



Rules of
Department of Insurance,
Financial Institutions and
Professional Registration
Division 2200—State Board of Nursing
Chapter 2—Minimum Standards for Approved Programs
of Professional Nursing

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**Title 20—DEPARTMENT OF
INSURANCE, FINANCIAL
INSTITUTIONS AND
PROFESSIONAL REGISTRATION**
Division 2200—State Board of Nursing
Chapter 2—Minimum Standards for
Approved Programs of
Professional Nursing

20 CSR 2200-2.001 Definitions

PURPOSE: This rule defines terms used in 20 CSR 2200 and throughout this chapter.

(1) When used in 20 CSR 2200-2, the following terms mean:

(A) Accredited—The official authorization or status granted by an agency for a program or sponsoring institution through a voluntary process;

(B) Administrator—Registered professional nurse with primary authority and responsibility for administration of program, regardless of job title;

(C) Approved—Recognized by the board as meeting or maintaining minimum standards for educational programs preparing professional nurses;

(D) Annual report—Report submitted annually by the administrator of the program that updates information on file with the board and validates continuing compliance with minimum standards;

(E) Appeal policy and procedure—An established procedure for processing complaints; may also be known as a complaint procedure, due process, appeals procedure, or problem resolution;

(F) Associate degree program—Program leading to associate degree in nursing conducted by an accredited degree granting institution;

(G) Baccalaureate degree program—Program leading to baccalaureate degree in nursing conducted by an accredited degree granting institution;

(H) Board—Missouri State Board of Nursing;

(I) Campus—A specific geographic program location with a distinct student body and coordinator at which all appropriate services and facilities are provided;

(J) Certificate of approval—Document issued by the board to programs of nursing which have met minimum standards;

(K) Class—A discrete cohort of students admitted to a nursing program, designed to begin a course of study together on a specific date and to graduate together on a specific date;

(L) Clinical experience—Faculty planned and guided learning activities designed to

meet course objectives or outcomes and to provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the delivery of nursing care to an individual, group, or community;

(M) Clinical simulation—An educational experience that creates realistic scenarios where students engage in nursing practice under the direction of nursing faculty;

(N) Clinical skills laboratory—Designated area where skills and procedures can be demonstrated and practiced;

(O) Conditional approval—Status of a program that has failed to meet or maintain the regulations or requirements, or both, set by the board. This status is subject to the program conforming to the requirements and recommendations within a time period set by the board;

(P) Cooperating agency—A corporation, hospital, or other organization which has a written agreement with the program to provide clinical education opportunities;

(Q) Coordinator—Registered professional nurse with authority and responsibility for a campus nursing program as delegated by the administrator of the nursing program;

(R) Course objectives—Measurable statements that guide experiences and activities that help learners meet established requirements for a specific course;

(S) Curriculum—Planned studies and learning activities designed to lead students to graduation and eligibility for application for licensure;

(T) Diploma program—Program leading to diploma in nursing sponsored by a health care institution;

(U) Direct care—A clinical experience in which patient care is given by the student under the direction of the faculty member or preceptor;

(V) Distance learning—Curriculum provided from a main campus location to another geographic location, primarily through electronic or other technological methods;

(W) Endorsement—Process of acquiring licensure as a nurse based on original licensure by examination in another state, territory, or country;

(X) Faculty—Individuals designated by sponsoring institution with responsibilities for development, implementation, and evaluation of philosophy and/or mission, objectives, and curriculum of nursing program;

(Y) Full-time—Those individuals deemed by sponsoring institution to meet definition for full-time employment;

(Z) Governing body—Body authorized to establish and monitor policies and assume responsibility for the educational programs;

(AA) Graduate competency—Individual

graduate behaviors;

(BB) Information technology—The study designed for development, implementation, support, or management of computer-based information systems, particularly software applications and computer hardware;

(CC) Initial approval—Status granted a program of professional nursing until full approval status is granted or denied;

(DD) Minimum standards—Criteria which nursing programs shall meet in order to be approved by the board;

(EE) Mission—Overall statement of purpose that faculty accept as valid and is directly related to curriculum practices;

(FF) Multiple campuses—Distinct and separate geographic location offering the same program, providing the same services, and operated by the same sponsoring institution;

(GG) NCLEX-RN® examination—National Council Licensure Examination for Registered Nurses;

(HH) Objectives—Measurable statements describing anticipated outcomes of learning;

(II) Observational experiences—Planned learning experiences designed to assist students to meet course objectives through observation;

(JJ) Part-time—Individuals deemed by the sponsoring institution to meet the definition for part-time employment;

(KK) Philosophy—A composite of the beliefs that the faculty accepts as valid and is directly related to curriculum practices;

(LL) Pilot program/project—Educational activity which has board approval for a limited time and which otherwise would be out of compliance with minimum standards;

(MM) Preceptor—Registered professional nurse assigned to assist nursing students in an educational experience which is designed and directed by a faculty member;

(NN) Pre-licensure—Initial educational program in nursing leading to entry-level licensure;

(OO) Program—Course of study leading to a degree or diploma;

(PP) Program outcomes—Measurable statements defining aggregate student achievements;

(QQ) Requirement—A mandatory condition that a school or program meets in order to comply with minimum standards;

(RR) Satellite location—A site geographically separate from but administered and served by a primary program campus;

(SS) Sponsoring institution—The institution that is financially and legally responsible for the nursing program;

(TT) Statement of need and feasibility—Current evidence of need for professional and



practical nurses, additional nursing program(s), and community support;

(UU) Systematic evaluation plan—Written plan developed by faculty for comprehensive evaluation of all aspects of the program; and

(VV) Written agreement—Formal memorandum of understanding or contract between a nursing education program and a cooperating agency, which designates each party's responsibilities for the education of nursing students.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.001. Original rule filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.001, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.010 Approval

PURPOSE: This rule defines the approval status and process for programs of professional nursing.

(1) Pre-licensure programs granting diploma, associate degree, baccalaureate degree, or master degree with a major in nursing shall obtain approval from the board.

(2) Purposes of Approval.

(A) To promote the safe practice of professional nursing by setting minimum standards for programs preparing entry-level professional nurses.

(B) To assure that educational requirements for admission to the licensure examination have been met and to facilitate endorsement in other states, territories, countries, or a combination of these.

(C) To encourage continuing program improvement through assessment, evaluation, and consultation.

(D) To assist programs of professional nursing in developing and maintaining academic standards (theory and clinical) that are congruent with current educational and nursing practice standards.

(3) Classification of Approval.

(A) Initial approval is the status granted a program of professional nursing until full

approval is granted or denied.

(B) Full approval is the status granted a program of professional nursing after the program has graduated one (1) class and has met and continues to meet regulations or requirements.

(C) Conditional approval is the status of a program that has failed to meet or maintain the regulations or requirements set by the board.

(4) Initial Approval Status.

(A) Process for Obtaining Initial Approval—

1. An accredited institution of higher education desiring to establish a program of professional nursing shall submit a petition to the board at least three (3) months prior to the submission of a proposal. Prior to submission of a petition, nursing programs operating under the institution's sponsorship shall meet requirements for full program approval. The petition shall include: the name and location of the sponsoring institution and its accreditation status; the mission statement of the sponsoring institution and the mission statement of the proposed program; the proposed location (and satellites) in relation to the administrative offices of the sponsoring institution; statement of need and feasibility; type and length of the nursing program proposed; and tentative budget plans including evidence of financial resources adequate for planning, implementing, and continuing the nursing program. The statement of need and feasibility shall include:

A. Documentation of the need for the nursing program including community and economic development need, rationale for why the program should be established, and documentation of employers' need for graduates of the proposed program;

B. Number of professional nursing and practical nursing programs in the area and potential impact on those nursing programs;

C. Number and source of anticipated student population;

D. Letters of support for the proposed nursing program;

E. Letter(s) from potential clinical sites; including a description of potential clinical sites, average daily patient census, and the ability to provide clinical placement to potential students in addition to those of existing nursing programs to meet program objectives and outcomes; and

F. Source of potential qualified faculty and anticipated ratio of faculty to student enrollment. Upon board review of the petition, the board shall have the authority to approve or deny the petition. The petition shall be accepted by the board prior to sub-

mission of a proposal. Revised petitions may be submitted to the board. Each petition shall remain active for no more than one (1) calendar year from the date of review by the board. The board will electronically notify nursing programs of the accepted petition;

2. Each sponsoring institution shall have only one (1) program proposal under consideration for initial approval at any one (1) time;

3. A program proposal shall be written and presented to the board by the administrator of the proposed program. The proposal shall be written to reflect compliance with the Minimum Standards for Programs of Professional Nursing as prescribed in 20 CSR 2200-2.050 through 20 CSR 2200-2.130. The proposal shall bear the signature of the administrator who shall meet the criteria in 20 CSR 2200-2.060(1)(B) and shall be active in the position on a full-time basis at least nine (9) months and preferably one (1) year prior to the entry of the first class. The number of copies of the proposal, as specified by the board, shall be accompanied with the required application fee. Submission of the application fee shall initiate review of the proposal. The proposal shall be prepared following the reporting format and include each component as indicated in paragraph (4)(A)4. of this rule. The proposal shall remain active for no more than one (1) calendar year from the date of review by the board. No more than two (2) proposal revisions shall be accepted. Members designated by the board shall review the proposal and make recommendations prior to presentation of the proposal to the board. Board approval of the proposal with or without contingencies shall be obtained no later than six (6) months prior to the anticipated opening date;

4. A proposal submitted shall contain the following information:

A. Curriculum.

(I) Philosophy and/or mission.

(II) Graduate competencies.

(III) Curriculum sequence.

(IV) Course descriptions and objectives with number of credit hours for all courses.

(V) Systematic evaluation plan.

(VI) Evidence of eligibility for articulation of credits related to baccalaureate completion programs;

B. Students.

(I) Maximum number of students per class.

(II) Number of classes admitted per year.

(III) Number of students anticipated in initial class.



(IV) Plan for increase to maximum enrollment, if applicable.

(V) Admission criteria.

(VI) Plans for progression and retention of students.

(VII) Appeal policies and procedures.

(VIII) Availability and accessibility of student services;

C. Faculty.

(I) Plan for hiring full-time and part-time theory and clinical faculty. This shall include full-time equivalents, student to faculty ratios, and full-time to part-time faculty ratios to meet initial and increasing enrollment.

(II) Position descriptions;

D. Support services personnel.

(I) Number of full-time and part-time ancillary support services personnel.

(II) Position descriptions;

E. Sponsoring institution.

(I) Evidence of authorization to conduct the program of professional nursing by the governing body of the sponsoring institution.

(II) Evidence of accreditation by an agency recognized by the United States Department of Education.

(III) Current organizational chart(s) illustrating the relationship of the program to the sponsoring institution and the faculty structure within the proposed program.

(IV) Evidence of financial stability and resources of the sponsoring institution and the program of nursing; and

F. Facilities.

(I) Description of educational facilities to be used by the professional nursing program such as classrooms, library, offices, clinical skills laboratory, and other facilities.

(II) Description of planned or available learning resources to include such items as equipment, supplies, library services, computers, and technology.

(III) Letter(s) from potential clinical sites; including a description of potential clinical sites, average daily patient census and the ability to provide clinical placement to potential students in addition to those of existing nursing programs to meet program objectives and outcomes.

(IV) A letter of intent from each proposed cooperating agency stating its ability to provide the appropriate educational experiences to meet program objectives and outcomes;

5. Site survey. Representatives from the board shall make an on-site survey to verify implementation of the proposal and compliance with 20 CSR 2200-2.050 through 20 CSR 2200-2.130; and

6. The board's decision to grant initial approval is contingent upon evidence from the site survey that the program is being implemented in compliance with 20 CSR 2200-2.050 through 20 CSR 2200-2.130. Initial program approval contingent on the site survey shall remain active for no more than one (1) calendar year prior to program start.

(B) Throughout the period of initial approval, the program shall submit an annual survey.

(C) Upon graduation of the program's first class and receipt of results of the National Council Licensure Examination for Registered Nurses (NCLEX-RN®), the board will review the following:

1. The program's compliance with minimum standards during initial approval including the program's adherence to the approved proposal and changes authorized by the board;

2. Report of an on-site survey;

3. Report of National Council Licensure Examination for Registered Nurses results (see 20 CSR 2200-2.180(1));

4. Identification and analysis of class graduation rate; and

5. Submission of program's ongoing systematic evaluation plan with available data.

(D) After its review, the board shall decide to continue initial approval for a period of not more than one (1) year, deny approval, or grant full approval.

(5) Full Approval Status.

(A) Annual Report. Each program and each campus of each program shall complete and submit the board's annual survey by the established deadline. Following review by the board, each program shall be notified of the board's action(s).

(B) A program's approval status shall be subject to review by the board if the required annual report is not received within thirty (30) days from the established deadline.

(C) On-Site Surveys. On-site surveys shall be made on a scheduled basis, at the direction of the board, or upon request of the nursing program. Each nursing program shall be surveyed typically at five- (5-) year intervals. If the program is accredited by a national nursing accreditation agency, the nursing program may request that the on-site survey be scheduled in coordination with a national nursing accreditation agency visit. Representatives of the board shall form a survey team to conduct each on-site survey. Each survey team shall consist of two (2) or more persons qualified to conduct on-site surveys. The program shall solicit public comments in preparation for each scheduled on-site survey. Evidence of

solicitation of public comments shall be available for review during the on-site survey.

(D) Additional Visits/Surveys. At least two (2) representatives of the board shall make additional visits/surveys as deemed necessary by the board. A program may request additional visits.

(6) Conditional Approval Status.

(A) Should circumstances warrant, the board will notify the program administrator of concerns regarding the program and the administrator will be requested to respond to those concerns.

(B) Should circumstances be such that instructional quality and integrity of the program is jeopardized, the board may impose a moratorium on student admissions.

(C) A program may be placed on conditional approval status if it has failed to meet or maintain the rules/regulations or requirements, or both, set by the board. The program will remain on conditional approval status until such time as the deficiencies are corrected to the satisfaction of the board.

(D) A program's approval may be withdrawn pursuant to section 335.071.3., RSMo, for noncompliance with minimum standards. A program which fails to correct identified deficiencies to the satisfaction of the board shall, after notice and hearing, be removed from the board's listing of approved programs.

(7) Annual Registration Requirements.

(A) An application for annual registration shall be sent to each approved program and each campus of each program from the board. Failure to receive the application will not relieve the program of its obligation to register.

(B) A separate annual registration form and designated fee as established in 20 CSR 2200-4.010(1)(F) shall be submitted to the board for each approved program and each campus of each program prior to June 1 of each year.

(C) A program's approval status shall be subject to review by the board if the required registration fee is not received within thirty (30) days of the June 1 deadline.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.010. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Amended: Filed Oct. 14, 1981, effective Jan. 14, 1982. Amended: Filed Dec. 10, 1981, effective March 11,*



1982. *Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Amended: Filed Oct. 14, 1987, effective Jan. 29, 1988. Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Dec. 14, 1994, effective May 28, 1995. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.010, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.020 Discontinuing and Reopening Programs

PURPOSE: This rule establishes the procedures for discontinuing and reopening programs of professional nursing.

(1) Program Discontinuation.

(A) A plan for closure shall be submitted to the board, at least six (6) months and, preferably, one (1) year prior to closing the program and shall include:

1. Closing date; and
2. Plans for completion of program for currently enrolled students.

(B) The plan for closure shall be approved by the board prior to implementation.

(C) Date of completion on the diploma or degree shall be on or before the official closing date of the program.

(D) Application for registration with the required fee shall be submitted annually to the board as long as there are students in the program.

(E) Classroom and clinical instruction approved by the board shall be provided until the designated date of closing. The sponsoring institution shall be responsible for providing a complete educational program for the currently enrolled students or shall provide a mechanism for transfer.

(F) Records for all graduates and for all students who attended the program shall be filed in the manner used by the institution conducting the program.

1. Transcripts of all courses attempted or completed by each student attending the program shall be maintained by the designated custodian. Provisions for obtaining copies of transcripts shall be maintained.
2. If the program closes but the sponsoring institution continues, that institution shall assume the responsibility for the records and notify the board, in writing, of the location of the storage of the records.

3. If both the program and the sponsoring institution close, the transcripts shall be given permanent custodial care and the board shall be notified in writing of the name and address of the custodian.

(G) A program closure summary indicating compliance with the requirements of this rule shall be submitted to the board no later than thirty (30) days after the actual date for program closure.

(2) Program Reopening. The procedure for reopening a program is the same as for initial approval in 20 CSR 2200-2.010(4)(A).

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.020. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective Jan. 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.020, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.030 Change of Sponsorship

PURPOSE: This rule defines the procedure for a change of sponsorship of a professional nursing program.

(1) The institution assuming the sponsorship of an approved program shall notify the board in writing within ten (10) working days after the change of sponsorship.

(2) A change in sponsorship form provided by the board shall be completed and returned within thirty (30) days of receipt of the form.

(3) Any proposed changes that affect the criteria included in 20 CSR 2200-2.010(4)(A)1.-4.

shall be approved by the board prior to implementation.

(4) Program documents shall be changed to indicate the appropriate sponsor.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.030. This version filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982. (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.030, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.035 Multiple Campuses

PURPOSE: This rule defines the procedures for multiple campuses.

(1) Each campus of a program will be treated independently for purposes of compliance with the minimum standards set forth by the board.

(2) Each campus is required to submit a separate annual survey, annual registration, and annual registration fee.

(3) The sponsoring institution shall submit a proposal as indicated in 20 CSR 2200-2.010(4)(A) and receive approval from the board before opening an additional campus. Each additional campus shall be surveyed.

(4) Each campus shall have a full-time faculty person designated as the coordinator who reports to the program administrator. Each program coordinator shall meet the faculty requirements for appointment.

(5) Discipline of one (1) campus will not automatically result in discipline of other campuses of the same program.



(6) Each campus will be evaluated individually concerning licensure examination results.

(7) Satellite locations do not qualify as multiple campuses.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.035. Original rule filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.035, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.040 Program Changes Requiring Board Approval, Notification, or Both

PURPOSE: This rule defines program changes which require board approval, notification, or both.

(1) Board approval is required for changes of the following:

- (A) Substantial revision of curriculum;
- (B) Length of program;
- (C) Increase number of students by enrollment or transfer, by more than one (1) beyond the number approved by the board;
- (D) Pilot program/project; and
- (E) Relocation of the program or any of its components.

(2) The request for board approval of program changes shall include:

- (A) Narrative description of proposed change(s);
- (B) Rationale for proposed changes including consistency with the program's philosophy and/or mission and graduate competencies;
- (C) Side by side comparison of proposed changes and current practice when applicable;
- (D) Timetable for implementation;
- (E) Narrative of the impact of proposed changes on the program;
- (F) Explanation of the impact of the proposed changes on currently enrolled students, faculty, graduates, or resources; and
- (G) Methods of evaluation to be used to determine the effect of the change.

(3) The request shall be submitted by a deadline established by the board.

(4) A change in name and/or address of the program shall be submitted in writing to the board within thirty (30) days of the change.

(5) A change in a program's accreditation status by any accrediting body shall be submitted in writing to the board within thirty (30) days of the program's notification of such.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.040. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.040, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.050 Organization and Administration of an Approved Program of Professional Nursing

PURPOSE: This rule defines the organization and administration of an approved program of professional nursing.

(1) Philosophy and/or mission of the program shall be in writing and shall be consistent with the philosophy and/or mission statement of the sponsoring institution.

(2) Graduate competencies shall be derived from the program's philosophy and/or mission.

(3) The philosophy and/or mission and the graduate competencies shall be the basis on which the curriculum is developed.

(4) There will be a faculty governance structure with responsibility for the nursing curriculum and the admission, progression and graduation of students.

(A) Meetings shall be scheduled at stated intervals.

(B) Written minutes of all meetings shall be maintained.

(5) The program shall have a current organizational chart(s) illustrating the relationship of the program to the sponsoring institution and the faculty structure within the nursing program.

(6) Finance.

(A) There shall be an annual budget to support the program.

(B) The administrator of the program shall manage the budget.

(C) The administrator, with input from the faculty, shall make recommendations for the budget.

(7) Clerical Assistance. Each program shall have secretarial and other support services sufficient to meet the needs of the program.

AUTHORITY: sections 335.036 and 335.071, RSMo 2000. This rule was originally filed as 4 CSR 200-2.050. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.050, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999; 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.060 Administrator/Faculty

PURPOSE: This rule defines the categories, qualifications and competencies, responsibilities, and employment policies of administrator/faculty.

(1) Program Administrator.

(A) The administrator shall have the primary responsibility and the authority for the administration of the nursing program and shall be employed full-time.

(B) Criteria for Appointment—

1. Current, active licensure to practice professional nursing in Missouri; the candidate's license to practice professional nursing has never been disciplined in any jurisdiction;

2. Graduate degree in nursing with a clinical component in either the bachelor's or



master's degree; a doctoral degree is recommended;

3. Academically and experientially qualified and maintains expertise in area of responsibility; and

4. Approved by the board prior to appointment. Academic transcript(s) that reflects eligibility for the position shall be submitted to the board for approval prior to appointment.

(C) Program administrators with responsibility for two (2) or more nursing programs shall designate full-time faculty as program coordinators. The coordinator's workload shall allow time for day-to-day management of one (1) nursing program under the direction of the program administrator. Each program coordinator shall meet faculty requirements for appointment.

(2) Nursing Faculty.

(A) Nurse faculty shall have responsibility for developing, implementing, and evaluating the nursing program.

(B) Criteria for Appointment—

1. Current, active licensure to practice professional nursing in Missouri; the candidate's license to practice professional nursing has never been disciplined in any jurisdiction;

2. Educational requirements—

A. Nursing faculty teaching in associate degree or diploma programs shall have a minimum of a baccalaureate degree in nursing with a clinical component. A graduate degree in nursing is recommended; and

B. Nursing faculty teaching in baccalaureate programs shall have a minimum of a graduate degree. Seventy-five percent (75%) of full-time faculty shall have a graduate degree with major in nursing. A doctoral degree is recommended. Faculty without a nursing major in their graduate degree shall have a bachelor's degree in nursing with a clinical component;

3. Academically and experientially qualified and maintain expertise in areas of responsibility;

4. Contingent faculty approval may be granted if—

A. The program meets requirements for full board program approval;

B. The program presents sufficient evidence that all options to fill the respective position with a candidate who meets academic requirements have been exhausted;

C. The candidate has current licensure to practice professional nursing in Missouri; the candidate's license to practice professional nursing has never been disciplined in any jurisdiction;

D. The candidate is experientially qualified and maintains expertise in areas of responsibility;

E. The candidate is projected to receive the required degree within twelve (12) months of hire; faculty candidates working on a doctoral degree shall complete the required degree within twenty-four (24) months of hire; and

F. Faculty approved on contingency shall work under the direction of a board-approved faculty; and

5. Academic transcript(s) that reflects eligibility for the position shall be submitted to the board. Faculty candidates shall be approved by the board prior to appointment.

(3) Responsibilities. The administrator and faculty of the program shall be responsible for, but not limited to—

(A) Compliance with minimum standards;

(B) Ongoing systematic development, implementation, and evaluation of the total program in relation to stated philosophy and/or mission and graduate competencies of the program;

(C) Instruction and evaluation of students;

(D) Providing input on program related policies regarding recruitment, admission, retention, promotion, and graduation of students;

(E) Availability of academic advisement and guidance of students;

(F) Maintenance of student records in compliance with institutional policy;

(G) Ensuring confidentiality of student records;

(H) Maintenance of clinical and educational competencies in areas of instructional responsibilities. Professional competence activities may include nursing practice, continuing education, writing for publication, and/or participation in professional associations; evidence of ongoing professional competence related to specialty area instruction shall be maintained;

(I) Participation in the development of program and institutional policies and decision making; and

(J) Experienced faculty shall serve as assigned mentors for less seasoned and new faculty. Records of assigned mentors shall be maintained.

(4) Minimum Number of Faculty. One (1) full-time nursing faculty in addition to the program administrator with sufficient faculty to achieve the objectives of the educational program and such number shall be reasonably proportionate to: number of students enrolled; frequency of admissions; education and experience of faculty members; number

and location of clinical sites; and total responsibilities of the faculty.

(5) Faculty workload shall allow time for class and laboratory preparation, instruction, program evaluation, and professional development.

(6) Non-nurse faculty shall have professional preparation and qualifications in the specific areas for which they are responsible.

(7) Employment Policies.

(A) To the extent required by law, age, marital status, sex, national origin, race, color, creed, disability, and religion shall not be determining factors in employment.

(B) Nursing Program.

1. Personnel policies shall be available in writing and consistent with the sponsoring institution.

2. Position descriptions shall be in writing and shall detail the responsibilities and functions for each position.

3. A planned orientation shall be in writing and implemented. It shall include review of the Missouri Nursing Practice Act (NPA).

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.060. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.060, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.070 Physical Facilities

PURPOSE: This rule defines the physical facilities and resources required by professional nursing programs.

(1) Office Space and Equipment.

(A) The institution shall provide space and equipment to fulfill the purpose of the program.



(B) The administrator of the program shall have a private office.

(C) The coordinator(s) and faculty shall have office space sufficient to carry out responsibilities of their respective positions.

(D) Private areas shall be provided for faculty/student conferences.

(2) Library.

(A) Each program and each campus of each program shall have access to library resources with current and available resources to meet the educational needs of the students and the instructional and scholarly activities of the faculty.

(B) Management of library resources shall include:

1. Budget for acquisition of appropriate resources;

2. System for identifying or deleting outdated resources; and

3. Policies and procedures governing the administration and the use of the library resources shall be in writing and available to students and faculty.

(3) Quiet area designated for study.

(4) Classrooms.

(A) Classrooms shall be of size, number, and type for the number of students and teaching methodology.

(B) Classrooms shall have climate control, ventilation, lighting, seating, furnishings, and equipment conducive to learning.

(C) Storage space shall be available for equipment and supplies.

(5) Clinical Skills Laboratory.

(A) Each program and each campus of each program shall have a clinical skills laboratory sufficient to meet learning outcomes.

(B) Management of clinical skills laboratory shall include:

1. Designated faculty time to manage skills lab resources;

2. Budget allocation for equipment and supplies;

3. Plan for acquisition and maintenance of equipment and supplies; and

4. Policies and procedures governing the administration and the use of the clinical skills laboratory. These policies and procedures shall be in writing and available to students and faculty.

(6) Technology Resources/Computers.

(A) Each program and each campus of each program shall have access to current and available resources to meet the educational needs of the students and the instructional and scholarly activities of the faculty.

(B) Management of technology resources

shall include:

1. Budget for acquisition of current technology, including computers;

2. System for identifying, deleting, and/or replacing resources; and

3. Policies and procedures governing the administration and the use of the technology/computers. These policies and procedures shall be made available to students and faculty.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.070. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.070, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.080 Clinical Sites

PURPOSE: This rule defines selection and use of clinical sites by the programs of professional nursing for required student clinical learning experiences.

(1) Clinical sites shall be selected which will provide direct care and observational learning experiences to meet the objectives of the course.

(A) Observational experiences shall provide learning experiences to meet the course objectives and shall not exceed twenty percent (20%) of the total clinical program hours. Orientation to the facility does not contribute to the twenty percent (20%).

(B) Clinical simulation and clinical skills lab time is at the discretion of the nursing program.

(C) Direct patient care experiences shall be sufficient to achieve identified competencies as well as course and program outcomes.

(D) The ratio of faculty to students in the clinical area shall be designed to promote patient safety and to facilitate student learning.

(E) There shall be evidence of clinical orientation for each nursing course with a clinical component.

(2) Each program shall have written evidence of an agreement with each clinical site which includes time frames for a notification of termination and periodic review.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.080. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.080, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.085 Preceptors

PURPOSE: This rule defines the utilization of preceptors.

(1) Preceptors may be used as role models, mentors, and supervisors of students in professional nursing programs—

(A) Preceptors do not replace faculty in the education of the student but serve to assist faculty and the student in achieving designated objectives of a nursing course;

(B) Preceptors are not to be considered when determining the faculty to student ratio;

(C) Preceptors shall not be used in fundamentals of nursing courses; and

(D) Preceptors shall supervise no more than two (2) students during any given shift. Supervision by a preceptor means that the preceptor is present and available to the student(s) in the clinical setting.

(2) Each nursing program shall have written policies for the use of preceptors which incorporate the criteria listed in this rule.

(3) Responsibilities of preceptors shall include:

(A) Possess current license to practice as a registered professional nurse with at least one



(1) year experience in the area of clinical specialty for which the preceptor is used;

(B) Perform the responsibilities as determined by the nursing program; and

(C) Provide written documentation for faculty regarding the student's performance in relation to meeting designated course objectives.

(4) Responsibilities of the nursing program faculty in regards to utilization of preceptors shall include:

(A) Select the preceptor in collaboration with the clinical site;

(B) Provide the preceptor with information as to the duties, roles, and responsibilities of the faculty, the student, and the preceptor including the communication processes;

(C) Provide the preceptor a copy of the objectives of the course in which the student is enrolled and directions for assisting the student to meet objectives specific to the clinical experience;

(D) Assume responsibility for each student's final evaluation and the assigning of a performance rating or grade;

(E) Be readily available to students and clinical preceptors during clinical learning experiences; and

(F) Shall meet periodically with the clinical preceptors and student(s) for the purpose of monitoring and evaluating learning experiences.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.085. Original rule filed May 4, 1993, effective March 10, 1994. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.085, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.090 Students

PURPOSE: This rule defines admission, readmission, and transfer criteria and services provided students.

(1) Admission, Readmission, and Transfer.

(A) The educational program shall comply with the state and federal laws regarding discrimination in the admission of students.

(B) Policies for admission, readmission, transfer, and advanced placement shall be written, implemented, and evaluated by the faculty.

(C) Admission criteria shall reflect consideration of:

1. Potential to complete the program; and

2. Ability to meet the standards to apply for licensure (see sections 335.046.1 and 335.066, RSMo).

(D) Students who are readmitted or transferred shall complete the same requirements for graduation as other members of the class to which they are admitted.

(E) The board shall approve the maximum number of students enrolled in each program. The criteria for approval of the maximum number will be based on:

1. Availability of qualified faculty;
2. Available clinical experiences; and
3. Educational facility's ability to accommodate students.

(F) Students for whom English is a second language shall meet the same general admission requirements as other students.

(2) Student Services.

(A) Housing. If the school provides housing for students, there shall be written policies governing the facilities.

(B) Health. If the school provides health services for students, there shall be information available regarding a process for accessing and obtaining health care.

(C) Academic Advisement and Financial Aid Services. Academic advisement and financial aid services shall be accessible to all students.

(3) Appeal Procedure. Policies and procedures which afford students due process shall be available for managing academic and nonacademic appeals. Due process for student appeals shall include the providing of written notice of all decisions affecting an individual student. An opportunity to contest facts serving as the basis for decisions and opportunities to appeal decisions to a higher level than the original decision-maker shall be included.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.090. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.090,*

effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.100 Educational Program

PURPOSE: This rule defines the educational program, curriculum plan and requirements, and distance education requirements for programs of professional nursing.

(1) General Purpose.

(A) The program shall have a philosophy and/or mission which guides the curriculum practices.

(B) The curriculum incorporates established professional standards, guidelines, and competencies with clearly stated objectives, graduate competencies, and program outcomes.

(C) The educational program shall provide planned learning experiences essential to the achievement of the stated philosophy and/or mission and graduate competencies and shall demonstrate logical progression.

(D) The educational program shall provide clinical education to facilitate transition to professional nursing practice.

(2) Curriculum Organization and Development.

(A) The nursing faculty shall have the authority and the responsibility to develop, implement, and evaluate the curriculum.

(B) There shall be a written curriculum plan that is logically structured to achieve expected individual and aggregate student outcomes.

(C) Curriculum design of programs of professional nursing shall foster seamless articulation toward Bachelor of Science in Nursing (B.S.N.) completion.

(D) The curriculum shall be planned so that the number of hours/credits/units of instruction are distributed between theory and clinical hours/credits/units to permit achievement of graduate competencies and program outcomes.

(E) Curriculum shall be planned so that each division of the curriculum (whether it be a quarter, term, or semester) has a reasonably equal number of credit hours of instruction and has a beginning and ending date.

(F) The number of credit hours required for completion of the nursing program shall not exceed the number of credit hours required for a comparable degree program.



(G) Student learning experiences shall be directed and evaluated by the faculty and be consistent with the curriculum plan.

(3) Curriculum Requirements. Content may be developed as a separate course or integrated. Integrated concepts shall be evident in the course objectives. Coursework shall include, but is not limited to:

(A) Content in the biological, physical, social, and behavioral sciences to provide a foundation for competent, safe, and effective nursing practice;

(B) Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in patients across the life span and in a variety of clinical settings, to include:

1. Using information technology to communicate, manage knowledge, mitigate error, and support decision-making;

2. Employing evidence-based practice to integrate best research with clinical expertise and patient values for optimal care, including skills to identify and apply best practices to nursing care;

3. Considering moral, legal, and ethical standards in decision-making processes;

4. Understanding quality improvement processes to measure patient outcomes, identify hazards and errors, and develop changes in processes of patient care;

5. Considering the impact of policy and finance of the healthcare system;

6. Involving patients in decision-making and care management;

7. Coordinating and managing continuous patient care;

8. Promoting healthy lifestyles for patient and populations;

9. Working in interdisciplinary teams to cooperate, collaborate, communicate, and integrate patient care and health promotion; and

10. Providing patient-centered culturally sensitive care with focus on respect for patient differences, values, preferences, and expressed needs.

(C) External nursing examinations, if used, shall not be the sole basis for program progression or graduation.

(4) Syllabus Construction. Syllabi shall be current and available to all faculty, students, and cooperating agencies. Each syllabus shall include:

(A) Course description;

(B) Course objectives;

(C) Teaching or learning strategies;

(D) Evaluation methodologies;

(E) Grading scale;

(F) Course policies; and

(G) Clock or credit hour requirements related to theory, lab, and clinical instruction.

(5) Distance Education. Courses/programs of study that utilize distance education shall have—

(A) A course management/delivery platform that is reliable and navigable for students and faculty;

(B) Budgetary support;

(C) Collaborative and interactive learning activities that assist the student in achieving course objectives;

(D) Clinical courses shall be faculty supervised and include direct patient care activities with faculty oversight;

(E) Learning and technology resources, to include library resources, that are selected with input of the faculty and are comprehensive, current, and accessible to faculty and students;

(F) Technical support services for faculty and students;

(G) Access to appropriate and equivalent student services;

(H) Faculty and student input into the evaluation process; and

(I) Recurring interaction between faculty and students.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.100. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Amended: Filed Jan. 8, 1981, effective April 11, 1981. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Dec. 15, 1992, effective Sept. 9, 1993. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.100, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.110 Records

PURPOSE: This rule defines student records required to be kept by programs of professional nursing.

(1) Transcripts.

(A) Transcripts of all courses attempted or completed by each student attending the program shall be maintained permanently.

(B) The official transcript shall identify the following:

1. Date of admission, date of separation from the program, hours/credits/units earned, and the diploma/degree awarded; and

2. Transferred credits, including course titles and credits earned. Name and location of the credit-granting institution shall be maintained as part of graduate records.

(C) Transcripts, including microfiche and computer files, shall be stored in a secured area.

(2) School Records.

(A) Student records shall be stored in an area which is theft resistant and where confidentiality can be ensured or according to sponsoring institution policies for secure storage of records.

(B) The nursing program shall maintain records as required by institutional and nursing program policies.

(3) Compliance with the Family Education Rights and Privacy Act (FERPA) and any applicable regulations shall be strictly maintained.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.110. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.110, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.120 Publications

PURPOSE: This rule defines what must be included in publications published by programs of professional nursing.



(1) Publications shall be current, dated, and internally consistent.

(2) A nondiscrimination policy shall appear in publications specific to the nursing program.

(3) The following information shall be available to the applicant prior to admission:

- (A) Approval status as granted by the board (initial, full, or conditional approval status);
- (B) Admission criteria;
- (C) Section 335.066, RSMo, of the Missouri Nursing Practice Act with an explanation that completion of the program does not guarantee eligibility to take the licensure examination;
- (D) Advanced placement policies;
- (E) Student services;
- (F) Curriculum plan;
- (G) Program costs;
- (H) Refund policy; and
- (I) Financial assistance.

(4) The following information shall be available to the student in writing upon entry:

- (A) Philosophy and/or mission;
- (B) Graduate competencies;
- (C) Grading, promotion, and graduation policies;
- (D) Faculty roster with credentials;
- (E) School calendar;
- (F) Student policies;
- (G) Student's rights and responsibilities; and
- (H) Appeal policies and procedures.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.120. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Amended: Filed Oct. 14, 1981, effective Jan. 14, 1982. Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.120, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.130 Program Evaluation

PURPOSE: This rule provides for evaluation of the professional nursing program by students, faculty, and coordinating agencies.

(1) There shall be a written plan for systematic evaluation of all aspects of the program that includes student objectives, graduate competencies, and program outcomes. The systematic evaluation of the program will document the following:

- (A) Frequency of evaluation;
- (B) Methods of evaluation;
- (C) Person(s) responsible for the evaluation;
- (D) Program-specific benchmarks;
- (E) Actual outcomes with trended data; and
- (F) Program planning and improvement based on analysis of the benchmarks and actual outcomes.

(2) Systematic evaluation of the program shall include evaluation of the following:

- (A) Student achievement of program outcomes;
- (B) Adequacy of program resources to include, but not limited to, fiscal, human, and technical learning resources;
- (C) Clinical experiences to include, but not limited to, evaluation of:
 - 1. Clinical sites by students and faculty;
 - 2. Course and faculty by students; and
 - 3. Students and faculty by representative(s) of clinical site(s); and
- (D) Multiple measures of program outcomes to include, but not limited to, National Council Licensure Examination (NCLEX) pass rates, graduation and job placement rates, and graduate/employer satisfaction with program preparation for new graduates at six (6) months or more after graduation.

(3) Documentation shall indicate that data collected through systematic evaluation has been utilized in the planning and improvement of the program.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.130. This version of rule filed April 20, 1973, effective May 1, 1973. Amended: Filed Dec. 12, 1975, effective Dec. 22, 1975. Readopted: Filed March 12, 1981, effective June 11, 1981. Emergency rescission filed Oct. 22, 1981, effective Nov. 1, 1981, expired Feb. 19, 1982 (Original Rule). Amended: Filed Oct. 14, 1981, effective Jan. 14, 1982. Rescinded: Filed Oct. 22, 1981, effective Feb. 11, 1982 (Original Rule). Rescinded and readopted: Filed Sept. 25, 1991, effective*

March 9, 1992. Amended: Filed Aug. 6, 1998, effective Feb. 28, 1999. Moved to 20 CSR 2200-2.130, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*

20 CSR 2200-2.180 Licensure Examination Performance

PURPOSE: This rule defines the required examination pass rate for first time candidates and its impact on program approval.

(1) The licensure examination performance of first-time candidates from each professional nursing program shall be no less than eighty percent (80%) for each calendar year (January 1 through December 31).

(2) First-time candidates shall include only those graduates of the program who take the licensure examination for the first time within one (1) year of graduation.

(3) The nursing program with a pass rate lower than eighty percent (80%) shall:

- (A) First year—Provide the board with a report analyzing all aspects of the education program, identifying areas contributing to the unacceptable pass rate and plan of correction to resolve low pass rate. The plan of correction shall include:
 - 1. Mission or philosophy of the nursing program;
 - 2. Program governance as defined in 20 CSR 2200-2.050(5);
 - 3. General faculty resources and workload;
 - 4. Student support services;
 - 5. Program admission, progression, and graduation policies;
 - 6. Program graduation rates for the last five (5) years;
 - 7. National Council Licensure Examination for Registered Nurses (NCLEX-RN®) pass rates for the last five (5) years;
 - 8. Job placement rates for the last five (5) years;
 - 9. Program satisfaction, to include student, graduate, and employer data;
 - 10. Number of nursing faculty teaching on full-time and part-time basis; to include part-time clinical faculty and faculty on contingent approval; and
 - 11. Use of systematic program evaluation data related to program planning and improvement;



(B) Second consecutive year—The program may be placed on conditional approval status. The program administrator will be required to appear before and present to the board a current analysis of program effectiveness, problems identified, and plans of correction;

(C) Side-by-side comparison of first-year and second-year analyses of program effectiveness shall be included;

(D) The nursing program placed on conditional approval shall remain on conditional approval (as per 20 CSR 2200-2.010(6)) until it has two (2) consecutive years of pass rates of at least eighty percent (80%) or until the board removes approval pursuant to section 335.071.3., RSMo; and

(E) If, after two (2) years of conditional approval, a nursing program has not demonstrated consistent measurable progress toward implementation of the correction plan and NCLEX-RN[®] pass rates remain below eighty percent (80%), the board shall withdraw approval pursuant to section 335.071.3., RSMo.

AUTHORITY: section 335.036, RSMo Supp. 2012, and section 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.180. Original rule filed Sept. 1, 1998, effective Feb. 28, 1999. Amended: Filed Dec. 1, 2000, effective May 30, 2001. Moved to 20 CSR 2200-2.180, effective Aug. 28, 2006. Rescinded and readopted: Filed April 17, 2007, effective Dec. 30, 2007. Amended: Filed Jan. 11, 2013, effective July 30, 2013.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999, 2007, 2008, 2011 and 335.071, RSMo 1975, amended 1981, 1999.*