

RULES AND REGULATIONS FOR THE LICENSING OF NURSES
and
STANDARDS FOR THE APPROVAL OF BASIC
NURSING EDUCATION PROGRAMS

(R5-34-NUR/ED)

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Department of Health
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INTRODUCTION

These rules and regulations are promulgated pursuant to the authority conferred under section 5-34-7(1) of the General Laws of Rhode Island, as amended, and are established for the purpose of defining the prevailing standards for: (1) the licensure of professional (registered) nurses, certified registered nurse practitioners, certified psychiatric and mental health nurse clinical specialists, certified registered nurse anesthetists, and practical nurses; and (2) the approval of basic nursing education programs in this state.

Pursuant to the provisions of section 42-35-3 (c) of the General Laws of Rhode Island, as amended, the following issues have been given serious consideration in arriving at the regulations: (a) alternative approaches to the regulations; and (b) duplication or overlap with other state regulations. No known overlap, duplication, or alternative approach was identified. Consequently these rules and regulations are adopted in the best interest of the public health, safety and welfare.

The nurse licensure compact was adopted by the Rhode Island General Assembly on June 20, 2007 and entered into with all other jurisdictions that legally join in the compact, which is, in form, substantially similar to the provisions of Chapter 5-34.3 of the Rhode Island General Laws, as amended. Said compact will take effect on July 1, 2008. (For a list of states participating in the Compact see: www.ncsbn.org).

The general purposes of this Compact are to:

- (1) Facilitate the states' responsibility to protect the public's health and safety;
- (2) Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation;
- (3) Facilitate the exchange of information between party states in the areas of nurse regulation, investigation and adverse actions;

- (4) Promote compliance with the laws governing the practice of nursing in each jurisdiction;
and
- (5) Invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.

These amended rules and regulations shall supersede any other *Rules and Regulations Pertaining to the Licensing of Professional (Registered), Certified Registered Nurse Practitioners, Certified Registered Nurse Anesthetists, and Practical Nurses and Standards for the Approval of Basic Nursing Education Programs* promulgated by the Department of Health and filed with the Secretary of State.

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PART I *Definitions*

Section 1.0 *Definitions*

Wherever used in these rules and regulations the following terms shall be construed as follows:

- 1.1 **"Act"** means Chapter 5-34 of the General Laws of Rhode Island, as amended, entitled, "Nurses."
- 1.2 **"Advanced practice nurse"** means the status of qualified individuals who hold an active license as a registered nurse and an active license as a nurse in an advanced role as defined under the provision of the Act or Chapter 5-34.2 of the Rhode Island General Laws, as amended.
- 1.3 **"Approval"** means the process whereby the Board of Nursing evaluates and grants official recognition to basic nursing education programs in this state which meet the established criteria and standards herein.
- 1.4 **"Approved basic professional nursing education program"** means a course of study for professional nurses that has been approved the Board, by the licensing authority of another state or territory, or by a national accrediting body.
- 1.5 **"Approved nurse practitioner program"** means a Board approved course of study for nurse practitioners conducted within an academic institution which is regionally accredited or accredited by such other agency as may be recognized by the Board. Said course shall include both a didactic component and a supervised clinical experience.
- 1.6 **"Basic nursing education program"**, hereafter referred to as nursing program, means an educational unit within a hospital, junior college, senior college or university, which has as its major goal the preparation of individuals to be responsible practitioners of nursing and to grant appropriate diploma or degree in nursing.
- 1.7 **"Board"** means the Board of Nurse Registration and Nursing Education established pursuant to the provisions of section 5-34-4 of the Act.
- 1.8 **"Certified registered nurse anesthetist (CRNA)"** means an advanced practice nurse who has successfully met the requirements for licensure which are set forth in these regulations.
- 1.9 **"Certified registered nurse practitioner (RNP)"** means an advanced practice nurse utilizing independent knowledge of physical assessment and management of health care and illnesses. The practice includes prescriptive privileges, and collaboration with other licensed health care professionals, including, but not limited to, physicians, pharmacists, podiatrists, dentists and nurses.
- 1.10 **"Client"**, as used herein, shall have the same meaning as "patient" or "resident."
- 1.11 **"Continuing education hour"** means a unit of measurement that describes sixty (60) minutes of an organized learning activity that is either a didactic or clinical experience.

- 1.12 ***Continuing education unit (CEU)***” means a specific, standard measure (e.g., ten clock hours) of educational achievement used by many universities and professional organizations under the criteria of the International Association for Continuing Education and Training (IACET) to attest to clock hour completion of continuing education activities.
- 1.13 ***"Controlling institution"*** means the agency or institution that has authority and responsibility for financing the nursing education program employing the director and faculty, graduating students and granting the diploma, certificate or degree.
- 1.14 ***"Coordinated licensure information system"*** means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a non-profit organization composed of and controlled by state nurse licensing boards.
- 1.15 ***"Delegatee"*** means the certified nursing assistant or other unlicensed assistive personnel receiving the authority to perform a nursing activity.
- 1.16 ***"Delegation"*** means the transferring to a competent individual the authority to perform a selected nursing activity in a selected situation. The nurse retains the accountability for the delegation.
- 1.17 ***"Dentist"*** means an individual licensed in this state to practice dentistry pursuant to the provisions of Chapter 5-31.1 of the General Laws of Rhode Island, as amended.
- 1.18 ***"Department"*** means the Rhode Island Department of Health.
- 1.19 ***"Director"*** means the Director of the Rhode Island Department of Health.
- 1.20 ***"Health"*** means optimum well-being.
- 1.21 ***"Healthcare"*** means those services provided to promote the optimum well-being of individuals.
- 1.22 ***"Home state"*** means the party state which is the nurse's primary state of residence.
- 1.23 ***"Independent practice"***, as used herein, means a psychiatric and mental health nurse clinical specialist working without a formal collaborative agreement with a physician licensed in accordance with Chapter 5-37 of the Rhode Island General Laws, as amended.
- 1.24 ***"Licensed"*** means status of qualified individuals who have completed a designated process by which the Board of Nursing grants permission to individuals accountable and/or responsible for the practice of nursing to engage in that practice, prohibiting all others from legally doing so.
- 1.25 ***"Non-disciplinary alternative program"*** means the voluntary, confidential non-disciplinary program for nurses who abuse or are chemically dependent upon drugs or alcohol or who have been diagnosed with any mental illness as listed in the most recent revised publication or the most updated volume of either the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association or the International Classification of Disease

Manual (ICO) published by the World Health Organization and that substantially limits the life activities of the person with the illness.

- 1.26 **"Nurse"**, as used in section 7.0 herein, means a registered nurse or licensed practical/vocational nurse, as those terms are defined by each party's state practice laws.
- 1.27 **"Nursing"** means pursuant to section 5-34-3 (f) of the Act the provision of services that are essential to the promotion, maintenance, and restoration of health throughout the continuum of life. It provides care and support of individuals and families during periods of wellness, illness, and injury and incorporates the appropriate medical plan of care as prescribed by a duly licensed physician, dentist, podiatrist, or other health care provider licensed to prescribe. It is a distinct component of health services. Nursing practice is based on specialized knowledge, judgment, and nursing skills acquired through educational preparation in nursing and in the biological, physical, social, and behavioral sciences.
- 1.28 **"Party state"** means any state that has adopted the Nurse Licensure Compact.
- 1.29 **"Physician"** means an individual licensed to practice medicine in this state pursuant to the provisions of Chapter 5-37 of the General Laws of Rhode Island, as amended.
- 1.30 **"Podiatrist"** means an individual licensed in this state to practice podiatry pursuant to the provisions of Chapter 5-29 of the General Laws of Rhode Island, as amended.
- 1.31 **"Practical nursing"**, pursuant to section 5-34-3(g) of the Act, is practiced by licensed practical nurses (L.P.N.s). It is an integral part of nursing based on a knowledge and skill level commensurate with education. It includes promotion, maintenance, and restoration of health and utilizes standardized procedures leading to predictable outcomes which are in accord with the professional nurse regimen under the direction of a registered nurse. In situations where registered nurses are not employed, the licensed practical nurse functions under the direction of a duly licensed physician, dentist, podiatrist, or other licensed health care providers authorized by law to prescribe. Each L.P.N. is responsible for the nursing care rendered.
- 1.32 **"The practice of certified registered nurse anesthesia"** means providing certain health care services under the supervision of anesthesiologists, licensed physicians or licensed dentists, in accordance with section 5-31.1-1(16), which requires substantial specialized knowledge, judgment and skill related to the administration of anesthesia, including pre-operative and post-operative assessment of patients; administering anesthetics; monitoring patients during anesthesia; management of fluid in intravenous therapy and management of respiratory care.
- 1.33 **"Primary state of residence"** means the state of a person's declared fixed permanent and principal home for legal purposes; a domicile.
- 1.34 **"Professional nurse"** is synonymous with "registered nurse."
- 1.35 **"Professional nursing"**, pursuant to section 5-34-3(h) of the Act, is practiced by registered nurses (R.N.s). The practice of professional nursing is a dynamic process of assessment of an individual's health status, identification of health care needs, determination of health care goals with the individual and/or family participation and the development of a plan of nursing care to

achieve these goals. Nursing actions, including teaching and counseling, are directed toward the promotion, maintenance, and restoration of health and evaluation of the individual's response to nursing actions and the medical regimen of care. The professional nurse provides care and support of individuals and families during periods of wellness and injury and incorporates where appropriate, the medical plan of care as prescribed by a duly licensed physician, dentist or podiatrist or other licensed health care provider licensed to prescribe. Each R.N. is directly accountable and responsible to the consumer for the nursing care rendered.

- 1.36 ***"Psychiatric and mental health clinical nurse specialist,"*** pursuant to section 5-34-3(i) of the Act, is an advanced practice nurse utilizing independent knowledge and management of mental health and illnesses. The practice may include prescription privileges of certain legend medications, controlled substances from Schedule II classified as stimulants, and controlled substances from Schedule IV, within the scope of their practice. The practice may include collaboration with other licensed health care professionals, including but not limited to psychiatrists, psychologists, physicians, pharmacists and nurses. The psychiatric and mental health clinical nurse specialist holds the qualifications as defined in section 5-34-40.1 of the Act and section 3.3 herein.
- 1.37 ***"Regionally accredited"*** means the official guarantee that a college or university or other educational institution is in conformity with the standards of education prescribed by a regional accrediting commission recognized by the U.S. Commissioner of Education.
- 1.38 ***"State"***, as used in section 7.0 herein, means a state, territory, or possession of the United States, the District of Columbia.
- 1.39 ***"Stable and predictable"*** means a condition in which a client's clinical and behavioral status, as assessed by the registered nurse, is determined to be non-fluctuating and consistent, is not recuperative in nature, and does not require the regularly scheduled care of a registered or licensed practical nurse.
- 1.40 ***"State approved program"*** means the official recognition of a basic nursing education program granted by a state body statutorily authorized to approve basic nursing education programs in the respective state in which the nursing program is conducted.
- 1.41 ***"State approved program of practical nursing"*** means a course of study for practical nurses that has been approved the Board, by the licensing authority of another state or territory, or by a national accrediting body.
- 1.42 ***"Supervision"*** means the provision of guidance by a professional or practical nurse for the accomplishment of a nursing activity with initial direction of the activity and periodic inspection of the actual act of accomplishing the activity. Total nursing care of an individual remains the responsibility and accountability of the nurse.
- 1.43 ***"Unlicensed assistive personnel"*** means persons who are not registered, certified, or otherwise licensed by the Department.

PART II *Licensing Requirements for Professional (Registered), Certified Registered Nurse Practitioners, Certified Registered Nurse Anesthetists, and Practical Nurses*

Section 2.0 *License and Certification Requirements*

- 2.1 Pursuant to section 5-34-2 of the Act, it shall be unlawful for any person to practice or offer to practice nursing in this state or to use any title, sign, abbreviation, card or device indicating authority to practice nursing unless such person has been duly licensed and registered in accordance with the statutory provisions of the Act and the rules and regulations herein, except persons exempt in accordance with section 5-34-31 of the Act.
- 2.1.1 ***Professional (registered) nurse title:*** any person who holds a license to practice as a professional nurse in this state shall have the right to use the title "registered nurse" and the abbreviation "R.N.".
- 2.1.2 ***Certified registered nurse practitioner title:*** Any person who holds a license to practice as a certified registered nurse practitioner in this state shall have the right to use the title "certified registered nurse practitioner" and use the abbreviation "R.N.P." No other person shall assume that title or use that abbreviation or any other words or letters, signs, figures or devices to indicate that the person using it is a certified registered nurse practitioner.
- 2.1.3 ***Certified registered nurse anesthetist title:*** Any person who holds a license to practice as a certified registered nurse anesthetist in this state shall use the title "certified registered nurse anesthetist" and use the abbreviation "C.R.N.A."
- 2.1.4 ***Psychiatric and mental health clinical nurse specialist title:*** Any person who holds a license to practice as a psychiatric and mental health clinical nurse specialist in this state has the right to use the title "psychiatric and mental health clinical nurse specialist" and use the abbreviation "P.C.N.S." No other person may assume that title or use that abbreviation or any other words or letters, signs, figures, or devices to indicate that the person using it is a psychiatric and mental health clinical nurse specialist.
- 2.1.5 ***Practical nurse title:*** any person who holds a license to practice nursing as a practical nurse in this state shall have the right to use the title "licensed practical nurse" and the abbreviation "L.P.N."
- 2.2 No other person shall assume such titles or use such abbreviations or any other words, letters, signs, figures or devices to indicate that the person using the same is licensed professional nurse, certified registered nurse practitioner, psychiatric and mental health clinical nurse specialist, certified registered nurse anesthetist or licensed practical nurse in accordance with these regulations.

Section 3.0 *Qualifications for Licensure*

- 3.1 ***Professional (Registered) Nurse:*** An applicant seeking licensure to practice professional nursing in the State of Rhode Island must:
- a) be of good moral character;

- b) have completed at least an approved high school course of study or the equivalent supported by diploma or certificate thereof as determined by the rules and regulations of the State Board of Education;
- c) have successfully completed the prescribed curriculum in an approved basic professional nursing education program and holds a diploma therefrom; and,
- d) foreign trained applicants must meet the requirements set forth in section 5.3.1 herein.

3.2 ***Certified Registered Nurse Practitioner:*** An applicant seeking licensure to practice as a certified registered nurse practitioner in the State of Rhode Island must:

- a) be of good moral character;
- b) hold a current Rhode Island license as a registered nurse;
- c) in addition to the above, have completed an approved educational program resulting in a master's degree in nursing and/or an approved nurse practitioner course of study as defined in section 1.5 of these regulations. Effective January 1, 2004, all applicants for initial licensure must complete an accredited educational program resulting in a master's degree with a major in nursing.
- d) have successfully passed a national examination and be certified by a national nursing body recognized by the Board (e.g., American Nurses Credentialing Center [ANCC]).
- e) For applicants seeking licensure by endorsement, the licensing agency in each state in which the applicant holds or has held a registration or license must submit to the Board in this state a statement confirming the applicant to be or have been in good standing.

3.3 ***Psychiatric and Mental Health Clinical Nurse Specialist:*** An applicant seeking licensure to practice as a psychiatric and mental health clinical nurse specialist in the State of Rhode Island must:

- a) be of good moral character;
- b) hold a current Rhode Island license as a registered nurse;
- c) have completed an accredited educational program resulting in a master's degree in psychiatric and mental health nursing and/or
- d) passed a national qualifying examination (e.g., American Nurses Credentialing Center [ANCC]) as recognized by the Board.
- e) For applicants seeking licensure by endorsement, the licensing agency in each state in which the applicant holds or has held a registration or license must submit to the Board in this state a statement confirming the applicant to be or have been in good standing.

3.3.1 All persons who are engaged in the practice of a psychiatric and mental health clinical nurse specialist on July 1, 2003 who meet the definition in section 5-34-3(i) of the Act may be considered to have met the qualifications for licensure provided that they have three (3) years experience acceptable to the Board between January 1, 1997 and January 1, 2003. After January 1, 2004, all applicants for initial licensure must complete an accredited educational program resulting in a master's degree in nursing and must pass a national qualifying examination recognized by the Board.

3.4 ***Licensed Practical Nurse:*** An applicant seeking licensure to practice practical nursing in the State of Rhode Island must:

- a) be of good moral character;
- b) have completed preliminary educational requirements consisting of graduation from high school or its equivalent;
- c) have furnished satisfactory proof that he or she successfully completed the prescribed curriculum in an approved program of practical nursing and holds a diploma or certificate from the program or is a graduate of an approved school of professional nursing or was a student in good standing at an approved school of professional nursing before completing the program of studies and, at the time of withdrawal, had completed a program of study, theory and clinical practice equivalent to that required for graduation from an approved school of practical nursing;
- d) foreign trained applicants must meet the requirements set forth in section 5.3.2 herein.

3.5 ***Certified Registered Nurse Anesthetist:*** An applicant seeking a license to practice nurse anesthesia in the State of Rhode Island must:

- a) be of good moral character;
- b) hold a current license as a professional registered nurse in Rhode Island;
- c) have graduated from an education program accredited by the American Association of Nurse Anesthetists Council on Accreditation of Nurse Anesthesia Educational Programs, or its predecessors or successors, and which has as its objective, preparation of nurses to practice nurse anesthesia; and
- d) have initial certification by the American Association of Nurse Anesthetists Council on Certification of Nurse Anesthetists, and recertification as applicable, by the American Association of Nurse Anesthetists Council on Recertification of Nurse Anesthetists or their predecessors or successors.
- e) For applicants seeking licensure by endorsement, the licensing agency in each state in which the applicant holds or has held a registration or license must submit to the Board in this state a statement confirming the applicant to be or have been in good standing.

3.5.1 The requirements set forth in section 3.5(d) shall not apply to:

- a) graduate nurse anesthetists awaiting initial certification results, providing that the initial certification is accomplished within ninety (90) days of completion of an accredited nurse anesthesia education program.
- b) to a professional registered nurse who practices nursing in accordance with the provisions of the Nurse Practice Act, and who is duly enrolled as a bona fide student in an accredited nurse anesthesia program providing nurse anesthesia under the supervision of a certified registered nurse anesthetist and anesthesiologist;
- c) a nurse practicing as a nurse anesthetist in Rhode Island on July 1, 1991.

Section 4.0 *Application for Licensure and Fee*

- 4.1 Application for licensure to practice in this state as a professional nurse, or practical nurse, shall be made on forms provided by the Department, which shall be completed, notarized and submitted to the Department. An applicant shall schedule his/her own examination date. Such application shall be accompanied by the following documents:
 - a) official transcripts of education credentials sent directly to the Board from the school of nursing.
 - b) one (1) photograph of the applicant (head and shoulder view) approximately 2 X 3 inches in size, which is mounted on the application, and
 - c) the application fee (non-refundable) made payable to the General Treasurer, State of Rhode Island, as follows:
 - i. For professional nurse licensure: one hundred thirty dollars (\$130.00);
 - ii. For practical nurse licensure: ninety dollars (\$90.00).
- 4.2 Nurses registered in Rhode Island who wish to register as a certified registered nurse practitioner must submit appropriate certification credentials, as described in section 3.2, plus an application fee (non-refundable) made payable to the General Treasurer, State of Rhode Island for one hundred thirty dollars (\$130.00). The fee for application for prescriptive privileges shall be fifty dollars (\$50.00).
 - 4.2.1 Nurses not registered in Rhode Island who are seeking registration as a certified registered nurse practitioner must comply with those requirements for endorsement in section 5.2 of these regulations, plus the application fee as described in section 4.2.
- 4.3 Nurses registered in Rhode Island who wish to register as a certified registered nurse anesthetist, must submit appropriate certification credentials as described in section 3.5 plus an application fee, (non-refundable) made payable to the General Treasurer, State of Rhode Island for one hundred thirty dollars (\$130.00).

- 4.3.1 Nurses not registered in Rhode Island who are seeking registration as a certified registered nurse anesthetist must comply with those requirements for endorsement in section 5.2 of these regulations plus the application fee as described in section 4.3.
- 4.4 Nurses registered in Rhode Island who wish to register as a psychiatric and mental health clinical nurse specialist must submit appropriate certification credentials as described in section 3.3 plus an application fee (non-refundable) made payable to the General Treasurer, State of Rhode Island for one hundred thirty dollars (\$130.00). The fee for application for prescriptive privileges shall be fifty dollars (\$50.00).
 - 4.4.1 Nurses not registered in Rhode Island who are seeking registration as a psychiatric and mental health clinical nurse specialist must comply with those requirements for endorsement in section 5.2 of these regulations plus the application fee as described in section 4.4.

Section 5.0 *Licensing of Professional and Practical Nurses*

- 5.1 ***By Examination:*** Applicants, except those exempt pursuant to section 5.2 herein, shall be required to pass an examination as determined by the Board to test the qualifications of the applicants to practice nursing as a professional or practical nurse pursuant to the statutory and regulatory requirements herein.
 - 5.1.1 The National Council Licensure Examination (NCLEX) or other recognized professional examination service may be used to test the applicant's competency, skill and knowledge to practice nursing.
 - 5.1.2 Examinations shall be administered regularly at locations designated by the Board. All applicants shall submit to thumb printing, photographing and videotaping at the examination site.
 - 5.1.3 All applications and supporting credentials as required in section 4.0 herein shall be filed with the Board.
 - 5.1.4 ***Re-examination:*** In case of failure of any applicant to satisfactorily pass an examination such applicant shall be entitled to re-examination. Applicants may take the licensing examination as often as prescribed by the National Council Licensure Examination service. The fee of one hundred thirty dollars (\$130.00) shall be resubmitted.
- 5.2 ***Without Examination by Endorsement:*** A license to practice nursing as a professional or practical nurse may be issued without examination to an applicant who provides evidence of being currently licensed by examination or endorsement as a professional nurse or practical nurse under the laws of another state or territory or District of Columbia, if in the opinion of the Board, the applicant meets the qualifications required of professional or practical nurses in this state as set forth in these regulations. The Board of Nurse Registration and Nursing Education shall act on each application within 90 days of its submission.

5.2.1 A completed licensure application form and fee shall be filed with the Department in accordance with section 4.0 herein, and such additional supporting documentation as may be requested, and furthermore:

- a) The licensing agency in each state in which the applicant holds or has held a registration or license must submit to the Board in this state a statement confirming the applicant to be or have been in good standing; and

5.2.2 Pursuant to section 5-34-31 of the Act, persons who provide acceptable evidence, that is, not voluntarily surrendered, revoked, or suspended in another jurisdiction, of being currently licensed by examination or endorsement under the laws of other states of the United States, and the District of Columbia, shall not be prevented from practicing nursing in this state for a period of ninety (90) days from the date on the application fee receipt provided that they are duly licensed in this state within ninety (90) days from the date on the application fee receipt. The original privilege to work ninety (90) days shall not be extended or renewed.

5.3 ***Foreign Trained Applicants***

5.3.1 ***Professional (Registered) Nurses***

Applicants from foreign nursing schools seeking initial U.S. licensure in Rhode Island must present evidence of certification by the Commission on Graduates of Foreign Nursing Schools (CGFNS) including the requirements of sections 4.0 and 3.1 herein and, furthermore, must meet all of the appropriate requirements for licensure to the satisfaction of the Board and in accordance with the statutory and regulatory provisions herein. Provided, however, applicants who have graduated from foreign nursing schools who are actively licensed in good standing in another state or jurisdiction, shall be exempt from the CGFNS examination requirement, but shall be required to: complete the CGFNS Credentials Evaluation of educational program, have successfully completed the NCLEX, and submit the required application and fees in accordance with section 4.0 herein.

5.3.2 ***Practical Nurses***

Applicants from foreign schools of practical nursing must present to the Board the following documented evidence:

- a) high school education credentials equivalent to those of this state;
- b) official transcript from a government approved school of practical nursing that offered a general basic curriculum inclusive of the physical and biological sciences, social sciences and nursing, including concepts in medical, surgical, obstetrical, pediatric and psychiatric nursing.
- c) Credentials Evaluation of the educational program by the Commission on Graduates of Foreign Nursing Schools (CGFNS).

The applicant must furthermore submit the requirements of section 4.0 herein and must meet to the satisfaction of the Board, appropriate statutory and regulatory licensure requirements herein.

5.4 **Graduate Nurses:** Every graduate of an approved school of nursing who has filed with the Board a completed application, with supporting documents of credentials, for licensure as a professional nurse or practical nurse, may upon receiving a receipt from the Board for said application and documents, function as a graduate professional nurse or graduate practical nurse, as the case may be, for a period of ninety (90) days from the date on the application fee receipt and in each case he or she shall be supervised by a professional nurse licensed in this state. The original privilege to work ninety (90) days shall not be extended or renewed.

5.4.1 During this interim period, the graduate professional nurse or the graduate practical nurse applicant, shall identify himself or herself only as:

- i. "graduate professional nurse" and may use the initials "G.N.";
- ii. a "graduate practical nurse" and may use the initials "G.P.N."

5.4.2 If such an applicant fails the licensing examination all aforementioned privileges referred to in sections 5.4 and 5.4.1 (above) shall automatically cease.

If an applicant fails to receive a license within 90 days, all graduate nurse privileges will cease.

5.5 **Certified Registered Nurse Practitioners:** A license to practice as a certified registered nurse practitioner shall be issued if the applicant meets the qualifications for the certified registered nurse practitioner (R.N.P.). Persons who meet the qualifications of a certified registered nurse practitioner as stated in section 5-34-35 of the Rhode Island General laws, as amended, and section 3.2 herein, and are currently licensed as certified registered nurse practitioners by examination or endorsement under the laws of another state of the United States and/or the District of Columbia are allowed to practice as certified registered nurse practitioners in this state for a period not to exceed ninety (90) days from the date of clearance by the Board of Nurse Registration and Nursing Education of the Rhode Island Department of Health, provided that they are licensed in this state within ninety (90) days. The original privilege to work ninety (90) days from the date of clearance is not extended or renewed.

5.6 **Certified Registered Nurse Anesthetists:** Licensure as a nurse anesthetist shall be granted if the applicant meets the qualifications for licensure as indicated in section 3.5 of these regulations.

5.7 **Psychiatric and Mental Health Clinical Nurse Specialist:** A license to practice as a psychiatric clinical nurse specialist shall be issued if the applicant meets the qualifications for the psychiatric and mental health clinical nurse specialist. Persons who meet the qualifications of a psychiatric and mental health clinical nurse specialist, as stated in section 5-34-40.1 of the Rhode Island General Laws, as amended, and section 3.3 herein, and are currently licensed as psychiatric and mental health clinical nurse specialists by examination or endorsement under the laws of another state or territory of the United States and/or the District of Columbia are allowed to practice as psychiatric and mental health clinical nurse specialists in this state for a period not to exceed ninety (90) days from the date of clearance by the Board of Nurse Registration and Nursing Education of the Rhode Island Department of Health, provided that they are licensed in this state within ninety (90) days. The original privilege to work ninety (90) days from the date of clearance shall not be extended or renewed.

Section 6.0 *Issuance and Renewal of License and Fee*

6.1 Upon the recommendation of the Board, the Director shall issue to applicants who have satisfactorily met the licensure requirements herein, a license to practice either as a professional nurse, certified registered nurse practitioner, certified registered nurse anesthetist, psychiatric and mental health clinical nurse specialist, or practical nurse, in this state. Said license, unless sooner suspended or revoked, shall expire on the first day of March of every other year following the date of issuance of the original license.

6.2 On or before the first day of January of every year, the Department shall mail a notice for renewal of license to every person scheduled to be licensed that year on an odd/even basis with respect to the license number. Every professional or practical nurse so licensed who wishes to renew his or her license shall file with the Department a renewal application duly executed together with a renewal fee of ninety dollars (\$90.00) payable to the General Treasurer, State of Rhode Island, before the fifteenth (15th) day of February of that year.

Every certified registered nurse practitioner so licensed who wishes to renew his or her license shall file with the Department such renewal application duly executed together with a renewal fee of one hundred thirty dollars (\$130.00) which is ninety dollars (\$90.00) for the registered nurse fee, plus forty dollars (\$40.00) for the certified registered nurse practitioner fee. Evidence of current national certification as a nurse practitioner must be submitted at renewal.

Pursuant to the provisions of section 5-34.2-3 of the Rhode Island General Laws, as amended, every nurse anesthetist so licensed who wishes to renew his or her license shall file with the Department such renewal application duly executed, including all recertification documents from the American Association of Nurse Anesthetists Council on Recertification, together with a renewal fee of one hundred thirty dollars (\$130.00), ninety dollars (\$90.00) of which will be for the registered nurse license and forty dollars (\$40.00) of which will be for the nurse anesthetist license.

Every psychiatric and mental health clinical nurse specialist so licensed who wishes to renew his or her license shall file with the Department such renewal application duly executed together with a renewal fee of one hundred and thirty dollars (\$130.00) biennially; ninety dollars (\$90.00) for the registered nurse fee plus forty dollars (\$40.00) for the psychiatric and mental health clinical nurse specialist fee.

6.3 Upon receipt of such renewal application and payment of said fee, the accuracy of the application shall be verified and the Department shall grant a renewal license effective the second day of March, and expiring on the first day of March two years later unless the license is sooner suspended or revoked.

6.4 Any person who allows his or her license to lapse by failing to renew it on or before the first day of March of the next two (2) years as provided above may be reinstated by the Department upon submission of an application and on payment of the current renewal fee, unless license has been suspended or revoked.

6.4.1 Any person using the title professional nurse, certified registered nurse practitioner, certified registered nurse anesthetist or practical nurse, or who practices nursing during the time that

his or her license has lapsed shall be subject to the penalties for violations of the statutory and regulatory provisions herein.

Section 7.0 *Nurse Licensure Compact*

Applications for Licensure

- 7.1 As of July 1, 2008, an applicant for initial licensure shall be issued a compact license granting a multi-state privilege to practice, provided that the applicant first obtains a passing score on the applicable NCLEX examination or its predecessor examination used for licensure.
- 7.2 A nurse applying for a license in Rhode Island shall produce evidence of primary residence in Rhode Island. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include but shall not be limited to:
- a) Driver's license with a home address;
 - b) Voter registration card displaying a home address; or
 - c) Federal income tax return declaring the primary state of residence.
- 7.3 A nurse shall hold licensure in only one party state at a time, issued by the home state.
- 7.4 A nurse who intends to change primary state of residence may apply for licensure in the new home state in advance of such change. However, new licenses will not be issued by a party state until after a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.
- 7.5 When a nurse changes primary state of residence by:
- a) Moving between two party states, and obtains a license from the new home state, the license from the former home state is no longer valid;
 - b) Moving from a non-party state to a party state, and obtains a license from the new home state, the individual state license issued by the non-party state is not affected and will remain in full force if so provided by the laws of the non-party state;
 - c) Moving from a party state to a non-party state, the license issued by the prior home state converts to an individual state license, valid only in the former home state, without the multi-state licensure privilege to practice in other party states.
- 7.6 A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multi-state licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed thirty (30) days.
- 7.7 The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the thirty (30) day period in section 7.6 above shall be stayed until resolution of the pending investigation.

Permitted Activities and Jurisdiction

- 7.8 In order to obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as well as all other applicable state laws.
- 7.9 Party states may, in accordance with state due process laws, limit or revoke the multi-state licensure privilege of any nurse to practice in their state and may take any other actions under their applicable state laws necessary to protect the health and safety of their citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.
- 7.10 Every nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but shall include all nursing practice as defined by the state practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing board and courts, as well as the laws, in that party state.
- 7.11 The compact does not affect additional requirements imposed by states for advanced practice registered nursing. However, a multi-state licensure privilege to practice registered nursing granted by a party shall be recognized by other party states as a license to practice registered nursing if one is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.
- 7.12 Individuals not residing in a party state shall continue to be able to apply for nurse licensure as provided for under the laws of each party state. However, the license granted to these individuals will not be recognized as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.

Coordinated Licensure Information System

- 7.13 The licensee may request in writing to the home state board to review data relating to the licensee in the coordinated licensure information system. In the event a licensee asserts that any data relating to him/her is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The board shall verify and within ten (10) business days correct inaccurate data to the coordinated licensure information system.
- 7.14 Current significant investigative information shall be deleted from the coordinated licensure information system within ten (10) business days upon report of disciplinary action, agreement or order requiring participation in alternative programs or agreements that limit practice or require monitoring or dismissal of a complaint.
- 7.15 Changes to licensure information in the coordinated licensure information system shall be completed within ten (10) business days upon notification by a board.

Section 8.0 *Continuing Education Requirements*

- 8.1 Beginning with the 1 March 2006 renewal period, every person seeking renewal of a license under the provisions of the Act and the rules and regulations herein, shall provide satisfactory evidence to the Department that in the preceding two (2) years the practitioner (i.e., licensee) has completed the ten (10) required continuing education hours as established in this section.
 - 8.1.1 One (1) continuing education hour shall be equivalent to one (1) contact hour. One (1) continuing education unit shall be equivalent to ten (10) continuing education hours.
- 8.2 Continuing education hours related to nursing practice will be accepted by the Board for course work that has been presented, accepted or approved by the American Nurses Credentialing Center (ANCC) or its local chapter, other recognized professional nursing organizations, any department or school of nursing approved by a board of nursing, or such other professional, labor organization, or accrediting agency as may be approved by the Board.
- 8.3 At the time of license renewal, each licensee will be required to sign a statement attesting to the completion of the above continuing education requirements.
- 8.4 It shall be the sole responsibility of the individual practitioner to obtain documentation (e.g., course descriptions, proof of attendance) from the sponsoring organization, agency, or institution of his/her participation in a continuing education program and/or activity. These documents shall be retained by each licensee for no less than four (4) years and are subject to random audit by the Department.
- 8.5 Failure to produce satisfactory documentation of completion of the requirements of this section, upon request by the Board, constitutes grounds for disciplinary action under the provisions of the Act.
- 8.6 The Department may extend for only one (1) six (6) month period the continuing education requirements if the Department is satisfied that the applicant has suffered hardship which prevented meeting the educational requirements herein stated.

Section 9.0 *Transfer to Inactive List - Reinstatement*

- 9.1 Pursuant to section 5-34-20 of the Act, a nurse who does not intend to practice nursing during a two (2) year period, upon written request to the Department, may have his or her name transferred to an inactive list and shall not be required to pay the renewal fee for as long as the inactive status is maintained.
 - 9.1.1 Should a nurse resume practice at some future time, he or she will so notify the Department, remit the renewal fee, sign a statement attesting to the completion of the above continuing education requirements for the period during which the license was inactive (i.e., five {5} hours per year) or a re-entry program approved by the Board, and upon approval of

the Board, the license shall be reinstated in accordance with the provisions of section 6.0 above.

Section 10.0 *Other Requirements for Certified Registered Nurse Practitioners, Certified Registered Nurse Anesthetists and Psychiatric and Mental Health Clinical Nurse Specialists*

10.1 Prescriptive privileges for the certified registered nurse practitioner:

- a) shall be granted under the governance and supervision of the Department, Board of Nurse Registration and Nursing Education; and
- b) shall include prescription of legend medications; and
- c) shall not include controlled substances from schedule I of Chapter 21-28 of the General Laws, entitled "Controlled Substances Act"; and
- d) shall include controlled substances from schedules V, IV, III and II of Chapter 21-28-2.08 of the Rhode Island General Laws, as amended; provided that the applicant has obtained a controlled substances registration from the Department.

10.2 A certified registered nurse practitioner (R.N.P) as defined in section 1.9 of these regulations shall be permitted to prescribe in accordance with annually updated guidelines, written in collaboration with the medical director or physician consultant of his/her individual establishment.

10.3 To qualify for prescriptive privileges an applicant must submit on forms provided by the Department, verified by oath, that the applicant has evidence of completion of thirty (30) hours of education in pharmacology within the three (3) year period immediately prior to the date of application.

10.3.1 To maintain prescriptive privileges, the certified registered nurse practitioner (R.N.P.) must submit evidence of thirty (30) hours continuing education in pharmacology every six years.

Certified Registered Nurse Anesthetists

10.4 The nurse anesthetist is responsible and accountable to the consumer for his/her practice. The governing board of a licensed hospital, or, in the case of a clinic or office, a licensed anesthetist, physician or dentist determines the scope of practice of the nurse anesthetists. All responsibilities are in writing in the form prescribed by hospital or office policy. Additionally, certified registered nurse anesthetists shall practice in accordance with the current American Association of Nurse Anesthetists Guidelines for Nurse Anesthesia Practice, if the nurse anesthetists guidelines for nurse anesthesia practice neither violate nor contradict hospital, clinic or physician or dentist office by-laws, rules, regulations and policies or the provisions of Chapter 5-34.2 of the Rhode Island General Laws, as amended.

- 10.5 No person shall practice or advertise as a nurse anesthetist or use other words, letters, signs, figures or devices to indicate that the person is a certified registered nurse anesthetist until the person has been licensed, or otherwise exempt from these regulations.

Psychiatric and Mental Health Clinical Nurse Specialists

- 10.6 Prescriptive privileges for the psychiatric and mental health clinical nurse specialist:

- a) Shall be granted under the governance and supervision of the Department, Board of Nurse Registration and Nursing Education;
- b) are granted for psychiatric and mental health clinical nurse specialists who have a master's degree in nursing.
- c) Prescriptive privileges for the psychiatric and mental health clinical nurse specialist shall include prescription of all legend drugs, controlled substances from Schedule II classified as stimulants, controlled substances from Schedule IV, within the scope of practice, excluding controlled substances from Schedules I, III, and V, provided that the applicant has obtained a controlled substances registration from the Department.

- 10.6.1 A psychiatric and mental health clinical nurse specialist shall be permitted to prescribe in accordance with annually updated guidelines, written in collaboration with the medical director or physician consultant of their individual establishments;

- a) Provided, however, that a psychiatric and mental health clinical nurse specialist in independent practice shall **not** have prescriptive privileges.

- 10.6.2 To qualify for prescriptive privileges, as part of the application process, a psychiatric and clinical nurse specialist shall:

- a) submit on forms provided by the Board of Nurse Registration and Nursing Education, verified by oath, that the applicant has evidence of completion of thirty (30) hours of education in pharmacology of psychotropic drugs and certain legend medications within the three (3) year period immediately prior to the date of application;
- b) submit proof of attaining a master's degree in nursing;
- c) submit a statement, verified by oath, that the applicant has documentation of the annually updated guidelines pertaining to prescription practices, written in collaboration with the medical director or physician consultant as described in section 10.6.1 above; and,
- d) have verification of his or her current certification as a psychiatric and mental health clinical nurse specialist submitted to the Board by the American Nurses Credentialing Center.

- 10.6.3 To maintain prescriptive privileges, upon request of the Board of Nurse Registration and Nursing Education, a psychiatric and mental health clinical nurse specialist must:

- a) Submit, verified by oath, that the applicant has evidence of completion of thirty (30) hours continuing education in pharmacology of psychotropic drugs every six (6) years;
- b) Submit documentation of the annually updated guidelines pertaining to prescription practices, written in collaboration with the medical director or physician consultant as described in section 10.6.1 above; and,
- c) Have verification of his or her current certification as a psychiatric and mental health clinical nurse specialist submitted to the Board by the American Nurses Credentialing Center.

10.6.4 Each setting where such prescriptive privileges are allowed may further restrict prescriptive practices according to their own protocols.

10.6.5 Prior to prescribing those drugs classified under Chapter 21-28 as controlled substances in Schedule IV, a psychiatric and mental health clinical nurse specialist shall be required to register for such privileges with the Board of Pharmacy, Rhode Island Department of Health, and the Registration Unit of the federal Drug Enforcement Administration.

Advanced Practice Nurse Advisory Committee

10.7 The Advanced Practice Nurse Advisory Committee shall consist of nine (9) members, and membership shall be consistent with the provisions of section 5-34-40 of the General Laws.

10.7.1 Said committee shall meet no less than two (2) times per year and shall have the following functions:

- a) To assess advanced practice nurse practice for the purpose of improving patient care.
- b) To review all complaints regarding advanced practice nurses and recommend any and all disciplinary or corrective action as deemed appropriate, including revocation and suspension of license, in accordance with the provisions of section 5-34-40 of the General Laws.
- c) Advises periodically to the Board of Nurse Registration and Nursing Education regarding advanced nurse practice.

Section 11.0 *Standards of Nursing Practice*

Delegation

11.1 Nurses may delegate to nursing assistants who are registered or licensed with the Department. In addition, nurses may delegate nursing activities that are consistent with the level of knowledge, skills, training, experience, and cultural awareness of the unlicensed assistive personnel when the client's health status is stable and predictable, as defined herein.

11.2 Delegation of nursing activities shall comply with the following requirements:

- a) The licensed professional nurse shall make an assessment of the patient's nursing care needs prior to delegating the nursing activity. A licensed LPN, acting within the scope of his/her practice, as defined in section 1.31 herein, may delegate to certified nursing assistants and to unlicensed assistive personnel when the registered nurse's assessment allows such delegation to occur.
- b) The nursing activity shall be one that a reasonable and prudent nurse, utilizing sound nursing judgment, would determine to be appropriate for delegation.
- c) The licensed nurse delegating the nursing activity shall be accountable for the quality of nursing care given to the patient through the process of delegation.

11.3 Criteria for determining nursing activities that may be delegated shall include the following:

- a) Knowledge and skills of the delegatee;
- b) Verification of the clinical competence of the delegatee as determined by the organization providing the health care services;
- c) Stability of the client's condition such that it involves predictability, absence of risk complication, and rate of change;
- d) The variables in each service setting that include, but are not limited to, the following:
 - i. accessible resources and established policies, procedures, practices, and channels of communication that lend support to the type of nursing activities being delegated;
 - ii. complexity and frequency of care needed by a given client population;
 - iii. number and qualifications of other staff present;
 - iv. accessibility of the licensed nurse.
- e) Nursing activities that inherently involve ongoing assessment, interpretation or decision-making that cannot be logically separated from the procedure(s) shall not be delegated.
- f) Nursing activities for which the delegatee has not demonstrated competence shall not be delegated.

Supervision

11.4 A licensed nurse shall provide the necessary supervision, as defined in section 1.42 herein, of delegated nursing activities.

Pain Assessment

11.5 All health care providers licensed by this state to provide health care services and all health care facilities licensed under Chapter 23-17 of the Rhode Island General Laws, as amended, shall

assess patient pain in accordance with the requirements of the *Rules and Regulations Related to Pain Assessment (R5-37.6-PAIN)* promulgated by the Department.

Section 12.0 ***Grounds for Denial, Revocation or Suspension of License***

12.1 Pursuant to the statutory provisions of sections 5-34-24 and 5-34-25 and 5-34.2-4(c) of the General Laws, the Board shall have the power to deny, revoke, or suspend any license or otherwise to discipline any person licensed upon proof that the person is:

- a) guilty of fraud or deceit in procuring or attempting to procure a license to practice nursing;
- b) guilty of a crime of gross immorality;
- c) unfit or incompetent by reason of negligence or habits;
- d) habitually intemperate or is addicted to the use of habit-forming drugs;
- e) mentally incompetent;
- f) guilty of unprofessional conduct which includes, but is not limited to, all of the above and, also:
 - i. abandonment of a patient;
 - ii. willfully making and filing false reports or records in the practice of nursing;
 - iii. willful omission to file or record nursing records and reports as required by law;
 - iv. failure to furnish appropriate details of a client's nursing needs to succeeding nurses legally qualified to provide continuing nursing services to a client;
 - v. willful disregard of standards of nursing practice and failure to maintain standards established by the nursing profession; or
 - vi. failure to comply with the provisions of section 5-34-40(c) (2) of the General Laws, as a nurse practitioner; or
- g) guilty of willfully or repeatedly violating any of the provisions of the Act and/or the rules and regulations adopted herein.

12.2 All hearings and reviews as may be required herein shall be conducted in accordance with the provision of section 18.0 of these rules and regulations.

Section 13.0 ***Non-disciplinary Alternative Program***

13.1 The Board of Nurse Registration and Nursing Education may provide for a non-disciplinary alternative in situations involving alcohol and drug abuse; or any mental illness as listed in the most recent revised publication or the most updated volume of either the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association or the International Classification of Disease Manual (ICO) published by the World

Health Organization and that substantially limits the life activities of the person with the illness; provided, that the nurse agrees to voluntarily participate in a program of treatment and rehabilitation.

Requirements for Participation in the Non-disciplinary Alternative Program

13.2 Participation in the non-disciplinary program is voluntary. A nurse participating in the program shall:

- a) agree in writing to comply with terms of the contract;
- b) be responsible for all costs for assessment, treatment, and monitoring;
- c) agree to evaluations, including random body fluid testing, necessary to determine treatment and monitoring needs;
- d) agree to a role in the treatment program as determined by the health care provider(s) approved by the Board.

13.3 Information related to the non-disciplinary program shall be provided to the nurse's employer to ensure adequate worksite monitoring and compliance.

Disqualification Criteria from the Non-disciplinary Program

13.4 Criteria which shall disqualify a nurse from participating in a non-disciplinary program include the following:

- a) has been previously enrolled and terminated for non-compliance in a non-disciplinary program in Rhode Island or other jurisdiction;
- b) has a chemical dependency problem or diagnosis of mental illness of such severity that it could represent a clear and present danger to patient health and safety or has had nursing practice problems resulting in the death of a patient or involving significant harm or potentially significant harm to a patient;
- c) has had previous formal disciplinary action (related to his/her chemical dependency or mental illness) taken by a nursing board against her/him;
- d) has been convicted of any crime related to a controlled substance or legend prescription drug.

Causes for Termination from the Non-disciplinary Program

13.5 A nurse participating in the program may be terminated for any of the following reasons:

- a) noncompliance with any aspect of the contract;
- b) receipt of information by the Board, which after investigation, results in disciplinary action by the Board.

- c) engaged in any act that would have been cause to have initially disqualified the nurse applicant from participation in the program.

13.6 If the nurse does not agree to voluntarily participate in a treatment program protocol, or fails to satisfactorily complete a treatment program, the Board of Nursing may initiate disciplinary proceedings.

Confidentiality

13.7 All records pertaining to a nurse's participation in the non-disciplinary program are confidential and not subject to discovery, subpoena or public disclosure.

13.8 A nurse's record shall be maintained in confidence as required by federal and state laws and regulations, and in particular, in accord with section 408 of Public Law 92-55 (the Drug Abuse Prevention, Treatment and Rehabilitation Act, 21 U.S.C. section 1175), as amended, and the regulations contained in 42 Code of Federal Regulations, Part 2.

PART III *Standards Pertaining to Basic Nursing Education Programs*

Section 14.0 *Approval Criteria*

14.1 Any school, college, university or institution or such other facility in Rhode Island conducting or operating a basic nursing education program for the purpose of preparing individuals to be responsible practitioners of nursing and of granting appropriate diplomas or degrees in nursing (professional or practical nursing) is required to have been duly authorized to grant such degree or diploma by the appropriate state education body and/or authority pursuant to sections 16-40-1 and 16-40-2 of the General Laws of Rhode Island, as amended, and is required furthermore to receive approval from the Board. Such approval may be granted if the nursing program meets the statutory and regulatory requirements and standards herein. Approval shall consist of:

14.1.1 "Initial approval" which is the official recognition granted by the Board to a new program upon application by the controlling institution after survey and evaluation by the Board to determine that the institution is reasonably ready to admit students based on the provisions of section 14.1 herein; or

14.1.2 "Approved program" which is the official recognition of approval as defined in section 1.3 herein, granted by the Board to the basic nursing education program in this state which is in compliance with the statutory and regulatory provisions of section 16.0 herein.

Section 15.0 *Application for and Issuance of Approval*

Initial Approval

15.1 An institution desiring to conduct an educational program for the preparation of individuals for examination and licensure to practice nursing (professional or practical nursing) pursuant to section 5-34-22 of the Act, shall apply to the Board and submit at least twelve (12) months prior to the date it expects to admit the first student, a completed application (on forms provided by the Board), accompanied by documented evidence pertaining to no less than the following:

- a) general information about the controlling institution as specified in the application;
- b) purpose and need for establishing the program;
- c) data supporting the determination of need;
- d) organizational and administrative relationships of the controlling institution and the program;
- e) sources, kinds and amounts of financial support;
- f) evidence of community readiness to accept and support the program in appropriate ways;
- g) sources and locations of potential students, faculty, office, library, classrooms, clinical laboratory, conference rooms and other resources;

- h) the philosophy, purposes and accreditation status of the controlling institution and the major facilities to be used for clinical laboratory experience;
 - i) availability and adequacy of required nursing and general education courses as prescribed herein;
 - j) tentative time table for the next twelve (12) months; and
 - k) any other evidence as deemed necessary and as may be requested by the Board.
- 15.1.1 When an institution has submitted evidence to the Board that it is prepared to meet the prescribed requirements and the preliminary procedures have been completed to the satisfaction of the Board, authorization shall be granted by the Board to the institution to initiate the basic nursing education program.
- 15.1.2 At least four (4) months prior to the date of admission of students, a report on the proposed education program shall be submitted to the Board by the nurse director.
- 15.1.3 A site visit and an evaluation to validate compliance with sections 14.1 and 16.0 herein of the new nursing program shall be made by the state director of nursing education and/or other authorized representative of the Board, who shall submit written reports of findings to the Board for their evaluation of the nursing program.
- 15.1.4 If, in the opinion of the Board, the nursing program is found to meet the criteria herein, the Board shall grant an initial approval. Such approval shall extend from the date of Board action which precedes admission of the first students, and shall terminate on graduation of the first students.

Approved Program

- 15.2 Upon expiration of the initial approval, the Board may grant official state approval, if the program is found to meet the prescribed standards of section 16.0 herein. Such approval shall be based on data obtained from site visits conducted by the state director of nursing education and/or other authorized representative(s) of the Board and related written reports.

Evaluation of Approved Programs

- 15.3 Each approved nursing program shall submit to the Board annual reports on forms provided by the Board.
- 15.4 It shall be the duty of the Board through the state director of nursing education and/or other authorized representative(s) of the Board to conduct periodically, as may be deemed necessary, an evaluation of all basic nursing education programs in this state to validate continued compliance with the standards herein. Written reports shall be submitted to the Board for its determination of compliance with the standards herein.
- 15.5 If the National Council Licensure Examination (NCLEX) score of program graduates who are submitting to said examination for the first time, falls below the eighty per cent (80%) pass rate

for this population, for a period from October 1st through September 30th of the following year, the Board will notify the program, requesting a proposal for analyzing the problem. Such proposal shall be submitted within ninety (90) days of the request. A plan of correction is to be submitted within nine months of the submission of the proposal.

If the program fails to respond to the request from the Board, or if the plan of correction is found to be deficient, a hearing would be held in accordance with the rules and regulations.

If the NCLEX results continue to fall below the 80% passing standard, the program representatives may be invited to meet with members of the Board.

Section 16.0 *Standards for Approved Programs*

Organization and Administration:

16.1 The basic nursing education program shall be an organized sequence of study within or with an affiliated regionally accredited college or university or other similar controlling institution, authorized to confer credentials in nursing. The nursing program shall:

- a) have written statements of purpose, philosophy and objectives, which are consistent with those of the sponsoring institution;
- b) be organized with clearly defined authorities and responsibilities and shall have a chart showing the relationships and channels of communication of the program to the Board, the other departments in the controlling institution, to other cooperating agencies and institutions, and within the program;
- c) include clinical experiences in the episodic and distributive areas of nursing practice in health care facilities providing the specialized clinical nursing service(s). Mutual agreements with cooperating agencies and/or institutions or facilities shall be developed and shall clearly delineate the terms of the agreement which shall be reviewed periodically and revised as may be necessary; and
- d) written policies and procedures shall be established pertaining to the nursing program which shall include provisions for the involvement of faculty members in the development of policies and procedures regarding planning, implementing and evaluating the curriculum.

Faculty

16.2 The nursing program shall be staffed with a sufficient number of personnel to meet the purposes and objectives of the nursing program. The qualifications of the staff shall be commensurate with their respective functions and responsibilities and shall meet the following qualifications:

- a) Baccalaureate degree, associate degree and diploma programs shall have a director who holds at least a master's degree in nursing, with academic preparation in nursing education and administration. All other nurse faculty members employed on or after April 1985, shall hold at least a master's degree in nursing including experience in clinical nursing and nursing education, except any nurse faculty members with a master's degree in a field related to nursing who were

employed by an approved baccalaureate degree, associate degree or diploma program in the State of Rhode Island on or before April 1985.

- b) Practical nursing education programs shall have a director with a minimum of a master's degree with a major in nursing and academic preparation in education and administration. All other nursing faculty members employed on or after April 1985 shall have a minimum of a master's degree in nursing including experience in clinical nursing and nursing education except any nursing faculty members with a master's degree in a field related to nursing who were employed by an approved practical nursing education program in the State of Rhode Island on or before April 1985;
- c) All non-nurse faculty members shall have appropriate academic and professional preparation and experience in their respective field in accordance with the policies of the controlling institution and shall hold such licensure or certification as may be required by state law;
- d) Faculty members shall be recruited, appointed and promoted on the basis of academic and professional qualifications and demonstrated professional competence in accordance with established policies consistent with those of the controlling institution and hold such licensure or certification as may be required by law;
- e) Faculty shall be responsible for:
 - i. developing, implementing and evaluating curriculum;
 - ii. developing standards for admission, promotion and graduation of students;
 - iii. participating in academic guidance and counseling;
 - iv. participating in professional and community activities; and
 - v. such other as may be deemed appropriate;
- f) Written policies pertaining to faculty rights and responsibilities which are consistent with the policies of the controlling institution shall be established and shall include provisions pertaining to:
 - i. freedom of inquiry and opinion;
 - ii. criteria for evaluation of faculty performance;
 - iii. grievance procedure; and
 - iv. rank and status comparable to that afforded other faculty members of the controlling institution.

Students

16.3 Each nursing program shall provide directly to students, on an annual basis, written policies pertaining to no less than the following:

- a) admission, readmission, progression, retention, dismissal and graduation requirements which are consistent with policies of the controlling institution and the requirements herein;
- b) health and welfare, counseling and guidance, financial aid and housing (if any);
- c) participation in the development and evaluation of some aspects of the nursing program;
- d) availability of clinical facilities and services to the nursing program;
- e) student rights; and
- f) conditions of access to student records.

Resources, Facilities and Services

16.4 Each nursing program shall have adequate resources, facilities and services, consonant with the philosophy, purposes, objectives and policies of the nursing program and its controlling institution. Such resources, facilities and services shall include no less than:

- a) classroom, offices, conference rooms, laboratory and library facilities, accessible to and adequate for the number of students, faculty and other personnel;
- b) sufficient instructional materials to meet the needs of students, faculty and staff;
- c) furnishings of appropriate size and numbers as may be required for the varied instructional programs and for the number of students and staff;
- d) an adequate number of agency and service resources to provide the kinds of student learning experiences as required to meet curriculum objectives; and
- e) adequate financial support to implement and operate the nursing program.

Curriculum

16.5 The curriculum of the nursing program shall be developed, organized, implemented and evaluated by the faculty. The framework of the curriculum shall be within the philosophy, purposes, and objectives of the program, as well as the policies of the controlling institution, and shall be consistent with the laws and regulations governing the practice of nursing.

Furthermore, such curriculum shall be revised as may be necessary to maintain a program which reflects the developments in health care and its delivery, and to insure that students are adequately prepared to meet the professional and legal expectations of a licensed professional (registered) or practical nurse.

16.5.1 *Organization of the Curriculum*

- a) the selection and organization of the learning experience shall consist of an organized sequence of theory and clinical practice;
- b) theory and clinical experience shall be provided concurrently where appropriate;
- c) course outlines shall be kept current and available;
- d) the organization of courses as model program design shall be in accordance with acceptable and recognized standards for baccalaureate degree, diploma and associate degree programs in nursing, and practical nursing programs shall be no less than forty (40) week academic programs.

16.5.2 *Curriculum Content*

- a) Nursing programs offering diploma, associate degree or baccalaureate degrees in nursing shall provide specialized knowledge and nursing skills through educational preparation in the biological, physical, social and behavioral sciences reflecting the different levels of nursing programs (baccalaureate, associate degree and diploma schools) which include:
 - i. theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;
 - ii. concepts of anatomy, physiology, chemistry and microbiology;
 - iii. concepts of sociology, psychology, communications, growth and development, interpersonal relations, group dynamics, cultural diversity and humanities;
 - iv. concepts of pharmacology, nutrition and diet therapy, and pathophysiology;
 - v. concepts of historical trends and issues, leadership, management and patient education;
 - vi. concepts of the nursing process;
 - vii. ethics and legal aspects of nursing, including identification and intervention of the chemically-dependent student/professional registered nurse and those whose practice is impaired due to mental illness.
 - viii. concepts in medical, surgical, obstetric, pediatric and psychiatric nursing.
- b) Nursing programs preparing an individual for licensure as a practical nurse shall include specialized knowledge and nursing skills acquired through educational preparation in nursing and in the biological, social, and behavioral sciences which shall include:

- i. theory and practice in nursing encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process;
- ii. concepts of anatomy, physiology, chemistry and microbiology;
- iii. concepts of communication, growth and development, interpersonal relations and cultural diversity;
- iv. ethics, nursing history and trends, vocational and legal aspects of nursing including identification and intervention of the chemically-dependent student/practical nurse and those whose practice is impaired due to mental illness.
- v. concepts of pharmacology, nutrition and patient instruction;
- vi. concepts of the nursing process; and
- vii. concepts in medical, surgical, obstetric, pediatric and psychiatric nursing.

Evaluation of Curriculum

- 16.5.3 A systematic plan for on-going evaluation of the curriculum shall be established which includes evaluation provisions pertaining to no less than:
- a) the implementation of the curriculum design;
 - b) the congruency of the curriculum with needs of society and developments in health care and its delivery; and
 - c) revisions and/or modifications of curriculum as may be necessary based on evaluation data.

Section 17.0 Denial or Revocation of Approval

- 17.1 If the Board determines that a state-approved nursing program is not maintaining the standards prescribed herein, written notice of such deficiency shall be communicated by the Board to the nursing education program director. When failure to correct the noted deficiency(ies) to the satisfaction of the Board within a reasonable period of time as recommended by the Board occurs, the Board shall notify the controlling institution of a proposed pending action to deny or revoke approval of the program and the controlling institution shall be given an opportunity for a prompt and fair hearing in accordance with the provisions of section 18.0 herein.

PART IV *Violations and Sanctions/Practices and Procedures/Severability*

Section 18.0 *Violations and Sanctions*

18.1 Any violations of the provisions of the Act and the rules and regulations herein, shall be cause for the Board to impose such sanctions as denial, revocation or suspension of an individual's license or imposing such other disciplinary action, and the Board may deny, revoke or suspend state approval of a basic nursing education program which fails to comply with the standards herein. Furthermore, pursuant to section 5-34-29 of the Act, any violations of the provisions of the Act shall be subject to the penalties of that section.

Section 19.0 *Rules Governing Practices and Procedures*

19.1 All hearings and reviews required under the provisions of Chapter 5-34 of the General Laws of Rhode Island, as amended, shall be held in accordance with established Board policies, the provisions of the Act and the rules and regulations promulgated by the Rhode Island Department of Health entitled *Rules and Regulations of the Rhode Island Department of Health Regarding Practices and Procedures Before the Department of Health and Access to Public Records of the Department of Health (R42-35-PP)*.

Section 20.0 *Severability*

20.1 If any provisions of these rules and regulations or the application thereof to any person or circumstance shall be held invalid, such invalidity shall not affect the provisions or application of the rules and regulations which can be given effect, and to this end the provisions of the rules and regulations are declared to be severable.

*Wednesday, March 19, 2008
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REFERENCES

1. Chapter 5-34 of the Rhode Island General Laws, as amended, “The Rhode Island Nurse Practice Act.” Available online: <http://www.rilin.state.ri.us/Statutes/TITLE5/5-34/INDEX.HTM>
2. Chapter 21-28-2.08 of the Rhode Island General Laws, as amended, “Uniform Controlled Substances Act, Article 21-28-2.01 Standards and Schedules.” Available online: <http://www.rilin.state.ri.us/Statutes/TITLE21/21-28/21-28-2.08.HTM>
3. *Rules and Regulations Related to Pain Assessment (R5-37.6-PAIN)*, Rhode Island Department of Health, May 2003 and subsequent amendments thereto. Available online: http://www.rules.state.ri.us/rules/released/pdf/DOH/DOH_2531.pdf
4. *Rules and Regulations of the Rhode Island Department of Health Regarding Practices and Procedures Before the Department of Health and Access to Public Records of the Department of Health (R42-35-PP)*, Rhode Island Department of Health, April 2004 and subsequent amendments thereto. Available online: http://www.rules.state.ri.us/rules/released/pdf/DOH/DOH_2945.pdf
5. Rhode Island Board of Nursing website available online: <http://www.health.ri.gov/hsr/professions/nurses.htm>