

State of Utah
Administrative Rule Analysis

NOTICE OF PROPOSED RULE

- * The agency identified below in box 1 provides notice of proposed rule change pursuant to Utah Code Section 63G-3-301.
- * Please address questions regarding information on this notice to the agency.
- * The full text of all rule filings is published in the Utah State Bulletin unless excluded because of space constraints.
- * The full text of all rule filings may also be inspected at the Division of Administrative Rules.

DAR file no:

40897

Date filed:

10-18-2016

State Admin Rule Filing Id:

Time filed:

	Agency No.	Rule No.	Section No.
Utah Admin. Code Ref (R no.):	R 156	- 31b	-
Changed to Admin. Code Ref. (R no.):	R	-	-

1. **Agency:** Commerce/Division of Occupational and Professional Licensing
Room no.:
Building: Heber M. Wells Building
Street address 1: 160 East 300 South
Street address 2:
City, state, zip: Salt Lake City UT 84111-2316
Mailing address 1: PO Box 146741
Mailing address 2:
City, state, zip: Salt Lake City UT 84114-6741
Contact person(s):
Name: Suzette Farmer
Phone: 801-530-6789
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(Interested persons may inspect this filing at the above address or at the Division of Administrative Rules during business hours)

2. **Title of rule or section (catchline):**

Nurse Practice Act Rule

3. **Type of notice:**

New ___; Amendment XXX; Repeal ___; Repeal and Reenact ___

4. **Purpose of the rule or reason for the change:**

The Division and Board of Nursing reviewed the rule and are proposing amendments to the rule to: (1) clarify, add, or delete definitions as identified by the Board of Nursing; (2) update the duties of the Advisory Peer Education Committee; (3) clarify licensure by equivalency for practical nurses; (4) clarify intern licensure requirements for advanced practice registered nurses specializing in psychiatric mental health; (5) revise requirements for limited-time approval of nursing education programs to be congruent with Utah Code 58-31b-601 as revised by SB 56 during the 2016 Legislative Session; (6) clarify delegation of medication administration in school-settings; and (7) allow advanced practice registered nurses to concurrently hold licensure as an advanced practice registered nurse and as a registered nurse.

5. **This change is a response to comments from the Administrative Rules Review Committee.**

No XXX; Yes ____

6. **Summary of the rule or change:**

See attachment for summary of proposed rule amendments

7. **Aggregate anticipated cost or savings to:**

A) State budget:

Affected: No ____; Yes XXX

The identified costs for the State budget include the costs of reprinting the rule and a mailing to advanced practice registered nurses. Advanced practice registered nurses will need to be informed about the option to maintain licensure as both a registered nurse and an advanced practice registered nurse. They will also need to be informed about the expectation that they hold Compact licensure as a registered nurse if they practice in a Compact state as a registered nurse. Estimated cost for reprinting the rule: \$300. Estimated cost for a mailing to advanced practice registered nurses: \$2,500. Processing the application for each advanced practice registered nurse who wants to concurrently hold a registered nurse license will depend on the number of licensees wanting to hold both. The estimated processing time for each registered nurse application is 15 minutes. At \$20.00 per hour for staff, each application would cost the state \$5.00. The costs to the state will be offset when the applicant pays the \$58 renewal fee. The estimated percentage of advanced practice registered nurses who would want to hold a concurrent registered nurse license is 50% or less. If 1250 advanced practice registered nurses apply for registered nurse licensure, this would cost the state \$6,250.00; however, the state would recover \$72,500.00 in fees. Costs for rule revisions related to SB 56 passed during the 2016 legislative session were included in the fiscal note for the bill.

B) Local government:

Affected: No XXXX; Yes ____

The proposed amendments apply only to license classifications regulated under Title 58, Chapter 31b and applicants for licensure in those classifications. As a result, the proposed amendments do not apply to local governments.

C) Small businesses ("small business" means a business employing fewer than 50 persons)

Affected: No XXXX; Yes ____

The Division is not aware of any small businesses which would be affected by the proposed rule amendments. Therefore, there are no identified costs to savings for small businesses.

D) Persons other than small businesses, businesses, or local government entities ("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency):

Affected: No ____; Yes XXXX

Due to the increased specificity of the student notification requirements for non-accredited nursing education programs, or nursing education programs that lose their accreditation; nursing education programs may incur additional costs for student notification. The notification costs may range from \$1.00-\$3.00 per nursing student for these programs.

8. **Compliance costs for affected persons:**

The proposed change to allow nurses to hold both a registered nurse and an advanced practice registered nurse license will increase licensure renewal costs for those who want to hold both licenses. The current registered nurse renewal fee is \$58 every two years. No nurse living and practicing in Utah would be required to hold both licenses; therefore, increased renewal costs will only affect those who make the informed decision to hold both licenses. However, an advanced practice registered nurse who holds concurrent registered nurse licensure will be able to license in another state more easily, saving the licensee time and decreasing their frustration with the licensure by endorsement process in another state.

9. **A) Comments by the department head on the fiscal impact the rule may have on businesses:**

These rule changes clarify, add or delete certain definitions, update the duties of the Advisory Peer Education Committee, clarify licensure by equivalency for practical nurses, clarify intern licensure requirements for certain advanced practice registered nurses, revise requirements for limited-time approval of nursing education programs to be congruent with statutory provisions adopted during the 2016 Legislative Session, clarify delegation of medication administration in school settings, and allow advanced practice registered nurses to hold concurrent licensure in certain circumstances. A negligible fiscal impact to businesses is anticipated.

B) Name and title of department head commenting on the fiscal impacts:

Francine A. Giani, Executive Director

10 This rule change is authorized or mandated by state law, and implements or interprets the following state and federal laws.

State code or constitution citations (required) (e.g., Section 63G-3-402; Subsection 63G-3-601(3); Article IV) :

Section 58-31b-101

Subsection 58-1-106(1)(a)

Subsection 58-1-202(1)(a)

11 This rule adds, updates, or removes the following title of materials incorporated by references (a copy of materials incorporated by reference must be submitted to the Division of Administrative Rules; if none, leave blank):

	First Incorporation	Second Incorporation
Official Title of Materials Incorporated (from title page)		
Publisher		
Date Issued		
Issue, or version		
ISBN Number (optional)		
ISSN Number (optional)		
Cost of Incorporated Reference		
Action: Adds, updates, or removes		

(If this rule incorporates more than two items by reference, please attach additional pages)

12 The public may submit written or oral comments to the agency identified in box 1. (The public may also request a hearing by submitting a written request to the agency. The agency is required to hold a hearing if it receives requests from ten interested persons or from an association having not fewer than ten members. Additionally, the request must be received by the agency not more than 15 days after the publication of this rule in the Utah State Bulletin. See Section 63G-3-302 and Rule R15-1 for more information.)

A) Comments will be accepted until 5:00 p.m. on (mm/dd/yyyy): 12/15/2016

B) A public hearing (optional) will be held:

On (mm/dd/yyyy):	At (hh:mm AM/PM):	At (place):
12/8/2016	9:00 AM	160 East 300 South, Conference Room 474 (4th floor), Salt Lake City, Utah

13 This rule change may become effective on (mm/dd/yyyy): 12/22/2016

NOTE: The date above is the date on which this rule MAY become effective. It is NOT the effective date. After the date designated in Box 12(A) above, the agency must submit a Notice of Effective Date to the Division of Administrative Rules to make this rule effective. Failure to submit a Notice of Effective Date will result in this rule lapsing and will require the agency to start the rulemaking process over.

14 Indexing information -- keywords (maximum of four, in lower case, except for acronyms (e.g., "GRAMA") or proper nouns (e.g., "Medicaid")); may not include the name of the agency.

licensing

nurses

15 Attach an RTF document containing the text of this rule change (filename):

R156-31b.pro

To the agency: Information requested on this form is required by Sections 63G-3-301, 302, 303, and 402. Incomplete forms will be returned to the agency for completion, possibly delaying publication in the *Utah State Bulletin*, and delaying the first possible effective date.

AGENCY AUTHORIZATION

Agency head or designee, and title:



Date

(mm/dd/yyyy)

: 10/18/2016

R156-31b - Nurse Practice Act Rule

Box 6 - Summary of rule or change:

Subsection R156-31b-102:

The definition of “approved continuing education” was revised to include continuing education approved by any state board of nursing. This inclusion will allow licensees additional options for completion of continuing education requirements. The definition of “approved re-entry program” was added to establish minimum requirements for re-entry programs and enhance consistency among re-entry programs. The definition of “licensure by equivalency” was revised to allow students currently enrolled in any accredited registered nurse education program to sit for the practical nursing licensure examination. The current limitation of licensure by equivalency for those enrolled in Utah-based programs created barriers to licensure, particularly for those Utah residents who live near the border of another state. The requirements for those who have completed a registered nurse education program to sit for the practical nursing licensure examination were revised to ensure consistency for those who apply for licensure by equivalency. The definition of “practica” was added to clarify the meaning of the term as used in R156-31b-609.

Subsection R156-31b-202:

The duties of the Advisory Peer Education Committee were revised to be consistent with statute. Limited-time approval of nursing education programs was eliminated when Section 58-31b-601 was revised during the 2016 Legislative Session.

Subsection R156-31b-301:

The current language requiring the automatic superseding of a registered nurse license upon issuance of an advanced practice registered nurse license was revised to allow the nurse to hold both licenses if desired. Most other states require that applicants for licensure in their states hold licensure as both a registered nurse and an advanced practice nurse. The current rule for Utah creates an unnecessary barrier and potential delays when the licensee is seeking licensure by endorsement in another state.

Subsection R156-31b-301(a):

The requirements for licensure by equivalency as a practical nurse were updated to be consistent with the definition of “licensure by equivalency.”

Subsection R156-31b-309:

The three year term of intern licensure for an advanced practice registered nurse specializing in psychiatric mental health was eliminated in order to be consistent with a six-month term of intern licensure for all other advanced practice registered nurse specialties. The supervisory requirements for intern licensure as an advanced practice registered nurse specializing in psychiatric mental health nursing were added in order to be consistent with Subsection R156-31b-301c(2).

Subsection R156-31b-602:

The requirements for limited-time approval of non-accredited nursing education programs were revised to be consistent with Section 58-31b-602 as revised during the 2016 Legislative Session. The revisions clarify that those programs granted limited-time approval will continue to be an

approved education program for initial licensure in Utah until December 31, 2020 or the date on which they are granted accreditation in accordance with Subsection R156-31b-102(2) and Section 58-31b-602.

Subsection R156-31b-701a:

The current rule limits the ability of the nurse to delegate medication administration in the school setting to routine medications as defined in Subsection 58-31b-102(18). The definition of routine medications in Subsection 58-31b-102(18) is specific to the practice of a medication aide certified as defined in Subsection 58-31b-102(13). The current rule, therefore, limits the ability of the nurse to effectively delegate the administration of medications in the school setting. The proposed revision revises the language to allow delegation of medication administration to medications that are routine for the specific patient.

Subsection R156-31b-703b:

The current rule states that “An individual license in good standing in Utah as an APRN (advanced practice registered nurse) and residing in this state may practice as an RN (registered nurse) in any Compact state.” In order to practice in a Compact state the nurse must hold a current Compact license. This rule cannot be enforced as it gives no consideration to the requirements or expectations of the other Compact states. The proposed revision clarifies the need for an individual to hold a current Compact license in order to practice in a Compact state.

R156. Commerce, Occupational and Professional Licensing.

R156-31b. Nurse Practice Act Rule.

R156-31b-102. Definitions.

In addition to the definitions in Title 58, Chapters 1 and 31b, as defined or used in this rule:

(1) "Accreditation" means formal recognition and approval of a nurse education program by an accrediting body for nursing education that is approved by the United States Department of Education.

(2) "Administering" means the direct application of a prescription drug or device, whether by injection, inhalation, ingestion, or by any other means, to the body of a human patient or research subject by another person.

(3) "APRN" means advanced practice registered nurse.

(4) "APRN-CRNA" means advanced practice registered nurse with registered nurse anesthetist certification.

(5) "Approved continuing education" means:

(a) continuing education that has been approved by a nationally or internationally recognized approver of professional continuing education for health-related industries;

(b) nursing education courses offered by an approved education program as defined in Subsection R156-31b-102(7);

(c) health-related coursework taken from an educational institution accredited by a regional or national institutional accrediting body recognized by the U.S. Department of Education; ~~and~~

(d) continuing education approved by any state board of nursing; or

(e) training or educational presentations offered by the Division.

(6) "Approved education program" means any nursing education program that meets the standards established in Section 58-31b-601 or Section R156-31b-602.

(7) "Approved re-entry program" means:

(a) a program designed to evaluate nursing competencies for nurses;

(b) approved by a state board of nursing; or

(c) offered by an accredited nursing education program; and

(d) includes a minimum of 150 hours of supervised clinical learning.

~~(7)8)~~ "CGFNS" means the Commission on Graduates of Foreign Nursing Schools.

~~(8)9)~~ "Comprehensive nursing assessment" means:

(a) conducting extensive initial and ongoing data collection:

(i) for individuals, families, groups or communities; and

(ii) addressing anticipated changes in patient conditions as well as emergent changes in patient health status;

(b) recognizing alterations to previous patient conditions;

(c) synthesizing the biological, psychological, spiritual, and social aspects of the patient's condition;

(d) evaluating the impact of nursing care; and

(e) using data generated from the assessments conducted pursuant to this Subsection (a) through (d) to:

(i) make independent decisions regarding patient health care needs;
(ii) plan nursing interventions;
(iii) evaluate any possible need for different interventions; and
(iv) evaluate any possible need to communicate and consult with other health team members.

([9]10) "Contact hour" in the context of continuing education means 60 minutes, which may include a 10-minute break.

([10]11) "Delegate" means:

(a) to transfer to another nurse the authority to perform a selected nursing task in a selected situation;

(b) in the course of practice of an APRN who specializes in psychiatric mental health nursing, to transfer to any individual licensed as a mental health therapist selected psychiatric APRN supervisory clinical experiences within generally-accepted industry standards; or

(c) to transfer to an unlicensed person the authority to perform a task that, according to generally-accepted industry standards or law, does not require a nursing assessment as defined in Sections R156-31b-102(8) and (14).

([11]12) "Delegatee" means one or more persons assigned by a delegator to act on the delegator's behalf.

([12]13) "Delegator" means a person who assigns to another the authority to perform a task on behalf of the person.

([13]14) (a) "Disruptive behavior" means conduct, whether verbal or physical, that:

(i) is demeaning, outrageous, or malicious;

(ii) occurs during the process of delivering patient care; and

(iii) places a patient at risk.

(b) "Disruptive behavior" does not include criticism that is offered in good faith with the aim of improving patient care.

([14]15) "Focused nursing assessment" means an appraisal of a patient's status and situation at hand, including:

(a) verification and evaluation of orders; and

(b) assessment of:

(i) the patient's nursing care needs;

(ii) the complexity and frequency of the required nursing care;

(iii) the stability of the patient; and

(iv) the availability and accessibility of resources, including appropriate equipment, adequate supplies, and other appropriate health care personnel to meet the patient's nursing care needs.

([15]16) "Foreign nurse education program" means any program that originates or occurs outside of the United States.

([16]17) "Individualized healthcare plan" or "IHP" means a written document that outlines the provision of student healthcare services intended to achieve specific student outcomes.

([17]18) "Licensure by equivalency" applies only to the licensed practical nurse and may be warranted if the person seeking licensure:

(a) (i) has, within the two-year period preceding the date of application, successfully completed course work in a [~~Utah-based~~] registered

nurse education program that meets the criteria established in Sections 58-31b-601 and R156-31b-602; ~~[-or]~~ and

~~(ii) has been unsuccessful on the NCLEX-RN at least one time; or~~

(b) (i) is currently enrolled in an accredited ~~[Utah-based]~~ registered nurse education program; and

(ii) has completed course work that is certified by the education program provider as being equivalent to the course work of an ACEN-accredited practical nursing program, as verified by the nursing education program director or administrator.

(~~18~~ 19) "LPN" means licensed practical nurse.

(~~19~~ 20) "MAC" means medication aide certified.

(~~20~~ 21) "Medication" means any prescription or nonprescription drug as defined in Subsections 58-17b-102(24), (37) or (61) of the Pharmacy Practice Act.

(~~21~~ 22) "NCLEX" means the National Council Licensure Examination of the National Council of State Boards of Nursing.

(~~22~~ 23) "Non-approved education program" means any nurse prelicensing course of study that does not meet the criteria of Section 58-31b-601, including a foreign nurse education program.

(~~23~~ 24) "Nurse" means:

(a) an individual licensed under Title 58, Chapter 31b as:

(i) a licensed practical nurse;

(ii) a registered nurse;

(iii) an advanced practice registered nurse; or

(iv) an advanced practice registered nurse-certified registered nurse anesthetist; or

(b) a certified nurse midwife licensed under Title 58, Chapter 44a.

(~~24~~ 25) "Other specified health care professionals," as used in Subsection 58-31b-102(15), means an individual, in addition to a registered nurse or a licensed physician, who is permitted to direct the tasks of a licensed practical nurse, and includes:

(a) an advanced practice registered nurse;

(b) a certified nurse midwife;

(c) a chiropractic physician;

(d) a dentist;

(e) an osteopathic physician;

(f) a physician assistant;

(g) a podiatric physician;

(h) an optometrist;

(i) a naturopathic physician; or

(j) a mental health therapist as defined in Subsection 58-60-102(5).

(~~25~~ 26) "Patient" means one or more individuals:

(a) who receive medical and/or nursing care; and

(b) to whom a licensee owes a duty of care.

(~~26~~ 27) "Patient surrogate" means an individual who has legal authority to act on behalf of a patient when the patient is unable to act or make decisions unaided, including:

- (a) a parent;
- (b) a foster parent;
- (c) a legal guardian; or
- (d) a person legally designated as the patient's attorney-in-fact.

(~~[27]~~28) "PN" means an unlicensed practical nurse.

(~~[28]~~29) "Psychiatric mental health nursing specialty" means an expertise in psychiatric mental health, whether as a clinical nurse specialist or nurse practitioner licensed as an APRN.

(30) "Practica" means working in the nursing field as a student; not exclusive to patient care activities.

(~~[29]~~31) "Practitioner" means a person authorized by law to prescribe treatment, medication, or medical devices.

(~~[30]~~32) "RN" means a registered nurse.

(~~[31]~~33) "School" means any private or public institution of primary or secondary education, including a charter school, pre-school, kindergarten, or special education program.

(~~[32]~~34) "Supervision" is as defined in Subsection R156-1-102a(4).

(~~[33]~~35) "Unprofessional conduct" as defined in Title 58, Chapters 1 and 31b is further defined in Section R156-31b-502.

R156-31b-202. Advisory Peer Education Committee Created - Membership - Duties.

(1) In accordance with Subsection 58-1-203(1)(f), there is created the Advisory Peer Education Committee.

(2) The duties and responsibilities of the Advisory Peer Education Committee are to:

(a) review applications for approval of ~~[nursing education]~~medication aide training programs;

(b) monitor a nursing education program that is approved for a limited time under Section R156-31b-602 as it progresses toward accreditation; and

(c) advise the Division as to nursing education issues.

(3) The composition of the Advisory Peer Education Committee shall be:

(a) seven RNs or APRNs actively involved in nursing education, including at least one representative from public, private, and proprietary nursing programs; and

(b) any member of the Board who wishes to serve on the committee.

R156-31b-301. License Classifications - Professional Upgrade.

(1) A licensed practical nurse license shall be superseded upon the issuance of a registered nurse license.

(2) An advanced practice registered nurse may hold both an APRN and an RN license in Utah.

(3) Unless the APRN requests that both the APRN and RN licenses remain active, the registered nurse license shall be superseded upon the issuance of an advanced practice registered nurse license.

~~[Upon issuance by the Division of an increased scope of practice license:~~

~~(1) the increased licensure supersedes the lesser license;~~

~~(2) the lesser license is automatically expired, and~~
~~(3) the licensee shall immediately destroy any print or physical copy of the lesser license.]~~

R156-31b-301a. LPN License - Education, Examination, and Experience Requirements.

(1) An applicant who has never obtained a license in any state or country shall:

(a) demonstrate that the applicant:

(i) has successfully completed a PN prelicensing education program that meets the requirements of Section 58-31b-601;

(ii) has successfully completed a PN prelicensing education program that is equivalent to an approved program under Section 58-31b-601; ~~or~~

(iii) (A) has completed an RN prelicensing education program that meets the requirements of Section 58-31b-601; and

(B) has taken, but not passed the NCLEX-RN at least one time; or

(iii) (A) is enrolled in [an RN prelicensing] a registered nurse education program that meets the requirements of Section 58-31b-601; and

(B) has completed coursework that is equivalent to the coursework of an accredited practical nurse program;

(b) pass the NCLEX-PN examination pursuant to Section R156-31b-301e; and

(c) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

(2) An applicant who holds a current LPN license issued by another country or state shall:

(a) demonstrate that the license issued by the other jurisdiction is active and in good standing as of the date of application;

(b) demonstrate that the PN prelicensing education completed by the applicant:

(i) is equivalent to PN prelicensing education approved in Utah as of the date of the applicant's graduation; and

(ii) if a foreign education program, meets all requirements outlined in Section R156-31b-301d;

(c) pass the NCLEX-PN examination pursuant to Section R156-31b-301e; and

(d) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

(3) An applicant who holds a current LPN license in an interstate compact state shall apply for a license within 90 days of establishing residency in Utah and complete all requirements pursuant to R156-31b-301a(2).

(4) An applicant who has been licensed previously in Utah, but whose license has expired or lapsed, shall:

(a) if the applicant has not practiced as a nurse for up to five years, document current compliance with the continuing competency requirements as established in Subsection R156-31b-303(3);

(b) if the applicant has not practiced as a nurse for more than five

years but less than eight years:

- (i) pass the NCLEX-PN examination within 60 days following the date of application; or
- (ii) successfully complete an approved re-entry program;
- (c) if the applicant has not practiced as a nurse for more than eight years but less than 10 years:
 - (i) successfully complete an approved re-entry program; and
 - (ii) pass the NCLEX-PN examination within 60 days following the date of application; or
- (d) if the applicant has not practiced as a nurse for 10 years or more, comply with this Subsection (1).
- (5) An applicant who has been licensed in another state or country, but whose license has expired or lapsed, shall:
 - (a) comply with this Subsection (2)(b); and
 - (b) comply with this Subsection (4) as applicable; and
 - (c) submit to a criminal background check pursuant to Subsection 58-31b-302(5) and Section R156-31b-301g.

R156-31b-309. APRN Intern License.

(1) An individual who has completed all requirements outlined in Subsection R156-31b-301c(1) except the certification examination requirement may apply for an APRN intern license.

(2) In accordance with Section 58-31b-306, and unless this Subsection (3) or (4) applies, an intern license expires the earlier of:

- (a) 180 days from the date of issuance;
- (b) 30 days after the Division receives notice pursuant to this Subsection (4) that the applicant has failed the specialty certification examination; or
- (c) upon issuance of an APRN license.

(3) ~~[If an intern is applying for licensure as an APRN specializing in psychiatric mental health nursing, the intern license expires three years from the date of issuance.~~

~~—(4)—~~ The Division in collaboration with the Board may extend the term of any intern license upon a showing of extraordinary circumstances beyond the control of the applicant.

(4) An individual holding an APRN intern license specializing in psychiatric mental health nursing must work under the supervision of an APRN pursuant to R156-31b-301c.

- (5) It is the professional responsibility of an APRN intern:
 - (a) to inform the Division of examination results within ten calendar days of receipt; and
 - (b) to cause the examination agency to send the examination results directly to the Division.

R156-31b-602. Requirements for Limited-time Approval of Non-accredited Nursing Education Programs.

- (1) (a) Pursuant to Subsection 58-31b-601(2), a nursing education

program may, prior to obtaining an accreditation described in Subsection 58-31b-601(1), qualify for a limited time as an approved education program if the program ~~[provider demonstrates]~~was granted limited-time approval on or before May 15, 2016 and had demonstrated to the satisfaction of the Board that the program:

(i) ~~[has]~~ established a timeline which allows for the initial accreditation visit to occur before the first students graduate;

(ii) understands the accreditation standards of its selected accrediting body as demonstrated in a written report which includes plans and processes consistent with the accrediting body for:

- (A) curricular organization and delivery method;
- (B) student learning outcomes;
- (C) student support;
- (D) program administration and organization;
- (E) learning environment and facilities;
- (F) clinical learning and placements; and
- (G) faculty and nurse administrator qualifications;

(iii) clearly informs students and potential students about its accreditation status and the potential implications for future practice; and

~~[(b) If the program provider is seeking accreditation from an accrediting body for nursing education as defined in Subsection R156-31b-102(1), the limited-time approval shall expire after 12 months unless Subsection (2) applies.~~

~~[(c) If the program provider is seeking accreditation from the COA, the limited-time approval shall expire at the end of the COA initial review process unless this Subsection (2) applies.~~

~~[(2) (a) A program that is granted limited-time approval pursuant to this Subsection (1) shall retain that approval if, during the applicable time period outlined in Subsection (1) it achieves candidate, applicant, or initial status with an accrediting body for nursing education that is approved by the United States Department of Education.~~

~~[(b) A program that meets the qualifications described in this Subsection (2) (a) shall retain its limited-time approval until such time as the accrediting body makes a final determination on the program's application for accreditation.~~

~~[(c) A program shall achieve full accreditation within five years of receiving candidate, applicant, or review status with the approved accrediting body.]~~

~~[(3) 2) The provider of a program [that receives]with limited-time approval pursuant to this Subsection (1) and (2) shall, pursuant to this Subsection ([4]3), disclose to each student who enrolls:~~

(a) that program accreditation is pending;

(b) that any education completed prior to the accrediting body's final determination will satisfy, at least in part, state requirements for prelicensing education; and

(c) that, if the program fails to achieve accreditation on or before December 31, 2020, any student who has not yet graduated will not be made

~~eligible for the NCLEX by the state of Utah [be unable to complete a nurse prelicensing education program through the provider].~~

~~([4]3) The disclosure required by this Subsection ([3]2) shall:~~

~~(a) be signed by each student who enrolls with the provider; and~~

~~(b) at a minimum, state the following: "The nursing program in which you are enrolling has not yet been accredited. The program is being reviewed by the (accrediting body). Any education you complete prior to December 31, 2020 or a final determination by the (accrediting body) will satisfy associated state requirements for licensure. [However, i] If the (accrediting body) ultimately determines that the program does not qualify for accreditation, you will not be made eligible for the NCLEX by the state of Utah [you will need to transfer into a different program in order to complete your nurse prelicensing education. There is no guarantee that another institution will accept you as a transfer student. If you are accepted, there is no guarantee that the institution you attend will accept the education you have completed at (name of institution providing disclosure) for credit toward graduation]."~~

~~([5]4) If an accredited program receives notice or determines that its accreditation status is in jeopardy, the institution offering the program shall:~~

~~(a) immediately notify the Board of its accreditation status;~~

~~(b) immediately and verifiably notify all enrolled students in writing of the program's accreditation status, including:~~

~~(i) the estimated date on which the accrediting body will make its final determination as to the program's accreditation; and~~

~~(ii) the potential impact of a program's accreditation status on the graduate's ability to secure licensure and employment or transfer academic credits to another institution in the future; and~~

~~(c) attempt negotiations with other academic institutions to establish a transfer articulation agreement.~~

~~([6]5) If a program with limited-time approval fails to achieve accreditation by December 31, 2020 or if a program loses its accreditation, the institution offering the program shall:~~

~~(a) submit a written report to the Board within ten days of receiving formal notification from the accrediting body;~~

~~(b) notify all matriculated and pre-enrollment nursing students about the program's accreditation status;~~

~~(c) inform all nursing students who will graduate from a non-accredited program that they will not be eligible for initial licensure through Utah; and~~

~~(d) submit a written plan to close the program and cease operations, if necessary.~~

~~[(b) meet with the Board as soon as practicable after receiving formal notification from the accrediting body to discuss programmatic options including:~~

~~(i) an appeal of the accrediting body's action;~~

~~(ii) a one-time reapplication with an approved accrediting body for~~

~~applicant or candidate status with an onsite evaluation by the accrediting body to be completed within three years of the date the accreditation was lost,~~

~~(iii) a one-time reapplication for limited-time program approval pursuant to Subsections R156-31b-602(1) through (4), or~~

~~(iv) written plans to close the program and cease operations.~~

~~(7) A program that has exhausted all limited-time approval options shall submit written plans to cease enrollment and close the program.]~~

R156-31b-701a. Delegation of Tasks in a School Setting.

In addition to the delegation rule found in Section R156-31b-701, the delegation of tasks in a school setting is further defined, clarified, or established as follows:

(1) Before a registered nurse may delegate a task that is required to be performed within a school setting, the registered nurse shall:

(a) develop, in conjunction with the applicable student, parent(s) or parent surrogate(s), educator(s), and healthcare provider(s) an IHP; and

(b) ensure that the IHP is available to school personnel.

(2) Any task being delegated by a registered nurse shall be identified within the patient's current IHP.

(3)(a) A registered nurse shall personally train any unlicensed person who will be delegated the task of administering medications that are routine for the student [~~routine medication(s), as defined in Subsection 58-31b-102(17), to a student~~].

(b) The training required under this Subsection (3)(a) shall be performed at least annually.

(c) A registered nurse may not delegate to an unlicensed person the administration of any medication:

(i) with known, frequent side effects that can be life threatening;

(ii) that requires the student's vital signs or oxygen saturation to be monitored before, during or after administration of the drug;

(iii) that is being administered as a first dose:

(A) of a new medication; or

(B) after a dosage change; or

(iv) that requires nursing assessment or judgment prior to or immediately after administration.

(d) In addition to delegating other tasks pursuant to this rule, a registered nurse may delegate to an unlicensed person who has been properly trained regarding a diabetic student's IHP:

(i) the administration of a scheduled dose of insulin; and

(ii) the administration of glucagon in an emergency situation, as prescribed by the practitioner's order or specified in the IHP.

R156-31b-703b. Scope of Nursing Practice Implementation.

(1) LPN. An LPN shall be expected to:

(a) conduct a focused nursing assessment;

(b) plan for and implement nursing care within limits of competency;

- (c) conduct patient surveillance and monitoring;
 - (d) assist in identifying patient needs;
 - (e) assist in evaluating nursing care;
 - (f) participate in nursing management by:
 - (i) assigning appropriate nursing activities to other LPNs;
 - (ii) delegating care for stable patients to unlicensed assistive personnel in accordance with these rules and applicable statutes;
 - (iii) observing nursing measures and providing feedback to nursing managers; and
 - (iv) observing and communicating outcomes of delegated and assigned tasks; and
 - (g) serve as faculty in area(s) of competence.
- (2) RN. An RN shall be expected to:
- (a) interpret patient data, whether obtained through a focused nursing assessment or otherwise, to:
 - (i) complete a comprehensive nursing assessment; and
 - (ii) determine whether, and according to what timeframe, another medical professional, a patient's family member, or any other person should be apprised of a patient's nursing needs;
 - (b) detect faulty or missing patient information;
 - (c) apply nursing knowledge effectively in the synthesis of the biological, psychological, spiritual, and social aspects of the patient's condition;
 - (d) utilize broad and complete analyses to plan strategies of nursing care and nursing interventions that are integrated within each patient's overall health care plan or IHP;
 - (e) demonstrate appropriate decision making, critical thinking, and clinical judgment to make independent nursing decisions and to identify health care needs;
 - (f) correctly identify changes in each patient's health status;
 - (g) comprehend clinical implications of patient signs, symptoms, and changes as part of ongoing or emergent situations;
 - (h) critically evaluate the impact of nursing care, the patient's response to therapy, and the need for alternative interventions;
 - (i) intervene on behalf of a patient when problems are identified so as to revise a care plan as needed;
 - (j) appropriately advocate for patients by:
 - (i) respecting patients' rights, concerns, decisions, and dignity;
 - (ii) identifying patient needs;
 - (iii) attending to patient concerns or requests; and
 - (iv) promoting a safe and therapeutic environment by:
 - (A) providing appropriate monitoring and surveillance of the care environment;
 - (B) identifying unsafe care situations; and
 - (C) correcting problems or referring problems to appropriate management level when needed;
 - (k) communicate with other health team members regarding patient

choices, concerns, and special needs, including:

- (i) patient status and progress;
 - (ii) patient response or lack of response to therapies; and
 - (iii) significant changes in patient condition;
- (l) demonstrate the ability to responsibly organize, manage, and supervise the practice of nursing by:
- (i) delegating tasks in accordance with these rules and applicable statutes; and
 - (ii) matching patient needs with personnel qualifications, available resources, and appropriate supervision;
 - (m) teach and counsel patient families regarding an applicable health care regimen, including general information about health and medical conditions, specific procedures, wellness, and prevention;
 - (n) if acting as a chief administrative nurse:
 - (i) ensure that organizational policies, procedures, and standards of nursing practice are developed, kept current, and implemented to promote safe and effective nursing care;
 - (ii) (A) assess the knowledge, skills, and abilities of nursing staff and assistive personnel; and
 - (B) ensure all personnel are assigned to nursing positions appropriate to their determined competence and licensure/certification/registration level; and
 - (iii) ensure that thorough and accurate documentation of personnel records, staff development, quality assurance, and other aspects of the nursing organization are maintained;
 - (o) if employed by a department of health:
 - (i) implement standing orders and protocols; and
 - (ii) complete and provide to a patient prescriptions that have been prepared and signed by a physician in accordance with the provisions of Section 58-17b-620;
 - (p) serve as faculty in area(s) of competence; and
 - (q) perform any task within the scope of practice of an LPN.
- (3) APRN.
- (a) An APRN who chooses to change or expand from a primary focus of practice shall, at the request of the Division, document competency within that expanded practice based on education, experience, and certification. The burden to demonstrate competency rests upon the licensee.
 - (b) An individual licensed as an APRN may practice within the scope of practice of an RN and an LPN.
 - (c) An APRN who wishes to practice as an RN in a Compact state must qualify for and obtain an RN Compact license in Utah~~[individual licensed in good standing in Utah as an APRN and residing in this state may practice as an RN in any Compact state]~~.

KEY: licensing, nurses

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58-1-202(1)(a)