

## **Agenda**

### **EDUCATION COMMITTEE – BOARD OF NURSING**

**November 6, 2014 - 8:30 a.m.**

**Room 464 - 4<sup>th</sup> Floor**  
Heber M. Wells Building  
160 E. 300 S. Salt Lake City, Utah

*This agenda is subject to change up to 24 hours prior to the meeting.*

#### **ADMINISTRATIVE BUSINESS:**

1. Call Meeting to Order
2. Introduction of Bureau manager, Dr. Suzette Farmer
3. Review and approval of the September 4, 2014 minutes

#### **APPOINTMENTS:**

- 9:00 a.m.** -Sally Russell, Eagle Gate/Provo College  
**9:30 a.m.** -Graceland University, request for out-of-state program clinical placement (by telephone)  
**10:00 a.m.** -Georgetown University, request for out-of-state program clinical placement (by telephone)  
**10:30 a.m.** -Diane Mayberry, Stevens-Henager - Medication Aide Certified program application

#### **DISCUSSION ITEMS:**

- Discussion regarding possible Rule changes/additions:
  - R156-31b-202. Advisory Peer Education Committee Created – Membership-Duties
  - R156-31b-602. Requirements for Limited-time Approval on Non-accredited Nursing Programs
  - R156-31b-603. Education Providers-Requirements for Ongoing Communication with the Board
  - R156-31b-301c. APRN License-Education, Examination, and Experience Requirements
  - R-156-31b-609. Standards for Out-of State Programs Providing Clinical Experiences in Utah
- Dr. Farmer to report on her conversation with ANCC and CCNE regarding accreditation of post-graduate certificate programs
- Review NCLEX results
- Approval of 2015 Committee meeting schedule

#### **NEXT SCHEDULED MEETING: December 4, 2014**

Meetings scheduled for the first quarter 2015: January meeting canceled; February 5, 2015; March 5, 2015 and April 2, 2015

**Note:** In compliance with the Americans with Disabilities Act, individuals needing special accommodations (including auxiliary communicative aids and services) during this meeting should notify Dave Taylor, ADA Coordinator, at least three working days prior to the meeting. Division of Occupational & Professional Licensing, 160 East 300 South, Salt Lake City, Utah 84115, 801-530-6628 or toll-free in Utah only 866-275-3675.

# REVISED CHECKLIST FOR PUBLIC MEETINGS

(Fill in the blanks to correspond to each respective board, commission, or committee.)

I am Jodi Morstein, chair of the Education Committee/State Board of Nursing.

I would like to call this meeting of the Education Committee to order.

It is now (time) \_\_\_\_\_ : \_\_\_\_\_ am on November 6, 2014.

This meeting is being held in Room 464 of the Heber Wells Building, 160 E 300 S, Salt Lake City, Utah.

Notice of this meeting was provided as required under Utah's Open Meeting laws.

In compliance with Utah's Open Meetings laws, this meeting is being recorded in its entirety. The recording will be posted to the Utah Public Notice Website no later than three business days following the meeting.

In compliance with Utah's Open Meeting laws, written minutes will also be prepared of this meeting. "Approved" minutes will be posted to the Utah Public Notice Website no later than three business days after approval.

The following Committee members are in attendance:

	YES	NO
<u>Jodi Morstein</u> , Chairperson	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Debra Mills</u> , Chair Elect	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Sharon Dingman</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Gigi Marshall</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Donna Lister</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

The following Committee members are absent: (Refer to the above list.)

The following individuals representing DOPL and the Department of Commerce are in attendance:

	YES	NO
<u>Mark B. Steinagel</u> , Division Director	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Suzette Farmer</u> , Bureau Manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Shirlene Kimball</u> , Board Secretary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

We welcome any visitors and interested persons at this time. Please be sure to sign the attendance report for the meeting and identify yourself before speaking.

As a courtesy to everyone participating in this meeting, at this time we ask for all cell phones, pagers, and other electronic devices to be turned off or changed to silent mode.

Board motions and votes will be recorded in the minutes.

Let us now proceed with the agenda.

(End of the Meeting) It is now (time) 1:37 (am / pm), and this meeting is adjourned.

*J. Morstein* PWA/PPA

**Guests - Please sign**

Date: 11/6/2014

**EDUCATION COMMITTEE**  
**BOARD OF NURSING**

**NAME: (Please Print)**

**REPRESENTING**

Steven Litteral

Amer. Tech

Sally Russell

Eagle Gate College

Lois Hine

Pravo College

Charles Eheson

Eagle Gate College

Siara Mapky

Stevens college

Graceland University  
School of Nursing

Request for Approval Regarding  
Standards for Out-of-State Programs Providing Clinical Experiences in Utah

**A nursing education program provider located in another state that desires to use Utah health care facilities for clinical experiences for one or more students must meet the following criteria:**

**1. has been approved by the home state Board of Nursing;**

Graceland University's School of Nursing undergraduate and graduate programs have been approved by the Iowa State Board of Nursing and undergraduate programs by the Missouri State Boards of Nursing. We maintain approval with both because 1) the university is chartered in Iowa with a home campus in that state, and 2) the School of Nursing is located at the Independence, Missouri, campus to be near top-quality agencies for the pre-licensure program. The Missouri State Board of Nursing approves pre-licensure programs only.

**2. has been fully accredited by either ACEN, CCNE, or COA and must be affiliated with an institution of higher education;**

All of Graceland University's nursing programs are accredited by CCNE. The university itself is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools. Copies of letters of approval and accreditation can be found in Appendix 1.

**3. has clinical faculty who are employed by the nursing education program, meet the requirements to be a faculty member as established by the accrediting body and the home state's Board of Nursing, and are licensed, in good standing in Utah or a Compact state;**

All of our nursing faculty members hold licensure in Missouri. Missouri is a member of the nursing Compact.

**4. is affiliated with an institution of higher education;**

Graceland University was founded in 1895 and is accredited by the North Central Association of Colleges and Schools. The Division of Health Care Professions was established in 1969 and achieved National League for Nursing Accrediting Commission accreditation just prior to the graduation of the first class in 1971 and has been continuously accredited since that time.

- 5. has a plan for selection and supervision of faculty or preceptor, the clinical activity, including: location and date range;**

Students are required to work with preceptors who meet strict qualifications and are willing to abide by the legal agreement with the university. Each potential preceptor's license status is verified. All potential preceptors are approved by the lead faculty for the practicum course. Students are not allowed to begin any clinical course until the university has an affiliation agreement in place with the clinical agency and a completed and faculty approved agreement with the preceptor. Faculty are in communication with the preceptor throughout the clinical experience. Evaluation of the student's performance is completed by the preceptor and reviewed by the faculty member. Students cannot start any clinical activity before the first day of the clinical course nor continue after the course end date, without instructor permission.

- 6. has current placement agreement, executed with the prior 12 months, in place in Utah facilities.**

Students cannot begin any clinical course until the university has a signed affiliation agreement in place with the clinical agency. Per the Iowa Board of Nursing, affiliation agreements are reviewed annually by the Contract Coordinator at Graceland University.

Additional information about the School of Nursing can be found on the university website at the following link.

<http://www.graceland.edu/academics/graduateonline-programs.cfm>

The university homepage can be found at [www.graceland.edu](http://www.graceland.edu).

**Georgetown University's School of Nursing & Health Studies**

**Utah Board of Nursing**

**Proposal – Request to Provide Clinical Experiences in Utah**

**R156-31b-609. Standards for Out-of-State Programs Providing Clinical Experiences in Utah.**

Georgetown University's main campus and administrative control is located in the District of Columbia. Georgetown approval to offer clinical experiences for students enrolled in its M.S. degree in nursing program offered in an online modality. Our students concentrate/specialize in one of the following areas: Family Nurse Practitioner (FNP), Nurse Midwifery/Women's Health Nurse Practitioner (NM/WHNP), Nurse Educator, Adult Gerontology Acute Care Nurse Practitioner (AG-ACNP), or Adult Gerontology Acute Care Nurse Practitioner/Clinical Nurse Specialist (AG-ACNP/CNS). Georgetown does not intend to offer classes at a physical location in the state, nor does the University intend to have any physical location, phone number, or recruiters in Utah; however, Georgetown is seeking approval from the Utah Board of Nursing to offer clinical experiences within Utah.

*A nursing education program provider located in another state that desires to use Utah health care facilities for pre-licensure clinical experiences for one or more students shall, prior to placing a student, meet with the Board and demonstrate to the satisfaction of the Board that the program:*

**1. has been approved by the home state Board of Nursing;**

Georgetown University's nursing programs are granted full approval by the District of Columbia Board of Nursing.

**2. has been fully accredited by the ACEN, CCNE, or COA;**

Georgetown's graduate nursing programs are nationally accredited by the Commission on Collegiate Nursing Education (CCNE). Additionally, Georgetown's midwifery program is nationally accredited by the Accreditation Commission for Midwifery Education (ACME). See Attachment 1 for Georgetown's CCNE and ACME accreditation documents.

**3. has clinical faculty who:**

- a. are employed by the nursing education program;**
- b. meet the requirements to be a faculty member as established by the accrediting body and the home state's Board of Nursing; and**
- c. are licensed in good standing in Utah or a Compact state;**

Clinical faculty, or Clinical Faculty Advisors (CFA) are employed by Georgetown University, meet the standards of District of Columbia Board of Nursing. According to the Commission on Collegiate Nursing Education (CCNE), the national nursing profession accrediting agency that accredits Georgetown's nursing programs, graduate

nursing faculty must hold a graduate degree. Faculty members of the graduate nursing programs meet these minimum qualifications, and many exceed them. Students are assigned a clinical faculty advisor (CFA) who serves in a dual role of advisor and supervisor of the clinical practica to promote clinical and professional mentoring within their selected specialty program. CFAs are responsible for on-going communication with the student and the preceptor and collaborating with the preceptor regarding the student's learning experience. Students participating in clinical experiences in Utah will be supervised by clinical faculty licensed in Utah or a Compact state.

**4. is affiliated with an institution of higher education;**

Georgetown University offers its M.S. degree in nursing program through its School of Nursing & Health Studies (NHS). Georgetown University's main campus is located in the District of Columbia.

Georgetown University  
School of Nursing & Health Studies  
3700 Reservoir Rd. N.W.  
Washington D.C. 20007  
<http://www.georgetown.edu>  
<http://nhs.georgetown.edu>

**5. has a plan for selection and supervision of:**  
**a. faculty or preceptor; and**

Faculty are responsible for evaluating preceptors prior to a student's placement. Preceptors must have the educational preparation appropriate to the area of supervision, hold current certification and licensure, and have sufficient experience to serve as a preceptor. If faculty determine the preceptor and facility site to be appropriate an affiliation agreement is established. Preceptors have input into the evaluation process of the student as preceptors formally evaluate students at both mid-term and upon completion of the clinical experience; however, faculty retain responsibility for clinical evaluation of students. Preceptors provide feedback on students' clinical experience to faculty via an online student evaluation system (*Typhon*) on at least a bi-weekly basis. In addition, faculty maintain frequent contact with preceptors throughout a student's clinical experience via telephone, virtual chat (Skype/Adobe Connect), and email. Faculty use the input from preceptors to evaluate student performance in the clinical experiences. Georgetown University currently maintains a 1:1 preceptor to graduate nursing student ratio in all clinical experiences in its graduate nursing programs. The clinical course director and clinical faculty advisor – both of which are Georgetown faculty positions – are available on an ongoing and frequent basis to preceptors while students are involved in their clinical experience.

Please see Attachment 2 for preceptor expectations checklists.

**b. the clinical activity including**

**i. location**

**ii. date range**

Faculty are responsible for evaluating clinical sites and preceptors prior to a student's placement. Faculty evaluate clinical sites and do so through a variety of methods including web-based communication, telephone calls, surveys, observations via web-conferencing software (Skype or AdobeConnect) which supplement on-site visits. Clinical sites are evaluated by faculty to ensure that student placements are appropriate and facilitate opportunities for building skills and meeting the learning objectives of the online graduate nursing program.

Faculty and clinical placement staff work with students to identify potential sites near where students reside. Therefore, locations and sites vary based on the residence of students admitted to the graduate nursing program. Clinical experiences occur during the terms in which students are enrolled in their specialty courses and are typically begun 6-12 months after beginning their degree program.

Please see Attachment 2 for clinical site criteria checklists.

**6. has current clinical placement agreements, executed within the prior 12 months, in place at Utah facilities.**

Please see Attachment 3 for a list of affiliation agreements with facilities in Utah. All affiliation agreements are closely monitored and renewed as appropriate.

June 22, 2012

John J. DeGioia, PhD  
President  
Georgetown University  
3700 Reservoir Road, NW  
Washington, DC 22057

Dear Dr. DeGioia:

The Board of Review (BOR) of the Accreditation Commission for Midwifery Education (ACME) met on June 21-22, 2012. At this meeting the BOR reviewed the Self-Evaluation Report (SER), the Site Visitors Report, and the additional information received from Dr. Kimberly K. Trout, Program Director of the Nurse-Midwifery Program at Georgetown University.

The decision of the BOR is to grant reaccreditation to the Nurse-Midwifery Program for the maximum period of ten years with one recommendation. Given the addition of the distance learning program and the subsequent increase in the number of preceptors, ACME recommends careful organization and record keeping of credentials and licenses. In accordance with ACME *Policies and Procedures*, the next Self-Evaluation Report and site visit for continuing accreditation will be due in Spring 2022 for consideration by the BOR in June 2022.

The SER presents a well thought-out plan for monitoring and supporting distance students during their clinical experiences. However, because the program is new, there is very limited information available about the implementation of this plan. Therefore, in the ACME Annual Monitoring Reports for 2012 and 2013, when responding to item 22, Section IV, Curriculum and Student Learning, please include specific information about how this plan is being implemented.

Georgetown University and the School of Nursing & Health Studies are to be commended for the effort and resources that have been devoted to expanding and revitalizing the program. The BOR would like to congratulate Dr. Kimberly K. Trout, CNM, and the program faculty for their commitment to the education of nurse-midwives who will help meet the health care needs of mothers and babies in Washington, D.C. and beyond.

Sincerely,



Diane B. Boyer, CNM, PhD, FACNM  
Interim Chair, ACME Board of Review

Cc: Martin Y. Iguchi, Ph.D  
Dean, School of Nursing & Health Studies

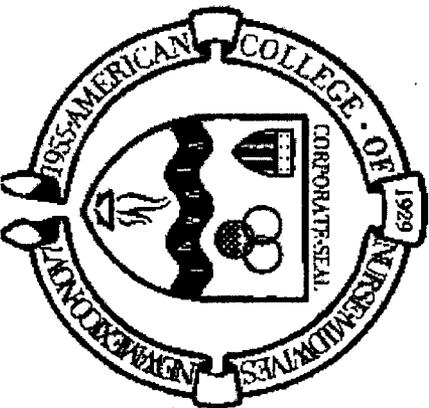
Jeanne Matthews, Ph.D., RN  
Interim Chair, Department of Nursing

Kimberly K. Trout, Ph.D., CNM  
Associate Professor & Program Director

Susan E. Stone, CNM, DNSc, FACNM  
Chair, ACME

CERTIFICATE OF ACCREDITATION

ACCREDITATION COMMISSION  
FOR MIDWIFERY EDUCATION



Grants to the

Graduate Program in Nurse-Midwifery Education at  
**Georgetown University**

Accreditation for the period of June 22, 2012 through June 2022

*Sharon A. Stone*

Chair, Accreditation Commission  
for Midwifery Education

*Deanne B. Boyer*

Interim Chair  
Board of Review

## AG-ACNP/CNS

### ACNP focuses on patient care. CNS focuses on improving outcomes.

Hours	Focus	Acceptable Preceptors	Acceptable Sites	Patients
250 AG-1/ACNP	<p><b>Foundation: Histories and Physicals</b> (similar to FNP1- but dealing with more ill patients- not Well Visits) Emphasis on diagnosis and management of acute episodic and chronic conditions.</p> <p><b>Staff Teaching/ Looking at Outcomes/ Evidence-Based Practice.</b> Emphasis on forming collaborative partnerships with health care professionals to ensure patient safety and quality patient outcomes.</p>	<p>ACNP* - MD can fill in- should not be primary. Majority of hours should be with ACNP</p>	<p>Acute Care Setting- Outpatient Cardiology/Internal Medicine- Hospital Practices, ED, Pre-Admission Testing Centers, Some Skilled Nursing Facilities</p>	<p>Adult/Geriatric "Walky-Talky" Patients- Should be able to communicate their condition</p>
200 AG-2/CNS	<p><b>Staff Teaching/ Looking at Outcomes/ Evidence-Based Practice.</b> Emphasis on forming collaborative partnerships with health care professionals to ensure patient safety and quality patient outcomes.</p>	CNS - 1v1	<p>Acute Care Setting- ICU, Step-Down, Med-Surg, Surgical Floors, ED</p>	<p>Adult/Geriatric -Patient can be communicative or non-communicative.</p>
250 AG-3/ACNP	<p><b>Acute Disease Management- Treatment Protocol, Prescribing, Creating Comprehensive Plans of Care</b></p> <p><b>Measuring Outcomes/ Cost-Saving.</b></p> <p>Completion of "Change Project"- Assessing culture of unit and implementing a change that improves patient outcomes. Systems view for implementing change in practice or policy.</p>	<p>ACNP* - MD can fill in- should not be primary. Majority of hours should be with ACNP</p>	<p>High Acuity Setting- ICU, Step-Down, Telemetry Unit, Cardiovascular Surgery, Trauma, ER in Level 1-2 trauma center. Hospital should have cardiac-cath lab/ cardiac surg unit</p>	<p>Adult/Geriatric- Critically Ill or Post-Op Surgical Patients- on cardiac monitors/ventilators/IV meds. Staff Nurse: Patient ratio should be 4:1 or less</p>
200 AG-4/CNS		CNS- 1v1	Same as AG-3 and /or AG-2	Same as AG-2 and or AG-3

Acuity level of the patient increases, as the skill set of the student expands over time in the program.



## Clinical AG-ACNP Preceptor Checklist

Preceptor Name:	
Credentials:	
Program:	Adult Gerontology ACNP
Certification (ANCC, AACN):	
Years in Practice in Population Focus:	
Number of Students Concurrently:	1
Email:	
Site Name:	
Site Address:	
Web Site:	
Phone Number:	
Fax Number:	
Preceptor Preferred Method of Communication (Phone, Fax, or Email):	
Days and Hours Worked by Provider:	
Population of Patients Managed	
Percentage of Languages Served by the Provider:	(ex. 70% English; 30% Spanish)
If Foreign Language Served is > 30%, is a Translator Available?:	
Type of Site (Intensive Care, Cardiology, Internal Medicine, ED, etc):	
Major Payer Source:	(ex. Medicare)
Characteristics of Patients – Percentage of Patients that are: 18-30 Young Adults 30-65 Adults 65 + Older Adults	
Experiences Available (Acute Care, Acute Episodic, Chronic Diseases):	
Resume Attached? (Y/N):	Y
State License Number and Verification Attached? (Y/N):	
Geographic Area:	
Student Name:	
Is Site Part of a Network? Any Satellite Sites? (Y/N):	
General Placement Notes:	



## Clinical AG-CNS Preceptor Checklist

<b>Preceptor Name:</b>	
<b>Credentials:</b>	
<b>Program:</b>	Adult Gerontology CNS
<b>Certification (ANCC, AACN):</b>	
<b>Years in Practice in Population Focus:</b>	
<b>Number of Students Concurrently:</b>	1
<b>Email:</b>	
<b>Site Name:</b>	
<b>Site Address:</b>	
<b>Web Site:</b>	
<b>Phone Number:</b>	
<b>Fax Number:</b>	
<b>Preceptor Preferred Method of Communication (Phone, Fax, or Email):</b>	
<b>Days and Hours Worked by Provider:</b>	
<b>Population of Patients Covered</b>	
<b>Percentage of Languages Served by the Provider:</b>	(ex. 70% English; 30% Spanish)
<b>If Foreign Language Served is &gt; 30%, is a Translator Available?:</b>	
<b>Type of Site (Intensive Care, Cardiology, Internal Medicine, ED, etc):</b>	
<b>Major Payer Source:</b>	(ex. Medicare)
<b>Characteristics of Patients – Percentage of Patients that are:</b> 18-30 Young Adults 30-65 Adults 65 + Older Adults	
<b>Experiences Available (Acute Care, Acute Episodic, Chronic Diseases):</b>	
<b>Resume Attached? (Y/N):</b>	Y
<b>State License Number and Verification Attached? (Y/N):</b>	
<b>Geographic Area:</b>	
<b>Student Name:</b>	
<b>Is Site Part of a Network? Any Satellite Sites? (Y/N):</b>	
<b>General Placement Notes:</b>	



## FNP Clinical Preceptor Checklist

<b>Preceptor Name:</b>	
<b>Credentials:</b>	
<b>Program:</b>	FNP
<b>Certification (ANCC, AANP):</b>	
<b>Years in Practice in Population Focus:</b>	
<b># of Students Concurrently:</b>	1
<b>Email:</b>	
<b>Site Name:</b>	
<b>Site Address:</b>	
<b>Web Site:</b>	
<b>Phone Number:</b>	
<b>Days/Hours Worked by Provider:</b>	
<b>Average Patients per Hour (5-30 pts/day)</b>	
<b>Languages Served by the Provider (include % of Patients)</b>	
<b>Type of Site (Rural Clinic, Private Practice, Public Health) and Major Payer Source:</b>	
<b>Characteristics of Patients- % of Patients that are:</b> <b>0-6 Peds</b> <b>6-18 Kids/Teens</b> <b>WH</b>	
<b>Experiences Available (Well Care, Acute Episodic, Chronic Diseases):</b>	
<b>Resume- Attached (Y/N):</b>	
<b>State License # and Verification Attached (Y/N)</b>	
<b>Geographic Area</b>	
<b>Student Name</b>	
<b>Is site part of a Network?/Any satellite sites? (Y/N)</b>	
<b>General Placement Notes:</b>	



Georgetown University  
NURSING@GEORGETOWN  
Masters in Nursing Delivered Online

### Nurse Midwifery & WHNP Program Clinical Site Information Form

<b>Name of Practice</b>	
<b>Provider Name</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Office Phone/Fax</b>	
<b>Email</b>	
<b>Web Site</b>	
<b>Second site: Hospital, Birth Center Name, address, contact information</b>	
<b>Practice CNM Director</b>	
<b>Phone: Office/Mobile/Beeper</b>	
<b>Email</b>	
<b>CNM Coordinator of Students</b>	
<b>Phone: Office/Mobile/Beeper</b>	
<b>Email</b>	
<b>Medical Consultant (MD/DO)</b>	
<b>Contact Info</b>	
<b>Staffing:</b>	
<b># CNMs on staff: #FTEs</b>	
<b>#WHNPs</b>	
<b>#MDs <input type="checkbox"/> Ob/Gyn <input type="checkbox"/> FP?</b>	
<b>Population Served:</b>	
<input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Vulnerable _____ % of Total Clientele	
<b>Ethnic populations/language=</b> _____ % of Total Clientele	

<b>Ambulatory Visit Types</b>	<b>Approx # per Month</b>
<b>Obstetric</b>	
<b>Postpartum</b>	
<b>Well Woman/Gyn</b>	
<b>Family Planning</b>	
<b>Peri/Menopause</b>	
<b>Primary Care/Common Health Problems</b>	
<b>Newborn</b>	
<b>Other Specialty, e.g., infertility, diabetes, high risk, complex gyn?</b>	
<b>Ambulatory Care</b>	
<b># of Ambulatory Sites</b>	
<b>Days w/Clinic Hours</b>	<input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Weds <input type="checkbox"/> Thurs <input type="checkbox"/> Fri
<b>Timing day/evening hrs?</b>	
<b>Average Patients per Hour/Day</b>	
<b>EMR?</b>	
<b>Intrapartum Care</b>	<b>Average # Births/Month:</b>
<b>Birth site(s):</b>	
<b>Hospital</b> <input type="checkbox"/> University <input type="checkbox"/> Tertiary <input type="checkbox"/> Community	
<b>Out of Hospital Birth Center</b> AABC Certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Home</b>	
<b>#MDs</b> <input type="checkbox"/> Ob/Gyn <input type="checkbox"/> FP?	
<b>Other Students at this Site?:</b>	
<b>Midwifery? What Schools? Online?</b>	
<input type="checkbox"/> NP Students <input type="checkbox"/> Residents <input type="checkbox"/> Medical Students <input type="checkbox"/> Other	
<b>Additional Offices:</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Office Phone/Fax:</b>	
<b>Email</b>	
<b>Student Name</b>	
<b>Geographic Area</b>	
<b>Is site part of a Network? (Y/N)</b>	
<b>General Placement Notes</b>	



## **Nurse Educator Program Faculty Preceptor Checklist**

### **Site Eligibility Requirements:**

- All faculty preceptor sites must be fully accredited through CCNE or NLNAC, and be approved by the state's board of nursing.
- All institutions must be able to provide an opportunity for students to work in the clinical setting.

**Preceptor Eligibility Requirements:** Please indicate which eligibility option potential preceptor meets:

### **Preceptor Requirements *Option #1:***

1. **Licensure:** A currently active, in good standing, registered nurse license.
2. **Education:** A master's or doctoral degree in nursing or education (e.g. Ed.D.) with:
  - a. A major emphasis in nursing education (e.g. graduated with degree in nursing education, not just nursing)
  - OR**
  - b. Nine or more credit hours of graduate-level education courses
    - i. Examples: Post-Master's Certificate from Nurse Educator program (preferred) **OR** documented graduate course work in areas such as curriculum development and evaluation, Instructional Design, Principles of Adult learning; Assessment/Measurement & Evaluation, Principles of Teaching and Learning, and Instructional Technologies (transcripts required).
3. **Certifications Preferred (Not Mandatory):** CNE, RN-BC
4. **Experience:** Two years or more of recent full-time employment (as defined by institution) in the academic faculty role, teaching in the undergraduate department within last 3 years.

### **Preceptor Requirements *Option #2:***

1. **Licensure:** A currently active, in good standing, registered nurse license.
2. **Education:** A master's or doctoral degree in nursing (with a major emphasis in a role other than nursing education)
3. **Certifications Preferred (Not Mandatory):** CNE, RN-BC
4. **Experience:** Four years or more of recent full-time employment (as defined by institution) in the academic faculty role, teaching in the undergraduate department within last 5 years.



Preceptor Name:	
Site Name:	
Preceptor Credentials and Certifications:	
Types of Programs offered by Institution: (e.g. ASN, BSN, Diploma)	
Institutional Accreditations (e.g. CCNE, NLNAC)	
Years of practice in faculty role:	
Undergraduate courses assigned over entire academic year:	
Class Schedule: (Days & Times)	
Will there be educational opportunities for the student to participate in a Simulation Setting: (Y/N)	
Email:	
Site Address:	
Website:	
Phone Number:	
Curriculum Vitae – Attached (Y/N)	
State license # and verification attached: (Y/N)	
Geographic Area:	
Student Name:	
What are the student's nursing specialty areas?	
General Placement Notes:	
Will this institution be able to provide the student with teaching experiences in the clinical setting?	
Will this institution be able to provide the student with clinical experiences in the student's nursing specialty area?	
Will this institution be able to provide the student with online/distance/ hybrid educational teaching experiences? (Y/N)	



**Nurse Educator Program**  
**Professional Development Preceptor Checklist**

**Site Eligibility Requirements:**

- Nurse Educator/Professional Development Department Models
- Unit Based Nurse Educator Models

**Preceptor Eligibility Requirements:**

1. **Licensure:** A currently active, in good standing, registered nurse license in state of practice.
2. **Education:** A master's or doctoral degree in nursing or education (e.g. Ed.D.) with:
3. **Certifications - Preferred (Not Mandatory):** CNE, RN-BC, CNS
4. **Experience:** Two years or more of recent full-time employment (as defined by institution) as a nursing professional development specialist in past 3 years.



Preceptor Name:	
Site Name:	
Preceptor Credentials and Certifications:	
Years of practice in PD role:	
Description of Duties & Responsibilities: (Attachment)	
Class Schedule: (Days & Times)	
Assigned Courses, Unit, Specialty (areas of expertise):	
Will there be educational opportunities for the student to participate in a Simulation Setting: (Y/N)	
Email:	
Site Address:	
Website:	
Phone Number:	
Resume/CV – Attached (Y/N)	
State license # and verification attached: (Y/N)	
Geographic Area:	
Student Name:	
What are the student's nursing specialty areas?	
Will this institution be able to provide the student with clinical experiences in the student's nursing specialty area?	
General Placement Notes:	
Will this institution be able to provide the student with online/distance/ hybrid educational teaching experiences? (Y/N)	

Affiliation Name	City	State	Zip
Bear Lake Community Center, Inc dba Cache Valley	North Logan	UT	84341
Brigham Pediatrics, P.C.	Brigham City	UT	84302
Callahan Clinic, PC	St George	UT	84790
Canyon View Medical Group	Spanish Fork	UT	84660
Carbon Medical Service Association, Inc.	East Carbon	UT	84520
Cedar City Institute of Women's Health PC	Cedar City	UT	84721
Central Utah Clinic	Provo	UT	84604
Columbia Ogden Medical Center dba Ogden Regional Medical Center	Ogden	UT	
Copperview Medical Center	South Jordan	UT	84095
Cottontree Family Practice	Provo	UT	84604
David C Larson MD PLLC dba Heber Valley Pediatrics	Heber City	UT	84032
Davis family Physicians, PC	Layton	UT	84041
Families First Pediatrics, PLLC	South Jordan	UT	84095
Family Clinic	Price	UT	84501
First Med, LLC	Bountiful	UT	84010
Gunnison Valley Hospital	Gunnison	UT	84634
Healt Clinic of Utah	Ogden	UT	84401
Hunter Medical Center, Inc dba Jordan Meadows Medical Center	West Jordan	UT	84088
Inouye, Dwight H. MD Practice	Gunnison	UT	84635
Intermountain Healthcare	Salt Lake City	UT	84123
Kane County Hospital Foundation dba Valley Medical Center	Orderville	UT	84758
Lake View Family Medicine	Orem UT	UT	84057
Lunt & Kvarfordt, LLC dba Obstetric and Gynecology Care	St George	UT	84770
Maliheh Free Clinic	Salt lake City	UT	84107
McDonald and Rignell, MD's	St. George	UT	84770
Midtown Community Health Center, Inc.	Ogden	UT	84401
Monroe Clinic	Monroe	UT	84754
Mountain UT Family Medicine	Ritchfield	UT	84701
New Horizon Medical Care, Inc.	Riverton	UT	84065
Ogden Clinic Professional Corporation	Ogden	UT	84403
Pediatric care of Ogden, Inc.	South Ogden	UT	84403
Perry Family Medicine	Perry	UT	84302
Physician Group of Utah, Inc.	South Jordan	UT	84095
Riverton Family Health Center	Riverton	UT	84065
Riverview Medical and Walk In Clinic	St George	UT	84770
Southwest Utah Community Health Center, INC dba Family Healthcare Cedar City Clinic	Cedar City	UT	84720
Southwest Family Medicine, LLC	West Jordan	UT	84084
Terashima, Robert, MD dba Pediatrics Office	West Jordan	UT	84088
Timpanogos Regional Hospital	Orem	UT	84057
Tri City Medical	Pleasant Grove	UT	84062
Twiggs, Jerry D. MD, PC dba Dixie Pediatrics	St George	UT	84790
University of Utah Hospitals and Clinics		UT	
Utah Valley Pediatrics-Provo North University Office	Provo	UT	84604
Utah Valley Urgent Care & Family Practice	Lehi	UT	84043
VA Rocky Mountain Network	Salt Lake City	UT	
Valley Obstetrics and Gynecology, PC	Provo	UT	84601
Wasatch Medical Center, PC	Orem	UT	84057
Wasatch Pediatrics, Inc	Park City	UT	84060

**R156-31b. Nurse Practice Act Rule.**

**R156-31b-202. Advisory Peer Education Committee Created - Membership - Duties.**

- (1) In accordance with Subsection 58-1-203(1)(f), there is created the Advisory Peer Education Committee.
- (2) The duties and responsibilities of the Advisory Peer Education Committee are to:
  - (a) review applications for approval of nursing education programs;
  - (b) monitor a nursing education program that is approved for a limited time under Section R156-31b-602 as it progresses toward accreditation; and
  - (c) advise the Division as to nursing education issues.
- (3) The composition of the Advisory Peer Education Committee shall be:
  - (a) ~~five~~ seven RNs or APRNs actively involved in nursing education, including at least one representative from public, private, and proprietary nursing programs; and
  - (b) any member of the Board who wishes to serve on the committee.

Prepared: 10/16/2014

Board Review: 10/23/2014

Advisory Peer Education Committee Review:

**R156-31b. Nurse Practice Act Rule.**

**R156-31b-602. Requirements for Limited-time Approval of Non-accredited Nursing Education Programs.**

(1)(a) Pursuant to Subsection 58-31b-601(2), a nursing education program may, prior to obtaining an accreditation described in Subsection 58-31b-601(1), qualify for a limited time as an approved education program if the program provider demonstrates that application for accreditation has been made.

(b) If the program provider is seeking accreditation from the ACEN or CCNE, the limited-time approval shall expire after 12 months unless Subsection (2) applies.

(c) If the program provider is seeking accreditation from the COA, the limited-time approval shall expire at the end of the COA initial review process unless this Subsection (2) applies.

(2)(a) A program that is granted limited-time approval pursuant to this Subsection (1) shall retain that approval if, during the applicable time period outlined in Subsection (1):

(i) it achieves candidate status with the ACEN;

(ii) it achieves applicant status with the CCNE; or

(iii) it successfully completes the COA initial review process.

(b) A program that meets the qualifications described in this Subsection (2)(a) shall retain its limited-time approval until such time as the accrediting body makes a final determination on the program's application for accreditation.

(c) A program must achieve full accreditation within five years of receiving its initial candidate, applicant, or initial review status with the approved accrediting body.

(3) The provider of a program that receives limited-time approval pursuant to this Subsection (1) and (2) shall, pursuant to this Subsection (4), disclose to each student who enrolls:

(a) that program accreditation is pending;

(b) that any education completed prior to the accrediting body's final determination will satisfy, at least in part, state requirements for prelicensing education; and

(c) that, if the program fails to achieve accreditation, any student who has not yet graduated will be unable to complete a nurse prelicensing education program through the provider.

(4) The disclosure required by this Subsection (3) shall:

(a) be signed by each student who enrolls with the provider; and

(b) at a minimum, state the following: "The nursing program in which you are enrolling has not yet been accredited. The program is being reviewed by the (accrediting body). Any education you complete prior to a final determination by the (accrediting body) will satisfy associated state requirements for licensure. However, if the (accrediting body) ultimately determines that the program does not qualify for accreditation, you will need to transfer into a different program in order to complete your nurse prelicensing education. There is no guarantee that another institution will accept you as a transfer student. If you are accepted, there is no guarantee that the institution you attend will accept the education you have completed at (name of institution providing disclosure) for credit toward graduation."

(5) If an accredited program receives notice or determines that its accreditation status is in jeopardy, the institution offering the program shall:

(a) immediately notify the Board of its accreditation status;

(b) immediately and verifiably notify all enrolled students in writing of the program's accreditation status, including:

(i) the estimated date on which the accrediting body will make its final determination as to the program's accreditation; and

(ii) the potential impact of a program's accreditation status on the graduate's ability to secure licensure and employment or transfer academic credits to another institution in the future;

(c) begin negotiations with other academic institutions to establish a transfer articulation agreement(s).

(6) If an accredited program loses its accreditation, the institution offering the program shall:

(a) submit a written report to the Board within ten days of receiving formal notification from the accrediting body;

(b) meet with the Board as soon as practicable after receiving formal notification from the accrediting body to discuss programmatic options to be considered by the Board including:

(i) an appeal of the accrediting body's action;

(ii) a one-time reapplication with an approved accrediting body for applicant or candidate status with an onsite evaluation by the accrediting body to be completed within three years of the date the accreditation was lost;

(iii) a one-time reapplication for limited-time program approval pursuant to R156-31b-602, subsections (1) through (4); or

(iv) plans to close the program and cease operation;

(c) cease accepting new students; and

(d) arrange for enrolled students to articulate into a comparable nursing education program.

**R156-31b-603. Education Providers – Requirements for Ongoing Communication with the Board.**

An education program that has achieved limited-time approval of its program(s) shall provide to the Board:

- (1) by December 31 of each calendar year, a copy of the program's annual report, as provided to the applicable program accrediting body; and
- (2) within 30 days of receipt or submission, a copy of any correspondence between the program provider and the accrediting body.

**R156-31b. Nurse Practice Act Rule.**

**R156-31b-301c. APRN License – Education, Examination, and Experience Requirements.**

- (1) An applicant who is not currently and validly licensed as an APRN in any state or country shall:
- (a) demonstrate that the applicant holds a current, active RN license in good standing;
  - (b) demonstrate that the applicant has successfully completed an APRN prelicensing education program that meets the requirements of Subsection 58-31b-601(1) and Subsection 58-31b-302(4)(e);
  - (c) pass a national certification examination consistent with the applicant's educational specialty, pursuant to Section R156-31b-301e, and administered by one of the following credentialing bodies:
    - (i) the American Nurses Credentialing Center Certification;
    - (ii) the Pediatric Nursing Certification Board;
    - (iii) the American Association of Nurse Practitioners;
    - (iv) the National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties;
    - (v) the American Midwifery Certification Board, Inc.; or
    - (vi) the Council on Certification of Nurse Anesthetists;
  - (d) if the applicant specializes in psychiatric mental health nursing, demonstrate that the requirements outlined in this Subsection (2) are met; and
  - (e) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.
- (2) Requirements for APRN Specializing in Psychiatric Mental Health Nursing:
- (a) In accordance with Subsection 58-31b-302(4)(g), the supervised clinical practice in mental health therapy and psychiatric and mental health nursing shall consist of a minimum of 4,000 hours of psychiatric mental health nursing education and clinical practice, including mental health therapy, as follows:
    - (i) 1,000 hours shall be credited for completion of clinical experience in an approved education program in psychiatric mental health nursing.
    - (ii) The remaining 3,000 hours shall:
      - (A) be completed after passing the applicable national certification examination and within five years of graduation from an accredited master's or doctoral level educational program;
      - (B) include a minimum of 1,000 hours of mental health therapy practice; and
      - (C) include at least 2,000 clinical practice hours that are completed under the supervision of:
        - (I) an APRN specializing in psychiatric mental health nursing; or
        - (II) a licensed mental health therapist who is delegated by the supervising APRN to supervise selected clinical experiences under the general supervision of the supervising APRN; and
      - (D) unless otherwise approved by the Board and Division, be completed while the individual seeking licensure is under the supervision of an individual who meets the requirements of this Subsection (2)(c).
    - (b) An applicant who obtains all or part of the clinical practice hours outside of Utah may receive credit for that experience by demonstrating that the training completed is equivalent in all respects to the training required under this Subsection (2)(a).
      - (c)(i) An approved supervisor shall verify practice as a licensee engaged in the practice of mental health therapy for not less than 4,000 hours in a period of not less than two years.
        - (ii) Duties and responsibilities of a supervisor include:
          - (A) being independent from control by the supervisee such that the ability of the supervisor to supervise and direct the practice of the supervisee is not compromised;
          - (B) supervising not more than three supervisees unless otherwise approved by the Division in collaboration with the Board; and
          - (C) submitting appropriate documentation to the Division with respect to all work completed by the supervisee, including the supervisor's evaluation of the supervisee's competence to practice.
  - (3) An applicant who holds a current APRN license issued by another state or country shall:
    - (a) demonstrate that the license issued by the other state or country is current, active, and in good standing as of the date of application;
    - (b) demonstrate that the APRN prelicensing education completed by the applicant:
      - (i) if completed on or after January 1, 1987:
        - (A) is equivalent to APRN prelicensing education approved in Utah as of the date of the applicant's graduation; or
        - (B) constitutes a bachelor degree in nursing; and
      - (ii) if a foreign education program, meets all requirements outlined in Section R156-31b-301d;

(c) if the applicant specializes in psychiatric mental health nursing, demonstrate that the applicant has successfully engaged in active practice in psychiatric mental health nursing for not less than 4,000 hours in the three-year period immediately preceding the date of application; and

(d) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

(4) An applicant who has been licensed previously in Utah, but whose license has expired, lapsed, or been on inactive status, shall:

(a) demonstrate current certification in the individual's specialty area; and

(b) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

(5) An applicant who has been licensed previously in another state or country, but whose license has expired or lapsed, shall:

(a) comply with this Subsection (3)(b);

(b) demonstrate that the applicant is currently certified in the individual's specialty area; and

(c) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

**R156-31b. Nurse Practice Act Rule.**

**R156-31b-609. Standards for Out-of-State Programs Providing Clinical Experiences in Utah.**

A nursing education program provider located in another state that desires to use Utah health care facilities for ~~[pre-licensure]~~ clinical experiences for one or more students shall, prior to placing a student, meet with the Board and demonstrate to the satisfaction of the Board that the program:

- (1) has been approved by the home state Board of Nursing;
- (2) has been fully accredited by the ACEN, CCNE, or COA;
- (3) has clinical faculty who:
  - (a) are employed by the nursing education program;
  - (b) meet the requirements to be a faculty member as established by the accrediting body and the home state's Board of Nursing; and
- (c) are licensed in good standing in Utah or a Compact state;
- (4) ~~[is]~~ are affiliated with an institution of higher education;
- (5) has a plan for selection and supervision of:
  - (a) faculty or preceptor; and
  - (b) the clinical activity, including:
    - (i) location, and
    - (ii) date range~~[-and]~~.
- ~~[(6) has current clinical placement agreements, executed within the prior 12 months, in place at Utah facilities.]~~

Proposed by Advisory Peer Education Committee:

Reviewed by Board: