Mission Statement

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NCSBN MODEL RULES (2021)

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Chapter 1. Title and Purpose

Chapter 2. Definitions

As used in Chapters 3 through 8 of this Act, unless the context thereof requires otherwise:

a. “Abandonment” means the intentional leaving a patient for whom the nurse is responsible without providing for another nurse or appropriate caretaker to assume care upon the nurse's leaving.

b. “Dual relationship” means when a nurse is involved in any relationship with a patient in addition to the therapeutic nurse-patient relationship.

c. “NCLEX-PN®” means the National Council Licensure Examinations for Practical Nurses.

d. “NCLEX-RN®” means the National Council Licensure Examinations for Registered Nurses.

e. “Nursing faculty” means individuals employed full or part time by an academic institution who are responsible for developing, implementing, evaluating and updating nursing program curricula.

f. “Preceptor” means an individual at or above the level of licensure that an assigned student is seeking who may serve as a teacher, mentor, role model, or supervisor in a clinical setting.

g. “Professional boundaries” means the space between the nurse's power and the patient's vulnerability; the power of the nurse comes from the professional position and access to private knowledge about the patient; establishing boundaries allows the nurse to control this power differential and allows a safe connection to meet the patient’s needs.

h. “Professional-boundary crossing” means a deviation from an appropriate boundary for a specific therapeutic purpose with a return to established limits of the professional relationship.

i. “Professional-boundary violation” means the failure of a nurse to maintain appropriate boundaries with a patient and key parties.

j. “Sexualized body part” means a part of the body not conventionally viewed as sexual in nature that evokes arousal.

k. “Sexual misconduct” means any unwelcome behavior of a sexual nature that is committed without consent or by force, intimidation, coercion, or manipulation.

l. “Simulation” means a technique to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner (Gaba, 2004).

m. “Debriefing” means an activity that follows a simulation experience, is led by a facilitator, encourages participant’s reflective thinking, and provides feedback regarding the participant’s performance.
Chapter 3. Scope of RN, LPN/VN and APRN Practice

3.1.1 Standards Related to Licensed Practical/Vocational Nurse (LPN/VN), RN and APRN Professional Accountability

The LPN/VN, RN and APRN:

a. Accepts responsibility for individual nursing actions, competence, decisions and behavior in the course of nursing practice.

b. Maintains competence through ongoing learning and application of knowledge in nursing practice.

3.1.2 Standards Related to LPN/VN Scope of Practice

The LPN/VN, practicing to the extent of their education and training under the supervision of an RN, advanced practice registered nurse (APRN), physician or other authorized licensed health care provider:

a. Participates in nursing care, health maintenance, patient teaching, counseling, collaborative planning and rehabilitation.

b. Plans for patient care, including:
   1. Planning nursing care for a patient whose condition is stable or predictable.
   2. Assisting the RN, APRN, or physician in identification of patient needs and goals.
   3. Determining priorities of care together with the RN, APRN or physician.

c. Provides patient surveillance and monitoring
   1. Participating with other health care providers and contributing in the development, modification, and implementation of the patient centered healthcare plan.

d. Implements nursing interventions and prescribed medical regimens in a timely and safe manner.

e. Documents nursing care provided accurately and timely.

f. Collaborates and communicates relevant and timely patient information with patients and other health team members to ensure quality and continuity of care, including:
   1. Patient status and progress.
   2. Patient response or lack of response to therapies.
   4. Patient needs and special requests.

g. Takes preventive measures to promote an environment that is conducive to safety and health for patients, others and self.

h. Respects patient diversity and advocates for the patient’s rights, concerns, decisions and dignity.

i. Maintains appropriate professional boundaries.
j. Participates in systems, clinical practice and patient care performance improvement efforts to improve patient outcomes.

k. Assigns and delegates nursing activities to assistive personnel. The LPN shall:
   1. Delegate only those nursing measures for which that person has the necessary skills and competence to accomplish safely.

   Authority: Model Act Article III Section 1

3.2.1 Standards Related to RN Scope of Practice

The RN:

a. Practices within the legal boundaries for nursing through the scope of practice authorized in the Nurse Practice Act and rules governing nursing.

b. Provides patient surveillance and monitoring.

c. Identifies changes in patient’s health status and takes appropriate action.

d. Documents nursing care, changes in the patient’s condition and all relevant information.

e. Takes preventive measures to protect patient, others and self.

f. Delegates to another only those nursing measures for which that person has the necessary skills and competence to accomplish safely.

   Authority: Model Act Article III Section 2

3.2.2 Standards Related to APRN Scope of Practice

a. The APRN shall comply with the standards for RNs as specified in Chapter 3 and to the standards set forth by the BON. Standards for a specific role and population focus of APRN supersede standards for RNs where conflict between the standards, if any, exists.

b. APRNs shall practice within standards established by the BON in rule and assure patient care is provided according to relevant patient care standards recognized by the BON, and other national standards of care.

c. Discipline of Prescriptive Authority

   1. APRN discipline and proceedings is the same as previously stated for RN and LPN/VN in Chapter 7.

   2. The BON may limit, restrict, deny, suspend or revoke APRN licensure, or prescriptive or dispensing authority.

   3. Additional grounds for discipline related to prescriptive or dispensing authority include, but are not limited to:

      1. Prescribing, dispensing, administering, or distributing drugs in an unsafe manner or without adequate instructions to patients according to acceptable and prevailing standards.

      2. Selling, purchasing, trading, or offering to sell, purchase or trade drug samples.
3. Prescribing, dispensing, administering or distributing drugs for other than therapeutic or prophylactic purposes. or

4. Prescribing or distributing drugs to individuals who are not patients of the APRN or who are not within that nurse’s role and population focus.

Authority: Model Act Article III Section 3

Chapter 4. Board of Nursing (BON)

4.1 Membership, Nominations, Qualifications, Appointment and Term of Office

4.2 Officers

4.3 Meetings

4.4 Guidelines

4.5 Vacancies, Removal and Immunity

4.6 Powers and Duties

4.7 Collection of Fees

a. The BON may collect the following fees:

1. Application for licensure by examination
   a. RN < >
   b. LPN/VN < >
   c. APRN < >

2. Application for licensure by endorsement
   a. RN < >
   b. LPN/VN < >
   c. APRN < >

3. Temporary permit for endorsement applicant
   a. RN < >
   b. LPN/VN < >
   c. APRN < >
4. Renewal of licensure
   a. RN < >
   b. LPN/VN < >
   c. APRN < >
5. Late renewal < >
6. Reinstatement < >
7. Certified statement that nurse is licensed in jurisdiction < >
8. Duplicate or reissued license < >
9. Insufficient funds < >
10. Nursing education program survey and evaluation per level < >
11. Discipline monitoring < >
12. Copying costs < >
13. Criminal background check processing fees < >
14. Other miscellaneous costs

b. All fees collected by the BON are non-refundable.

Authority: Model Act Article IV Section 6

4.8 Executive Officer

Chapter 5. RN, LPN/VN and APRN Licensure and Exemptions

5.1 Titles and Abbreviations for Licensed Nurses

5.1.1 Titles and Abbreviations for APRNs

a. Individuals are licensed or granted privilege to practice as APRNs in the roles of certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), clinical nurse specialist (CNS) and certified nurse practitioner (CNP) and in the population focus of family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/ gender-related or psychiatric/mental health.

b. Each APRN shall use the designation “APRN” plus role title as a minimum for purposes of identification and documentation.

c. When providing nursing care, the APRN shall provide clear identification that indicates his or her APRN designation.

Authority: Model Act Article III Section 3
5.2 Examinations

5.3 Application for Licensure by Examination as an RN or LPN/VN

An applicant for licensure as an RN or LPN/VN shall:

a. Submit a completed application and fees established by the BON.

b. Graduate or be eligible for graduation from a <your jurisdiction> BON approved prelicensure program or a program that meets criteria comparable to those established by the <your jurisdiction> BON in its rules.

c. Pass an examination authorized by the BON.
   1. All RN applicants shall take and pass the NCLEX-RN®.
   2. All LPN/ VN applicants shall take and pass the NCLEX-PN®.

d. Submit to state and federal criminal background checks.

e. Report any criminal conviction, nolo contendere plea, Alford plea, deferred judgment, or other plea arrangements in lieu of conviction.

f. Report any condition or impairment (including but not limited to substance abuse, or a mental, emotional or nervous disorder or condition) which in any way currently affects or limits your ability to practice safely and in a competent and professional manner.

g. Report any actions taken or initiated against a professional or occupational license, registration or certification.

h. For an applicant who is a graduate of a prelicensure education program not taught in English, passage of an English proficiency examination that includes the components of reading, speaking, writing and listening.

i. Identify any state, territory or country in which the applicant holds a professional license or credential, if applicable. Required information includes:
   1. The number and status of the license or credential.
   2. The original state or country of licensure or credentialing.

j. Provide employment information including current employer if employed in health care, including address, telephone number, position and dates of employment and previous employer in health care, if any, if current employment is less than 12 months.

k. Provide information regarding whether the applicant previously applied for a license in another jurisdiction and either was denied a license, or withdrew the application or allowed the application to expire, if applicable.

l. Provide detailed explanation and supporting documentation for each affirmative answer to questions, as applicable, regarding the applicant’s background.

Authority: Model Act Article V Section 3
5.4 Additional Requirements for Licensure by Examination of Internationally Educated Applicants

In addition to the requirements listed in Section 5.3, the requirements for licensure by examination of internationally educated applicants, includes:

a. Graduation from a foreign RN or LPN/VN prelicensure education program that (a) has been approved by the authorized accrediting body in the applicable country and (b) has been verified by an independent credentials review agency to be comparable to a licensing board-approved prelicensure education program;

b. Acceptable documentation shall verify the date of enrollment, date of graduation and credential conferred. An official transcript and, if not in English, a certified translation is required prior to the approval to take the NCLEX®.

c. Passage of an English proficiency examination, if a graduate of a foreign prelicensure education program not taught in English or if English is not the individual’s native language, that includes the components of reading, speaking, writing and listening.

Authority: Model Act Article V Section 3

5.5 Application for Licensure by Endorsement as an RN or LPN/VN

a. An applicant for licensure by endorsement in this state shall:

1. Submit a completed application and fees as established by the BON.
2. Graduate from a <your jurisdiction> BON-approved prelicensure program or a program that meets criteria comparable to those established by the <your jurisdiction>.
3. Hold a license as an RN or an LPN/VN that is not encumbered.
4. Pass an examination authorized by the BON.
5. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.
6. Submit to state and federal criminal background checks.
7. Report any criminal conviction, nolo contendere plea, Alford plea, deferred judgment, or other plea arrangements in lieu of conviction.
8. Report any condition or impairment (including but not limited to substance use, alcohol abuse, or a mental, emotional or nervous disorder or condition) which in any way currently affects or limits your ability to practice safely and in a competent and professional manner.
9. Report any actions taken or initiated against a professional or occupational license, registration or certification.
10. Report current participation in an alternative to discipline program in any jurisdiction.
11. Submit verification of licensure status provided directly from the U.S. jurisdiction of licensure by examination, or a coordinated licensure information system.
b. An applicant for licensure by endorsement as an RN or LPN/VN in this state, whichever is applicable, shall provide the following information:

1. Evidence of having passed the licensure examination required by this jurisdiction at the time the applicant was initially licensed in another jurisdiction.

c. Identification of any state, territory or country in which the applicant holds a health profession license or credential, if applicable. Required information includes:

1. The number and status of the license or credential.
2. The original state or country of licensure or credentialing.

d. The date and jurisdiction the applicant previously applied for a license in another jurisdiction and either was denied a license or withdrew the application, if applicable.

e. Detailed explanation and supporting documentation for each affirmative answer to questions, as applicable, regarding the applicant’s background.

Authority: Model Act Article V Section 4

5.6 Renewal of Licenses

The renewal of a license must be accomplished by <date determined by the BON>. Failure to renew the license on or before the date of expiration shall result in the forfeiture of the right to practice nursing in this jurisdiction.

Authority: Model Act Article V Section 7

5.6.1 Application for Renewal of License as an RN or LPN/VN

An applicant for license renewal shall submit to the BON the required fee for license renewal and a completed application for license renewal that provides the following information:

a. Detailed explanation and supporting documentation for each affirmative answer to questions, as applicable, regarding the applicant’s background.

b. Report any criminal conviction, nolo contendere plea, Alford plea, deferred judgment, or other plea arrangements in lieu of conviction.

c. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.

d. Report any condition or impairment (including but not limited to substance use, alcohol abuse, or a mental, emotional, or nervous disorder or condition) which in any way currently affects or limits your ability to practice safely and in a competent and professional manner.

e. Report any actions pending, taken or initiated against a professional or occupational license, registration or certification.

f. Report current participation in an alternative to discipline program in any jurisdiction.

g. Failure to provide the requested information may result in non-renewal of the license to practice nursing or a disciplinary action.

Authority: Model Act Article V Section 6
5.7 Reactivation of License Following Failure to Renew

An individual whose license is inactive by failure to renew may apply for reactivation by submitting an application, paying a fee, meeting all practice requirements for renewal of licensure and satisfying the conditions listed below. At any time after a license has been inactive, the BON may require evidence of the licensee’s current nursing knowledge and skill before reactivating the licensee to the status of active license. An applicant must:

1. Report any criminal conviction, nolo contendere plea, Alford plea, deferred judgment, or other plea arrangements in lieu of conviction.
2. Submit to state and federal criminal background checks.
3. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.
4. Report any condition or impairment (including but not limited to substance use, alcohol abuse, or a mental, emotional or nervous disorder or condition) which in any way currently affects or limits your ability to practice safely in a competent and professional manner.
5. Report any action taken or initiated against a professional or occupational license, registration or certification.
6. Report current participation in an alternative to discipline program in any jurisdiction.

Authority: Model Act Article V Section 7

5.7.1 Reinstatement Following Disciplinary Action

For those licensees applying for reinstatement following disciplinary action, compliance with all BON licensure requirements, as well as any specific requirements set forth in the BON’s discipline order, is required. An applicant must:

1. Report any criminal conviction, nolo contendere plea, Alford plea, deferred judgment, or other plea arrangements in lieu of conviction.
2. Submit to state and federal criminal background checks.
3. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.
4. Report any condition or impairment (including but not limited to substance use, alcohol abuse, or a mental, emotional or nervous disorder or condition) which in any way currently affects or limits your ability to practice safely in a competent and professional manner.
5. Report any action taken or initiated against a professional or occupational license, registration or certification.
6. Report current participation in an alternative to discipline program in any jurisdiction.

Authority: Model Act Article V Section 8
5.8 Duties of Licensees

5.9 Criminal Background Checks

5.10 Exemptions to Licensure – Nursing Students
1. No provisions of this Act shall be construed to prohibit the practice of nursing if:
   a. The student is enrolled in a program located in this jurisdiction and approved by the BON or participating in this jurisdiction in a component of a program located in another jurisdiction and approved by a BON.
   b. The student’s practice is under the auspices of the program.
   c. The student acts under the supervision of an RN serving for the program as a faculty member or teaching assistant.

   Authority: Model Act Article V Section 11

5.11 APRN Licensure

5.11.1 Application for Initial Licensure
a. An applicant for licensure as an APRN in this state shall submit to the BON the required fee as specified in Chapter 4, verification of licensure or eligibility for licensure as an RN in this jurisdiction and a completed application that provides the following information:

   1. Graduation from an APRN graduate or post-graduate program as evidenced by official documentation received directly from an APRN program accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or the Council for Higher Education Accreditation (CHEA), or its successor organization, as acceptable by the BON.

   2. This documentation shall verify the date of graduation; credential conferred; completion of three separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education in this state.

b. Report any criminal conviction, nolo contendere plea, Alford plea, or other plea arrangement in lieu of conviction.

c. Requirements for Certification Programs

   1. Certification programs are accredited by a national accreditation body as acceptable by the BON.

   Authority: Model Act Article V Section 5
5.11.2 Application of an Internationally Educated APRN

An internationally educated applicant for licensure as an APRN in this state shall:

a. Graduate from a graduate or post-graduate level APRN program equivalent to an APRN educational program in the U.S. accepted by the BON.

b. Submit documentation through a BON approved qualified credentials evaluation process for the license being sought.

c. Has, if a graduate of a foreign prelicensure education program not taught in English or if English is not the individual's native language, successfully passed an English proficiency examination that includes the components of reading, speaking, writing, and listening;

d. Meet all other licensure criteria required of applicants educated in the U.S.

Authority: Model Act Article V Section 5

5.11.3 Application for Licensure by Endorsement

a. An applicant for licensure by endorsement as an APRN in this state shall submit to the BON the required fee as specified in Chapter 4, verification of eligibility for an license or privilege to practice as an RN in this jurisdiction and a completed APRN application that provides the following information:

1. Graduation from a graduate or post-graduate level APRN program, as evidenced by an official transcript or other official documentation received directly from a graduate program accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or CHEA, or its successor organization, as acceptable by the BON.

2. This documentation shall verify the date of graduation; credential conferred; number of clinical hours completed; completion of three separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education in this state.

b. Not have an encumbered license or privilege to practice in any state or territory.

c. Report any conviction, nolo contendere plea, Alford plea, or other plea arrangement in lieu of conviction.

d. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.

e. Current certification by a national certifying body in the APRN role and population focus appropriate to educational preparation.

   a. Primary source of verification of certification is required.

f. Requirements of 5.3.d.-i. shall apply to APRNs.

Authority: Model Act Article V Section 5
5.11.4 Application for License Renewal

An applicant for license renewal as an APRN shall submit to the BON the required fee for license renewal, as specified in Chapter 4, and a completed license renewal application including:

a. Detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant’s background.

b. Evidence of current certification(s), or recertification as applicable, by a national professional certification organization that meets the requirements of 8.2.1.

c. Submit a renewal application as directed by the BON and remit the required fee as set forth in rule.

Authority: Model Act Article V Section 5

5.11.5 Quality Assurance/Documentation and Audit

The BON may conduct a random audit of nurses to verify current APRN certification and/or continuing education. Upon request of the BON, licensees shall submit documentation of compliance.

Authority: Model Act Article V Section 5

5.11.6 Reinstatement of License

The reinstatement of APRN licensure is the same as previously stated for RNs and LPN/VNs in Chapter 5 plus the following:

a. An individual who applies for licensure reinstatement and who has been out of practice for more than five years shall provide evidence of successfully completing < > hours of a reorientation in the appropriate advanced practice role and population focus, which includes a supervised clinical component by a qualified preceptor.

b. Preceptor must the following requirements:

1. Holds an active license or privilege to practice as an APRN or physician that is not encumbered and practices in a comparable practice focus.

2. Functions as a supervisor and teacher and evaluates the individual’s performance in the clinical setting.

c. For those licensees applying for licensure reinstatement following disciplinary action, compliance with all BON licensure requirements, as well as any specified requirements set forth in the BON’s discipline order, is required.

Authority: Model Act Article V Section 5
Chapter 6. Prelicensure Nursing Education

6.1 Purpose of Nursing Education Standards

The purpose of nursing education standards is to ensure that graduates of nursing education programs are prepared for safe and effective nursing practice.

Authority: Model Act Article VI Section 1

6.1.1 Prelicensure Nursing Education Standards

All nursing education programs shall meet these standards:

a. The purpose and outcomes of the nursing program shall be consistent with the Act and BON promulgated administrative rules, regulations and other relevant state statutes.

b. The input of stakeholders shall be considered in developing and evaluating the purpose and outcomes of the program.

c. A systematic evaluation plan of the curriculum is in place.

d. The curriculum shall provide diverse didactic and clinical learning experiences consistent with program outcomes.

e. Faculty and students shall participate in program planning, implementation, evaluation and continuous improvement.

f. The nursing program administrator shall be professionally and academically qualified RN with institutional authority and administrative responsibility for the program.

g. The nursing program administrator shall be consistent in a nursing program, with no more than 3 nursing program administrators in 5 years.

h. Professionally, academically and clinically qualified faculty shall be sufficient in number, have a low turnover, and have the expertise to accomplish program outcomes and quality improvement.

i. The simulation center shall be accredited.

j. Written an easily accessible policies and procedures that have been vetted by students and faculty.

k. Formal mentoring of full-time and part-time faculty.

l. Formal orientation of adjunct faculty.

m. The school shall provide substantive and periodic workshops and presentations devoted to faculty development.

n. The program can provide evidence that their admission, progression, and student performance standards are based on data.

o. The fiscal, human, physical (including access to a library), clinical and technical learning resources shall be adequate to support program processes, security and outcomes.

Authority: Model Act Article VI Section 2
6.1.2 Required Criteria for Prelicensure Nursing Education Programs

a. Curriculum shall include experiences that promote clinical judgment; skill in clinical management, supervision and delegation; interprofessional collaboration; quality and safety; and navigation and understanding of health care systems.

1. Distance education methods are consistent with the curriculum plan.

2. Coursework shall include, but not be limited to:
   
   i. Sound foundation in biological, physical, social and behavioral sciences

   ii. Didactic content including prevention of illness and the promotion, restoration and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social and economic backgrounds.

   iii. Didactic and clinical experiences shall include Medical/ Surgical, obstetrics, pediatrics, Psychiatric/ Mental Health and Community Health.

   iv. 50% or more of clinical experiences, in each course, shall include direct patient care.

   v. Clinical experiences shall be supervised and occur directly with patients. Clinical experiences and simulation shall include a variety of clinical settings and are sufficient for meeting program outcomes.

3. The program has processes in place to manage and learn from near misses and errors.

4. The program has opportunities for collaboration with interprofessional teams.

5. Professional responsibilities, legal and ethical issues, history and trends in nursing and health care.

b. Students

1. The program shall hold students accountable for professional behavior, including honesty and integrity, while in their program of study.

2. All policies relevant to applicants and students shall be readily available in writing and vetted by students and faculty.

3. Students shall meet health standards and criminal background check requirements.

4. English as a second language assistance is provided.

5. Assistance is available for students with disabilities.

6. All students have books and resources necessary throughout the program.

7. Remediation strategies are in place at the beginning of each course and students are aware of how to seek help.
c. Administrator qualifications

1. Administrator qualifications in a program preparing for LPN/VN licensure shall include:
   a. A current, active RN license or privilege to practice that is not encumbered and meet requirements in the jurisdiction where the program is approved;
   b. A minimum of a graduate degree in nursing or bachelor’s degree in nursing with a graduate degree;
   c. Experience in teaching, nursing practice and administration; and
   d. A current knowledge of nursing practice at the practical/vocational level.

2. Administrator qualifications in a program preparing for RN licensure shall include:
   a. A current, active RN license or privilege to practice that is not encumbered and meet requirements in the jurisdiction where the program is approved;
   b. A doctoral degree in nursing; or a graduate degree in nursing and a doctoral degree;
   c. Educational preparation or experience in academic teaching;
   d. Experience in nursing practice and administration; and
   e. A current knowledge of registered nursing practice.

d. Faculty

1. There shall be a minimum of 35% of the total faculty, including all clinical adjunct, part-time, or other faculty, are employed at the institution as full-time faculty.

2. The nursing faculty shall hold a current, active RN license or privilege to practice that is not encumbered and meet requirements in the state where the program is approved.

3. Faculty supervising clinical experiences shall hold a current active RN license or privilege to practice that is not encumbered and meet requirements in the jurisdiction where the clinical practicum is conducted.

4. Qualifications for nursing faculty who teach in a program leading to licensure as an LPN/VN should be academically and experientially qualified with a minimum of a bachelor’s degree in nursing.

5. Qualifications for nursing faculty who teach clinical courses, including didactic or clinical experiences, in a program leading to licensure as an RN should be academically and experientially qualified with a minimum of a graduate degree in nursing.

6. Faculty can demonstrate participation in continuing education.

7. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.

8. Clinical faculty, preceptors and adjunct faculty shall demonstrate current clinical experience related to the area of assigned clinical teaching responsibilities.
9. Clinical preceptors shall have an unencumbered license to practice as a nurse at or above the level for which the student is being prepared, in the jurisdiction where they are precepting students.

10. Simulation faculty are certified.

*Authority: Model Act Article VI Section 2*

### 6.1.3 Determination of Compliance with Standards

Accreditation by a national nursing accrediting body, set forth by the United States Department of Education (USDE), is required, and evidence of compliance with the accreditation standards may be used for evaluating continuing approval.

Nursing programs must submit to the BON copies of accreditation related correspondence with the national nursing accrediting agency within 30 days of receipt.

*Authority: Model Act Article VI Section 3*

### 6.1.4 Purposes of Prelicensure Nursing Education Program Approval

a. To promote public protection through the safe practice of nursing by implementing standards for individuals seeking licensure as RNs and LPN/VNs.

b. To grant legal recognition to nursing education programs that the BON determines have met the standards.

c. To ensure graduates meet the educational and legal requirements for the level of licensure for which they are preparing and to facilitate their endorsement to other states and countries.

d. To provide the public and prospective students with a published list of nursing programs that meets the standards established by the BON.

*Authority: Model Act Article VI Section 4*

### 6.1.5 Establishment of a New Prelicensure Nursing Education Program

Before establishing a new nursing education program, the program shall contact the BON and complete the process outlined below:

a. Phase I – Application to BON. The proposed program shall provide the following information to the BON:

1. Identification of sufficient financial and other resources.

2. Governing institution approval and evidence of financial support that can be provided on an ongoing basis.

3. Evidence of the institution meeting state requirements, and regional or national accreditation by an accredited agency recognized by the USDE.

4. Evidence of the nursing program actively seeking pre-accreditation or candidate accreditation from a USDE recognized national nursing accrediting agency.

5. Clinical opportunities and availability of resources.
6. Evidence of clinical partnerships and availability of resources.

7. Availability of qualified faculty and program director.

8. A proposed timeline for initiating the program.

b. Phase II – Initial Approval for Admission of Students. The proposed program shall provide the BON with verification that the following program components and processes have been completed:
   1. Employment of a qualified director.
   2. A comprehensive program curriculum.
   3. Establishment of student policies for admission, progression, retention, and graduation.
   4. Policy and strategies to address students’ needs including those with learning disabilities and English as a second language; and remediation tactics for students performing below standard.
   5. When the BON determines that all components and processes are completed and in place, the BON shall authorize the program to admit students.

c. Phase III – Full Approval of Program. The BON shall fully approve the program upon:
   1. Completion of BON program survey visit.
   2. Submission of program’s ongoing systematic evaluation plan.
   3. Employment of qualified faculty.
   4. Additional oversight of new programs will take place for the first 6 years of operation. This may include progress reports every 6 months on program leadership, consistency of faculty, numbers of students and trends of NCLEX pass rates, along with the regularly collected annual reports to the BON.

Authority: Model Act Article VI Section 5

6.1.6 Continuing Approval of Prelicensure Nursing Education Programs

a. Every < > years previously approved nursing education programs with full program approval status will be evaluated for continuing approval by the BON.

b. Warning signs that may trigger a focused site visit include:
   1. Complaints from students, faculty and clinical agencies.
   2. Turnover of program administrators, defined by more than 3 administrators in a 5 year period.
   3. Frequent nursing faculty turnover.
   4. Frequent cuts in numbers of nursing faculty.
   5. Decreasing trends in NCLEX pass rates.
c. The BON may accept all or partial evidence prepared by a program, to meet national nursing accreditation requirements. The BON shall review and analyze various sources of information regarding program performance, including, but not limited to:

1. Periodic BON survey visits, as necessary, and/or reports.
2. Evidence of being accredited by a USDE recognized national nursing accredited agency.
3. BON recognized national nursing accreditation visits, reports and other pertinent documents provided by the program.
4. Results of ongoing program evaluation.

d. Continuing approval will be granted upon the BON’s verification that the program is in compliance with the BON’s nursing education administrative rules.

Authority: Model Act Article VI Section 6

6.1.7 Conditional Approval of Prelicensure Nursing Education Programs

a. The BON may grant conditional approval when it determines that a program is not fully meeting approval standards.

b. If the BON determines that an approved nursing education program is not meeting the criteria set forth in these regulations, the nursing program shall be given a reasonable period of time to submit an action plan and to correct the identified program deficiencies.

Authority: Model Act Article VI Section 7

6.1.8. Withdrawal of Approval

a. The BON shall withdraw approval if, after proper notice and opportunity, it determines that:

1. A nursing education program fails to meet the standards of this Rule.
2. A nursing education program fails to correct the identified deficiencies within the time specified.

Authority: Model Act Article VI Section 8

6.1.9 Appeal

A program denied approval or given less than full approval may appeal that decision. All such actions shall be in accordance with due process rights.

Authority: Model Act Article VI Section 9

6.1.10 Reinstatement of Approval

The BON may reinstate approval if the program submits evidence of compliance with nursing education standards within the specified time frame.

Authority: Model Act Article VI Section 10
6.2 Closure of Prelicensure Nursing Education Program and Storage of Records

a. A nursing education program may be closed due to withdrawal of BON approval or may close voluntarily.

b. Provisions shall be made for maintenance of the standards for nursing education during the transition to closure.

c. Arrangements are made for the secure storage and access to academic records and transcripts.

d. An acceptable plan is developed for students to complete a BON approved program.

e. Confirmation shall be provided to the BON, in writing, that the plan has been fully implemented.

Authority: Model Act Article VI Section 11

6.2.1 Prelicensure Nursing Education Program Closed Voluntarily

The program shall submit to the BON:

a. Reason for the closing of the program and date of intended closure.

b. An acceptable plan for students to complete a BON approved program.

c. Arrangements for the secure storage and access to academic records and transcripts.

Authority: Model Act Article VI Section 12

6.3 Innovative Approaches in Prelicensure Nursing Education Programs

A nursing education program may apply to implement an innovative approach by complying with the provisions of this section. Nursing education programs approved to implement innovative approaches shall continue to provide quality nursing education that prepares graduates to practice safely, competently and ethically within the scope of practice as defined in the Act.

Authority: Model Act Article VI Section 13

6.3.1 Purposes

a. To foster innovative models of nursing education to address the changing needs in health care.

b. To assure that innovative approaches are conducted in a manner consistent with the BON's role of protecting the public.

Authority: Model Act Article VI Section 14

6.3.2 Eligibility

a. The nursing education program shall hold full BON approval without conditions.

b. There are no substantiated complaints in the past 2 years.

c. There are no rule violations in the past 2 years.

Authority: Model Act Article VI Section 15
6.3.3 Application
a. A description of the innovation plan, with rationale, shall be provided to the BON at least < > days before the BON meeting.

*Authority: Model Act Article VI Section 16*

6.3.4 Standards for Approval
a. Eligibility criteria in 6.3.2 are met.
b. The innovative approach will not compromise the quality of education or safe practice of students.
c. Resources are sufficient to support the innovative approach.
d. Timeline provides for a sufficient period to implement and evaluate the innovative approach.

*Authority: Model Act Article VI Section 17*

6.3.5 Review of Application and BON Action
a. If the application meets the standards, the BON may:
   1. Approve the application; or
   2. Approve the application with modifications as agreed between the BON and the nursing education program.

b. If the submitted application does not meet the criteria in 6.3.2 and 6.3.4, the BON may deny approval or request additional information.

*Authority: Model Act Article VI Section 18*

6.3.6 Requesting Continuation of the Innovative Approach
a. If the innovative approach has achieved the desired outcomes and the final evaluation has been submitted, the program may request that the innovative approach be continued.
b. Request for the innovative approach to become an ongoing part of the education program must be submitted < > days prior to a regularly scheduled BON meeting.
c. The BON may grant the request to continue approval if the innovative approach has achieved desired outcomes, has not compromised public protection, and is consistent with core nursing education criteria.

*Authority: Model Act Article VI Section 19*

6.4 Simulation
A prelicensure nursing education program (“program”) may use simulation as a substitute for traditional clinical experiences, not to exceed fifty percent (50%) of its clinical hours per course. A program that uses simulation shall adhere to the standards set in this section.

*Authority: Model Act Article VI Section 20*
6.4.1 Evidence of Compliance
A program shall provide evidence to the board of nursing that these standards have been met.

Authority: Model Act Article VI Section 21

6.4.2 Organization and Management
a. The program shall have an organizing framework that provides adequate fiscal, human, and material resources to support the simulation activities.

b. Simulation activities shall be managed by an individual who is academically and experientially qualified. The individual shall demonstrate continued expertise and competence in the use of simulation while managing the program.

c. There shall be a budget that will sustain the simulation activities and training of the faculty.

Authority: Model Act Article VI Section 22

6.4.3 Facilities and Resources
a. The program shall have appropriate facilities for conducting simulation. This shall include educational and technological resources and equipment to meet the intended objectives of the simulation.

Authority: Model Act Article VI Section 23

6.4.4 Faculty Preparation
a. Faculty involved in simulations, both didactic and clinical, shall have training in the use of simulation.

b. Faculty involved in simulations, both didactic and clinical, shall engage in on-going professional development in the use of simulation.

Authority: Model Act Article VI Section 24

6.4.5 Curriculum
a. The program shall demonstrate that the simulation activities are linked to programmatic outcomes.

Authority: Model Act Article VI Section 25

6.4.6 Policies and Procedures
The program shall have written policies and procedures on the following:

a. Short-term and long-term plans for integrating simulation into the curriculum;

b. Method of debriefing each simulated activity; and

c. Plan for orienting faculty to simulation.

Authority: Model Act Article VI Section 26
6.4.7 Evaluation
a. The program shall develop criteria to evaluate the simulation activities.
b. Students shall evaluate the simulation experience on an ongoing basis.
   
   Authority: Model Act Article VI Section 27

6.4.8 Annual Report
a. The program shall include information about its use of simulation in its annual report to the board of nursing.
   
   Authority: Model Act Article VI Section 28

Chapter 7. Discipline and Proceedings

7.1 Grounds for Discipline: behaviors and activities that may result in disciplinary action by the board shall include the following:

a. Failing to meet the initial requirements of a license.

b. Engaging in conduct that violates the security of the licensure or certification examination or the integrity of the examination results, including, but not limited to:
   
   1. Having a license to practice nursing, a multi-state privilege to practice or another professional license or other credential denied for cause, revoked, suspended, or restricted.
   
   2. Disciplined in this or any other state, territory, possession, or country or by a branch of the United States military.
   
   3. Failing to cooperate with a lawful BON investigation.
   
   4. Practicing without an active license.
   
   5. Failing to comply with continuing education or competency requirements.
   
   6. Failing to meet licensing board reporting requirements.
   
   7. Violating or failing to comply with BON order or agreement.
   
   8. Practicing beyond the legal scope of practice.
   
   9. Violating jurisdictional health code.

c. Criminal conviction or adjudication in any jurisdiction for any crime that bears on a licensee’s fitness to practice nursing.

d. Obtaining, accessing, or revealing healthcare information from a client record or other source, except as required by professional duties or authorized by law.

e. Threatening, harassing, abusing, or intimidating a patient.
f. Violating boundaries of a professional relationship such as physical, sexual, emotional, or financial exploitation of a patient’s or a patient’s family member or caregiver. Financial exploitation shall include accepting or soliciting money, gifts, loans, or the equivalent during the professional relationship.

1. Disruptive or abusive conduct in the workplace.
2. Misappropriation of patient property or other property.
3. Directly or indirectly offering, giving, soliciting, or receiving or agreeing to receive any fee or other consideration to or from a third party or exercising influence on the client for the financial or personal gain of the licensee.
4. Aiding,abetting,directing, or assisting an individual to violate or circumvent any law or rule intended to guide the conduct of a licensed nurse or any other licensed healthcare provider.

h. Fraud, deception, or misrepresentation in the practice of nursing.

i. Unsafe practice, substandard care or unprofessional conduct, including, but not limited to:

1. Altering, destroying, or attempting to destroy patient or employer records.
2. Failing to supervise student experiences as a clinical nursing instructor.
3. Failing to act to safeguard the patient from the incompetent, abusive or illegal practice of any individual.
4. Discriminating on the basis of age, marital status, gender, sexual preference, race, religion, diagnosis, socioeconomic status or disability while providing nursing services.
5. Leaving a nursing assignment prior to the proper reporting and notification to the appropriate department head or personnel of such an action.
8. Demonstrating an actual or potential inability to practice nursing with reasonable skill and safety to patients by reason of illness, use of alcohol, drugs, chemicals, or any other material or as a result of any mental or physical illnesses or conditions.
9. Causing an immediate threat to the health or safety of a patient or the public.
10. Delivering substandard or inadequate care.

j. Improper supervision or allowing unlicensed practice, including, but not limited to:

1. Delegating a nursing function or a prescribed health function when the delegation could reasonably be expected to result in unsafe or ineffective patient care.
2. Failing to supervise the performance of acts by any individual working at the nurse’s delegation or assignment.

3. Failing to follow appropriate and recognized standards and guidelines in providing administrative oversight of the nursing organization and nursing services of a health care delivery system or program.

4. Knowingly aiding, abetting assisting, advising or allowing an unlicensed person to engage in the unlawful practice of registered or practical nursing or in violating or circumventing a law or BON regulation or rule.

k. Drug related offenses, including, but not limited to:

1. Illegally obtaining, possessing, or distributing drugs for personal or other use or other violations of state or federal drug laws.

2. Unauthorized prescribing, dispensing, or administrating medication.

Authority: Model Act Article VII Section 1

7.2 Notification

a. The BON shall provide information as required by federal law to federal databanks, to a nationally recognized centralized licensing and discipline databank and may develop procedures for communicating with others in BON policy.

b. All nurse participants or nurse licensure applicants in alternative programs may be reported to a non-public national database that gives access to all states.

Authority: Model Act Article IV Section 5

Chapter 8. APRN

8.1 Standards

a. The APRN shall comply with the standards for RNs as specified in Chapter 3 and to the standards set forth by the BON. Standards for a specific role and population focus of APRN supersede standards for RNs where conflict between the standards, if any, exists.

b. APRNs shall practice within standards established by the BON in rule and assure patient care is provided according to relevant patient care standards recognized by the BON, and other national standards of care.

Authority: Model Act Article X Section 1
8.2 Licensure

8.2.1 Application for Initial Licensure

a. An applicant for licensure as an APRN in this state shall submit to the BON the required fee as specified in Chapter 4, verification of licensure or eligibility for licensure as an RN in this jurisdiction and a completed application that provides the following information:

1. Graduation from an APRN graduate or post-graduate program as evidenced by official documentation received directly from an APRN program accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or the Council for Higher Education Accreditation (CHEA), or its successor organization, as acceptable by the BON.

2. This documentation shall verify the date of graduation; credential conferred; completion of three separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education in this state.

b. Report any criminal conviction, nolo contendere plea, Alford plea, or other plea arrangement in lieu of conviction.

c. Requirements for Certification Programs:

1. Certification programs are accredited by a national accreditation body as acceptable by the BON.

Authority: Model Act Article X Section 2

8.2.2 Application of an Internationally Educated APRN

An internationally educated applicant for licensure as an APRN in this state shall:

a. Graduate from a graduate or post-graduate level APRN program equivalent to an APRN educational program in the U.S. accepted by the BON.

b. Submit documentation through a BON approved qualified credentials evaluation process for the license being sought.

c. Has, if a graduate of a foreign prelicensure education program not taught in English or if English is not the individual’s native language, successfully passed an English proficiency examination that includes the components of reading, speaking, writing, and listening;

d. Met all other licensure criteria required of applicants educated in the U.S.

Authority: Model Act Article V Section 5
8.2.3 Application for Licensure by Endorsement

a. An applicant for licensure by endorsement as an APRN in this state shall submit to the BON the required fee as specified in Chapter 4, verification of eligibility for a license or privilege to practice as an RN in this jurisdiction and a completed APRN application that provides the following information:

1. Graduation from a graduate or post-graduate level APRN program, as evidenced by an official transcript or other official documentation received directly from a graduate program accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or CHEA, or its successor organization, as acceptable by the BON.

2. This documentation shall verify the date of graduation; credential conferred; number of clinical hours completed; completion of three separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education in this state.

b. Not have an encumbered license or privilege to practice in any state or territory.

c. Report any conviction, nolo contendere plea, Alford plea, or other plea arrangement in lieu of conviction.

d. Report status of all nursing licenses, including any BON actions taken or any current or pending investigations.

e. Current certification by a national certifying body in the APRN role and population focus appropriate to educational preparation.

   1. Primary source of verification of certification is required.

f. Requirements of 5.3.d.-i. shall apply to APRNs.

   Authority: Model Act Article X Section 2

8.2.4 Application for License Renewal

An applicant for license renewal as an APRN shall submit to the BON the required fee for license renewal, as specified in Chapter 4, and a completed license renewal application including:

a. Detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant’s background.

b. Evidence of current certification(s), or recertification as applicable, by a national professional certification organization that meets the requirements of 8.2.1.

c. Submit a renewal application as directed by the BON and remit the required fee as set forth in rule.

   Authority: Model Act Article X Section 2
8.2.5 Quality Assurance/Documentation and Audit

The BON may conduct a random audit of nurses to verify current APRN certification and/or continuing education. Upon request of the BON, licensees shall submit documentation of compliance.

Authority: Model Act Article V Section 5

8.2.6 Reinstatement of License

The reinstatement of APRN licensure is the same as previously stated for RNs and LPN/VNs in Chapter 5 plus the following:

a. An individual who applies for licensure reinstatement and who has been out of practice for more than five years shall provide evidence of successfully completing < > hours of a reorientation in the appropriate advanced practice role and population focus, which includes a supervised clinical component by a qualified preceptor.

b. Preceptor must the following requirements:
   1. Holds an active license or privilege to practice as an APRN or physician that is not encumbered and practices in a comparable practice focus.
   2. Functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting.

c. For those licensees applying for licensure reinstatement following disciplinary action, compliance with all BON licensure requirements, as well as any specified requirements set forth in the BON's discipline order, is required.

Authority: Model Act Article X Section 2

8.3 Titles and Abbreviations

a. Individuals are licensed or granted privilege to practice as APRNs in the roles of certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), clinical nurse specialist (CNS) and certified nurse practitioner (CNP) and in the population focus of family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/ gender-related or psychiatric/mental health.

b. Each APRN shall use the designation “APRN” plus role title as a minimum for purposes of identification and documentation.

c. When providing nursing care, the APRN shall provide clear identification that indicates his or her APRN designation.

Authority: Model Act Article X Section 3
8.4 APRN Education

8.4.1 Required Criteria for APRN Education Programs

The BON shall determine whether an APRN education program meets the qualifications for the establishment of a program based upon the following standards:

a. An APRN program shall appoint the following personnel:

1. An APRN program administrator whose qualifications shall include:
   a. A current, active RN or APRN license or privilege to practice that is not encumbered in the state where the program is approved and/or accredited;
   b. A doctoral degree in a health-related field;

2. A lead faculty member who is educated and nationally certified in the same role and population foci and licensed as an APRN shall coordinate the educational component, including curriculum development, for the role and population foci in the APRN program.

3. Nursing faculty to teach any APRN nursing course that includes a clinical learning experience shall meet the following qualifications:
   a. A current, active APRN license or privilege to practice that is not encumbered in the state where the program is approved and/or accredited;
   b. A minimum of a master’s degree in nursing or health related field in the clinical specialty;
   c. Current knowledge, competence, and certification as an APRN in the role and population foci consistent with teaching responsibilities.

4. Adjunct clinical faculty employed solely to supervise clinical nursing experiences of students shall meet all the faculty qualifications for the program level they are teaching.

5. Interdisciplinary faculty who teach non-clinical nursing courses shall have advanced preparation appropriate to these areas of content.

6. Clinical preceptors shall have demonstrated competencies related to the area of assigned clinical teaching responsibilities.

7. Clinical preceptors will be approved by faculty and meet the following requirements:
   a. Hold an active license or privilege to practice that is not encumbered as an APRN or physician and practices in a comparable practice focus; and
   b. Evaluate the individual’s performance in the clinical setting.
b. The curriculum of the APRN nursing education program must prepare the graduate to practice in one of the four identified APRN roles, i.e., CRNA, CNM, CNS and CNP, and at least one of the six population foci, i.e., family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/gender-related or psychiatric/mental health. The curriculum shall include:

1. Three separate graduate level courses (the APRN core) in:
   a. Advanced physiology and pathophysiology, including general principles that apply across the lifespan.
   b. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and
   c. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.

2. Diagnosis and management of diseases across practice settings including diseases representative of all systems.

3. Preparation that provides a basic understanding of the principles for decision making in the identified role.

4. Preparation in the core competencies for the identified APRN role.

5. Role preparation in one of the six population foci of practice.

c. Additional required components of graduate or post-graduate education programs preparing APRNs shall include the following:

1. Each student enrolled in an APRN program shall have an RN license or privilege to practice that is not encumbered in the state of clinical practice, unless exempted from this licensure requirement under Article 5 section 10.

2. Education programs offered by an accredited college or university that offers a graduate degree with a concentration in the advanced nursing practice role and at least one population focus, or post-masters certificate programs offered by an accredited college or university shall include the following components:
   a. Clinical supervision congruent with current national professional organizations and nursing accrediting body standards applicable to the APRN role and population focus.
   b. Curriculum that is congruent with national standards for graduate level and advanced practice nursing education, is consistent with nationally recognized APRN roles and population foci, and includes, but is not limited to:
      i. Graduate APRN program core courses; and
      ii. An advanced practice nursing core, including legal, ethical, and professional responsibilities of the APRN.

3. The curriculum shall be consistent with competencies of the specific areas of practice.
4. APRN programs preparing for two population foci or combined nurse practitioner/clinical nurse specialist shall include content and clinical experience in both functional roles and population foci.

5. Each instructional track/major shall have a minimum of 500 supervised clinical hours as defined by the BON. The supervised experience is directly related to the role and population foci, including pharmacotherapeutic management of patients.

6. There shall be provisions for the recognition of prior learning and advanced placements in the curriculum for individuals who hold a master’s in nursing and are seeking preparation in a different role and population focus. Post-masters nursing students shall complete the requirements of the master’s APRN program through a formal graduate level certificate in the desired role and population focus. Post-master students must meet the same APRN outcome competencies as the master level students.

Authority: Model Act Article XI Section 4

8.4.2 Models for Determining Compliance with Standards

The models for determining compliance with APRN education standards are the same as previously stated for RN and LPN/VN programs in Chapter 6.

Authority: Model Act Article X Section 5

8.4.3 Establishment of a New APRN Education Program

Before establishing a new nursing education program, the APRN program shall complete the process outlined below:

a. Application to the professional accrediting body.

b. The proposed program shall provide the following information to the BON:

1. Results of a needs assessment, including identification of potential students and employment opportunities for program graduates.

2. Identification of sufficient financial and other resources.

3. Governing institution approval and support.

4. Type of educational program proposed.

5. Clinical opportunities and availability of resources.

6. Availability of qualified faculty.

7. A pool of available students.

8. A proposed timeline for initiating and expanding the program.

Authority: Model Act Article X Section 5
8.5 Prescriptive Authority

8.6 Discipline of Prescriptive Authority

a. APRN discipline and proceedings is the same as previously stated for RN and LPN/VN in Chapter 7.

b. The BON may limit, restrict, deny, suspend or revoke APRN licensure, or prescriptive or dispensing authority.

c. Additional grounds for discipline related to prescriptive or dispensing authority include, but are not limited to:

1. Prescribing, dispensing, administering, or distributing drugs in an unsafe manner or without adequate instructions to patients according to acceptable and prevailing standards.

2. Selling, purchasing, trading, or offering to sell, purchase or trade drug samples.

3. Prescribing, dispensing, administering, or distributing drugs for other than therapeutic or prophylactic purposes. or

4. Prescribing or distributing drugs to individuals who are not patients of the APRN or who are not within that nurse’s role and population focus.

Authority: Model Act Article X Section 1