



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 4 CSR 200.

(1) When used in 4 CSR 200, the following terms mean:

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

(B) Approved—Recognized by the board as meeting or maintaining minimum standards for educational preparation of professional nurses;

(C) Administrator—Registered professional nurse with authority and responsibility for administration of program;

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

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

(G) Board—Missouri State Board of Nursing;

(H) Campus—A separate geographic location with a separate student body and coordinator;

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

(J) 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;

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

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

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

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

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

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

(Q) Distance learning site—An offering of studies primarily from a campus location to a separate location;

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

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

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

(U) Generic—Initial educational program in nursing leading to entry-level licensure;

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

(W) Graduate competency—Individual graduate behaviors;

(X) Initial approval—Status of a newly established school or program that has not graduated its first class and has not received other approval status;

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

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

(AA) Observational experiences—Faculty planned learning experiences designed to assist students to meet course objectives by the observation of patients/clients;

(BB) Participatory observation—A planned clinical experience in which students under the direction of a faculty member, may participate in basic care activities, such as, assessment of vital signs, collection of data and assistance with activities of daily living where a registered nurse may or may not be present. Students shall have the skills appropriate to the experiences planned. Students may not participate in invasive or complex

nursing activities beyond documented competencies without direct supervision of faculty member or preceptor;

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

(DD) Philosophy—A composite of the beliefs that the faculty accept as valid and is directly related to curriculum practices which may be noted as mission or goals of program;

(EE) Pilot program/project—Educational activity which has board approval for a limited time;

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

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

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

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

(JJ) Statement of need—Current evidence of need for professional and practical nurses and of community support;

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

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

AUTHORITY: sections 335.036 and 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.*

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

20 CSR 2200-2.010 Approval

PURPOSE: This rule defines accreditation in the minimum standards for accredited programs of professional nursing and registration of professional nurses in Missouri.

(1) Generic programs granting diploma, associate degree or baccalaureate degree with a major in nursing shall obtain approval from the Missouri State Board of Nursing.

(A) Purposes of Approval.



1. To promote the safe practice of professional nursing by setting minimum standards for schools preparing entry-level professional nurses.

2. 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.

3. To encourage continuing program improvement through self-study, evaluation and consultation.

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

(B) Classification of Approval.

1. Initial approval is the status granted a program of professional nursing until full approval is granted.

2. Full approval is the status granted a program of professional nursing after the program has graduated one (1) class and has met minimum standards.

3. Conditional approval is the 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 school or program conforming to the requirements set by the board.

(C) Approval Process.

1. Requirements for initial approval.

A. An institution desiring to establish a program of professional nursing should send a letter of intent to the board at least three (3) months prior to the submission of a proposal. The letter of intent must include: the mission statement of the educational institution; approval status of the educational institution; 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.

B. A program proposal shall be written and presented to the board by the administrator of the proposed program with or without faculty assistance. The proposal shall bear the signature of the administrator who shall meet the criteria in 4 CSR 200-2.060(2)(A) 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. Fourteen (14) copies of the proposal must be accompanied by the required application fee. The proposal must be prepared following the reporting format and include each component as indicated in 4 CSR 200-2.010(1)(C). Board approval of the proposal with or without contingencies

must be obtained no later than six (6) months prior to the anticipated opening date.

C. A proposal submitted shall contain the following information:

(I) Statement of need and feasibility study which includes:

(a) Documentation of the need for the nursing program with rationale for why the program should be established;

(b) Number of professional nursing and practical nursing programs in the area and potential effect on those nursing programs;

(c) Number and source of anticipated student population;

(d) Number and type (practical nurse, associate, diploma, and baccalaureate) of nurses available in service area;

(e) Number and type of employers in the service area including documentation that these employers need graduates of the proposed program, including projections of nursing staff needs;

(f) Documentation of community and economic development need and support for the proposed nursing program;

(g) Letters of support for the proposed nursing program; and

(h) Source of potential qualified administrator and faculty;

(II) Curriculum.

(a) Philosophy.

(b) Organizing framework.

(c) Graduate competencies.

(d) Curriculum sequence.

(e) Course objectives and descriptions including credit hours for all courses;

(III) Students.

(a) Number of students per class.

(b) Number of classes admitted per year.

(c) Admission criteria.

(d) Plans for progression and retention of students.

(e) Grievance procedure.

(f) Plan for emergency health care of nursing students;

(IV) Faculty.

(a) Number of full-time and part-time faculty.

(b) Qualifications of faculty.

(c) Position descriptions;

(V) Ancillary personnel.

(a) Position description.

(b) Number of full-time and part-time ancillary personnel;

(VI) Sponsoring institution.

(a) Evidence of authorization to conduct the program of professional nursing.

(b) Approval status of the sponsoring institution.

(c) Description of the governing body and copies of the organizational charts of the sponsoring institution and of the program of professional nursing.

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

(VII) Facilities.

(a) Description of education facilities (classrooms, library, offices, clinical skills laboratory, and other facilities).

(b) Description of available equipment and supplies for clinical development, list of library and learning resources and number of computers available for student use.

(c) Description of clinical sites that will provide educationally sound experience.

(d) A letter of intent from each proposed clinical site indicating that they are able to offer/provide the educational experiences necessary for student learning.

(D) Site Survey.

1. Prior to initial approval a representative from the board shall make an on-site survey to verify implementation of the proposal and compliance with 4 CSR 200-2.050-4 CSR 200-2.130.

(E) Board Decision.

1. Initial approval will be granted if the site survey indicates the proposal has been implemented and the program is in compliance with 4 CSR 200-2.050-4 CSR 200-2.130 as determined by the board or its representative(s). Throughout the period of initial approval, the program will be evaluated annually. Upon graduation of the first class of students which has completed the entire program and receipt of results of the National Council Licensure Examination for Registered Nurses (NCLEX-RN® examination), the board will review—

A. 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;

B. Report of the on-site survey (if conducted);

C. Report of National Council Licensure Examination NCLEX® results (see 4 CSR 200-2.180(1)); and

D. Identification and analysis of student attrition rate.

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

(2) Full Approval.



(A) Annual Report. Each program and each campus of each program shall complete and submit an annual report to the board. A copy of a current operational budget and audited fiscal report showing income and expenditures shall be submitted with the annual report. Annual reports shall be completed with current information except where otherwise noted in the Annual Report form and sent to the board prior to the deadline established per board policy. Annual reports shall be submitted in a format provided by the board. Following review by the board, each program shall be notified of the board's action(s).

(B) Five (5)-Year Survey. Each approved program and each campus of each approved program shall be surveyed every five (5) years from the first year of full approval. An on-site survey or a paper survey may be conducted. If a nursing program is accredited by a national recognized nursing accrediting body AND accredited by North Central Association for Schools and Colleges or the Coordinating Board for Higher Education, or the Accrediting Council for Independent Colleges and Schools, a five (5)-year on-site survey may be deferred. A paper review may be completed to include a self-study, recommendations of accrediting body, and attrition information as required by the board. Copies of correspondence regarding changes in accreditation status shall be submitted to the Board of Nursing immediately.

(C) Additional Visits/Surveys. A representative of the board shall make additional visits/surveys as deemed necessary by the board. A program may request additional visits.

(3) Annual Registration.

(A) An application for annual registration shall be sent to each approved program and each campus of each approved 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 shall be submitted to the board for each approved program and each campus of each approved program prior to June 1.

(C) Programs shall not operate without current registration. Failure to submit the required registration fee prior to June 1 will result in a lapsed status and the disciplinary process shall be initiated.

(4) Removal of Approval. A program's approval may be removed pursuant to section 335.071.3, RSMo, for noncompliance with minimum standards.

(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) A program which fails to correct identified deficiencies to the satisfaction of the board within a reasonable time shall, after notice and hearing, be removed from the board's listing of approved programs.

AUTHORITY: sections 335.036 and 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.*

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

20 CSR 2200-2.020 Discontinuing and Reopening Programs

PURPOSE: This rule defines the procedure for discontinuing and reopening programs of professional nursing.

(1) Program Discontinuation.

(A) A letter of intent shall be submitted to the board, at least six (6) months, and preferably one (1) year prior to closing the program. A letter of intent shall include:

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

(B) The plan for closure must 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 of professional nursing.

(E) Records for all graduates and for all students who attended the program of professional nursing 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 permanently in a fire-resistant file, storage area, or both. Provisions for obtaining copies of transcripts shall be maintained.

2. If the program of professional nursing 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 the program of professional nursing and the sponsoring institution both 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.

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

(2) Program Reopening. The procedure for reopening a program of professional nursing is the same as for initial approval in 4 CSR 200-2.010(1)(C).

AUTHORITY: sections 335.036 and 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.*

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

20 CSR 2200-2.030 Change of Sponsorship

PURPOSE: This rule defines the procedure for change of sponsorship.



(1) An institution assuming the sponsorship of an approved program of professional nursing 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 form.

(3) Any proposed changes that affect the criteria included in 4 CSR 200-2.010(1)(C)1.A.-C. must be approved by the board prior to implementation.

(4) Program documents shall be changed to indicate the appropriate sponsor. The board may issue a Certificate of Approval indicating the change in sponsorship, if appropriate.

AUTHORITY: sections 335.036 and 335.071, RSMo 2000. This rule originally filed as 4 CSR 200-2.030. 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 2200-2.030, effective Aug. 28, 2006.*

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

20 CSR 2200-2.035 Multiple Campuses

PURPOSE: This rule defines the procedure for multiple campuses.

(1) Each campus of a program of professional nursing will be treated independently for purposes of compliance with the minimum standards set forth by the State Board of Nursing.

(2) Each campus is required to submit a separate annual report, five (5)-year survey, annual registration and annual registration fee.

(3) The program must submit a proposal as indicated in 4 CSR 200-2.010 and receive approval from the Board of Nursing before

opening an additional campus. Each additional campus shall be surveyed.

(4) It is not necessary that there be a separate administrator for programs which have multiple campuses; however, there must be one (1) full-time faculty person designated as the coordinator of each campus.

(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.

AUTHORITY: sections 335.036(2), (3), (4), (5), and (6), RSMo Supp. 1997 and 335.071, RSMo 1994. 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.*

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

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) Changes requiring board approval prior to implementation—

- (A) Curriculum;
- (B) Length of program;
- (C) Clinical sites;
- (D) Increase number of students by admission or transfer, by more than one (1) beyond the number approved by the Board of Nursing;
- (E) Pilot program/project;
- (F) Relocation of the program or any of its components; and
- (G) Appointment of new faculty or program administrator (see 4 CSR 200-2.060).

(2) Curriculum changes that require board approval include:

- (A) Alteration of the program philosophy, purpose(s) and/or objectives which influence or affect the integration of material into the total curriculum.
- (B) A plan must be presented to the board showing—
 - 1. Narrative description of the change(s) proposed and the current curriculum;
 - 2. Rationale for proposed changes;
 - 3. Concise presentation of the proposed change(s) with the current curriculum, in a

side-by-side model, in order to contrast the proposed curriculum with the current curriculum;

4. Timetable for implementation of changes;

5. Narrative of impact on the curriculum including philosophy, organizing framework, graduate competencies, and curriculum sequence;

6. Explanation of the anticipated effect on: currently enrolled students, role and function of graduates of the changed program, faculty and resources and facilities; and

7. Methods of evaluation to be used to determine the effect of the change.

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

(4) Program changes in the following areas require board notification and shall be submitted to the board in writing within thirty (30) days:

- (A) Name of program; and
- (B) Mailing address.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.*

**Original 1975, amended 1981, 1985, 1993, 1995.*

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 accredited program of professional nursing.

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

(2) The graduate competencies shall be derived from the program's philosophy.



(3) The philosophy and the graduate competencies shall be the basis on which the program is developed.

(4) Faculty have authority to formulate rules for governing committees of admission and curriculum.

(A) Meetings shall be scheduled at stated intervals.

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

(5) Organizational Charts. The program shall have a current organizational chart showing the relationship of the program to the sponsoring institution, the faculty structure and cooperating agencies.

(6) Finance.

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

(B) The administrator of the program shall administer 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 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.*

**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, employment policies and responsibilities of faculty/administrator.

(1) Responsibilities.

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

(B) Nurse faculty shall develop, implement, maintain and evaluate the program in relation to stated philosophy and graduate competencies of the program.

(2) Qualifications and Competencies.

(A) A program administrator shall meet the following criteria for appointment:

1. Current license to practice professional nursing in Missouri;

2. Master's degree in nursing; Master's Degree in Nursing with a clinical component in either the Bachelor's of Science in Nursing or master's with major in nursing. The program administrator appointed to the position prior to March 9, 1992, is exempt from the requirement of having a Master's Degree in Nursing; and

3. Equivalent of two (2) years of full-time experience within five (5) years or have two (2) years of part-time experience within the last (5) five years and evidence of active pursuit of a Master of Science in Nursing or higher advanced nursing degree. Experience shall be in nursing education, clinical practice, or administration.

(B) Faculty must be approved by the board prior to appointment. Nurse faculty shall meet the following criteria for appointment:

1. Current license to practice professional nursing in Missouri;

2. Educational requirements.
A. All faculty members teaching in associate degree or diploma programs shall have a minimum of a baccalaureate degree in nursing with a clinical component.

B. All faculty members teaching in baccalaureate programs shall have a minimum of a master's degree. Seventy-five percent (75%) of faculty shall have a master's with major in nursing; and

3. Equivalent of two (2) years of full-time experience within five (5) years or have a total of two (2) years of part-time experience within the last five (5) years and evidence of active pursuit of a Master of Science in Nursing or higher advanced nursing degree. Experience shall be in nursing education, clinical practice, or administration.

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

(D) Minimum number of faculty. One (1) full-time professional nurse in addition to the administrator with sufficient faculty, to achieve the objectives of the educational pro-

gram 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. Faculty assignments shall allow time for class and laboratory preparation; teaching; program revision; improvement of teaching methods and participation in faculty organizations and committees.

(3) 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 in writing, available and consistent with the sponsoring agency.

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, including a description of the role of a licensed practical nurse and professional nurse according to the Nursing Practice Act (NPA).

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

(A) Complying with minimum standards;

(B) Ongoing, systematic development, implementation and evaluation of the total program;

(C) Instruction and evaluation of students;

(D) Participation on committees providing input on policies regarding recruitment, admission, retention, promotion and graduation of students;

(E) Ensuring availability of academic advisement and guidance of students;

(F) Maintenance of student records;

(G) Ensuring confidentiality of student records;

(H) Maintenance of clinical and educational competencies in areas of instructional responsibilities. The program administrator and faculty shall maintain professional competence by activities which may include nursing practice, continuing education, writing, or participation in profession associations;

(I) Participation in program activities; and

(J) Participation in the development of departmental and institutional policies.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.

*Original authority 1975, amended 1981, 1985, 1993, 1985.

20 CSR 2200-2.070 Physical Facilities

PURPOSE: This rule defines the physical facilities required for programs of professional nursing.

(1) Office Space and Equipment.

(A) The institution shall provide space and equipment to fulfill the purposes 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.

(E) Fire-resistant storage space for student records shall be provided (refer to 4 CSR 200-2.110(2)(B)).

(2) Library.

(A) Each program and each campus of each program shall have library resources with the following:

1. Quiet area designated for study;
2. Current resources to meet the educational needs of the students and to meet the instructional and scholarly activities of the faculty;
3. Budgetary plan for acquisition of printed and multi-media material;
4. System for readily identifying or deleting outdated resources;
5. Policies and procedures governing the administration and the use of the library shall be in writing and available to students; and
6. Library resources shall be available and accessible to meet the needs of the students.

(3) Classrooms and Clinical Skills Laboratory.

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

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

(C) Classrooms shall have seating, furnishings and equipment conducive to learning.

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

(E) Each program and each campus of each program shall have a clinical skills laboratory available to the students.

AUTHORITY: section 335.036, RSMo Supp. 1997.* 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.

*Original authority 1975, amended 1981, 1985, 1993, 1995.

20 CSR 2200-2.080 Clinical Sites

PURPOSE: This rule defines approval for and required clinical learning experiences in clinical facilities used by the educational unit.

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

(2) Clinical sites used for direct care and participatory observation shall be approved by the board prior to utilization for student learning experiences.

(3) Clinical sites used for Observation do not require board approval prior to utilization.

(4) Observational and participatory observation experiences should provide learning experiences to meet the program objectives and should not exceed forty percent (40%) of the total clinical program hours. Orientation to the facility does not contribute to the forty percent (40%).

(5) Clinical sites for each course or clinical experience shall be listed in the annual report and include the following:

- (A) Course number;
- (B) Name and address of the clinical site;

- (C) Purpose (area used);
- (D) Type of experience, i.e., direct-care, observation, participatory observation;
- (E) Number of students in clinical group;
- (F) Number of preceptors;
- (G) Total clinical clock hours;
- (H) Confirmation that agreements have been made with other programs who use the clinical site; and
- (I) Confirmation that the nursing program has a contract with the clinical agency.

(6) Programs shall make their own arrangements with the clinical sites. Non-health care related sites utilized for community-based learning experiences for students must have an identifiable sponsoring agency with a clearly defined purpose(s). A contract or letter of agreement shall be completed before experiences.

(7) Programs sharing the same clinical sites shall maintain evidence of cooperative planning with each other for the scheduling of clinical experiences. Confirmation should exist that agreements have been made with other programs who use the clinical sites.

(8) Each program shall have a written agreement with each clinical site. These written agreements shall be reviewed annually.

(9) Clinical agreements shall provide a termination clause.

(10) There shall be a written orientation plan for students for each clinical site.

AUTHORITY: section 335.036, RSMo Supp. 1997.* 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.

*Original authority 1975, amended 1981, 1985, 1993, 1995.

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. Each preceptor shall be provided a copy of the designated objectives of the course in which the student is enrolled and given directions on how to assist the student in meeting the objectives of the course.

(2) Preceptors do not replace faculty in the education of the student but serve to assist faculty and the student in achieving the designated objectives of the course. Preceptors are not faculty of the nursing program and do not have to meet the qualifications for faculty set forth in the minimum standards (see 4 CSR 200-2.060(2)(B)).

(3) Preceptors are not to be considered when determining the faculty to student ratio.

(4) Preceptors shall not be utilized in introductory/foundation courses.

(5) Each nursing program shall have written policies on the use of preceptors which include the following:

(A) Communications between the school and the preceptor concerning the student;

(B) The qualifications of the preceptor; and

(C) The duties, roles and responsibilities of the school, the student and the preceptor.

(6) The preceptor shall be currently licensed as a registered professional nurse with at least two (2) years experience, one (1) of which must be in the area of clinical specialty for which the preceptor is used.

(7) The preceptor must be selected by the nursing program in concert with the clinical site.

(8) The faculty of the nursing program is responsible for the final evaluation and the assignment of performance rating or grade to the student. The preceptor should provide written documentation of the student meeting the designated objectives for consideration.

(9) Preceptors shall be identified in the annual report by listing the course and the number of preceptors utilized in that course.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.*

**Original authority 1975, amended 1981, 1985, 1993, 1995.*

20 CSR 2200-2.090 Students

PURPOSE: This rule defines the selection, transfer and student services for students in programs of professional nursing and provides for foreign students.

(1) Admission, Readmission and Transfer.

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

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

(C) Admission criteria shall reflect consideration of the potential to:

1. Complete the program;
2. Possess necessary functional abilities;

and

3. Meet the standards to apply for licensure (see section 335.046.1, 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;
3. Educational facility's ability to accommodate students; and
4. Patient safety.

(2) Non-English Speaking Students.

(A) Non-English speaking students shall meet the same general admission requirements as other students.

(B) An applicant for whom English is a second language shall take and pass an English proficiency examination.

(3) Student Services.

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

(B) Health. If the school provides health services for the students, there shall be written policies governing these services. If no health services are provided, a plan for emergency care shall be in writing.

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

(D) Grievance Procedure. Policies and procedures which afford students due process shall be available for managing academic and nonacademic grievances. Due process for student grievances shall include the providing of written notice of all decisions affecting an individual student, an opportunity for the student to contest those decisions either in writing or in person, the opportunity to contest facts serving as the basis for the decisions and the opportunity to appeal the decisions to a level higher than the original decision-maker.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.*

**Original authority: 1975, amended 1981, 1985, 1993, 1995.*

20 CSR 2200-2.100 Educational Program

PURPOSE: This rule defines the general purpose, curriculum organization and development, minimum curriculum requirements, curriculum plan and course outlines for programs of professional nursing and provides for the licensing examination.

(1) General Purpose.

(A) Philosophy shall be a composite of the beliefs that the faculty accept as valid and is directly related to curriculum practices which may be noted as mission or goals of the program.

(B) Graduate competencies of the program of study shall be derived from the philosophy and shall be stated in terms of the competencies expected of the graduate.

(C) The theory and clinical learning experiences shall be derived from the philosophy and objectives of the program and shall demonstrate logical progression.

(2) Curriculum Organization and Development.



(A) The nursing faculty shall participate in the development of the curriculum. The faculty shall have the authority and the responsibility to approve and implement the curriculum.

(B) There shall be a written curriculum plan in which all components shall reflect the philosophy and objectives and shall be logically consistent between and within courses.

(C) 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 program outcomes.

(D) The curriculum shall show the number of hours/credits of formal instruction and clinical instruction for each course of the program.

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

(3) Curriculum Plan.

(A) 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.

(B) Clinical learning experiences shall be determined by the educational needs of the student and by the requisites of the curriculum.

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

(4) Curriculum Requirements. There shall be a general written plan for the total curriculum for each class of students which will show the courses taught, sequence, correlation and integration of classroom and clinical instruction. Courses may be developed separately or as integral parts of other courses. Integrated concepts shall be evident in the course objectives. Instruction will be provided in the following areas:

(A) Biological and physical sciences may be either discrete or integrated and must include content in all of the following:

1. Anatomy and physiology;
2. Chemistry;
3. Microbiology;
4. Pharmacology; and
5. Nutrition;

(B) Behavioral and social sciences may be either discrete or integrated courses;

(C) Nursing science courses shall include theory and clinical learning experiences in: prevention of illness, promotion, maintenance, and restoration of health across the life span;

and restoration of health across the life span;

(D) Nursing support courses (may be discrete or integrated) shall include: growth and development across the lifespan, Interpersonal Relationships, Communications, Ethics, and the Professional and Legal Aspects for Nursing; and

(E) Course Outlines.

1. Course outlines shall be up-to-date and available to all faculty members.

2. The objectives of each course and the methods to be used in teaching shall be stated.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.*

**Original authority 1975, amended 1981, 1985, 1993, 1995.*

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. Courses shall be listed in chronological order.

(B) The final transcript shall identify the following:

1. Date of admission, date of separation from the program and hours/credits/units earned and the diploma/degree awarded; and
2. Transferred credits, including course titles, credits earned, and the name and location of the credit-granting institution.

(C) Seal of the school and signature of the current administrator or registrar shall be affixed to all official transcripts.

(2) School Records.

(A) Student records shall be stored in an area which is documented as theft resistant and where confidentiality can be ensured.

(B) Transcripts, including microfiche and computer files, shall be stored in documented fire-resistant files/areas.

(C) The nursing program shall maintain records as required for approval.

AUTHORITY: sections 335.036 and 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.*

**Original authority: 335.036, RSMo 1975, amended 1981, 1985, 1993, 1995, 1999; 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) Nondiscrimination policy shall appear in publications specific to the nursing program.

(3) The following information shall be given to the applicant in writing prior to admission:

(A) Approval status as granted by the board (initial, full or conditional approval status);

(B) Admission criteria;

(C) Section 335.066 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 given to the student in writing upon entry:



- (A) Philosophy;
- (B) Graduate competencies;
- (C) Grading, promotion and graduation policies;
- (D) Faculty roster with qualifications;
- (E) School calendar;
- (F) Student policies;
- (G) Student's rights and responsibilities; and
- (H) Due process and grievance policies and procedures.

AUTHORITY: sections 335.036 and 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.*

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

20 CSR 2200-2.130 Evaluations

PURPOSE: This rule provides for evaluation of the nursing program by both faculty and students.

- (1) There shall be a written plan for systematic evaluation of all aspects of the program. The plan shall include:
 - (A) Frequency of evaluation of each area;
 - (B) Methods of evaluation; and
 - (C) Person(s) responsible for the evaluation.
- (2) Provisions shall be made for students to evaluate nursing courses, clinical experiences and instructors in compliance with systematic evaluation plan.
- (3) In compliance with systematic evaluation plan provisions shall be made for:
 - (A) Students, instructors, and representatives of clinical sites to evaluate nursing courses, clinical experiences, and instructors; and

- (B) Graduates to evaluate graduate competencies.

- (4) Documentation shall indicate that the systematic evaluation plan has been utilized in the planning and improvement of the program.

AUTHORITY: section 335.036, RSMo Supp. 1997. 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.*

**Original authority 1975, amended 1981, 1985, 1993, 1995.*

20 CSR 2200-2.180 Licensure Examination Performance

PURPOSE: This rule defines the required examination pass rate level of graduates of approved nursing programs on their first attempt at the licensure examination.

- (1) The licensure examination performance of first-time candidates from each nursing program shall be no less than eighty percent (80%) for each fiscal year (July 1 through June 30).
- (2) The nursing program with a pass rate lower than eighty percent (80%) will—
 - (A) First year—Provide the board with a report analyzing all aspects of education program, identifying areas contributing to the unacceptable pass rate and plan of action to resolve low pass rate;
 - (B) Second consecutive year—The program will be placed on conditional approval status. The program administrator will be required to appear before and present to the board an analysis of measures taken the first year, problems identified, and plans of correction; and
 - (C) The nursing program shall remain on “conditional approval” until they have 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.

AUTHORITY: sections 335.036(2), (3), (4), (5) and (6) and 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.*

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