Western MA Clinical Requirements for Nursing Student and Faculty Academic Year 2026 -2027

Western Massachusetts healthcare facilities and schools involved in the implementation of the Massachusetts Centralized Clinical Placement System have agreed to the following process for tracking student/faculty clinical requirements.

1. Schools are required to track the agreed upon Western MA Clinical Requirements for all nursing students and faculty. They are required to keep the information readily accessible. Note: It is the schools' choice if they decide to track using a database or paper files. The recommendation is to use a database.

2. Facilities will accept the agreed upon Standard Verification Letter instead of requiring individual student/faculty paperwork. The letter should be printed on school letterhead, signed by an authorized administrator and include the name and number of the CCP contact. (see template)

3. After a clinical rotation is scheduled, the Standard Verification Letter must be sent to the healthcare organization from the academic institutions prior to the start of the rotation.

4. The school will produce evidence of the clinical requirements at the facilities request within 24 hours for exposure or regulatory review.

5. It should be noted that in addition to the Standard Verification Letter provided to facilities for specific clinical rotations, there may be requirements that schools must meet on an annual basis. For example, every year Trinity Health Of New England requires a physical copy of a school's Certificate of Insurance (COI).

These requirements will be reviewed on an annual basis and updated if required. Schools of Nursing will receive updates no later than April regarding changes that will affect students/faculty in the upcoming academic year. Whenever extenuating circumstances arises after the notification deadline passes, the Schools of Nursing will be notified with ample time to meet new requirements.

For additional information or proposed changes to the requirements, please contact Peta-Gaye Johnson, Program Director at the MassHire Hampden County Workforce Board at pjohnson@masshirehcwb.com.

Western MA Clinical Requirements for Nursing Student & Faculty – Academic Year 2026 -2027

All partner organizations agree to the following requirements for a period of one academic year and to the best of their organizational abilities, will not propose any changes.

Requirement	Specific Information	Note for Schools
General Information		
Name	Last, First, Middle Initial	
School	Name of school & Program	
Expected Graduation Date		
Student/faculty's Current Health Insurance	Name of carrier & Policy Number	
School's Malpractice Insurance Carrier	Name of Carrier	**Note 1:** A Certificate of Insurance will be provided to Trinity Health Of New England, and Cooley Dickinson Hospital to indicate professional liability coverage each academic year.
Health History & Exam		Applicable to all vaccines: if a physician does not administer an appropriate vaccine, student/faculty will be required to update to the appropriate vaccine prior to attending clinical practice.
Physical Exam	Date of Exam	Must occur within one year prior to admission to the nursing program. Faculty are subject to a fit-for-duty requirement; however, this is not required on an annual basis. **Note 1:** Baystate Health does not require documentation of a physical exam for continuing education students who already hold RN licensure and are returning to school to advance their degrees.
Measles, Mumps, & Rubella	Date of Immunization	Evidence of 2 vaccines or a positive titer; if titer is equivocal or negative, must receive two vaccines <u>after</u> equivocal or negative titer. **Note 1:** If a student/faculty tests lower than the acceptable levels, it will be the responsibility of the school/university to ensure a minimum of one dose of the MMR Vaccine is given to a student/faculty before the student/faculty will be allowed to begin his/her clinical rotations. Further, this is a conditional clearance with the responsibility of the college to attest that within the 28-day window a second dosage of the MMR Vaccine is administered. Once that is completed, with all other

		requirements in proper order and completion, the student/faculty will then be fully cleared. **Note 2:** Baystate Health and Mercy Medical Center do NOT require an additional titer to be drawn in line with CDC guidelines to verify levels.
Diphtheria/Tetanus/ Pertussis (Tdap)	Date of immunization (must be within 10 Years)	Vaccine verified. Per MA Dept. of Public Health, one dose of Tdap required for all health science students/faculty. **Note 1:** Visit mass.gov for Dept. of Public Health Tdap requirements. **Note 2:** Tdap can be administered regardless of interval. **Note 3**: BH recommends but does not require Tdap.
Varicella (Chicken Pox)	Date of Immunization	Evidence of 2 vaccines or a positive titer; if titer is equivocal or negative, must receive two vaccines after equivocal or negative titer.
Hepatitis B	Date of Immunization Hep B Supplementation form (available on CCP website - West Region tab)	**Note 1:** Vaccination, disease, immunity or declination/supplemental form signed. **Note 2:** If student/faculty is identified as a carrier then they must provide the school with documentation and practice Standard Precautions. **Note 3:** Proof of 3 doses of immunization AND a titer demonstrating immunity or two dose Heplisav-B (HepB-CpG) vaccine AND a titer demonstrating immunity. **Note 4:** If a student/faculty cannot verify Hepatitis B vaccination but their titer is positive, they can sign a Hep B supplemental letter. **Note 5:** If a student/faculty is in process of getting the Hep B series, or it is documented that they do not respond to the vaccine, they can attend rotation with evidence of first inoculation. Students will need to sign the supplemental letter.
Flu vaccination	Annual immunization or submission of a signed medical or religious exemption form (available on CCP website - West Region tab)	Annual requirement **Note 1**: Students/faculty are allowed to attend clinical sites at **BH and CDH** if they've received the annual flu vaccination or were determined medically or religiously exempted by the school. **Note 2:** Students/faculty are allowed to attend clinical sites at **HMC and MMC** if they've received the annual flu vaccination or declined receiving vaccine. **Note 3:** If students/faculty cannot get vaccination due to availability, the student/faculty should sign the exemption form and update health service once immunization is received. **Note 4:** CDH requires a mask in all facilities if student/faculty has not received vaccine for medical or religious exemption. **Note 5:** Schools must maintain record of documentation of the flu vaccine and submit the completed flu

		documentation form to all HCOs. Documentation must include *Last Name, First Name, DOB, Date of Vaccine, Date Exempted (or exempted (or declined)* **Note 6:** An organization specific exemption form is required at CDH.
Urine Drug Screen Test	Date verified	**Note 1:** Baystate Health and Mercy Medical Center require a drug screen on file prior to the start of the clinical rotation. *This is not annual, just prior to and then test if there is a question of* fitness for duty. No other facility requires a drug screen. **Note 2:** Baystate Health and Mercy Medical Center require a 4-panel drug screen. -Drug Panel- 4 panels include Cocaine, amphetamines, Opiates, and PCP
		Fitness for Duty Assessment: **<u>Note 3:</u>** Fitness for duty assessment is required by the healthcare facility to determine that a faculty/student can perform essential job functions if there is a question of physical, behavioral, emotional and/or cognitive difficulties in the workplace. The assessment is requested by a facility staff. An initial assessment may be conducted by a manager, and a follow-up medical evaluation may be required, conducted by a medical provider. **<u>Note 4:</u>** Following the assessment, if student/faculty is found not fit for duty or declines completing the assessment, and or medical evaluation, they will be sent from the premises, and the school will be notified. The student/faculty cannot continue with the rotation until after he/she has been cleared by the facility. **Note 5:** Fitness for duty procedures are institution specific.
Tuberculin Skin Test (PPD) OR an IGRA-test	Date of immunization	**Note 1:** Baystate Health and Mercy Medical Center require TB testing to be performed once, at least 90 days prior to start date to clinical start date. Faculty is required to test once upon hire. If an individual has TB exposure at a site other than Baystate Health and Mercy Medical Center, appropriate exposure protocols should be followed. **All other facilities:**

		Note 2: For freshman students/faculty or those new to healthcare Affiliating students and faculty must provide annual documentation of a negative TB test (IGRA or skin test) within the previous 12 months, unless they have a history of a previously positive TB test. Individuals with a history of a positive TB test must complete an annual symptom assessment screening and undergo a CXR every five years. **Note 3:** Affiliating students/faculty will then have an annual requirement to provide documentation of a negative TB test (IGRA or skin test) within the previous 12 months.
BLS certification by the American Heart Association	Expiration date	**Note 1:** BLS certification is accepted at all HCOs. There are two options for this: a. Take a live certification (or recertification) course. b. Complete AHA BLS HeartCode online AND complete a skills check (the skills check portion is live). **Note 2:** CDH and HMC AHA centers are expanding capacity and can work with schools to schedule classes. **Note 3:** Trinity Health OF New England- MMC and Cooley Dickinson Hospital accept American Red Cross.
Criminal Background Check ● (CORI/SORI) ● Sanction Screening ○ CMS: Medicaid/Medicare Fraud/MA Exclusions List/OIG https://exclusions.oig.hhs.gov/ ○ Office of Foreign Assets Control (OFAC) https://sanctionssearch.ofac.treas.gov/	Date sent Date verified	Specify type of background check performed annually (i.e., national, state or county) **Note 1:** CDH requires a criminal background check no more than 3 months prior to clinical placement, unless their experiences are back-to-back in the same facility. Results must be clean, no exemptions. **Note 2:** Annual requirements at all other facilities. **Note 3:** Sanction screening to ensure that the student/faculty has not been disqualified or excluded from participation in any Federal or State funded program, such as Medicare or Medicaid. **Note 4: Office of Inspector General – US Department of Health and Human Services:** OIG has the authority to exclude individuals and entities from federally funded health care programs pursuant to section 1128 of the Social Security Act (Act) (and from Medicare and State health care programs under section 1156 of the Act) and maintains a list of all currently excluded individuals and entities called the List of Excluded Individuals/Entities (LEIE). Anyone who hires an individual or entity on the LEIE may be subject to Civil Monetary Penalties (CMP). **Note 5: Baystate Health**

		○ Nationwide Background check (7 year look back) ○ Federal Criminal check (unlimited look back) ○ CORI check ○ County Criminal check (7 year look back) ○ MA Exclusions List/OIG (https://exclusions.oig.hhs.gov/) ○ Office of Foreign Assets Control (OFAC) (https://sanctionssearch.ofac.treas.gov/)
Nurse Aide Registry	Date verified	Long term Care requirement. Check must be completed.
Alzheimer's and Dementia Training • CMS has a publicly available "Hand in Hand" training that can be used in lieu of the 8-hour training. ○ Module 1 (video) ○ Module 2 (video) ○ Module 3 (video) ○ Module 4 (video) ○ Module 5 (video) ○ Module 6 (video) • **Healthcare Interactive:** is another online program that provides the Alzheimer's and Dementia training to students. There is a standard yearly fee for this program.-	Date completed	The Department of Public Health requires that all individuals who interact with patients in long-term care for an extended period complete an 8-hour Alzheimer's and dementia training with interactive component and a follow-up 4-hour training annually.
CCP Clinical Orientation	Date completed	Annual requirement **Note 1:** Facilities do not want the facility transcript. Schools should collect and maintain them.
Facility-Specific Clinical Orientation	Date completed	Annual requirement **Note 1:** Facilities do not want the CCP tickets. Schools should collect and maintain them.
Respirator Fit Testing	Signed waiver	**Note 1:** CDH requires that all nursing students and faculty are fit tested by the schools (annually). Schools must complete the MGB N95 Respirator Fit Test Record and RMC Form, and maintain the form on file. No exemptions or declinations allowed. **Note 2:** BH, HMC, MMC **-** If schools are not providing annual N95 mask fitting then, students/faculty will sign a waiver indicating that they will not be assigned or go into those rooms and/or work with patients requiring a N95 mask to provide care. It is the student/faculty's

		responsibility to inform the preceptor that they have signed a waiver. **Note 3:** If it becomes imperative that the student/faculty needs to have a respirator fit test, this can be performed at Employee Health. **Note 4:** Leadership/preceptorship students at BMC can enter enhanced isolation rooms if they are fit tested for an appropriate mask from Employee health services (EHS). BMC only, not permitted at all BH sites.

STANDARD VERFICATION LETTER TEMPLATE

SCHOOL LETTERHEAD
CURRENT DATE
FACILITY CONTACT (NAME, EMAIL & TELEPHONE NUMBER)
FACILITY ADDRESS

Dear FACILITY CONTACT,

All faculty and students' names listed in the table below have met the health requirements and have updated medical records on file in the NAME OF DEPARTMENT at SCHOOL NAME. This rotation for TYPE OF STUDENT at FACILITY NAME begins on DATE and ends on DATE. Updated medical records contain the following:

- Documentation of current immunizations (MMR, Tdap, Varicella, Hep. B), negative TB testing with or without exemptions if the organization allows an exemption.
- Documentation of physical exam **(for students only)**
- Flu Vaccination or medical/religious exemption form
- COVID-19 Vaccination or medical/religious exemption form as long as the organization and or school allows an exemption
- Current CPR card
- Current Massachusetts RN license *(mandatory for instructors and if applicable for students)*
- Background checks completed by the College
- Sanctioned Screening
- Proof of health insurance
- Documented completion of all required CCP on-line orientation and facility-specific orientation requirement.
- Reference to Drug Testing completion and negative results, if required, with or without exemptions if the organization allows an exemption
- Verification in MA Nurses Aid Registry
- N95 mask waiver MGB N95 Respirator Fit Test Record; OR Cooley Dickinson Hospital RMC Form *(no waivers)*

NAME OF SCHOOL maintains a current Certificate of Insurance (COI) for both students/faculty and faculty.

First Session-DATE	Second Session-DATE
1. STUDENT/FACULTY NAME	1. STUDENT/FACULTY NAME
2. STUDENT/FACULTY NAME	2. STUDENT/FACULTY NAME

As always, thank you for allowing us to utilize your facility for this experience. If there are questions, or request for documents please call or email NAME OF NURSING PLACEMENT COORDINATOR AND CONTACT INFORMATION.
Sincerely,
SCHOOL ADMINISTRATOR – DEAN OR DIRECTOR
DIRECT CONTACT INFORMATION