NORTH DAKOTA BOARD OF NURSING

TITLE 54

CHAPTER 54-01-03 DEFINITIONS

Section

54-01-03-01. Definitions.

54-01-03-01. Definitions.

"Temporary Emergency suspension" means action by the board when there are reasonable grounds to believe the licensee, or registrant or applicant has violated a statute or rule the board is empowered to enforce and continued practice by the licensee or registrant would constitute a continuing and imminent threat to the public welfare.

Renumber accordingly

"Letter of concern" means a letter from the board expressing concern that a licensee, registrant or applicant may have been engaged in conduct that is unacceptable or considered low risk of harm to the public. A letter of concern issued by the board is not disciplinary action and is not an appealable action.

Renumber accordingly.

History: Effective June 1, 2002; amended effective April 1, 2004; August 1, 2005;

July 1, 2008; ______, 2011.

General Authority: NDCC 43-12.1-08(2)

Law Implemented: NDCC 43-12.1-08

CHAPTER 54-02-06 LICENSE BY ENDORSEMENT

Section

54-02-06-01 Application and Fee for License by Endorsement

54-02-06-01. Application and fee for license by endorsement. Applicants for license by endorsement must meet board requirements, including the following:

- Submit a completed application and submit to a criminal history record check according to chapter 54-02-12;
- 2 Pay the nonrefundable endorsement fee of one hundred ten dollars;
- 3 Completed a state-approved nursing education program which meets or exceeds those requirements outlined in article 54-03.2; and
- 4 Has nursing practice to demonstrate continued competency which meets or exceeds four hundred hours within the preceding four years <u>or as otherwise</u> approved by the board.

A licensee from another jurisdiction that does not meet the practice hours must meet the requirements in section 54-02-05-05, relating to nonpracticing nurses.

History: Amended effective November 1, 1979; March 1, 1986; March 1, 1992;
May 1, 1996; February 1, 1998; June 1, 2001; June 1, 2002; April 1, 2004; July 1
2008;, 2011
0 1 A -41 14 NIDOO 40 00 04 0(-) 40 40 4 00

General Authority: NDCC 12-60-24.2(o), 43-12.1-08

Law Implemented: NDCC 43-12.1-09(2)(b)

CHAPTER 54-02-07 DISCIPLINARY ACTION

Section

54-02-07-01.1 Grounds for Discipline

54-02-07-01.1. Grounds for discipline. Practice inconsistent with acceptable standards of nursing practice by a licensee, applicant, or registrant means behavior that may place a client or other person at risk for harm or be in violation of the standards of nursing practice. Inconsistent practice includes incompetence by reason of negligence, patterns of behavior, or other behavior that demonstrates professional misconduct and includes the following:

19. Submit to a drug screen that results in a positive test for unauthorized drugs.

p:\rules\2010\july board mtg\kj rev rules promulgation 10.docx

20. Failure to provide written notice of a criminal conviction that may affect patient safety as required by the board.

History: Effective December 1,1995; amended effective July1, 1996; February1,

1998; June 1, 2002; April 1, 2004; _____, 2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-14

Section

54-02-07-03.1 Reporting Violations

54-02-07-03.1. **Reporting violations**. Protection of the public is enhanced by reporting of incidents that may be violations of North Dakota statutes or grounds for discipline by the board. Licensees, registrants, applicants, or citizens should use the following process to report any knowledge of the performance by others of acts or omissions of any individual that violate North Dakota Century Code chapter 43-12.1 or these rules:

4. Self-reporting. A licensee, registrant, or applicant shall provide written notice of explanation and a copy of the applicable documents to the board within thirty days from the date of any criminal, malpractice, administrative, civil, disciplinary action in another jurisdiction or any other action taken against the licensee, registrant or applicant for any offense that may affect patient safety or otherwise relates adversely to the practice of nursing.

History: Effective December 1, 1995; amended effective June 1, 2002; April 1,

2004; July 1, 2008; _____, 2011. General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-11

Section

54-02-07-04.1. Evidence and evaluation of treatment.

- **54-02-07-04.1. Evidence and evaluation of treatment.** The board may require the individual subject to an investigation to submit to a mental health, chemical dependency, or physical evaluation if, during the course of the investigation, there is reasonable cause to believe that any licensee, registrant, or applicant is unable to practice with reasonable skill and safety or has abused alcohol or drugs.
- 1. Upon failure of the person to submit to the evaluation within thirty days of the request, the board may temporarily suspend the individual's license or registration or deny or suspend consideration of any pending application until the person submits to the required evaluation.

History: Effective June 1, 2002; amended effective July 1, 2008;, 2011 General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-14
Section
54-02-07-05.2. Temporary Emergency suspension
54-02-07-05.2. Temperary Emergency suspension. The executive director or the executive director's authorized designee may determine issue an emergency that temperary suspension of a license, or registration, permit or privilege to practice is necessary when continued practice of the licensee, or registrant, or applicant would constitute a continuing and imminent threat to the public welfare. 1. When it appears by credible evidence that temporary suspension may be necessary, the executive director or the executive director's authorized designee may issue an order temporarily suspending the license or registration, specifying the statute or rule. 2. 1. The order of temperary emergency suspension shall take effect upon written notice to the licensee, or registrant or applicant and shall remain in effect until either retracted, modified, or superseded by final disciplinary action by the board or upon agreement between the board and the licensee or registrant, or applicant. If a hearing is not requested by the licensee, registrant or applicant within 20 days of the notice, the emergency suspension shall become effective as a final order without further notice. 3. 2. In cases when disciplinary action is imposed, the board may additionally order that the temporary emergency suspension continue in effect until the later of expiration of the time permitted for appeal or termination of the appellate process.
History: Effective June 1, 2002; amended, 2011. General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-14
Section
54-02-07-05.4 Cease and Desist Order
54-02-07-05.4. Cease and desist order. When it appears by credible evidence that a cease and desist order may be necessary, the executive director of the board or the executive director's authorized designee may issue an order temporarily suspending

lg the license or registration or otherwise directing the <u>a</u>licensee, or registrant <u>or</u>

applicant to cease and desist certain actions.

History: Effective July 1, 2008; repealed effective _____, 2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-14

Section

54-02-07-06 Board Decision

54-02-07-06. Board decision. The final decision will be adopted by a simple majority of the board and will include findings of fact, conclusions of law, and order. The decision of the board to impose or modify any restrictions upon the licensee or registrant or the licensee's or registrant's practice or to reinstate a license or registration will be communicated to the licensee or registrant in the form of a board order. In addition to the terms and conditions imposed by the board, the following may apply:

- 3. Encumbrance. If the board issues an encumbrance order, <u>an</u> encumbered license or registration shall be identified with the following statement: "License or registration is encumbered. Please contact the board of nursing." If a licensee or registrant has more than one license or registration, the encumbrance applies to all licenses or registrations.
- The licensee or registrant shall promptly surrender all current licenses and registrations.
- b. An encumbered license or registration shall be issued with the following statement" License or registration is encumbered. Please contact the board of nursing."
- If a licensee or registrant has more than one license or registration, the encumbrance applies to all licenses or registrations.

History: Effective August 1,	1988; amended effective	December 1,	1995; Ju	ne 1
2002; April 1, 2004;	, 2011.			

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 28-32-13, 43-12.1-14

CHAPTER 54-02-10 RN AND LPN NURSE LICENSURE COMPACT

Section

54-02-10-02 Definitions

7. <u>"Multistate Disciplinary Case" means an allegation or violation by a licensee practicing on a compact privilege in a remote state. The involved compact states shall work cooperatively, each contributing toward resolution of</u>

the matter.

Renumber accordingly.

History: Effective May 1, 2003; amended effective July 1, 2008; , 2011.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

Section

54-02-10-02.2 Limitations on Multistate Licensure Privilege

54-02-10-02.2. Limitations on multistate licensure privilege - Discipline

- 1. Home state board shall include in all licensure disciplinary orders or agreements that limit practice or require monitoring the requirement that the licensee subject to said order or agreement will agree to limit the licensee's practice to the home state during the pendency of the disciplinary order or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from the boards of both the home state and the other party state.
- 2. An individual who has had a license or privilege to practice which is or was

surrendered, revoked, suspended, or <u>an application</u> denied <u>for cause in a prior state of primary residence</u>, may be issued a single state license in the current <u>a</u> <u>new primary state of residence until such time as the individual would be eligible for reinstatement <u>an unrestricted license by in the prior state(s) or states</u> of adverse action.</u>

2. 3. Once eligible for licensure in the prior states, a multistate license may be issued.

History: Effective July 1, 2008; amended effective 2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-51

CHAPTER 54-03.2-03 NURSE ADMINISTRATOR

Section

54-03.2-03-05 Employment of Unqualified Administrator

54-03.2-03-05. Employment of <u>academically</u> unqualified administrator. The board may approve a nursing program that employs an administrator who does not meet the educational requirements in section **54-03.2-03-02** or 54-03.2-03-03 in the following circumstances:

1. The program maintains full approval by the board; and

- The sponsoring institution demonstrates to the satisfaction of the board that substantial effort was used to recruit a candidate with the required credentials; and
 - a. The candidate is currently enrolled in a **master's or** doctoral degree program offered by an accredited institution and can demonstrate to the satisfaction of the board a specific plan of completion within four years for a master's degree and seven years of hire for a doctoral degree; and
 - b. The institution demonstrates to the satisfaction of the board that eighty-five percent of the nursing program's regular nursing faculty full time equivalents have the required degree; or
 - c. A faculty of seven or fewer members will have no more than one <u>nursing</u> faculty <u>full time equivalents member</u> that is unqualified.
- <u>3.</u> Other circumstances as approved by the board.

Histor	y : Effect	tive April	1, 2004;	amended	effective .	July 1, 2008;	, 2011

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17

CHAPTER 54-03.2-04 FACULTY

Section

54-03.2-04-07 Preceptors

54-03.2-04-07. Preceptors. A preceptor provides supervision of a nursing student's practice experience and precepts at the direction of the faculty member responsible for the course in which the student is enrolled.

- 1. Clinical preceptors may be used to enhance clinical learning experiences, after a student has received clinical and didactic instruction in foundation courses;
- 2. Preceptors may not be used to replace clinical faculty in <u>pre-licensure</u> certificate, associate, or baccalaureate degree nursing programs;
- 3. Interdisciplinary preceptors must hold credentials for their applicable practice;
- 4. The preceptor must be educated at the same or higher level as the academic program in which the student is enrolled or must have demonstrated competencies that are appropriate for the student's learning experience;

- Criteria for selecting preceptors must be in writing;
- 6. The functions and responsibilities of the preceptor must be delineated in writing and provided to the preceptor;
- 7. The faculty member retains responsibility for the student's learning experiencesand confers periodically with the preceptor and student for the purposes of monitoring and evaluating the learning experiences; and
- 8. A preceptor shall supervise no more than two students during any one scheduled work time or shift.

History: Effective November 1, 1996; amended effective April 1, 2004; ______, 2011.

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17(1)

Section

54-03.2-04-08 Employment of Unqualified Faculty

54-03.2-04-08. Employment of <u>academically</u> unqualified faculty. The program may receive continued approval with faculty who do not meet the educational requirements in section 54-03.2-04-03 or 54-03.2-04-04 in the following circumstances:

- 1. The program maintains full approval by the board.
- 2. The administrator demonstrates to the satisfaction of the board that substantial effort was used to recruit a candidate with the required credentials; and
 - a. The candidate is currently enrolled in a master's or doctoral degree program offered by an accredited institution and can demonstrate to the satisfaction of the board a specific plan of completion within four years of hire for the master's degree or seven years for a doctorate degree; and
 - b. The administrator demonstrates to the satisfaction of the board that eighty-five percent of the nursing program's regular nursing faculty full time equivalents, have the required degree; or
 - c. A <u>program with faculty</u> of seven or fewer members will have no more than <u>a total of one nursing</u> faculty <u>full time equivalent member who held</u> by is an unqualified individual.
 - d. The board may extend the time allowed for the individual to complete the degree by one year due to severe extenuating circumstances.
 - e. Any individual engaged in a teaching relationship who does not

meet the qualifications in section 54-03.2-04-03 or section 54-03.2-04-04 is considered unqualified faculty regardless of the title assigned by the institution.

- 2. Other circumstances as approved by the board.
- 3. A program with faculty holding less than a baccalaureate degree in nursing shall not be approved.
- 4. A faculty developmental program that is approved by the board must be provided for all unqualified faculty; and
 - a. Each unqualified individual must be assigned a mentor who will supervise and interact with the individual in person at designated intervals as determined by the board; and
 - b. The board must be notified of changes in mentors; and
 - c. The program director must submit to the board the names of unqualified individuals employed as faculty and the number of full time equivalents filled by these individuals each semester; and
 - d. The program director must submit verification that unqualified individuals are continuously enrolled in a graduate program and making progress in the curriculum that will allow completion of the graduate program within the required timeframe.
- **<u>5.</u>** Other circumstances as approved by the board.

History: Effective November 1, 1996; amended effective April 1, 2004; July 1,

2008 ,2011.

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17(1)

CHAPTER 54-03.2-06 CURRICULUM

Section

54-03.2-06-01. General curriculum

54-03.2-06-01. General curriculum. The curriculum must:

- 1. Be planned, implemented, and evaluated by the faculty with provisions for student input;
- 2. Reflect the mission and purpose of the nursing education program;
- 3. Be organized and sequenced to meet the program outcomes;

- 4. Require a number of credits consistent with other programs at the same degree level;
- 5. Facilitate articulation for upward mobility;
- 6. Have a syllabus for each nursing course; and
- 7. Have written, measurable program outcomes, which include student learning outcomes that reflect the role <u>and scope of practice for which</u> of the graduate <u>is being prepared</u>.

History: Effective November 1, 1996; amended effective April 1, 2004; July 1, 2008: .2011.

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17(1)

Section

54-03.2-06-07. Nursing curriculum.

54-03.2-06-07. Nursing curriculum. The curriculum of the nursing education program must assure the development of evidence-based practice for the level and scope of nursing practice. The program outcomes must reflect the scope of practice and level of licensure sought as defined in chapters 54-05-01, 54-05-02, and 54-05-03.1.

- 4. The curriculum of a baccalaureate nurse program <u>or a direct entry, pre-licensure</u> graduate program must include:
 - a. Content regarding legal and ethical issues; history, trends, and theories in nursing; biological, physical, social, and behavioral sciences, including pharmacotherapy; nutritional therapy; and pathophysiology;
 - b. Nursing process;
 - Didactic instruction and clinical experience in health promotion, prevention, restoration, and maintenance of clients across the lifespan and in a variety of clinical settings:
 - (1) Communicate, manage knowledge, and support decision making using information technology; and
 - (2) Provide client-centered care that:
 - (a) Respects client differences, values, preferences, and expressed needs;
 - (b) Involves clients in decision making and care management;
 - (c) Coordinates an interdisciplinary team to cooperate,

collaborate, communicate, and integrate client care and health promotion;

- (d) Employs evidence-based practice to integrate best research with clinical expertise and client values for optimal care; and
- (e) Applies quality improvement processes:
 - [1] Quality improvement theory;
 - [2] Measurement of quality in terms of structure, process, and client outcomes; and
 - [3] Participation in development of changes in processes through utilization of change theory and systems of care with the objective of improving quality;
- d. Experiences that promote the development of leadership and management skills and professional socialization:
 - (1) Responsibilities as a member of the profession;
 - (2) Management and leadership theory;
 - (3) Group dynamics and group leadership skills; and
 - (4) Systems and organizational theory;
- e. Learning experiences and clinical practice to include management and care of groups of clients and delegation and supervision of health care providers:
 - (1) Infection control and safety;
 - (2) Epidemiology; Quality and safety;
 - (3) Public or community health theory; and
 - (4) Case management theory;
- f. Sufficient practice experiences to assure the development of nursing competencies to:
 - (1) Provide development of client-centered care;

- (2) Provide opportunities to participate in interdisciplinary teams;
- (3) Utilize or integrate research with clinical experience;
- (4) Apply the principles of quality improvement; and
- (5) Utilize technology and information management;
- 9. Learning experiences and methods of instruction must be consistent with the written curriculum plan; and
- h. Courses that meet the sponsoring institution's general education requirements for the baccalaureate degree.
- 5. The curriculum preparing for licensure as an advanced practice registered nurse must include content and sufficient experience from nursing and related academic disciplines to meet requirements for a graduate degree with a nursing focus:
 - a. Advanced theory and research appropriate to the area of nursing specialization; The curriculum must prepare the graduate to practice in one of the four identified advanced practice registered nursing roles:
 - (1) certified registered nurse anesthetist, certified nurse midwife, clinical nurse specialist and certified nurse practitioner; and
 - (2) at least one of the six population foci, i.e., family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health or gender-related or psychiatric /mental health.
 - b. Advanced nursing practice experience relevant to the focus of nursing specialization; The curriculum shall include separate graduate level courses in the following:
 - (1) An advanced practice nursing core, including legal, ethical and professional responsibilities of the advanced practice registered nurse.
 - (2) Advanced physiology and pathophysiology, including general principles that apply across the lifespan.
 - (3) Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches.
 - (4) Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.
 - c. <u>Preparation in the core competencies for the identified advanced practice registered nurse role.</u>

- d. Preparation in a specialty area of practice is optional, but if included, must build on the advanced practice registered nurse role and competencies in at least one of the six population-focus.
- Adequate role preparation for advanced nursing practice.; and
- e. Each instructional track or major shall have supervised clinical experience that is directly related to the role and population foci, including pharmacotherapeutic management of patients.
 - (1) A preceptor for an advanced practice registered nurse student must be a licensed practitioner with graduate level preparation with comparable practice focus.
 - (2) A majority of the preceptors must be licensed advanced practice registered nurses.
 - e. Courses to meet the sponsoring institution's requirements for a graduate degree.
- <u>f.</u> <u>Preparation that provides a basic understanding of the principles for decision making in the identified role.</u>
- g. Provisions for the recognition of prior learning and advanced placement shall be in the curriculum for individuals who hold master's in nursing and are seeking preparation in a different role and population foci.
 - (1) Post-masters nursing students shall complete the requirements of the master's advanced practice registered nurse program through a formal graduate level certificate in the desired role and population foci.
 - (2) <u>Post-master students must demonstrate the same advanced practice registered nurses outcome competencies as the masters level student.</u>
- h. Additional required components of graduate education programs preparing advanced practice registered nurses as determined by the board.
- <u>I.</u> Courses to meet the sponsoring institution's requirements for a graduate degree.
- 6. Delivery of instruction by distance education methods must meet the standards for nursing education according to article 54-03.2, be congruent with the nursing program curriculum plan, and enable students to meet the goals, competencies, and

objectives of the education program and standards of the board.

7. Out-of-state pre-licensure programs provided in this state must meet the standards for nursing education according to article 54-03.2.

History: Effective April 1, 2004; amended effective August 1, 2005; July 1, 2008;______, 2011.

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17

CHAPTER 54-03.2-07 NURSING EDUCATION PROGRAM APPROVAL

Section

54-03.2-07-02 Initial Approval Status

54-03.2-07-02. Initial approval status. The board may grant initial approval status to a proposed nursing education program that complies with chapter 54-03.2-08.

- 1. Before a nursing education program is permitted to admit students, the program shall submit evidence of the ability to meet the standards for nursing education according to chapter 54-03.2-01.
- 2. The board may continue initial approval status:
 - a. Prior to the graduation of the first class, when review of materials specified in article 54-03.2, the most recent annual report, and the most recent survey report reveals **substantial** compliance with the rules; or
 - b. After graduation of the first class, when review of the criteria for full approval reveals time is needed to fully comply with the rules.

History: Effective November 1, 1996; amended effective April 1, 2004; July 1,

2008; ______, 2011.

General Authority: NDCC 43-12.1-17 Law Implemented: NDCC 43-12.1-17(1)

CHAPTER 54-03.2-10 (NEW)

INNOVATION IN NURSING EDUCATION

New Section

54-03.2-10-01. Statement of Intent 54-03.2-10-02...

p:\rules\2010\july board mtg\kj rev rules promulgation 10.docx

54-03.2-10-02. Eligibility

54-03.2-10-03. Application

54-03.2-10-04. Standards for Approval.

54-03.2-10-05. Review of Application and Board Action.

54-03.2-10-06. Periodic Evaluation.

54-03.2-10-07. Requesting Continuation of the Innovative Approach.

54-03.2-10-01. Statement of intent. A nursing education program may apply to implement an innovative approach by complying with the provisions in this chapter. Nursing education programs approved to implement innovative approaches shall continue to provide quality nursing education that prepares graduates to practice safely, competently, and ethically within the scope of practice as defined in North Dakota Century Code chapter 43-12.1.

- 1. <u>To foster innovative models of nursing education to address the changing</u> needs in health care.
- 2. To assure the innovative approaches are conducted in a manner consistent within the board's role of protecting the public.
- 3. To assure that innovative approaches conform to the quality outcome standards and core education criteria established by the board.

History:	, 2011.
General Authority:	NDCC 43-12.1-08
l aw Implemented:	NDCC 43-12 1-17

54-03.2-10-02. Eligibility. A nursing education program is eligible to apply under the following conditions:

- 1. The nursing education program shall hold full board approval without conditions for the past five years.
- 2. There have been no substantial complaints against the program in the past five years
- 3. There have been no violations of North Dakota Administrative Code Article 54-03.2 in the past two years.

History:	, 2011.
General Authority	y: NDCC 43-12.1-08
I aw Implemente	d: NDCC 43-12.1-17

54-03.2-10-03. Application. The following information shall be provided to the board at least 60 days prior to the board meeting upon which action will be taken. The application may be no more than 15 pages, including appendices, with a 1-page executive summary.

- 1. <u>Indentifying information</u>
 - a. Name of program
 - b. Name of program administrator
 - c. Contact information
- 2. A brief description of the current program, including accreditation and board approval status.
- 3. <u>Identification of regulation(s) affected by the proposed innovative</u> approach.
- 4. Length of time that innovative approach will be implemented and studied.
- 5. Description of the innovative approach, including objectives.
- 6. <u>Brief explanation of reason for application to implement innovative approach at the current time.</u>
- 7. Explanation of differences between innovative approach and current program operation.
- 8. Rationale with available evidence to support proposed innovative approach.
- 9. Identification of resources that support the proposed innovative approach.
- 10. Expected impact of innovative approach on program, including the following:
 - a. Administration
 - b. Student policies
 - c. Student learning outcomes
 - d. Faculty resources
 - e. Fiscal resources
- 11. Plan for implementation, including timeline.
- 12. Plan for evaluation of proposed innovation, including the following:
 - a. measurable criteria/outcomes
 - b. method for evaluation
 - c. frequency of evaluation
- 13. Additional application information as requested by the board.

History:	, 2011.
General Authorit	y: NDCC 43-12.1-08
Law Implemente	d: NDCC 43-12.1-17

54-03.2-10-04. Standards for approval. Approval of innovations in nursing education involves submission of a comprehensive report by the nursing program that ensures quality nursing education that prepares nurses to provide client-centered care as a member of the interdisciplinary team.

- 1. Eligibility criteria in section 54-03.2-10-03 and application criteria in section 54-03.2-10-04 are met.
- 2. The innovative approach will not compromise the quality of education or safe practices of students.
- 3. <u>Human and financial resources are sufficient to support the innovative</u> approach.
- 4. Rationale supported with current evidence supports the implementation of the innovative approach.
- 5. <u>Implementation plan is reasonable to achieve the desired outcomes of the innovative approach.</u>
- 6. <u>Timeline provides for a sufficient period to implement and evaluate the innovative approach.</u>
- 7. <u>Plan for periodic evaluation is comprehensive and supported by</u> appropriate methodology.

History:	, 2011.
General Authority:	NDCC 43-12.1-08
Law Implemented:	NDCC 43-12.1-17

54-03.2-10-05. Review of application and board action.

- 1. Annually the board may establish the number of innovative approach applications it will accept, based upon board resources.
- 2. The board shall evaluate all applications to determine if they meet eligibility criteria in section 54-03.2-10-03 and the standards established in section 54-03.2-10-05.
- 3. The board shall inform the education program of the approval process.
- 4. If the application meets the standards, the board may:
 - a. Approve the application, or
 - b. Approve the application with modifications as agreed between the board and the nursing education program.
- 5. If the submitted application does not meet the criteria in section 54-03.2-10-03 and section 54-03.2-10-05 the board may deny approval or request additional information.
- 6. The board may rescind the approval or require the program modifications if:
 - a. The board receives substantial evidence indicating adverse impact; or
 - b. The nursing program fails to implement the innovative approach as presented and approved.

History:	, 2011.
General Authority:	NDCC 43-12.1-08
Law Implemented:	NDCC 43-12.1-17

54-03.2-10-06. Periodic evaluation.

- 1. The education program shall submit progress reports conforming to the evaluation plan annually or as requested by the board.
- 2. The final evaluation report shall conform to the evaluation plan, detailing and analyzing the outcomes data.
- 3. If any report indicates that students were adversely impacted by the innovation, the nursing program shall provide documentation of corrective measures and their effectiveness.
- 4. <u>Nursing education programs must maintain eligibility with criteria in</u> section 54-03.2-10-03.

History: _____, 2011.
General Authority: NDCC 43-12.1-08
Law Implemented: NDCC 43-12.1-17

54-03.2-10-07. Requesting continuation of the innovative approach.

- 1. If the innovative approach has achieved the desired outcome and the final evaluation has been submitted, the program may request that the innovative approach be continued.
- 2. Request for the innovative approach to become an ongoing part of the education program must be submitted with supporting evidence 30 days before a regular board meeting.
- 3. The board may grant the continued approval for an extended time of the innovative approach if the desired outcomes were met and public protection has not been compromised.
- 4. All continued innovations will be considered by the board for possible revisions to the applicable rules.

History:	, 2011.
General Authority	: NDCC 43-12.1-08
I aw Implemented	· NDCC 43-12 1-17

CHAPTER 54-05-03.1 ADVANCED PRACTICE REGISTERED NURSE

Section

54-05-03.1-02

Board Authority - Title - Abbreviation

54-05-03.1-02. Board authority - Title - Abbreviation. The board shall authorize advanced nursing practice to a registered nurse who has submitted

p:\rules\2010\july board mtg\kj rev rules promulgation 10.docx

evidence of advanced knowledge, skills, and abilities in a defined area of nursing practice. Since 1991 individuals have been Individuals are licensed as advanced practice registered nurses in the categories of certified nurse midwife, certified registered nurse anesthetist, clinical nurse specialist, or certified nurse practitioner and with the abbreviations "APRN" and CRNA, CNM, CNS and CNP respectively.

Each advanced practice registered nurse shall use the applicable category designation for purposes of identification and documentation. The title to be used must be submitted to the board for approval prior to usage. No person may use an advanced practice registered nurse title or APRN plus their respective role titles, or their authorized abbreviations without the express authority of the board of nursing to do so.

History: Effective March 1, 1992; amended effective November 1, 1996;

, 2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-08(1)

Section

54-05-03.1-04

Initial Requirements for Advanced Practice Registered Nurse

Licensure

54-05-03.1-04. Initial requirements for advanced practice registered nurse licensure. Applicants for advanced practice registered nurse licensure must:

- 1. Possess a current license to practice as a registered nurse in North Dakota or in a compact state;
- 2. Submit evidence of completion of an advanced practice track accredited graduate level advanced practice registered nurse within the nursing education program in one of the four roles and with at least one population focus. accredited by a national accrediting body;
- 3. Submit evidence of current certification by a national nursing certifying body in the specialty advanced practice registered nurse role and population foci appropriate to educational preparation; Primary source verification of certification is required.
- 4. Shall not have an encumbered license or privilege to practice in any state or territory.
- 4. <u>5.</u> Submit a completed notarized application and pay the fee of one hundred dollars; and
- 5. <u>6.</u> Submit a scope of practice statement according to established board guidelines for review and approval by the board of nursing.

7. Applicants who have been issued a registered nurse temporary permit and meet all of the qualifications for advanced licensure may be issued a temporary advanced practice registered nurse license with the same date of expiration. The advanced practice registered nurse license will be issued to coincide with the renewal date of the initial registered nurse license.

Applicants for whom there is no appropriate certifying examination may submit other evidence verifying initial competence as established by the board. Evidence of an equivalent mechanism will not be accepted after January 1, 2005, and individuals will no longer be licensed without an approved advanced practice registered nurse examination.

History: Effective March 1, 1992; amended effective November 1, 1996;

December 1, 1997; June 1, 2001; April 1, 2004; July 1, 2008; effective_____,2011

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-12.1-09(2)(b)(c)(d)

Section

54-05-03.1-05 Temporary Permit

54-05-03.1-05. Temporary permit. An applicant for advanced licensure who possesses a current registered nurse license, and has submitted a complete application, the required fee, and evidence of meeting all educational requirements, may be issued a **90 day** temporary advanced practice registered nurse permit for practice in an advanced practice registered nurse category if the applicant:

- 1. Is applying for licensure under section 54-05-03.1-04;
- 2. Is completing practice requirements for national nursing certification for the advanced practice registered nurse category;
- 3. <u>2.</u> Has applied as a first-time candidate to the next national nursing certification examination for the advanced practice registered nurse category; or
- 4. 3. Is awaiting certification results based upon initial application.
- 4. Temporary permit will not include prescriptive authority.

If the applicant fails the first certification examination for which the applicant is eligible, the applicant may continue to practice if supervised by a licensed provider of an appropriately related specialty or practice and the board is notified. If the applicant fails the second certification examination for which the applicant is eligible, the individual may no longer practice in the advanced practice registered nurse role.

History: Effective March 1, 1992; amended effective November 1, 1996;

effective ,2011.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-12.1-09(2)(b)(c)(d)

Section

54-05-03.1-06

Requirements for Advanced Practice Registered Nurse

Licensure Renewal

54-05-03.1-06. Requirements for advanced practice registered nurse licensure renewal. The advanced practice registered nurse license is valid for the same period of time as the applicant's registered nurse license. Applicants for renewal of the advanced practice registered nurse license must have an active registered nurse license and:

- 1. Complete the advanced practice registered nurse license renewal application;
- 2. Pay an advanced practice registered nurse licensure renewal fee of forty dollars;
- 3. Submit evidence of current <u>national</u> certification <u>in the appropriate</u> <u>advanced practice registered nurse role and with at least one population focus</u>, or participate in a competence maintenance program as <u>established</u> <u>recognized</u> by the board; and <u>.</u>
- 4. Submit a scope of practice statement for review and approval by the board.

History: Effective March 1, 1992; amended effective November 1, 1996; June 1,

2001; April 1, 2004; effective , 2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-10(1)

New Section

54-05-03.1-06.1. Change in scope of practice.

54-05-03.1-06.1. Change in scope of practice. The advanced practice registered nurse must notify the board in writing of a change in scope of practice within five working days and submit a completed scope of practice statement within sixty days of the change.

History: Effective ,2011

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-10(1)

- **54-05-03.1-09. Requirements for prescriptive authority.** Applicants for prescriptive authority shall:
 - 1. Be currently licensed as an advanced practice registered nurse in North Dakota.
 - 2. Submit a complete, notarized prescriptive authority application and pay the fee of fifty dollars.
 - a. Submit a completed transcript with degree posted from an Provide evidence of completion of accredited graduate level advanced practice registered nurse program and which includes evidence of completion of advanced pharmacotherapy, physical assessment, and pathophysiology.
 - 3. Provide evidence of completion of thirty contact hours of education or equivalent in pharmacotherapy related to the applicant's scope of advanced practice that:
 - a. b. Have been obtained within a three-year period of time immediately prior to the date of application for prescriptive authority; or
 - b. c. Other methods that may be approved by the board.
 - 4. 3. Submit an affidavit from the licensed physician who will be participating in the collaborative prescriptive agreement acknowledging the manner of review and approval of the planned prescriptive practices. Information in the affidavit must also indicate that the advanced practice registered nurse's scope of prescriptive practice is appropriately related to the collaborating physician's medical specialty or practice. The affidavit must address all of the following areas:
 - a. Broad classifications of drugs or devices to be commonly prescribed by the advanced practice registered nurse;
 - b. Methods and frequency of the collaboration for prescriptive practices, which must occur as client needs dictate, but no less than once every two months;
 - c. Methods of documentation of the collaboration process regarding prescriptive practices; and

d. Alternative arrangements for collaboration regarding prescriptive practices in the temporary or extended absence of the physician.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-12.1-02(7), 43-12.1-09(2)(c)(d)

Section

54-05-03.1-10 Authority to Prescribe

54-05-03.1-10. Authority to prescribe.

- 1. A permanent advanced practice registered nurse license with the addition of prescriptive authority shall be issued following review and approval of the completed application by the board.
 - 1. The board grants prescribing and ordering authority through the advanced practice registered nurse license. All licensed advanced practice registered nurses with the educational preparation are authorized to diagnose, prescribe and institute therapy or referrals of patients to health care agencies, health care providers, and community resources. See section 54-05-03.1-09. Requirements for prescriptive authority.
- 2. Between meetings of the board, board staff may review the prescriptive authority application and grant a temporary permit to prescribe if all the requirements are met.
- 3. The advanced practice registered nurse with prescriptive authority may prescribe drugs as defined by chapter 43-15-01 pursuant to applicable state and federal laws. Notice of the prescriptive authority granted will be forwarded to the board of pharmacy.
- 4. A prescriptive authority <u>advanced practice</u> license does not include drug enforcement administration authority for prescribing controlled substances. Each licensee must apply for and receive a drug enforcement administration number before writing prescriptions for scheduled drugs.
- 5. The licensee may prescribe, administer, sign for, dispense <u>over the</u> <u>counter, legend, and controlled substances</u>, and procure pharmaceuticals <u>including</u> samples following state and federal regulations.
- 6. The signature on documents related to prescriptive practices must clearly indicate that the licensee is an advanced practice registered nurse.

- 7. The advanced practice registered nurse with prescriptive authority may not prescribe, sell, administer, distribute, or give to oneself or to one's spouse or child any drug legally classified as a controlled substance or recognized as an addictive or dangerous drug.
- 8. Notwithstanding any other provision, a practitioner who diagnoses a sexually transmitted disease, such as chlamydia, gonorrhea, or any other sexually transmitted infection, in an individual patient may prescribe or dispense, and a pharmacist may dispense, prescription antibiotic drugs to that patient's sexual partner or partners, without there having been an examination of that patient's sexual partner or partners.
- 9. The advanced practice registered nurse plans and initiates a therapeutic regimen that includes ordering and prescribing medical devices and equipment, nutrition, diagnostic and supportive services including, but not limited to, home health care, hospice, physical and occupational therapy.

History: Effective March 1, 1992; amended effective November 1, 1996; April 1,

2004; January 1, 2009; <u>effective</u> , <u>2011</u>

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-08(1)

Section 54-05-03.1-11

Prescriptive Authority Renewal

- **54-05-03.1-11. Prescriptive authority renewal.** Prescriptive authority is valid for the same period of time as the applicant's advanced practice registered nurse and registered nurse license. The applicant for renewal must:
 - 1. Renew the applicant's registered nurse license.
 - 2. Submit verification of current certification by a national nursing certification body in the specific area of nursing practice.
 - 3. Submit a completed advanced practice registered nurse with prescriptive authority renewal application.
 - 4. Pay the advanced practice registered nurse renewal fee of forty dollars and the fifty dollar renewal fee for prescriptive authority.
 - 5. Provide evidence of completion of fifteen contact hours of education during the previous two years in pharmacotherapy related to the scope of practice. These contact hours may fulfill the registered nurse renewal continuing education requirement. The education or its equivalent

as approved by the board may include academic credits, attendance at approved seminars and courses, or participation in approved correspondence or home study continuing education courses.

- 6. Submit a verification of affidavit from the licensed physician who will be participating in the collaborative prescriptive agreement acknowledging the manner of review and approval of the planned prescriptive practices. Information in the affidavit must also indicate that the advanced practice registered nurse's scope of prescriptive practice is appropriately related to the collaborating physician's medical specialty or practice. The affidavit must address all of the following areas:
- a. Broad classifications of drugs or devices to be commonly prescribed by the advanced practice registered nurse;
- b. Methods and frequency of the collaboration for prescriptive practices, which must occur as client needs dictate, but no less than once every two months;
- c. Methods of documentation of the collaboration process regarding prescriptive practices; and
- d. Alternative arrangements for collaboration regarding prescriptive practices in the temporary or extended absence of the physician.

History: Effective March 1, 1992; amended effective November 1, 1996; June 1,

2001; April 1, 2004; March 24, 2004; effective ,2011

General Authority: NDCC 43-12.1-08
Law Implemented: NDCC 43-12.1-10(1)

CHAPTER 54-05-03.2 SPECIALTY PRACTICE REGISTERED NURSE

Section

54-05-03.2-05. Requirements for Specialty Practice Registered Nurse Licensure Renewal

54-05-03.2-05. Requirements for specialty practice registered nurse licensure renewal. The specialty license is valid for the same period of time as the applicant's registered nurse license. Applicants for renewal of the license must:

- 1 Renew the registered nurse license;
- 2 Complete the specialty practice registered nurse license renewal application;
- 3 Pay the licensure renewal fee of fifty dollars;
- 4 Submit evidence of current certification; and
- 5 Submit a scope of practice statement for review and approval by the board. Meet

the requirements in section 54-05-03.2-08.

History: Effective June 1, 2002; <u>amended effective</u> ,2011.

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-09(7)

Section

54-05-03.2-05.1 Reactivation of a License

54-05-03.2-05.1. **Reactivation of a license**. A specialty practice registered nurse previously licensed in North Dakota who applies for reactivation must meet board requirements, including the following:

- 1. Complete the application and submit to a criminal history record check according o section 54-02-12-01;
- 2. Pay the nonrefundable renewal fee and thirty dollar reactivation fee; and
- 3. Meet the requirements in section 54-02-05-05.1 regarding practice requirements for license renewal, section 54-02-05-08 regarding continuing education requirements for license renewal, and section 54-05-03.2-05 regarding requirements for specialty practice registered nurse licensure renewal and section 54-05-03.2-08 regarding change in scope of practice; or
- 4. Submit other evidence the applicant wishes to submit which would provide proof of nursing competence acceptable to the board.

History: Effective July 1, 2008; <u>amended effective</u> ,2011.

General Authority: NDCC 12-60-24.2(o), 43-12.1-08

Law Implemented: NDCC 43-12.1-09.1, 43-12.1-10(1), 43-12.1-20

New Section

54-05-03.2-08 Change in Scope of Practice

54-05-03.2-08. Change in scope of practice. The specialty practice registered nurse must notify the board in writing of a change in scope of practice within five working days and submit completed scope of practice statement within sixty days of the change.

History: Effective ,2011.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-12-12.1-09(2)(f)

ARTICLE 54-04.1

Nursing Education Loans

CHAPTER 54-04.1-02 QUALIFICATIONS

Section

54-04.1-02-01 Qualifications

54-04.1-02-01. Qualifications. To qualify for a nursing education loan, the applicant must:

- 1. Have all necessary application forms completed and on file in the board office by July first of the year in which the applicant wishes to be considered by the board for a nursing education loan; and
- 2. Demonstrate one of the following:
- a. Be accepted into and enrolled in a North Dakota board-approved undergraduate nursing education program for practical nurses or registered nurses; or
- 2. b. Have a current North Dakota license and have been accepted into and enrolled in an educational program that is accredited by a United States department of education-recognized regional accreditation entity and acceptable to the board; or
- 3. C. Be a resident of North Dakota for refresher courses and accepted into a refresher course that meets board requirements.

History: Effective October 1, 1987; amended effective October 1, 1989; March 1, 1992; November 1, 1996; May 1, 2003; April 1, 2004; July 1, 2008; ______,2011. General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-08(2)(h)

CHAPTER 54-04.1-03 DISBURSEMENTS

Section 54-04.1-03-01 Amount of Loans

54-04.1-03-01. **Amount of loans**. To the extent funds are available, educational loans will be made in the following amounts:

- <u>1.</u> Students accepted into a non-degree licensed practical nurse program may receive a loan of no more than one thousand dollars.
- <u>2.</u> Students in an associate degree licensed practical or registered nurse program may receive a loan of no more than two thousand dollars for the entire program, including a one plus one program.
- <u>3.</u> Students in a baccalaureate registered nurse program may receive a loan of no more than two <u>three</u> thousand five hundred dollars.
- Graduate nurse students may receive a loan of no more than three four

thousand dollars to complete studies for a master's degree in nursing. A student in a post-master's certificate program is eligible for this level of loan provided the individual did not receive the maximum loan amount for the initial master's degree in nursing.

- <u>5.</u> Graduate nurse students pursuing a doctorate may receive a loan of up to five thousand **five hundred** dollars.
- <u>6.</u> Licensed practical nurses or registered nurses may receive a loan of no more than the cost of the course for a board-approved nurse refresher course.

History: Effective October 1, 1987; amended effective October 1, 1989; March 1, 1992; February 1, 1998; May 1, 2003; April 1, 2004; ______,2011.

General Authority: NDCC 43-12.1-08 Law Implemented: NDCC 43-12.1-08(2) (h)

CHAPTER 54-04.1-04 REPAYMENT BY EMPLOYMENT

Section

54-04.1-04-06. Loan forgiveness for military deployment.

54-04.1-04-06. Loan forgiveness for military deployment. The loan may be forgiven at the discretion of the board upon proof of military deployment.

<u>History:</u> Effective _____, 2011 <u>General Authority:</u> NDCC 43-12.1-08

Law Implemented: NDCC 43-12.1-08(2)(h)

Article 54-07

Nurse Assistant Unlicensed Assistive Person

Chapter

54-07-01 General Provisions

54-07-02 Nurse Assistant Unlicensed Assistive Person Registry

54-07-

Criminal History Record Checks for Registration

02.1

54-07-03 Nursing Tasks and Nursing Functions [Repealed]

54-07- Nurse Assistant Unlicensed Assistive Person Competence

p:\rules\2010\july board mtg\kj rev rules promulgation 10.docx

03.1

54-07-04 Nurse Assistant Disciplinary Action [Repealed]

54-07-05 Medication Administration by a Medication Assistant

54-07-06 Medication Assistant Program Requirements [Repealed]

<u>54-07-</u>

Medication Assistant Program I Requirements

06.1

54-07-07 Medication Assistant Program II Requirements

54-07-08 Specific Delegation of Medication Administration

Article 54-09

Nurse Advocacy Program for Workplace Impairments <u>Program</u>

Chapter

54-09-01 General Provisions
54-09-02 Nurse Advocacy Workplace Impairment Program