

MISSOULA COLLEGE UNIVERSITY OF MONTANA ASN REGISTERED NURSING PROGRAM POLICY AND PROCEDURE MANUAL

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REGULATORY POLICIES AND PROCEDURES

Policy Title: STATEMENT OF PURPOSE FOR NURSING	Policy Number: R1
EDUCATION PROGRAM RULES 24.159.601	
Effective Date:	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

POLICY DESCRIPTION:

STATEMENT OF PURPOSE FOR NURSING EDUCATION PROGRAM RULES REPEALED

(History: 37-8-202, 37-8-301. MCA; IMP, 37-8-202, 37-8-301, MCA; NEW. 1997 MAR p. 626, Eff. 7/1/97; AMD, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD. 2006 MAR p. 2035, Eff. 8/25/06; AMD. 2010 MAR p. 2651, Eff. 11/13/10; REP. 2015 MAR p. 644, Eff. 5/29/15.)

Policy Title: PROGRAM STANDARDS 24.159.604	Policy Number: R2
Effective Date: 11/2010	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

PROGRAM STANDARDS (1) All programs shall meet these standards:

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 program identifies the national standards it uses as the basis for the purpose and expected outcomes of the program.
- (c) The input of stakeholders shall be considered in developing and evaluating the purpose and outcomes of the program.
- (d) Program information communicated by the program shall be accurate, complete, consistent, and readily available.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>TRANS</u>, from Commerce, 2006 MAR p. 2035; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

The faculty of the nursing education program shall develop and approve statements of philosophy, educational objectives, and expected outcomes that are consistent with those of the parent institution and with the statues and rules governing the practice of nursing.

The philosophy must include statements about nursing education. The Missoula College University of Montana Nursing Program believes in the preparation of safe, effective practitioners who support humankind in all phases of the health-illness continuum. Nursing education involves a series of supervised experiences which facilitate holistic healthcare through the acquisition and application of specific knowledge, skills, and attitudes. These experiences foster student growth in self-awareness, understanding of others, sensitivity to cultural, moral, ethical, and legal issues, the application of critical thinking, and the technical and interpersonal skills fundamental to the practice of nursing. The educational process is based on benchmarking and evidence-based standards, core competencies and standards set forth by multiple accrediting bodies.

Policy Title: ORGANIZATION AND ADMINISTRATION	Policy Number: R3
OF NURSING EDUCATION PROGRAMS 24.159.605	
Effective Date: 11/2010	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

ORGANIZATION AND ADMINISTRATION OF NURSING EDUCATION PROGRAMS

- 1) Parent institutions conducting a nursing program must be accredited by an accrediting agency that is recognized by the U.S. Department of Education.
- 2) The organizational structure of the nursing program must be comparable to similar programs of the parent institution.
- 3) Institutional policies governing the nursing program must be consistent with those policies governing other educational programs of the parent institution.
- 4) Policies governing faculty employment must be in writing and consistent with those of the parent institution.
- 5) The program must provide students with written policies and demonstrate evidence of following these 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; and
 - (d) access to the institution/program catalog
- (6) Programs must maintain current records of student achievement within the program and provide students with evaluations based on expected outcomes.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

The Missoula College is an academic unit of the University of Montana-Missoula. The University is regionally accredited by the Northwest Commissions of Colleges and Universities. The Associate of Science Nursing program is accredited by the Accreditation Commission for Education in Nursing (ACEN). The Missoula College does maintain cooperative affiliate agreements with all clinical facilities used within the academic year. The agreements are ongoing unless specifically specified by the facility or Missoula College University of Montana Nursing program. They are reviewed and updated by the College, The University of Montana, and the clinical facility. The nursing program is subject to and included in the organizations, unit standards and collective bargaining agreements governed by the

College and parent institution. The nursing program is subject to the institutional policies and control exercised over all other programs, except in relation to the Nursing Program Director, in order for compliance with the Board of Nursing Rule 24.159.650. The nursing program provides students with a copy of the student handbook with written policies regarding all aspects of the program. The nursing program will maintain student files of all currently enrolled nursing students in Box.

Policy Title: EDUCATIONAL FACILITIES FOR NURSING	Policy Number: R4
EDUCATION PROGRAMS 24.159.606	
Effective Date: 11/2007	Revised Date: 08/2019
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

EDUCATIONAL FACILITIES FOR PROGRAMS

- 1) There must be safe and accessible physical facilities and resources for students and faculty.
- (2) Physical facilities must be appropriate to meet the educational and clinical needs of the program. 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.
 - (3) The program must ensure:
 - (a) adequate supplies and equipment necessary to achieve program outcomes; and
- (b) adequate and convenient access by students and faculty to library and information resources necessary to achieve program outcomes.
- (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; and
 - (iv) health requirements of students and faculty.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2019 MAR p. 1055, Eff. 7/27/19.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

All educational facilities will be accessible by all students. The building will be clearly labeled and directions provided for all clinical facilities. Library resources will be periodically updated with current content through the Mansfield Library at both the main campus and the River Campus. Also the library located within the Health Sciences Center at Saint Patrick Hospital will be accessible to all Missoula College University of Montana students. The college itself has an open computer lab for all students to use, as well as open labs on the main campus. All full-time faculty have their own office computer. All

clinical resources will be delineated and applicable to the education objectives of the program; and under the control and supervision of nursing faculty. A student-faculty ratio of 10:1 will be maintained. Clinical warranting a student-faculty ration of less than 10:1 will be considered on the basis of the faculty judgment, student experiences, and clinical facility recommendations.

Policy Title: PLACEMENT OF AN OUT-OF-STATE	Policy Number: R5
NURSING STUDENT IN A MONTANA CLINICAL	
PRACTICE SETTING 24.159.608	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

PLACEMENT OF AN OUT-OF-STATE NURSING STUDENT IN A MONTANA CLINICAL PRACTICE SETTING

- 1) The placement of a student enrolled in an out-of-state pre-licensure program 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. 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 out-of-state nursing education program's unconditional board approval and accreditation by a national nursing accrediting agency approved by the U.S. Department of Education;
 - (b) name, address, and contact information of the student seeking placement in a Montana clinical practice setting;
 - (c) name and location of clinical practice setting where the out-of-state nursing education program seeks to place the student;
 - (d) name and contact information of the person employed at the Montana clinical practice setting who will serve as the primary liaison between the out-of-state nursing education program, the Montana board, and the Montana clinical facility;
 - (e) names, contact information, and educational credentials for Montana clinical preceptor(s) and out-of-state faculty member(s) who will participate in the student's clinical experience in Montana;
 - (f) detailed description of the preceptorship, including the specific practice area that will be the focus for the out-of-state student's clinical experience;
 - (g) explicit plan for out-of-state faculty supervision of the preceptor and out-of-state student in the Montana clinical practice setting;
 - (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) 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) 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. 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.
- (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.

(History: 37-8-202, MCA; IMP, 37-8-202, MCA; NEW, 2010 MAR p. 2651, Eff. 11/13/10 AMD, 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

In the event that a student needs out-of-state placement in a clinical site that is used by Missoula College Nursing Program, the Program Director will provide verification that placement of the out-of-state student in the identified Montana clinical practice setting will not displace a Montana nursing student.

Policy Title: PROGRAM EVALUATION 24.159.609	Policy Number: R6
Effective Date: 11/2007	Revised Date: 08/2023
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

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. The plan must effectively support the achievement of the expected program outcomes and provide evidence of a system of continuous quality improvement.
- (2) The plan must include:
 - (a) measurable outcomes of student learning;
 - (b) measurable aggregate program outcomes, including:
 - (i) NCLEX pass rates with three most recent years of data;
 - (ii) On time completion rates with three most recent years of data;
 - (iii) Three most recent years of job placement data
 - (c) processes to obtain evaluation data;
 - (d) time frame for data collection and analysis;
 - (e) evidence of a system of continuous quality improvement;
 - (f) opportunities for participation in the evaluation process by students, faculty, clinical staff, and employers of graduates; and

PROCEDURE:

A program evaluation plan will be conducted on a yearly basis, developed by all faculty and allow for student participation. Alumni surveys are sent out 6 months post-graduation. Student attrition is measured on an annual basis and addressed at faculty meetings. Program revisions are based on data collected through the evaluation process.

(3) Program revisions must be based on evidence collected through the evaluation process. (History: 37-8-202, 37-8-301, MCA; |MP, 37-8-202, 37-8-301, MCA; NEW. 1997 MAR p. 626, Eff. 7/1/97; AMD. 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD. 2015 MAR p. 644, Eff. 5/29/15.)

Policy Title: PROGRAM CLOSURE AND RECORDS	Policy Number: R7
STORAGE 24.159.611	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

PROGRAM CLOSURE AND RECORDS STORAGE

- (1) A program may close voluntarily or may be closed involuntarily due to withdrawal of board approval. Prior to closure, the nursing education program must:
 - (a) maintain the standards for nursing education during the transition to closure;
 - (b) prepare and execute a plan that addresses the transition or placement of students who have not completed the program; and
- (c) make arrangements for the secure storage and access to academic records and transcripts. (History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-301, 37-8-302, MCA; NEW, 2010 MAR p. 2651, Eff. 11/13/10 AMD, 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

In the event of a program closure, MC UM will maintain standards for nursing education, prepare and execute a plan to address the transition of students who have not completed the program and arrange for secure storage and access to academic records and transcripts.

Policy Title: PROGRAM ANNUAL REPORT 24.159.612	Policy Number: R8
Effective Date: 12/2007	Revised Date: 08/2021
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

PROGRAM ANNUAL REPORT

- 1) An annual report for the 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.
- (2) The purpose of the annual report is to provide current data for ongoing program evaluation by the board. The annual report must be submitted using the template posted to the board web site on July 1 of each year. The report must include:
- (a) enrollment and graduation data for the academic year, including:
- (i) number of 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.
- (b) number of unfilled student positions and number of qualified applicants not accepted;
- (c) names and qualifications of full-time and part-time faculty, Clinical Resource Registered Nurses (CRRNs), and Clinical Resource Licensed Practical Nurses (CRLPNs);
- (d) names of faculty on board waiver and dates of each waiver period;
- (e) summary of substantive changes reported to the board during the past year, pursuant to ARM 24.159.635;
- (f) description of progress made by program on improvements recommended by the board or program's accrediting body;
- (g) use of clinical simulation; and
- (h) other information as requested by the board.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, <u>37-8-302</u>, MCA; <u>NEW</u>, 1991 MAR p. 2435, Eff. 12/13/91; <u>AMD</u>, 1994 MAR p. 1424, Eff. 5/27/94; <u>AMD</u>, 1996 MAR p. 418, Eff. 2/9/96; <u>AMD</u>, 1997 MAR p. 626, Eff. 4/8/97; <u>AMD</u>, 2001 MAR p. 2152, Eff. 10/26/01; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2019 MAR p. 1055, Eff. 7/27/19; <u>AMD</u>, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

An annual report related to the current academic year will be submitted by September 1st of each year, with the exception for the year of accreditation in which a self-study is submitted.

Policy Title: RECOGNIZED ACCREDITATION BODIES	Policy Number: R9
24.159.615	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

POLICY DESCRIPTION

RECOGNIZED ACCREDITATION BODIES

REPEALED

(History: 37-8-202, 37-8-301, MCA; JMP, 37-8-202, 37-8-301, 37-8-302, MCA;

NEW. 2003 MAR p. 1080, Eff. 5/23/03; AMD. 2004 MAR p. 641, Eff. 3/26/04; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD. 2010 MAR p. 2651, Eff. 11/13/10; REP, 2015 MAR p. 644,

Eff. 5/29/15.)

Policy Title ESTABLISHMENT OF A NEW NURSING	Policy Number: R10
EDUCATION PROGRAM 24.159.625	
Effective Date: 12/2007	Revised Date: 08/2021
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

ESTABLISHMENT OF A NEW PROGRAM

- 1) The applicant shall notify the board of the intent to establish a new program by providing the following information for a Phase I application:
- (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) Board approval of a Phase I application permits the applicant to continue planning, but does not assure subsequent approval of Phase II.
- (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 program;
- (b) list of sufficient qualified faculty, CRRNs, CRLPNs, and administrative staff to develop and initiate the program;
 - (c) overview of total curriculum, including:
 - (i) course descriptions appropriate to each level of education provided; and
 - (ii) course sequence and schedule.
 - (d) contracts for each clinical site;
 - (e) description of use of each clinical site by other programs;
 - (f) numbers of students to be placed at each clinical site;
 - (g) rationale for choice of each clinical site, including description of anticipated student experiences;
 - (h) initial program evaluation plan; and
 - (i) student policies for admission, progression, retention, and graduation.

- (4) Prior to Phase II approval, the board shall conduct an onsite program inspection visit to verify the information in the written report and ascertain the readiness of the program to admit students.
- (5) Following board approval of Phase II application, the program may admit students. The board shall notify NCSBN for NCLEX testing purposes. Students graduating from a program under Phase II approval are eligible to sit for the NCLEX examination.
- (6) The last step is Phase III, full approval of the program. The board shall grant full approval of a program upon:
- (a) submission by the program of a self-study report, any applicable fees per ARM <u>24.159.401</u>, and completion of a site survey by the board 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.
- (7) The board may grant full approval, conditional approval, or deny approval, as outlined in ARM <u>24.159.640</u>.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, <u>37-8-302</u>, MCA; <u>NEW</u>, 1982 MAR p. 1603, Eff. 8/27/82; <u>AMD</u>, 1991 MAR p. 2435, Eff. 12/13/91; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>AMD</u>, 2005 MAR p. 742, Eff. 5/13/05; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

With the start of any new nursing program, The University of Montana-Missoula will secure initial approval by the Board of Nursing by submitting to the board a feasibility study; either December 1 or September 1 for review at the board's January or October, depending upon initial start date for review. For programs under the jurisdiction of the Montana Board of Regents, a common document shall be submitted. The document will contain all nine components of the feasibility study. Program approval will be determined by having a nurse administrator who has been appointed.

Policy Title: CONTINUED APPROVAL OF NURSING	Policy Number: R11
EDUCATION PROGRAMS 24.159.630	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

CONTINUED APPROVAL OF NURSING EDUCATION PROGRAMS

- (1) The board shall evaluate approved programs for continued approval by monitoring and analyzing program performance through:
 - (a) periodic survey visits and reports;
 - (b) accreditation visits and reports;
 - (c) annual reports; and
 - (d) other sources of information regarding achievement of program outcomes, including:
 - (i) student retention and attrition;
 - (ii) faculty turnover;
 - (iii) complaints about the program from students, graduates, or faculty regarding program issues; and
 - (iv) data regarding NCLEX performance.
- (2) 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.

(History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-301, 37-8-302, MCA; Eff. 12/31/72; TRANS, from Dept, of Prof. & Occup. Lie., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from ARM 8.32.414. & AMD. 1982 MAR p. 1603, Eff. 8/27/82; AMD, 1991 MAR p. 2435, Eff. 12/13/91; AMD, 1996 MAR p. 418, Eff. 2/9/96; AMD. 1997 MAR p. 1176, Eff. 4/8/97; AMD. 2003 MAR p. 1192, Eff. 5/23/03; TRANS, from Commerce, & AMD. 2006 MAR p. 2035, Eff. 8/25/06; AMD. 2010 MAR p. 2651, Eff. 11/13/10; AMD. 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

Policy Title: PROGRAM SURVEYS 24.159.632	Policy Number: R12
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

NURSING EDUCATION PROGRAM SURVEYS

- 1) To ensure ongoing compliance with the board's statutes and rules, those approved 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 five years. Each time a program survey is performed, the entire program is evaluated for all components under board jurisdiction.
- (2) Before an onsite survey, a school must submit a self-study report to the board providing evidence of compliance with the appropriate nursing education rules 45 days before the scheduled onsite survey.
- (3) The onsite survey is performed by 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' report should be made available to the program within 20 days of the onsite survey.
 - (b) The program may submit a written response to the survey report within 14 days.
- (4) The board shall review the final survey report and any program response and make a finding regarding the program's compliance with the rules.
- (5) Following the board's review and decision, 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 may site visit a program at any time, as deemed necessary by the board or at the request of the school.

(History: 37-8-202, 37-8-301, MCA; IMP. 37-8-202, 37-8-301, 37-8-302, MCA; NEW, 2010 MAR p. 2651, Eff. 11/13/10; AMD. 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

Policy Title: REQUIREMENTS FOR REPORTING	Policy Number: R13
SUBSTANTIVE CHANGES 24.159.635	
Effective Date: 12/07	Revised Date: 8/15
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

REQUIREMENTS FOR REPORTING SUBSTANTIVE CHANGES

- (1) The program director or academic chief officer is required to report to the board any proposed substantive change 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) major curriculum revisions;
 - (d) change in degree offerings or program options;
 - (e) additional geographic sites or locations;
 - (f) change in program director;
 - (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) Board approval is required 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 approval status may make such a request. The request must be submitted a minimum of 30 days prior to the board meeting, at which the additional enrollment changes will be considered. For proposed additional enrollment changes, the following information must be included:
 - (a) purpose and classification of program;
 - (b) the anticipated number of students;
 - (c) evidence of adequate clinical and academic facilities for the program to support the additional enrollment;
 - (d) evidence of adequate financial resources for the planning, implementation, and maintenance of the enrollment changes;
 - (e) evidence of the need for the additional enrollment changes;
 - (f) evidence of adequate faculty resources;
 - (g) tentative timetable for planning and initiating the enrollment changes;
 - (h) description of how the additional enrollment may affect the existing nursing programs in the state, and indication that plans and the feasibility study regarding the additional enrollment have been shared with the directors of existing Montana programs;
 - (i) curriculum modifications required to accommodate the targeted student population; and
 - (j) a plan for continued assessment using the program evaluation plan.

(3) Any additional information requested by the board must be provided by the program in the period and manner specified by the board. (History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-301, 37-8-302, MCA; NEW, 1991 MAR p.2435, Eff. 12/13/91; AMD, 2001 MAR p. 2152, Eff. 10/26/01: AMD, 2003 MAR p. 1080, Eff. 5/23/03; AMD. 2005 MAR p. 742, Eff. 5/13/05; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD, 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

Policy Title: CONDITIONAL APPROVAL,	Policy Number: R14
WITHDRAWAL OF APPROVAL, OR DENIAL 24.159.640	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

CONDITIONAL APPROVAL, WITHDRAWAL OF APPROVAL, OR DENIAL

- (1) The board shall make a change in approval status when a school does not meet the requirements of the applicable statutes and rules to the satisfaction of the board. 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) The board may place a program on conditional approval when the board determines that an approved program is not in compliance with the board rules. The board may require the submission of an action plan, subject to board approval, to correct the identified program deficiencies.
- (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 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.
- (4) A program denied approval or given less than full approval status 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.
- Once a program corrects deficiencies, the board shall reinstate the program to conditional or approval status, as deemed appropriate by the board. (History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-301, 37-8-302, MCA; NEW. 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD. 2006 MAR p. 2035, Eff. 8/25/06; AMD. 2010 MAR p. 2651, Eff. 11/13/10; AMD. 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

Policy Title: PROGRAM DIRECTOR 24.159.650	Policy Number: R15
Effective Date:	Revised Date: 08/2021
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

NURSING EDUCATION PROGRAM DIRECTOR

- 1) A program must be administered by a full-time program director who shall possess the following qualifications:
 - (a) a current unencumbered license to practice as a registered nurse in the state of Montana;
 - (b) a graduate degree in nursing from a nationally recognized accredited program;
 - (c) at least two years of experience in nursing practice;
 - (d) at least two years of experience in nursing education; and
 - (e) educational preparation or experience in curriculum development and administration.
 - (2) The program director is responsible for:
- (a) ensuring that all faculty, CRRNs, CRLPNs, 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) All program directors shall have appropriate rank, position and authority to carry out the duties set forth above.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; <u>AMD</u>, 2001 MAR p. 167, Eff. 1/26/01; <u>AMD</u>, 2003 MAR p. 1080, Eff. 5/23/03; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

The Nursing Program Director is a full-time director. She/he will have a current, unencumbered license in the State of Montana. The Director will also be a minimum of a Masters prepared nurse with at least two years' experience in nursing education.

Policy Title: PROGRAM FACULTY 24.159.655	Policy Number: R16
Effective Date: 12/2007	Revised Date: 08/2021
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

- 1) There must be a sufficient number of qualified faculty to meet the purposes and objectives of the program. Faculty includes all nurses employed by the program to provide didactic and/or clinical/laboratory experiences. Clinical resource nurses (CRRNs and CRLPNs) and preceptors are not considered faculty.
- (2) Clinical and didactic faculty shall hold unencumbered Montana nursing licenses to practice nursing.
- (3) Faculty shall have primary responsibility for the development and provision of the academic program(s), including participation in program policy development.
- (4) Faculty shall maintain continuing professional development in each area of academic responsibility.
- (5) Faculty involved in simulations, both didactic and clinical, shall have training in best practices in the use of simulation.
- (6) Faculty members who have responsibility for clinical teaching shall have relevant education and/or experience and meet all of the faculty qualifications for the program level in which they are teaching.
- (7) Faculty member titles should be consistent with faculty functions and the same as or equivalent to titles of faculty of other units of the parent institution.
 - (8) Faculty members shall be responsible for:
 - (a) planning, implementing, and evaluating learning experiences;
 - (b) participating in academic student advising;
 - (c) student and peer evaluation of teaching effectiveness; and
 - (d) participating in the selection of new faculty and the promotion and tenure of existing faculty.
 - (9) Faculty workloads should be equitable, and must allow time for:
 - (a) class and lab preparation;
 - (b) didactic and clinical teaching;
 - (c) program evaluation and performance improvement;
 - (d) improvements of teaching methods;
 - (e) student advising;
 - (f) participation in faculty organization and committees;
 - (g) attendance at professional meetings; and
 - (h) participation in continuing education activities, as required by these rules.
- (10) When providing direct patient care, no more than ten students may be supervised at a time by a faculty member.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; AMD, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff.

8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2019 MAR p. 1055, Eff. 7/27/19; AMD, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

- 1) Full time ASN faculty hold at least a master's degree or a doctorate in nursing from a nationally accredited program.
- 2) ASN faculty members hold an unencumbered RN license for the State of Montana.
- 3) ASN faculty have preparation for teaching in their respective areas.
- 4) ASN faculty will continue to show evidence of continuing professional development in areas of their assigned courses.
- 5) Number and utilization of full-time and part-time ASN faculty meet the needs of the nursing program and parenting institution.
- 6) ASN faculty members are responsible for the development, implementation and evaluation of student learning in their assigned courses.
- 7) ASN program has current policies and procedures for selection, appointment, promotion and faculty development.
- 8) No more than ten students to be supervised at a time by an ASN faculty member in any clinical setting.
- 9) All faculty personnel information kept in secure employee file

Policy Title: FACULTY QUALIFICATION REPORT	Policy Number: R17
24.159.656	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

FACULTY QUALIFICATION REPORT

REPEALED

(History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-204, 37-8-301, 37-8-302, MCA; NEW, 1991 MAR p. 2435, Eff. 12/13/91: AMD. 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, 2006 MAR p. 2035; AMD. 2010 MAR p. 2651, Eff. 11/13/10; REP, 2015 MAR p. 644, Eff. 5/29/15.)

Policy Title: FACULTY FOR REGISTERED NURSING	Policy Number: R18
EDUCATION PROGRAMS 24.159.659	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

FACULTY FOR REGISTERED NURSING EDUCATION PROGRAMS

- (1) All nursing faculty members, including part-time faculty, shall:
 - (a) hold an unencumbered license as a registered nurse in Montana;
 - (b) have preparation for teaching in their respective area of responsibility including at least two years of registered nursing practice; and
 - (c) except as otherwise provided in these rules, hold at least a graduate degree in nursing from a nationally accredited program. (History: 37-8-202, 37-8-301, MCA; IMP, 37-8-202, 37-8-301, MCA; NEW, 1997 MAR p. 626, Eff. 7/1/97; AMD, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, 2006 MAR p.2035; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD, 2015 MAR p. 644, Eff.5/29/15

RATIONALE:

Adherence to the Montana Board of Nursing Standards

PROCEDURE:

- 1) Full time ASN faculty hold at least a master's degree or a doctorate in nursing from a nationally accredited program.
- 2) ASN faculty members hold an unencumbered RN license for the State of Montana.
- 3) ASN faculty have preparation for teaching in their respective areas.
- 4) ASN faculty will continue to show evidence of continuing professional development in areas of their assigned courses.
- 5) Number and utilization of full-time and part-time ASN faculty meet the needs of the nursing program and parenting institution.
- 6) ASN faculty members are responsible for the development, implementation and evaluation of student learning in their assigned courses.
- 7) ASN program has current policies and procedures for selection, appointment, promotion and faculty development.
- 8) No more than ten students to be supervised at a time by an ASN faculty member in any clinical setting.

Policy Title: FACULTY FOR PRACTICAL NURSING	Policy Number: R19
PROGRAMS 24.159.662	
Effective Date: 12/2007	Revised Date: 07/2017
Initiating Department: Health Professions	Department Affected: Nursing

REPEALED: Practical Nursing Program in Moratorium

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

FACULTY FOR PRACTICAL NURSING EDUCATION PROGRAMS REPEALED

(History: 37-8- 202, 37-8-301, MCA; NMP, 37-8-202, 37-8-301, MCA; NEW, 1997 MAR p. 626, Eff. 7/1/97; AMD, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD, 2011 MAR p. 2144, Eff. 10/14/11; AMD, 2015 MAR p. 644, Eff. 5/29/15.)

Policy Title: WAIVER OF FACULTY QUALIFICATIONS	Policy Number: R20
24.159.663	
Effective Date: 0 5/29/2015	Revised Date: 08/2021
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

(1) Programs may hire a limited number of faculty members who do not meet the educational qualifications as noted in ARM <u>24.159.659</u> and <u>24.159.662</u>. 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 2.0 FTE, 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.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2021 MAR p. 991, Eff. 8/7/21.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

- 1. MC UM will employ no more than a maximum of ten percent or two faculty members, whichever is greater, on waiver. These individuals will be on waiver no longer than five years from the date of employment to obtain the requisite degree.
- 2. MC UM will immediately notify the board in writing of the hire and include a written plan for meeting the educational qualifications.

Policy Title: CLINICAL PRECEPTORS 24.159.665	Policy Number: R21
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

CLINICAL PRECEPTORS

- (1) Clinical preceptors may be used to enhance, but not replace, faculty-directed clinical learning experiences.
- (2) When utilizing preceptors, 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;
 - (b) ensuring appropriate preceptor qualifications and scope of responsibility;
- (c) ensuring that the preceptor demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student; and
 - (d) providing the lecture and laboratory portions of a course.

(History: 37-8- 202, 37-8-301, MCA;]MP, 37-8-202, 37-8-301, MCA; NEW. 1997 MAR p. 626, Eff. 7/1/97; AMD, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, 2006 MAR p. 2035; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD, 2015 MAR p. 644, Eff. 5/29/15.)

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

- 1) Nursing faculty 100% responsible for students, being available by phone during clinical hours of preceptor rotation
- 2) Preceptorship Manual is current and includes course objective, responsibilities of student, preceptor and faculty, evaluation forms
- 3) Preceptor and student provided with orientation and Preceptorship Manual
- 4) Preceptor assignments are appropriate
- 5) All preceptor licensure is appropriate and current
- 6) Student to preceptor ratio is 1:1

Policy Title: USE OF CLINICAL RESOURCE	Policy Number: R22
REGISTERED NURSES (CRRNS) IN NURSING	
EDUCATION PROGRAMS 24.159.666	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

USE OF CLINICAL RESOURCE REGISTERED NURSES (CRRNS) IN NURSING EDUCATION PROGRAMS

- (1) 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.
- (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) The CRRN is solely responsible for students and must have no concurrent clinical responsibilities.
- (4) When using CRRNs, faculty members remain responsible for:
 - (a) assuring that assigned duties are appropriate to the CRRN scope of responsibilities;
- (b) ensuring safe, accessible, and appropriate supervision based on client health status, care setting, course objectives, and student level of preparation;
- (c) the lecture, clinical, and laboratory portions of a course, including actively teaching in the course for which the clinical experience is assigned; and
- (d) performing the summative clinical evaluation based on individual course objectives and student clinical performance.

(History: 37-8-202, 37-8-301, MCA; IMP. 37-8-202, 37-8-301, 37-8-302, MCA; NEW, 2003 MAR p. 1080, Eff. 5/23/03; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; AMD, 2015 MAR p. 644, Eff. 5/29/15.)

PROCEDURE:

The Missoula College Nursing Program does utilize Clinical Resource Registered Nurses in clinical settings.

Policy Title: CURRICULUM GOALS AND GENERAL	Policy Number: R23
REQUIREMENTS FOR PROGRAMS 24.159.670	
Effective Date: 12/2007	Revised Date: 11/2023
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

CURRICULUM GOALS AND GENERAL REQUIREMENTS FOR NURSING EDUCATION PROGRAMS

- 1) A curriculum is the content and learning experiences designed to facilitate student achievement of the educational objectives.
- (2) The faculty shall develop, review, and update the curriculum on an ongoing basis. The curriculum must meet the following general criteria:
- (a) reflect the guiding principles, organizational framework, purpose, and educational objectives of the 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) contain content, clinical experiences, and strategies of active learning directly related to program or course goals and objectives, in order to develop safe and effective nursing practice;
 - (c) demonstrate that simulation activities are linked to programmatic outcomes; and
 - (d) contain evidence of current trends and professional standards and practice guidelines.
- (3) The curriculum must include concepts related to the care of individuals across the lifespan including, but not limited to:
 - (a) health maintenance promotion and restoration;
 - (b) risk reduction;
 - (c) disease prevention; and
 - (d) palliative care.
- (4) The length, organization, sequencing, and placement of courses must be consistent with the guiding principles and objectives of the program and assure that previously learned concepts are further developed and extend throughout the program.
 - (5) For each clinical credit, there shall be at least two hours of applied experience.
- (6) For each program utilizing simulation, no more than 50 percent of clinical hours shall be replaced with simulation hours. Upon request by a program, the board may temporarily allow all programs to exceed the 50 percent cap on simulation due to extenuating circumstances such as a state or national emergency.

History: <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>IMP</u>, <u>37-8-202</u>, <u>37-8-301</u>, MCA; <u>NEW</u>, 1997 MAR p. 626, Eff. 7/1/97; <u>TRANS</u>, from Commerce, & <u>AMD</u>, 2006 MAR p. 2035, Eff. 8/25/06; <u>AMD</u>, 2010 MAR p. 2651, Eff. 11/13/10; <u>AMD</u>, 2015 MAR p. 644, Eff. 5/29/15; <u>AMD</u>, 2019 MAR p. 1055, Eff. 7/27/19; <u>AMD</u>, 2020 MAR p. 965, Eff. 5/30/20; AMD, 2023 MAR p. 1611, Eff. 11/18/23.

RATIONALE:

Adherence to the Montana Board of Nursing Standards.

PROCEDURE:

- 1) Curriculum development for the Nursing Programs have an organized framework based on the mission and philosophy.
- 2) The Nursing Program's organizational framework and terminal objectives are consistent and evident throughout the curriculum in each course objectives, competencies, learning activities, and experiences.
- 3) 100% of faculty participate in curriculum development and evaluation
- 4) Courses in the sciences and humanities provide the foundation for the nursing curriculum
- 5) Total nursing credits are within the accepted limits of the Board of Nursing and Board of Regents.
- 6) The Nursing Programs demonstrate a logical progression and growth of a student over the length of the program.

Policy Title: PROFESSIONAL NURSING CURRICULUM	Policy Number: R24
SPECIFIC TO ASSOCIATE DEGREE 24.159.677	
Effective Date: 12/2007	Revised Date: 05/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level II: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

PROFESSIONAL NURSING CURRICULUM SPECIFIC TO ASSOCIATE DEGREE REPEALED

(History: 37-8-202, 37-8-301, MCA; ME, 37-8-202 37-8-301, MCA; NEW, 1997 MAR p. 626, Eff. 7/1/97; TRANS, from Commerce, & AMD, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; REP, 2015 MAR p. 644, Eff. 5/29/15.)

Policy Title: CURRICULUM REQUIREMENTS FOR	Policy Number: R25
PRACTICAL NURSING PROGRAMS 24.159.680	
Effective Date: 12/2007	Revised Date: 08/2015
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level II: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

CURRICULUM REQUIREMENTS FOR PRACTICAL NURSING PROGRAMS REPEALED

(History: 37-8-202, 37-8-301, MCA; ME, 37-8-202, 37-8-301 MCA; NEW, 1997 MAR p. 626, Eff. 7/1/97; TRANS, from Commerce, & ME, 2006 MAR p. 2035, Eff. 8/25/06; AMD, 2010 MAR p. 2651, Eff. 11/13/10; REE, 2015 MAR p. 644, Eff. 5/29/15.)

PROGRAM ADMISSIONS POLICIES AND PROCEDURES

Policy Title: Health Core Course Associate of	Policy Number: A1
Applied Science (AAS)-PN Program	
Effective Date: 11/2007	Revised Date: 08/2015; 12/2015; 7/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) Level II: Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

Health Core Course AAS-PN Program REPEALED

Policy Title: Admission Requirements for Health Core	Policy Number: A2
Course Associate of Applied Science (AAS)-PN Program	
Effective Date: 11/2007	Revised Date: 08/2015; 12/2015;
	09/2016; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level II: Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

Admission Policy and Requirements for Admission into the AAS-PN Program REPEALED

Policy Title: Admission to Associate of Applied	Policy Number: A3
Science (AAS)-PN Program	
Effective Date: 11/2007	Revised Date: 03/2013; 12/2015; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) Level II: Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

Admission Process to the PN Nursing Program REPEALED

Policy Title: Health Core Courses for Associate of	Policy Number: A4
Science (ASN)-RN Program	
Effective Date: 11/2007	Revised Date: 03/2013; 12/2015; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Health Core Courses for ASN-RN Program

Detailed list of heath core courses for the Associate of Science degree for the Registered Nursing Student applicant.

RATIONALE:

Provides specific detail to students wanting to pursue application consideration into the ASN-RN program at Missoula College UM. Students are required to have a solid base of humanities, science and mathematics to promote success in the nursing program and profession. Course of study includes college level anatomy and physiology, algebraic math, English composition and computer skills. Students are also expected to have knowledge base levels in psychology, sociology, chemistry, microbiology, nutrition and interpersonal communications.

PROCEDURE:

Coursework Requirements:

WRIT 101 English Composition	3 credits
BIOH 201N & 202N Anatomy & Physiology I	4 credits
BIOH 211N & 212N Anatomy & Physiology II	4 credits
CHMY 121N Introduction to Chemistry	3-4 credits
CHMY 122 Introduction to Chemistry Lab	1 credits
M 121 College Algebra	3 credits
TOTAL	18-19 Credits

Age of Course Acceptability

- General Education Courses: must be taken within 10 years of application
- <u>College Algebra</u> (or comparable--see acceptable transfer courses) equal to or greater than 10 years must have a UM placement test. Students must place above the level of the math course they took in the past to be able to use that grade in their prerequisite GPA.
- <u>College Writing</u> equal to or greater than 10 years must have a writing placement test result of greater than WRIT 101 to be able to use previous WRIT grade in their prerequisite GPA.
- <u>General Education courses (other than College Algebra and Writing)</u> equal to or greater than 10 years may be evaluated by the Nursing Program Director for acceptability.
- Exceptions: the following required science courses must be completed within 5 years of application.

(Science courses equal to or greater than 5 years of application may be evaluated by the Nursing Program Director for acceptability.)

- Microbiology (corequisite course)
- Chemistry
- Anatomy and Physiology

Additional Requirements (for the Nursing major):

- Anatomy and Physiology:
 - Must be completed with a grade of B or higher within two (2) attempts to be eligible to proceed.
- Health Core Courses:
 - o Must be successfully completed within two (2) attempts to be eligible to proceed.
- Minimum GPA:
 - Students must have a minimum cumulative GPA of 2.75 in the last 60 credits of college coursework to be eligible to apply.

BOR Common Curriculum Accepted Course Substitution:

General Education	Acceptable Transfer Course	Credit	Comments
Prerequisite			
BIOH 201/202	Anatomy and Physiology I	4 credits	Must take A&P I for 4 credits
Anatomy and			with a lab
Physiology I			
BIOH 211/212	Anatomy and Physiology II	4 credits	Must take A & P II for 4
Anatomy and			credits with a Lab
Physiology II			
WRIT 101 College	College Writing	3 credits	College Writing equal to or
Writing			greater than 10 years, must
			have a writing placement
			test with a WRIT 101
			placement to accept
M 121 College	M115 Linear & Probability	3 credits	College Algebra equal to or
Algebra	M 152 Pre-Calculus with		greater than 10 years, must
	Algebra		have a Maplesoft placement
	M 153 Pre-Calculus with Trig		test.
	M 171 Calculus		

(continued on next page)

General Education Prerequisite	Acceptable Transfer Course	Credit	Comments
CHMY 121 Introduction to General Chemistry Plus CHMY 122 Introduction to General Chemistry Lab	Any General Chemistry with a lab	Must be a total of minimum of 4 credits either by: • 3 for lecture and 1 for lab • 4 credits including both lecture and lab	Higher level chemistry with a lab will transfer if related to health care Inorganic Chem Bio Chem
Corequisite Courses			
PSYX 100S Introduction to Psychology	Introduction to Psychology	3 or 4 credits	No higher level psychology will transfer as replacement – must be an Introduction to Psychology
BIOH 250N Microbiology in Health Sciences BIOH 251 Microbiology Lab	Microbiology courses which include Microbiology in the title (must be medical related)	Must be a total of minimum of 4 credits either by: • 3 for lecture and 1 for lab • 4 credits including both lecture and lab	
SOCI 101S Introduction to Sociology	Introduction to Sociology	3 credits	

Policy Title: Admission Requirements for the	Policy Number: A5
Traditional Associate of Science (ASN) Program	
Effective Date: 11/2007	Revised Date: 08/2015; 12/2015; 09/2016;
	07/2019; 07/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Admission Requirements for Admission into the Traditional ASN-RN Program

Admission requirements are structured to be objective and consistent. Areas evaluated include:

- Prerequisite Courses: the 6 program prerequisite courses grades (approximately 30%)
- Kaplan Nursing Entrance Exam (approximately 32%)
- Student Interview (approximately 32%) for those students who are invited to interview based on the combined GPA /Nursing Entrance Exam and bonus points
- Healthcare Experience: Up to 4% is added to the total application score for approved documented "hands-on" healthcare experience. CNA experience is preferred, but others are considered on a case-by-case basis. Experience must be within the past 5 years of application submission.
- Corequisite Completion: Applicants can accrue up to an additional 2% in application points for completion of the 4 corequisite courses by the end of the term in which the application is submitted.
- Students must have at least a 2.75 GPA in their cumulative coursework (includes the last 60 credits of college coursework) with a minimum of a B grade in BIOH 201N and BIOH 212N within two (2) attempts (WP or WF counts as one attempt). All Health Core curriculum must be successfully completed within two (2) attempts (WP or WF counts as one attempt) to be eligible to proceed.

The application score is based on scores from the Kaplan Nursing Entrance Exam, prerequisite GPA, and interview.

For Applicants who have an LPN License:

- 1) Documented successful completion of the prerequisite Associate Degree courses including receiving a B or better in BIOH201/202 and BIOH211/212 (if previously taken as a prerequisite for a PN program).
- 2) Documented successful completion of a Practical Nursing program.
- 3) Cumulative GPA of at least 2.75 (includes the last 60 credits of college coursework).
- 4) Kaplan Nursing Entrance Exam score.
- 5) Possess and maintain a current unencumbered LPN license

- For the top ranked, an interview process with selection committee. Date, time and place to be scheduled.
- The Traditional ASN program accepts up to two current LPNs into the program. Students are placed in a cohort that has to complete Foundations and Pharmacology, so the LPN students sit out a semester and join their cohort in the second semester.

RATIONALE:

Admission requirements allow the Missoula College UM nursing program to evaluate and make sound decisions of student applicants into the nursing programs. Students applying to programs are entitled to fair and equitable treatment of their applications. The use of the rubric reduces opportunity for bias and overt subjectivity of student applicants.

- 1. A cohort of 18 students will be chosen from the pool of applicants each fall and spring application cycle.
- 2. Application deadlines are posted on the Missoula College UM webpage.
- 3. Students are given approximately 45 days to complete application paperwork.
- 4. Applications are only available for download; no hard copies are available for distribution; thus students are required to download and print current semester application.
- 5. Students are expected to submit for application review the following:
 - a. Completed application form
 - b. Transcripts (unofficial or official) of all post-high school coursework, including UM, Missoula College, and Bitterroot College, as well as all coursework done outside of UM or Missoula College.
 - c. Copy of unencumbered Practical Nursing License if applicable.
- 6. Applications are collected by the Program Director for cataloging and preparation for review by the Missoula College nursing faculty.
- 7. Top applicants are selected to participate in an interview.
- 8. The top 18 students are selected for the program each application cycle and presented to the Application Review Committee for final review and audit.
- 9. Students will be contacted by the Nursing Program Director by an email with request for student acceptance or decline.
- 10. Students who accept within the acceptable period are guaranteed a place in the nursing program. Students who do not lose their place for semester of entry.
- 11. Students declining placement into semester of designated entry are not guaranteed placement into future semesters and must reapply for the nursing program.
- 12. The Nursing Program Director reserves the right to deny admission to any applicant based on the best interest of the profession and the Missoula College UM Nursing Program, including, but not limited to:
 - a. Failure to disclose previous or pending criminal behaviors may lead to denial of admission or revoked admission.
 - b. Falsification will be considered grounds for dismissal from the Missoula College UM Nursing Program.
- 13. The Application Review Committee reserves the right to review the final list of top applicants and adjust candidate status based on interview scores.
- 14. Admission or graduation does not guarantee obtaining a license to practice nursing. Licensure requirements are the exclusive right and responsibility of the State Boards regulating professional practice.

Policy Title: Admission to the LPN-to-RN Bridge	Policy Number: A6
Program	
Effective Date: 2/2024	Revised Date:
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Spring 2024) **Level II:** Administrative Council (Spring 2024)

POLICY DESCRIPTION:

ADMISSION PROCESS TO THE LPN-TO-RN BRIDGE PROGRAM

Admission to the LPN-to-RN Bridge Program is based on objective data and evaluation that includes the following information: Specifics of the application process are posted on the website during application session.

- Unencumbered Montana LPN license.
- Must have graduated with a PN degree from a regionally accredited school or university.
- Preferred: Work in a Critical Access Hospital or small community clinic in MT.
- Must have worked at least 2,000 hours as an LPN.
- Prerequisite courses: A&P I and II (or equivalent), Introduction to Psychology, Writing 101 (or equivalent), one of the following math courses: College Algebra, Probability and Linear Math, Math for Healthcare, Pre-Calculus, Applied Calculus or Calculus.
- Co-requisite courses: General Chemistry with lab, Introduction to Sociology, Microbiology with lab
- The program director will waive the time limit for all prerequisites and co-requisites if the LPN has worked at least 2,000 hours.
- A letter of recommendation from the LPN's immediate supervisor outlining how the facility will support clinical rotations for the student.
- The cohort will be chosen based on prerequisite GPA, personal interview, work experience, and Kaplan test score.

RATIONAL:

Validated selective admission requirements helps ensure that students who are admitted to the nursing programs have a high probability of graduating and successfully passing the licensure examination.

PROCEDURE:

- 1. A cohort of 12-18 students will be chosen from the pool of applicants each summer application cycle.
- 2. The application is posted on the Office of Health Research & Partnership website, beginning in early February with a deadline of mid-March.
- 3. Submittable is used for application submission.

Students are expected to submit for application review the following:

- a. Completed application form
- b. Transcripts (unofficial or official) of all post-high school coursework.
- c. Copy of unencumbered Practical Nursing License.
- d. Recommendation letter from employer.
- 3. Applications are collected by the Program Director for cataloging and preparation for review by the LPN-to-RN Bridge Program faculty.
- 4. Top applicants are selected to participate in an interview.
- 5. After the interview process, candidates are ranked and a list of the top 12-18 students are forwarded to the Application Review Committee.
- 6. Students will be contacted by the LPN-to-RN Bridge Program Director by an email with request for student acceptance or decline.
- 7. Students who accept within the acceptable period are guaranteed a place in the nursing program. Students who do not lose their place for semester of entry.
- 8. Students declining placement into year of designated entry are not guaranteed placement into future years and must reapply for the nursing program.
- 9. The LPN-to-RN Bridge Program Director reserves the right to deny admission to any applicant based on the best interest of the profession and the Missoula College UM Nursing Program, including, but not limited to:
 - e. Failure to disclose previous or pending criminal behaviors may lead to denial of admission or revoked admission.
 - f. Falsification will be considered grounds for dismissal from the Missoula College UM Nursing Program.
- 10. The Application Review Committee reserves the right to review the final list of top applicants and adjust candidate status based on interview scores.

STUDENT POLICIES AND PROCEDURES

Policy Title: Scope and Sequence of Nursing	Policy Number: S1
Program Curriculum for AAS-PN Program	
Effective Date: 11/2007	Revised Date: 03/2013; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) Level II: Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

Scope and Sequence of Nursing Program Curriculum for AAS-PN Program REPEALED

Policy Title: Scope and Sequence of Nursing	Policy Number: S2
Program Curriculum for ASN-RN Program	
Effective Date: 11/2007	Revised Date: 03/2013; 07/2017; 07/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Scope and Sequence of Nursing Program Curriculum for ASN-RN Program. Scope and sequence offer specific recommendations for students to matriculate through the ASN-RN program at the Missoula College UM campus.

RATIONALE:

The nursing program is built on the philosophy of faculty assisting students to advance in knowledge, responsibility and accountability through structured guidance in order to develop into increasingly competent, independent members of the health care team. Education occurs in steps, students in the nursing program acquire facts and terms to assist them in identifying principles and ideas. This continues with the formulation of concepts and relationships in health care, allowing a student to use gained knowledge to enhance the quality of care and ability to use reasoning and critical judgment, (Bates & Poole, 2003). Students who complete scope and sequence and meet all mandated requirements will then be eligible to sit for the National Certification exam for the Registered Nurse: (NCLEX-RN)

PROCEDURE:

Required Course Work: ASN-Registered Nursing (After acceptance to the program)

FIRST SEMESTER

TOTAL	.11 credits
NRSG233 Foundations of Nursing Lab	3 credits
NRSG232 Foundations of Nursing	3 credits
NRSG231 Nursing Pharmacology Lab	2 credits
NRSG230 Nursing Pharmacology	3 credits

SECOND SEMESTER

*Co-Requisite: PSYX100 Introduction to Psychology4 credits	
TOTAL	11 credits
NRSG256 Pathophysiology	3 credits
NRSG237 Health & Illness of Maternal Nursing Clinical	1 credit
NRSG236 Health & Illness of Maternal Nursing	2 credits
NRSG235 Adult Nursing I Clinical	2 credits
NRSG234 Adult Nursing I	3 credits

THIRD SEMESTER

NRSG244 Adult Nursing II	3 credits
NRSG245 Adult Nursing II Clinical	2 credits
NRSG246 Health & Illness of Child & Family Nursing	2 credits
NRSG247 Health & Illness of Child & Family Nursing Clinical	1 credit
NRSG254 Mental Health Concepts	3 credits
NRSG255 Mental Health Clinical	1 credit
TOTAL	12 credits
*Co-Requisite: SOCI101 Introduction to Sociology	3 credits
FOURTH SEMESTER	
NRSG 259 Adult Nursing III	3 credits
NRSG260 Adult Nursing III Lab	1 credit
NRSG261 Adult Nursing III Clinical	2 credits
NRSG266 Managing Client Care for the RN	2 credits
NRSG267 Managing Client Care Clinical	2 credits
TOTAL	10 Credits
*Co-Requisite: BIOM250N Microbiology for Health Sciences	3 credits
BIOM251N Microbiology for Health Sciences Lab	1 credit

^{*}Students are STRONGLY ENCOURAGED to take the co-requisite courses prior to entering the program because there may be schedule conflicts with nursing clinical due to hospital availability AND it sets the student up for success in the nursing program.

Policy Title: Scope and Sequence of Nursing Program Curriculum for the LPN-to-RN Bridge Program	Policy Number: S3
Effective Date: 2/2024	Revised Date:
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Spring 2024) Level II: Administrative Council (Spring 2024)

POLICY DESCRIPTION:

Scope and Sequence of Nursing Program Curriculum for LPN-to-RN Bridge Program. Scope and sequence offer specific recommendations for students to matriculate through the ASN-RN program.

RATIONALE:

The LPN-to-RN Bridge Program is designed for working LPNs in rural MT areas to advance their education and receive an RN degree. Accessibility of nursing curriculum for these individuals is difficult due to geographical barriers, work and family responsibilities, and the lack of LPN-to-RN Bridge Programs in the state of MT. The LPN-to-RN Bridge Program is funded by an HRSA grant from 2023-2027. As licensed nurses, these individuals have already completed the Foundations, Foundations Lab, Pharmacology Lab, Adult Nursing I and Adult Nursing I Clinical coursework. These can be waived. Other courses can be waived by "testing out" and proving prior work experience in the area, for example: An LPN who has worked in Mental Health for at least 2,000 documented hours may take the final Mental Health exam, and if score is 80% or above, that course may be waived.

PROCEDURE:

Required Course Work: ASN-Registered Nursing

(After acceptance to the program)

SUMMER SEMESTER:

NRSG230 Nursing Pharmacology	3 credits
NRSG236 Health & Illness of Maternal Nursing	2 credits
NRSG237 Health & Illness of Maternal Nursing Clinical	1 credit
NRSG254 Mental Health Concepts	3 credits
NRSG255 Mental Health Clinical	1 credit
NRSG260 Adult Nursing III Lab	1 credit
TOTAL	11 credits
*Co-Requisite: CHMY121/122	4 credits

FALL SEMESTER:

NRSG244 Adult Nursing II	3 credits
NRSG245 Adult Nursing II Clinical	2 credits
NRSG246 Health & Illness of Child & Family Nursing	2 credits

NRSG247 Health & Illness of Child & Family Nursing	Clinical 1 credit
NRSG256 Pathophysiology	3 credits
TOTAL	11 credits
*Co-Requisite: PSYX100 Introduction to Psychology	3 credits
SPRING SEMESTER:	
NRSG 259 Adult Nursing III	3 credits
NRSG261 Adult Nursing III Clinical	2 credits
NRSG266 Managing Client Care for the RN	2 credits
NRSG267 Managing Client Care Clinical	2 credits
TOTAL	9 Credits

*Co-Requisite: BIOM250N Microbiology for Health Sciences3 credits

BIOM251N Microbiology for Health Sciences Lab1 credit

^{*}Students are STRONGLY ENCOURAGED to take the co-requisite courses prior to entering the program because there may be schedule conflicts with nursing clinical due to hospital availability AND it sets the student up for success in the nursing program.

Policy Title Nursing Code of Ethics	Policy Number: S4
Effective Date: 11/2007	Revised Date: 12/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

The Nurse Code of Ethics was established by the American Nurses Association (ANA) to promote awareness of professional and ethical responsibility of the professional nurse. Students and faculty at the Missoula College UM are expected to conduct themselves at all times with regard to the ANA Code of Ethics.

RATIONALE:

Students at Missoula College UM are expected to adhere to the ANA Code of Ethics for Nurses. This requirement establishes the basis for long-term development of professional behaviors and ethical reasoning with regard to client care. Nurses are expected as professionals to provide ethically sound care to all clients regardless of circumstance. Ethics is an integral part of the foundation of nursing. Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. This concern is embodied in the provision of nursing care to individuals and the community. Nursing encompasses the prevention of illness, the alleviation of suffering, and the protection, promotion, and restoration of health in the care of individuals, families, groups, and communities. Nurses act to change those aspects of social structures that detract from health and well-being. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession but also to embrace them as a part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive. A code of ethics makes explicit the primary goals, values, and obligations of the profession.

The Code of Ethics for Nurses served the following purposes:

- It is a clear, concise statement of the ethical obligations and duties of every individual who enters the nursing profession.
- It is the professional's nonnegotiable ethical standard
- It is an expression of nursing's own understanding of its commitment to society.

PROCEDURE:

Nursing students of Missoula College UM are expected to follow the following Nursing Code of Ethics. These are documented in each course syllabi as professional behavior and included as part of the final course grade. The provisions listed below come from the ANA's *Code of Ethics for Nurses with Interpretive Statements* (2015).

Provision 1

The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Provision 2

The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

Provision 3

The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Provision 4

The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

Provision 5

The nurses owes the same duties to self as to others, including the responsibility to promote health and safety, preserve the wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6

The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Provision 7

The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Provision 8

The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9

The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Policy Title: Student Etiquette Expectations	Policy Number: S5
Effective Date: 11/2007	Revised Date: 08/2015; 12/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student nurse etiquette is primarily concerned with student behaviors during classroom and clinical experiences.

RATIONALE:

Professional behaviors in classroom and clinical settings are building blocks to professional behaviors in the workplace for nursing graduates. Practicing professional behaviors, such as timeliness, teamwork, communication and accountability, are key learning objectives at all levels in the nursing program with the primary objective of promoting professional behaviors in the classroom, clinical and in eventually in the workplace.

- 1. Please be on time to class and clinical, it is reflective of professionalism and accountability.
- 2. If you know ahead of time you will be absent for class, please let your faculty know via phone or email. (Email is preferred).
- 3. Come to class prepared, please read the content and print off the lecture notes if there are any. Make the most of your class time as it is expected you will be able to participate and have completed all required readings and/or assignments before class. The class will be conducted with this in mind.
- 4. Do not let your classmates down. When group work is underway, pull your weight and share the work. Encourage group participation in an equitable fashion. Off-task chatter is distracting to others and NOT considered participation. Please be respectful of your classmates.
- 5. Academic honesty is a nursing program and professional expectation. In the event that students are suspected of cheating, plagiarism or otherwise misrepresenting their work, they will be subject to procedural due process as stated in the Student Conduct Code.
- 6. Late work, including exams, will NOT be accepted unless prior arrangements have been made with the instructor.
- 7. Children and pets are not allowed in the classroom. Faculty are aware that emergency situations may occur and ask that any student who has an emergency situation seek the permission of the classroom instructor before bringing children into the classroom. (see Policy S14).
- 8. Cell phones must be turned off or on vibrate during all class and lab (use in clinical sessions at the instructor's discretion).

- 9. Polite snacking/eating is permissible in the classroom. Smoking or chewing tobacco is not allowed in the classroom, lab or clinical setting.
- 10. Lap-top computers in the classroom must be used for current course work only. If used for other course or personal use, they may be turned off by the instructor.
- 11. All other electronic devices except lap-top computers being used for current course work must be turned off. Cell phones must be on vibrate or off.

Policy Title: Student Bill of Rights and	Policy Number: S6
Responsibilities	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Bill of Rights, Responsibilities Standards

Policy identifies and explains the necessary rights and responsibilities of students in the academic and clinical setting at the Missoula College UM nursing program. Rights and responsibilities are directly obtained from The National Student Nurse Association (NSNA).

RATIONALE:

Professional behavior development is a key component to nursing profession excellence. Students are expected at the Missoula College UM to adhere and maintain all responsibilities during academic tenure. Students also have a right of full awareness regarding rights in relation to nursing education.

PROCEDURE:

Bill of Rights and Responsibilities for Students of Nursing

The National Student Nurse Association (NSNA) Student Bill of Rights and Responsibilities was initially adopted in 1975. The NSNA House of Delegates in San Antonio, Texas (1991) updated the document; and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

- 1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
- 2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.
- 3. Each institution has a duty to develop policies and procedures, which provide and safeguard the students' freedom to learn.
- 4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.
- 5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.
- 6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
- 7. Information about student views, beliefs, political ideation, or sexual orientation, which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

- 8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
- 9. Institutions should have a carefully considered policy as to the information, which should be a part of a student's permanent educational record and as to the conditions of this disclosure.
- 10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
- 11. Students should be allowed to invite and to hear any person of their own choosing within the institution's acceptable realm, thereby taking the responsibility of furthering their education.
- 12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, e.g., through a faculty-student council, student membership or representation on faculty committees.
- 13. The institution has an obligation to clarify those standards of behavior, which it considers essential to its educational mission, its community life, or its objectives and philosophy.
- 14. Disciplinary proceedings should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or a generally available set of institutional regulations. It is the responsibility of the student to know these regulations. Grievance procedures should be available for every student.
- 15. As citizens and members of an academic community, students are subject to the obligations, which accrue to them by virtue of this membership and should enjoy the same freedoms of citizenship.
- 16. Students have the right to belong or refuse to belong to any organization of their choice.
- 17. Students have the right to personal privacy in their living space to the extent that the welfare and property of others are respected.
- 18. Adequate safety precautions should be provided by nursing programs, for example, adequate street lighting, locks, and other safety measures deemed necessary by the environment.
- 19. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.
- 20. Students should have a clear mechanism for input into the evaluation of nursing faculty.

Retrieved August 10, 2015 from http://www.nsna.org/Publications/BillofRights.aspx

Policy Title: Cell Phones	Policy Number: S7
Effective Date: 11/2007	Revised Date: 03/2013; 07/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Fall 2013; Summer 2017)

POLICY DESCRIPTION:

Cell Phones/Pagers REPEALED

RATIONALE:

Cell Phones: Due to an increasing number of students who own and use cell phones, it has become necessary to institute a policy regarding the use of these tools during class times. Cell Phones are distracting to an entire class.

- 1. If the cell phone if not emergency-related, turn them off.
- 2. If there is a reason to keep your cell phone active during class, place on vibrate.
- 3. If you receive a call, please leave the classroom quietly to take the message.
- 4. All cell phones must be in a silent or off for exams and on vibrate during clinical experiences.

Policy Title: Student Ambassadors	Policy Number: S8
Effective Date: 11/2007	Revised Date: 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student ambassadorships are to promote student involvement of curriculum and communication between student and faculty. Recommendation of policies for retention of students, curriculum adaptations and participate in long term planning of policies in the nursing programs is the primary focus of student involvement in councils and ambassadorships.

Membership includes one student from each nursing cohort, including the LPN-to-RN Bridge Program cohort.

RATIONALE:

Student input and involvement is vital to the Nursing Program's ability to maintain insight to student concerns and challenges. The Missoula College UM invites students to be involved in the program though advisory councils and ambassadorships to enhance faculty and administrative awareness of student needs and concerns.

The purpose of the Student Involvement for Missoula College UM is:

- To recommend polices toward recruitment, retention and placement of nursing students.
- Recommend changes to policies and procedures for the nursing program, faculty and students based on sound evidence and rationale for the need to change said policies.
- Recommend curriculum adaptations based on changing competencies, knowledge, skills and attitudes for successful entry into nursing practice at all levels.
- Assist in the identification of resources for educational materials and equipment, clinical practicum and preceptor sites, and support services for students and the nursing program.
- Assist in long-term planning based on changes in the health care industry, assessment of community needs and educational needs of the nurse clinician.

- 1. At the beginning of each semester nursing faculty will select a student from each cohort to serve on the Nursing Advisory Council and as a Student Ambassador.
- 2. The selection will take place during designated classroom hours by the end of the 3rd week of the semester. These students would be asked to represent students at advisory council meetings, held up to three times per year, attend faculty meetings as invited to by the Director and be a direct link to the Director for communication, concerns and student challenges and participate in an end of the semester evaluation meeting.

- 3. Students chosen would be briefed on expectations and methods of professional conduct in communicating concerns and student insight within one week of election by the Nursing Program Director.
- 4. Students will be provided with dates of meetings and expectations by the Nursing Program Director.
- 5. Students are requested to offer evaluations of faculty, clinical and program at the end of the semester to the Nursing Program Director as well as informal meetings to ensure open lines of communication.
- 6. If the student chosen declines to participate, or changes their mind, another selection will take place to ensure student placement by the next scheduled faculty meeting.

Policy Title: Assignment, Take Home Exam Due	Policy Number: S9
Dates and Request for Late Written Work	
Acceptance.	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Assignment, Take Home Exam Due Dates and Request for Late Written Work Acceptance

RATIONALE:

Education occurs in steps, students in the nursing program acquire facts and terms to assist them in identifying principles and ideas. This continues with the formulation of concepts and relationships in health care, allowing a student to use gained knowledge to enhance the quality of care and ability to use reasoning and critical judgment, (Bates & Poole, 2003). The Missoula College UM nursing faculty supports this constructivist approach to learning.

Students who are unable to turn in assignments, take home exams and request to turn in written work late are not able to fully absorb and matriculate course material promoting optimal educational outcomes. Extenuating circumstances occur and will be taken into consideration, however, students unable to meet minimal expectations may be asked to withdraw from the nursing program.

- 1. Assignment is due at the beginning of class within the first 10 minutes.
- 2. No late assignments will be accepted without prior approval from the instructor.
- 3. Emergent or extenuating circumstances will be handled on an individual basis.
- 4. The instructor has final approval of whether requests are accepted or denied.
- 5. If a student feels they are not being treated fairly, use Chain of Command and request of due process.

Policy Title: Nursing Course Examinations, In-	Policy Number: S10
Class and Online.	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Nursing Course Examinations, In-Class and Online

Students are expected to demonstrate didactic competency though testing of material in class and in the online environment. Students will be expected to adhere to policies related to honesty, integrity, cheating in the Student Conduct Code.

RATIONALE:

Testing and assessments is a means to measure learning of students regarding presented materials in the Nursing Program. Each course utilizes forms of assessment that require students to demonstrate a minimal benchmark level of competency of 80% in all nursing courses in overall course to continue in matriculation in the nursing programs.

Procedure: In-Class Exams

- 1. Students are expected to take tests, assessments and exams at times scheduled.
- 2. Students unable to take tests at scheduled times must notify faculty members prior to the test unless there are emergency circumstances.
- 3. Arrangements will need to be made <u>by the student</u> for testing with faculty members or testing center within time frame of instructor preference.
- 4. Extenuating circumstances will be considered on a case-by-case basis if a student is unable to take an exam at the scheduled time.

Procedure: Online Moodle Exams

- 1. Tests are to be taken at the times they are scheduled. In the event a test must be missed, <u>prior notification to faculty member is required</u>.
- 2. Exams on Canvas can be taken during school hours or at home dependent on instructor preference. In the event an exam is given to be taken at home students must adhere the Canvas test taking instructions found in the Student Handbook. Students must adhere to the policy related to honesty, integrity, and cheating as stated in the Student Conduct Code as well as adhere to the test instructions that accompany the online quiz/exam.
- 3. Extenuating circumstances will be considered on a case-by-case basis if a student is unable to take an exam at the scheduled time.
- 4. Any concerns regarding dishonest conduct during test taking will be addressed and could result in failure of the examination and could also result in immediate suspension from the nursing program.

Policy Title: Grievances and Complaints	Policy Number: S11
Effective Date: 11/2007	Revised Date: 02/2024
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Spring 2024)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Complaints: Negative feedback received by the nursing program from or by students, faculty, or staff.

RATIONALE:

Negative feedback or complaints are taken seriously by the nursing department. Anyone who lodges a complaint to the nursing faculty, director, department chair, associate dean or dean will be reviewed carefully to determine if any action needs to be taken. The philosophy of the nursing program clearly identifies the need to create an environment of collaboration and mentorship among faculty, students and staff, which in turn models professional excellence in communications, skills and ethical behaviors.

PROCEDURE: FACULTY/STAFF

- 1. If a faculty or staff believes that his/her academic rights have been violated, the procedure below is followed within the Nursing Program and Missoula College UM.
 - a. Chain of Command:
 - i. Faculty member involved
 - ii. Nursing program director
 - iii. Health Professions Department Chair
 - iv. Missoula College Associate Dean
 - v. Missoula College Dean
- Complaints may be communicated verbally or in writing. In the event the complaint is found to
 be justified by members in the chain of command, progressive disciplinary action may ensue to
 ensure reduction or elimination of offensive behavior in accordance of the guidelines set forth
 by The University of Montana, Collective Bargaining Agreement
 (http://www.umt.edu/provost/faculty/CBAs/default.php) and/or Human Resources
 (http://www.umt.edu/hrs/Personnel%20Resources/Personnel%20Policies/default.php).

PROCEDURE: STUDENT

- 1. If a student believes that his/her academic rights have been violated, the procedure below is followed within the Missoula College UM Nursing Program. The student is to contact the following persons in the order as listed below. The student will proceed to the next person when the grievance is not resolved to his/her satisfaction.
 - a. Chain of Command:
 - i. Faculty involved
 - ii. Nursing program director
 - iii. Health Professions Department Chair
 - iv. Missoula College Associate Dean

- v. Missoula College Dean
- vi. The Office of the Provost

If the faculty, the nursing Program Director, the Chair, the Director of Student Success, the Dean, and the Provost's Office have not addressed the matter to the student's satisfaction, the student must contact the ASUM <u>Student Resolution Officer</u> (243-6213, <u>asumlegal@mso.umt.edu</u>).

The student grievance procedure requires that such grievances be brought to the Student Resolution Officer within 30 days of the act or omission that caused the grievance or after the date that the student knew or should have known of such an act or omission (see CBA Section 21.500).

Students are asked to chronologically organize all documentation of interactions between the student and the faculty, staff, and administrators they contact. In addition, it is recommended they write a chronological summary of their experiences in trying to resolve the academic issue.

Policy Title: Dosage Calculations Policy	Policy Number: S12
Effective Date: 11/2007	Revised Date: 08/2015; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty Spring 2024)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Dosage Calculations Policy

Dosage Calculations Policy provides criteria and benchmarks in which students will be allowed to participate in the clinical setting and administer medications to clients within the role of the ASN-RN student. Students unable to demonstrate competency in medication administration may be removed from the program.

RATIONALE:

According to U.S. Food and Drug Administration Department of the US Government, a medication error is "any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer," according to the National Coordinating Council for Medication Error Reporting and Prevention.

To promote medication administration safety in the clinical setting the Missoula College UM is driven to put forward reduction of medication errors and enhance student awareness to the importance of utilizing and practicing the 6 rights to medication administration during the clinical experience by demonstrating clinical and didactic competence prior to clinical experiences.

- 1. Students enrolled in NRSG234 Adult Nursing I must earn a 100% on the Dosage Calculations and Drug Administration quiz prior to participating in the clinical rotation.
- Students enrolled in NRSG246 Health & Illness of Child & Family Nursing must earn a 100% on the Dosage Calculations and Drug Administration quiz prior to participating in the clinical rotation.
- 3. Students enrolled in NRSG259 Adult Nursing III must earn a 100% on the Dosage Calculations and Drug Administration quiz prior to participating in the clinical rotation.
- 4. In the event a student is unable to earn a 100% on the quiz after the initial attempt, the student will meet with the instructor, discuss areas of concerns, and develop a mutual action plan to assist the student in achieving goals of safe medication administration.
- 5. The student will repeat taking a dosage calculation quiz and if still not successful in earning 100% the process of an action plan and testing will continue until the student is successful.
- 6. Students are not allowed to pass medications in the clinical area until they have successfully completed all dosage calculation quizzes with 100%.

Policy Title: Dropping Courses or Withdrawal	Policy Number: \$13
from Nursing Program	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Withdrawing or dropping a required class may result in the student losing their position in the nursing program and having to reapply to the nursing program.

RATIONALE:

Education occurs in steps, students in the nursing program acquire facts and terms to assist them in identifying principles and ideas. This continues with the formulation of concepts and relationships in health care, allowing a student to use gained knowledge to enhance the quality of care and ability to use reasoning and critical judgment, (Bates & Poole, 2003). The Missoula College UM nursing faculty support this constructivist approach to learning. Therefore, students are expected to, through advising and selection, make informed choices in selecting courses and to regard those choices as semester-long commitments.

PROCEDURE:

Dropping or Changing Course Work

Students who request to add, drop or change a course must have all registration holds cleared in order for the request to be honored and follow the timeline as found in the University of Montana Catalog (http://www.umt.edu/catalog/academics/academic-policy-procedure2.php) in the section titled "Adding and Dropping Courses or Changing Sections, Grading or Credit Status."

Withdrawal Policy Procedure:

Students who withdraw from the Missoula College UM while a semester is in session must complete withdrawal forms which are obtained from the Registrar's office at the Missoula College and follow the process as outline in the University of Montana Catalog

(http://www.umt.edu/catalog/academics/academic-policy-procedure2.php) in the section titled "Withdrawal from the University."

Reference: The current University of Montana Catalog (http://www.umt.edu/catalog/).

Policy Title: Readmission to the Nursing Program	Policy Number: S14
Effective Date: 11/2007	Revised Date: 2/2024
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Spring 2024)

Level II: Administrative Council (Summer 2017, Spring 2024)

Policy Description:

Readmission to the Nursing Program: Students who withdraw from nursing classes or fail (grade less than B) must request readmission to the nursing program.

Rationale: This policy is to support student success if readmitted to the nursing program. A student who fails or withdraws from a nursing course or courses is at risk of failing again if an action plan is not developed and followed. The nursing program understands that students may face a variety of obstacles when taking nursing courses, including health concerns, family and/or work obligations, time constraints, and learning disabilities. The action plan is designed to identify these obstacles and find reasonable solutions so the student can be successful when attempting the course or courses a second time.

Procedure:

The following process is followed for students seeking readmission to the nursing program.

- 1. At the time of failure or withdrawal from the nursing program the student makes an appointment for an exit interview with the Nursing Director.
- 2. The exit interview must occur within a month of leaving the program. The Director and student will review the reasons for failure/withdrawal. The student is advised of the requirements for readmission, as stated in this policy, including reapplying to the program.
- 3. The student must submit a self-evaluation and action plan with the request for readmission. The focus of this plan is to develop the knowledge, skills, and personal resources necessary for success in the nursing program.
- 4. The action plan may include the following: appropriate courses to complete, health problems to address, counseling recommendations/requirements, resolution of specific behavioral or performance problems, family and/or work issues to address.
- 5. The action plan may include a satisfactory demonstration of nursing skills that have previously been taught, such as foley catheter insertion or IV medication administration.
- 6. The student must submit an application (reapply) for the semester in which they wish to enter. There must be a vacancy in the cohort in which they wish to enter, or the student must sit out that semester until an opening is available. Students who have to wait a semester for re-entry must show skill and knowledge proficiency in the Foundational skills and Pharmacology skills learned previously. The program may have the student take exams and show skills proficiency prior to readmission.

- 7. Nursing faculty may make recommendations regarding student readmission.
- 8. The final decision of the Nursing Director and faculty will be communicated to the student in writing.
- 9. The following is a list of behaviors or attitudes that will result in expulsion from the program without the ability to reapply or be readmitted. This list is not all-inclusive:
 - Conviction, possession, and/or distribution of illegal drugs or controlled substances, any
 evidence or suspicion of drug or alcohol use in the classroom, clinical, or lab setting. This
 includes but is not limited to the suspected use of drugs or alcohol, or any other
 condition or circumstance that constitutes an unreasonable risk to the safety and/or the
 wellbeing of the patient, students, and/or faculty.
 - Failure to complete and pass the criminal background check. Failure to pass is defined
 as: having been found guilty of abuse, neglect, exploitation, misappropriation of
 property, or mistreatment by a court of law; or having a finding in the State nurse aide
 registry concerning the afore mentioned actions or have had a disciplinary action in
 effect taken against his/her professional license.
 - Being denied access and/or expulsion from any clinical location.
 - Readmission must take place within one year of failure/withdrawal.

Policy Title: Student Files	Policy Number: S15
Effective Date: 11/2007	Revised Date: 03/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Files – General student files will be retained in Box for a specific period of time following graduation or withdrawal.

RATIONALE:

Student files are often needed after graduation to verify information for articulation of student education applications, state board of nursing verifications, and other miscellaneous requests.

- 1. Student files begin as students are enrolled in Missoula College and begin advising as prenursing students. Files are routinely maintained for each advising appointment with the Missoula College Academic Advising Department.
- 2. A central student file for pre-nursing students is maintained in a secured area in the Academic Advising office and/or in Box for each student under the designation as a pre-nursing student.
- 3. For admitted students, documents submitted during the application period (transcripts, application forms, Kaplan Nursing Entrance Exam results, employment verification) will be scanned and placed in Box in the student's file. The paper application packet will be shredded.
- 4. For students who applied but were not accepted, the paper application packet will be kept in a locked drawer in the Nursing Program Director's office. Paper application packets will be kept for a period of 5 years post the student's last application attempt.
- 5. Each admitted student file is separated by BLS, immunizations, signed handbook forms, Blood Borne Pathogens exam, and course work.
- 6. Filing of student data is completed by the Nursing Program Director.
- 7. The records of any student who has experienced problems in the program (e.g. academic contracts, remediation, failure, personal difficulties affecting progress) should be maintained in the student's central file in Box.
- 8. A central student file is maintained in a secured file in Box for each student who has graduated for a period of 5 years post the student's last year of enrollment. For students who withdraw, central files are also kept for a period of 5 years post the student's last year of enrollment.

Policy Title: Children Attending Classes	Policy Number: S16
Effective Date: 11/2007	Revised Date: 12/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Children Attending Classes

RATIONALE:

Children will not be allowed to attend classes under normal circumstances. The faculty realizes that on a rare occasion an emergency may arise which necessitates bringing a child to lecture. If the student has explored all options and must bring the child to lecture, the procedure below must be followed.

The Nursing Program wishes to be supportive to students with small children. However, optimal learning conditions for <u>all</u> students must be considered and, as much as possible, maintained in the classroom at all times. Children in the classroom present, at minimum, a distraction and may be disruptive to a class.

- 1. Permission must be obtained from the professor prior to bringing the child to lecture.
- 2. The professor may ask the student and child to leave if the child becomes noisy or is disruptive to the class environment.
- 3. The student and child must sit in an area of the classroom with easy access to the door (e.g. front row or side aisle) so that they may leave quietly in the event that the child becomes noisy or disruptive to the class environment.
- 4. Under no circumstances will children be allowed to attend class during examinations.
- **5.** Under no circumstances will children be allowed to attend laboratory or clinical (including clinical conferences).

Policy Title: Nursing Required Testing for ASN-RN	Policy Number: S17
Programs	
Effective Date: 11/2007	Revised Date: 03/2013; 07/2017; 07/2019;
	07/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Nursing Required Testing for ASN-RN Programs

The Missoula College UM Nursing Program has chosen to utilize the Kaplan Nursing educational tools to promote student readiness for the National Certification Exam at the ASN-RN graduate level.

RATIONALE:

The overall goal of the Missoula College UM ASN program is to provide nursing students with relevant content related to the National Certification Licensing Exam (NCLEX) and entry-level nursing practice. The Kaplan products offer a wide variety of learning materials, including virtual simulations. Kaplan provides sample tests, remediation opportunities, and a comprehensive NCLEX review that includes a face-to-face class with an NCLEX expert.

PROCEDURE:

- 1) Students will pay for the Kaplan program individually each semester.
- 2) A roster of students in each cohort that will be using Kaplan will be sent to the Kaplan administrator approximately two weeks before the start of each semester.
- 3) The Kaplan administrator will send a billing email to each student after receiving this roster. This email will include instructions on how to submit payments.
- 4) Students are given approximately 3 weeks to submit payment for the Kaplan product.
- 5) The Kaplan Administrator will contact the Nursing Program Director if any accounts are delinquent.

The following courses will utilize Kaplan:

- NRSG230 Nursing Pharmacology
- NRSG232 Foundations of Nursing
- NRSG233 Foundations of Nursing Lab
- NRSG234 Adult Nursing I
- NRSG236 Health & Illness of Maternal Nursing
- NRSG244 Adult Nursing II
- NRSG246 Health & Illness of Child & Family Nursing
- NRSG254 Mental Health Concepts
- NRSG259 Adult Nursing III

Policy Title: Course Incompletes	Policy Number: S18
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Policy on Incompletes

RATIONALE:

Nursing education originates with faculty/student mentorship progressing to a partnership in a series of supervised experiences which facilitate holistic healthcare through the acquisition and application of specific knowledge, skills, and professional attitudes.

It is assumed that students have the responsibility for completing requirements of the course in which they are enrolled within the time framework of the semester. However, incompletes may be given based, in the opinion of the instructor; there is reasonable probability that students can complete the course without retaking it. The incomplete is not an option to be exercised by the student, but rather the instructor and based within the following guidelines.

PROCEDURE:

- 1. Students have been in attendance and performing at a passing level throughout the semester.
- 2. For reasons beyond their control, a student will be unable to complete requirements on time. Indifference and negligence are not acceptable reasons.
- 3. The instructor will set the deadlines and limitations of the incomplete and note these conditions on the final grade report.
- 4. When a student has met the conditions from making up the complete, the instructor will assign a grade based on the evaluation of the total work done by the student in the course.
- 5. An incomplete which is not made up within one calendar year will automatically revert to the alternate grade which was assigned by the instructor at the time the incomplete was submitted.
- 6. An incomplete remains on the permanent record and is recorded as: IA, IB, IC, ID, IF.

Reference: Current University of Montana Catalog

Policy Title: Acceptable Academic Performance in	Policy Number: S19
Nursing Courses	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Acceptable Performance in Nursing

RATIONALE:

Since all required courses are important to achieve objectives of the program, a standard minimum performance level is essential for all courses required in the Associate Nursing curriculum.

- All required prerequisite courses must be completed with a grade of C or higher, with the
 exception of Anatomy and Physiology I and II which must be completed with a grade of a B or
 better.
- 2. No prerequisite course may be repeated more than twice. If a course is not completed with a passing grade after the second time, the student is no longer eligible for the nursing program. A withdraw pass (WP) and/or a withdraw fail (WF) is considered an attempt.
- 3. All required nursing courses must be completed with a grade of B or better. A grade of C or lower is not an acceptable passing grade and the student will not be allowed to progress in the program.
- 4. Students receiving a C or less in any nursing courses will receive a program withdraw and can then reapply at a later time.
- 5. No nursing program course may be repeated more than twice. If a course is not completed with a passing grade with the second attempt, the student is no longer eligible to reapply to the nursing program.
- 6. Exceptions can be made for emergent circumstances (which subsequently resolve) as determined by the program director and faculty.
- 7. Plus (+) and Minus (-) grading is not used in the nursing program.
- 8. Rounding up of grades will be an individual Nursing Program faculty option.

Policy Title: Preclinical Requirements-BLS for	Policy Number: S20
Healthcare Providers	
Effective Date: 11/2007	Revised Date: 03/2013; 12/2015; 7/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Preclinical Requirements-BLS

RATIONALE:

Students are expected to provide current and accurate documentation of BLS status.

- 1. Students are required to obtain BLS for healthcare providers, to include adult, child, and infant, obstructed airway, use of Ambu bag, and automatic external defibrillator. A certification that includes hands-on skills demonstration is required.
- 2. Each student is responsible for making his/her BLS for Healthcare Providers card and submitting verification of continued certification at the start of each semester.
- 3. Students who do not maintain BLS competency and documentation will not be allowed to participate in clinical experiences.

Policy Title: Preclinical Immunization	Policy Number: S21
Requirements	
Effective Date: 11/2007	Revised Date: 09/2022, 02/2024
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Preclinical Immunization Requirements

RATIONALE:

Students are expected to provide current and accurate documentation of immunization status in compliance with Missoula College UM and clinical agencies used for clinical experiences.

PROCEDURE:

All nursing students are required to have documentation of receiving the following immunizations:

- COVID-19 Vaccinations: Documentation of completed vaccination series -OR- Students must print
 and sign the Community Medical Center COVID declination form (either medical or religious) AND
 the Providence St. Patrick Hospital COVID declination form.
- 2. Hepatitis B Series (vaccinations AND titer) Or Declination Form:
 - a. All students are required to begin the series of immunizations for Hepatitis B <u>prior to</u> <u>the start of the ASN nursing program</u>, unless a series is already completed.
 - b. A post series titer is required to document seroconversion.
- 3. MMR Series (vaccinations OR titer):
 - Provide proof of the 2-shot series MMR (mumps, measles, rubella) vaccination.
 - OR a positive MMR titer. Note that if needing this, the 2-shot series MMR should be administered at least 4 weeks apart.
- 4. **TB (tuberculosis):** Provide proof of one of the following negative TB tests that was done in the last 12 months. If the test is positive, a chest x-ray is required.
 - Two negative TB skin tests that will be "read" 48-72 hours after being administered. The second of the two tests must be administered 7-21 after the first test.
 - OR a Negative Quantiferon TB blood test.
- 5. **Tetanus with Pertussis, i.e. Tdap:** After initial Tdap vaccine is received, a <u>booster is required every 10 years</u>.
 - Provide proof of current Tdap (tetanus, diphtheria and whooping cough/pertussis).

- 6. **Varicella (2-dose series** OR **titer):** Provide proof of Varicella (chickenpox) vaccination series OR a titer.
- 7. **Flu:** Students will be contacted when seasonal flu vaccines are available about this requirement, which is usually in October or November. A signed declination form is accepted.

Policy Title: Student Background Checks	Policy Number: S22
Effective Date: 04/2008	Revised Date: 12/2015; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Background Checks – Clinical facilities require a background check, including a search on the National Sex Offender Registry for all Missoula College UM Nursing Program students. A copy of the background check and Sexual Offender check must be presented to the MC Nursing Administrative Assistant prior to the start of nursing school. Nursing students complete a background check prior to placement in any clinical setting. Background checks are done at the student's expense.

- Students who do not provide the required documentation will not be permitted to attend the mandatory clinical orientation.
- Students who do not attend the mandatory clinical orientation for any reason (with the exception of
 extenuating circumstances and preapproved by the course instructor or program director), will not
 be permitted to participate in clinical experiences and thus fail the course.
- Any background check with a discrepancy will be taken to the appropriate clinical site by the course
 instructor for further evaluation and determination of student placement. It is the clinical sites
 which require background checks and sexual offender check. The clinical site has the final say on
 whether a student can or cannot participate in a clinical rotation at the site.

RATIONALE:

To promote patient safety and decrease institutional liability, most clinical agencies require students to have cleared a background check before they will permit the students in the clinical setting. To meet these requirements, the Nursing Program requires that the check be done prior to placement in any clinical agency.

- 1. Prospective students will be informed in college publications, new student orientation and web information that a background check will be required prior to beginning any clinical coursework.
- 2. Information regarding where students can obtain the necessary check can be found in the Nursing Program Admission Packet.
- 3. The Program has electronic access to a copy of the background check. Results will be maintained in the student's general file.
- 4. The student is responsible for pointing out any discrepancies in their background check to the Nursing Program Director.
- **5.** The Nursing Program Director notifies the appropriate faculty person. The faculty person takes the background check with discrepancies to the clinical facility Human Resource Department or Education Department. The clinical facility makes the decision how to proceed.

Policy Title: Student Drug Screens	Policy Number: S23
Effective Date: 08/2019	Revised Date:
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level II: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Summer 2019, Spring 2024)

POLICY DESCRIPTION:

Student Drug Screens— Clinical facilities require a 10-panel urine drug screen for all Missoula College UM Nursing Program students. A copy of the 10-panel urine drug screen with no discrepancies must be placed in the students' chart prior to the start of the first semester. Drug Screens are done at the student's expense.

- Students who do not provide the required documentation will not be permitted to attend the mandatory clinical orientation.
- Students who do not attend the mandatory clinical orientation for any reason (with the exception of
 extenuating circumstances and preapproved by the course instructor or program director), will not
 be permitted to participate in clinical experiences and thus fail the course.
- Any drug screen with a discrepancy will be taken to the appropriate clinical site by the course
 instructor for further evaluation and determination of student placement. It is the clinical sites
 which require drug screens. The clinical site has the final say on whether a student can or cannot
 participate in a clinical rotation at the site.

RATIONALE:

To promote patient safety and decrease institutional liability, most clinical agencies require students to have cleared a drug screen before they will permit the students in the clinical setting. To meet these requirements, the Nursing Program requires that the screen be done prior to placement in any clinical agency.

- 1. Prospective students will be informed in college publications, new student orientation and web information that a urine drug screen will be required prior to beginning any clinical coursework.
- 1. Information regarding where students can obtain the necessary screen can be found in the Nursing Program Admission Packet.
- 2. The Program has electronic access to a copy of the drug screen. Results will be maintained in the student's general file.
- 3. The student is responsible for pointing out any discrepancies on their drug screen to the Nursing Program Director.

Policy Title: Student Employment During	Policy Number: S24
Enrollment in the Nursing Program	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Employment While Enrolled in the Nursing Program

Students are encouraged to carefully consider the time commitment for classes, student, family life, travel, leisure activity and other life responsibilities prior to scheduling outside employment while attending the Missoula College UM Nursing Program.

RATIONALE:

Learning is best achieved when a student is prepared, rested and engaged in the process of learning. Students that must seek employment to maintain personal obligations are cautioned to consider timing of employment obligations in relation to clinical and classroom.

- 1. Students should not schedule working hours eight hours prior to clinical activities.
- 2. Students who appeared too fatigued to safely provide client care will be sent home.
- 3. Students who are too tired to participate and sent home will be given an absence for that clinical day.
- 4. Students deemed unsafe to drive will need to make arrangements to get home or have the clinical instructor call a cab for transportation. Students will incur any costs of transportation needed.

Policy Title: Student Skills Lab Participation and	Policy Number: S25
Clinical Orientation	
Effective Date: 04/2008	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Skills Lab Participation and Clinical Orientation - Once each semester begins, students are required to attend the skills lab and clinical orientation arranged by faculty. If extraordinary circumstances beyond the student's control (e.g. death in the family, serious illness, etc.) preclude the student's attendance at these orientations, assistance and/or makeup will be offered <u>as resources are available</u>. The student will not be able to continue in the course if the necessary resources to make up the skills lab and clinical orientation are unavailable or unwarranted. If the orientation cannot be made up, the student will be "dropped" from the course. The student's progress in the program will then be based on application of re-applying to the specific program.

RATIONALE:

Participation in skills lab and clinical orientation is designed to assist with the transition of students into a clinical setting. Absence from orientation may compromise students' learning opportunities and jeopardize the clients' safety.

PROCEDURE:

The student will:

- 1. Anticipate attendance at the skills lab and clinical orientation.
- 2. Actively seek information about the time and place of these activities.
- Attend the scheduled skills lab and orientation.
- 4. Inform the faculty member prior to the scheduled orientation if some circumstance beyond the student's control (as previously stated, an extraordinary event) precludes attendance at the orientation.

The faculty member will:

- 1. Plan the skills lab and orientation relevant to the specific course.
- 2. Inform students of the time, place, and expectations of the skills lab and orientation.
- 3. Inform the other faculty and Program Director of any student's absence and discuss appropriate actions in regard to the student's absence.

Policy Title: Student Skills Inventory and	Policy Number: S26
Assessment Clinical Passport	
Effective Date: 04/2008	Revised Date: 03/2013; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Student Skills Inventory and Assessment – Changed to Clinical Passport Fall 2017

RATIONALE:

A thoughtful, careful and comprehensive inventory of nursing skills:

- 1. Assists in identifying and recording skills.
- 2. Provides a communication mechanism for informing clinical preceptors of previously demonstrated skills.
- 3. Provides information to prospective employers and others seeking information about a student's learning experiences during the nursing program.
- 4. Assists in evaluating clinical courses.

- 1. Students will be provided a Clinical Passport at the beginning of the nursing program.
- 2. Students are to carry this to all lab, clinical, and preceptorship completing it as they complete the skill.
- 3. Those eligible to sign the skill off is either a nursing faculty, clinical instructor, or staff nurse.
- 4. Students keep the Clinical Passport to show future employers.

Policy Title: Clinical Uniform Dress Code for ASN	Policy Number: S27
Nursing Program	
Effective Date: 07/2008	Revised Date: 03/2013; 08/2015; 09/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017,, Spring 2024)

POLICY DESCRIPTION:

NURSING PROGRAM CLINICAL DRESS CODE

RATIONALE:

The uniform identifies an individual as a student in the Missoula College UM Nursing Program and is to reflect a positive and professional image of the individual and the school. Clinical institutions also have specific dress code policies which govern student dress code for clinical.

PROCEDURE:

Uniform Policy

- 1. Uniform will be selected by the MC Nursing Program
- 2. The maroon uniform may be purchased through a number of sources.
- 3. The maroon uniforms shall be clean, neat, pressed, and free of wrinkles and in a good state of repair; reflecting high professional standards at all times. No open-toed or open heel shoes or sandals. No Crocs are allowed at clinical facilities. Duty shoes must be neat and clean and appropriate for the clinical setting.
- 4. The Nursing Program patch must be sewn on the left arm.
- 5. The maroon uniform is worn during all clinical experiences conducted in agencies where the use of a uniform is required.
- 6. The name badge includes the student's first and last name, ASN class and Missoula College title. It is to be worn above the chest pocket.
- 7. The name badge <u>MUST</u> be worn at any time the student is in a clinical setting. For patient safety reasons, you will be asked to leave clinical without this proper identification. This will be considered a clinical absence.
- 8. Clinical specific name badges <u>MUST</u> also be worn at any time the student is in the clinical setting. For patient safety reasons, you will be asked to leave clinical without this proper identification. This will be considered a clinical absence.
- 9. Variations:
 - a. Variations in the dress code due to the requirements of the clinical setting will be clarified by faculty.
 - b. Nursing students should always wear student uniforms when giving nursing care, unless a different policy is specifically defined for the clinical unit (e.g., Mental Health).
- 10. Exceptions to the dress code which are related to cultural or religious beliefs may be granted by the Program Director or a designee, upon written request by the student.

- 11. Students are expected to have required supplies during clinical at all times. These include:
 - a. functional stethoscope
 - b. working penlight
 - c. report sheet
 - d. pen
 - e. appropriate clinical paperwork
- 12. Official uniforms and identification must be worn anytime a student is at a clinical site. This includes when choosing a patient.
- 13. When street clothes are worn according to a clinical site policy, they must conform to the dress code of the clinical agency and under the guidelines of Professional or Casual Business Attire. No denim or jeans are allowed at SPH or CMC.
- 14. Body and hair must be clean and odor free. Hair length longer than shoulder length must be worn off the face, secured behind the shoulders. Faddish hair color (e.g. bright reds, greens, blues, etc.) is not accepted. Beards and moustaches are permitted, but must be well-trimmed and neat.
- 15. Fingernails must be short, clean and no longer than ¼" past the fingertip. Artificial nails are not acceptable.
- 16. Jewelry: Students are allowed only two post earrings and no "plugs." Students are allowed to wear two rings. Earrings must not dangle off of the ear more than ½ inch. One nose stud up to 1/8 inch in size.

Professional Business Attire

- 1. Suit or jacket and pants/skirt (skirt knee length or below); tailored dress
- 2. Blouse/Shirt
- 3. Shoes comfortable low heel pumps to complement suit; coordinate with attire, clean and shined
- 4. Stockings or socks—to complement attire
- 5. Jewelry (if applicable) simple and in good taste i.e. (if applicable) in good taste to fit the occasion and complement the outfit
- 6. Belt (if applicable) coordinate with shoes and suit

Casual Business Attire

- 1. Shirt or blouse with collar or polo style
- Slacks
- 3. Chinos or khakis neatly pressed
- 4. Skirt (knee length or below)
- 5. Blazer or sweater
- 6. Loafers or lace-up shoes cleaned and shined

Inappropriate Attire

- Inappropriate attire, including t-shirts, tank tops, jeans, shorts, skirts above the knee, tight
 fitting or suggestive clothing, flip flops, sneakers, sandals, athletic wear, leggings, bare
 midriffs or low-cut garments (low-cut necklines or low-rise pants), should not be worn to
 any clinical placement.
- 2. No bare legs are allowed at CMC or SPH.

Failure to Meet Regulations

- 1. It is the responsibility of each student to follow these regulations. If they are not followed, the student will be sent home from clinical and it will count as an absence.
- 2. More than one absence in a semester is considered as a failure of the clinical portion of the course, unless preapproval has been approved by faculty.

Policy Title: Travel to Clinical Sites and School	Policy Number: S28
Cancellation	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

POLICY DESCRIPTION:

Travel to Clinical Sites and School Cancellation Policy

RATIONALE:

It is strongly recommended that the student have available reliable transportation for both local and distant clinical sites. Lack of transportation is not considered a viable reason to miss clinical.

- 1. Students are expected to arrange for reliable transportation to clinical sites. This may include a car, bus or other means of reliable travel.
- 2. Students must provide own means of travel.
- 3. Students are expected to arrive on time and ready to begin clinical experiences at the designated time.
- 4. If The University System cancels class campus wide due to inclement or bad weather, natural disaster or acts of violence, there will be no school or clinical out of safety precautions for students.
- 5. Students are expected to get the latest updates regarding school closures and late starts from a reliable source.
- 6. For cancellations or late starts, faculty will not enforce strict policy regarding late work, common sense adjustments will be made.

Policy Title: Communicable Disease	Policy Number: S29
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Communicable Disease policy of preventive practices in clinical

Rationale:

Nursing program students are required to adhere to Nursing program policies on health screening tests, immunizations, and preventive practices described below as well as those for clinical agencies which may have additional requirements. Program Director and faculty will inform students of agency policies which differ substantially from the Nursing program. Students are expected to provide evidence of immunizations at each registration period. **Students without valid documentation of appropriate immunizations will be denied access to the clinical setting**. Students who cannot meet the requirements listed in this policy for medical reasons should provide documentation with rationale from their health care provider. The Nursing Program Director must receive any exception request in advance of clinical coursework placement.

Procedure:

I. TUBERCULOSIS POLICY: All nursing students must be screened annually for tuberculosis (TB). Initially, a two-step skin test or Quantiferon blood test must be done to provide a baseline. Each student is responsible for providing evidence of screening for TB.

RATIONALE: TB can be rendered non-communicable with appropriate treatment for those individuals who have a positive test. The tuberculin skin test (TST) and the Quantiferon blood test are both used to detect tuberculosis.

PROCEDURE (TB):

- 1. Students are required to present evidence of negative results of their initial TST skin test or Quantiferon blood test prior to entering the program.
- 2. Students with a positive test will be referred to their health care provider for assessment of risk and will be required to provide written clearance from their health care provider to provide patient care.
- **II. MEASLES, MUMPS, RUBELLA (MMR) POLICY**: All nursing students must provide evidence of adequate immunity to measles, mumps, and rubella.

RATIONALE (MMR): Measles, mumps, and rubella can be prevented through routine vaccination. Vaccination is indicated for individuals who do not have adequate documentation of immunity.

PROCEDURE (MMR):

- 1. Students are required to provide documentation of measles, mumps, and rubella immunity prior to entering clinical nursing courses. Persons born later than 1957 may be considered immune with documented physician diagnosis, lab evidence of immunity or appropriate documentation of immunization. This includes vaccination against MMR, specifically on or after the first birthday of two doses of live measles vaccine separated by>28 days, one dose of mumps vaccine and at least one dose of live rubella vaccine. Serologic testing is not necessary for persons who have adequate immunization documentation.
- **III. HEPATITIS B POLICY**: Prior to entering undergraduate clinical nursing courses, students are required to present documentation of serologic evidence of immunity by positive titer. A declination form may be signed, indicating that the student is aware of the risks of not being vaccinated.

RATIONALE (HepB): The Center for Disease Control and Prevention (CDC) states "all health-care providers and students should receive hepatitis B vaccine according to current CDC recommendations (37,45,63). Vaccination (2-or 3-dose series) should be followed by assessment of hepatitis B surface antibody to determine vaccination immunogenicity and, if necessary, revaccination. Health-care providers who do not have protective concentration of anti-HBs (>10 mIU/mI) after revaccination (i.e., after receiving a total of 6 doses) should be tested for HBsAg and anti-HBc to determine their infection status (37)."

PROCEDURE (HepB):

- 1. Students are informed that documentation of HBV immunity is required prior to beginning clinical coursework.
- 2. Undergraduate students will be required to show proof of a positive titer or a signed declination prior to entering clinical coursework.
- 3. Students who do not respond to the primary vaccine series should complete a second three-dose vaccine series or be evaluated to determine if they are HBsAg-positive. Revaccinated persons must be retested at the completion of the second vaccine series. Persons who prove to be HBsAg-positive should be counseled accordingly. Primary non-responders to vaccination who are HBsAg-negative should be considered susceptible to HBV infection and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probable parenteral exposure to HBsAg-positive blood.
- **IV. VARICELLA:** All nursing students entering clinical nursing courses must provide evidence of adequate immunity to varicella by titer or documentation of two doses of varicella vaccine.

RATIONALE (Varicella): Varicella immunity is provided by previous infection or by vaccination. Vaccination is indicated for individuals who do not have a positive titer.

PROCEDURE (Varicella):

- 1. Students are required to provide documentation of adequate immunity through documentation of two doses of varicella vaccine or a positive varicella titer prior to entering clinical nursing courses.
- 2. If a student's varicella titer level is negative, the student must receive 2 doses of vaccine at an interval of 4-8 weeks between doses. Post vaccination titer after 2 doses of vaccine is not necessary or recommended.

V. TETANUS, DIPTHERIA, ACELLULAR PERTUSSIS (Tdap): All nursing students must provide evidence of Tdap vaccination per procedure.

RATIONALE (Tdap): Reduce the incidence of pertussis in the U.S. population especially infants who have the highest risk of complications.

PROCEDURE (Tdap): Prior to entering clinical nursing courses, students must receive a single dose of Tdap as soon as feasible if they have not previously received Tdap. Although Td booster doses are routinely recommended at an interval of 10 years, an interval as short as 2 years from the prior dose of Td is recommended for the Tdap dose among HCW. Tdap is not licensed for multiple administrations. After receipt of Tdap, HCW should receive Td or TT for booster immunization against tetanus and diphtheria according to previously published guidelines. (*MMWR*, December 15, 2006).

- VI. INFLUENZA: Annual influenza immunization of health care workers (HCWs) is recommended to prevent the transmission of the virus to persons at high risk for influenza-related complications and severe disease (MMWR 6/06)
- **VII. SMALLPOX POLICY:** In the event a student is required to receive smallpox vaccination, the Centers for Disease Control and Prevention guidelines for site care will be followed.

RATIONALE (Small Pox): After vaccination, this live virus is present at the vaccine site and can be spread through contact. To avoid this, the vaccination site must be cared for carefully until the scab that forms after vaccination falls off on its own (in 2 to 3 weeks).

PROCEDURE (Small Pox):

Until the scab falls off on its own, students will not be allowed to participate in clinical lab.

VIII. STANDARD PRECAUTION POLICY: Students are expected to follow Standard Precautions in order to prevent contact with HIV, HBV, and other blood-borne pathogens.

RATIONALE (Standard Precaution): Since medical history and physical examination cannot reliably identify all patients who are infective, all body fluids shall be considered potentially infectious materials. According to the concept of Standard Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, HCV and other blood-borne pathogens.

PROCEDURE (Standard Precaution):

- 1. "Occupational Exposure to Bloodborne Pathogens; Needle sticks and Other Sharps Injuries; Final Rule" Federal Register. January 18, 2011; Vol. 66, No. 12, pgs. 5318-5325 or most current guidelines will be followed as the reference sources.
- 2. Students will have access to the current guidelines at each campus.
- 3. Examples of general guidelines are listed. Students should also follow agency guidelines in clinical practice.
- 4. All students will attend an annual presentation on Standard Precautions or pass the Standard Precautions- Human Blood borne Pathogens (BBP) Training Exam provided by the University of Montana Institutional Biosafety Committee (IBC). University of Montana's Bloodborne Pathogens Exposure Control Plan can be found at: http://www.umt.edu/research/compliance/IBC/bbp.php.

GUIDELINES (Standard Precaution): All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood and other body fluids of any patient/client is anticipated.

Gloves: Gloves must be worn when it can be reasonably anticipated that there may be hand contact with blood, other potentially infectious materials, mucous membranes or non-intact skin. Gloves must be changed after contact with each patient.

Hand Washing: Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately when gloves are removed.

Gowns: Gowns or aprons must be worn when in direct contact with the patient if there is likelihood that your clothing may be soiled with blood or other potentially infectious materials.

Masks, Eye Protection and Face Shields: Masks, in combination with eye protection devices or chin length face shields will be worn whenever splashes, spray, spatter or droplets of blood or other potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated.

Sharps: Contaminated needles and other contaminated sharps (scalpels, broken glass, and wire) shall not be bent, broken, recapped or removed. Contaminated sharps are discarded immediately or as soon as feasible in closeable, puncture resistant, leak proof, labeled containers.

Specimens: Specimens of blood or other potentially infectious materials must be placed in a container which prevents leakage during collection, handling, processing, storage or transport.

Resuscitation Equipment: When in a clinical setting, the student should assure that a resuscitation bag, pocket mask and oral airway or other ventilation devices are readily available for emergency use. To minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.

Cleaning Spills of Blood and Other Body Fluids:

- 1. Wear gloves. Initially clean area using disposable towels.
- 2. Decontaminate area with an appropriate germicide or a 1:100 solution of household bleach. Cleaning equipment should be disposed of as infective waste.
- 3. Wash hands following removal of gloves.

Linens: Handle as little as possible with minimal agitation to prevent contamination to air or persons handling linen. All soiled linen should be bagged at location where it is used. Linen soiled with blood should be placed and transported in bags that prevent leakage.

Disposal of Hazardous Wastes: Materials from skills labs or clinical experiences involving contaminated materials (i.e. needles, lancets or other equipment contaminated with blood) need to be disposed of properly. Each campus should make arrangements to have these materials disposed of in accordance with CDC regulations.

Additional Precautions:

- 1. Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in areas where there is a reasonable likelihood of occupational exposure.
- Food and drink must not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present.
- Students/health care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.

Pregnant students/health care workers are not known to be at greater risk of contracting HIV infection than health care workers who are not pregnant; however, if a health care worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.

IX. HIV TESTING POLICY: Nursing students who believe they may be at risk for HIV antibody have an obligation to be tested. While the testing decision should be voluntary for the individual, there may be instances in which testing could be required. Education, training and confidentiality safeguards will be used to encourage those who believe they might be at risk to be tested. Nursing students are encouraged to be screened for HIV as part of their routine medical care as recommended by the Centers for Disease Control and Prevention.

RATIONALE (HIV): An HIV antibody positive nursing student may require modification/accommodation of clinical education to limit additional risks to the personal health of the student and to limit performance of "exposure prone" procedures with clients. (Position Statement, March, 1992, AACN; Position Statement on HIV infection and nursing students, February, 1992. ANA; MMWR 1989; 38 [S-6:15]; Americans with Disabilities Act (ADA) of 1990 [P.L. 101-336].)

PROCEDURE (HIV):

- 1. Inquiry into HIV status is not part of student application processes.
- 2. Qualified individuals cannot/will not be denied admission to nursing program on the basis of HIV status.
- 3. Nursing program informs students of potential infectious hazards inherent in nursing education programs including those that might pose additional risks to the personal health of HIV positive persons.
- 4. Students who are HIV positive or who have AIDS may not pose a health risk to other students in an academic or residential setting. In a college lab or clinical setting the CDC guidelines and Standard Precautions must be followed.
- 5. Clinical settings that pose additional risk to the personal health of HIV positive students should be identified, and such persons should be advised of these risks and urged to consult their health care provider to assess the significance of risks to their own health.
- 6. Students who know they are infected should be urged to voluntarily inform a designated official in the Nursing Program who will provide information and referral on health care and counseling and begin a process to assess the need for necessary accommodations prior to beginning clinical coursework. Such accommodations will be crafted on a "case by case" basis by a group designated for that purpose.
- 7. Any accommodations in clinical experience for HIV positive students should take into account the nature of the clinical activity, the technical expertise of the infected person, the risks posed

- by HIV carriage, functional disabilities and the transmissibility of simultaneously carried infectious agents.
- 8. HIV status records will be kept separately from academic files and will be accessible only on a need-to-know basis with the individual student's written consent. Regulations and statutes related to confidentiality apply to these records. Release of this data without authorization will be treated as a breach of confidentiality.

Policy Title: Pregnancy	Policy Number: S30
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

A student who is pregnant may continue in clinical practice as long as her health status is satisfactory and she is able to complete her clinical assignment without undue risk to herself or the fetus.

Rationale:

Women in developed countries are increasingly exposed to environmental, chemical and biological toxins, chemical compounds and pollutants that may have an adverse effect on a women's reproductive and general health and the health of their children and unborn children according to Davidson, London and Ladewig, (2008). Students at the Missoula College UM nursing program are requested to carefully consider exposure and to limit exposure to the following occupational hazards during all stages of pregnancy based on recommendations of Davidson, London and Ladewig (2008).

- Exposure to toxoplasmosis
- Exposure to rubella
- Exposure to cytomegalovirus
- Exposure to herpes simplex
- Exposure to hepatitis B, C
- Exposure to HIV
- Exposure to radioisotopes and X-Ray therapy

Procedure:

- 1. Students who are aware they are pregnant are asked to notify the Program Director or nursing faculty as soon as possible.
- 2. Students are asked to adhere to recommendations of limited exposure to the above listed concerns; however, no guarantees can be made.
- 3. Students may be asked to present documentation from health care provider allowing students to participate in clinical experiences if students and/or faculty are concerned regarding exposures or if students are required to be on bed rest.
- 4. Incompletes and withdrawals will only be considered based on program policies.

Reference:

Davidson, M., London, M., & Ladewig, P. (2008). Maternal-Newborn Nursing and Women's Health Across the Lifespan. (8th Ed.). Upper Saddle River: New Jersey. Prentice Hall.

Policy Title: Student Clinical Placement/Schedules	Policy Number: S31
Effective Date: 11/2007	Revised Date: 03/2013; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Clinical Placement of Students

Rationale:

Clinical experiences are intended to foster student growth in self-awareness, understanding of others, sensitivity to cultural, moral, ethical, and legal issues, the application of critical thinking/judgment, and the technical and interpersonal skills fundamental to the practice of nursing. At the Missoula College UM Nursing Program, the faculty emulates this nursing philosophy by assisting students in the clinical setting to advance in knowledge, responsibility and accountability through structured guidance in order to develop into increasingly competent, independent members of the health care team. The clinical setting promotes students to venture out of the classroom and laboratory setting and develop skills of nursing practice and socialization into the nursing profession.

Students are placed in clinical facilities that meet Missoula College criteria for students such as:

- Clinical facility and Missoula College UM have signed an agreed upon Affiliate Agreement
- The institutions/agencies are reasonably accessible geographically.
 - o Rural sites may be used for clinical rotations.
- The institutions/agencies hold the licenses required by the State of Montana and are fully accredited by the appropriate bodies.
- The nursing philosophy of the institution/agency is consistent with the philosophy of the Missoula College Nursing Programs.
- The administration and nursing staff are supportive of practical and registered nursing at the associate degree level and there is an interest and a willingness to cooperate in providing a climate for student learning.
- The nursing staff at agencies and clinical facilities is comprised of sufficient professional nurses who demonstrate quality nursing care and who serve as effective role models for student learning.
- The resources utilized for learning experiences include the quantity, quality, and variety of clients needed to meet the clinical objectives.
- The institution/agency cooperates with the Missoula College Nursing Programs to assure that faculty is oriented properly.

 Current policy/procedure manuals are available for use with access to information on computers within the facility.

Procedure: ASN-RN Student Clinical Placement

- Students in the first semester are expected to use critical judgment and assessment skills in the
 Foundations Lab and Pharmacology Lab to meet program outcomes of application and ability to
 demonstrate safe and competent care. Students unable to perform at a safe level in the skills
 lab will have a plan of action initiated by the lab instructor with input from the student to
 promote student success.
- 2. In the second and third semesters, students are expected to advance nursing skills, critical judgment and professional behaviors consistent with the novice professional nurse under the supervision of the clinical instructor, clinical preceptor, or staff nurse. Ratios of student to faculty do not exceed 10:1.
- Students in the fourth semester will be placed in a preceptor learning environment in Managing Client Care Clinical. Students enrolled in this course will be paired with a Charge Nurse or floor nurse to learn the basic principles related to the supervision of nursing practice and management of resources.
- 4. Students in each semester are expected to achieve program outcomes and performance criteria consistent with the objectives outlined by the course instructor on the student clinical evaluation form. All criteria on the student clinical evaluation form need to be met at the "Developing" or "Satisfactory" level by the end of each clinical rotation. Any student performing at the "Needs Improvement" or "Unsatisfactory" level at the end of the clinical rotation will receive a failing grade in that clinical course.
- 5. Students at the conclusion of the program are expected to achieve levels of behaviors and skills consistent with analyzing data, integrating nursing practice in the clinical setting, and setting priorities to formulate and provide effective nursing care at the level of the advance beginner professional nurse.

Policy Title: Acceptable Clinical Performance in	Policy Number: S32
Nursing	
Effective Date: 11/2007	Revised Date: 03/2013; 12/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Acceptable Clinical Performance in Nursing

Rationale:

Unsatisfactory completion of clinical in nursing courses indicates that academic performance is not at the level required for successful completion of course objectives and learning activities. Additionally, clinical learning opportunities must be allocated to students who successfully demonstrate satisfactory achievement of course objectives and learning activities since clinical resources are finite in that:

- the number of opportunities for student experience in the clinical setting are controlled to maintain quality patient care and
- > student/faculty ratios are regulated to provide adequate supervision of all students.

Clinical are those courses in which the majority of the experience requires direct patient/client care or interaction.

Procedure:

- 1. A non-passing grade in a clinical course prohibits continuation in the nursing curriculum.
- 2. Unsatisfactory completion of the course results in removal from the nursing program.
 - a. Students can then reapply at a later time or
 - b. Depending on ability of class size and other class considerations to accommodate may be able to retake next semester per faculty and Nursing Program Director discretion.
- 3. No nursing program course may be repeated more than twice. If a course is not completed with a passing grade with the second attempt, the student is no longer eligible to reapply to the nursing program.
- 4. Exceptions can be made for emergent circumstances (which subsequently resolve) as determined by the Program Director and faculty.
- 5. Reasons for unsatisfactory completion grade in clinical results from, but not limited to,
 - Lack of performance with HIPAA & Patient Confidentiality regulations
 - Patient safety
 - Unacceptable professional behavior
 - Request of the clinical facility

Policy Title: Student Refusal of Clinical	Policy Number: S33
Assignment	
Effective Date: 04/2008	Revised Date: 03/2013; 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Student Refusal of Clinical Assignment - A student is expected to provide nursing care to any assigned client for whom the student has been taught the content and skills to provide safe care. If a student refuses to care for such an assigned client, the following procedure will be used.

Rationale:

The primary aim of the Nursing Program is the education of persons for professional nursing practice. Students must know and follow established guidelines for professional practice consistent with the American Nurses' Association Code of Ethics (2015), and provide care for all patients assigned unless previous arrangements made with the nursing faculty.

It is expected that in the course of clinical teaching, negotiations about assignments to meet course objectives will typically occur when there are special circumstances such as pregnancy, student health problems, etc. The following procedure will be used in situations which are exceptions to the above when an adequately prepared student refuses to provide nursing care to an assigned client.

Procedure:

The following procedure applies to refusals over the entire program, not just in a single clinical course.

- 1. The first time a student refuses to provide nursing care to a client:
 - a) She/he will have a conference with the faculty making the assignment. Discussion will include the reasons for refusal and a plan to deal with similar patient assignments in the future. The discussion will include current clinical information and support to the student if such, depending on the situation, might dispel fears or problems that the student has about the assignment. The discussion will include information about Codes of Ethics, the NLN Essentials Document and the role of the professional nursing student.
 - b) If possible, a comparable assignment to meet course objectives will be given for that clinical day. A note summarizing the refusal and conference will be placed in the student's academic record by course instructor. The Program Director will be informed of the refusal.
- 2. The second time in the program that such a refusal occurs, the student will:
 - a) Have a conference with the faculty member.

- b) Be sent home with a clinical absence for the day and
- c) Be asked to schedule a conference with the Program Director and the teacher making the assignment. The discussion will include information as above (1.a). For those unable to resolve the reasons for refusal, reevaluation of career objectives should be part of the discussion.
- d) A note summarizing the refusal and conference will be placed in the student' academic record.
- 3. The third time in the program that a nursing student refuses to provide nursing care to an assigned client:
 - The faculty members and Program Director, in consultation with the Health Professions Chair and/or Associate Dean, may remove the student from all clinical settings.

Policy Title: Removal of Students from Clinical	Policy Number: \$34
Settings (Denial of Access to Clients)	
Effective Date: 04/2008	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Removal of Students from Clinical Settings (Denial of Access to Clients)

Rationale:

A faculty member has the authority to remove a student from the clinical setting when a student fails to conform to reasonable standards of performance or behavior or when, in the judgment of the faculty member, reasonable supervision is inadequate to insure patient welfare. Reasonable standards of performance are defined in the Student Handbook and in the Student Conduct Code http://www.umt.edu/vpsa/policies/student_conduct.php Removal of a student from a clinical setting is a very serious matter. Each student must be provided an opportunity to achieve clinical course objectives and given an opportunity to learn from an error unless the behavior is so egregious that a patient may be at risk even with clinical supervision by the faculty member. While the decision to remove a student for a single assignment period can be made independently before notifying the Nursing Program Director, decisions to remove a student for the remainder of the course or from all clinical settings are made in consultation with the Program Director, the Health Professions Chair and /or the Associate Dean.

Procedure:

A student may be denied access to patients in the following circumstances. The procedure differs in each instance. A procedure for each type of denial of access to patients is given below.

- I. A single clinical assignment period
- II. The remainder of the course;
- III. All current and remaining clinical courses.
- I. Procedure for Removing a Student from the Clinical Setting or Denial of Access to Patients for a Single Assignment Period.
 - A. When a faculty member determines that a student cannot proceed safely in the clinical setting during a specific clinical assignment period, the faculty member does the following:
 - Informs the student of the reason the student must leave (e.g., not prepared to provide safe care, symptoms of an illness that place the client at risk, evidence of use of and/or impairment from drugs/alcohol, unethical conduct, etc.);
 - 2. Ensures that the student safely leaves the clinical area (e.g. by calling agency security; arranging for the student to be transported home safely by a cab or a family member);

- 3. Informs the Program Director, if necessary, verbally and in writing (student contract), of the above action; and
- 4. Provides follow-up guidance to the student.
- II. Procedure for Removing a Student from the Clinical Setting or Denial of Access to Patients for the Remainder of a Course.
 - A. When a faculty member determines, in consultation with the Program Director, that a student may need to be removed from the clinical setting for the <u>remainder of that course</u>, the faculty member does the following:
 - 1. Reviews the recorded documentation of the relevant incident(s),
 - 2. Informs the student in a conference of the observed behaviors and of the faculty member's concerns about the student's well-being and/or client safety, and
 - 3. Discusses with the Program Director the observed behaviors and/or learning problems identified, the guidance/teaching strategies employed (and their outcomes), and the rationale for a recommendation to remove the student from the clinical setting.
 - B. The Program Director examines the situation and discusses it with the Health Professions Chairs and/or Associate Dean.
 - 1. The faculty member meets with the Program Director and provides a written decision with rationale and conditions for reinstatement in the clinical setting for the specific course (if appropriate).
 - The Program Director may need to talk with faculty members teaching concurrent clinical courses and with the student before coming to an understanding of the situation.
 - 3. The Program Director makes a determination of whether or not the faculty member's rationale for a recommendation to remove the student from the clinical setting is soundly based.
 - 4. The Program Director meets with the faculty member and discusses the recommendation of the faculty member as a result of the fact finding.
 - 5. The faculty member then informs the student of the decision, rationale and conditions in a student conference.
 - C. The student may continue non-clinical work in the course (attend class, etc.) but will receive a non-passing grade for the course.
 - D. Coursework is unaffected in other courses in which the student is enrolled.

IV. Procedure for Removing a Student from All Clinical Settings or Denial of Access to Patients.

When a faculty member in consultation with a Program Director, determines that a student may need to be removed from all clinical settings because of extremely egregious unethical or unsafe conduct in a clinical setting, the following occurs:

- A. The Program Director and faculty member reviews her/his recorded documentation of the relevant incident(s).
- B. The Program Director and faculty member informs the student in a student conference of the observed behaviors and of the concerns about client safety, ethical issues, student wellbeing, etc.
- C. Discussion occurs between the Program Director and involved faculty member(s) regarding the observed behaviors, the problems identified, the guidance/teaching strategies employed (and their outcomes), and the rationale for a recommendation to remove the student from all clinical settings.
- D. The Program Director examines the situation and discusses it with the Health Professions Chair and/or Associate Dean.
 - 1. The Program Director may need to talk with faculty members teaching concurrent clinical courses and/or those who have previously taught the student clinically. The Program Director may also talk with the student in coming to an understanding of the situation.
 - 2. The Program Director makes a determination of whether or not the rationale for recommendation to remove the student from all clinical settings is soundly based.
 - 3. The Program Director meets with the involved faculty member/s and discusses the recommendation.
 - 4. If the final decision of the Program Director is to remove the student from all clinical settings, the Program Director so informs the Health Professions Chair and/or Associate Dean and provides a written decision with rationale and with suggestions for assisting the student. After discussion with the Health Professions Chair and/or Associate Dean the Program Director informs the student of the decision, rationale, and suggestions for assistance.
 - 5. The Program Director informs the student, in writing, of the consequences of the removal from all clinical settings, (e.g., removal from the Nursing program.)
 - 6. The student may complete remaining non-clinical coursework in the semester of removal if she/he wishes.

Policy Title: At-Risk Student	Policy Number: S35
Effective Date: 07/2023	Revised Date: 3/2024
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Spring 2024) Level II: Administrative Council (Spring 2024)

Policy Description:

Students who are at risk of failing a course or courses in the nursing program due to academic, behavioral and/or personal issues will be identified as soon as possible to allow for remediation. If a student is determined to be at risk, a plan for remediation is initiated. Remediation may be considered when a nursing student:

- Does not meet the Student Learning Outcomes (SLOs) as identified on clinical and/or lecture course outcomes.
- Needs additional time and/or support before completing a course.
- Does not demonstrate the skills and/or personal attributes necessary to succeed as a nurse.

Rationale:

Nursing students must develop professional, ethical and behavioral skills to successfully practice nursing. Part of the faculty's job is to help guide and mentor for the development of these skills. Ultimately, it is up to the student to follow through with faculty recommendations, remediation plans, behavioral contracts and referrals to support services. Our At-Risk Student Policy allows the student to participate in the Remediation and Intervention processes.

Procedure:

I An At-Risk Student will be identified and asked to meet with faculty.

II A written Remediation Plan will be developed, and a copy will be placed in the student's file.

III If Remediation is unsuccessful, the student may fail the course and/or the nursing program.

I Definitions of an At-Risk Student:

- 1) A student who has missed deadlines for required documentation (TB, CPR, vaccines, etc.), or other required orientation materials.
- 2) A student with excessive absences (see Professionalism Rubric) in at least one nursing course per semester.
- 3) A student who is repeating a nursing course or who has been reinstated into the nursing program for any reason.
- 4) A student who is borderline failing (<80%) in one or more nursing courses.
- 5) A student who has been identified by a clinical instructor as unsafe or unprofessional.

- 6) A student who has demonstrated at least one unprofessional and/or unethical behavior while in the nursing program. This applies to the classroom, lab, and clinical settings.
- 7) A student with communication difficulties, whether due to a language barrier, lack of communication with instructors, a lack of socialization/interaction with peers, poor communication with clinical site staff, and/or a lack of engagement in the educational process.
- 8) A student who has extenuating circumstances outside of the nursing program that cause additional stress, such as severe financial stressors, prolonged illness or other health issues, legal issues, death of a loved one, work schedule conflicts, etc.
- 9) A student whose performance and/or behaviors have caused other faculty and/or students to come forward and report their concerns.

II Develop a written Remediation Plan

- Once an at-risk student has been identified, the course instructor will complete the "Nursing Student Remediation Plan" document and will review it with the student. See Appendix A
- 2) Since knowledge, skills, abilities, and attitudes are learned over time and must be reinforced, at the end of each semester, faculty who have identified an at-risk student must present their documentation (a copy of their completed "Nursing Student Remediation Plan", and/or "Warning to the Student of Potential Failure", and/or any other relevant documentation) to the faculty who will be teaching that student the following semester. This will ensure continuity for the student and the faculty.
- 3) Students who have displayed unprofessional, unethical and/or behaviors that are inappropriate will receive a remediation plan that includes an explanation of the behaviors and may be required to complete additional assignments and/or be required to sign a contract that will extend the duration of the nursing program. Students will be warned in writing if further behaviors could result in dismissal from the program.
- 4) Students who have verbalized and/or appear to be struggling with personal issues will be provided with resources to improve their chances of success. These resources may include a referral to the Curry Health Center Counseling services, information regarding local support groups, a list of outpatient mental health providers, education about scholarships and opportunities, crisis hotline phone number, Office for Disability Equity, etc.

III If Remediation is unsuccessful, the student may fail the course and/or the nursing program.

Policy Title: Correlation of Classroom and Clinical	Policy Number: S36
Experiences	
Effective Date: 04/2008	Revised Date: 03/2013, 12/2015; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Fall 2013; Summer 2017)

Policy Description:

Correlation of Classroom and Clinical Experiences – Courses with both didactic and clinical experiences REPEALED

Policy Title: Student Preceptorship	Policy Number: S37
Effective Date: 11/2007	Revised Date: 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Student Preceptorship - Use of clinical preceptors with students may be an appropriate option for courses within the Nursing program curriculum. Use of clinical preceptors provides a consistent one-to-one relationship which presents an effective environment for learning. The preceptorship experience needs to reflect a collaborative process involving the faculty, the manager of the facility/unit, preceptor and the student. The faculty is responsible for organizing and evaluating the preceptorship experience, and for selection of preceptors. Preceptors are defined and guidelines for selection are provided in the State Board of Nursing Rules and Regulations Section 24.159.665 Clinical Preceptors. The preceptor is responsible for providing a supportive learning environment for the student. The student is responsible for knowing and functioning within the appropriate RN Scope of Practice, and for responsible regular communication with both faculty and preceptor.

Rationale:

This policy is to enumerate responsibilities of faculty, preceptors, and student when previously learned clinical nursing skills are practiced by the student. It is to assist in the clinical preceptorship experience being a good learning experience for the student and function smoothly for the preceptor.

Procedure:

- I. Faculty Roles and Responsibilities:
- A. Selection of preceptor is the faculty responsibility and follows the guidelines outlined below:
 - Preceptors for Missoula College UM nursing clinical courses must be carefully selected, screened, and approved in a systematic manner in order to assure meeting the criteria established by the College of Nursing faculty and to be consistent with the Montana Board of Nursing Rules and Regulations Section 24.159.665 Clinical Preceptors.
 - 2. Process of Selection
 - a. Agency contact is established: course description and objectives are discussed with appropriate agency representative and/or the clinical preceptor
 - 3. Criteria for Selection
 - a. Completion of a nursing degree from an accredited RN program
 - b. Have a minimum of 1 year experience and be considered expert nurses and good role models by peers and supervisor
 - c. Provide experiences deemed appropriate for the student and course level
 - d. Agree to act in this role
 - e. Agree to be involved in evaluation
 - f. Possess organizational knowledge (i.e. agency policy and procedure)

- g. Identified an interest in teaching
- h. Demonstrated effective communication skills
- B. Preparation of the preceptor is the faculty responsibility and follows the guidelines outlined below:
 - 1. Prepare the preceptor by providing an orientation manual to the Preceptorship program. To explain the preceptor role, student expectations, and method of providing feedback on student performance.
 - 2. Guide the preceptor in planning, implementing, and evaluating student learning and performance.
 - 3. Perform on-site visits during the student clinical hours to evaluate learning experiences and performance.
 - 4. Be available to the preceptor and student at all times during and will maintain phone contact if not available in person.
 - 5. Do a final evaluation of each student with input from the preceptor.
 - 6. When utilizing preceptors, 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;
 - b. ensuring appropriate preceptor qualifications and scope of responsibility;
 - c. ensuring that the preceptor demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student; and
 - d. providing the lecture and laboratory portions of a course.
 - e. In registered nursing education programs, preceptors may assist with clinical teaching provided the preceptor:
 - i. holds a current unencumbered license as a registered nurse in Montana; and
 - ii. works with students on a one-to-one basis in the clinical setting.
 - 7. Will conduct program evaluations by meeting with the preceptors or providing written evaluations to assess the success and/or needs of the program.
- II. Preceptor Roles and Responsibilities:
 - A. The Missoula College nursing faculty will contact the preceptor for an orientation and review of the preceptorship expectations and objectives.
 - B. First-time preceptors shall complete the new preceptor orientation provided by the Missoula College nursing faculty.
 - C. The preceptor is a currently licensed RN in Montana and is employed as an RN in the clinical agency in which the preceptor experience is to occur. Minimum educational preparation is an associate degree in nursing for an RN preceptor. The preceptor is expected to have a minimum of one year of clinical experience, and has demonstrated competencies related to the area of assigned clinical teaching responsibilities as documented by the preceptor's supervisor.
 - D. The preceptor will be assigned to no more than one student for any preceptor experience. Faculty must be available in person or by telecommunication for consultation with the preceptor and/or the student.
 - E. The preceptor will have a copy of the preceptor orientation manual with written descriptions of preceptor, student and faculty responsibilities.
 - 1. Preceptors will function according to guidelines/criteria developed by the course faculty as long as they are consistent with the guidelines set forth in the preceptor orientation manual.

- 2. The preceptor will be physically present in the agency and available to the student at all times during the prescribed clinical assignment.
- 3. The preceptor will provide a copy of his/her work schedule to the student.
- 4. The preceptor will serve as a role model, mentor, and resource person in teaching and guiding one nursing student at a time.
- 5. The preceptor will provide a learning environment of support, trust and encouragement for the student
- 6. The preceptor will provide feedback on the student's performance in the clinical setting, using the tool provided at the end of the preceptorship.
- 7. The preceptor will meet with the Missoula College UM nursing faculty during scheduled site visits and PRN.
- 8. The preceptor will arrange with the student and facility for a substitute nurse preceptor in the event of absence.
- 9. Preceptor evaluation will be completed by the students. Course faculty member will review all preceptor evaluations and determine satisfactory and unsatisfactory experiences, make decisions regarding reappointment status, and provide appropriate feedback to preceptors.

III. Student Roles and Responsibilities:

- A. The student will complete a student orientation program consisting of reading and fully understanding the Preceptorship Manual.
- B. The student will identify and design specific clinical objectives completing the Clinical Learning Contract and providing the preceptor and instructor with a copy.
- C. The student will demonstrate integration of classroom evidenced-based theory from course description and objectives.
- D. The student will share personal and professional learning objectives with the preceptor and revise them as needed.
- E. The student will accept responsibility for own learning in the health care agency.
- F. The student will demonstrate flexibility, willingness, and self-direction throughout the learning process.
- G. The student will wear appropriate professional attire as outlined in the Nursing Program and health care agency policies.
- H. The student will be on time for the learning experience and complete the required number of clinical hours.
- I. The student will discuss own strengths and areas for improvement with the nursing faculty and preceptor.
- J. The student will assume increasing responsibility for client care with complex problems working collaboratively and/or under the supervision of the preceptor.
- K. The student will seek assistance from the nursing faculty and/or preceptor when appropriate.

Policy Title: Management of Exposure to Blood	Policy Number: S38
&/or Infectious Body Fluids	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

MANAGEMENT OF EXPOSURE COMMUNICABLE DISEASE/INFECTION CONTROL POLICY

Students are expected to use sound judgment with regard to preventing communicable disease in the classroom, lab or clinical setting. If an exposure does occur, students are expected to immediately report the exposure to an instructor. The following are guidelines to be followed if an exposure occurs.

If students have any questions or concerns regarding clinical attendance and communicable disease or infection control, please contact your instructor.

Please refer to the webpage for Center for Disease Control at http://www.cdc.gov/ncidod/dhqp/pdf/guidelines/Isolation2007 appendixA.pdf

PROCEDURE FOR EXPOSURES

If a student has an exposure (i.e., eye, mouth, mucous membrane, non-intact skin, or parenteral contact with blood or potentially infectious materials) in a setting sponsored by Missoula College UM, the student should report to Curry Health Center for post exposure testing. Testing and counseling shall be done at the Curry Health Center whenever possible. Records of the exposure and follow-up shall be kept in the student's file in the Environmental Health and Occupational Safety Office.

Procedure for students with an exposure:

- 1. Immediately inform Missoula College clinical instructor
- 2. Inform the primary nurse preceptor
- 3. Report to Curry Health Center for evaluation and testing
- 4. If Curry Health Center is closed, then follow the clinical site policy and procedure
- 5. Expenditures occurred due to an exposure are the responsibility of the student

Policy Title: Practice Intravenous (IV) Starts,	Policy Number: S39
Intramuscular (IM) and Subcutaneous (SQ)	
Needle Injections on Classmates in Lab	
Effective Date: 12/2015	Revised Date: 03/2013; 07/2017
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

PRACTICE IV STARTS AND IM/SQ NEEDLE STICKS IN NURSING LAB POLICY

Rationale:

Nursing students need to practice IV starts and IM/SQ needle injections in the safest manner possible. Students first practice these skills on simulation arms. Students demonstrate IV tubing connection, bag spiking, dressing and extension set as well as successful IV insertion and discontinuation. Missoula College Nursing Lab provides simulation arms and all IV/IM/SQ supplies. Faculty provide oversight for practice IV starts and IM/SQ needle injections. As nursing students progress in the nursing program, they gain additional experience in both lab and clinical.

- Students are allowed to practice dry (no saline) IV starts, IM, and SQ needle injections on fellow students with the consent of the student and the instructor. No student under the age of 18 can be used for a practice IV start or needle injection without the consent of their parent. Faculty or lab coordinator must be present for oversight. The IV will be discontinued immediately following successful insertion, attachment of extension or hub, stabilization and application of dressing.
- 2. As students progress in the nursing program, they will gain additional practice in clinical experiences.

Policy Title: Use of Social Media	Policy Number: S40
Effective Date: 10/2019	Revised Date:
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Spring 2024)

Policy Description:

USE OF SOCIAL MEDIA POLICY

Rationale:

The Missoula College nursing program recognizes that nurses and nursing students have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.

We have adapted the American Nurses Association (ANA) Principles for Social Networking as Rule for the Missoula College nursing program, which includes the following:

- 1. Nursing students must not transmit or place online individually identifiable student, faculty, college, or staff information.
- 2. Nursing students must observe ethically prescribed professional student-client and student-faculty boundaries.
- 3. Nursing students must understand that clients, fellow students, institutions, employers, and community members may view postings.
- 4. Nursing students must take advantage of privacy settings and seek to separate personal and professional information online.
- 5. Nursing students must bring content that could harm a client, fellow student, faculty, staff or the college's privacy, rights, or welfare to the attention of appropriate authorities.
- 6. Nursing students should participate in developing institutional policies governing online conduct.

Procedure:

Breach of this confidentiality will result in immediate dismissal from assigned clinical area and completion of a Student Mutual Contract. Repeat offenses may result in probation, suspension, or dismissal from the program.

References:

American Nurses Association, (2011, September). <u>Principles for social networking and the nurse</u>. Silver Spring, MD: Author (www.nursingworld.org/principles).

National Council of State Boards of Nursing, (2011, August). White Paper: A nurse's guide to the use of social media. Chicago, IL: Author (www.ncsbn.org/Social Media.pdf

Policy Title: COVID-19 Testing; Participation in	Policy Number: S41
Classroom, Labs and Clinicals	
Effective Date: 10/2020	Revised Date: 02/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) **Level II:** Administrative Council (Spring 2024)

Policy Description:

COVID-19 Testing; Participation in Classroom, Labs and Clinicals
Policy identifies and explains the CDC, Missoula City-County Health Department, and University of
Montana protocols for COVID-19 testing and quarantining/isolating.

Rationale:

COVID-19 Policies and Recommendations from the CDC change frequently. The Missoula College Nursing Program will follow current guidelines as recommended from the CDC, The Missoula City-County Health Department, and the University of Montana. The Nursing Program will also continue to follow guidelines as specified by our clinical sites.

Centers for Disease Control and Prevention Website

https://www.cdc.gov/coronavirus/2019-ncov/index.html

Missoula City-County Health Department Website

https://www.missoulacounty.us/government/health/health-department

University of Montana Coronavirus Information Website

https://www.umt.edu/coronavirus/

FACULTY POLICIES AND PROCEDURES

Policy Title: Decision Making Structure Missoula College	Policy Number: Nursing F1
UM Nursing Program	
Effective Date: 11/07	Revised Date: 03/2013; 09/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

STATEMENT OF PURPOSE FOR DECISION MAKING STANDARDS

- 1. Decisions that impact the Nursing Department are made at four levels:
 - The Dean and Director of Academic Affairs
 - Health Professions Department Chair
 - Nursing Department Director
 - Faculty Meeting
- 2. Lines of Communication
 - All strategic and problem concerns are sent first to:
 - 1. Program Director
 - 2. Health Department Chair
 - 3. Associate Dean
 - 4. Dean

Rationale:

Outlining a process for decision making ensures that appropriate input is solicited from individual(s) and/or group(s) for making decisions. Outlining a process for communication ensures organization and appropriate communication among faculty, staff, and administration.

- Decisions will be made first by consensus within the Nursing Program. If consensus cannot be reached then the Health Professions Department Chair and Director of Academic Affairs will become involved.
- 2. Faculty of the Nursing Program are accountable to:
 - Each other through mutual responsibilities and commitments
 - First the Program Director
 - Second the Department Chair
 - o Third the Associate Dean
 - The College Organizational Chart of all faculty and staff.
- 3. As the final arbiter of the school, all reporting lines lead to the Dean.
- 4. Communication and decisions are documented in the minutes of the Nursing Faculty Meetings and distributed to the nursing faculty and administration for final approval if indicated.
- 5. Missoula College UM decisions are communicated through the Chairs to the faculty. Because Chairs have the primary responsibility to hold faculty accountable for new information or changes, they will make it clear that the information has been vetted to the faculty at Health

- Professions Department meetings and from that point on the faculty will be held accountable to those decisions.
- 6. The Associate Dean and Dean invite all faculty to meet with them as needed. The Associate Dean and Dean are sensitive to respond to faculty needs within the decision-making structure of the College to the greatest extent possible.

Policy Title: Format for Documenting Policies and	Policy Number: Nursing F2
Procedures	
Effective Date: 11/07	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

FORMAT FOR DOCUMENTING POLICIES AND PROCEDURES

1) All policies are to be written in a consistent, standard format and located in the same location.

Rationale:

A consistent standard policy format ensures the inclusion of important elements and helps facilitate use and readability. Each policy documentation will include the:

- Title
- Policy description
- Rationale for creating the policy
- Procedure for implementation
- Documentation of appropriate review and approval

- 1) Every policy is to be written using the same format described below:
 - The header bolded and centered at the top of the page
 The **Description, Rationale, and Procedure** bolded and text indented as noted in this policy outline
 - Documentation of the policy approval/review and dates.

Policy Title: Process for Formulation and Review	Policy Number: Nursing F3
(Revision/Retention/Deletion), Approval, and	
Distribution of Nursing Program Policy	
Effective Date: 11/07	Revised Date: 03/2013; 09/2022
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

This policy provides a consistent process for formulating, reviewing (revising/retaining/deleting) and distributing policy specific to the Missoula College Nursing Program.

Rationale:

Outlining a process for policy formulation, review (revision/retention/deletion) and distribution assures that appropriate input is solicited from individuals and/or groups for all new and existing policies. Regular review of policies assures policy accuracy and relevance. Outlining a process for policy distribution facilitates communication among administration, faculty, staff, students and the public. Posting policies on the college web site provides for easy, up to date access.

Procedure:

- 1. Formulation and Review
 - a. Policy may be initiated by administration, Health Professions Chair, Nursing Program Director, faculty and staff within appropriate Nursing Program Committees.
 - b. The formulation, review, revision and retention and deletion of all Nursing Program Policies originate from the nursing faculty through Nursing Program Committees. The Health Professions Chair, Associate Dean and Dean may be consulted at any time.
 - c. The Nursing Program Director is responsible for determining what additional input is appropriate to the policy work and communicating with faculty at faculty meetings, as appropriate, any changes in policy. Faculty has two weeks to respond to communication regarding new/revised policy.
 - d. All Missoula College Nursing Program Policies shall be submitted in a standardized format to the appropriate official(s).
 - e. All Nursing Program Policies shall be reviewed for revision, retention, or deletion a minimum of every five (5) years depending on program or college changes.
 - f. The Nursing Program Director is responsible for assuring timely review of policies.
 - g. Faculty will review and approve any new policies, or revisions to existing policies
 - h. Revised or new policies will be recorded in the faculty minutes.

2. Approval

a. All Missoula College Nursing Program Policies shall be submitted to the Program Director, Health Department Chair, and finally the Associate Dean for review and approval. Each level is responsible for communicating back to the Program Director recommendations for revisions or approval. The Program Director is responsible to facilitate the approval process, communicating recommendations for revision back to nursing faculty. This process continues until the policy is approved by all parties and/or legal counsel.

3. Distribution

a. All approved Nursing Program Policies shall be made accessible on the Missoula College Nursing Program Website. Hard copies shall be located in the Nursing Program Director's Office.

Policy Title: Orientation of New Nursing Faculty	Policy Number: Nursing F4
Effective Date: 10/07	Revised Date: 08/2015; 09/2022
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

ORIENTATION OF NEW NURSING FACULTY

- Nursing Director will assume responsibility for coordinating and evaluating the orientation of new faculty to the Missoula College UM Nursing Program whether they are hired through the search process or as a campus hire. The procedure for orientation will be reviewed annually by the Nursing Program.
- 2. Each new faculty member will be assigned a faculty mentor that will assist them through the orientation process and the first year of teaching.
- 3. Each new faculty member will be given:
 - a. New faculty packet from the University of Montana
 - b. New faculty information from the Missoula College UM Nursing Program

Rationale:

This policy was developed by the Nursing Program to insure adequate orientation of new faculty.

- 1. Orientation procedures: When the new faculty member arrives on campus, the Nursing Program Director (or delegate) will:
 - a. Direct to the Director of Operations and Finance:
 - . personnel forms & paperwork
 - Campus bus service
 - Assign office space
 - Phone system, computer system, mail boxes
 - b. Introduce to Missoula College UM nursing and other faculty
 - c. Orient to the Missoula College UM and UM campuses
 - How to access and review the Missoula College UM New Nursing Faculty Handbook
 - How to access and review the Missoula College UM Nursing Student Handbook
 - Employment benefits information and personnel forms
 - Contract information

- 2. Orient to faculty/educator role:
 - assign a nursing faculty mentor
 - curriculum overview
 - assist in developing goals and objectives
 - discuss role boundaries (faculty/student relationships)
 - discuss expectations regarding office hours and meeting attendance
 - discuss sick leave guidelines, including clinical coverage
 - discuss committee participation
 - discuss advising role
 - inform about resources available for preparing instructional materials,
 e.g., slides, power point, previous syllabi, etc.
 - identify clinical agencies and resource people. Review agency Affiliate Agreements
 - accessing library and other resources from all campuses
 - course textbooks
 - computer services information & education for Canvas and Cyberbear
 - Missoula College UM suggested syllabus template
 - parking regulation information
- 3. Provide the Faculty Handbook
 - Mission, Role and Scope Statement
 - ASN plan of study
 - Faculty organizational structure
 - Faculty governance
 - Missoula College UM administration chart
 - Bylaws
 - Staff resources available from U of M campus
 - Strategic Plan
 - Library Databases and Utilization
 - Faculty Advisor Role
 - Policies
- 4. Nursing Director will work with the Health Professions Department Chair and Director of Academic Affairs to plan and implement the General New Faculty Introduction and Orientation on the U of M campus.
- 5. Arrange for evaluation with new faculty at the end of the orientation to identify further orientation needs and suggestions for changes in orientation procedures.
- 6. Review and, if indicated, change procedure for orientation.

Policy Title: Faculty Vitae	Policy Number: F5
Effective Date: 11/2007	Revised Date: 11/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Faculty Vitae

Rationale:

The faculty vitae serve as a standardized current faculty data base for Missoula College UM Nursing program, Administrators and committees to prepare timely, accurate reports, summaries, etc., regarding faculty professional updates and keeping personnel records current.

- 1. Each faculty member will present a curriculum vitae (C.V.) at the time of hire and revise every two years when MT BON Licenses are due for renewal.
- 2. The initial C.V. at time of hire is filed with the Missoula Campus HR and the Nursing Program Director.
- 3. The revised C.V. is submitted to the Nursing Program Director when MT BON Licenses are due for renewal.
- 4. Updated C.V.s are filed in the nursing faculty personnel file in Box for preparation of reports, accreditation self-study, etc.

Policy Title: Faculty Professional Development	Policy Number: F6
Effective Date: 11/2007	Revised Date: 03/2013; 09/2023
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Faculty Professional Development - The Missoula College UM Nursing Program supports individual and collective professional development activities for nursing faculty who must maintain current knowledge and expertise related to curriculum development, teaching, evaluation, nursing and health care. It is the goal that each faculty member will attend a professional development at least every other year.

Rationale:

The mission, role and scope of the Nursing Program advocates the professional development of its faculty. Faculty Development is defined as an ongoing process which seeks to facilitate the growth of faculty in curriculum development, teaching, evaluation, and expertise in the practice of nursing. Faculty Development is meant to stimulate professional growth of the individual and the collective faculty. The primary goals are to identify and respond to faculty needs which are relevant to the mission, and philosophy and teaching assignments.

Procedure:

- 1. Faculty identify professional goals annually.
- 2. Faculty develop strategies for achievement of identified goals.
 - a. Identify pertinent faculty development activities that will increase individual growth.
 - b. Assess relevance of identified activities to the mission, role, scope and selected goals of the Nursing Program.
 - c. Assess feasibility of engaging in the identified activities.
- Apply to the Faculty Development committee for funding to support activities
 - a. Faculty Development committee reviews faculty applications for funding and makes recommendations approving or denying pending resources available
- 4. Once approved by the Faculty Development Committee the faculty supplies the Administrative Associate with information, who will then make all arrangements

As of Fall 2023, there are no professional development funds available. The Nursing Program Director will assist the faculty in finding funding for professional development endeavors.

Policy Title: Evaluation of Faculty by Students	Policy Number: F7
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013 Summer 2017, Spring 2024)

Policy Description:

Evaluation of Faculty by Students - Student evaluations (per university approved forms) will be utilized as one of the measurements of faculty performance. All faculty who teach didactics, lab or clinical will participate in the evaluation process by students.

Rationale:

Many methods of evaluation may be utilized as part of ongoing efforts to achieve and maintain teaching excellence. One method of evaluating teaching performance is through utilization of university approved standardized forms, distributed to students in a consistent manner at the end of each semester.

Procedure:

At the completion of each semester the following student evaluation process occurs:

- 1. Students will receive an online student evaluation form from Moodle prior to the end of each course.
- 2. There are separate evaluation forms for didactic, lab and clinical.
- 3. If a faculty teaches a combination of didactic, lab and/or clinical, all are evaluated.
- 4. Faculty member and Health Professions Chair will be given a copy of the compiled outcome report.
- 5. An electronic compilation of the evaluations is sent to the Nursing Program Director and the faculty from LMS Administrator, School of Extended and Lifelong Learning.
- 6. Faculty members must include a summary of the student evaluations in the annual IPR.
- 7. The student evaluation will be used by the Program Director in the annual evaluation.

Policy Title: Evaluation of Nursing Faculty	Policy Number: F8
Effective Date: 10.25.07	Revised Date: 03/2013
Initiating Department: Health Professions	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

- 1. Faculty evaluation will be utilized as one way to measure faculty performance. All faculty who teaches lecture, lab or clinical will participate in semester or annual evaluation.
- 2. Evaluations of faculty will be completed by, but not limited to:
 - a. Students
 - b. Peer faculty
 - c. Director of Nursing

Rationale:

Teaching growth comes through evaluation and incorporation of evaluation outcomes into practice. Many methods of evaluation may be utilized as part of ongoing efforts to achieve and maintain teaching excellence. One method of evaluating teaching performance is through utilization of university approved standardized forms, distributed in a consistent manner.

Procedure:

Student Evaluation of Faculty

- 1. Student evaluations will be completed in each course taught by individual faculty at the end of each semester.
- 2. Faculty teaching didactic, lab or clinical in the same course may combine or separate evaluations. Results will reflect the number of evaluations completed.
- 3. An electronic compilation of the evaluations is sent to the Nursing Program Director and the faculty from LMS Administrator, School of Extended and Lifelong Learning.
- 4. Faculty may choose additional evaluation forms which address other criteria for expertise.

Director of Nursing Evaluation of Faculty

- 1. All faculty will be observed and evaluated by the Nursing Program Director annually, but not limited to each academic year.
- 2. Faculty will be evaluated using the Nursing Evaluation appropriate for the teaching assignment.
- 3. Peer and self-evaluations may be used as part of the evaluation process:
 - a. Peer evaluators complete the Nursing Program Faculty Evaluation Form toward the end of the academic year.
 - b. Classroom, laboratory or clinical observation is encouraged for those doing peer evaluations, especially for tenure-track faculty.
- 4. Student evaluations of faculty will be used in the faculty evaluation.
- 5. The evaluation will be used as a basis for goal setting.

- 6. Nursing Program Director will review the results of the evaluation with the faculty member and each will sign the evaluation form.
- 7. The signed evaluation form will be filed in the faculty member's personnel file.
- 8. This form may be used by the Faculty Evaluation Committee as part of the University faculty evaluation process.
- 9. Tenure-track faculty fulfill the tenure requirements as establish the University of Montana Bargaining Agreement, the Health Professions Department and the Nursing Program.
- 10. Rank advancement is determined by the faculty performance in accordance with the University of Montana Bargaining Agreement.
- 11. Adjunct faculty also receive an annual Nursing Program evaluation.

Clinical Site Evaluation of Clinical Faculty

- 1. A faculty evaluation is completed annually by the Lead Instructor of the course with the clinical faculty person.
- 2. Student evaluations of faculty will be used in the faculty evaluation.
- 3. The evaluation will be used as a basis for goal setting.
- 4. The Lead Instructor will review the results of the evaluation with the Nursing Program Director.
- 5. The signed evaluation form will be filed in the faculty member's personnel file.

Policy Title: Program Director Evaluation	Policy Number: F9
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Program Director Evaluation – In addition to the Collective Bargaining Agreement for annual faculty evaluation (CBA 10.210), the Nursing Program Director's administrative performance is annually evaluated by the Health Professions Chair.

Rationale:

Regular evaluation provides data to the Program Director for self- improvement and which also reflects the success of the Nursing Program.

- 1. Annually the Program Director submits a self-evaluation to the Health Professions Chair, based on his/her goals and the duties/responsibilities designated in the Program Director position description.
- 2. Faculty and staff of the College have an opportunity to participate in providing evaluative input on the Program Director's performance.
- 3. The submitted evaluation results are compiled by the Health Professions Chair and presented to the Program Director.

Policy Title: Faculty Files	Policy Number: F10
Effective Date: 11/2007	Revised Date: 11/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Nursing Faculty Files:

- 1. Two sets of files will be kept on each faculty member of the Nursing Program. One set will be kept in Box and another set will be kept and maintained in Missoula College Human Resources.
- 2. A faculty member may request to review her/his file with the Nursing Program Director or Dean, except materials submitted confidentially.

Rationale:

This policy provides guidance in order to standardize and avoid duplication in the process of collecting, handling and storing the contents of faculty files.

- 1. The files kept in Box will contain the following materials for each faculty member:
 - a. Curriculum Vitae (updated every two years at time of RN License renewal)
 - b. Copy of Montana RN license
 - c. Immunizations including; flu, Hep B, MMR, TB, TDap, Varicella (by positive titer or written documentation), COVID
 - d. Program Director Evaluations
 - e. Contracts
- 2. HR Files are also kept in the Missoula College HR Office and may contain:
 - a. C.V., reference letters and related information from hire
 - b. Personnel Record Form, and all University Personnel Office communications
 - c. Various forms and correspondence from administrative office regarding aspects of employment: contract hiring, termination forms, etc.
 - f. Communications to and from college administration
 - g. Letters of commendation from various professionals (college, community, etc.)

Policy Title: Communicable Disease Prevention	Policy Number: F11
Effective Date: 11/2007	Revised Date: 03/2013; 09/2023
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2009; Summer 2017, Spring 2024)

Policy Description:

Faculty Communicable Disease policy of preventive practices in clinical:

Rationale:

Faculty are required to provide evidence of health screening tests, immunizations and review of preventive practices described below on employment and annually. Program Director will inform faculty of agency policies at time of hire. It then becomes faculty responsibility to make sure immunizations and BLS are current and in file.

Procedure:

- **I.TUBERCULOSIS POLICY:** All faculty are screened once, at hire, for tuberculosis (TB) using a one-step tuberculin skin test (TST). If the faculty member has had no previous annual TST, a two-step test must be done to provide a baseline. Documentation must include the date and results of the test in millimeters. An induration of ≥ 10mm will be considered positive. Faculty will be referred to their health care provider for assessment of risk. Faculty members with a positive skin test are required to provide written clearance from their health care provider to provide patient care.
- **II. RUBELLA POLICY:** Upon employment, faculty will provide documentation of 2 doses of rubella vaccination, or lab evidence (titer) of immunity.
- III. HEPATITIS B (HBV) POLICY: Upon employment, faculty must provide documentation of a positive anti-HBs titer at some time in the past. Periodic serologic testing to monitor antibody concentrations after completion of the vaccine series is not recommended. (*Morbidity and Mortality Weekly Report (MMWR)*, December 26, 1997, Vol. 46, No. RR-18, pg. 23.) If the faculty member has never been immunized, the series will be started and titer drawn as soon as possible.

Persons who do not respond to the primary vaccine series should complete a second three-dose vaccine series or be evaluated to determine if they are HBsAg-positive. Revaccinated persons should be retested at the completion of the second vaccine series. Persons who prove to be HBsAg-positive should be counseled accordingly. Primary non-responders to vaccination who are HBsAg-negative should be considered susceptible to HBV infection and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any known or probable parenteral exposure to HBsAg-positive blood. (Morbidity and Mortality Weekly Report, December 22, 2013, Vol. 62, No. 10.)

IV. VARICELLA: Beginning Spring 2008, all faculty must provide evidence of adequate immunity to varicella by positive titer or written document.

RATIONALE: Varicella immunity is provided by previous infection or by vaccination. Vaccination is indicated for individuals who do not have a positive titer.

PROCEDURE:

- 1. Faculty are required to provide documentation of adequate immunity through a positive varicella titer or provide written document.
- 2. If a faculty member's varicella titer level is negative, the faculty member must receive 2 doses of vaccine at an interval of 4-8 weeks between doses. Post vaccination titer after 2 doses of vaccine is not necessary or recommended.
- **V. TETANUS, DIPTHERIA, ACELLULAR PERTUSSIS (Tdap):** Beginning in Spring 2008, all faculty must provide evidence of Tdap vaccination per procedure.

RATIONALE: Reduce the incidence of pertussis in the U.S. population and especially infants who have the highest risk of complications.

PROCEDURE: Faculty should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap. Although Td booster doses are routinely recommended at an interval of 10 years, an interval as short as 2 years from the first dose of Td is recommended for the Tdap dose among HCW's. Tdap is not licensed for multiple administrations. After receipt of Tdap, HCW's should receive Td or TT for booster immunization against tetanus and diphtheria according to previously published guidelines. (MMWR, December 15, 2006).

- VI. INFLUENZA: Annual influenza immunization of health care workers (HCWs) is recommended to prevent the transmission of the virus to persons at high risk for influenza-related complications and severe disease (MMWR 6/06)
- VII. SMALLPOX POLICY: In the event a faculty member is required to receive smallpox vaccination, Center for Disease Control guidelines for site care will be followed. See http://www.bt.cdc.gov/agent/smallpox/vaccination/site-care-pub.asp

RATIONALE: After vaccination, this live virus is present at the vaccine site and can be spread through contact. To avoid this, the vaccination site must be cared for carefully until the scab that forms after vaccination falls off on its own (in 2 to 3 weeks).

PROCEDURE: Until the scab falls off on its own, Faculty will not participate in clinical lab.

VIII. BLS Policy: Faculty are expected to provide current and accurate documentation of BLS status.

PROCEDURE:

Faculty are required to obtain BLS for healthcare providers, to include adult, child, and infant, obstructed airway, use of Ambu bag, and automatic external defibrillator. A certification that includes hands-on skills demonstration is required.

Each faculty is responsible for submitting his/her BLS for Healthcare Providers card and verification of continued certification to the Nursing Program Director.

Policy Title: Nursing Faculty Meetings	Policy Number: F12
Effective Date: 12/2008	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Nursing Faculty Meetings

Rationale:

The purposes of General Faculty Meetings of the Missoula College UM Nursing Program are:

- to conduct faculty business central to the College of Nursing,
- to facilitate the work of committees, subcommittees and ad hoc groups,
- > to promote faculty interaction through various activities,
- for faculty development, and
- for orientation of new faculty

- 1. Each semester the dates of the face-to-face general nursing faculty meetings for the semester will be determined depending on faculty schedules and availability.
- 2. Meeting will be held as scheduled with the expectation all faculty will attend.
- 3. Part time and clinical faculty will be asked to provide subject input or attend only when appropriate.
- 4. Part time and clinical faculty will receive a copy of the meeting minutes and will direct any questions or input to the Nursing Program Director.
- 5. Roberts' Rules of Order-Newly Revised will be used as guidelines for all face to face and distance meetings.
- 6. Minutes will be recorded. A copy of the agenda, minutes, and attachments for each meeting will be kept in a binder in the Nursing Program Director's office, and in a Box file.
- 7. Copy of meeting minutes will be distributed to each faculty member.

Policy Title: Faculty Meeting Minutes	Policy Number: F13
Effective Date: 12/2008	Revised Date: 03/2013; 09/2022
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Faculty Meeting Minutes

Rationale:

The purpose of this policy is to develop a method for consistent recording, distribution, and storage of committee/council minutes so that communication among faculty members and students is enhanced and historical data is readily available for retrieval.

- 1. Minutes will be recorded using the following format: the name of the group, the date and time of the meeting, and the members present. Meeting activity will be recorded with agenda item, discussion, action (who, what, when), date of accomplishment, and follow through.
- 2. Each subject will have a separate heading listed under the agenda item column. The discussion column will record all main discussions on the item; the action column will record disposition of motions, including amendments; and outcome of summarized discussion. If a vote tally is requested, the number of votes on each side of the motion will be recorded in the minutes. If informal discussion occurs without a formal motion, major points of the discussion are to be summarized. Date of accomplishment and follow through will record the next step (if needed) and the deadline for accomplishment.
- **3.** When lengthy discussions occur, the originator will summarize the major points of her/his major argument. At the request of the chairperson, the originator will submit the summary in writing to the recorder so it can be accurately captured in the minutes.
- **4.** When an important committee report is discussed, the minutes will clearly reflect the storage location of the report. Only attachments critical to the understanding of the minutes are to be attached to the minutes.
- **5.** The Nursing Program Director reviews the General Faculty meeting minutes before they are sent to faculty for approval via e-mail, or face-to-face.
- **6.** Storage of minutes will be in three-ring binders labeled on the outside with the appropriate title. The binder will be subdivided by year. Box storage of minutes and agendas will be maintained by the Nursing Program Director.

Policy Title: Nursing Program Textbook and	Policy Number: F14
Learning Material Selection	
Effective Date: 01/2009	Revised Date: 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description: Textbooks will be selected on the basis of the following criteria using the course selection rubric:

Text Book

- 1. Evidence based practice
- 2. Use of the nursing process
- 3. Credibility of authors
 - a. Years of publishing
 - b. Expert in field
- 4. Unbiased/nonjudgmental
- 5. Appropriate for level of teaching
- 6. Integration of QSEN competencies

Student Resources

- 1. Case Studies
- 2. Sample Care Plans
- Concept mapping/concept map creator
- 4. User friendly for students i.e., pictures and color
- 5. On-line resources for students
- 6. Sample client teaching guides

Faculty Resources

- 1. On-line instructor's resources
- 2. Instructor's guide
- 3. Electronic test bank
- 4. NCLEX style questions
- 5. Compatible with ATI plan
- 6. PowerPoint presentation

Rationale: Collection development and material's policies are guided by the principles of intellectual choice and freedom of faculty. Nursing faculty will decide either to add or delete materials to be used for student learning.

- 1. Faculty shall use the Course Text Selection Rubric as described above as a basis for recommendations of a new textbook.
- 2. Course instructors shall actively seek reviews and recommendations from nursing faculty with experience in the content/practice area when textbook selection is needed.
- 3. Course instructors will seek reviews and recommendations from students, current or past.
- 4. Course instructors will fill out the textbook selection rubric when making their selection.
- 5. Nursing faculty have the opportunity to review the textbook and the selection process at a faculty meeting.
- 6. After the textbook decision is made, the text information shall be forwarded to the University of Montana Book Store for order.
- 7. The textbook selection shall become part of the course syllabi for which it is being selected.

Policy Title: Production and Distribution of	Policy Number: F15
Course Material	
Effective Date: 11/2007	Revised Date: 07/2019
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Production and Distribution of Course Material

The Nursing Program provides students with basic course information and evaluation materials. Other supplementary learning materials may be required and are the responsibility of students.

Rationale:

Each student enrolled in the course will be provided course information on Canvas. Textbooks and supplies must be purchased by the student. Students are responsible for all course material posted in Canvas.

- 1. Course information provided on Canvas includes but is not limited to:
 - a. Course Syllabi, sharing the scope of a course, teacher and student expectations, the system for evaluation, and a general bibliography.
 - b. Other teaching aids such as modules, assignments, readings, and any other instructional materials.
- 2. Supplies that are not part of Canvas must be purchased by the student.
- 3. Students will purchase text books, supplies, uniforms, and other pertinent supplies from the UM Bookstore or supplier of choice as long as they meet requirements. Kaplan software will be purchased from Kaplan.
- 4. Test materials will be provided to students as a hard copy or on Canvas.
- 5. Copyright laws will be followed in all aspects of the implementation of this policy.

Policy Title: Program Evaluation	Policy Number: F16
Effective Date: 11/2007	Revised Date:03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013: Summer 2017, Spring 2024)

Policy Description:

The ASN Program is approved by the Montana State Board of Nursing (BON) and Accredited by Accreditation Commission for Education in Nursing (ACEN)

Program Evaluation – Nursing program will maintain a program evaluation for the purpose of:

- Coordinating the evaluation of all program components
- Guide the collection, analysis, dissemination, and utilization of the outcomes of evaluation.
- Meet the standards of accrediting bodies of Montana State BON and ACEN

Rationale:

A nursing education program is a dynamic structure that requires on-going evaluative input to maintain its quality and relevance. ACEN accreditation, State Board annual review, and periodic State Board site visits require evaluative data as evidence that criteria/standards are being met. The Systematic Plan for Evaluation (SPE) provides a systematic, comprehensive, on-going approach to evaluation.

- 1. Each academic year, the Program Director and faculty will meet, review, update and continue the Systematic Plan for Evaluation (SPE).
- 2. The plan will include the year's work evaluating tasks for which the nursing program was responsible to accomplish.
- 3. At the end of each academic year, the Program Director will be responsible for seeing that the year's mandated evaluations have been completed, results summarized, and reports filed in the SPE.
- 4. The Program Director uses information from the SPE in the MT BON Annual Report and the self-study for ACEN continued accreditation.

Policy Title: Nursing Advisory Committee	Policy Number: F17
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Nursing Advisory Committee

Rationale:

The Nursing Program wishes to be responsible in serving the public, and responsive to the needs of the public. Input from informed persons can assist the Nursing Program in planning, implementing and evaluating its activities. This input is particularly appropriate since the Nursing Program is an integral part of the state and dedicated to serving Montana citizens.

Procedure:

The Nursing Program will solicit members for, and maintain a Nursing Advisory Committee. The purpose of this Committee is:

- 1. consult with and advise the Nursing Program Director on matters relating to nursing education, nursing and health care
- 2. provide feedback to the Nursing Program Director related to the program's level of achievement in meeting its stated goals and objectives
- 3. share information about the Nursing Program's goals, plans and achievements with interested publics
- **4.** serve as a liaison between the Nursing Program and the community in order to promote mutual understanding and cooperation.
- 5. <u>Member Appointment</u>: After consultation with the Program's faculty and administration, the Director will solicit members for the Advisory Committee.
- 6. <u>Support</u>: The Program will support Advisory Committee members by covering costs (per State of Montana reimbursement rates) related to their participation in the Committee as needed.
- 7. <u>Meetings</u>: The Board will meet on a regular basis, usually two times per year, and on an ad hoc basis as determined by the Director and Administration.
- 8. Members: The Board membership will be constituted as follows:
 - a. One representative from each of the following groups:
 - Student Ambassador from each semester of the Nursing Program
 - Nursing faculty
 - Health Professions Chair
 - Missoula College Associate Dean
 - Four to five individuals of the community. These appointments shall reflect diversity in relation to the state's geographic areas and ethnic/cultural groups, and in relation to nursing, health care and nursing education issues.

Policy Title: Graduate Satisfaction Survey	Policy Number: F18
Effective Date: 11/2009	Revised Date: 08/2015; 09/2023
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023) Level II: Administrative Council (Fall 2013; Summer 2017)

Policy Description: Student Satisfaction Survey:

REPEALED

Policy Title: Employer Satisfaction Survey	Policy Number: F19
Effective Date: 11/2009	Revised Date: 03/2013; 09/2023
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (December 2015) Level II: Administrative Council (Fall 2013; Summer 2017)

Policy Description: Employer Satisfaction Survey:

REPEALED

Policy Title: Employer Recruitment of New	Policy Number: F20
Graduates	
Effective Date: 11/2007	Revised Date: 03/2013
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2013; Summer 2017, Spring 2024)

Policy Description:

Employer Recruitment of New Graduates - The Missoula College UM Nursing Program will cooperate with agencies requesting access to recruit students.

Rationale:

The purpose of the Missoula College UM Nursing Program is education and the space and resources of the College are expressly for educational use. There is a high demand for nurses in the State of Montana and the Nation; therefore, the Nursing program wants to be of assistance in providing qualified nurses to meet the nursing shortage.

- 1. The Missoula College UM Nursing Program will:
 - a. Post materials.
 - b. Alert students to posted materials.
 - c. Suggest activities to recruiters such as evening and weekend dinners, other social functions, or university career activities for students.

Policy Title: Faculty Advising Responsibility	Policy Number: F21
Effective Date: 11/2007	Revised Date: 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2007; Summer 2017, Spring 2024)

Policy Description:

Nursing faculty, as part of workload, is responsible for participating in advising nursing students of the Missoula College Associate Degree Nursing Program.

Rationale:

A nursing advisor is a vital resource at every level of nursing education. Nursing Program advisors help identify academic and career goals and assist in developing an academic plan to achieve them.

Advisors are also experts at helping students understand the policies and procedures of the Missoula College Nursing Program, and guiding nursing students through the admission, progression and graduation requirements of the nursing program.

- 1. Full time faculty are responsible for advising students.
- 2. Part-time faculty are not responsible for advising students.
- 3. Faculty will be assigned student advisees at nursing student orientation.
- 4. Faculty are mentored in advising by a senior faculty member during their first semester of teaching.
- 5. Full time faculty are responsible for maintaining advising/office hours of (4) hours each week.
- 6. Part time faculty are responsible for maintaining office hours of (1) hour each week.
- 7. Faculty will post their advising/office hours on their office doors and in their syllabi.

Policy Title: Family Educational Rights and Privacy	Policy Number: F22
Act (FERPA)	
Effective Date: 11/2007	Revised Date: 08/2015
Initiating Department: Nursing	Department Affected: Nursing

REVIEWED/APPROVED BY:

Level I: Nursing Faculty (Fall 2023)

Level II: Administrative Council (Fall 2009; Summer 2017, Spring 2024)

Policy Description:

The Family Educational Rights and Privacy Act (FERPA) affords all students in higher education institutions certain rights with respect to their education records. Some of these rights are only applicable to students over 18 years of age.

Rationale:

The law protects the privacy of student educational records and provides rights to students for access to and amendment of those records. FERPA applies to any higher education institution receiving federal funds administered by the U.S. Department of Education (DOE).

Procedure:

Every time faculty members access student files on Cyberbear they acknowledge the FERPA rule before they can proceed. MC Nursing Program observes FERPA regulations through the following rights:

- 1. The right to inspect and review the student's education records within 45 days after the day that Missoula College Nursing program receives a request for access. A student should submit to the director's office or other appropriate official, a written request that identifies the record(s) the student wishes to inspect. The College official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.
- 2. The right to request the amendment of the student's education records that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA. This right refers to information that the student feels has been documented incorrectly, and is not an avenue to challenge whether a grade or other form of evaluation is appropriate.
- 3. The College will notify the student in writing of its decision and provide information regarding the student's right to a hearing regarding the request for amendment if that request was denied. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.
- 4. The right to provide written consent before the university discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.
- 5. MC Nursing Program discloses education records without student prior written consent to university officials outside the college who have a legitimate educational interest in some or all of the information. A university official is a person employed by MC or UM in an administrative, supervisory, academic, research, or support staff position. Generally, the MC or UM officials

- who will have most routine access are those in Academic Affairs, Student and Employee Health, Campus Security, Student Affairs and Information Technology. Officials will have access to student files only on an as needed basis, and not necessarily the entire student record. MC Nursing Program will also grant access to other university officials who require the information in order to fulfill his or her professional responsibilities as authorized by FERPA.
- 6. The right to file a complaint with the U.S. Department of Education concerning alleged failures by nursing program, MC or UM to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202

- 7. The right to restrict disclosure of directory information. Directory information includes but is not limited to now or in the future, the student's name; address; telephone listing; UM electronic mail address; photograph; date and place of birth; major field of study; grade level; year in program, enrollment status (e.g., undergraduate or graduate, full-time or part-time); dates of attendance; degrees, honors and awards received; date of graduation, and the most recent educational agency or institution attended.
- 8. Directory information of students at MC is subject to public disclosure until and unless the student presents a signed Hold Directory Form (see attachment), indicating he/she does not authorize such disclosure. The student must select RESTRICT on the form, sign and date it, and submit it to his/her respective dean's office. The restriction will remain in effect until the student signs a release.
- 9. Student records may not be released to parents, family members or spouses of a student regarding the student's violation of any Federal, State, or local law, or of any rule or policy of the university, governing the use or possession of alcohol or a controlled substance if the university determines the student committed a disciplinary violation and the student is under the age of 21.
- 10. MC will release directory information for all students unless otherwise instructed by a student through a signed Directory Hold Form that restricts disclosure of information. It is the student's responsibility to complete and submit the signed form.
- 11. A student may submit a hold directory information request at any time during the academic year; however, the request can only be honored for future publication and cannot be applied retroactively.
- 12. UM students are provided an annual notification of their privacy rights under FERPA and Montana Law. A copy of that notification as well the current (and substantially revised) UM FERPA policy and other related documents may be found at a link available via the following URL: http://www.umt.edu/registrar/

Appendix A

Remediation Plan and Nursing Student Agreement

The remediation process is designed to promote the success of students at-risk of failing a course because they have difficulty accomplishing course objectives and/or meeting course requirements. The process is not intended to replace course curriculum or course requirements but to supplement the student's learning.

The remediation process is initiated to address the following situations:

- academic jeopardy (i.e., low quiz/exam scores),
- lack of clinical competency (i.e., failing a clinical or lab competency, unsafe behavior in the clinical environment, medication errors), and/or
- lapses in professional judgment (i.e., tardiness, absenteeism, unprofessional behavior).

If a student is struggling in multiple areas, separate remediation plans are established for each at-risk behavior. The remediation process is initiated by faculty as soon as an at-risk student is identified. The faculty member is responsible for meeting with the student to discuss the identified concerns and develop an individualized remediation plan. The remediation plan must be documented on the form "Nursing Student Remediation Agreement" (see attached) and meet the following guidelines:

- The Remediation Plan must clearly describe the area(s) of deficiency.
- Remediation outcomes must identify specific, measurable goals the student must attain or perform to demonstrate success.
- Remediation activities must be individualized to the student's area of weakness. They may include, but are not limited to, completion of suggested computer-based practice tests, written review materials, practice questions, instructor-developed materials, hands-on laboratory skill practice, or any other materials/methods suggested by the faculty.
- A time frame for completion must be agreed upon and documented in the remediation plan.
- The remediation form must be signed by faculty and student.

Nursing Student Remediation Agreement and/or Warning of Potential Failure

Student Name		Faculty Name	
Specify area of remediation:			
0	Academic jeopardy (<80% average in or Lack of clinical competence.	ne or more courses).	
0	Lapse in professional judgment.		
0	Other:		
Describ	ne areas of concern:		

Date Implemented	Remediation Outcome	Remediation Plan	Deadline	Confirmation of Agreement
	The student will:			Student Signature:
				Faculty Signature:

	Review of Remediation Outcomes	Evaluation of Remediation Plan		
		Successful	Unsuccessful	
		Student:	Student:	
		Faculty:	Faculty:	
		Student:	Student:	
		Faculty:	Faculty:	

Warning to the Student of Potential Failure

The initial concerns and/or behaviors documented by the faculty on
are concerning enough to warrant providing a warning of potential failure, in addition to creating a
Remediation Plan.
OR
The Remediation Plan that was established on has not been
successful.
*You are being warned that continuation of the following may result in dismissal from the Nursing course or the Nursing Program: