

**TITLE 485. OKLAHOMA BOARD OF NURSING  
CHAPTER 10. LICENSURE OF PRACTICAL AND REGISTERED NURSES**

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking

**PROPOSED RULES:**

Subchapter 1. General Provisions

485:10-1-2. [AMENDED]

Subchapter 3. Regulations for Approved Nursing Education Programs

485:10-3-1. [AMENDED]

485:10-3-5. [AMENDED]

485:10-3-6. [AMENDED]

Subchapter 5. Minimum Standards for Approved Nursing Education Programs

485:10-5-3.2. [AMENDED]

485:10-5-4.1. [AMENDED]

485:10-5-5.2. [AMENDED]

Subchapter 6. Minimum Standards for Approved Advanced Practice Registered Nursing (APRN) Education Programs (Effective January 1, 2016)

485:10-6-1. [AMENDED]

485:10-6-2. [AMENDED]

485:10-6-3. [AMENDED]

Subchapter 7. Requirements for Registration and Licensure as a Registered Nurse

485:10-7-2. [AMENDED]

Subchapter 11. Disciplinary Action

485:10-11-1. [AMENDED]

Subchapter 15. Requirements for Practice as an Advanced Practice Registered Nurse

485:10-15-9. [AMENDED]

Subchapter 18. Prescriptive Authority for CRNA

485:10-18-3. [AMENDED]

**SUMMARY:**

Proposed revisions include:

Subchapter 1 changes the academic semester credit hour to 16 contact hours in alignment with educational standards.

Subchapter 3 amendments, specific to nursing education programs, include lengthening the period of conditional approval status for a nursing program not meeting minimal requirements from 1 year to up to 2 years, if deemed necessary by the Board; allows 1 additional period of 2 years of conditional approval status; expands the submission time for faculty qualification records from 2 weeks to 30 days from the date of appointment; and authorizes Board staff to approve minor curriculum changes.

Effective 11-01-2016, current statutory language regulating practical nursing (PN) education administrators/faculty was deleted. Subchapter 5 includes the regulation of PN education administrators/faculty along with registered nursing administrator/faculty qualifications. Grandfathering language is included for PN education program administrators/faculty employed in the aforementioned positions on December 31, 2016, deeming educational qualifications as being met. OAC 485:10-5-3.2(d) defines Acting and Interim Nurse Administrator. OAC 485:10-

5-4.1(i) requires 300 total program clinical hours prior to substituting 30% simulation for clinical hours for each clinical course.

OAC 485:10-6-1(2)(A)(i) replaces word descriptor with citation. OAC 485:10-6-2(4)(B)(C) requires APRN lead faculty/faculty to have on file with the nursing education program, documentation of related qualifications, experience and competence for coordinating/instructing in a similarly population focus. OAC 485:10-6-3(a) clarifies required elements in the APRN program application.

Subchapter 7 provides endorsement applicant requirements consistent with in-state initial applicants. Amendments in Subchapter 11 include additional information related to violation of professional boundaries.

Amendments in Subchapters 15 and 16 update the name of Certified Registered Nurse Anesthetist certifying body.

**AUTHORITY:**

Oklahoma Board of Nursing; 59 O.S. §§ 567.2(A); 567.3a.10; 567.4(F); 567.5(D); 567.8(B)(7); 567.12; 567.12a(B)

**COMMENT PERIOD:**

Persons wishing to submit written comments must do so by January 16, 2017, at 4:30 p.m. to the Oklahoma Board of Nursing, 2915 N. Classen, Suite 524, Oklahoma City, Oklahoma 73106, Attn: Jackye Ward, MS, RN, NEA-BC.

**PUBLIC HEARING:**

A public hearing will be held to provide an opportunity for persons to orally present their views on Tuesday, January 24, 2017, at 5:30 p.m., at The Sheraton Oklahoma City Downtown, 2nd floor Ballroom, 1 North Broadway Avenue, Oklahoma City, Oklahoma. Anyone who wishes to speak at this public hearing must sign in with the Oklahoma Board of Nursing by 5:00 p.m., January 24, 2017.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed *Rules* are requested to provide the agency with information, in dollar amounts if possible, about the increase in the level of direct costs, indirect costs, or other costs expected to be incurred by the business entity due to compliance with the proposed *Rules*. Business entities may submit this information in writing by January 16, 2017, at 4:30 p.m., to the Oklahoma Board of Nursing, 2915 N. Classen, Suite 524, Oklahoma City, OK 73106, Attn: Jackye Ward, MS, RN, NEA-BC.

**COPIES OF PROPOSED RULES:**

Copies of the proposed *Rules* may be obtained by contacting Jackye Ward, MS, RN, NEA-BC, at the Oklahoma Board of Nursing, 2915 N. Classen, Suite 524, Oklahoma City, Oklahoma 73106, (405) 962-1809. The proposed amendments may also be viewed on the Oklahoma Board of Nursing web site at <http://www.nursing.ok.gov/rules.html>.

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S. Section 303(D), a rule impact statement has been prepared. The rule impact statement may be obtained by contacting Jackye Ward, MS, RN, NEA-BC, at the Oklahoma Board of Nursing, 2915 N. Classen, Suite 524, Oklahoma City, Oklahoma 73106, (405) 962-1809. The Rule Impact Statement may also be viewed on the Oklahoma Board of Nursing web site at <http://www.nursing.ok.gov/rules.html>.

**CONTACT PERSON:**

Jackye Ward, MS, RN, NEA-BC, (405) 962-1809.

**TITLE 485. OKLAHOMA BOARD OF NURSING  
CHAPTER 10. LICENSURE OF PRACTICAL AND REGISTERED NURSES**

**SUBCHAPTER 1. GENERAL PROVISIONS**

**485:10-1-2. Definitions.**

The following words or terms, when used in this Chapter, shall have the following meaning, unless the context clearly indicates otherwise:

**"Academic credit hours"** are calculated as follows:

(A) 1 academic semester credit hour = ~~46~~15 contact hours

(B) 1 academic quarter credit hour = 12.5 contact hours

**"Accountable"** means assuming responsibility to the client, the public, other health-care practitioners and oneself for one's actions and/or decisions and their outcomes.

**"Additional nursing function"** means the nursing functions, procedures, or tasks, not usually included at the time of matriculation in most nursing education programs; requiring additional knowledge, instruction, and practice before they can be safely performed. Such functions must fall within the scope of accepted nursing practice; may become necessary due to technological advances, new practice standards, or the natural evolution of an occupation; and must not be precluded by other Oklahoma Practice Acts.

**"Advanced Practice Registered Nurse" or "APRN"** is a term that includes Certified Nurse Practitioners (CNP), Clinical Nurse Specialists (CNS), Certified Nurse Midwives (CNM), and Certified Registered Nurse Anesthetists (CRNA).

**"Advanced Unlicensed Assistant" or "AUA"** means an individual, other than a licensed nurse, who performs in an assistive role and has been certified to perform core skills as delegated by a licensed nurse and as authorized by the Rules and Regulations of the Oklahoma Board of Nursing.

**"Board"** means the Oklahoma Board of Nursing [59 O.S. Section 567.3(1)]

**"Client"** means a consumer of nursing care; may be an individual or group; is synonymous with "patient".

**"Clinical learning experiences"** means faculty-planned and guided activities designed to assist students to meet stated program and course outcomes and to safely apply knowledge and skills when providing nursing care to clients across the lifespan as appropriate to the role expectations of the graduates. These experiences occur in a variety of affiliating agencies or clinical practice settings including, but not limited to: acute care facilities, extended care facilities, long-term care facilities, clients' residences, and community agencies; and in associated clinical pre- and post-conferences.

**"Clinical skills laboratory"** means a designated area in which equipment and supplies are provided to simulate a clinical facility, allowing skills and procedures to be demonstrated and practiced.

**"Complaint"** means a nursing practice incident report submitted to the Board informing the Board staff that a certificate holder or licensed nurse may have violated the Oklahoma Nursing Practice Act. If the Complaint results in obtaining evidence to support a violation(s) of the Oklahoma Nursing Practice Act, then a **sworn Complaint** is prepared and filed by Board staff to initiate an individual proceeding as provided for in the Administrative Procedure Act, 75 O.S. §§ 309 *et seq.*

**"Continuing education contact hours"** are calculated as: 1 contact hour = 50 minutes.

**"Continuous incarceration"** means a period of confinement inside a penal institution, pursuant to a sentence from a court of competent jurisdiction, which confinement continues uninterrupted by periods of liberty from its beginning to its end. It **does not** include such sentences as weekends in jail with the defendant at liberty during the week.

**"Controlling institution"** means the agency or institution that administers the nursing education program, assumes responsibility for its financing, graduates the students, and grants the diploma, certificate or degree to the graduates.

**"Core skills"** means the list of functions that an Advanced Unlicensed Assistant should be capable of performing upon completion of the certification training program and satisfactory passage of the certification examination.

**"Delegating"** means entrusting the performance of selected nursing duties to individuals qualified, competent and legally able to perform such duties.

**"Distance learning program"** means 50% or more of the theory components of the board-approved nursing education program are offered by correspondence, on-line, through video-conferencing, or via CD-ROM.

**"Innovative approach"** means a creative nursing education strategy that departs from the current rule structure and requires Board approval for implementation.

**"Key Party"** means immediate family members and others who would be reasonably expected to play a significant role in health care decisions of the patient and includes but is not limited to, the spouse, domestic partner, sibling, parent, child, guardian, and person authorized to make health care decision for the patient.

**"Legal authority"** means the authorized state agency for the administration of the statutes relating to the practice of nursing in this state. The Oklahoma Board of Nursing is the only legal authority for licensing Licensed Practical Nurses, Registered Nurses, and Advanced Practice Registered Nurses; and for certifying Advanced Unlicensed Assistants.

**"Licensed nurse"** means a Registered Nurse or "RN", a Licensed Practical Nurse or "LPN", or an Advanced Practice Registered Nurse or "APRN" currently licensed by the Oklahoma Board of Nursing.

**"Nurse Administrator"** means the Registered Nurse responsible for the administration of the nursing education program or the nurse holding the highest level of management in an agency/facility regardless of the title used.

**"Preceptor"** means a licensed nurse who is employed by the facility in which the clinical experience takes place, and who agrees to provide supervision to a student for a specified period of time during the preceptor's scheduled work hours in order to assist the student to meet identified learning objectives.

**"State approved program of nursing"** means a nursing education program approved by the Oklahoma Board of Nursing.

**"Member board jurisdiction"** means a full member board of National Council of State Boards of Nursing.

**"Supervising"** means providing guidance by a qualified nurse for the accomplishment of the nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing a task or activity.

### **SUBCHAPTER 3. REGULATIONS FOR APPROVED NURSING EDUCATION PROGRAMS**

**485:10-3-1. Approval of nursing education programs**

- (a) **Purpose of approval.** The purposes of approval of nursing education programs are:
- (1) to provide standards for legally recognizing new and established nursing education programs;
  - (2) to ensure graduates are eligible to take the licensing examination;
  - (3) to ensure that graduates are prepared for safe, current, and appropriate scope of practice relative to type of nursing education program and state laws governing nursing.
- (b) **Categories of approval.** The categories of approval are:
- (1) Provisional Approval:
    - (A) is granted to new programs meeting the minimum standards;
    - (B) is approval to admit students;
    - (C) is effective until the first licensing examination results are received and evaluated by the Board.
  - (2) Full Approval:
    - (A) is granted to programs after an initial survey visit, graduation of the first class, first licensing examination results are reported, and evidence is provided that minimum standards are met;
    - (B) is renewed periodically or reinstated following evaluation by the Board.
  - (3) Conditional Approval is granted to approved programs subsequently failing to meet or maintain minimum standards.
    - (A) ~~The Board shall notify a school program by letter of Conditional Approval, citing a specified time for corrective action. A period of one (1) year shall be the maximum time allowed for the correction of deficiencies resulting in Conditional Approval. The letter shall cite a specified period of up to two (2) years to correct program deficiencies that caused the need for Conditional Approval. The Conditional Approval may be renewed for one additional period of up to two (2) years upon a determination by the Board that circumstances warrant such a renewal.~~
    - (B) A program placed on Conditional Approval may request Board action to remove the conditional status when it can provide evidence that the deficiencies have been corrected at any time prior to the time limit established by the Board.
    - (C) A program shall not admit new students while on Conditional Approval without authorization from the Board.
    - (D) A warning may be given allowing a program an opportunity to address deficiencies as identified by the Board prior to being placed on Conditional Approval. A written report must be submitted to the Board within four (4) months of receiving the warning, and four (4) weeks prior to the Board meeting.
- ~~(E)~~(4) A change in a program's approval status shall not affect students who are eligible to take the first licensing examination following the change.
- (c) **Withdrawal of approval.** The nursing education program that fails to correct deficiencies resulting in Conditional Approval shall be discontinued as a State Approved Nursing Education Program. Representatives from the program may attend the Board meeting when the program is reviewed. Upon withdrawal of approval, students shall be notified by the program that they will not be eligible, as a graduate of the nursing education program, to be admitted to the licensing examination.

**485:10-3-5. Reports to the Board**

The Board shall take action on all reports as appropriate.

(1) **Faculty qualification report.**

(A) A Faculty Qualification Record shall be submitted for all instructional staff (full-time, part-time, classroom, or clinical), and shall include educational preparation and employment experience.

(B) The Faculty Qualification Record must be submitted to the Board office by the Nurse Administrator on a form provided by the Board within ~~two weeks~~ thirty days of day of appointment ~~by the Nurse Administrator~~, a change in title or status of position, and any time that an advanced degree is attained. The Faculty Qualification Record may be submitted electronically to a designated email address.

(2) **Enrollment and annual reports.** Enrollment and annual reports shall be submitted in formats requested by the Board.

(3) **Special reports.** Special reports to the Board shall include but not be limited to:

(A) notification in writing of administrative changes relating to and affecting the program within ~~two weeks~~ thirty days of the change, to include a change in Nurse Administrator;

(B) requests in writing to obtain approval prior to implementation for:

(i) major curriculum changes that alter the length of the program, substantially change the objectives, ~~reorganize the course offerings~~, or reflect a significant philosophical or conceptual shift; Board staff may approve minor changes including but not limited to such matters as reorganizing existing course offerings, transferring existing objectives or content from one course to another, or alterations in the leveling of course objectives.

(ii) extended, distance learning, or off-campus offerings, when any nursing course is offered;

(iii) a significant change in instructional format;

(iv) a pilot or experimental program.

(4) **Pass Rate Reports.** Pass Rate Reports are required when the first-time NCLEX writer pass rate falls ten (10) percentage points or more below the national average and at least ten candidates wrote the examination (based on a calendar year.)

(5) **Completion Rate Reports.** A completion rate report is required when the program completion rate is less than 70% for the most recent calendar year. Program completion rate shall be calculated as 200% of the program length as defined by selective admission to the nursing program's first nursing course. Admission is defined as the grade of the first nursing course that is transcribed. Individual exceptions to the calculation of completion rate include death, military, and peace corp.

(6) All reports are limited to ten (10), single-sided, double-spaced pages.

**485:10-3-6. Nursing education program visits**

(a) **Survey visit.**

(1) Each nursing education program shall be surveyed:

(A) prior to receiving Full Approval;

(B) within three (3) years after receiving initial Full Approval; and

(C) at least every five (5) years thereafter unless the program has current accreditation by a national nursing accrediting agency recognized by the United States Department of Education.

(D) Special and focused survey visits may be directed by the Board.

~~(2) A self-evaluation report shall be completed by the nursing education program and submitted with the applicable fee thirty days prior to the survey visit.~~ Thirty (30) days before the survey visit, the applicable fee shall be received in the Board office and the program's self evaluation report shall be submitted electronically to the Board office.

~~(3) A draft of the survey visit report shall be available.~~ will be sent electronically to the nursing education program for additions and/or corrections. Requested additions and/or corrections shall be received electronically in the Board office within two (2) weeks of the date the draft report was received by the nursing education program.

(4) The final report of the survey visit including commendations, recommendations and the decision of the Board shall be provided to the institution.

**(b) Programs with current accreditation by a national nursing accrediting agency recognized by the United States Department of Education.** Nursing education programs with full approval status will be periodically evaluated for continuing approval by the Board.

(1) The nurse administrator of the program shall submit a copy of the notification of accreditation status to the Board within two weeks of receipt, accompanied by the program's accreditation report, supporting documentation, follow-up and/or interim reports.

(2) The Board shall regularly review and analyze program performance reports submitted by the nursing education program including, but not limited to:

(A) Any program challenges or improvements identified by ongoing program improvement review;

(B) Annual reports;

(C) Follow-up or interim reports to national nursing accrediting bodies;

(D) Student retention, attrition, and on-time program completion rates;

(E) Adequate type and number of faculty;

(F) Faculty retention;

(G) Adequate laboratory and clinical learning experiences;

(H) Trended data on NCLEX pass rates and completion rates;

(I) Performance improvement initiatives related to program outcomes; and

(J) Program complaints/grievance review and resolution.

(3) Additional reports or survey visits may be directed by the Board, if the program is not in compliance with the minimum standards for nursing education programs or other sources of evidence regarding achievement of program outcomes.

**(c) Consultation visit.** Consultation visits are available to the nursing education programs upon written request giving the purpose for the visit and are mandatory as indicated in 485:10-3-2.

(b)(1).

## **SUBCHAPTER 5. MINIMUM STANDARDS FOR APPROVED NURSING EDUCATION PROGRAMS**

### **485:10-5-3.2. Nursing administrator for nursing education programs**

(a) The nursing education program leading to registered nurse licensure shall be administered by a Registered Nurse currently licensed in Oklahoma with the following qualifications:

(1) a minimum of a graduate degree in nursing, preferably an earned doctorate from a regionally accredited institution;

(2) present evidence of a minimum of two (2) years full-time equivalent practice as a Registered Nurse in a clinical setting preceding the first date of first employment as a nursing

faculty member, PROVIDED: any person employed in the administrator position on September 1, 2016, is deemed to meet this requirement; and

(3) one year teaching experience as a full-time nursing faculty member in a nursing education program leading to registered nurse licensure.

(b) The nursing education program leading to practical nurse licensure shall be administered by an individual who:

(1) is a Registered Nurse with a current unencumbered registered nurse license in Oklahoma;

(2) has a baccalaureate degree in nursing, and effective January 1, 2017, has evidence of continued progress toward a graduate degree in nursing with completion of a minimum of six (6) hours per year, PROVIDED: any person employed in the position of administrator of a practical nursing education program on December 31, 2016, is deemed to meet this requirement;

(3) has a minimum of two (2) years full-time-equivalent practice as a Registered Nurse in a clinical setting; and

(4) has at least one (1) academic year, full-time experience as a teacher in a nursing education program.

(c) The administrator of the nursing education program, with institutional input, shall have the authority and responsibility for:

(1) the administration of the nursing program;

(2) preparation and administration of the budget for the nursing program;

(3) implementation of faculty development and performance review;

(4) recommendation of qualified faculty for appointment, promotion, tenure (if applicable), and retention;

(5) notification to the Board of faculty appointments, changes in the program or its administration, and reports as directed by the Board.

~~(e)~~(d) If the Nurse Administrator has teaching or other responsibilities, adequate time will be provided to fulfill administrative duties for the nursing education program.

~~(d)~~(e) An acting Nurse Administrator must meet the qualifications of the role of Nurse Administrator and may be appointed, after Board approval, to fill the position of the Nurse Administrator, for a period of time not to exceed one (1) calendar year. In the event the Nurse Administrator resigns, retires or is otherwise unable to perform the duties of the position:

(1) an Acting Nurse Administrator may be appointed to serve for up to three (3) months. The Acting Nurse Administrator is not required to meet the qualifications of the role of Nurse Administrator.

(2) an Interim Nurse Administrator may be appointed, after Board approval, to serve for up to twelve (12) months. The Interim Nurse Administrator must meet the qualifications of the role of Nurse Administrator.

#### **485:10-5-4.1. Clinical learning experiences**

(a) An adequate amount and variety of clinical learning experience to prepare students for practice at the appropriate educational level shall be planned by the faculty to meet program outcomes.

(b) Clinical facilities utilized shall provide a safe environment for students' learning experiences and shall provide the type of experiences needed to meet the objectives of the rotation.

(c) Written criteria for the selection of clinical facilities shall be utilized by the faculty, and the faculty shall evaluate the quality of the learning experiences provided by the facility on a regular basis.



- (d) Written agreements with cooperating agencies shall be mutually developed and maintained, annually reviewed, shall specify the respective responsibilities, include provisions for continuing use by currently enrolled students, and include provisions for termination of agreement.
- (e) Clinical facilities shall be acceptable to the Board for students' clinical learning and shall be approved by accreditation, evaluation or licensing bodies as appropriate.
- (f) The maximum ratio of faculty to students in clinical areas involving direct care of patients or clients shall be defensible in light of safety, learning objectives, students' level, patient acuity and program outcomes.
- (g) Clinical preceptors may be used for supervision of students in community health, leadership/management, independent study, elective courses, home health and selected hospitals and long-term care facility experiences consistent with Board policy. Consistent with Board policy, preceptors, when utilized, are academically qualified, oriented, mentored and monitored, and have clearly documented roles and responsibilities.
- (h) Clinical skills laboratory experiences, which may include simulated patient care experiences, shall be developed, implemented, and evaluated by the faculty to facilitate student preparation for clinical learning experiences.
- (i) Nursing education programs on full approval status with 300 total program clinical hours may substitute up to 30% of Simulated Patient Care Experiences (SPCE) for clinical hours for each clinical course. Programs not on full approval status must obtain Board approval to substitute ~~simulation for clinical course hours~~ SPCE for clinical course hours.

**485:10-5-5.2. Faculty for nursing education programs**

- (a) There shall be sufficient number of qualified full-time faculty to meet the purpose and student learning outcomes of the nursing program.
- (b) Qualifications, rights, and responsibilities of faculty members shall be available in writing.
- (c) Faculty policies shall be available in writing, shall include those used in evaluating performance, specify the teaching load for the faculty and Nurse Administrator, and be in keeping with accepted educational standards.
- (d) Sufficient time shall be provided faculty to accomplish those activities related to the teaching-learning process.
- (e) All nurse faculty shall:
  - (1) hold a valid unencumbered license to practice as a Registered Nurse in the State of Oklahoma;
  - (2) present evidence of a minimum of two (2) years full-time equivalent practice as a Registered Nurse in a clinical setting preceding the first date of first employment as a nursing faculty member, PROVIDED: any person employed in the faculty position on September 1, 2016, is deemed to meet this requirement;
  - (3) submit a Faculty Qualification Record to the Board office on a form provided by the Board and in accordance to OAC 485:10-3-5(1); and
  - (4) engage in teaching, scholarship, service and/or practice in keeping with the mission, goals, and expected faculty outcomes.
- (f) All programs leading to licensure as a Registered Nurse in this state shall establish comparable educational qualifications for the nursing faculty as required for other teaching faculty in the ~~controlling institution~~ governing organization. The minimum requirements shall be as follows:
  - (1) a master's or higher degree in nursing; or

(2) a baccalaureate degree in nursing plus evidence of continued progress toward a master's or higher degree in nursing with completion of a minimum of six (6) semester hours per calendar year; and

(3) at least one-half of the full-time faculty having a master's or higher degree in nursing; and

(4) part-time clinical instructors, regardless of title used, having a minimum of a baccalaureate degree in nursing.

(g) All programs leading to licensure as a Practical Nurse in this state shall establish requirements for nursing faculty as follows:

(1) minimum of an associate degree or diploma in nursing in this state, and effective January 1, 2017, has evidence of continued progress toward a baccalaureate degree in nursing with completion of a minimum of six (6) semester hours per calendar year, PROVIDED: any person employed in the position of faculty of a practical nursing education program on December 31, 2016, is deemed to meet this requirement; and

(2) teacher certification, as established by the State Department of Education, when employed in schools conducted by public comprehensive high school systems.

(h) There shall be a faculty organization with written policies and procedures to guide its activities and shall:

(1) hold regular meetings for all members to participate in planning, developing, implementing, and evaluating the nursing program;

(2) establish committees as necessary to carry out the functions of the program;

(3) provide for student participation; and

(4) maintain minutes of all meetings documenting actions and decisions of the faculty.

## **SUBCHAPTER 6. MINIMUM STANDARDS FOR APPROVED ADVANCED PRACTICE REGISTERED NURSING (APRN) EDUCATION PROGRAMS (EFFECTIVE JANUARY 1, 2016)**

### **485:10-6-1. Approval of APRN education programs**

The Board shall have the authority for approval of APRN education programs located in the state of Oklahoma.

(1) **Purposes of approval.** The purposes of approval of APRN education programs are:

(A) to provide standards for legally recognizing new and established APRN education programs;

(B) to ensure graduates are eligible to take APRN certification examinations;

(C) to ensure that graduates are prepared for safe, current, and appropriate scope of APRN practice relative to the APRN role and population focus.

(2) **Categories of approval.** The categories of approval are:

(A) Provisional Approval:

(i) is granted to new APRN education programs ~~meeting the minimum standards in~~ accordance to OAC 485:10-6-3;

(ii) is approval to admit students;

(iii) is effective until the first class has graduated and initial outcomes have been reviewed by the Board.

(B) Full Approval:

(i) is granted to programs after the Board has reviewed initial outcomes, and evidence is provided that minimum standards are met;

(ii) is renewed periodically or reinstated following evaluation by the Board.  
(C) Conditional Approval is granted to approved APRN education programs subsequently failing to meet or maintain minimum standards.

(i) The Board shall notify an APRN education program by letter of Conditional Approval, citing a specified time for corrective action. A period of one (1) year shall be the maximum time allowed for the correction of deficiencies resulting in Conditional Approval.

(ii) An APRN education program placed on Conditional Approval may request Board action to remove the conditional status at any time prior to the time limit established by the Board when it can provide evidence that the deficiencies have been corrected.

(iii) An APRN education program shall not admit new students while on Conditional Approval without authorization from the Board.

(iv) A warning may be given allowing an APRN education program an opportunity to address deficiencies as identified by the Board prior to being placed on Conditional Approval. A written report must be submitted to the Board within four (4) months of receiving the warning, and eight (8) weeks prior to the Board meeting.

~~(D)~~ A change in an APRN education program's approval status shall not affect students who graduate during the time the program is on Conditional Approval.

(3) **Withdrawal of approval.** The APRN education program that fails to correct deficiencies resulting in Conditional Approval shall be discontinued as a State-Approved APRN Education Program. Representatives from the program may attend the Board meeting when the program is reviewed. Upon withdrawal of approval, the program will be notified that those graduating since withdrawal of approval are not eligible for licensure as Advanced Practice Registered Nurses in the state of Oklahoma.

(4) **Closure of an APRN education program.** When an APRN education program is to be closed as a result of a decision of the university, the program shall advise the Board and submit a written plan for the discontinuation of the program. The closure may be accomplished in one of two ways:

(A) students may be transferred to another approved APRN education program; or

(B) the APRN education program may close gradually by discontinuing student admissions and officially closing the APRN education program on the date that the last student completes the program.

(i) All the requirements and standards for students in the APRN education program shall be maintained until the last student is transferred or completes the APRN education program.

(ii) It is recommended that the transfer of students be accomplished in a manner which provides for a minimum loss of student time and credits earned.

(iii) When an APRN education program is to be closed by the Board, the Board shall establish the terms of discontinuation of the program.

(iv) Program records

(I) The Board shall accept custody of records in the image format designated by the Board in accordance with the procedures in the Board office as defined by the Archives and Records Commission of the Oklahoma Department of Libraries Archives Division. [67 O.S. Sections 305-317]

(II) The cost of formatting the record to the designated image and their transfer to the Board office shall be the responsibility of the APRN education program.

#### **485:10-6-2. Minimum standards for APRN education programs**

To be approved as an APRN education program in the state of Oklahoma, the program shall meet the following standards:

- (1) The APRN education program is a graduate-level program offered by a university accredited by an accrediting body that is recognized by the U.S. Secretary of Education and/or the Council for Higher Education Accreditation (CHEA);
- (2) The APRN education program holds accreditation or candidacy status from one of the following:
  - (A) The Accreditation Commission for Education in Nursing
  - (B) The Commission on Collegiate Nursing Education
  - (C) The Commission for Nursing Education Accreditation
  - (D) The Accreditation Commission for Midwifery Education
  - (E) The American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs;
- (3) The curriculum of the APRN education program must prepare the graduate to practice in one of the four identified APRN roles (i.e., CRNA, CNM, CNS, or CNP) and in at least one of the six population foci (i.e., Family/Individual across the Lifespan, Adult-Gerontology (acute and/or primary), Neonatal, Pediatrics (acute and/or primary), Women's Health/Gender-Related, or Psychiatric/Mental Health). The curriculum shall include:
  - (A) Graduate APRN core courses, to include three separate graduate level courses in:
    - (i) Advanced physiology and pathophysiology, including general principles that apply across the lifespan;
    - (ii) Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and
    - (iii) Advanced pharmacology (a minimum of a three academic credit hour course), which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents;
  - (B) Additional core course content, specific to the role and population in APRN core areas, integrated throughout the specific role and population focus didactic and clinical courses, to include the use and prescription of pharmacologic and non-pharmacologic interventions;
  - (C) Preparation in legal, ethical, and professional responsibilities of the APRN; and
  - (D) A minimum of 500 supervised clinical hours directly related to each role and population focus, including pharmacotherapeutic management of patients.
- (4) An APRN program shall appoint the following personnel:
  - (A) An APRN program administrator whose qualifications shall include:
    - (i) A current, unencumbered APRN license in the state of Oklahoma;
    - (ii) A minimum of a master's degree in nursing and an earned doctoral degree; and
    - (iii) At least two years of clinical experience as an APRN.
  - (B) A lead faculty member to coordinate each role and population focus track in the APRN program, including curriculum development, whose qualifications shall include:
    - (i) A current, unencumbered APRN license in the state of Oklahoma;
    - (ii) A minimum of a master's degree in nursing that includes preparation in the same role and population focus as the track for which or other similarly situated population focus for the track for which he/she is responsible for as a lead faculty member;
    - (iii) At least two years of clinical experience as an APRN; and

- (iv) Current knowledge, competence and certification as an APRN in the role and population focus consistent with teaching responsibilities. For lead faculty without current certification in the population foci corresponding with the teaching responsibilities, the APRN program must have on file additional written documentation of the related qualifications, experience and competence of the lead faculty member for coordinating each role and population focus track for which he/she is responsible.
- (v) The APRN program administrator may also serve as the lead faculty member if all qualifications are met. If the APRN program administrator has teaching or other responsibilities, adequate time will be provided to fulfill administrative duties for the APRN education program.
- (C) Nursing faculty, including adjunct clinical faculty, to teach any APRN nursing course that includes a clinical learning experience shall meet the following qualifications:
- (i) A current, unencumbered APRN license in the state of Oklahoma;
  - (ii) A minimum of a master's degree in nursing that includes preparation in a role and population focus ~~consistent with teaching responsibilities~~ or other similarly situated population focus for the track for which he/she is responsible for as a faculty member;
  - (iii) Two years of APRN clinical experience; and
  - (iv) Current knowledge, competence and certification as an APRN in the role and population foci consistent with teaching responsibilities. For faculty without current certification in the population foci corresponding with the teaching responsibilities, the APRN program must have on file additional written documentation of the related qualifications, experience and competence of the faculty member for teaching in the population foci for which he/she is responsible.
- (D) Any person employed in the position of APRN program administrator, APRN lead faculty, and/or APRN faculty member on December 31, 2015, shall be deemed to meet the education and clinical experience qualifications.
- (E) Interdisciplinary faculty who teach non-clinical nursing courses shall have advanced preparation appropriate to these areas of content.
- (F) Clinical preceptors will serve as a role model and educator to the student. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences, but not to replace them.
- (G) Clinical preceptors will be approved by faculty and meet the following requirements:
- (i) Hold a current, unencumbered license in the state of Oklahoma, or in another state (if employed by the United States Government or any bureau, division, or agency thereof; or if the preceptorship takes place in another state), as an APRN, Medical Doctor, or Doctor of Osteopathy and practices in a comparable practice focus;
  - (ii) Function as a supervisor and teacher and contribute to the evaluation of the individual's performance in the clinical setting; and
  - (iii) Have demonstrated competencies related to the area of assigned clinical teaching responsibilities.
- (5) Each student enrolled in the APRN program shall have a current, unencumbered Oklahoma Registered Nurse license.
- (6) APRN programs preparing for two population foci or a combined nurse practitioner/clinical nurse specialist shall include content and 500 hours of clinical experience in each functional role and population focus.

(7) Advanced placement policies shall allow fair, consistent, valid, and defensible evaluation of students' didactic knowledge and clinical competence. Students admitted with advanced placement must meet the program's APRN outcome competencies.

**485:10-6-3. Establishment of a new APRN education program in the state of Oklahoma**

(a) An institution wishing to establish a new APRN education program shall submit an application for approval to the Board at least eight weeks prior to a regularly-scheduled Board meeting and at least six months prior to planned admission of the first students, which provides the following information for the Board's consideration:

- (1) mission and organization of the education institution;
- (2) accreditation or candidacy status of the education institution and of the proposed program;
- (3) advanced practice registered nurse role(s) and population focus/foci of the proposed program;
- (4) degree to be offered;
- (5) degree plan;
- (6) philosophy, program and course objectives;
- (7) curriculum plan;
- (8) tentative time-table for program development and implementation;
- ~~(7)~~(9) proposed size of program;
- ~~(8)~~(10) source of anticipated student population
- ~~(9)~~(11) information on employment opportunities for program graduates;
- ~~(10)~~(12) identification of sufficient financial and other resources;
- ~~(11)~~(13) evidence of governing institution approval and support;
- ~~(12)~~(14) evidence of community support;
- ~~(13)~~(15) evidence of clinical opportunities and availability of resources; and
- ~~(14)~~(16) evidence of availability of qualified faculty.

(b) The application shall be signed by the controlling institution's administrative official with evidence that the institution is authorized to offer education programs in Oklahoma.

(c) The Board shall advise the institution in writing of its decision to:

- (1) approve the program; or
- (2) defer approval pending receipt of further information; or
- (3) deny approval specifying reasons for denial.

**SUBCHAPTER 7. REQUIREMENTS FOR REGISTRATION AND LICENSURE  
AS A REGISTERED NURSE**

**485:10-7-2. Licensure by endorsement**

(a) **Qualifications.**

- (1) The applicant must submit an application containing such information as the Board may prescribe;
- (2) is a minimum of eighteen (18) years of age on or before the date the license is issued;
- (3) An applicant for licensure by endorsement as a Registered Nurse must meet the requirements of the Oklahoma Nursing Practice Act. An evaluation of educational requirements may be completed to ensure the applicant meets educational standards.
- (4) An applicant licensed in another state or U.S. territory since January 1, 1952 must have written the licensing examination adopted by the Board with a passing score as established by

the Board. A license to practice nursing in Oklahoma will not be issued until this requirement is met.

(5) An applicant must submit evidence of either:

(A) successful completion of the National Council Licensure Examination for Registered Nurses since July 1, 1982; or

(B) passing the State Board Test Pool Examination for Registered Nurse licensure prior to July 1, 1982.

(6) In addition to meeting other requirements for endorsement established by the Board in these Rules, each applicant for endorsement must demonstrate evidence of continued qualifications for practice through completion of one or more of the following requirements within the last two (2) years prior to receipt of the completed application in the Board office:

(A) Submission of an official transcript or certificate of completion verifying completion of a nurse refresher course with content consistent with Board policy;

(B) Successfully pass the National Council Licensure Examination for Registered Nurses;

(C) Submission of an official transcript verifying successful completion of at least six (6) academic semester credit hours of nursing courses which include classroom and clinical instruction; and/or

(D) Present evidence of licensure as a registered nurse in another state, territory or country with employment in a position that requires nursing licensure with verification of at least 520 work hours during the past two (2) years.

(7) Applicants for endorsement who took the National Council Licensure Examination for Registered Nurses for initial licensure within the last two years must:

(A) Provide evidence of completion of the nursing education program within two years of initial application for licensure by examination; or

(B) Provide evidence of at least six months work experience as a registered nurse in the state, U.S. territory, or country of licensure.

(C) Successfully complete a Board-approved refresher course in accordance with the Board's policy; or

(D) Successfully complete nursing didactic coursework and faculty-supervised clinical experience in a board-approved nursing education program at the appropriate educational level, to include at least 80 hours in classroom and skills laboratory review and at least 80 hours participating in patient care activities in the clinical setting.

**(b) Applications.**

(1) Applications must be completed and filed with the Board.

(2) Endorsement may be accepted from the original state or U.S. territory of licensure by examination.

(3) If the applicant has written the licensing examination adopted by the Board in a state other than the state or U.S. territory of original licensure, an endorsement will be requested from that state, also.

(4) If the application is not completed within one (1) year after receipt of fee, the application must be refiled.

**(c) Fee for licensure by endorsement.**

(1) The fee shall accompany the application.

(2) The fee is not refundable.

(3) If the application is not completed within one (1) year, a new application and new fee will be required for licensure.

**(d) Qualifications for applicants educated in foreign countries or in a U.S. territory.** An applicant educated in a foreign country must meet the current educational requirements for licensure in Oklahoma. An applicant educated in a U.S. territory not recognized as a full member of National Council of State Boards of Nursing (NCSBN) must meet the requirements for applicants educated in foreign countries. An applicant educated in a U.S. territory that is a full member of NCSBN but in a nursing education program not included on the NCSBN state-approved programs of nursing list at the time of the applicant's graduation from the program must meet the requirements for applicants educated in foreign countries.

(1) The applicant must present evidence of:

(A) graduation from a government-approved post-secondary nursing education program, as verified from the Commission of Graduates of Foreign Nursing Schools (CGFNS);

(B) completion of formal courses including theory and clinical experience in nursing care of the adult, nursing care of children, maternal-infant nursing, psychiatric-mental health nursing as evidenced by:

(i) a translated transcript with certified proof of translation received directly from the nursing education program in the original country of licensure, or

(ii) a certified copy of original transcript obtained directly from the Commission of Graduates of Foreign Nursing Schools (CGFNS)

(C) licensure or registration as required in country of graduation as evidenced by official verification received directly from the Commission of Graduates of Foreign Nursing Schools;

(D) current competence in oral and written English as evidenced by receipt of current, valid scores directly from the approved testing service or from CGFNS verifying successful completion of:

(i) Test of English for International Communication (TOEIC), to include the Listening and Reading Test, and the Speaking and Writing Test of the Educational Testing Service, or

(ii) International English Language Testing System (IELTS), or

(iii) Test of English as a Foreign Language Internet-based test (TOEFL iBT) of the Educational Testing Service, or

(iv) Michigan English Language Assessment Battery (MELAB).

(E) An evaluation of educational credentials as evidenced by:

(i) CGFNS Certificate Status or Visa Screen Certificate; or

(ii) CGFNS Healthcare Profession and Science Course-by-Course Report or Credentials Evaluation Service Professional Report;

(iii) Reports received from CGFNS must have been completed within the five (5) years immediately preceding the date of application for licensure by endorsement. The five-year requirement is waived if the applicant holds a license in another state.

(F) Evidence of either:

(i) successful completion of the National Council Licensure Examination for Registered Nurses since July 1, 1982; or

(ii) passing the State Board Test Pool Examination for Registered Nurse licensure prior to July 1, 1982;

(2) The requirements for competence in spoken and written English are waived for applicants who are:



- (A) Graduates of nursing education programs taught in English in Australia, Canada (except Quebec), Ireland, New Zealand, the United Kingdom, Trinidad, Tobago, Jamaica, Barbados, South Africa, and the United States.
  - (B) Licensed in another US State or Territory, have successfully completed the licensure examination approved by the Board and provide evidence of at least one year full-time equivalent work experience in a clinical setting as a Registered Nurse in the state or territory of licensure.
- (3) Applicants must submit a completed application and the required fee.
- (e) **Temporary license for endorsement applicants.**
- (1) A temporary license may be issued to the applicant on proof of:
    - (A) Current unrestricted licensure in another state, territory or country with no history of arrest or disciplinary action requiring further review;
    - (B) Evidence of having successfully passed the licensure examination adopted by the Oklahoma Board of Nursing;
    - (C) Evidence of meeting educational qualifications through completion of a state board-approved nursing education program meeting the educational standards established by the Board, or an evaluation of educational credentials and nursing licensure or registration as required in country of origin for the foreign-educated nurse as evidenced by:
      - (i) Commission on Graduates of Foreign Nursing Schools (CGFNS) Healthcare Profession and Science Course-by-Course Report or Credentials Evaluation Service Professional Report with verification of equivalent educational credentials and unrestricted licensure in country of origin, or
      - (ii) Commission on Graduates of Foreign Nursing Schools (CGFNS) Certificate status or Visa Screen Certificate, accompanied by a verification of graduation from a government approved nursing education program, the translated transcript, and verification of unrestricted nursing licensure or registration as required in country of graduation;
    - (D) Payment of the fee for licensure by endorsement and temporary license;
    - (E) Foreign-educated applicants must provide evidence of current competence in oral and written English by meeting the requirements of 485:10-7-2(d)(1)(D) unless 485:10-7-2(d)(2) applies;
    - (F) Demonstrating evidence of continued qualifications for practice through meeting the requirements of 485:10-7-2(a)(6) and (7); and
    - (G) Submission of fingerprint images with the fee established by the Oklahoma State Bureau of Investigation and/or vendor for the purpose of permitting a state and national criminal history records search to be completed.
  - (2) The temporary license may not be issued for a period longer than ninety (90) days.
  - (3) The temporary license may be extended, but such period shall be no longer than one (1) year for any applicant.

## **SUBCHAPTER 11. DISCIPLINARY ACTION**

### **485:10-11-1. Denial, revocation or suspension of license or certificate**

(a) **Causes.** Causes for denial, revocation or suspension of license or certificate as a Registered Nurse, Licensed Practical Nurse, Advanced Practice Registered Nurse and/or Authorization for Prescriptive Authority or Authority to Order, Select, Obtain, and Administer Drugs, or as an Advanced Unlicensed Assistant are as defined in 59 O.S. Section 567.8.

(b) **Definitions.** The following definitions relate to the causes for disciplinary action as specified in the statutes.

- (1) The terms "deceit or material misrepresentation" shall include but not be limited to:
  - (A) false representation of facts in connection with an application for licensure, or certificate, or renewal of license; or application for recognition as an advanced practitioner; or
  - (B) false representation by having another person appear in her/his place for the licensing examination.
- (2) Sufficient knowledge or reasonable skill means adherence to minimal standards of acceptable practical nurse practice, registered nurse practice, advanced registered nurse practice, or advanced unlicensed assistant's practice generally prevailing in the State of Oklahoma.
- (3) Unprofessional conduct is behavior (acts, knowledge, and practices) which fails to conform to the accepted standards of the nursing profession, or advanced unlicensed assistant's activities generally prevailing in the State of Oklahoma and which could jeopardize the health and welfare of the people which shall include but not be limited to the following:
  - (A) inaccurate recording, falsifying, altering or inappropriate destruction of patient records; or
  - (B) verbally or physically abusing patients; or
  - (C) falsely manipulating drug supplies, narcotics or patient records; or
  - (D) appropriating without authority medications, supplies or personal items of the patient or agency; or
  - (E) falsifying documents submitted to the Board of Nursing; or
  - (F) leaving a nursing assignment or patient care assignment without properly advising appropriate personnel; or
  - (G) violating the confidentiality of information or knowledge concerning the patient by any means; or
  - (H) conduct detrimental to the public interest; or
  - (I) discriminating in the rendering of nursing services or patient care assignment; or
  - (J) aiding and abetting the practice of practical nursing, registered nursing, advanced practice registered nursing, or advanced unlicensed assistive persons by any person not licensed as a Licensed Practical Nurse or a Registered Nurse or an Advanced Practice Registered Nurse or not certified as an Advanced Unlicensed Assistant; or
  - (K) impersonating any applicant or acting as proxy for the applicant in any examination required for the issuance of a license or certificate; or
  - (L) impersonating another licensed or certified practitioner, or permitting another person to use her/his license, certificate, or certificate of recognition for any purpose; or
  - (M) aiding, abetting or assisting any other person to violate or circumvent any law or rule or regulation intended to guide the conduct of a Registered Nurse, Licensed Practical Nurse, Advanced Practice Registered Nurse, or Advanced Unlicensed Assistant; or
  - (N) forging a prescription for medication, drugs, or supplies or equipment; or
  - (O) presenting a forged prescription; or
  - (P) selling or attempting to sell drugs or controlled substances or otherwise making such drugs available without authority to self, friends, or family members; or
  - (Q) engaging in conduct with a patient or key party, inside or outside the health care setting that is sexual or may reasonably be interpreted as sexual, or in any verbal behavior that is

seductive or sexually demeaning to a patient or key party, or engaging in sexual exploitation of a patient or key party. Patient or key party consent to, or initiation of, a relationship is not a defense; or

(R) obtaining money, property or services from a patient, other than reasonable fees for service provided to the patient, through the use of undue influence, harassment, duress, deception or fraud; or

(S) engaging in fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws; or

(T) failure to maintain proper custody and control of controlled dangerous substances of the patient or agency; or

(U) diversion or attempts to divert drugs or controlled substances; or

(V) failure to cooperate with a lawful investigation by Board of Nursing staff.

(4) Conduct which jeopardizes a patient's life, health or safety shall include but not be limited to the following:

(A) Failure of a Licensed Practical Nurse, a Registered Nurse, or Advanced Practice Registered Nurse to supervise adequately the performance of acts by any person working at the nurse's direction; or

(B) Delegating or accepting the delegation of a nursing function or a prescribed health care function when the delegation or acceptance could reasonably be expected to result in unsafe or ineffective patient care; or

(C) Unauthorized alterations of medications; or

(D) Failure to utilize appropriate judgment in administering safe nursing practice or patient care assignment based upon the level of nursing for which the individual is licensed or recognized; or

(E) Failure to exercise technical competence in carrying out nursing care or patient care assignment; or

(F) Performing new nursing techniques, procedures or patient care activities without proper education and preparation; or

(G) Failure to report through the proper channels the unsafe or illegal practice of any person who is providing nursing care or patient care.

(5) Conduct that violates professional boundaries is behavior that jeopardizes or could impair the relationship of trust that should exist between nurse and patient. Nurses must be able to recognize the appropriate interpersonal boundaries in all places and at all times for the duration of any therapeutic relationship. It is immaterial whether the boundary violation is instituted by the nurse or the patient; the nurse is the professional in the nurse-patient relationship.

## **SUBCHAPTER 15. REQUIREMENTS FOR PRACTICE AS AN ADVANCED PRACTICE REGISTERED NURSE**

### **485:10-15-9. Practice as a Certified Registered Nurse Anesthetist**

(a) **Educational preparation.** An applicant for licensure as a Certified Registered Nurse Anesthetist must provide evidence of successful completion of a nurse anesthesia education program accredited by the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs. Effective January 1, 2016, the applicant for initial licensure or licensure by endorsement as a Certified Registered Nurse Anesthetist must hold a graduate-level degree from a program preparing the graduate for certification as a nurse anesthetist

accredited by the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs.

(b) **Certification.** The applicant for initial licensure or licensure by endorsement as a Certified Registered Nurse Anesthetist must hold current certification as a nurse anesthetist through the National Board ~~for~~of Certification and Recertification ~~off~~for Nurse Anesthetists.

## **SUBCHAPTER 18. PRESCRIPTIVE AUTHORITY FOR CRNA**

### **485:10-18-3. Renewal**

The application for renewal of authority to order, select, obtain and administer drugs shall:

(1) be concurrent with the two-year RN and advanced practice registered nursing licensure renewal;

(2) include:

(A) a completed application containing such information as the Board may prescribe and required fee;

(B) documentation verifying satisfactory completion of a minimum of eight (8) units of continuing education in advanced pharmacology relating to the administration of anesthesia, as recognized by the ~~Council on Certification of Nurse Anesthetists or the Council on Recertification of Nurse Anesthetists~~National Board of Certification and Recertification for Nurse Anesthetists, completed during the two (2) years immediately preceding renewal.

**RULE IMPACT STATEMENT: OAC Title 485. Oklahoma Board of Nursing, Chapter 10. Licensure of Practical and Registered Nurses, Subchapter 1. General Provisions; Subchapter 3. Regulations for Approved Nursing Education Programs; Subchapter 5. Minimum Standards for Approved Nursing Education Programs; Subchapter 6. Minimum Standards for Approved Advanced Practice Registered Nursing (APRN) Education Programs (Effective January 1, 2016); Subchapter 7. Requirements for Registration and Licensure as a Registered Nurse; Subchapter 11. Disciplinary Action; Subchapter 15. Requirements for Practice as an Advanced Practice Registered Nurse; Subchapter 18. Prescriptive Authority for CRNA**

a. Description of the purpose of the proposed rule:

Revisions to Subchapter 1 include changing the academic semester credit hour to 15 contact hours, in alignment with educational standards, and adding the acronym of APRN to be consistent with RN and LPN language present.

Revisions to Subchapter 3 allows for a nursing education program not meeting minimal standards to be placed on conditional status for up to two years, allowing time for the program to correct deficiencies. The Board may also renew conditional status for one additional period of up to two years if circumstances warrant such. In addition, the length of time to submit faculty qualification records and administrative changes is lengthened to thirty days allowing time for the nursing programs to retrieve required transcripts from primary sources. OAC 485:10-3-5(3)(B)(i) authorizes Board staff to approve minor curriculum changes as listed, while OAC 485:10-3-6(a)(2) provides clarifying language regarding the self-evaluation report to be completed by the nursing program. OAC 485:10-3-6(a)(3) allows the survey visit report to be sent electronically and places a time limit of two weeks for nursing education programs to submit report corrections to Board staff.

Effective November 1, 2016, subsections (1), (2), (3), (4), and (5) were deleted from Title 59 O.S. § 567.12(b). The intent was to move the regulation of practical nursing education program qualifications for practical nursing administrators and faculty to the Rules along with registered nursing education program administrator and faculty qualifications. In Subchapter 5, OAC 485:10-5-3.2(b) and OAC 485:10-5-5.2(g) transfers the regulatory authority of practical nursing education program administrators and faculty to the Rules, and adds grandfathering language deeming practical nursing education program administrators and faculty employed in the position of administrator or faculty on December 31, 2016, as meeting the educational requirements. OAC 485:10-5-3.2(d) defines Acting Nurse Administrator and Interim Nurse Administrator with role qualification requirements. OAC 485:10-5-4.1(i) adds the requirement of nursing education programs to have at least 300 total program clinical hours prior to substituting Simulated Patient Care Experiences for clinical hours. OAC 485:10-5-5.2(f) adds consistent language referring to the governing organization.

In Subchapter 6, OAC 485:10-6-1(2)(A)(i) replaces word descriptor with citation. OAC 485:10-6-2(4)(B)(C) provides for APRN lead faculty and faculty to have on file with the nursing education program, additional documentation of related qualifications, experience and competence for coordinating and instructing in a similarly population focus

when they do not hold current certification in the population foci for which they are responsible. OAC 485:10-6-3(a) clarifies inclusion of philosophy, program and course objectives, and curriculum plan to the list of elements submitted in the application for APRN program approval.

OAC 485:10-7-2(a)(7)(C)(D) adds qualification consistency for endorsement applicants with in-state initial applicants, while OAC 485:10-15-9(b) and OAC 485:10-18-3(2)(B) updates the name of Certified Registered Nurse Anesthetist certifying body. Amendment to OAC 485:10-11-1 includes the addition of information related to violation of professional boundaries.

- b. Description of the classes of persons who most likely will be affected by the proposed rule, including classes that will bear the costs of the proposed rule, and any information on cost impacts received by the agency from any private or public entities:

Specific to Subchapter 3, the class of persons most likely affected by the proposed rules are nursing education program administrators, who will be allowed more time to submit faculty qualification records/administrative changes, will experience quicker turnaround of minor curriculum change requests; and will need to submit changes to the survey visit report within two weeks.

In regard to Subchapter 5, the class of persons most likely affected by the proposed rules are individuals who, on January 1, 2017, will be grandfathered to continue to serve as administrators and faculty of practical nursing education programs, and individuals serving as Acting and Interim Nurse Administrators within the allowed time parameters to serve in such roles. Acting Nurse Administrators may be appointed to serve for up to 3 months and Interim Nurse Administrators may serve for up to 12 months.

The class of persons most likely affected by proposed rules in Subchapter 6 include individuals who have experience as an APRN in a similarly situated population for which he/she is responsible as lead faculty or faculty of APRN nursing education programs.

Specific to Subchapter 7, individuals most likely affected by the proposed rules include endorsement applicants who completed nursing education program greater than two years ago and have not worked at least six months as an RN in the state, U.S. territory or country of licensure.

The proposed rules in Subchapter 15 and 18 only update the name of the Certified Registered Nurse Anesthetist certifying body.

- c. Description of classes of persons who will benefit from the proposed rule:

The classes of persons who will benefit from the proposed rules in Subchapter 3 are nursing education program administrators who may be allowed more time to correct significant program deficiencies under conditional approval status and who may be allowed more time, thirty days compared to two weeks, to submit faculty qualification records and/or administrative changes.

The classes of persons who will benefit from the proposed rules in OAC 485: 10-5 include those individuals who serve as administrators and faculty of practical nursing

education programs and do not currently meet the educational qualifications of the new rule.

Those classes of persons who will benefit from the proposed rules in OAC 485:10-6 include individuals serving as lead faculty and faculty in APRN nursing education programs who do not have national certification in the specific population-focused track for which he/she is responsible, but do have a Master's degree in nursing that includes preparation in a similarly situated population focus for the track and can provide documentation of related qualifications, experience and competence in the similarly situated population-focused track.

In Subchapter 7, RN endorsement applicants who may meet the application requirements by completing a Board-approved refresher course or complete required didactic coursework and faculty-supervised clinical experience in a board-approved nursing education program benefit from the proposed rule.

- d. Description of the probable economic impact of the proposed rule upon affected classes of persons or political subdivisions, including a listing of all fee changes and, whenever possible, a separate justification for each fee change.

There are no fee increases associated with the proposed rules.

- e. Probable costs and benefits to the agency and to any other agency of the implementation and enforcement of the proposed rule, the source of revenue to be used for implementation and enforcement of the proposed rule, and any anticipated effect on state revenues, including a projected net loss or gain in such revenues if it can be projected by the agency.

There are no additional costs to the agency for implementation and enforcement of the proposed rules. There is not an anticipated impact on state revenue.

- f. Determination of whether implementation of the proposed rule will have an economic impact on any political subdivisions or require their cooperation in implementing or enforcing the rule:

The implementation of the proposed rule will have no economic impact on any political subdivision or require cooperation in implementing or enforcing the rule.

- g. Determination of whether implementation of the proposed rule will have an adverse effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act.

The proposed rules will have no impact on small business.

- h. Explanation of the measures the agency has taken to minimize compliance costs and a determination of whether there are less costly or non-regulatory methods or less intrusive methods for achieving the purpose of the proposed rule:

The agency carefully considered each of the proposed rules to ensure there were no less costly, non-regulatory, or less intrusive methods to implement the statutory requirements and meet the agency's mission of protection of the public. It was determined that each of the proposed rules provides the most effective and fiscally-responsible method for achieving the purpose.

- i. Determination of the effect of the proposed rule on the public health, safety and environment and, if the proposed rule is designed to reduce significant risks to the public health, safety and environment, an explanation of the nature of the risk and to what extent the proposed rule will reduce the risk:

The proposed rules will have a positive effect on the public health, safety and environment, by ensuring persons employed as administrators and faculty in practical nursing education programs and APRN nursing education program lead faculty and faculty will retain employment, positively impacting the number of potential health care providers in Oklahoma. In addition, RN endorsement applicants are allowed to endorse into Oklahoma meeting qualifications consistent with initial in-state applicants, further increasing the number of qualified providers of nursing care in Oklahoma. The public health, safety and environment is further protected in ensuring that Interim Nurse Administrators of nursing education programs must meet the qualifications of the role of Nurse Administrator.

- j. Determination of any detrimental effect on the public health, safety and environment if the proposed rule is not implemented:

If the proposed rules in Subchapter 5 are not implemented, there will be no regulatory requirements specific to the qualifications for practical nursing education program administrators and faculty.

- k. Date the rule impact statement was prepared and if modified, the date modified:

Prepared: November 1, 2016

Modified: December 8, 2016