

**Kansas Board of Nursing
Landon State Office Building, Room 509
APRN Committee Agenda
June 13, 2023**

NOTE: The audience may attend in person or via Zoom. Link to access meeting to follow agenda.

Time: 2:00 p.m. – 3:00 p.m.

Committee Members:

Melissa Oropeza, DNP, APRN-BC, CGRN, Chair
Rebecca Sander, MSN, RN, V-Chair
Jamie Harrington, DNP, APRN, CNM, FNP-BC
Dawn Gosnell, MSN, APRN, CNS, CCRN
Benjamin Cochran, DNP, APRN, NP-C
Josie Bell, MHS, DNAP, CRNA
Shannon Gregg, APRN-C - KTRACS

Staff: Carol Moreland, MSN, RN – Executive Administrator
Jill Simons – Executive Assistant

- I. Call to Order
- II. Review of on-site packet
- III. Additions/Revisions to the agenda
- IV. Announcements
- V. Approval of minutes – March 21, 2023
- VI. Unfinished Business
 1. Prescription Monitoring Program (PMP) Committee Report – Shannon Gregg
 2. Update on CNM-I Regulations
 3. Implementation of HB 2279: APRN Board Approved National Certification Organizations
 4. Five Year Legislative Review Update
 - a. K.S.A. 65-1153 – Temporary authorization to practice
 - b. K.S.A. 65-1154 – Application; fees; deposit of moneys
 - c. K.S.A. 65-1163 – Application of act
 - d. K.A.R. 60-11-106 – Functions of Nurse Anesthetist
 - e. K.A.R. 60-13-112 – Approval of RNA CNE
- VII. New Business
 1. Report on APRN Programs approved for licensure
 2. Graduate Preceptor Qualifications – K.A.R. 60-17-104
 3. Clinical Hours Requirement – K.A.R. 60-17-105
- VIII. Agenda for September 2023 Committee meeting
- IX. Adjourn

Please note: Additional items which have come to the attention of the Board or Committee will be handled as time permits. Agenda is subject to change based upon items to come before the Board. Handouts or copies of materials brought to the Board or Committee for discussion by Committee Members or visitors must be submitted to staff 30 calendar days prior to start of the meeting. Any items received after the 30th calendar day may be addressed at the meeting at the discretion of the President of the Board or Chairperson of the Committee.

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/88413738427?pwd=K294VFpJVTgva2JOSzI1eDFOSnRsUT09>

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+13126266799,,88413738427#,,,,*0515285503# US (Chicago)

Or Telephone:

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+1 646 876 9923 US (New York)

+1 646 931 3860 US

+1 669 444 9171 US

+1 669 900 6833 US (San Jose)

+1 689 278 1000 US

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+1 253 205 0468 US

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65-1153. Temporary authorization to practice. The board may grant a temporary authorization to practice nurse anesthesia as a registered nurse anesthetist: (a) For a period of not more than one year to graduates of a school of nurse anesthesia approved by the board pending results of the initial examination; or
(b) for the needed amount of time to complete the clinical portion of a refresher course; or
(c) for a period not to exceed 120 days.

History: L. 1986, ch. 183, § 3; L. 1992, ch. 135, § 4; L. 1996, ch. 179, § 3; L. 2000, ch. 113, § 4; L. 2001, ch. 161, § 9; July 1.

65-1154. Application; fees; deposit of moneys. Upon application to the board by any licensed professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. [65-1130](#), and amendments thereto, the board shall grant an authorization to the applicant to perform the duties of a registered nurse anesthetist and be licensed as an advanced practice registered nurse. An application to the board for an authorization, for an authorization with temporary authorization, for biennial renewal of authorization, for reinstatement of authorization and for reinstatement of authorization with temporary authorization shall be upon such form and contain such information as the board may require and shall be accompanied by a fee to assist in defraying the expenses in connection with the administration of the provisions of this act. The fee shall be fixed by rules and regulations adopted by the board in an amount fixed by the board under K.S.A. [65-1118](#), and amendments thereto. There shall be no fee assessed for the initial, renewal or reinstatement of the advanced practice registered nurse license as long as the registered nurse anesthetist maintains authorization. The executive administrator of the board shall remit all moneys received to the state treasurer as provided by K.S.A. [74-1108](#), and amendments thereto.

History: L. 1986, ch. 183, § 4; L. 1992, ch. 135, § 5; L. 1996, ch. 179, § 4; L. 2011, ch. 114, § 48; January 1, 2012.

65-1163. Application of act. Nothing in this act shall:

(a) Prohibit administration of a drug by a duly licensed professional nurse, licensed practical nurse or other duly authorized person for the alleviation of pain, including administration of local anesthetics;

(b) apply to the practice of anesthesia by a person licensed to practice medicine and surgery, a licensed dentist or a licensed podiatrist;

(c) prohibit the practice of nurse anesthesia by students enrolled in approved courses of study in the administration of anesthesia or analgesic as a part of such course of study;

(d) apply to the administration of a pudendal block by a person who holds a valid license as an advanced practice registered nurse in the role of nurse-midwife;

(e) apply to the administration by a licensed professional nurse of an anesthetic, other than general anesthesia, for a dental operation under the direct supervision of a licensed dentist or for a dental operation under the direct supervision of a person licensed to practice medicine and surgery;

(f) prohibit the practice by any registered nurse anesthetist who is employed by the United States government or in any bureau, division or agency thereof, while in the discharge of official duties; or

(g) prohibit a registered professional nurse from administering general anesthetic agents to a patient on ventilator maintenance in critical care units when under the direction of a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

History: L. 1986, ch. 183, § 13; L. 1988, ch. 246, § 15; L. 1996, ch. 179, § 7; L. 2001, ch. 161, § 10; L. 2011, ch. 114, § 49; January 1, 2012.

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

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60-11-106. Functions of the advanced practice registered nurse; nurse anesthetist. The functions that may be performed by any advanced practice registered nurse functioning in the advanced role of registered nurse anesthetist shall be those functions defined in K.S.A. 65-1158, and amendments thereto. (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended March 31, 2000; amended May 18, 2012.)

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Agency 60

State Board of Nursing

Article 13.—Fees; Registered Nurse Anesthetist

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60-13-112. License renewal. (a) Each license to practice as a registered nurse anesthetist (RNA) in Kansas shall be subject to the same biennial expiration dates as those specified in K.A.R. 60-3-108 for the registered professional nurse license in Kansas.

(b) Each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to nurse anesthesia during the most recent prior licensure period. Proof of completion of 30 contact hours of approved CNE in the nurse anesthesia role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.

(c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.

(d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of nurse anesthesia. Each separate offering shall be approved before the individual submits the license renewal application.

(e) Approval shall not be granted for identical offerings completed within the same license renewal period.

(f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.

(g) Fractions of contact hours may be accepted for offerings over 30 minutes.

(h) All CNE accumulated for RNA license renewal shall also be applicable to the renewal of the registered professional nurse license. (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1159; effective Sept. 2, 1991; amended Feb. 16, 1996; amended Oct. 12, 2001; amended July 29, 2005; amended May 18, 2012.)

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**Advanced Practice Programs Approved for Licensure February 2023 through
May 2023**

Program	Role/Specialty	Degree	Advanced Pathophysiology Credit Hrs	Advanced Health Assessment Credit Hours	Advanced Pharmacology Credit Hours	Total Clinical Hrs	Accreditation	Meets Requirements
Colorado Mesa university	FNP	MSN	3	3	3	700	CCNE	Yes
Southeast Missouri University	FNP	MSN	4	4	4	765	CCNE	Yes
University of Southern Maine	FNP	MSN	3	4	3	600	CCNE	Yes

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KSBN ADMINISTRATION

NURSING

February 27, 2023

Ms. Janelle Martin, MHSA, RN
KSBN Education Chair
Kansas State Board of Nursing
900 SW Jackson Street
Topeka, KS 66612-1230

Ms. Martin:

We are writing to respectfully request the Board of Nursing consider updating the definition of a preceptor for Advanced Practice Registered Nurses (APRN) in the Kansas Nurse Practice Act (NPA). APRNs and physicians are currently the only professions listed in the definition of a preceptor. The American Association of the Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculty (NONPF) highlight the importance of interprofessional education experiences. In order for APRN students in Kansas to obtain these experiences, the definition of a preceptor in the Nurse Practice Act would need to be updated.

We ask this proposal to be considered based on the following:

- The World Health Organization (WHO) encourages collaboration among healthcare disciplines to ensure the highest level of coordinated patient care (WHO, 2010).
- The AACN Strategic Plan includes "team-based, interprofessional care" as a goal for nursing education (AACN, n.d.).
- AACN includes principles of interprofessional collaboration in the Essentials, including Domains 1-10. Domain 6 is dedicated entirely to interprofessional collaboration (AACN, 2021).
- NONPF includes principles of interprofessional collaboration in several areas of their Core Competencies, including leadership, quality, practice inquiry, policy, and home delivery system (NONPF, n.d.).

Once in practice, all healthcare disciplines must work together to achieve the highest level of care for patients—this is especially true in rural and underserved areas. While it is important to have experiences between students of different professions, the same learning principles apply to student-preceptor relationships as well. It is imperative to have interprofessional experiences with students and educators during pre-licensure education to develop effective interprofessional collaboration skills. For these reasons, we ask the definition of preceptor for APRN students be updated to include other healthcare disciplines, including but not limited to licensed professionals who work in the population foci of the student. The importance of clinical hours with licensed Advanced Practice Nurse Practitioners and physicians cannot be overlooked, and therefore the majority of clinical hours should be done with those providers. This change would allow for additional, supplemental experiences to improve preparation for practice.

We've included a list of resources regarding this recommendation for change. Please do not hesitate to reach out if we can answer any questions for you.

Sincerely,



Michelle Knowles, MSN, APRN, FNP-BC, FAANP
FHSU DNP Simulation Coordinator



Dr. Michelle Van Der Wege, DNP, APRN, FNP-C
FHSU DNP Program Coordinator

Cc: Carol Moreland, MSN, RN
KSBN Executive Administrator

Resources

American Association of Colleges of Nursing (AACN). (2021). *The Essentials: Core Competencies for Professional Nursing Education*.

<https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf>

American Association of Colleges of Nursing (AACN). (n.d.) *Interprofessional Collaboration*.

<https://www.aacnnursing.org/Interprofessional-Education>

National Organization of Nurse Practitioner Faculty (NONPF). (2022). *National Organization of Nurse Practitioner Faculties' Nurse Practitioner Role Core Competencies*.

https://www.nonpf.org/page/NP_Role_Core_Competencies

World Health Organization (WHO). (2010). *Framework for action on interprofessional education & collaborative practice*. [https://www.who.int/publications/i/item/framework-for-action-on-](https://www.who.int/publications/i/item/framework-for-action-on-interprofessional-education-collaborative-practice)

[interprofessional-education-collaborative-practice](https://www.who.int/publications/i/item/framework-for-action-on-interprofessional-education-collaborative-practice)

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Agency 60

State Board of Nursing

Article 17.—Advanced Nursing Education Program

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60-17-104. Faculty and preceptor qualifications. (a) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.

(b) Each preceptor shall be licensed in the state in which the preceptor is currently practicing. Each preceptor shall complete a preceptor orientation that includes information about the pedagogical aspects of the student-preceptor relationship.

(c) For advanced nursing education programs in the role of nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:

(1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree.

(2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree.

(3) Each nurse faculty member responsible for clinical instruction shall possess a license as an advanced practice registered nurse and a graduate degree.

(d) For advanced nursing education programs in any role other than nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:

(1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree in nursing.

(2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.

(3) Each nurse faculty member responsible for coordinating clinical instruction shall possess a license as an advanced practice registered nurse in the role for which clinical instruction is provided and shall have a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.

(4) Each preceptor or adjunct faculty shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing. Each preceptor shall complete a preceptor orientation including information about the pedagogical aspects of the student-preceptor relationship.

(e) The nonnursing faculty of each advanced nursing education program shall have graduate degrees in the area of expertise.

(f) The nurse administrator of each advanced nursing education program shall submit to the board a faculty qualification report for each faculty member who is newly employed by the program. (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

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Agency 60

State Board of Nursing

Article 17.—Advanced Nursing Education Program

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60-17-105. Curriculum requirements. (a) The faculty in each advanced nursing education program shall fulfill these requirements:

- (1) Identify the competencies of the graduate for each role of advanced nursing practice for which the program provides instruction;
- (2) determine the approach and content for learning experiences;
- (3) direct clinical instruction as an integral part of the program; and
- (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or outcomes of advanced nursing courses.

(b) The curriculum in each advanced nursing education program shall include all of the following:

- (1) Role alignment related to the distinction between practice as a registered professional nurse and the advanced role of an advanced practice registered nurse as specified in K.A.R. 60-11-101;
 - (2) theoretical instruction in the role or roles of advanced nursing practice for which the program provides instruction;
 - (3) the health care delivery system;
 - (4) the ethical and legal implications of advanced nursing practice;
 - (5) three college hours in advanced pharmacology or the equivalent;
 - (6) three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent for licensure as an advanced practice registered nurse in a role other than nurse anesthesia and nurse midwifery;
 - (7) if completing an advanced practice registered nurse program after July 1, 2009, three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent; and
- (c) clinical instruction in the area of specialization, which shall include the following:

- (A) Performance of or ordering diagnostic procedures;
- (B) evaluation of diagnostic and assessment findings; and
- (C) the prescription of medications and other treatment modalities for client conditions.

(c) (1) Each program shall consist of at least 45 semester credit hours or the academic equivalent. As used in this regulation, "academic equivalent" shall mean the prorated proportionate credit for formal academic coursework if that coursework is completed on the basis of trimester or quarter hours rather than semester hours.

(2) The clinical component shall consist of at least 260 hours of clinical learning. After January 1, 2003, the clinical component shall consist of at least 500 hours of clinical learning. After July 1, 2009, the clinical component shall consist of at least 500 hours of clinical learning in each clinical track, or the program shall provide documentation of the overlap if any clinical track consists of less than 500 clinical hours.

(d) Each nurse administrator shall meet the following requirements:

- (1) Develop and implement a written plan for program evaluation; and
- (2) submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a meeting of the board. The following shall be considered major revisions to the curriculum:

- (A) Any significant change in the plan of curriculum organization; and
- (B) any change in content.

(e) Each nurse administrator shall submit all revisions that are not major revisions, as defined in paragraph (d)(2), to the board or the board's designee for approval. (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

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