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StudentMAX Connections Operational Guidelines

Purpose

StudentMAX Connections (SMC) is a non-profit consortium of Clinical and Educational Partners serving NW Oregon and SW Washington. The purpose of this consortium is to work collaboratively towards centralized placements of students in clinical education to increase the number of nurses in Oregon and Southwest (SW) Washington.

Scope

- Problem-solve clinical and educational issues and resolve placement conflicts.
- Network with partners to enhance student clinical experiences and maximize every potential placement.
- Create efficient processes for the orientation and completion of clinical requirements for students.
- Develop relationships as a means of better communication between partners and students.
- Coordinate and support the use of clinical placement software.

Definitions

Clinical Partner (CP): Any organization that provides a clinical experience for students to complete an educational program. This includes but is not limited to the following: acute care (hospitals), clinics, outpatient, mental health, county health departments, and long-term care. Each CP will appoint at least one representative to participate as a committed member of the SMC.

Education Partner (EP): Any educational program where students complete work toward a degree or certificate. Each EP will appoint at least one representative to participate as a committed member of the SMC. All EPs must be approved by the Oregon State Board of Nursing or the Washington State Nursing Care Quality Assurance Commission.

Guest Clinical Member (GM): A clinical agency that provides clinical experiences for students to complete an educational program. GMs are not expected to use the designated software for clinical placements but will provide instructions for student placement requests and onboarding requirements. GMs may attend SMC general partner meetings by invitation but are not voting members.

Board of Directors (BOD): Elected representatives from CP and EP facilities who have administrative, leadership and fiscal oversight for SMC and RC.

Voting Members: members who play a role in the governance of the organization. One individual from each CP and EP as designated by organization.

Non-Voting Members: When an organization has more than one participating member, these members attend meetings, contribute to discussions but do not play a role in governance of the organization.

Regional Coordinator (RC): An independent contractor who serves as a liaison and facilitator between all CPs and EPs and the clinical placement software system.

Term: Refers to an academic term (either on a quarterly or semester basis).

Cohort Placement: Faculty led clinical experiences with a group of students. The nursing faculty member guides the selection of student experiences and provides oversight by being present on the unit or readily available to the students for the entire duration of the clinical shift.

Precepted Placement: A one-to-one relationship between a senior nursing student and an experienced nurse.

Historical placement: A placement is considered historical if it was requested, approved and used the previous year. The placement must be for the same unit, weekday, shift and term/dates. Additional considerations: If a clinical partner is unable to approve a historical placement request for any reason, they will provide the school with the reason for the denial, and this rotation should not be offered to another school as a new placement. Clinical partners will also prioritize this request for an alternative placement prior to approving new placement requests and will make every effort to find an alternative placement.

Example: School X requests and is approved for Ortho unit placement on Wed day shift for Spring term 2025. School uses and completes this placement. The following year, the school requests the exact same rotation as a historical placement for spring 2026 but the clinical site is unable to approve the placement. For spring 2027, the school may request this placement again but it will be considered a new placement.

New Placement: Placement not approved in the past, or for a different term than originally requested.

Membership

We welcome all interested education and clinical partner inquiries. Membership is subject to approval by the consortium Board of Directors. Membership consideration includes but is not limited to geographic location, accreditation status, and regional capacity.

Interested potential partners will fill out an inquiry form, which is available on the website. The Board of Directors will consider new membership requests on an as-needed basis.

Newly approved members will be welcomed and oriented by the Regional Coordinator and Board leadership.

Membership Activities

- Section 1** Education and Clinical Partners commit to work collaboratively, provide timely response to requests and feedback/input, follow the Operational Guidelines, participate on committees and attend monthly meetings.
- Section 2** Guests and non-members wishing to attend are asked to notify the RC in advance of the meeting.
- Section 3** Each member is electronically connected through the listserv for the purpose of communication, common interests, and facilitating the distribution of meeting minutes and agendas.

Meetings

- Section 1** General Partner meetings are held on a monthly basis (typically the 3rd Thursday) with the exception of July, August and December. Meetings may be held virtually or in-person.
- Section 2** An annual business meeting of members may be held in April, typically the third Thursday of the month.
- Section 3** The SMC BOD may call special meetings or choose to have members email decisions instead of calling a special meeting.
- Section 4** The agenda for the meeting is distributed through the listserv at least two days prior to the scheduled meeting.
- Section 5** Voting members unable to attend a meeting may register their vote by emailing the regional coordinator prior to the meeting.
- Section 6** An annual retreat will be considered for EP and CP members to enhance communication and provide both a problem-solving and relationship-building platform. The agenda will vary based on the planning committee's identification of SMC's pertinent needs.

Board of Directors (BOD)

Section 1- General Responsibilities

- Establish annual goals and determining a strategic plan that meets the mission and purpose.
- Providing guidance and direction to the RC, including:
 - Advancing innovations and creative processes for SMC
 - Managing agendas
 - Establishing committees
- Fiscal responsibility for budget approval and monthly review of revenue/expense reports of the SMC.
- Approval of changes of contractual partner agreements within the SMC.
- Decision-making related to business issues within the SMC.
- Communicates BOD decisions to SMC partners.
- Reviewing and updating the bylaws and operational guidelines every two years and as needed.
- Annual evaluation of the RC job description, performance, and compensation.

Section 2- Membership of the BOD will include:

- Chair (V only when a tie in votes occurs)
- Chair-Elect (V)
- Secretary (V)
- Secretary-Elect (V)
- Treasurer (V)
- Treasurer-Elect (V)
- Member(s) at-large (2) (1 clinical partner, 1 education partner) (V)
- Regional Coordinator
- Balanced representation between EPs and CPs shall be considered
- Advisor (no more than 2 per year)

*(V) denotes voting member of Board

Section 2.1- BOD Terms of Service:

- BOD members elected
- 3 years with rotating terms among members to maintain historical and strategic perspective
- Turnover: no more than 50% in any one year

Section 2.2.- BOD Officer Expectations:

Chair

- 1 year of active service
- Presides at all meetings of the BOD and general meetings of SMC.
- Works with the RC in the development of the general meeting agenda in advance of the meeting

- Collaborates with the RC in the running of the consortium, including negotiating contracts with outside vendors and maintaining non-profit status.
- Supervises SMC Regional Coordinator
- Performs other duties incidental to the office.
- Remains as member of BOD for 1 year after active service

Chair-Elect

- Fills vacancy (if one occurs) in the office of Chair and performs duties of Chair during Chair's absence.
- Performs duties incidental to the office.
- Will serve as an active and voting member of BOD.

Secretary

- 1-year active service
- Acts as scribe and ensures that minutes are delivered to the RC to be sent out for review to the general membership, revised and final copies available to membership, this includes both General Partner and BOD meetings.
- Works with RC to retain records for a minimum of 3 years, current and previous year available on SMC website and all other years are stored on SMC Dropbox account.
- Performs duties incidental to the office.
- Remains as member of BOD for 1 year after active service.

Secretary Elect

- Fills vacancy (if one occurs) in the office of Secretary and performs duties of Secretary during Secretary's absence
- Performs duties incidental to the office
- Will serve as an active and voting member of BOD

Treasurer

- 3-year active service
- Maintains full and accurate accounts of all financial records of the corporation.
- Disburses funds when proper to do so.
- Is primary contact for the fiduciary agent for SMC.
- Verbally updates members of consortium on account balances at BOD and GP meetings.
- Works with the RC with the SMC operating budget
- Coordinates with RC to submit state and federal non-profit status and tax documents.
- Performs duties incidental to the office.
- Remains as BOD member for 1 year after active service

Treasurer Elect

- Fills vacancy (if one occurs) in the office of Treasurer and performs duties of Treasurer during Treasurer's absence.
- Performs duties incidental to the office
- Will serve as an active and voting member of BOD

Member at Large (2)

- Elected position by voting members of the consortium.
- Works on special projects as designated by the BOD
- Identifies issues and trends for the BOD to address
- Completes other duties as assigned for the BOD
- When possible, 1 clinical partner and 1 education partner will fill this position
- 1 year of active service, will rotate off annually
- Are voting members of the BOD

Advisor

- Attends BOD meetings on a quarterly basis
- Provides context and guidance to the BOD when needed
- May assist with projects as designated by the BOD
- Are not voting members of the BOD
- Appointed by the BOD
- Length of time of service may vary
- When possible, 1 clinical partner and 1 education partner will fill this position

Decision Making within BOD

Whenever possible quorum must be reached in order for decisions to be moved forward as final actions. Quorum for SMC is defined as having at least 3 voting BOD members reach a majority consensus, allowing for the Chair to act as "tie breaker" should there be less than 3 voting members and a majority consensus cannot be reached. The Chair would also act as "tie breaker" in the situation where all 4 voting members of the BOD are present and a majority consensus cannot be reached.

Finances

Section 1 Members of the BOD will audit the financial status annually and make recommendations for the dues structure for members. The treasurer will present report of financials to both the BOD and General Partners monthly

Clinical Placement Process

- Section 1** EPs and CPs manage clinical placements via the clinical placement software using the published SMC clinical placement process schedule for the current academic year. *Historical placements will be honored when possible.
- Section 2** Definition of historical: A placement is considered historical if it has been approved and used consecutively 2 years in a row for the exact unit and term. In order for it to remain a historical placement, school must also request said placement within 2 years. Ex: School X requests and is approved for PICU placement for Spring term 2023, School X uses said placement 2 years in a row (years 2023, and 2024), this is considered historical. The next year (2025) the clinical site is unable to approve the placement, but in 2026 School X requests the placement again for Spring 2026 and can put the request in as historical.
- Section 3** EPs make all requests for clinical sites via the designated software. Individual instructors or students may not make requests outside of the established process.
- Section 4** CPs respond to requests via the designated software in accordance with SMC timeline.
- Section 5** Clinical placement requests will only be considered if entered through the SMC designated software.
- Section 6** EPs and CPs will carefully review placements immediately following changes/additions and prior to the start of each term to clarify any concerns or conflicts.
- Section 7** CPs will honor clinical placement commitments to the fullest extent possible. If circumstances change or a placement is denied and the facility is unable to honor this commitment, the CP will notify the EP as soon as possible with reason for the denial and/or any available alternative placements.
- Section 8** If a clinical facility will not be accepting students or limiting numbers on a unit or units for the subsequent academic year, notification of this change shall be provided as early as possible.
- Section 9** EP's will assign students and faculty to their approved rotations based on the CP's onboarding timeline.
- Section 10** CPs will ensure their clinical requirements are current on the SMC Clinical Requirements page in the designated software. EPs will direct faculty and students to this page for reference.
- Section 11** If an EP will not use an approved clinical placement, they will change the status to Withdrawn in the designated software as soon as possible. Upon change of status, the EP will notify the CP and copy the RC on the notification of the change. The RC will coordinate with EPs and CPs to use the withdrawn placement.

Section 12 Being an EP member of SMC does not guarantee placement within the CP member sites.

Conflict of Interest

Section 1 Is defined as a situation in which a person is in a position to derive personal benefit from actions or decisions made in their official capacity.

Section 2 Any member of this consortium with knowledge of an actual or potential conflict of interest shall bring their concern to the BOD. The BOD shall obtain disclosure of the financial interest and all material facts. After discussing with the interested person, the interested person shall leave the meeting while the SMC BOD determines whether a conflict of interest exists.

Section 3 If the BOD determines a conflict of interest exists the following procedure will be followed:

Section 3.1 The interested person may make a presentation to the BOD. The interested person will leave the meeting during the discussion of and the vote on the transaction or arrangement involving the conflict of interest.

Section 3.2 The BOD shall investigate alternatives to the proposed transaction or arrangement. After exercising due diligence, the BOD shall determine whether the transaction or arrangement is fair to the corporation. The transaction must be approved by a majority of all the members of the BOD who have no direct or indirect interest in the transaction. A majority of the BOD members must vote to approve the transaction or arrangement.

Dissolution

Section 1 If the functions of the SMC are no longer needed or effective, the corporation may dissolve the SMC by a consensus of the membership, provided that the dissolution was introduced at the previous meeting. Upon dissolution of the organization, remaining assets shall be distributed to the Oregon Food Bank or another charitable organization at the discretion of the BOD.

Appendix

Regional Coordinator Job Description

Roles and Responsibilities

Coordination:

- Coordinate CPs and EPs to maximize existing and new clinical placement opportunities
- In conjunction with the SMC Chair, coordinate the SMC BOD and facilitate monthly meetings to discuss corporation issues and create agendas for the group
- In conjunction with the SMC Chair, coordinate and facilitate monthly SMC meetings with CPs and EPs
- Track consortium sub-committee(s) work and progress and assist sub-committee chairs working towards identified goals

Technology:

- Manage, maintain and update the centralized clinical placement software system
- Distribute shared documents, forms, meeting minutes, etc.
- Communicate and help problem-solve any technical and/or access problems with software licensor
- Provide group and/or individual technical instruction to SMC partners on software.
- Maintain access to the clinical orientation module, communicate and help problem –solve any issues with the technology partner.
- Maintain and update SMC website.

Communication:

- Act as a liaison between SMC and technology partners.
- Report to the BOD and the members regarding meeting dates, times, agendas, and meeting minutes
- Post and disseminate information in a timely manner.
- Maintain and enhance existing communication between consortium partners and other stakeholders related to clinical placement management in Oregon and SW Washington.
- Develop new clinical placement opportunities in Oregon and SW Washington.
- Represent SMC at state and national forums

Organization:

- Collaborate with the BOD and members to review, revise and maintain bylaws, procedure manuals and operational guidelines to reflect current practice and expectations.
- Maintains membership roster, membership lists, and records for the consortium (corporation for business purposes).
- Submits state and federal non-profit status and tax documents to appropriate reporting bodies.

- The BOD is responsible for reviewing the Regional Coordinator job description, contract, and compensation on at least an annual basis, typically in July. They will determine the need for performance evaluation, merit and or cost of living increases during those review periods.