

EXHIBIT I

STATE BOARD OF NURSING

SUBJECT: Chapter 4, Advanced Practice Nursing; and Chapter 6, Standards for Nursing Education Programs

DESCRIPTION: The rules promulgated in Chapter 4 as well as the rule being deleted in Chapter 6 are part of a national effort to create uniformity across the nation for advanced practice nursing as called for in the Consensus Model for APRN Regulation. The hope is that there can be a licensure compact agreement between states in the future as there is now with the RN and LPN licensure. A few of these rules are already "approved rules" that are being moved into Chapter 4 from other chapters just for clean-up. It makes sense to move all rules related to advanced practice nursing into one chapter. The remaining rules are proposed.

PUBLIC COMMENT: A public hearing was held January 14, 2010, and the public comment period expired at that time. The following public comments were submitted to the Board concerning the proposed revisions to Chapter 4:

(1) Dr. Nelda New, Graduate Nursing Program Director, University of Central Arkansas: Dr. New submitted written comment offering one suggestion for correction of a typographical error and stating "I think the changes are clearly stated and congruent with national standards."

Response: The typo was corrected.

(2) Shelly Payne, APN: Ms. Payne submitted a written comment to the Board expressing her concern with language in Section VIII G. Termination of Prescriptive Authority. Ms. Payne was concerned about the language that allows for termination of an APN's prescriptive authority for violation of the rules of the Arkansas Board of Pharmacy.

Response: The Board staff explained to Ms. Payne that the language she was concerned with is not new language. The staff also explained to her that APNs are required to abide by all state and federal rules related to prescribing.

(3) Sharon Wells, APN: Ms. Wells submitted a written question "I was reviewing the possible revisions and I see no mention of Acute Care APN as one of the four roles. Where do we fit into the purposes roles?"

Response: "Acute care will be subsumed in the Adult Gerontology population focus in the future. Those APNs who have received their license based on the acute care practitioner population focus will not be affected. In the new model, licensure would be granted for one of the six population foci as designated in the rules. The group thought it would be important not to fragment education as acute or primary care but for the APN to be educated across the spectrum of acute and primary care. This decision was made by a large group of stakeholders at the national level prior to the model rules being promulgated. The roles have not changed – ANP, CNS, CRNA and CNM." Ms. Wells responded to the Board "I agree with the decision. I'm an acute care practitioner but I give primary care in the course of the complete care of the patient."

(4) Timbi West, APN: Ms. West submitted a written comment stating "This looks like a good idea to me."

Response: No response necessary.

(5) Unsigned written comment: "I am in agreement with the changes to the ASBN Rules Chapters Four and Six. I do, however, believe that there also needs to be a change to add a requirement that the APN submit a copy of their collaborative practice agreement when their license is renewed. This could be added during this regulation change."

Response: This change was made by the Board. A statement was added in the Renewals section of the rule to require evidence of a current collaborative practice agreement to be submitted with license renewals for each APN with prescriptive authority.

(6) Dr. Carmen Paniagua, Acute Care Nurse Practitioner Specialty Coordinator, UAMS: Dr. Paniagua submitted a written comment requesting a definition of an internationally educated APN in Section III.D. Dr. Paniagua stated that clarification was needed with regard to what constitutes an internationally educated APN since for example Puerto Rico is a territory of the United States and not international, but they have APNs. Which category do they fall under? Dr. Paniagua also asked which test the Board would require for demonstrating English proficiency.

Response: "'Internationally Educated APN' is defined in the NCSBN APRN Model Act/Rules from which most of our language is taken as 'A nurse educated outside the United States who applies for licensure.' The ADBN recognizes several English proficiency exams, including TOEFL. FYI – Puerto Rico nursing graduates no longer sit for the NCLEX upon completion of their education program."

(7) Dr. Michael Carter, Adjunct Clinical Professor, UAMS: Dr. Carter submitted the following written comment: "I have reviewed the proposed rule changes and have a comment on one section. Section X. Subsection B1A states: An established Master's program Throughout the rest of the document the wording is 'graduate program'. I realize that currently there are only Master's programs in Arkansas for APN preparation but that may not always be the case. A fix now would save a fix later."

Response: The term "master's" was changed to "graduate" in response to this comment.

(8) Dr. Debrorah Gilbert-Palmer, Assoc. Professor Nursing FNP Program, ASU: Dr. Gilbert-Palmer submitted a written comment stating "All of the proposed changes look very good to me."

Response: No response necessary.

(9) Dr. Claudia Barone, Dean of the College of Nursing, UAMS: Dr. Barone submitted written comments regarding several editorial comments such as inserting the words "educational program" in several instances. With regard to Section III, Subsection

H.1.b., Dr. Barone suggested adding the word "similar" before the words "population focus".

Response: Dr. Barone's suggested changes were all made except for her request to add "similar" before "population focus" in Section III.H.1.b. This change was not made because "exact population focus is required, not similar population focus."

(10) Mary Woodson and Irene France, CRNAs, Arkansas Association of Nurse Anesthetists: Ms. Woodson and Ms. France submitted both written and oral comments as follows: "The Arkansas Association of Nurse Anesthetists expresses concern over the amendments to your Rules . . . with respect to the new proposed language in Section II: QUALIFICATION FOR LICENSURE. As proposed it removes the current explicit grandfathering for APN applicants, including CRNAs who do not have graduate degrees, since the proposal retains the sentence that states: 'Effective January 1, 2003, all applicants for advance practice licensure by examination shall have completed a graduate level advanced practice nursing education program.' The Association feels that this proposed Rule change is not in the best interests of the patients and public health in Arkansas and creates a disincentive for CRNAs to move, or to come to the state to provide 'locum' services. Additionally, we believe that the 2008 Consensus Model for APRN Regulation: page 15, footnote 7 clearly intends that APNs without graduate degrees be grandfathered and states that currently practicing applicants should have compliance with the APRN educational requirements of the state in which the APRN is applying for licensure that were in effect at the time the APRN completed his/her APRN education program."

Response: The Board considered their concerns and agreed not to make the proposed changes over which they expressed concern. The rules were changed back to their original language in this area.

No public comments were submitted to the Board concerning the proposed revisions to Chapter 6.

The proposed effective date is July 1, 2010.

CONTROVERSY: This is not expected to be controversial.

FINANCIAL IMPACT: There is no financial impact.

LEGAL AUTHORIZATION: Ark. Code Ann. § 17-87-203 generally authorizes the Arkansas State Board of Nursing to "[p]romulgate whatever regulations it deems necessary for the implementation of this chapter." Ark. Code Ann. § 17-87-302 authorizes the board to set the educational standards and to issue licenses for advanced practice nurses. Ark. Code Ann. § 17-87-203(8) specifically authorizes the Board to "[p]rescribe minimum standards and approve curricula for educational programs" that prepare individuals for licensure by the Board.

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CHAPTER FOUR
ADVANCED PRACTICE NURSING

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SECTION I
SCOPE OF PRACTICE

The advanced practice nurse shall practice in a manner consistent with the definition of the practice of advanced practice nursing set forth in Arkansas Code Annotated §17-87-102(4)(A)(B)(C)(D), and in accordance with the scope of practice defined by the appropriate national certifying body and the standards set forth in these rules. The advanced practice nurse (APN) may provide health care for which the APN is educationally prepared and for which competence has been attained and maintained.

SECTION II
QUALIFICATIONS FOR LICENSURE

Advanced practice nurse (APN) licensure shall be designated in one of the four **categories roles** below and at least one population focus – Family/Individual Across the Lifespan, Adult-Gerontology, Neonatal, Pediatrics, Women’s Health/Gender-related, or Psychiatric/Mental Health (effective 2015). A current, unencumbered registered nurse license to practice in Arkansas is required for all categories of advanced practice licensure. Effective January 1, 2003, all applicants for advanced practice licensure by examination shall have completed a graduate level advanced practice nursing education program. Applicants for advanced practice licensure by endorsement shall have met the educational and certification requirements set forth in *Arkansas State Board of Nursing Rules* at the time of their initial-licensure as an advanced practice nurse in another jurisdiction. APN **categories roles** and their respective qualifications are:

A. ADVANCED NURSE PRACTITIONER (ANP)

1. Successful completion of an organized program of nursing education that prepares nurses for the advanced practice role of advanced nurse practitioner; and
2. Current certification as a nurse practitioner by a nationally recognized certifying body which meets the requirements of Section VII of this Chapter.

B. CERTIFIED REGISTERED NURSE ANESTHETIST (CRNA)

1. Satisfactory Successful completion, beyond generic nursing preparation, of a formal educational program that meets the standards of the Council on Accreditation of Nurse Anesthesia Educational Programs or another nationally recognized accrediting body that has as its objective preparation of nurses to perform as nurse anesthetists; and
2. Current certification from the Council on Certification of Nurse Anesthetists, Council on Recertification of Nurse Anesthetists, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter.

C. CERTIFIED NURSE MIDWIFE (CNM)

1. Successful completion of an organized program of nursing education program that prepares nurses for the advanced practice role of nurse midwife;
2. Current certification as a nurse midwife from the American College of Nurse Midwives, or another nationally recognized certifying body which meets the requirements of Section VII of this Chapter; and
3. Written agreement with a consulting physician if providing intrapartum care.

D. CLINICAL NURSE SPECIALIST (CNS)

1. Master’s Graduate degree evidencing successful completion of a graduate nursing educational program in nursing, which shall include supervised clinical practice and classroom instruction in a nursing clinical practice specialty; and

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2. Current certification in a specialty role as a clinical nurse specialist from a nationally recognized certifying body which meets the requirements of Section VII of this Chapter

SECTION III LICENSURE

A. ELIGIBILITY

The applicant shall meet the licensure requirements of the Board.

B. APPLICATION FOR LICENSURE BY EXAMINATION

In addition to a current registered nurse license to practice in Arkansas, the information submitted to the Board shall include:

1. A completed Board application form;
2. An official transcript or document from a nursing education program that accredited by a nursing accrediting body that is recognized by the U.S. Secretary of Education and/or Council for higher Education Accreditation (CHEA), as acceptable by the Board and meets the qualifications of Section II of this Chapter in the category of advanced practice nursing for which the applicant is seeking licensure. The transcript or document shall verify the date of graduation, the degree or certificate conferred, clinical hours completed, and the role and population focus of the education program.
- ~~3. For foreign educated applicants, documentation that the graduate level educational program meets criteria for accreditation equivalent to that of a U.S. national accrediting body;~~
3. Evidence of state and federal criminal background checks conducted by the Arkansas State Police and the Federal Bureau of Investigation completed no earlier than twelve (12) months prior to the application for advanced practice licensure;
4. A statement directly from the Board approved national certifying body evidencing current certification in good standing; and
5. Payment of the nonrefundable fee.

C. APPLICATION FOR LICENSURE BY ENDORSEMENT

1. The Board may issue a license by endorsement to an APN licensed under the laws of another state if, in the opinion of the Board, the applicant meets the qualifications for licensure in this state.
2. In addition to the requirements set forth in Section II and III A. and B. of this Chapter, the information submitted to the Board shall include documentation of current unencumbered advanced practice licensure/authority to practice in another jurisdiction.

D. APPLICATION FOR AN INTERNATIONALLY EDUCATED APN(educated outside the United States)

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

1. Graduate from a graduate level APN program equivalent to an APN educational program in the United States accepted by the board.
2. Submit an official transcript directly from the international nursing education program and verified through a qualified credentials evaluation process for the license being sought.
3. Meet all other licensure criteria required of applicants educated in the United States, including English proficiency.

E. TEMPORARY PERMITS

1. Upon application and payment of the required fee, the Board shall issue a temporary permit to practice in an advanced practice nursing category to a qualified applicant who has no violations as listed in ACA §17-87-312 on the Arkansas State Police criminal background check and:
 - a. Meets the educational requirements set forth in Section II of this Chapter and has been accepted by the appropriate certification body to sit for the first national certification exam he or she is eligible to take; or
 - b. Has a current advanced practice license or the equivalent from another jurisdiction and has current Board approved certification in the appropriate advanced practice nursing education category.
2. The temporary permit shall immediately become invalid upon receipt of information obtained from

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the federal criminal background check indicating any offense listed in ACA §17-87-312 or upon notification to the applicant or ASBN of failure of the certification examination.

4. The temporary permit is not renewable and does not apply to prescriptive authority.
5. In no event shall the permit be valid in excess of six (6) months.

F. RENEWALS

1. The date for renewal of licensure to practice as an advanced practice nurse shall coincide with renewal of the applicant's registered nurse license.
2. An applicant for renewal of an advanced practice nurse license shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. Proof Documentation of current national certification in the appropriate APN specialty through an ongoing maintenance program of a Board approved certifying body;
 - c. Documentation of current compact state RN licensure if primary state of residence has enacted the Interstate Nurse Licensure Compact; and
 - d. Payment of the nonrefundable renewal fee.
3. Advanced practice nurses with prescriptive authority shall submit evidence of a current collaborative practice agreement as a prerequisite to license renewal. (Changed as a result of public comment)
4. If disciplinary proceedings have been initiated against an individual with a lapsed, inactive, or retired license, the license shall not be renewed until the proceedings have been completed.
5. Continuing education submitted to the certifying body to meet the qualifications for recertification shall be accepted as meeting the statutory requirement for continuing education.
6. Upon request, an APN shall submit documentation to the Board of continuing education.
7. Effective January 1, 2010, APNs with prescriptive authority shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification each biennium prior to license renewal. (New to Chapter 4 from Chapter 2)

G. LAPSED LICENSE

The license is lapsed if not renewed or placed in an inactive status by the expiration date.

1. The license is lapsed if the RN license to practice in Arkansas is not renewed by the expiration date.
2. The license is lapsed when the national certification upon which licensure was granted expires.
3. Failure to receive the renewal notice shall not relieve the licensee of the responsibility for renewing the license by the expiration date.
4. Any licensee whose license has lapsed shall submit to the Board:
 - a. A completed Board renewal application form;
 - b. Proof Documentation of current national certification; and
 - c. The renewal fee and the reinstatement fee/late penalty.
5. Fees submitted to the Board are nonrefundable.
6. Any person engaged in advanced practice nursing during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

H. REINSTATEMENT OF APN LICENSE

1. An individual who applies for licensure reinstatement who has been out of practice for more than five years shall provide evidence of passing an APN nursing refresher course approved by the board or an extensive orientation in the appropriate advanced practice role and population focus which includes a supervised clinical component by a qualified preceptor who meets the following requirements:
 - a. Holds an active unencumbered APN or physician license
 - b. Is in current practice in the advanced role and population focus
 - c. Functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting
2. For those licensees applying for licensure reinstatement following disciplinary action, compliance with all board licensure requirements as well as any specified requirements set forth in the board's discipline order is required

I. INACTIVE STATUS

1. Any licensee in good standing who desires his or her advanced practice license to be placed on inactive status may submit a request in writing to the Board.
2. The APN license shall immediately be placed on inactive status when the registered nurse license is placed on inactive or retired status.
3. The current license shall be placed on inactive status ~~from the date of expiration~~ upon receipt of the written request.
4. While the license is inactive, the licensee shall not engage in advanced practice nursing nor be subject to the payment of renewal fees.
5. If the nurse desires to resume practice in this state, he or she shall request a renewal application, which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
6. All certification and continuing education requirements for renewal shall apply.

J. RETIRED ADVANCED PRACTICE NURSE

1. Any advanced practice nurse in good standing whose registered nurse license has been placed on retired status may request that their APN license be placed on retired status.
2. The APN shall submit a request in writing, surrender the current license, and pay the required fee and the current license shall be placed on inactive status and a retired APN license issued.
3. An APN retired license shall be renewed biennially following submission of a renewal application and fee.
4. Fees are non-refundable.
5. While retired, the APN shall not practice nursing, however, an advanced practice nurse with a retired license may use the title "Advanced Practice Nurse" or the abbreviation "APN."
6. When the licensee desires to resume practice, he or she shall request a renewal application, which shall be completed and submitted with a reinstatement fee and the active renewal fee. The licensee must also meet those requirements outlined in Section III E.
7. If the retired APN license is allowed to lapse, the licensee shall not hold himself or herself out as an APN and shall pay a reinstatement fee in addition to the fee required for renewal of the retired APN license.

K. Additional Certifications

1. An APN who has completed post-masters education for an additional nursing specialty shall:
 - a. Submit a request for permission to practice in the new certification area;
 - b. Submit a copy of authorization to sit for the first available certification exam from the Board approved certifying body;
 - c. Immediately cease practicing in the specialty upon notification of failure of the exam
 - d. Submit results of the certification in the additional specialty directly from the certifying body
 - e. Submit an official transcript or document from a nursing education program that meets the qualifications in Section II of the Chapter verifying the date and degree or certificate conferred
2. An APN who has prescriptive authority shall:
 - a. Prescribe only for patients covered by the original specialty while waiting additional specialty results.
 - b. Submit a collaborative practice agreement which includes the additional certification.

**SECTION IV
DUPLICATE LICENSE**

- A. A duplicate license or certificate shall be issued when the licensee submits a notarized statement to the Board that the document is lost, stolen, or destroyed, and pays the required fee.
- B. The license will be marked "duplicate".

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SECTION V NAME OR ADDRESS CHANGE

- A. A licensee whose name is legally changed shall be issued a replacement license following submission of the current license, along with an affidavit, copy of marriage license or court action, and the required fee.
- B. A licensee whose address changes from the address appearing on the current license shall immediately notify the Board in writing of the change.

SECTION VI STANDARDS OF NURSING PRACTICE

A. PURPOSE

- 1. To establish standards essential for safe practice by the advanced practice nurse.
- 2. To serve as a guide for evaluation of advanced nursing practice.

B. CORE STANDARDS FOR ALL CATEGORIES OF ADVANCED PRACTICE NURSING

- 1. The advanced practice nurse shall assess clients at an advanced level, identify health status including abnormal conditions, establish a diagnosis, develop and implement treatment plans, and evaluate client outcomes.
- 2. The advanced practice nurse shall use advanced knowledge and skills in teaching and guiding clients and other health team members.
- 3. The advanced practice nurse shall use critical thinking and decision making at an advanced level, commensurate with the autonomy, authority, and responsibility of his/her practice category.
- 4. The advanced practice nurse shall have knowledge of the statutes and rules governing advanced nursing practice, and function within the legal boundaries of the appropriate advanced practice nursing category.
- 5. The advanced practice nurse shall recognize the APN's limits of knowledge and experience, planning for situations beyond expertise, and collaborating with or referring clients to other health care providers as appropriate.
- 6. The advanced practice nurse shall retain professional accountability for advanced practice nursing care when delegating interventions.
- 7. The advanced practice nurse shall maintain current knowledge and skills in the advanced practice nursing category.
- 8. Rules which apply to registered nurses are hereby incorporated by reference.
- 9. The APN shall comply with the standards for registered nurses as specified in Chapter I. Standards for a specific role and population focus of APN supersede standards for registered nurses where conflict between the standards, if any, exists.

- C. In addition to the core standards, the advanced practice nurse shall practice in accordance with the standards established by the national certifying body from which the APN holds his or her certification required for licensure. These standards shall have been reviewed and accepted by the Board.

D. ADDITIONAL STANDARDS FOR CRNAs

- 1. The CRNA, acting in the normal course of his/her professional practice, may be authorized by a hospital or institution to act as their agent or employee to order the administration of controlled substances under the DEA registration of the hospital or institution.
- 2. The CRNA may order nurses to administer drugs preoperatively and/or postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.
- 3. The CRNA's order shall be directly related to the administration of drugs preoperatively and/or postoperatively in connection with an anesthetic and/or other operative or invasive procedure that will be or has been provided.

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4. A CRNA who has not been granted authority by a DEA registrant as described in Title 21 CFR 1301.22, or its successor to order the administration of controlled substances shall give all orders as verbal orders from the supervising physician, dentist, or other person lawfully entitled to order anesthesia.
5. The CRNA shall be responsible for complying with all applicable state and federal laws and rules related to medications.

SECTION VII PROFESSIONAL CERTIFICATION PROGRAMS

- A. A national certifying body certification program which meets the following criteria shall be recognized by the Board to satisfy Section II of these rules.
- B. The national certifying body certification program:
 1. Is national in the scope of its credentialing;
 2. Is accredited by a national accreditation body as acceptable by the Board;
 3. Has no requirement for an applicant to be a member of any organization;
 4. Has an application process and credential review which includes documentation that the applicant's education is in the advanced practice nursing category being certified, and that the applicant's clinical practice is in the certification category;
 5. Education requirements are consistent with the requirements of the advanced practice role and population foci.
 6. Uses an examination as a basis for certification in the advanced practice nursing category which meets the following criteria:
 - a. The examination is based upon job analysis studies conducted using standard methodologies acceptable to the testing community;
 - b. The examination represents entry-level practice in the APN role and population focus;
 - c. The examination represents the knowledge, skills, and abilities essential for the delivery of safe and effective advanced nursing care to clients;
 - d. The examination content and its distribution are specified in a test plan (blueprint), based on the job analysis study, that is available to examinees;
 - e. Examination items are reviewed for content validity and correct scoring using an established mechanism, both before use and periodically;
 - f. Examinations are evaluated for psychometric performance;
 - h. The passing standard is established using acceptable psychometric methods, and is reevaluated periodically; and
 - i. Examination security is maintained through established procedures; and
 - j. A re-take policy is in place.
 7. Issues certification based upon passing the examination and meeting all other certification requirements;
 8. Provides for periodic recertification which includes review of continued education, qualifications, and continued competence;
 9. Has mechanisms in place for communication to the Board for timely verification of an individual's certification status, changes in certification status, and changes in the certification program, including qualifications, test plan, and scope of practice;
 10. Has an evaluation process to provide quality assurance in its certification program.

SECTION VIII PRESCRIPTIVE AUTHORITY

A. INITIAL APPLICANT

An applicant for an initial certificate of prescriptive authority shall:

1. Be currently licensed as an advanced practice nurse in Arkansas.
2. Provide evidence from the national certifying body that differential diagnosis and prescribing practices are recognized as being within the scope of practice for the applicant's certification

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3. Provide documentation of successful completion of pharmacology coursework which shall include pharmacokinetics principles and their clinical application and the prescription of pharmacological agents in the prevention and treatment of illness, and the restoration and maintenance of health. The coursework shall contain a minimum of:
 - a. Three (3) graduate credit hour pharmacology course offered by an accredited college or university within two years immediately prior to the date of application to the Board; or
 - b. Forty-five (45) contact hours [a contact hour is fifty (50) minutes] in a pharmacology course which includes a competency component, offered by an accredited college or university, within two (2) years immediately prior to the date of application to the Board; or
 - c. Three (3) graduate credit hours pharmacology course, included as part of an advanced practice nursing education program, within five (5) years immediately prior to the date of application to the Board.
 4. Provide documentation of a minimum of three hundred (300) clock hours preceptorial experience in the prescription of drugs, medicines, and therapeutic devices with a qualified preceptor, to be initiated with the pharmacology course and to be completed within one year of the beginning of the course. Preceptorial experience completed as a part of the formal educational program in which the pharmacology course is taught will meet the three hundred (300) clock hour requirement.
 5. Submit a current collaborative practice agreement with a physician who is licensed under the Arkansas Medical Practices Act, §17-95-201 et seq., and who has a practice comparable in scope, specialty or expertise to that of the advanced practice nurse. APN's who will prescribe controlled substances shall seek a collaborative practice with a physician who has an unrestricted DEA registration number. The collaborative practice agreement shall include, but not be limited to:
 - a. Availability of the collaborating physician(s) for consultation or referral or both;
 - b. Methods of management of the collaborative practice, which shall include the use of protocols for prescriptive authority;
 - c. Plans for coverage of the health care needs of a client in the emergency absence of the advanced practice nurse or physician;
 - d. Provision for quality assurance; and
 - e. Signatures of the advanced practice nurse and collaborating physician(s), signifying mutual agreement to the terms of the collaborative practice.
 6. Submit the nonrefundable processing fee with the application for a certificate of prescriptive authority.

B. ENDORSEMENT APPLICANT

1. An applicant for endorsement of prescriptive authority shall:
 - a. Provide documentation of a three (3) graduate credit hour pharmacology course offered by an accredited college or university or a forty-five (45) contact hour [a contact hour is fifty (50) minutes] pharmacology course which includes a competency component offered by an accredited college or university;
 - b. Provide evidence that prescriptive authority is current and unencumbered in the jurisdiction from which the applicant is moving;
 - c. Provide evidence of prescribing in a clinical setting for at least 500 hours in the year prior to application for a certificate of prescriptive authority;
 - d. Have an unencumbered advanced practice nursing license to practice or the equivalent in the jurisdiction from which the applicant is moving;
 - e. Provide a copy of current DEA registration (if prescriber has DEA number) and history of registration status; and
 - f. Meet requirements in Section VIII.A.1,2,5,6.
2. Endorsement applicants who do not meet all requirements established herein shall be required to submit documentation acceptable to the Board according to Section VIII.A.

C. PROTOCOLS FOR PRESCRIPTIVE AUTHORITY

Protocols shall be made available upon request of the Board. Such protocols shall, at a minimum, include:

1. Indications for and classifications of legend drugs, controlled substances (if prescriber holds a DEA registration number), and therapeutic devices which will be prescribed or administered by the APN;
2. Date the protocol was adopted or last reviewed, which shall be at least annually.

D. PRESCRIBING PRIVILEGES

1. The APN, applying for a certificate of prescriptive authority, shall acknowledge in the application that he or she is familiar with all state and federal laws and rules regarding prescribing; and shall agree to comply with these laws and rules.
2. An advanced practice nurse with a certificate of prescriptive authority may receive and prescribe legend drugs, medicines, or therapeutic devices appropriate to the APN's area of practice. The prescriptive authority for controlled drugs shall only extend to drugs listed in Schedules III through V.
3. Prescribing stipulations are as follows:
 - a. Legend drugs, therapeutic devices, and controlled substances (Schedules III-V), defined by the state and/or federal controlled substances lists, will be prescribed, administered, or ordered as established in protocols provided that the APN has an assigned DEA registration number which is entered on each written prescription for a controlled substance.
 - b. The APN shall file his/her DEA registration number with the Board upon receipt.
 - c. Advanced practice nurses shall not delegate to unlicensed ancillary staff the calling in of prescriptions to the pharmacy.
 - d. The APN shall notify the Board in writing the next working day following termination of the collaborative practice agreement. A new collaborative practice agreement is required to be on file prior to reactivating prescriptive authority.
4. The APN may prescribe a legend drug, medicine, or therapeutic device not included in the written protocols only as follows:
 - a. Upon a specific written or verbal order obtained from the collaborating physician before the prescription or order is issued by the APN; and
 - b. Include documentation of consultation as described above in the client's medical record to be signed by the APN;
 - c. Schedules I and II controlled substances shall not be prescribed under the APN's certificate of prescriptive authority.
5. The APN shall note prescriptions on the client's medical record and include the following information:
 - a. Medication and strength;
 - b. Dose;
 - c. Amount prescribed;
 - d. Directions for use;
 - e. Number of refills; and
 - f. Initials or signature of APN.
6. Advanced practice nurses in the category of certified registered nurse anesthetists shall not be required to have prescriptive authority to provide anesthesia care, including the administration of drugs or medicines necessary for such care.
7. Advanced practice nurses who prescribe prior to obtaining a certificate of prescriptive shall be considered illegal practitioners and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

E. WRITTEN PRESCRIPTION FORMAT

1. All written prescriptions issued by the APN shall contain the name of the client, and the APN's name, telephone number, signature with the initials "APN", prescribing identification number issued by the Board, and should include information contained in Subsection D.5 a-f of this Section.
2. All prescriptions for controlled substances shall be written in accordance with federal rules. The APN's assigned DEA registration number shall be written on the prescription form when a controlled substance is prescribed.

F. RECEIVING PREPACKAGED DRUG SAMPLES

1. APN's who have fulfilled requirements for prescriptive authority may receive legend drug samples and therapeutic devices appropriate to their area of practice, including controlled substances contained in Schedules III through V of the Controlled Substance Act, which have been prepared, packaged, or fabricated by a pharmaceutical manufacturer in accordance with the Arkansas pharmacy laws and rules.
2. Records must comply with all applicable federal and state laws and rules.

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G. TERMINATION OF PRESCRIPTIVE AUTHORITY

1. Prescriptive authority may be terminated by the Board when the prescriber:
 - a. Fails to maintain current active licensure as an advanced practice nurse;
 - b. Violates provisions of this Act and/or rules established by the Arkansas Department of Health, Nursing, or Pharmacy Boards;
 - c. Violates any state or federal law or rules applicable to prescriptions; or
 - d. Fails to follow any conditions imposed.
2. To reinstate prescriptive authority, the APN must meet requirements of the Board at the time of reinstatement.

H. LAPSED CERTIFICATE OF PRESCRIPTIVE AUTHORITY

1. The certificate of prescriptive authority is lapsed if:
 - a. The licensee's active advanced practice nurse license is not renewed by the expiration date;
 - b. The national certification upon which licensure is based expires;
 - c. There is not a current collaborative practice agreement on file with the board; or
 - d. The advanced practice license is placed in inactive or retired status.
2. After reinstating a lapsed advanced practice license, the licensee shall submit to the Board a current collaborative practice agreement to reactivate the certificate of prescriptive authority.
3. Any person engaged in prescribing during the time his or her certificate of prescriptive authority has lapsed shall be considered an illegal practitioner and shall be subject to the penalties provided for violation of the *Nurse Practice Act*.

I. INACTIVE STATUS

1. A certificate of prescriptive authority will automatically be considered lapsed and subject to the requirements of these rules when a licensee places his or her advanced practice license on inactive status.
2. While the certificate of prescriptive authority or advanced practice nurse license is inactive the licensee shall not engage in any practice within the scope of the certificate of prescriptive authority.
3. If the nurse desires to resume practice in this state, he or she shall request a renewal application which shall be completed and submitted with a renewal fee and the reinstatement fee. Fees are nonrefundable.
4. All certification requirements for renewal shall apply.
5. If disciplinary proceedings on an inactive licensee have been initiated, the license shall not be reinstated until the proceedings have been completed.
6. Effective January 1, 2010, APNs whose prescriptive authority is inactive shall complete five (5) contact hours of pharmacotherapeutics continuing education in the APN's area of certification for each 12 months of non-prescribing activity in addition to the five (5) contact hours required for APN license renewal prior to reactivation of prescriptive authority. (NEW to Chapter 4 from Chapter 2)

SECTION IX PRESCRIPTIVE AUTHORITY ADVISORY COMMITTEE

A. PURPOSE

The purpose of this committee shall include functioning in an advisory capacity to assist the Board with oversight and implementation of the provisions regarding prescriptive authority.

B. COMPOSITION

The Advisory Committee shall be composed of five (5) members appointed by the Board and approved by the Governor. Three (3) members shall be advanced practice nurses holding certificates of prescriptive authority. One (1) committee member shall be a licensed physician who has been involved in a collaborative practice with a registered nurse practitioner for at least five (5) years. One member shall be a licensed pharmacist who has been in practice for at least five (5) years.

C. TERMS OF OFFICE

Members shall serve three (3) year terms and may be reappointed. The Board may remove any advisory committee member, after notice and hearing, for incapacity, incompetence, neglect of duty, or

malfeasance in office.

D. COMPENSATION

Advisory committee members shall serve without compensation; but may be reimbursed to the extent special monies are appropriated therefore for actual and necessary expenses incurred in the performance of their official Board duties.

Effective December 1, 2004

**SECTION X
NURSING EDUCATION PROGRAMS
(New Section in Chapter 4)**

A. NEW APN PROGRAM LEADING TO LICENSURE (moved from Chapter Six)

1. Prerequisite Approval

- a. An institution, seeking to establish a new APN nursing education program leading to licensure, shall submit a letter of intent to the Board.
 - (1) An applicant for an Advanced Practice Nursing (APN) program shall comply with the "Criteria and Procedures for Preparing Proposals for New Programs," established by the Arkansas Department of Higher Education.
 - (2) Appropriate professional accreditation of the new APN program is considered to be deemed status as approved by the Board.
- b. The institution shall submit:
 - (1) a copy of the curricula plan and course descriptions for Board review within thirty(30) days of sending the information to the accrediting body;
 - (2) other accreditation materials as requested by the Board; and
 - (3) documentation of accreditation within thirty(30) days of receipt of the report from the accrediting body.

B. ESTABLISHED PROGRAM THAT PREPARES GRADUATES FOR LICENSURE

1. Continued Full Approval

- a. An established ~~Master's~~ graduate program in advanced practice nursing shall submit to notify the Board documentation of the program's continued national nursing accreditation status within thirty (30) days of receipt from the accrediting body. Receipt of the documentation which will shall serve as deemed status for approval by the ASBN.

C. EDUCATION PROGRAM

- 1. The education program for advanced practice nursing shall meet the nursing accrediting body standards for advanced practice nursing.
- 2. The curriculum plan for advanced practice nursing shall include:
 - a. Preparation in one of the four identified APN roles (CRNA, CNM, CNS, and ANP); and
 - b. Preparation in at least one of the approved population foci; (effective 2015)
 - (1) Family/Individual Across the Lifespan
 - (2) Adult-Gerontology
 - (3) Neonatal
 - (4) Pediatrics
 - (5) Women's Health/Gender-related
 - (6) Psychiatric/Mental Health; and
 - c. Three separate graduate level courses (the APN Core):
 - (1) Advanced physiology and pathophysiology
 - (2) Advanced health assessment
 - (3) Advanced pharmacology

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3 Clinical Experiences

- a. All APNs who have a direct client care role, make diagnoses, prescribe therapeutic regimens and are accountable for these decisions shall have a minimum of 500 supervised clinical hours in direct clinical practice during the program.
- b. APN programs preparing for two population foci shall have a minimum of 500 supervised clinical hours for each population focus.
- c. Clinical supervision must be congruent with current national professional organizations and nursing accrediting body standards applicable to the APN role and population focus.
- d. Student clinical experiences shall be congruent with the population focus of the role.

Effective July 1, 2010