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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2003

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A N A C T

RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

Introduced By: Senators Polisen, Roberts, Lanzi, Damiani, and DaPonte

Date Introduced: February 26, 2003

Referred To: Senate Commerce, Housing & Municipal Government

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 5-34 of the General Laws entitled "Nurses" is hereby amended by
2 adding thereto the following section:

3 **5-34-1.1. Title of act.** -- This act shall be known and may be cited as "The Rhode Island
4 Nurse Practice Act."

5 SECTION 2. Sections 5-34-3, 5-34-4, 5-34-5, 5-34-6, 5-34-7, 5-34-9, 5-34-14, 5-34-18,
6 5-34-19, 5-34-20, 5-34-24.1, 5-34-25, 5-34-26, 5-34-31, 5-34-35, 5-34-39, 5-34-40 and 5-34-41
7 of the General Laws in Chapter 5-34 entitled "Nurses" are hereby amended to read as follows:

8 **5-34-3. Definitions.** -- (a) "Approval" means the process where the board of nursing
9 evaluates and grants official recognition to basic nursing education programs meeting established
10 criteria and standards.

11 (b) "Certified registered nurse practitioner" is an advanced role utilizing independent
12 knowledge of physical assessment and management of health care and illnesses. The practice
13 includes prescriptive privileges. The practice includes collaboration with other licensed health
14 care professionals including, but not limited to, physicians, pharmacists, podiatrists, dentists and
15 nurses.

16 (c) "Health" means optimum well-being.

17 (d) "Healthcare" means those services provided to promote the optimum well-being of
18 individuals.

19 (e) "Licensed" means the status of qualified individuals who have completed a

1 designated process by which the board of nursing grants permission to individuals accountable
2 and/or responsible for the practice of nursing and to engage in that practice, prohibiting all others
3 from legally doing so.

4 (f) "Nursing" means the provision of services that are essential to the promotion,
5 maintenance, and restoration of health throughout the continuum of life. It provides care and
6 support of individuals and families during periods of wellness, illness, and injury, and
7 incorporates the appropriate medical plan of care prescribed by a licensed physician, dentist, or
8 podiatrist. It is a distinct component of health services. Nursing practice is based on specialized
9 knowledge, judgment, and nursing skills acquired through educational preparation in nursing and
10 in the biological, physical, social, and behavioral sciences.

11 (g) "Practical nursing" is practiced by licensed practical nurses (L.P.N.s). It is an integral
12 part of nursing based on a knowledge and skill level commensurate with education. It includes
13 promotion, maintenance, and restoration of health and utilizes standardized procedures leading to
14 predictable outcomes which are in accord with the professional nurse regimen under the direction
15 of a professional nurse. In situations where professional nurses are not employed, the licensed
16 practical nurse functions under the direction of a licensed physician, dentist, ~~or~~ podiatrist or other
17 licensed health care providers authorized by law to prescribe. Each L.P.N. is responsible for the
18 nursing care rendered.

19 (h) "Professional nursing" is practiced by registered nurses (R.N.s). The practice of
20 professional nursing is a dynamic process of assessment of an individual's health status,
21 identification of health care needs, determination of health care goals with the individual and/or
22 family participation and the development of a plan of nursing care to achieve these goals. Nursing
23 actions, including teaching and counseling, are directed toward the promotion, maintenance, and
24 restoration of health and evaluation of the individual's response to nursing actions and the
25 medical regimen of care. The professional nurse provides care and support of individuals and
26 families during periods of wellness and injury, and incorporates where appropriate, the medical
27 plan of care as prescribed by a licensed physician, dentist or podiatrist or other licensed health
28 care providers authorized by law to prescribe. Each R.N. is directly accountable and responsible
29 to the consumer for the nursing care rendered.

30 (i) "Psychiatric and mental health nurse clinical specialist" is an advanced role utilizing
31 independent knowledge and management of mental health and illnesses. The practice including
32 prescription privileges of certain legend medications and controlled substances from Schedule IV.
33 The practice may include collaboration with other licensed health care professionals, including,
34 but not limited to, psychiatrists, psychologists, physicians, pharmacists, and nurses. The

1 psychiatric and mental health clinical specialist has a masters degree in nursing, has an active
2 license as a registered nurse and is certified by a national body as approved by the Rhode Island
3 board of nurse registration and nursing education.

4 (j) "Advanced practice nurse" means the status of qualified individuals who held an
5 active license as a registered nurse and an active license as a nurse in an advanced role as defined
6 under the provisions of this chapter or chapter 5-34.2.

7 (k) "Department" means the department of health.

8 ~~**5-34.4. Board of nursing -- Establishment -- Composition -- Appointment, terms,**~~
9 ~~**and removal of members -- Director of nursing education Board of nursing -- Establishment**~~
10 ~~**-- Composition -- Appointment, terms, and removal of members -- Director of nurse**~~
11 ~~**registration and nursing education. --**~~ (a) Within the division of professional regulation,

12 pursuant to chapter 26 of this title, there is a board of nurse registration and nursing education.
13 The board is composed of ~~eleven (11)~~ thirteen (13) members. The term of office is for three (3)
14 years. No member serves more than two (2) consecutive terms. The member serves until a
15 qualified successor is appointed to serve. In making those appointments, the director of health
16 considers persons suggested by professional nurse organizations and the practical nurse's
17 association.

18 (b) Present members of the board holding office under the provisions of this chapter as
19 amended, entitled "Nurses", serve as members of the board until the expiration of their terms or
20 until qualified successors are appointed. The ~~eleven (11)~~ thirteen (13) member board includes:
21 ~~seven (7)~~ ten (10) professional nurses, ~~two (2)~~ one (1) practical nurses appointed by the director
22 of health and approved by the governor and two (2) members of the general public appointed by
23 the governor. Three (3) professional nurses are from different basic education programs preparing
24 students to become professional nurses; ~~one professional nurse is from a basic education program~~
25 ~~preparing students to become practical nurses;~~ one (1) professional nurse is from a nursing
26 service administration; ~~and two (2)~~ four (4) professional nonadministrative, clinical nurses not
27 licensed as advanced practice nurses, and two (2) professional nurses are licensed as advanced
28 practice nurses. No educational program or cooperating agency has more than one representative
29 on the board.

30 (c) The director of health may remove any member from the board for cause including,
31 but not limited to, neglect of any duty required by law, or incompetence, or unprofessional
32 conduct, or willful misconduct. A member subject to disciplinary proceedings is disqualified from
33 board business until the charge is adjudicated. There is also a director of nurse registration and
34 nursing education appointed by the director of health in accordance with the provisions of chapter

1 4 of title 36, ~~who serves as executive secretary of the board.~~

2 **5-34-5. Board of nursing -- Qualifications of members.** -- (a) Each member of the
3 board of nurse registration and nursing education shall:

4 (1) Be a citizen of the United States;

5 (2) Be a resident of the state for at least one year immediately preceding appointment;

6 (3) File the statutory oath of office with the secretary of state before beginning the term
7 of office; and

8 (4) Sign a conflict-of-interest statement.

9 (b) Each professional nurse member of the board is:

10 (1) Currently licensed as a registered nurse in the state; and

11 (2) Has at least five (5) years' experience in nursing practice or administration, nursing
12 service, or teaching or administration in a nursing education program and is currently employed
13 in nursing at the time of appointment and employed in nursing for at least three (3) years
14 immediately preceding appointment.

15 (c) Each practical nurse member of the board is:

16 (1) Currently licensed as a practical nurse in the state; and

17 (2) Has at least five (5) years' experience in practical nursing and is currently employed
18 in nursing for at least three (3) years immediately preceding appointment.

19 (d) Each advanced practice nurse member of the board is:

20 (1) Currently licensed as an advanced practice nurse in the state; and

21 (2) Has at least five (5) years experience in nursing practice and is currently employed as
22 an advanced practice nurse for at least three (3) years immediately preceding appointment.

23 (e) Each member from the general public is not a nurse or is not enrolled in a nursing
24 education program.

25 **5-34-6. Board of nursing -- Organization -- Meetings.** -- The board of nurse
26 registration and nursing education elects annually from its membership a president and vice-
27 president. A secretary is also elected. The state director of nurse registration and nursing
28 education ~~serves as executive secretary to the board~~ but is not a member of the board. Meetings
29 may be called by the president, vice-president, ~~executive secretary~~ director of nurse registration
30 and nursing education, director of health, or upon written request of five (5) members of the
31 board. A majority constitutes a quorum at any meeting.

32 **5-34-7. Board of nursing -- General powers.** -- The board of nurse registration and
33 nursing education is authorized, subject to the approval of the director of health, to:

34 (1) Adopt, review, or revise rules, and regulations consistent with the law that may be

1 necessary to effect provisions of the chapter;

2 (2) Approve nursing education programs according to the rules established by the board;

3 ~~(2) Prescribe standards for nursing education programs preparing persons for licensure~~

4 ~~under this chapter;~~

5 ~~(3) Provide for evaluation of nursing education programs and related clinical facilities at~~

6 ~~those times it may deem necessary;~~

7 ~~(4) Approve nursing education programs that meet the requirements of the chapter;~~

8 ~~(5) Deny or withdraw approval from nursing education programs for failure to meet or~~

9 ~~maintain prescribed standards; provided, that withdrawal of approval is effected only after a~~

10 ~~hearing in accordance with the board's rules and regulations;~~

11 ~~(6)~~ (3) Require standards for nursing practice within organized nursing services and the

12 individual practice of licensees;

13 ~~(7)~~ (4) Approve and administer the examinations for licensure;

14 ~~(8)~~ (5) Establish requirements to validate competence for reinstatement to the active list;

15 ~~(9)~~ (6) Conduct hearings upon charges calling for discipline of a licensee or revocation

16 of a license;

17 ~~(10)~~ (7) Issue subpoenas to, compel the attendance of witnesses at, and administer oaths

18 to persons giving testimony at hearings;

19 ~~(11)~~ (8) Cause the prosecution or enjoinder of all persons violating this chapter;

20 ~~(12)~~ (9) Maintain a record of all its proceedings;

21 ~~(13)~~ (10) Submit an annual report to the director of health;

22 ~~(14)~~ (11) Utilize other persons that may be necessary to carry on the work of the board;

23 ~~(15)~~ (12) Conduct public hearings, investigations, and studies of nursing practice,

24 nursing education, and related matters and prepare and issue publications that, in the judgment of

25 the board, allowing ~~ing~~ the nursing profession to provide safe, effective nursing services to the

26 public;

27 ~~(16)~~ (13) Determine qualifications necessary for prescriptive privileges for certified

28 registered nurse practitioners; ~~and~~

29 ~~(17)~~ (14) Grant certified registered nurse practitioners prescriptive privileges ~~and~~

30 ~~transmit this information to the board of pharmacy. ;~~

31 (15) Determine qualification necessary for the prescriptive privileges for psychiatric and

32 mental health clinical nurse specialists; and

33 (16) Grant certified psychiatric and mental health clinical nurse specialists prescriptive

34 privileges.

1 **5-34-9. Register of nurses -- Records -- Issuance of licenses.** -- ~~The administrator of~~
2 ~~professional regulation department~~ licenses and renews licenses upon the recommendation of the
3 board of nurse registration and nursing education and maintains a roster of all applicants for
4 licensure and all nurses licensed under this chapter, which is open at all reasonable times to
5 public inspection; and is custodian of all records pertaining to the roster and licensing of all
6 nurses; and has the custody of the official seal. ~~He or she~~ The department issues all licenses to
7 practice nursing only upon recommendation of the board of nurse registration and nursing
8 education.

9 **5-34-14. Qualifications of practical nurse applicants.** -- An applicant for a license to
10 practice as a licensed practical nurse submits to the board of nurse registration and nursing
11 education written evidence on forms furnished by the division of professional regulation, verified
12 by oath, that the applicant:

13 (1) Has completed the preliminary educational requirements prescribed by the board;

14 (2) Has successfully completed the prescribed curriculum in a ~~an~~ state-approved program
15 of practical nursing and holds a diploma or certificate from the program ~~if the applicant has not~~
16 ~~been previously licensed~~; and

17 (3) Is of good moral character.

18 **5-34-18. Signature on licenses for nursing.** -- All original licenses to practice nursing
19 either as a professional or practical nurse under this chapter ~~is~~ are signed by the president and
20 ~~executive secretary of the board~~ the director of nurse registration and nursing education, ~~the~~
21 ~~administrator of professional regulation~~, and the director of health.

22 **5-34-19. Expiration and renewal of licenses.** -- (a) The license of every person licensed
23 under this chapter expires on the first day of March of every other year following the date of
24 license. ~~This will be determined on an odd-even basis.~~ On or before the first day of January of
25 every year, ~~the administrator of professional regulation~~ the director mails an application for
26 renewal of license to people scheduled to be licensed that year ~~on an odd-even basis with respect~~
27 ~~to the license number~~. Every person who wishes to renew his or her license files with the
28 ~~administrator of professional regulation department~~ a renewal application duly executed together
29 with the renewal fee of sixty-two dollars and fifty cents (\$62.50).

30 (b) Upon receipt of an application accompanied by payment of fees, the ~~administrator of~~
31 ~~professional regulation department~~ grants a renewal license effective March second and expiring
32 two (2) years later on March first, and that renewal license renders the holder a legal practitioner
33 of nursing for the period stated on the certificate of renewal; provided that every person seeking
34 renewal of a license hereunder shall provide evidence of such continuing education as the board

1 shall require by regulation unless the board exempts the training and experience of any such
2 person in lieu of said continuing education requirement. The board shall promulgate rules and
3 regulations as to the type and amount of continuing education required for such nurse as a
4 qualification for licensing or relicensing; criteria for approved programs, which shall not exclude
5 programs offered by health care facilities licensed by the department of health or institutions
6 chartered by the state; procedure for approval of such programs; mechanism for the verifications
7 of compliance by each person seeking renewal or registration and provision for inactive status.

8 (c) Any person practicing nursing during the time his or her license has lapsed is
9 considered an illegal practitioner and is subject to the penalties provided for violation of this
10 chapter.

11 (d) A licensee whose license has expired by failure to renew may apply for reinstatement
12 according to the rules established by the board. Upon satisfaction of the requirements for
13 reinstatement, the board shall issue a renewal of license.

14 **5-34-20. Transfer to inactive list -- Reinstatement.** -- A nurse who does not intend to
15 practice nursing during the two (2) year period, upon written request to the ~~administrator of~~
16 ~~professional regulation~~ department, may have his or her name transferred to an inactive list and is
17 not required to pay the renewal fee for as long as the inactive status is maintained. ~~Should that~~
18 ~~nurse resume practice at some future time, he or she notifies the administrator of professional~~
19 ~~regulation and remits the renewal fee, and the license is reinstated.~~ A licensee whose license has
20 been transferred to the inactive list may apply for reactivation according to the rules established
21 by the board. Upon satisfaction of the requirements for reinstatement, the department shall issue
22 a renewal of license.

23 **5-34-24.1. Nondisciplinary alternative.** -- The board of nurse registration and nursing
24 education may provide for a nondisciplinary alternative in situations involving alcohol and drug
25 abuse; provided, that the nurse agrees to voluntarily participate in a program of treatment and
26 rehabilitation. All records pertaining to a nurse's participation in the nondisciplinary program are
27 confidential and not subject to discovery, subpoena or public disclosure. Provided, that
28 information related to the nondisciplinary program is provided to the nurse's employer to ensure
29 adequate worksite monitoring and compliance.

30 **5-34-25. Procedure for discipline of licensees.** -- (a) Upon filing a timely ~~sworn~~ written
31 complaint within a time period the board considers reasonable with the board charging a person
32 with having been guilty of any of the actions specified in section 534-24, two (2) or more
33 members of the board of nurse registration and nursing education ~~immediately~~ shall investigate
34 those charges, or the board, after investigation, may institute charges.

1 (b) In the event that investigation, in the opinion of the board, reveals reasonable grounds
2 for believing the applicant or licensee is guilty of the charges, the board ~~fixes a time and place for~~
3 ~~a hearing of the charges and causes a copy of the charges, together with a notice of the time and~~
4 ~~place fixed for the hearing, to be personally served upon the accused~~ shall notify the licensee of
5 the charges and the time and place for a hearing at least twenty (20) days prior to the time fixed
6 for the hearing. ~~When personal service cannot be effected and that fact is certified by oath by any~~
7 ~~person authorized to make service, the board causes to be published once in each of two (2)~~
8 ~~successive weeks a notice of the hearing in a newspaper published in the county where the~~
9 ~~defendant last resided according to the records of the board and mails a copy of the charges and~~
10 ~~the notice to the accused at his or her last known address. When publication of notice is~~
11 ~~necessary, the date of the hearing is not less than twenty (20) days after the last date of~~
12 ~~publication of the notice.~~ At the hearing, the accused has the right to appear personally, or by
13 counsel, or both, to produce witnesses and to have subpoenas issued by the board. The attendance
14 of witnesses and the production of books, documents, and papers at the hearing may be
15 compelled by subpoenas issued by the board, which is served in accordance with the law. At the
16 hearing, the board administers oaths that may be necessary for the proper conduct of the hearing.
17 The board is not bound by the strict rules of procedure or by the laws of evidence in the conduct
18 of its proceedings, but the determination is based upon sufficient legal evidence to sustain it. The
19 board shall complete the investigation of each complaint and issue a decision within six (6)
20 months of the receipt of the complaint; provided, however, that the board may extend the time for
21 issuing its decision beyond the initial six (6) month period in documented cases in which delays
22 in the process are the direct result of requests or actions by the accused and/or his or her
23 representative(s) or other good cause. The board, on a case by case basis, for good cause shown in
24 writing, may extend the time for issuing its decision. If the accused is found guilty of the charges,
25 the board may revoke, suspend, or otherwise discipline a licensee. ~~If the accused is found guilty~~
26 ~~of the charges, the board may revoke, suspend, or discipline a licensee.~~

27 ~~(b) Upon revocation or suspension of a license, the holder surrenders the license to the~~
28 ~~administrator of professional regulation, who strikes the name of the holder from the current~~
29 ~~roster of licensed nurses. The date and action taken is recorded. The case of a licensee with a~~
30 ~~revoked or suspended license is reviewed at the discretion of the board. The case of a licensee~~
31 ~~who was reprimanded or disciplined by the board should be recorded as to the date and the action~~
32 ~~taken and may be reviewed at the discretion of the board.~~

33 (c) All hearings held under this section shall be conducted in accordance with the
34 provisions of chapter 42-35 entitled "Administrative Procedures Act."

1 **5-34-26. Grounds for discipline without a hearing.** -- ~~In the event a person is~~
2 ~~hospitalized for mental illness, or for substance abuse, the board may, without the necessity of the~~
3 ~~proceedings provided for in section 5-34-25, suspend or refuse to renew the license of that person~~
4 ~~for the duration of that confinement or until that person is medically discharged from that~~
5 ~~hospitalization.~~ The director may temporarily suspend the license of a nurse without a hearing if
6 the director finds that evidence in his or her possession indicates that a nurse's continuation in
7 practice would constitute an immediate danger to the public. In the event that the director
8 temporarily suspends the license of a nurse without a hearing, a hearing by the board must be held
9 within ten (10) days after the suspension has occurred.

10 **5-34-31. Practices and persons exempt.** -- No provisions of this chapter are construed
11 as prohibiting: (1) gratuitous nursing by friends or members of the family or as prohibiting the
12 care of the sick by domestic servants, housekeepers, nursemaids, companions, or household aides
13 of any type, whether employed regularly or because of an emergency of illness, provided that
14 person is employed primarily in a domestic capacity and does not hold himself or herself out or
15 accept employment as a person licensed to practice nursing for hire under the provisions of this
16 chapter or as prohibiting nursing assistants in the case of any emergency; (2) the practice of
17 nursing by students enrolled in approved educational programs of professional nursing or
18 practical nursing educational programs nor by graduates of those schools or courses pending the
19 results of the licensing examinations following that graduation, provided that they are licensed in
20 this state within ninety (90) days from the date on the application fee receipt, in accordance with
21 regulations prescribed by the board; (3) the practice of nursing in this state by any legally
22 qualified nurse of another state whose engagement requires him or her to accompany and care for
23 a patient temporarily residing in this state during the period of this engagement not to exceed six
24 (6) months in length, provided that person does not represent or hold himself or herself out as a
25 nurse licensed to practice in this state; (4) the practice of any legally qualified nurse of another
26 state who is employed by the United States government or any bureau, division, or agency of the
27 government while in the discharge of his or her official duties; (5) persons employed in state and
28 licensed hospitals and sanatoria, licensed homes for the aged and/or convalescent persons, and
29 recognized public health agencies from assisting in the nursing care of patients if adequate
30 medical or nursing supervision is provided; (6) nursing care of the sick with or without
31 compensation or personal profit when done in connection with the practice of the religious tenets
32 of any recognized or established church by adherents as long as they do not engage in the practice
33 of nursing as defined in this chapter; (7) persons who provide acceptable evidence of being
34 currently licensed by examination or endorsement under the laws of other states of the United

1 States and the District of Columbia from practicing nursing in this state for a period of ninety (90)
2 days from the date on the application fee receipt, provided that they are licensed in this state
3 within ninety (90) days from the date on the application fee receipt. The original privilege to
4 work ninety (90) days from the date on the application fee receipt is not extended or renewed.

5 **5-34-35. Qualifications of a certified registered nurse practitioner applicant. – (a)**

6 An applicant for licensure to practice as a certified registered nurse practitioner submits to the
7 board of nurse registration and nursing education written evidence on forms furnished by the
8 division of professional regulation, verified by oath, that ~~the applicant:~~

9 (1) ~~Is~~ The applicant is a registered nurse who has completed an accredited educational
10 program resulting in a master's degree in nursing and/or an approved nurse practitioner course of
11 study. This curriculum must include both a didactic component and supervised clinical
12 experience. Effective January 1, 2004 all applicants for initial licensure must complete an
13 accredited educational program resulting in a master's degree with a major in nursing.

14 (2) ~~Passed~~ The applicant passed a national qualifying examination recognized by the
15 board of nurse registration and nursing education.

16 (b) A license to practice as a certified registered nurse practitioner may be issued to an
17 applicant who is licensed by examination or endorsement as a certified registered nurse
18 practitioner under the laws of another state or territory if, in the opinion of the board, the
19 applicant meets the qualifications required of certified registered nurse practitioners in this state.

20 **5-34-39. Process for prescriptive privileges of certified registered nurse practitioner**

21 ~~--Formulary committee~~ **Process for prescriptive privileges of certified registered nurse**
22 **practitioner. --** (a) Prescriptive privileges for the certified registered nurse practitioner:

23 (1) Are granted under the governance and supervision of the ~~division of professional~~
24 ~~regulation~~ department, board of nurse registration and nurse education; and

25 (2) Include prescription of legend medications and prescription of controlled substances
26 from schedules II, III, IV and V that are established in regulation ~~by the director with the advice~~
27 ~~of the formulary committee established by this section;~~ and

28 (3) Must not include controlled substances from Schedule I.

29 (b) ~~The director of the department of health establishes a formulary committee to~~
30 ~~develop a formulary to carry out the provisions of this section. The formulary is updated annually~~
31 ~~by the formulary committee. Each setting where these privileges are allowed, may further restrict~~
32 ~~the formulary according to their own protocols. The committee consists of two (2) physicians,~~
33 ~~from a list submitted by the Rhode Island medical society, one pharmacist, from a list submitted~~
34 ~~by the Rhode Island pharmaceutical association, two (2) certified registered nurse practitioners,~~

1 ~~from a list submitted by the Rhode Island state nurses association and one who is the department~~
2 ~~of health's drug control administrator or designee. The committee submits a completed formulary~~
3 ~~to the director of the department of health of the state by September 1, 1996.~~

4 (e) (b) Each committee member is initially appointed for a one year term by the director
5 of the department of health. At the expiration of the one year term, one certified registered nurse
6 practitioner is appointed for a three (3) year term, one certified registered nurse practitioner is
7 appointed for a two (2) year term; one physician is appointed for a three (3) year term, one
8 physician is appointed for a two (2) year term; one pharmacist is appointed for a three (3) year
9 term. Subsequently, each appointment is for three (3) years with no member serving more than
10 two (2) consecutive three (3) year terms.

11 (d) (c) A certified registered nurse practitioner (R.N.P.) as stated in section 5-34-3 is
12 permitted to prescribe ~~from the formulary established by the formulary committee~~ in accordance
13 with annually updated guidelines, written in collaboration with the medical director or physician
14 consultant of their individual establishments.

15 (e) (d) To qualify for prescriptive privileges an applicant must submit on forms provided
16 by the board of nurse registration and nursing education, verified by oath, that the applicant has
17 evidence of completion of thirty (30) hours of education in pharmacology within the three (3)
18 year period immediately prior to date of application. To maintain prescriptive privileges the
19 certified registered nurse practitioner (R.N.P.) must submit upon request of the board of nurse
20 registration and nursing education evidence of thirty (30) hours continuing education in
21 pharmacology every six (6) years.

22 **5-34-40. Nurse practitioner joint practice advisory committee Certified registered**
23 **nurse practitioner joint practice advisory committee.** -- (a) The seven (7) member committee
24 consists of three (3) physicians, three (3) certified registered nurse practitioners, and one
25 consumer. The governor appoints three (3) physicians to the committee from the following
26 specialties -- adult medicine, pediatric medicine, and obstetrical-gynecological medicine. The
27 governor appoints three (3) certified registered nurse practitioners from the following specialties -
28 - adult nurse practitioner, pediatric nurse practitioner, and obstetrical-gynecological nurse
29 practitioner. The professional members of the committee are currently engaged in a collaborative
30 certified registered nurse practitioner-physician care practice. The consumer member is appointed
31 by the director of the department of health of the state. The consumer member is (1)
32 knowledgeable in consumer health concerns; (2) a resident of the state; (3) not licensed as a
33 health care practitioner; (4) not a parent, spouse, sibling, or child of a person licensed as a health
34 care practitioner, and not a student in a professional program; (5) not having a direct financial

1 interest in health care services; (6) not a member or an employee of any board of control of any
2 public or private health care service.

3 (b) ~~Each professional committee member and the consumer member are initially~~
4 ~~appointed for a one year term. At the expiration of the one year term, one certified registered~~
5 ~~nurse practitioner and one physician shall be appointed for a three (3) year term, one certified~~
6 ~~registered nurse practitioner and one physician are appointed for a two (2) year term, and one~~
7 ~~certified registered nurse practitioner, one physician and the consumer member are appointed for~~
8 ~~a one year term. Subsequently, each Each member appointment is for three (3) years, with no~~
9 member serving more than two (2) consecutive three (3) year terms.

10 (c) This committee must meet not fewer than two (2) times per year. The committee has
11 the following functions:

12 (1) To assess nurse practitioner joint primary care practice for the purpose of improving
13 patient care.

14 (2) Review complaints regarding certified registered nurse practitioners, and recommend
15 any disciplinary or corrective action that they deem appropriate, including revocation and
16 suspension of certification, upon proof that a nurse practitioner has:

17 (i) Aided or abetted an uncertified person to practice as a nurse practitioner;

18 (ii) Become addicted to the use of liquor or controlled substances;

19 (iii) Negligently, willfully, or intentionally acted in a manner inconsistent with the health
20 and safety of persons entrusted to his or her care;

21 (iv) Had his or her authorization to practice as a nurse practitioner denied, revoked or
22 suspended in another state;

23 (v) Engaged in the performance of medical functions beyond the scope of practice
24 authorized by the provisions of this chapter;

25 (vi) Willfully failed to file or record medical records and reports; or

26 (vii) Mental incompetence.

27 (3) The recommendation is submitted to the board of ~~nursing~~ for implementation,
28 ~~subject to the approval of the director of health. Provided, that the board of nursing may, if they~~
29 ~~have clear and convincing evidence that actions of the nurse practitioner that led to the~~
30 ~~recommendation is more appropriately the responsibility of their board, request that the director~~
31 ~~of health review the case and make a determination as to which entity has responsibility for the~~
32 ~~case.~~

33 (4) Report periodically to the board of nurse registration and nursing education regarding
34 certified registered nurse practitioner practice.

1 ~~5-34-41. Process for prescriptive privileges of psychiatric and mental health nurse~~
2 ~~clinical specialist -- Formulary committee~~ **Process for prescriptive privileges of psychiatric**
3 **and mental health clinical nurse specialist. --** (a) Prescriptive privileges for the psychiatric and

4 mental health clinical nurse ~~clinical~~ specialist:

5 (1) Are granted under the governance and supervision of the division of professional
6 regulations, board of nurse registration and nurse education; and

7 (2) Include prescription of certain psychotropic and certain legend medications; and
8 prescription of controlled substances from Schedule IV, that are prescribed in regulations ~~by the~~
9 ~~director with the advice and consent of the formulary committee established by this section; and~~

10 (3) Do not include controlled substances from Schedules I, II, III and V and those certain
11 legend medications not included in subdivision (2).

12 ~~(b) The director of the department of health establishes a formulary committee to~~
13 ~~develop a formulary to carry out the provisions of this section. The formulary is updated annually~~
14 ~~by the formulary committee. Each setting may further restrict the formulary according to their~~
15 ~~own protocols. The committee consists of two (2) psychiatrists from a list submitted by the R.I.~~
16 ~~Medical Society, two (2) psychiatric and mental health nurse clinical specialists, from a list~~
17 ~~submitted by the R.I. State Nurses Association, one pharmacist, from a list submitted by the R.I.~~
18 ~~Pharmacists Association, and one who is the department of health's chairperson of the board of~~
19 ~~pharmacy or designee. The committee must submit a completed formulary to the director of the~~
20 ~~department of health of the state of R.I. by September 1, 1997.~~

21 ~~(c) Each committee member is initially appointed for a one year term by the director of~~
22 ~~the department of health. At the expiration of the one year term, one psychiatrist is appointed for~~
23 ~~a three (3) year term and one psychiatrist is appointed for a two (2) year term; one psychiatric and~~
24 ~~mental health nurse clinical specialists is appointed for a three (3) year term and one psychiatric~~
25 ~~and mental health nurse clinical specialists is appointed for a two (2) year term; the pharmacist is~~
26 ~~appointed to a three (3) year term. Subsequently, each appointment is for three (3) years with no~~
27 ~~member serving more than two (2) consecutive three (3) year terms.~~

28 ~~(d)~~ (b) A psychiatric and mental health clinical nurse ~~clinical~~ specialist as stated in
29 section 5-34-3, is permitted to prescribe ~~from the formulary established by the formulary~~
30 ~~committee~~ in accordance with annually updated guidelines, written in collaboration with the
31 medical director or physician consultant of their individual establishments.

32 (e) (c) Provided, that a psychiatric and mental health clinical nurse ~~clinical~~ specialist in
33 independent practice does not have prescriptive privileges.

34 (f) (d) To qualify for prescriptive privileges a psychiatric and mental health clinical nurse

1 ~~clinical~~ specialist, as stated in section 5-34-3, submits on forms provided by the board of nurse
2 registration and nursing education, verified by oath, that the applicant has evidence of completion
3 of thirty (30) hours of education in pharmacology of psychotropic drugs and certain legend
4 medications within the three (3) year period immediately prior to date of application. To maintain
5 prescriptive privileges the psychiatric and mental health clinical nurse ~~clinical~~ specialist must
6 submit upon request of the board of nurse registration and nursing education evidence of thirty
7 (30) hours continuing education in pharmacology of psychotropic drugs every six (6) years.

8 SECTION 3. Chapter 5-34 of the General Laws entitled "Nurses" is hereby amended by
9 adding thereto the following section:

10 **5-34-40.1. Qualifications of a psychiatric and mental health clinical nurse specialist**

11 **applicant.** – (a) An applicant for licensure as a psychiatric and metal health clinical nurse
12 specialist submits to the board written evidence on forms furnished by the department of health,
13 verified by oath, that the applicant: (1) Is a registered nurse who has completed an accredited
14 educational program resulting in a master's degree in psychiatric and mental health nursing. This
15 curriculum must include both a didactic component and supervised clinical experience; (2) Passed
16 a national qualifying examination recognized by the board.

17 (b) All persons who are engaged in the practice of a psychiatric and mental health clinical
18 nurse specialist on July 1, 2003 who meet the definition in section 5-34-3(i) may be considered to
19 have met the qualifications for licensure providing they have three (3) years experience
20 acceptable to the board between January 1, 1997 and January 1, 2003. After January 1, 2004, no
21 initial license shall be issued unless an applicant meets all of the requirements of section 5-34-
22 40.1(a).

23 **5-34-40.2. Licensing of psychiatric and mental health clinical nurse specialists.** – A

24 license to practice as a psychiatric clinical nurse specialist is issued if the applicant meets the
25 qualifications for the psychiatric and mental health clinical nurse specialist (C.N.S.). Persons
26 who meet the qualifications of a psychiatric and mental health clinical nurse specialist, as stated
27 in section 5-34-40.1, and are currently licensed as psychiatric and mental health clinical nurse
28 specialists by examination or endorsement under the laws of another state or territory of the
29 United States and/or the District of Columbia are allowed to practice as psychiatric and mental
30 health clinical nurse specialists in this state for a period not to exceed ninety (90) days from the
31 date of clearance by the board of nurse registration and nursing education of the Rhode Island
32 department of health, provided that they are licensed in this state within ninety (90) days. The
33 original privilege to work ninety (90) days from the date of clearance in not extended or renewed.

34 **5-34-40.3. Application fee for psychiatric and mental health clinical nurse**

1 specialists. – The initial application fee for licensure as a psychiatric and mental health clinical
2 nurse specialist is ninety-three dollars and seventy-five cents (\$93.75). The renewal fee for a
3 psychiatric and mental health clinical nurse specialist is eighty-seven dollars and fifty cents
4 (\$87.50) biennially, sixty-two dollars and fifty cents (\$62.50) for the registered nurse fee plus
5 twenty-five dollars (\$25.00) for the psychiatric and mental health clinical nurse specialist. The
6 fee for application for prescriptive privileges is thirty-one dollars and twenty-five cents (\$31.25).

7 **5-34-40.4. Right to use psychiatric and mental health clinical nurse specialist title. –**

8 Any person who holds a license to practice as a psychiatric and mental health clinical nurse
9 specialist in this state has the right to use the title psychiatric and mental health clinical nurse
10 specialist and use the abbreviation "P.C.N.S." No other person may assume that title or use that
11 abbreviation or any other words or letters, signs, figures, or devices to indicate that the person
12 using it is a psychiatric and mental health clinical nurse specialist.

13 SECTION 4. Sections 5-34-22, 5-34-23, 5-34-24.2, 5-34-24.3 and 5-34-24.4 of the
14 General Laws in Chapter 5-34 entitled "Nurses" are hereby repealed.

15 **5-34-22. Application for evaluation and approval of basic nursing education**

16 **programs. –** ~~An institution desiring to conduct an educational program of professional or~~
17 ~~practical nursing applies to the board of nurse registration and nursing education and submits~~
18 ~~evidence that:~~

19 ~~–(1) It is prepared to carry out the program in accordance with the board prescribed~~
20 ~~curriculum standards for professional or practical nursing education; and~~

21 ~~–(2) It is prepared to meet other standards and criteria established in accordance with this~~
22 ~~chapter by the board.~~

23 **5-34-23. Process for initial and continuing evaluation and approval of basic nursing**

24 **education programs. –** ~~Utilizing the board prescribed criteria and curriculum standards for basic~~
25 ~~professional practical nursing education programs, a site visit and an initial evaluation of a new~~
26 ~~basic nursing education program is made by the state director of nursing education and/or another~~
27 ~~authorized representative of the board of nurse registration and nursing education, who submits a~~
28 ~~written report of the findings to the board. If, in the opinion of the board, the criteria are met by~~
29 ~~the institution, the board grants the program initial approval. Periodically, as deemed necessary~~
30 ~~by the board, it is the duty of the board, through the state director of nursing education or other~~
31 ~~authorized representative of the board, to re-evaluate all basic nursing education programs in this~~
32 ~~state. Written reports of that evaluation are submitted to the board. If the board determines that~~
33 ~~any approved program of basic nursing education is not maintaining the standards prescribed by~~
34 ~~the board, notice, in writing, of that deficit is immediately communicated, in writing, to the~~

1 ~~program director by the board. A program which fails to correct these conditions to the~~
2 ~~satisfaction of the board within a reasonable time and following a hearing on this may be~~
3 ~~removed from the list of state approved programs of basic nursing education until the time the~~
4 ~~program complies with the standards required by the board. All approved programs must~~
5 ~~maintain ocuring or attempting to procure a license to practice nursing;~~

6 ~~(2) Guilty of a crime of gross immorality;~~

7 ~~(3) Unfit or incompetent by reason of negligence or habits;~~

8 ~~(4) Habitually intemperate or is addicted to the use of habit forming drugs;~~

9 ~~(5) Mentally incompetent;~~

10 ~~(6) Guilty of unprofessional conduct which includes, but is not limited to, all of the~~
11 ~~above and also:~~

12 ~~(i) Abandonment of a patient;~~

13 ~~(ii) Willfully making and filing false reports or records in the practice of nursing;~~

14 ~~(iii) Willful omission to file or record nursing records and reports required by law;~~

15 ~~(iv) Failure to furnish appropriate details of a client's nursing needs to succeeding nurses~~
16 ~~legally qualified to provide continuing nursing services to a client;~~

17 ~~(v) Willful disregard of standards of nursing practice and failure to maintain standards~~
18 ~~established by the nursing profession; or~~

19 ~~(7) Guilty of and willfully or repeatedly violating any of the provisions of this chapter~~
20 ~~and/or rule or regulation adopted thereunder.~~

21 ~~**5-34-24.2. Criteria which disqualify a nurse from participating in a nondisciplinary**~~
22 ~~**substance abuse program.** -- (1) Nurse previously enrolled in the nondisciplinary program and~~
23 ~~referred to the board of action.~~

24 ~~(2) Nurse who has diverted drugs;~~

25 ~~(3) Nurse convicted of the sale, distribution or manufacture of illegal substances;~~

26 ~~(4) Severity of a chemical dependency problem that represents a clear and present danger~~
27 ~~to patient health and safety;~~

28 ~~(5) Any other criteria established by the board of nursing by regulation.~~

29 ~~**5-34-24.3. Criteria for admission to the program.** -- (a) A nurse may be considered for~~
30 ~~a nondisciplinary program in the following ways:~~

31 ~~(1) By self referral;~~

32 ~~(2) By employer referral;~~

33 ~~(3) By identification of chemical dependency in conjunction with a sworn complaint~~
34 ~~filed against the nurse; or~~

1 ~~(4) By referral from a family member, friend, nurse peer, another nurse or professional~~
2 ~~nurse association, or other health care provider.~~

3 ~~(b) If the nurse does not agree to voluntarily participate in a treatment program protocol~~
4 ~~approved by the board of nursing, or fails to satisfactorily complete a treatment program, the~~
5 ~~board of nursing is informed and initiates disciplinary proceedings.~~

6 ~~**5-34-24.4. Advisory panel.** -- A nondisciplinary alternative advisory panel is established~~
7 ~~to assist the department of health in developing rules and regulations pursuant to this chapter. The~~
8 ~~panel, appointed by the director of the department of health, consists of eight (8) members as~~
9 ~~follows:~~

10 ~~(1) One person who is a member of the nurse executive committee of the hospital~~
11 ~~association of Rhode Island designated by the president of the hospital association.~~

12 ~~(2) One person who is a member of an employee assistance program in Rhode Island~~
13 ~~designated by the director of the department of health.~~

14 ~~(3) One person who is a member of the Rhode Island state nurses association designated~~
15 ~~by its president.~~

16 ~~(4) One person who is a member of the American federation of teachers/federation of~~
17 ~~health professionals designated by its president.~~

18 ~~(5) One person who is a member of the Rhode Island health care association designated~~
19 ~~by its president.~~

20 ~~(6) One person who is a member of the Rhode Island association of facilities for the~~
21 ~~aging designated by its president.~~

22 ~~(7) One person who is a member of Rhode Island visiting nurse association designated~~
23 ~~by its president.~~

24 ~~(8) One person who is a member of New England health care employees union, district~~
25 ~~1199 designated by its president.~~

26 SECTION 5. This act shall take effect upon passage.

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LC02148
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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO BUSINESSES AND PROFESSIONS -- NURSES

1 This act would amend the nursing statute, would establish licensure for clinical nurse
2 specialists as a basis for granting prescribing privileges, would enhance diversion program to
3 allow broadest possible scope for assisting nurses and would revise board membership to include
4 two advanced practice nurses, two additional clinical nurses, would reduce from four to three the
5 educator representation and would reduce by one the LPN representation.

6 This act would take effect upon passage.

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LC02148
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