



NCSBN
Leading Regulatory Excellence

NCSBN Model Act

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Mission Statement

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Article I. Title and Purpose

- a. This Act shall be known and may be cited as <the JURISDICTION> Nurse Practice Act (NPA), which creates and empowers the board of nursing (BON) to regulate nursing and to enforce the provisions of this Act.
- b. The purpose of this Act is to protect the health, safety, and welfare of the public.

Article II. Definitions

As used in Articles III through XI of this Act, unless the context thereof requires otherwise:

- a. “Advanced assessment” means the taking by an advanced practice registered nurse (APRN) of the history, physical and psychological assessment of a patient’s signs, symptoms, pathophysiologic status, and psychosocial variations in the determination of differential diagnoses and treatment.
- b. “Advanced practice registered nurse” (“APRN”) means an individual with knowledge and skills acquired in basic nursing education; licensure as a registered nurse (“RN”); and graduation from or completion of a graduate-level APRN program accredited by a national accrediting body and current certification by a national certifying body in the appropriate APRN role and at least 1 population focus. “Advanced practice registered nurse” includes certified nurse practitioners, certified registered nurse anesthetists, certified nurse midwives, or clinical nurse specialists. Advanced practice nursing means an expanded scope of nursing in a role and population focus approved by the Board of Nursing, with or without compensation or personal profit, and includes the RN scope of practice. The scope of an APRN includes performing acts of advanced assessment, diagnosing, prescribing, and ordering.
- c. “Clinical learning experiences” means the planned, faculty-guided learning experiences that involve direct contact with patients.
- d. “Competence” means the ability of the nurse to integrate knowledge, skills, judgment, and personal attributes to practice safely and ethically in a designated role and setting in accordance with the scope of nursing practice.
- e. “Delegated responsibility” means a nursing activity, skill, or procedure that is transferred from a licensed nurse to a delegatee.
- f. “Delegatee” means one who is delegated a nursing responsibility by either an APRN, RN, or LPN/VN (where state NPA allows), is competent to perform it, and verbally accepts the responsibility. A delegatee may be an RN, LPN/VN, or nursing assistive personnel.
- g. “Delegating” means transferring to a competent individual the authority to perform a selected nursing task in a selected situation.
- h. “Delegator” means one who delegates a nursing responsibility. A delegator may be an APRN, RN, or LPN/VN (where state NPA allows).
- i. “Eligible for graduation” means having met all program and institutional requirements pending conferment of the degree.
- j. “Encumbered” means a license with current discipline, conditions, or restrictions.

- k. “Inactive license” means the voluntary termination of an individual’s license to practice nursing or failure to renew a license.
- l. “Internationally educated applicants” means a person educated outside the U.S. who applies for licensure or seeks temporary authorization to practice.
- m. “License” means the legal authority granted by the BON to practice as a registered nurse, licensed practical/vocational nurse, certified nurse midwife, certified nurse practitioner, certified registered nurse anesthetist, or clinical nurse specialist.
- n. “Licensed Nurse” means APRNs, RNs and LPN/VNs.
- o. “Nursing” means a profession focused on the care of individuals, families, and populations to attain, maintain, or recover optimal health and quality of life from conception to death.
- p. “Nursing assessment” means, within the scope of the licensee, the collection, analysis, and synthesis of data used to establish a health status baseline, plan care, and address changes in a patient’s condition.
- q. “Nursing assistive personnel” means any personnel trained to function in a supportive role, regardless of title, to whom a nursing responsibility may be delegated. This includes but is not limited to CNAs, patient care technicians, CMAs, certified medication aides, and home health aides.
- r. “Patient” means a recipient of care; may be an individual, family, group, or community. May also be referred to as client.
- s. “Patient-centered health care plan” means, in active collaboration with the patient, incorporating the patient’s values, beliefs and preferences, the identification of desired goals, strategies for meeting goals and processes for promoting, attaining, and maintaining optimal patient health outcomes.
- t. “Practical/ Vocational nursing” as a licensed practical/vocational nurse means the performance with or without compensation of acts involving the care of the ill, injured, or infirm or the delegation of certain nursing practices to other personnel as set forth in regulations established by the Board under the direction of a registered professional nurse, an advanced practice registered nurse, a licensed physician, a licensed dentist, or other appropriate healthcare provider which acts do not require the substantial specialized skill, judgment and knowledge required in professional nursing.
- u. “Professional nursing” as a registered nurse means the performance of professional nursing services with or without compensation by a person who holds a valid license pursuant to the terms of this act, and who bears primary responsibility and accountability for nursing practices based on specialized knowledge, judgment, and skill derived from the principles of biological, physical, and behavioral sciences.
- v. “Reactivation” means reissuance of a license that has lapsed, expired, or been placed on inactive status in absence of disciplinary action.
- w. “Reinstatement” means reissuance of a license following disciplinary action by the BON.
- x. “Reissuance” means restoring a license (or authorization to practice) following non-disciplinary licensure action.

- y. “Supervision” means provision of guidance or oversight by a qualified nurse for the accomplishment of a nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing the task or activity.

Article III. Scope of RN, LPN/VN and APRN Practice

Section 1. Licensed Practical/Vocational Nurse (LPN/VN)

- a. Licensed Practical/Vocational Nurse is the title given to an individual licensed to practice practical/vocational nursing.
- b. A person may not practice or offer to practice practical/ vocational nursing in this state unless the person is licensed as provided by this chapter.
- c. The practice of licensed practical/vocational nurses shall include the following guided by nursing standards established or recognized by the BON:
 - 1. Collecting data and conducting nursing assessments of the health status of patients.
 - 2. Participating with other health care providers and contributing in the development, modification and implementation of the patient centered health care plan.
 - 3. Implementing nursing interventions within a patient centered health care plan.
 - 4. Assisting in the evaluation of responses to interventions.
 - 5. Providing for the maintenance of safe and effective nursing care rendered directly or indirectly.
 - 6. Advocating the best interest of patients.
 - 7. Communicating and collaborating with patients and members of the health care team.
 - 8. Providing health care information to patients.
 - 9. Delegating nursing interventions to implement the plan of care while maintaining accountability of the outcome.
 - 10. Assigning nursing interventions to implement the plan of care.
 - 11. Wearing identification which clearly identifies the nurse as an LPN/VN when providing direct patient care, unless wearing identification creates a safety or health risk for either the nurse or the patient.
 - 12. Other acts that require education and training consistent with professional standards as prescribed by the BON and commensurate with the LPN/VN’s education, demonstrated competencies and experience.

Section 2. Registered Nurse (RN)

- a. Registered Nurse is the title given to an individual licensed to practice registered nursing.
- b. A person may not practice or offer to practice as a registered nurse in this state unless the person is licensed as provided by this chapter.
- c. The practice of registered nurses shall include the following guided by nursing standards established or recognized by the BON:
 1. Providing nursing assessment of the health status of patients.
 2. Collaborating with health care team to develop and coordinate an integrated patient centered health care plan.
 3. Developing the comprehensive patient centered health care plan, including:
 - a. Applying knowledge based on the biological, psychological, and social aspects of the patient's condition.
 - b. Participates in and establishes patient diagnoses;
 - c. Setting goals to meet identified health care needs; and
 - d. Prescribing nursing interventions.
 4. Implementing nursing care through the execution of independent nursing strategies, and the provision of regimens requested, ordered or prescribed by authorized health care providers.
 5. Evaluating responses to interventions and the effectiveness of the plan of care.
 6. Provides education by:
 - a. Designing and implementing teaching plans based on patient needs or patient populations.
 - b. Teaching the theory and practice of nursing.
 - c. Educating others as appropriate.
 7. Delegating nursing interventions to implement the plan of care while maintaining accountability of the outcome.
 8. Delegates to another only those nursing measures for which that delegatee has the necessary skills and competence to accomplish safely
 9. Assigning nursing interventions to implement the plan of care.
 10. Providing for the maintenance of safe and effective nursing care rendered directly or indirectly.
 11. Advocating the best interest of patients.
 12. Communicating, consulting, and collaborating with other health care team members and others in the management of health care and the implementation of the total health care regimen within and across care settings.
 13. Managing, supervising and evaluating the practice of nursing.

14. Teaching the theory and practice of nursing.
15. Participating in development of health care policies, procedures and systems.
16. Wearing identification that clearly identifies the nurse as an RN when providing direct patient care, unless wearing identification creates a safety or health risk for either the nurse or the patient.
17. Other acts that require education and training consistent with professional standards as prescribed by the BON and commensurate with the RN's education, demonstrated competencies and experience.

Section 3. APRN Title and Scope of Practice

a. Title

1. Advanced Practice Registered Nurse (APRN) is the title given to an individual licensed to practice advanced practice registered nursing within one of the following roles: certified nurse practitioner (CNP), certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM) or clinical nurse specialist (CNS).

b. Population focus shall include:

1. Family/individual across the lifespan.
2. Adult-gerontology.
3. Neonatal.
4. Pediatrics.
5. Women's health/gender-related.
6. Psychiatric/mental health.

c. In addition to the RN scope of practice and within the APRN academic education and national certification, role and population focus, APRN practice shall include:

1. Conducting an advanced assessment.
2. Ordering and interpreting diagnostic procedures.
3. Establishing a diagnosis.
4. Prescribing, ordering, administering, and dispensing therapeutic measures and, pharmacological agents including over-the-counter, legend, and controlled substances.
5. Delegating and assigning therapeutic measures to assistive personnel.
6. Consulting with other disciplines and providing referrals to health care agencies, health care providers and community resources.
7. Other acts that require education and training consistent with professional standards and commensurate with the APRN's education, certification, demonstrated competencies and experience.

- d. Prescribing, Ordering, Dispensing and Furnishing Authority
 - 1. The BON shall grant prescribing, ordering, dispensing and furnishing authority through the APRN license.
 - 2. Prescribing, ordering, dispensing and furnishing shall include the authority to:
 - a. Diagnose, prescribe and institute therapy or referrals of patients to health care agencies, health care providers and community resources.
 - b. Prescribe, procure, administer, dispense and furnish pharmacological agents, including over the counter, legend and controlled substances.
 - c. Plan and initiate a therapeutic regimen that includes ordering and prescribing non-pharmacological interventions, including, but not limited to, durable medical equipment, medical devices, nutrition, blood and blood products, and diagnostic and supportive services including, but not limited to, home health care, hospice, and physical and occupational therapy.

Article IV. Board of Nursing (BON)

Section 1. Membership

- a. The BON shall consist of < > members to be appointed by the <applicable authority>.
- b. The membership of the BON shall be < > RNs, < > LPN/VNs, < > APRNs, and < > public members.
- c. Each RN member shall be a resident in this jurisdiction, hold an active unencumbered license under the provisions of this chapter, be currently engaged in RN practice and have no less than five years of experience as an RN, at least three of which immediately preceded appointment.
- d. Each LPN/VN member shall be a resident in this jurisdiction, hold an active unencumbered license under the provisions of this chapter, be currently engaged in LPN/VN practice and have no less than five years of experience as an LPN/VN, at least three of which immediately preceded appointment.
- e. Each APRN member shall be a resident in this jurisdiction, hold an active unencumbered license under the provisions of this chapter, be currently engaged in APRN practice and have no less than five years of experience as an APRN, at least three of which immediately preceded appointment.
- f. The public member(s) of the BON shall be a resident of this jurisdiction and shall not be, nor shall ever have been, a person who has ever had any material financial interest in the provision of health care services or who has engaged in any activity directly related to health care services.
- g. Members of the BON shall be appointed for a term of < > years. Terms shall be staggered. Appointment of a person to an unexpired term is not considered a full term for this purpose. Each member may serve until a qualified successor has been appointed. At the expiration of a term, or if a vacancy occurs, the <appointing authority> shall appoint a new board member. The appointee's term expires on < > in the <> year of appointment.
- h. No member shall serve more than <> consecutive full terms or <> consecutive years.

Section 2. Officers

- a. The BON shall elect officers who shall serve a term of < > years, beginning < > and ending < >.
- b. The <first officer> shall preside at board meetings and shall be responsible for the performance of all duties and functions of the BON required or permitted by this Act. In the absence of the first officer, the <second officer> shall assume these duties.
- c. Additional offices may be established and filled by the BON at its discretion.

Section 3. Meetings

- a. The BON shall meet at least <> for the purpose of transacting business in person or electronically. A majority of the members of the BON constitutes a quorum; however, if there is a vacancy on the BON, a majority of the members serving constitutes a quorum. A BON member is required to attend meetings or to provide proper notice and justification of inability to do so. Unexcused absences from meetings may result in removal from the BON.
- b. Additional meetings may be called by the <first officer> of the BON or at the request of <> of the board members.
- c. The Board may adopt rules with respect to calling, holding, and conducting regular and special meetings and attendance at meetings. Notice of all board meetings shall be given in the manner and pursuant to requirements prescribed by the jurisdiction's applicable statutes and rules and regulations.

Section 4. Vacancies, Removal, and Immunity

- a. Any vacancy that occurs for any reason in the membership of the BON shall be filled by the <applicable authority> in the manner prescribed in the provisions of this article regarding appointments. A person appointed to fill a vacancy shall serve for the unexpired portion of the term.
- b. The <applicable authority> may remove any member from the BON for neglect of any duty required by law, for incompetence, for unprofessional or dishonorable conduct or any other reason pursuant to jurisdictional law.
- c. All members of the BON shall have immunity from individual civil liability while acting within the scope of the duties as board members pursuant to jurisdictional law.

Section 5. Powers and Duties

The BON shall be responsible for the interpretation and enforcement of the provisions of this Act. The BON shall have all of the duties, powers and authority specifically granted by and necessary to the enforcement of this Act, as well as other duties, powers and authority as it may be granted by appropriate statute, including:

- a. Make, adopt, amend, repeal, and enforce such administrative rules consistent with the law, as it deems necessary for the proper administration of this Act and to protect public health, safety and welfare.
- b. Develop and enforce standards and processes for nursing education programs.

- c. Provide consultation, conduct conferences, forums, studies and research on nursing education and practice.
- d. Provide consultation or guidance regarding the interpretation and application of the jurisdiction's nursing law and regulation.
- e. Participate or hold membership in national organizations that promote the provisions of this chapter.
- f. Grant temporary permits for qualified applicants as set forth in rule.
- g. License qualified applicants for RN, LPN/VN and APRN licensure and regulate their practice.
- h. Develop standards for maintaining competence of licensees and requirements for returning to practice.
- i. Implement the discipline process, in person or virtually, in accordance with jurisdictional law.
- j. Issue subpoenas in connection with investigations, inspections and hearings either in person or electronically.
- k. Develop and enforce standards for nursing practice.
- l. Discipline a license or certification issued under this act for violation of any provision of this Act.
- m. Maintain a record of all persons regulated by the BON.
- n. Regulate the practice of nursing, which occurs in the jurisdiction where the patient is located at the time.
- o. Collect, analyze, and share data regarding nursing education, nursing practice and nursing resources. Data may be collected with license applications.
- p. Appoint and employ a qualified individual to serve as executive officer.
- q. Adopt a seal that shall be in the care of the executive officer and shall be affixed only in a manner as prescribed by the BON.
- r. Share current significant investigative information with other regulatory bodies and law enforcement entities.
- s. Conduct criminal background checks for applicants regulated under this act.
- t. In the event of a declared state of emergency in this state, the Board may waive the requirements of this Article to allow emergency health services to the public.

Section 6. Financial

- a. The BON is authorized to establish by rule appropriate fees for licensure by examination, reexamination, endorsement, reinstatement, reactivation and such other fees and fines as the BON determines necessary.

- b. All fees collected by the BON shall be administered according to the established fiscal policies of this jurisdiction and in such manner as to adequately implement the provisions of this Act.
- c. The BON may accept grants, contributions, devices, bequests, and gifts that shall be kept in a separate fund and shall be used by the BON to enhance the practice of nursing.
- d. The BON may receive and expend funds in addition to appropriations from this jurisdiction, provided such funds are received and expended for the pursuit of the authorized objectives of the BON, such funds are maintained in a separate account, and periodic reports of the receipt and expenditures of such funds are submitted to the <applicable authority>.
- e. All fees collected by the BON shall be retained by the BON. The monies retained shall be used for any of the BON's duties, including but not limited to, the addition of full-time equivalent positions for program services and investigations. Monies retained by the BON pursuant to this section are not subject to reversion to the general fund of the jurisdiction.

Section 7. Executive Officer

- a. The executive officer shall be responsible for:
 - 1. The performance of administrative responsibilities of the BON.
 - 2. Employment of personnel needed to carry out the functions of the BON.
 - 3. The performance of any other duties as necessary to the proper conduct of BON business and to the fulfillment of the BON's responsibilities as defined by this Act.

Article V. RN, LPN/VN and APRN Licensure and Exemptions

Section 1. Titles and Abbreviations for Licensed Nurses

Only those persons who hold a license or privilege to practice nursing in this state shall have the right to use the following title abbreviations:

- a. Title: "Registered Nurse" and the abbreviation "RN."
- b. Title: "Licensed Practical/Vocational Nurse" and the abbreviation "LPN/VN."
- c. Only those persons who hold a license or privilege to practice advanced practice registered nursing in this state shall have the right to use the title "advanced practice registered nurse" and the roles of "certified registered nurse anesthetist," "certified nurse-midwife," "clinical nurse specialist" and "certified nurse practitioner;" and the abbreviations "APRN," "CRNA," "CNM," "CNS" and "CNP," respectively.
- d. The abbreviation for the APRN designation of a certified registered nurse anesthetist, a certified nurse-midwife, a clinical nurse specialist and for a certified nurse practitioner will be APRN, plus the role title, i.e., CRNA, CNM, CNS and CNP.

- e. It shall be unlawful for any person to use the title “APRN” or “APRN” plus their respective role titles, the role title alone, authorized abbreviations or any other title that would lead a person to believe the individual is an APRN, unless permitted by this Act.

Section 2. Examinations

- a. The BON shall authorize a national examination for applicants for licensure as RNs or LPN/VNs.
- b. The BON may employ, contract and cooperate with any entity in the preparation of a national examination and process for determining results of a licensure examination. When such an examination is utilized, the BON shall restrict access to questions and answers.
- c. The Board shall give an examination, at the time and place it determines, to applicants for licensure to practice as a registered nurse or licensed practical nurse. The Board shall adopt rules governing qualifications of applicants, the conduct of applicants during the examination, and the conduct of the examination. The applicants shall be required to pass the examination as defined by the board.

Section 3. Licensure by Examination

- a. An applicant for licensure by examination to practice as an RN or LPN/VN must successfully meet the applicable requirements, as determined by the BON by rule.
- b. The Board shall provide for an examination for licensure to practice as a registered nurse or licensed practical nurse. The applicants shall be required to pass the examination as defined by the board. The Board shall adopt rules which identify the criteria which must be met by an applicant in order to be issued a license. When the Board determines that an applicant has met those criteria, passed the required examination, submitted the required fee, and has demonstrated to the Board’s satisfaction that he or she is mentally and physically competent to practice nursing, the Board may issue a license to the applicant.
- c. For internationally educated applicants, in addition to any requirements in rule, successful passage of an English proficiency exam that includes the components of reading, speaking, writing, and listening, except for applicants from countries where English is the native language, and the nursing program where the applicant attended was taught in English, used English textbooks and clinical experiences were conducted in English.
- d. Graduates from an RN prelicensure program may take the LPN/VN licensure examination if they have completed a BON approved LPN/VN role delineation course. The BON shall by rule set standards for approval of the role delineation course.
- e. The BON shall promulgate rules to carry out the purposes of this section.

Section 4. Licensure by Endorsement

The Board may, without examination, issue a license to an applicant who is duly licensed as a registered nurse or licensed practical nurse under the laws of another state, territory of the United States, the District of Columbia, or international country, as determined by criteria developed by the BON in rules.

- a. An applicant for licensure by endorsement to practice as an RN or LPN/VN shall:
 - 1. Submit a completed application and fees as established by the BON.
 - 2. Meet other criteria established by the BON in rule.
- b. Temporary Permits for licensure by endorsement
 - 1. The BON may issue time-limited authorization to practice nursing through the granting of temporary permits, as set forth in BON rules.
 - 2. Any person who has been approved as an applicant for licensure by endorsement and has been granted a temporary permit shall have the right to use the titles < > and abbreviations < > designated by the state. The BON shall promulgate rules to carry out the purposes of this section.

Section 5. APRN Licensure

- a. An applicant for initial licensure to practice as an APRN shall meet the requirements established by the BON in rules.
- b. The BON may issue a license by endorsement to an APRN licensed under the laws of another state if, in the opinion of the BON, the applicant meets the qualifications for licensure in this jurisdiction.
- c. The BON may issue an initial license or license by endorsement to an applicant from an international APRN education program if the applicant meets the requirements set forth in rules.
- d. APRN licenses issued under this Act shall be renewed at least every < > years according to a schedule established by the BON. An applicant for APRN license renewal shall:
 - 1. Maintain national certification in the appropriate APRN role and at least one population focus, authorized by licensure, through an ongoing certification maintenance program of a nationally recognized certifying body recognized by the BON.
 - 2. Meet other requirements set forth in rule.
 - 3. The BON may reactivate or reinstate an APRN license as set forth in BON rules.
 - 4. The duties of licensees are the same as previously stated in Article V Section 9 for RNs and LPN/VNs.

Section 6. Renewal of RN and LPN/VN Licenses

- a. RN and LPN/VN licenses issued under this Act shall be renewed every < > years according to a schedule established by the BON.
- b. An applicant for renewal of license to practice as an RN or LPN/VN shall: meet the requirements to renew licensure as an RN or LPN/VN, whichever is applicable.
- c. A renewal license shall be issued to an RN or LPN/VN who submits an application, remits the required fee and satisfactorily completes any other requirements established by the BON as set forth in rules.

- d. Failure to renew the license shall result in forfeiture of the right to practice nursing in this jurisdiction.
- e. In the event of a declared state of emergency in this state, the board may delay licensure renewal dates for any licensees in the state.
- f. The BON shall promulgate rules to carry out the purposes of this section.

Section 7. Reactivation of License

- a. Applicants for RN or LPN/VN licensure reactivation shall meet the requirements for reactivation of licensure as an RN or LPN/VN, whichever is applicable.
- b. The BON shall promulgate rules to carry out the purposes of this section.

Section 8. Reinstatement of License

- a. Applicants for RN or LPN/VN licensure reinstatement shall meet the requirements for reinstatement of licensure as an RN or LPN/VN, whichever is applicable.
- b. The BON shall promulgate rules to carry out the purposes of this section.

Section 9. Duty to Report

- a. A nurse shall report to the BON, in a timely manner, a felony arrest or indictment, and any conviction or finding of guilt, or entering into and agreed disposition of a felony offense under applicable state or federal criminal law. The nurse shall also report to the BON, in a timely manner, any arrest or indictment for the possession, use, or sale of any controlled substance or driving while impaired.

Section 10. Criminal Background Checks

Each applicant for licensure as an APRN, CNP, CNM, CRNA, CNS, RN, LPN and <any other licensee/ registree under this act> shall submit a full set of fingerprints to the BON for the purpose of obtaining a state and federal criminal records check pursuant to <state statute> and Public Law 92-544. The <state agency or appropriate entity responsible for managing fingerprint data> may exchange this fingerprint data with the Federal Bureau of Investigation (FBI).

Except as provided in paragraph (c), criminal convictions may be reviewed by the BON on a case-by-case basis to determine eligibility for licensure.

- a. If an applicant's criminal history record check reveals a conviction. The Board shall consider all of the following factors regarding the conviction:
 - 1. The level of seriousness of the crime.
 - 2. The date of the crime.
 - 3. The age of the applicant at the time of the conviction.
 - 4. The circumstances surrounding the commission of the crime, if known.

5. The nexus between the criminal conduct of the applicant and the practice of nursing.
 6. The applicant's prison, jail, probation, parole, rehabilitation, and employment records since the date the crime was committed.
 7. The subsequent commission by the person of a crime.
- b. The BON shall determine whether an applicant or licensee is mentally and physically capable of practicing nursing with reasonable skill and safety. The Board may require an applicant or licensee to submit to a mental health examination by a licensed mental health professional designated by the Board and to a physical examination by a physician or other licensed health care professional designated by the Board. The Board may order an applicant or licensee to be examined before or after charges are presented against the applicant or licensee. The results of the mental health examination or physical examination shall be reported directly to the Board and shall be admissible into evidence in a hearing before the Board.
 - c. All individuals convicted of a sexual offense involving a minor or performing a sexual act against the will of another person, including those without the mental capacity to consent, shall be subject to a BON order for evaluation by a qualified expert approved by the BON. If the evaluation identifies sexual behaviors of a predatory nature the BON shall deny licensure.

Section 11. Exemptions

No provisions of this Act shall be construed to prohibit:

- a. The practice of nursing by a student currently enrolled in and actively pursuing completion of an approved prelicensure nursing education program, or a graduate nursing program involving nursing practice, according to criteria established by the board in rules.
- b. The provision of nursing services to family members or in emergency situations.
- c. The individual is engaging in the practice of nursing by discharging official duties while employed by or under contract with the United States government or any agency thereof.
- d. The activities of an individual currently licensed to practice nursing in another jurisdiction, if the individual's license has not been revoked, the individual is not currently under suspension or on probation, and the individual engages in temporary activities as determined by the board, including travel to and within the state, teaching activities, consultation with health care providers located within the state, activities involving program accreditation.
- e. In the event of a declared state of emergency in this state, an individual who retired from licensed practice of practical nursing, registered nursing, or advanced practice registered nursing in this state in the last <> years shall be issued a temporary license to practice for <time period> from the date of issuance. The individual must have retired with an unencumbered license to qualify for a temporary license.

- f. In the event of a declared state of emergency in this state, an individual who voluntarily deactivated their license to practice practical nursing, registered nursing, or advanced practice registered nursing in this state in the last <> years shall be issued a temporary license to practice for <time period> from the date of issuance. The individual must have become inactive with an unencumbered license to qualify for a temporary license.

Article VI. Prelicensure Nursing Education

Section 1. Definition and Purpose of Nursing Education Standards

Nursing education standards are the evidence-based criteria used to monitor the quality of the nursing program. Early intervention, when the standards are not met, will assist the programs to make improvements before warning signs are evident and sanctions are necessary. The purpose of nursing education standards is to ensure that graduates of nursing education programs are prepared for safe and effective nursing practice.

Section 2. Prelicensure Nursing Education Standards

All nursing education programs shall meet these standards:

- a. Administrative Requirements
 1. The program has criteria for admission, progression and student performance.
 2. Written policies and procedures have been vetted by faculty and students and are readily accessible.
 3. The program shall hold students responsible for professional behavior, including honesty and integrity, while in their program of study.
- b. Program Administrator
 1. Of an RN program shall be doctorally prepared and has a degree in nursing.
 2. Of a PN program shall have a graduate degree and a degree in nursing.
 3. Shall hold a current, active RN license or privilege to practice that is not encumbered and meet requirements in the jurisdiction where the program is approved;
 4. Has institutional authority and administrative responsibility over the program.
 5. Shall be responsible for completing the BON's annual report, consisting of aggregate program data as determined by the BON, by their deadline.
- c. Faculty
 1. At a minimum, 35% of the total faculty (including all clinical adjunct, part-time and other faculty) are employed at the institution as full-time faculty.
 2. In RN programs, faculty shall:
 - i. Hold a graduate degree.

- ii. Faculty who teach clinical courses, whether didactic or clinical, 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. In PN programs, faculty shall:
 - i. Hold a BSN degree.
 - ii. Faculty clinical courses 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.
 4. Faculty can demonstrate that they have been educated in basic instruction of teaching and adult learning principles and curriculum development. This may include the following:
 - i. Methods of instruction.
 - ii. Teaching in clinical practice settings.
 - iii. How to conduct assessments, including test item writing.
 - iv. Managing “difficult” students.
 5. Faculty demonstrate participation in continuing education related to nursing education and adult learning pedagogies.
 6. The school provides substantive and periodic workshops and presentations devoted to faculty development.
 7. Formal mentoring of new and part-time faculty takes place by established peers.
 8. Clinical faculty have up-to-date clinical skills and have had recent experience in direct patient care.
 9. Simulation faculty are certified or are planning to be certified within the next 5 years.
- d. Students
1. English as a second language assistance is provided.
 2. Assistance is available for students with learning or other disabilities.
 3. All students have books and resources necessary throughout the program and strategies to help students who can't afford books and resources.
 4. Remediation strategies are in place at the beginning of each course and students are aware of how to seek help. This should include processes to remediate errors and near misses in the clinical setting.
 5. Students shall meet health standards and criminal background requirements.
- e. Curriculum and Clinical Experiences
1. There is a sound foundation in biological, physical, social, and behavioral sciences.
 2. A systematic evaluation of the curriculum is in place.

3. Didactic and clinical content include prevention of illness and the promotion, restoration, and maintenance of health in patients, communities, and populations, across the lifespan and from diverse social, cultural, ethnic and economic backgrounds.
 4. Didactic courses and clinical experiences shall include content in the areas of medical/surgical, obstetric, pediatric, psychiatric/mental health and community health nursing.
 5. Quality and safety are integrated into the curriculum, including clinical judgment, skill in clinical management, supervision, delegating effectively, emergency preparedness, interprofessional communication, time management and navigation and understanding of health care systems.
 6. Practice/academic partnerships are implemented.
 7. Legal and ethical issues and professional responsibilities are integrated into didactic and clinical experiences.
 8. Distance education methods are consistent with the curriculum plan.
 9. 50% or more of clinical experiences in each course is direct care with patients.
 10. A variety of clinical settings are used, and the patient population is diverse.
- f. Teaching and Learning Resources
1. The fiscal, human, physical (including access to a library), clinical and technical learning resources shall be adequate to support program processes, security, and outcomes.
 2. The simulation lab is accredited or with plans to be within 5 years.
 3. Programs shall assess students with learning disabilities and tailor the curriculum to meet their needs.

Section 3. Determination of Compliance with Standards

- a. Accreditation by a national nursing accrediting body, set forth by the USDE, is required, and evidence of compliance with the accreditation standards may be used for evaluating continuing approval.
 1. Nursing programs must submit to the BON copies of accreditation related correspondence with the national nursing accrediting agency within 30 days of receipt.
 2. The BON shall identify the required correspondence that the programs must submit.

Section 4. Purposes of Prelicensure Nursing Education Program Approval

- a. To promote 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.

Section 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. Governing institution approval and ongoing support.
 - 2. Evidence of adequate financial support that can be provided on an ongoing basis.
 - 3. Availability of educational resources, such as human, physical (including access to a library), clinical and technical learning resources.
 - 4. Evidence of the institution meeting state requirements, and regional or national accreditation by an accredited agency recognized by the USDE.
 - 5. Evidence of the nursing program actively seeking pre-accreditation or candidate accreditation from a USDE recognized national nursing accrediting agency.
 - 6. Evidence of adequate numbers of clinical partnerships.
 - 7. Availability of a 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. Policies and strategies to address students' needs including those with learning disabilities and English as an international language; and remediation tactics for students performing below standard and for when clinical errors or near misses occur.
 - 5. Creation of an emergency preparedness plan for addressing situations including but not limited to a reduction in the availability of student clinical sites, a transition from in-person to virtual learning platforms, and a need for increased use of simulation.
- c. Phase III – Full Approval of Program. The BON shall fully approve the program upon:
 - 1. Completion of BON program survey visit.
 - 2. A comprehensive program curriculum.

3. Submission of program's ongoing systematic evaluation plan.
4. Employment of qualified faculty.
5. Additional oversight of new programs will take place for the first 7 years of operation.
 - May include progress reports periodically on program leadership, consistency of faculty, numbers of students and trends of NCLEX pass rates, along with the regularly collected BON annual reports.

Section 6. Continuing Approval of a Prelicensure Nursing Education Program

- 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 might trigger a focused site visit include:
 1. Complaints from students, faculty, and clinical agencies.
 2. Turnover of program administrators, defined by more than 3 in 5 years.
 3. Frequent nursing faculty turnover/cuts in numbers of nursing faculty.
 4. Decreasing trend in NCLEX pass rates, based on the jurisdiction's NCLEX pass rate standard.
- c. The BON shall review and analyze various sources of information regarding program performance, including, but not limited to:
 1. Periodic BON survey visits and/or reports.
 2. Annual report data.
 3. Evidence of being accredited by a USDE recognized national nursing accredited agency.
 4. BON recognized national nursing accreditation visits, reports and other pertinent national nursing accreditation documents provided by the program.
 5. Results of ongoing program systematic 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.

Section 7. Conditional Approval of Prelicensure Nursing Education Program

- 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.

Section 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.

Section 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.

Section 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.

Section 11. 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.

Section 12. 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.

Section 13. Innovative Approaches in Prelicensure Nursing Education Program

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 <jurisdiction's> Act.

Section 14. 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.

Section 15. 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.

Section 16. Application

- a. A description of the innovation plan, with rationale, shall be provided to the BON at least < > days before the BON meeting.

Section 17. Standards for Approval

- a. Eligibility criteria in Section 15 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.

Section 18. 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.

Section 19. Requesting Continuation of the Innovative Approach

- a. If the innovative approach has achieved the desired outcomes, 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.

Section 20. 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.

Section 21. Evidence of Compliance

A program shall provide evidence to the board of nursing that these standards have been met.

Section 22. 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.

Section 23. Facilities and Resources

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.

Section 24. 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.

Section 25. Curriculum

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

Section 26. 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.

Section 27. Evaluation

- a. The program shall develop criteria to evaluate the simulation activities.
- b. Students shall evaluate the simulation experience on an ongoing basis.

Section 28. Annual Report

- a. The program shall include information about its use of simulation in its annual report to the board of nursing.

Section 29. State of Emergency

- a. During a declared state of emergency, the board may authorize approved nursing education programs to implement mitigation efforts to address, including but not limited to, the availability of clinical placement sites, transition to virtual learning from in-person platforms, and changes in use of simulation. The program shall keep records of any mitigation policies or strategies used and shall include the information in the annual report submitted to the board.

Article VII. Discipline and Proceedings

Section 1. Discipline

Grounds for Discipline. The BON may discipline a licensee or deny a license to an applicant for any one or a combination of the following:

- a. Convicted or found guilty, or has entered into an agreed disposition, of a felony offense or misdemeanor offense related to the practice of nursing under applicable state or federal criminal law.
- b. Confidentiality, patient privacy, consent or disclosure violations.
- c. Misconduct or abuse.
- d. Fraud, deception or misrepresentation.
- e. Unsafe practice, substandard care or unprofessional conduct.
- f. Drug or alcohol related offenses.
- g. Revocation, suspension, or denial of, or any other action relating to, the person's license or privilege to practice nursing in another jurisdiction or under federal law.
- h. Other violations of the Act or administrative rules adopted under this act, board orders issued under this act, and any applicable federal or state law.

The Board retains jurisdiction over an expired, inactive, or voluntarily surrendered license. The Board's jurisdiction over the licensee extends for all matters, known or unknown to the Board, at the time of the expiration, inactivation, or surrender of the license.

Section 2. Authority

For any one or combination of the grounds set forth in Section 1 above, the BON is authorized to take the following disciplinary action on a license: deny, revoke, suspend, place on probation, summarily issue an emergency limitation or suspension thereof, reprimand or censure, restitution, or other publicly known conditions and findings, accept voluntary surrenders or limitations and place any other limitations or restrictions as necessary, -or any other action as warranted by the facts of the case in accordance with the state administrative procedure act.

Section 3. Civil Penalties

- a. Impose fine or monetary penalty.
- b. Recover the costs of the proceedings resulting in disciplinary action against a nursing license. The cost of proceedings shall include, but is not limited to: the cost paid by the BON to the office of administrative hearings and the office of the attorney general or other BON counsel for legal and investigative services; the costs of a court reporter and witnesses; reproduction of records; BON staff time, travel and expenses; and BON members' per diem reimbursements, travel costs and expenses.

Section 4. Immunity and Protection from Retaliation

- a. Any person, including BON staff or BON member, or organization reporting in good faith information to the BON under this article shall be immune from civil action.
- b. Any licensed health care professional who examines an applicant or licensee under this act at the request of the BON shall be immune from suit for damages by the individual examined if the examining health care professional conducted the examination and made findings or diagnoses in good faith. The immunity does not extend to willful or wanton behavior by the licensed health care professional.
- c. A person may not suspend, terminate, or otherwise discipline, discriminate against, or retaliate against anyone who reports, or advises on reporting, in good faith under this section.
- d. A person who in good faith reports violations in accordance with this Article has a cause of action against a person who violates subsection b., and may recover:
 1. The greater of:
 - a. Actual damages, including damages for mental anguish even if no other injury is shown; or
 - b. \$5,000.
 2. Exemplary damages.
 3. Court costs.
 4. Reasonable attorney's fees.
- e. In addition to the amount recovered under subsection c., a person whose employment is suspended or terminated in violation of this section is entitled to:

1. Reinstatement in the employee's former position or severance pay in an amount equal to three months of the employee's most recent salary.
2. Compensation for wages lost during the period of suspension or termination.

Section 5. Reporting

- a. Licensees shall report, within 30 days of the event, the following: change of address, criminal convictions, malpractice claims, or discipline or complaints pending in another jurisdiction or by another professional licensing board.
- b. A licensed nurse, or any individual, shall report a nurse to the BON if the nurse, or individual, has reasonable cause to suspect that a nurse or an applicant engaged in conduct that may constitute grounds for disciplinary action under this Act.
- c. Persons required to report under this section include: employers of RNs, LPN/VNs, or APRNs; jurisdictional agencies required to license, register or survey a facility or agency employing a licensee under this act; an insurer providing professional liability insurance pertaining to the practice of a licensee under this act; and a court administrator who receives a judgment relevant to the licensee's fitness to practice.
 1. A person who is required to report a nurse under this section because the nurse is impaired or suspected of substance use disorder or mental illness may report to the alternative to discipline program instead of reporting to the BON. Alternative to discipline programs have a duty to report to the BON any nurse's failure to comply with the program requirements or termination from the program.

Section 6. Emergency Action

- a. Summary Suspension
 1. The BON is authorized to summarily suspend the license of a nurse without a hearing if:
 - a. The BON finds that there is probable cause to believe that the nurse has violated a statute or rule that the BON is empowered to enforce and continued practice by the nurse would create imminent and serious risk of harm to others; or
 - b. The nurse fails to obtain a BON ordered evaluation.
 2. The suspension shall remain in effect until the BON issues a stay of suspension or a final order in the matter after a hearing or upon agreement between the BON and licensee.
 3. The BON shall schedule a disciplinary hearing to be held under the Administrative Procedures Act, to begin no later than < > days after receipt of the request. The licensee shall receive at least < > days notice of the hearing.
- b. Injunctive Relief
 1. The BON, or any prosecuting officer, upon a proper showing of the facts, is authorized to petition a court of competent jurisdiction for an order to enjoin:

- a. Any person who is practicing nursing within the meaning of this Act from practicing without a valid license, unless exempted under this Act;
 - b. Any person employing, with or without compensation, any person who is not licensed to practice nursing under this Act or exempted under this Act;
 - c. Any person, firm, corporation, institution or association from operating a school of nursing without approval;
 - d. Any person whose license has been suspended or revoked from practicing as an RN, LPN/VN or APRN; or
 - e. Any person from using the title “nurse,” “licensed practical/vocational nurse,” “registered nurse,” “advanced practice registered nurse” or their authorized abbreviations unless licensed or privileged to practice nursing in this jurisdiction.
2. The court may, without notice or bond, enjoin such acts and practice. A copy of the complaint shall be served on the defendant and the proceedings thereafter shall be conducted as in other civil cases.
- c. The emergency proceedings herein described shall be in addition to, not in lieu of, all penalties and other remedies provided by law.

Article VIII. Violations and Penalties

Section 1. Violations

No person shall:

- a. Use the title “nurse,” “registered nurse,” “licensed practical/vocational nurse,” “advanced practice registered nurse,” their authorized abbreviations, or any other words, abbreviations, figures, letters, title, sign, card or device that would lead a person to believe the individual is a licensed nurse unless permitted by this Act.
- b. Employ, for compensation or without compensation, a person that does not have the authority to practice nursing in this jurisdiction.
- c. Engage in the practice of nursing as defined in the Act without a valid, current license or privilege to practice, except as otherwise permitted under this Act.
- d. Fraudulently obtain or furnish a license.
- e. Conduct a program for the preparation for licensure under this chapter, unless the BON has approved the program.
- f. Engage in inappropriate behavior in connection with the licensure or certification examination, including, but not limited to, the giving or receiving of aid in the examination or the unauthorized possession, reproduction, or disclosure of examination questions or answers.
- g. Otherwise violate, or aid or abet another person to violate, any provision of this Act.

Section 2. Penalties

- a. Violation of any provision of this Article shall also constitute a <class> misdemeanor/crime.
- b. The BON may impose on any person violating a provision of this Act a civil penalty not to exceed <\$> for each count or separate offense.

Section 3. Criminal Prosecution

Nothing in this Act shall be construed as a bar to criminal prosecution for violation of the provisions of this Act.

Article IX. Severability

The provisions of this Act are severable. If any provision of this Act is declared unconstitutional, illegal or invalid, the constitutionality, legality and validity of the remaining portions of this Act shall be unaffected and shall remain in full force and effect.

Article X. Nursing Licensure Compact

Article XI. APRN Compact



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