



Massachusetts/Rhode Island League for Nursing

Dear Colleague:

The Continuing Education Program Review Committee of Massachusetts/Rhode Island League for Nursing (MARILN) is pleased to send you a package for submitting your program(s) for contact hours. In order to provide you with an efficient and timely review of programs that you send to MARILN, we are requesting that all applications and programs be prepared using the forms included in this package. These forms may, of course, be duplicated. To assist you the Continuing Education Program Review Committee has provided step-by-step instructions, definitions and self-help tools.

The fee for program approval is based upon the number of contact hours requested. Please review the fee schedule on page three (4) of the packet.

We hope this package will be helpful to you and look forward to providing you with quality program review services and assistance. If there is any further information that we can provide to you, please do not hesitate to contact Sheila Blomquist, MARILN Administrative Director, via email: nursing.mariln@gmail.com.

Sincerely,

Terri Legare, PhD, RN, CNE, Co-Chair, Continuing Education Program Review Committee
Jinx Tull MSN, APRN, BC, Co-Chair, Continuing Education Program Review Committee

MARILN
PO Box 407
Westwood, MA 02090
781-366-0722
Email: nursing.mariln@gmail.com
Website: Massachusetts/Rhode Island League for Nursing | Nursing Network

Guidelines For Program Development

Welcome to the Massachusetts/Rhode Island League for Nursing (MARILN). We are the state organization of the National League for Nursing. The Massachusetts/Rhode Island League for Nursing (MARILN), dedicated to the multidisciplinary approach and consumer involvement in health care, accepts the responsibility to plan Continuing Education programs and to grant recognition to participants consistent with the National League for Nursing Criteria and Guidelines, and to approve Continuing Education programs in accordance with the Board of Registration in Nursing regulations for re-licensure of Registered Nurses and Licensed Practical Nurses. Based upon the belief that Continuing Education for health care providers is essential to the delivery of high-quality health care, programs approved and sponsored by MARILN are designed to meet the current needs of nurses and other health care personnel.

The MARILN Continuing Education Program Review Committee is happy to assist you in gaining continuing education approval for programs that you submit to us. The committee incorporates all guidelines for continuing education set forth by the Commonwealth of Massachusetts Board of Registration in Nursing. The members of the committee are skilled nurse educators who can offer advice and assistance as you develop your educational offering.

How to Submit a Program for Approval:

Please send your program via Email: nursing.mariln@gmail.com at least 3 weeks prior to your program date. If the program is over 30 pages, please mail 3 copies to: MARILN, PO Box 407, Westwood, MA 02090.

Please pay online via our website: [Continuing Education Program Review Information | Massachusetts/Rhode Island League for Nursing | Nursing Network](#) *preferred method

OR mail a check to: MARILN, PO Box 407, Westwood, MA 02090.

The information, instruction and forms that are included in this packet will assist you in obtaining approval of contact hours for your educational offering. Please follow the enclosed instructions to avoid any delays in the approval of your submission.

Your program must include the following before the review process can begin:

1. Application (Form "A")
2. Program Outline (Form "B")
3. Curriculum Vitae (Form "C")
4. Evaluation Form
5. A Registered Nurse must be on the Planning Committee

The following informational packet includes:

1. General Information:

- Fee Schedule
- Definitions
- Time Schedule for Submission
- Decisions Made Regarding Applications
- Length of Approval
- Provider Responsibilities for Approved Educational Offerings
- Making Changes in a Previously Approved Offering
- Confidentiality
- MARILN Maintenance of Educational Offerings and Records
- If You Need Help....

2. Helpful Information:

- Primer on Writing Measurable Behavioral Objectives
- Self Help Checklist (optional)
- Objectives as Stated on Evaluation Form must be stated exactly as they appear on Form B.
- Evaluation Form must include an evaluation section for each speaker.

3. Blank Forms (to reproduce for submission):

- Application (Form “A”) – required form
- Program Outline (Form “B”) – required form
- Curriculum Vitae (Form “C”) – required form
- List of Participants (Form “D”) – required form
- Evaluation – sample form
- Certificate – sample form

Fee Schedule: *Important Information*

Your fee is based on the number of contact hours you request. In order to determine this:

1. Add up total “time” in minutes allotted to educational activity on your program outline (Form “B”). See definitions of Contact Hours below.
2. Divide the total number of minutes by 60. This identifies your requested Contact Hour amount.
3. Refer to the chart listed below to determine your Fee in the column on the right.
4. This Fee must accompany your completed package.

Requested Contact Hours Fee

1 – 3.9	\$95
4 – 7.9	\$175
8 – 12.9	\$250
13 – 20.9	\$300
21 – 29.9	\$400

Concurrent session/workshops.....Add \$10/Concurrent session

Example: Initial \$90 session. Sessions 2-3-4 @ \$10/Each = \$30. Total Cost = \$120

New: If you would like your program to be expedited (1 week or less) please send additional fee of \$75.

Online Payment Links are located on our website:

[Continuing Education Program Review Information | Massachusetts/Rhode Island League for Nursing | Nursing Network](#)

Definitions:

Behavioral Objective:

A statement that indicates what the learner will be able to do or accomplish as a result of education. It should be attainable and measurable within the scope of the workshop day.

Contact Hour:

The unit of measurement of an approved organized educational activity lasting sixty (60) consecutive minutes (1 contact hour = 60 minutes). This does not include coffee breaks, mealtimes, welcoming and closing remarks, or evaluation time.

Content Outline:

The information that will be presented. Each section of content must have relevance to nursing practice. It should reflect attainment of the objectives, follow a logical order and demonstrate current knowledge and practice.

Faculty:

The specific speakers/presenters for the session. A brief Curriculum Vitae (Form "C"), relevant to one's expertise on the program content area must be submitted for each speaker.

Measurement/Evaluation Method:

Describes how accomplishment of each of the objectives is evaluated/measured. An evaluation tool **must** be submitted. Objectives stated on the Evaluation Form must be stated exactly as they appear on Form B.

Offering:

A single educational activity that may be presented once or repeated within a two-year time frame. Contact hours can only be awarded for attendance at the entire session.

Purpose (of offering):

A statement reflecting the overall aim/goal of the offering.

Teaching Method & Instructional Media:

The teaching/instructional method chosen (lecture, discussion, small groups, demonstration etc.)
Instructional media describes any handouts or audiovisual tools used (slides, video, easel, PowerPoint, transparencies etc.).

Time Schedule for Submission:

For the Continuing Education Program Review Committee to provide a timely assessment of the offering or program, all submissions must be received **at least 3 weeks prior** to anticipated presentation.

Decisions Made Regarding Applications:

A minimum of 2 members of the Continuing Education Program Review Committee for each submission for contact hours. All committee members must agree to the decision made regarding the submission. The categories of decisions are:

- **Approved:** The submission has met all criteria for continuing education according to the organizational and state requirements.
- **Denied:** The submission has not met the criteria for continuing education according to organizational and state requirements.
- **Hold:** A decision is delayed pending clarification of submitted information.

Length of Approval:

Each approved offering or program is valid for 24 months from the date of approval provided there are no major revisions (see Changes Made in Previously Approved Activities). Approval must be granted prior to the presentation. **Retroactive approval is not granted.**

Provider Responsibilities For Approved Educational Offerings:

Upon completion of all presentations of educational activities approved by MARILN, the provider must forward to MARILN office a list of participants. If participants are either RN's or LPN's, they must be identified as such. The "List of Participants" sheet (Form "D") is required.

Making Changes in a Previously Approved Offering:

Because an approved offering is valid for 24 months, if a change in the overall purpose, objectives and/or content is made in a program or offering approved by the MARILN Continuing Education Program Review Committee, the program or offering must be resubmitted as a new program with the appropriate accompanying fee and required documents.

Confidentiality

All educational offerings and records submitted for approval to MARILN are kept confidential and are secured in a locked area to prevent unauthorized use. This includes but is not limited to lists of participant's names, addresses, submitted materials, and reviewer evaluations and decisions.

Maintenance of Approved Educational Offerings and Records by MARILN:

Contact hours for each approved educational offering are recorded and maintained for a minimum of six (6) years at the MARILN office.

If You Need Help:

Members of the Continuing Education Program Review Committee are available to provide advice and assistance as you prepare your submission. If you have questions or are unclear about any information, we would be happy to help you. If you would like a committee member to contact you, please email nursing.mariln@gmail.com.

Learning Objectives:

Learning objectives are statements indicating what the learner will be able to do or accomplish at the end of the session.

A good learning objective includes an action verb and can be clearly measured and evaluated.

Examples of acceptable learning objectives: (see Blooms Taxonomy Action Verbs for a full list)

- List at least three key attributes of an effective labor coach.
- Write one objective that meets the criteria of SMART.
- Describe the mission and goals of the National League for Nursing.
- Explain the steps in referring a client to a PACT team.

*Action verbs to be used in learning objectives include but are not limited to:

<u>To recall information</u>	<u>To grasp the meaning of</u>	<u>To apply learned information</u>	<u>To organize or create</u>	<u>To analyze information</u>
Knowledge	Understanding	Application	Judgement	Relationships
*Define *Identify *Outline *Name *List *State	*Describe *Explain *Summarize *Compose *Give Examples of *Discuss	*Demonstrate *Calculate *Modify *Use *Solve *Apply	*Design *Revise *Appraise *Evaluate *Analyze *Summarize	*Diagram *Differentiate *Distinguish *Outline *Illustrate *Break down

Examples of unacceptable objectives:

- Learners will understand the concepts of diabetes.
- Participants will know about psychopharmacology.
- Staff will learn how to be proactive.

Self Help Check List for Contact Hour Application

(For planning use only)

Program Application (Form A):

- _____ Name of Provider
- _____ Name, Title, Address, Phone # of person submitting
- _____ Title of Offering
- _____ Purpose
- _____ Number of Contact Hours requested
- _____ Date(s) of Offering
- _____ Payment amount Enclosed
- _____ Name, credentials, positions, of those planning offering
- _____ Minimum of one RN included in planning

Program Offering (Form B):

- _____ Behavioral Objectives in measurable terms
- _____ Content outline
- _____ Content supports each objective
- _____ Time Frame outlined to include all content, breaks, introductions, evaluation, etc.
- _____ Teaching methods and instructional media identified for content outline
- _____ Faculty/speakers identified for presentation of content
- _____ Measurement/evaluation method described on program outline
- _____ Evaluation Tool enclosed

_____ Curriculum Vitae for each speaker (Form C)

_____ List of Participants (Form D) *Please email or mail to MARILN after the program*

_____ Evaluation Form