~~consider~~ address the following areas:

- (a) the philosophy, ~~organizational framework,~~ educational objectives, and expected outcomes ~~and curriculum of the program;~~
 - (b) the curriculum;
 - ~~(b)(c)~~ (c) policies governing recruitment, admissions, ~~promotion,~~ selection, progression, graduation and other matters affecting education, and health ~~and welfare~~ of students;
 - ~~(c)(d)~~ (d) factors contributing to faculty ~~growth,~~ welfare development, evaluation and effectiveness;
 - ~~(d)(e)~~ (e) adequate the adequacy of clinical facilities for student ~~practice~~ experiences in a variety of inpatient and community-based settings ~~to include acute care, chronic care and primary health care settings;~~
 - ~~(e)(f)~~ (f) adequate the adequacy of educational facilities including classrooms, technology, skills ~~labs~~ laboratories and library/information resources; and
 - ~~(f)(g)~~ (g) ~~documentation of health policy requirements which must be accessible to the student.~~
- (3) ~~The evaluation plan must include a recommendation based on evidence collected to make appropriate program revisions.~~ Program revisions must be based on evidence collected through the evaluation process.

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

REASON: These changes are necessary because of the Board's increase in focus on utilization of evidence-based decisions rather than past practice or outdated standards.

8.32.1109 ORGANIZATION AND ADMINISTRATION OF THE NURSING EDUCATION PROGRAM (1) Parent institutions conducting a nursing program must be accredited by the appropriate regional accrediting bodies.

(2) All 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 and signed by the responsible officers of each and must include the following:

(i) through (iii) remains the same.

(3) The organizational ~~pattern~~ structure of the nursing program must be comparable to similar programs of the parent institution. ~~Organizational charts showing the administrative structure of the nursing program and its relationship to other units must be developed.~~

(4) remains the same.

(5) Faculty and administration ~~shall~~ should participate in governance of the parent institution and policy development, including but not limited to, matters related to appeals and grievances. Policies governing faculty employment, promotion and tenure must be in writing and consistent with those of the parent institution.

(6) A nursing education program must provide students with

written policies regarding:

(a) admission, readmission, progression, dismissal and graduation requirements;

(b) personal health practices, designed to protect students, clients and faculty members, and requiring student compliance;

(c) information regarding the process of obtaining a license;

(d) access to the institution/program catalog; and

(e) opportunity for students to participate in program policy development.

(7) Programs must maintain current records of student achievement within the program and provide students with timely evaluations based on educational objectives.

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

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

IMP: 37-8-301, MCA

8.32.1110 PROGRAM DIRECTOR (1) Baccalaureate and associate degree RN programs must be administered by a full-time program director who shall be responsible for program administration. ~~The director shall also be responsible for and~~ preparation, presentation and administration of the budget of the nursing program. The directors of the professional programs shall possess the following licensure, education and experience qualifications:

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

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

(c) at least two years of experience in nursing education, including didactic and clinical teaching.

(2) The director of the baccalaureate program shall possess ~~a master's degree with a major in nursing and a doctorate degree in nursing or a related field from approved programs,~~ 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 ~~degree~~ 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 ~~from an approved program.~~

(3) The director of the associate of science degree RN program shall possess a master's degree in nursing or public health with a major in nursing ~~from an approved program,~~ with preparation in education and administration.

(4) Practical ~~nurse~~ nursing education programs must be administered by a full-time program director who shall devote a minimum of 50% 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 ~~from an approved program~~, supplemented by courses in curriculum development, principles and methods of teaching and measurement and evaluation; ~~and~~

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

~~(d) at least two years of experience in nursing education, inclusive of teaching in~~ including didactic and clinical ~~areas teaching.~~

(5) remains the same.

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

IMP: 37-8-301, MCA

REASON: These amendments are necessary because nursing program directors and education organizational leadership in Montana have been experiencing increased difficulty in recruiting and retaining qualified faculty. These rule changes increase the opportunity for bringing faculty into the state with some variations in educational and experiential qualifications while ensuring that overall program quality is not negatively impacted. The Board continues to be responsible to ensure that graduates of nursing programs are prepared for entry level practice and can successfully meet licensing requirements of all U.S. board jurisdictions.

8.32.1111 FACULTY (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 resource nurses and preceptors.

(2) Faculty shall have primary responsibility for the development and conduct of the academic program(s) ~~-, including~~

~~(a) Faculty shall participate~~ participation in program policy development.

(3) Faculty shall ~~provide evidence of~~ maintain continuing professional development in ~~each areas~~ area of ~~didactic and clinical~~ academic responsibility.

(4) Faculty members who have responsibility for clinical teaching shall ~~demonstrate clinical competence~~ have relevant education and/or experience.

(5) Faculty member titles ~~must~~ should be consistent with faculty functions and the same as or equivalent to titles of faculty of other units of the parent institution.

(6) Faculty members shall be responsible for:

(a) planning, implementing and evaluating learning experiences ~~in the faculty member's area of assignment;~~

(b) participating in academic ~~guidance of students~~ student advising;

(c) providing for student and peer evaluation of teaching effectiveness;

(d) evaluating student achievement in terms of ~~curricular~~ education objectives;

(e) providing opportunity for creative student activities that contribute to positive changes in nursing, nursing education or health care;

(f) providing service to the parent institution, nursing program, profession and community; and

~~(7)(g)~~ Participating in the selection of new faculty and the promotion and tenure of other faculty.

~~(8)(7)~~ Faculty work—loads workloads are should be equitable, and must allow time for:

(a) classes and lab preparation; i

(b) teaching; i

(c) program revision; i

(d) improvements of teaching methods; i

(e) guidance of students; i

(f) participation in faculty organization and committees; i

(g) attendance at professional meetings; and

(h) participation in continuing education activities.

~~(9)(8)~~ Written job specifications—including responsibilities descriptions and performance expectations must be available for each position.

~~(10)(9)~~ Personnel policies must be in writing and must include selection, appointment, promotion, and faculty development and welfare.

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

IMP: 37-8-301, MCA

REASON: See the justification for ARM 8.32.1110.

8.32.1112 BACCALAUREATE AND ASSOCIATE FACULTY FOR REGISTERED NURSING (1) All nursing faculty members, including part-time faculty, shall: hold at least a master's degree with a major in nursing from an accredited program, or a doctorate in nursing; have preparation for teaching in their respective area of responsibility and shall be licensed as registered nurses in Montana.

(a) hold an unencumbered license as a registered nurse in Montana;

(b) have preparation for teaching in their respective area of responsibility; and

(c) except as provided in this rule, hold at least a master's degree with a major in nursing, or a doctorate in nursing, from a nationally accredited program.

(2) Faculty members hired without a graduate degree or who hold a master's or doctorate in a health-related field other than nursing may be considered by the board and, if approved, shall not exceed the number or percentage specified by this rule.

~~(2)(3)~~ Faculty members hired without a not holding any master's degree will have three years from the date of hire to obtain a master's degree as set forth by the faculty qualifications in (1).

(4) For each faculty member who does not meet the education requirements of (1),

~~(a) The nursing program director will~~ shall immediately notify the board in writing of the hire of the non-master's prepared faculty member along with a plan ~~for to address~~ to address compliance with the education requirements ~~set forth at (1).~~

~~(b)(5) Failure to comply with (3) this rule~~ constitutes non-compliance with board ~~of nursing~~ rules, and will subject the program to action deemed appropriate by the board, including loss of the program's approval.

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

~~(3)(7) As a general guideline for the baccalaureate and associate programs, there must be no more than 10 students per faculty member at a given time in a clinical setting. When providing direct patient care, no more than 10 students may be supervised at a time by a faculty member.~~ When providing direct patient care, no more than 10 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 ~~of nursing~~.

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

IMP: 37-8-301, MCA

REASON: These changes are necessary because nursing programs are held accountable by the Board to ensure that proper supervision is provided when students are providing direct patient care. The Board is aware that faculty supervision of students is critical to patient safety, especially in a care environment in which there are fewer and fewer staff nurses available to assist students. This change also allows the approval of faculties whose qualifications are less narrowly defined than by previous language. The proposed amendment was done in response to increasing concerns regarding recruitment and retention of qualified faculty.

8.32.1113 FACULTY - PRACTICAL NURSE PROGRAM (1) All nursing faculty, including part-time, shall hold at least a baccalaureate in nursing or a master's degree in nursing or a minimum of a baccalaureate degree in nursing from an a nationally accredited program supplemented by courses in curriculum development, principles and methods of teaching, measurement and evaluation.

(2) Faculty members shall:

(a) have at least two years experience in registered nursing practice within the last five years; and

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

~~(2) All non nurse faculty shall have academic and professional education and experience in the field of their specialization.~~

~~(3) There must be a ratio of no more than 10 students for each faculty person in the clinical area at any given time.~~

(3) When providing direct patient care, no more than 10 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.

(4) A maximum of 10% 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: 37-8-301, MCA

REASON: See the justification for ARM 8.32.1112.

8.32.1114 PRECEPTORS — ~~BACCALAUREATE AND ASSOCIATE~~

~~(1) When utilizing preceptors, Registered nurse preceptors may assist with course teaching provided that:~~

~~(a) faculty members are responsible for:~~

~~(a) ensuring safe, accessible and appropriate supervision based on client health status, care setting, course objectives and student level of preparation; and~~

~~(b) lecture and laboratory portions of a course.~~

~~(b) the use of preceptors is appropriate given the course objectives and the level of students in the course; and~~

~~(c) a nursing faculty member retains responsibility for lecture and laboratory portions of the course.~~

~~(2) Professional registered nurse In registered nursing education programs, preceptors may assist with "senior level" courses taken during the last quarters/ semesters of the nursing education program. clinical teaching provided the preceptor:~~

~~(a) holds a current unencumbered license as a registered nurse in Montana; and~~

~~(b) works with students on a one-to-one basis in the clinical setting.~~

~~(3) In practical nursing education programs, preceptors may assist with clinical teaching provided the preceptor:~~

~~(a) holds a current unencumbered license as a registered nurse or practical nurse in Montana; and~~

~~(b) works with students on a one-to-one basis in the clinical setting.~~

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

IMP: 37-8-301, MCA

REASON: These proposed amendments increase the opportunity for bringing faculty into positions focused on clinical expertise, allowing new variations in educational and experiential qualifications while ensuring that overall program quality is not negatively impacted. This change in focus allows the approval of faculty whose qualifications are less narrowly defined or not allowed in previous language.

8.32.1116 EDUCATIONAL FACILITIES (1) There must be safe and accessible physical facilities and resources for students and faculty.

(2) Physical facilities must be designed to meet the educational and clinical needs of the program, ~~including, but~~

~~not limited to:~~

~~(a) Classrooms, laboratories, offices and conference rooms must be of adequate size, number and type according to the number of students and purposes for which these areas are to be used.~~

~~(b)(3) The program must ensure:~~

~~(a) adequate supplies and equipment, including computer resources and audio visual aids; and~~

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

~~(2) Institutional financial support for the program's library/information resources must be adequate to meet the program's purposes and educational objectives. Faculty and students shall provide input regarding purchases of informational resources.~~

~~(3) There must be adequate study area/space conducive to scholarly work for faculty and students.~~

~~(4) Clinical resources must be: adequate to provide the learning experiences identified~~

~~(a) delineated in and applicable to the educational objectives of the program. Learning experiences in clinical settings must be; and~~

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

~~(5) The Each program director, with ~~input from~~ input, shall determine appropriate student ~~faculty~~ -instructor ratios in the clinical setting. ~~to~~ 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 10 students to one instructor.~~

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

IMP: 37-8-301, MCA

REASON: The Board's previous rules regarding educational facilities and program resources were narrowly defined. These proposed amendments place the overall responsibility for program management on the education program's leadership with fewer requirements for Board purposes. For example, a full budget report has been previously required, yet the Board is truly interested in whether the budget supports the program's needs, rather than the details of the budget itself. The budget can be discussed in detail during the periodic site visits. The proposed language will also allow for an additional level of clinical faculty, CRRN.

5. The proposed new rules provide as follows:

NEW RULE I CHANGE IN APPROVAL STATUS (1) The board shall make a change in approval status when a school does not meet all of the requirements of the statutes and rules. The board shall notify the school of a change in approval status and the time

and manner in which the school must correct the deficiencies.

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

(4) The board will not approve a school if requirements are continually unmet. The board shall remove the school from the list of approved schools and notify the applicable national accrediting body.

(5) If the board removes the school's approval status and/or notifies the school to stop admitting students, the school may request a hearing in accordance with the Montana Administrative Procedure Act and Title 37, chapter 1, part 3, MCA.

(6) Once deficiencies are corrected, the board shall reinstate the program to conditional or approval status.

(7) The following programs may not be considered for any type of program expansion:

(a) a program on conditional approval; and/or

(b) a program whose NCLEX pass rate, based on first time testers for a calendar year, is less than the national average.

(8) Program expansion means offering additional degrees, adding geographic sites and locations, or otherwise expanding the program.

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

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

REASON: The Board finds it necessary to propose the adoption of this rule to clarify the process the board uses to change the approval status of a school of nursing or to issue sanctions. This new rule makes terms relating to changes in approval status consistent and congruent with national accrediting body processes. The hearing process has been an option in existing rule, but a clear definition as to when a program might experience sanctions and how a program could challenge an adverse Board decision is a substantive rule change.

NEW RULE II RECOGNIZED ACCREDITATION BODIES (1) The board recognizes the following national accreditation bodies:

(a) committee on collegiate nursing education (CCNE); and

(b) national league for nursing accreditation commission (NLNAC).

(2) The board recognizes the following regional accreditation body:

(a) northwest association of schools and colleges.

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

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

REASON: In addition to the reasonable necessity statement in paragraph three, the Board proposes the adoption of these changes since it may, if the rules are adopted as proposed, be performing site visits on a different (longer) schedule cycle for nursing programs with national accreditation status. For clarity and consistency, the Board needs to specify which bodies will be recognized for purposes of this rule amendment.

NEW RULE III CLINICAL RESOURCE REGISTERED NURSES (CRRNs)

(1) A clinical resource registered nurse (CRRN) is an RN with an unencumbered Montana nursing license who provides supervision, demonstration and evaluation of direct patient care in a clinical or laboratory setting to students enrolled in a nursing education program.

(2) The maximum number of nursing students a CRRN may work with at any one time is 10.

(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 10:1 student-to-instructor supervision ratio in a clinical or laboratory setting.

(4) When using CRRNs, faculty members remain responsible for:

(a) ensuring safe, accessible and appropriate supervision based on client health status, care setting, course objectives and student level of preparation; and

(b) the lecture and laboratory portions of a course.

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

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

REASON: The Board believes this new rule is necessary because nursing program directors and education organizational leadership in Montana have been experiencing increased difficulty in recruiting and retaining qualified faculty, particularly for experiences in small rural facilities and in all clinical settings. These rule changes increase the opportunity for bringing faculty into positions focused on clinical expertise, allowing new variations in educational and experiential qualifications while ensuring that overall program quality is not negatively impacted. This change in focus allows the approval of faculty whose qualifications are less narrowly defined or not allowed in previous language.

6. The Board of Nursing proposes to repeal the following rules:

8.32.803 SCHOOL REPORTS TO THE BOARD which can be found on page 8-996 of the Administrative Rules of Montana.

AUTH: Sec. 37-8-202, MCA

IMP: Sec. 37-8-301, 37-8-302, MCA

REASON: The Board finds it necessary to repeal ARM 8.32.803 because it is necessary to clarify the process of approving

schools of nursing. The current rule is brief, and does not explain the consequences when a program is not approved. The current rule also provides no recourse for a program that disagrees with the Board's decision or action upon their reports.

NEW RULE I outlines a process the Board will use in granting approval and conditional approval of programs. This process is done through written reports and on-site surveys. ARM 8.32.803 provided only for periodic reports to the Board. NEW RULE I outlines the steps the Board will take if the Board finds a problem with a nursing program.

8.32.1115 PRECEPTORS - PRACTICAL NURSE PROGRAM which can be found on page 8-1005.9 of the Administrative Rules of Montana.

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

REASON: The Board finds it necessary to repeal ARM 8.32.1115 because preceptor requirements for both registered nursing and practical nursing programs are combined in the rule amendment of ARM 8.32.1114. Thus, this rule is not needed and will be replaced by a different level of clinical instructor, the Clinical Resource Registered Nurse (CRRN), as proposed in NEW RULE III.

8.32.1117 STUDENTS which can be found on page 8-1005.10 of the Administrative Rules of Montana.

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

REASON: The Board finds it necessary to repeal ARM 8.32.1117 because this rule is unnecessary and redundant. All of the current rule language related to students is contained elsewhere in the proposed rule amendments.

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 by mail to:

Jill Caldwell
Board of Nursing
Department of Labor and Industry
P.O. Box 200513
Helena, Montana 59620-0513

by facsimile to (406) 841-2305, or by e-mail to dlibsdnur@state.mt.us and must be received no later than 5:00 p.m., December 26, 2002.

8. An electronic copy of this Notice of Public Hearing is available through the Department and Board's site on the World Wide Web at <http://www.discoveringmontana.com/dli/nur>, in the Rules Notices section. The Department strives to make the electronic copy of this Notice of Public Hearing 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 website accessible at all times, concerned persons should be aware that the website may be unavailable during some periods, due to system maintenance or technical problems, and that a person's technical difficulties in accessing or posting to the e-mail address does not excuse late submission of comments.

9. The Board of Nursing 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 which includes the name and mailing address of the person to receive notices and specifies that the person wishes to receive notices regarding all Board of Nursing administrative rulemaking proceedings or other administrative proceedings. Such written request may be mailed 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 dlibsdnur@state.mt.us or may be made by completing a request form at any rules hearing held by the agency.

10. Darcee Moe, attorney, has been designated to preside over and conduct this hearing.

11. The bill sponsor notice requirements of 2-4-302, MCA, do not apply.

12. The Board of Nursing will meet on January 21-23, 2002, in Helena to consider the comments made by the public, the proposed responses to those comments, and take final action on the proposed amendments, new rules and repeals. The meeting will be held in conjunction with the Board's regular meeting. Members of the public are welcome to attend the meeting and listen to the Board's deliberations, but the Board cannot accept any comments concerning the proposed amendments, new rules or repeals beyond the December 26, 2002, deadline.

BOARD OF NURSING
KIM POWELL, RN, CHAIRMAN

By: /s/ WENDY J. KEATING
Wendy J. Keating, Commissioner
DEPARTMENT OF LABOR & INDUSTRY

By: /s/ KEVIN BRAUN
Kevin Braun
Rule Reviewer

Certified to the Secretary of State, November 18, 2002.