Kansas Board of Nursing Landon State Office Building, Room 509 APRN Committee Agenda March 26, 2024

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 – absent with prior notice Rebecca Sander, MSN, RN, V-Chair Michaela Hysten, MSN, BSN, RN Kimberly Arthur, MSN, APRN, CMSRN, CSM, ACNS-BC Michele Reisinger, DNP, APRN, FNP-BC Kimyatta Brent, DNP, MS, CRNA Kelly Fritz, MSN, APRN, CNM Vacant – K-TRACS

- Staff: Carol Moreland, MSN, RN Executive Administrator Jill Simons – Executive Assistant
- I. Quorum (minimum of 4 members present) Yes or No
- II. Call to Order
- III. Review of on-site packet
- IV. Additions/Revisions to the agenda
- V. Announcements
- VI. Approval of minutes December 12, 2023

Consent Item Agenda

- 1. APRN Programs approved for Licensure
- VII. Unfinished Business
 - 1. Prescription Monitoring Program (PMP) Committee Report -
 - 2. Update on CNM-I Regulations
 - 3. Graduate Preceptor Qualifications K.A.R. 60-17-104
 - 4. Clinical Hours Requirement Draft K.A.R. 60-17-105 Revision
 - 5. New Regulations Review Process to be completed by March 2025 (0 of 20 completed)
 - a. APRN (all four roles)
 - 1. K.A.R. 60-11-101 Definition of expanded role
 - 2. K.A.R. 60-11-102 Roles of advanced practice registered nurses
 - 3. K.A.R. 60-11-103 Licensure and educational requirements for advanced practice registered nurses
 - 4. K.A.R. 60-11-113 License Renewal
 - 5. K.A.R. 60-11-116 Reinstatement of license

- 6. K.A.R. 60-11-118 Temporary permit to practice
- 7. K.A.R. 60-11-120 Expiration dates of licenses; applications
- 8. K.A.R. 60-11-121 Exempt license
- b. Nurse Practitioner
 - 1. K.A.R. 60-11-104 Functions of the advanced practice registered nurse in the role of nurse practitioner
 - 2. K.A.R. 60-11-104a Prescription orders
- c. Nurse Midwife
 - 1. K.A.R. 60-11-105 Functions of the advanced practice registered nurse in the role of nurse-midwife
 - 2. K.A.R. 60-11-104a Prescription orders
- d. Clinical Nurse Specialist
 - 1. K.A.R. 60-11-107 Functions of the advanced practice registered nurse in the role of clinical nurse specialist
- e. Nurse Anesthetist
 - 1. K.A.R. 60-11-106 Functions of the advanced practice registered nurse; nurse anesthetist
 - 2. K.A.R. 60-13-102 Approval procedure
 - 3. K.A.R. 60-13-103 School approval requirements
 - 4. K.A.R. 60-13-104 Exam approval
 - 5. K.A.R. 60-13-110 Reinstatement of authorization
 - 6. K.A.R. 60-13-111 Continuing education definitions
 - 7. K.A.R. 60 -13-112 License renewal
 - 8. K.A.R. 60-13-113 Approval of registered nurse anesthetist continuing education

VIII. New Business

- 1. Independent Nurse Midwives Council Vacancies
- 2. Five-year Statute Regulation Review
 - a.. K.S.A. 65-1152 Qualifications for authorization to practice as a registered nurse anesthetist
- 3. Committee description from KSBN Articles
- IX. Agenda for June 2024 Committee meeting
- X. Adjourn

Committee Responsibilities:

To review and recommend revisions to statutes and regulations for approval of APRN and RNA programs in collaboration with the Education Committee.

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/81239254414?pwd=OWNFUjR4RTRoU0RKOv9WbkOvNTlwdz09 Passcode: KsbnAPComm Or One tap mobile : +13462487799,,81239254414#,,,,*6681109343# US (Houston) +16694449171,,81239254414#,,,,*6681109343# US Or Telephone: Dial(for higher quality, dial a number based on your current location): +1 346 248 7799 US (Houston)

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+1 646 931 3860 US
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Webinar ID: 812 3925 4414
Passcode: 6681109343
International numbers available: <u>https://us02web.zoom.us/u/kvehWlaeh</u>

Consent Agenda Item 1

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Advanced Practice Programs Approved for Licensure December 2023 through February 2024

Program	Role/Speciality	Degree	Advanced Pathophysiology Credit Hrs	Advanced Health Assessment Credit Hours	Advanced Pharmacology Credit Hours	Total Clinical Hrs	Accreditation	Meets Requirements
Long Island								
University	FNP	MSN	3	4	3	630	CCNE	Yes
University of								103
New Mexico	FNP	MSN	3	3	3	800	CCNE	Yes

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60-17-104. <u>Administrator, f</u> 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 <u>and course information</u>.

(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 <u>dedicated nurse administrator</u> who is responsible for the development and implementation of the advanced nursing <u>education</u> program shall have had <u>successful</u> experience in administration or teaching and shall have a graduate degree in nursing. <u>The program administrator shall have sufficient administrative time and support to achieve and maintain positive program/student outcomes.</u>

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

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

(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.

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K.A.R. 60-17-104 Page 2

(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 <u>member</u> 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.

Preceptors in APRN Programs

1. How many clinical sites do you currently have for APRN students?

WSU	FHSU	KU SON	Washburn
Varied sites and most are in high demand for APRN students. Clinical sites vary from semester to semester because preceptor agree to take student one semester at a time	We have around 500 clinical sites, with 300 active preceptors. This number changes frequently.	<u>Midwifery:</u> For the academic year 2022 – 2023. We had 15 clinical sites for midwifery students <u>FNP:</u> Approximately 20 sites each semester that are active for the FNP Specialty <u>PMHNP:</u> Approximately 10 sites per course per semester	DNP and PMHNP- Certificate have contracts with and have placed NP students at 52 clinical sites located in Kansas during calendar year 2023

2. How many of those sites would potentially have PA's to use as preceptors?

WSU	FHSU	KU SON	Washburn
About 25% of current	It's hard to say	Midwifery: None	We do not have direct
sites	because we don't	FNP: Most, if not all	data related to this,
	routinely get	PMHNP: None	but clinical sites
	information about		associated with or in
	preceptors who are		geographic proximity
	not approved. I		to physician assistant
	would estimate in		programs often hire
	Western Kansas at		PAs to fill inpatient
	least would have PAs		and outpatient
	(this is a conservative		positions. If sites
	estimate). When		have PAs on staff,
	trying to find	and the first second	this creates
	information to better		opportunities for
	answer this question,		them to precept NP
	I found a list of PAs	the factor in the	students if the
the regulation of	from the NPI registry.		organization is
	It has around 1200		willing to allow them
	PNs listed in Kansas,		to share
	but some are practice		teaching/learning
	groups; I think you		opportunities with N
	could safely say this		students.
	would add a potential		
	for upwards of 1000		

preceptors – many in western Kansas		
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3. Would being able to use PA's as preceptors increase the number of potential clinical sites for your program?

WSU	FHSU	KU SON:	Washburn
Yes, there is a high	I think the total	Midwifery: Would	This could be
need for this	number of sites	possibly aid	particularly
	would increase	placements for	advantageous for
	modestly, but the	advanced clinical	students who desire
	number of potential	residency (NRSG	to have precepted
	preceptors would	964), but our	experiences and plans
	increase significantly.	midwifery	to later practice in a
	There are some	accreditation requires	rural underserved
	clinics in rural areas	51% or greater of	area. It is unclear if
	staffed exclusively by	clinical time be with	this would be an
	PAs and physicians,	a CNM	advantage in
	and we are currently	<u>FNP:</u> Yes	healthcare
	unable to use them –		organizations
	Hoisington is a good		affiliated with PA
	example of this. The		programs, where
	more common		priority for preceptor
	scenario is that a		placements is given
	clinical has a mix of		to PA students.
	PAs, APRNs and		
	physicians but we are		4
	limited to whom we		
	can assign students.		
	Russell, Hays, and		
	Wakeeney are good		
	examples of this.		

4. What is your position/opinion on use of PAs as preceptors for APRN education:

WSU	FHSU	KU SON	Washburn
PAs utilize	Rural Kansas faces a	Midwifery: If	Our position is that
assessment,	shortage of providers	possible and	shared learning
diagnosis, and	and APRNs can help	available, the use of	experiences with
management of	solve this problem.	PAs would benefit	approved and
disease in patient care	To do so, they need to	APRN programs	qualified PAs would
which is almost	have opportunities to	(particularly in	offer additional
identical for APRN	do clinical in rural	specialty areas, such	opportunities to our
practice. PAs like	areas.	as derm, surgery, etc.)	NP students. It
APRNs are	Interprofessional		would also help

prescribers and see	experiences are	<u>FNP</u> : All for PAs	address Domain 6
patients in the same	paramount to a well-	precepting. That	Advanced Level
settings as APRNs.	rounded education.	would help	AANC Essentials
Healthcare is an	Interprofessional	tremendously. Here	(2021) competencies
interdisciplinary	experiences are	are the NTF criteria,	6.1, 6.4, and sub-
profession that	encouraged by	which address PAs.	competencies 6.1g,
requires	National	We may be holding	6.1h, 6.1j, 6.4i related
interprofessional	Organization for	ourselves back by not	to interprofessional
collaboration and	Nurse Practitioner	allowing PAs to	education.
teamwork for the best	Faculty (NONPF) as	precept.	
patient care	well as Commission	<u>PMHNP</u> : students	
outcomes. APRNs	on Collegiate Nursing	need more	
should have a range	Education (CCNE).	opportunities to work	
of sites and	It is important to	with Master-prepared	
preceptors that allow	understand the scope	therapists (social	
for varying and	of each clinician you	workers,	
diverse experience	could potentially	psychologists	
which includes	work with in practice.	(MS/PsyD/PhD),	
working with	While the	marriage and family	
APRNs, MD/DOs,	background and	therapists or licensed	and the set
PAs and other	training are different,	clinical professional	
members of the	I think working with	counselors.	
healthcare team.	PAs in rural training		
	and practice is an		
	asset to communities		
	and patients.		E

Program	Clinical Hours	Simulation Hours	Direct Clinical Hours
WSU	1120	12 hrs. standardized patients	820
FHSU	900	65-70 lab/sim	900
KU SON Midwifery	960	8	768
KU SON – FNP	1024	16 hrs. includes standardized patients	832
KU SON – PMHNP	1024	10	960
Washburn – FNP	1170	45	1125
Washburn – PMHNP	1045	45	1000

Other comments:

WSU: There is also a significant need for more clinical sites throughout all healthcare programs. If we plan to address the healthcare shortage, we need to increase the number of clinical sites.

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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 <u>advanced nursing</u> program provides instruction;

(2) determine the approach and content for learning experiences;

(3) direct clinical instruction as an integral part of the advanced nursing 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 semester credit hours or the academic equivalent hours in advanced pharmacology or the equivalent;

(6) three college <u>semester credit hours or the academic equivalent</u> hours in advanced pathophysiology or its equivalent and three college <u>semester credit hours or the academic equivalent</u> 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 for any advanced practice registered nurse nursing program completed after July 1,
 2009, three college semester credit hours or the academic equivalent hours in advanced pathophysiology or its

equivalent and three college semester credit hours or the academic equivalent hours in advanced health assessment or its equivalent; and

(8) 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 <u>advanced nursing</u> program shall consist of at least 45 semester credit hours or the academic equivalent. As used in this regulation, "academic equivalent²⁹ 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 practice hours of clinical learning. After January 1, 2003, the clinical component shall consist of at least 500 practice hours of clinical learning. After July 1, 2009, the clinical component shall consist of at least 500 practice hours of clinical learning in each clinical track, or the advanced nursing program shall provide documentation of the overlap if any clinical track consists of at least 750 direct patient care practice hours in each clinical track, or the advanced nursing program shall provide documentation of the advanced nursing program shall provide documentation of the clinical component shall consist of at least 750 direct patient care practice hours in each clinical track, or the advanced nursing program shall provide documentation of the overlap if any clinical track consists of less than 500 direct patient care practice hours in each clinical track consists of less than 750 direct patient care practice hours.

- (d) Each nurse administrator shall meet the following requirements:
- (1) Develop and implement a written plan for program evaluation plan; 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 2017
Supp. 74-1106; implementing K.S.A. 2017 Supp. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective
March 31, 2000; amended April 20, 2007; amended May 18, 2012; amended P-

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Regulations for Review by APRN Committee (separated by roles)

Need to be finished by March 2025 meeting

APRN (all four roles):

- 60-11-101 Definition of expanded role
- 60-11-102 Roles of advanced practice
- 60-11-103 Licensure and educational requirements for advanced practice registered nurses
- 60-11-113 License renewal
- 60-11-116 Reinstatement of inactive or lapsed license
- 60-11-118 Temporary permit to practice
- 60-11-120 Expiration dates of licenses; applications
- 60-11-121 Exempt license
- 60-17-101 Definitions
- 60-17-102 Requirements for initial approval
- 60-17-103 Reapproval requirements
- 60-17-104 Faculty and preceptor qualifications
- 60-17-105 Curriculum requirements
- 60-17-106 Clinical resources
- 60-17-107 Educational facilities
- 60-17-108 Student policies
- 60-17-109 Reports
- 60-17-110 Discontinuing an advanced practice registered nurse program
- 60-17-111 Requirements for advanced practice registered nurse refresher course

Nurse Practitioner:

- 60-11-104 Functions of the advanced practice registered nurse in the role of nurse practitioner
- 60-11-104a Prescription orders

CNM:

- 60-11-104a Prescription orders
- 60-11-105 Functions of the advanced practice registered nurse in the role of nurse-midwife

CNS:

- 60-11-104a Prescription orders
- 60-11-107 Functions of the advanced practice registered nurse in the role of clinical nurse specialist

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RNA:

- 60-11-106 Functions of the advanced practice registered nurse; nurse anesthetist
- 60-13-102 Approval procedure
- 60-13-103 School approval requirements
- 60-13-104 Exam approval
- 60-13-110 Reinstatement of inactive or lapsed authorization
- 60-13-111 Continuing education definitions
- 60-13-112 License renewal
- 60-13-113 Approval of registered nurse anesthetist continuing education

An official State of Kansas government website. Here's how you know.

Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-101. Definition of expanded role. Each "advanced practice registered nurse" (APRN), as defined by K.S.A. 65-1113 and amendments thereto, shall function in an expanded role to provide primary, secondary, and tertiary health care in the APRN's role of advanced practice. Each APRN shall be authorized to make independent decisions about advanced practice nursing needs of families, patients, and clients and medical decisions. Each APRN shall be directly accountable and responsible to the consumer. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended March 31, 2000; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 101

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Definition of expanded role

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1113 and 65-1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y i or N

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

Additional information:

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-102. Roles of advanced practice registered nurses. The four roles of advanced practice registered nurses licensed by the board of nursing shall be the following:

(a) Clinical nurse specialist;

(b) nurse anesthetist;

(c) nurse-midwife; and

(d) nurse practitioner. (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 Sept. 4, 2009; amended May 18, 2012.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 102

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Roles of advanced practice registered nurses

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1113 and 65-1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

2. Is the rule and regulation being revoked? Y \square or N \square

3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N ____

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

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Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

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Committee:

Chair:

Date:

60-11-103. Licensure and educational requirements for advanced practice registered nurses. (a) Licensure as an advanced practice registered nurse. Each applicant for licensure as an advanced practice registered nurse shall meet the following requirements:

(1) File with the board a completed application on a form adopted by the board and pay the application fee prescribed by K.A.R. 60-11-119;

(2) be fingerprinted and submit to a state and national criminal history record check;

(3) submit proof of APRN certification in the applicant's specific role and population focus granted by a national certifying organization that is recognized by the board and whose certification standards are approved by the board as equal to or greater than the corresponding standards established by the board for initial licensure applications submitted on and after July 1, 2023;

(4) submit proof of malpractice insurance coverage if the applicant renders professional clinical services as an APRN, unless the advanced practice registered nurse meets one of the exceptions listed in K.S.A. 65-1130 as amended by 2022 S Sub for HB 2279, sec. 1, and amendments thereto; and

(5) within 180 days after the board's receipt of the application, submit proof that all qualifications for licensure, as specified in K.S.A. 65-1130 and K.S.A. 65-1131 and amendments thereto, have been met. If the applicant does not meet this requirement, the application shall be deemed abandoned and closed.

(b) Licensure in the roles of clinical nurse specialist, nurse anesthetist, nurse-midwife, and nurse practitioner. To be issued a license as an advanced practice registered nurse in any of the roles of advanced practice, as identified in K.A.R. 60-11-102, each applicant shall meet at least one of the following requirements:

(1) Complete a formal, post-basic nursing education program located or offered in Kansas that has been approved by the board and prepares the nurse to function in the advanced role for which application is made;

(2) complete a formal, post-basic nursing education program that is not located or offered in Kansas but is determined by the board to meet the standards for program approval established by K.A.R. 60-17-101 through 60-17-108;

(3) have completed a formal, post-basic nursing education program that is no longer in existence but is determined by the board to meet standards at least as stringent as those required for program approval by the board at the time of graduation;

(4) hold a current license to practice as an advanced practice registered nurse in the role for which application is made and demonstrate to the board's satisfaction that both of the following requirements are met:

(A) The license was issued by a nursing licensing authority of another jurisdiction; and

(B)(i) The licensee completed a program meeting standards equal to or greater than those established by K.A.R. 60-17-101 through 60-17-108; or

(ii) the applicant has met the requirements for licensure pursuant to K.S.A. 48-3406, and amendments thereto; or

(5) complete a formal educational program of post-basic study and clinical experience that can be demonstrated by the applicant to have sufficiently prepared the applicant for practice in the role of advanced practice for which application is made. The applicant shall show that the curriculum of the program is consistent with public health and safety policy and that the program prepared individuals to perform acts generally recognized by the nursing profession as capable of being performed by persons with post-basic education in nursing.

(c) Licensure in the roles of clinical nurse specialist and nurse practitioner. Each applicant for a license as an advanced practice registered nurse in a role other than anesthesia or midwifery shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (b) before July 1, 1994;

(2) if none of the requirements in subsection (b) were met before July 1, 1994, meet one of the requirements of subsection (b) and hold a baccalaureate or higher degree in nursing; or

(3) if none of the requirements in subsection (b) were met before July 1, 2002, meet one of the requirements of subsection (b) and hold a master's or higher degree in a clinical area of nursing.

(d) Licensure in the role of nurse anesthetist. Each applicant for a license as an advanced practice registered nurse in the role of anesthesia shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (b) before July 1, 2002; or

(2) if none of the requirements in subsection (b) were met before July 1, 2002, meet one of the requirements of subsection (b) and hold a master's degree or a higher degree in nurse anesthesia or a related field.

(e) Licensure in the role of nurse-midwife. Each applicant for a license as an advanced practice registered nurse in the role of midwifery shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (b) before July 1, 2000; -29-

APRN 29

(2) if none of the requirements in subsection (b) were met before July 1, 2000, meet one of the requirements of subsection (b) and hold a baccalaureate degree in nursing; or

(3) if none of the requirements in subsection (b) were met before January 1, 2010, meet one of the requirements of subsection (b) and hold a master's degree or a higher degree in nursing, midwifery, or a related field.

(f) National nursing organization certification for licensure. National nursing organizations with certification standards that meet the standard specified in paragraph (a)(3) shall be identified by the board, and a current list of national nursing organizations with certification standards approved by the board shall be maintained by the board. Any licensee may request that a certification program be considered by the board for approval and, if approved, included by the board on its list of national nursing organizations with approved certification standards.

(g) Advanced pharmacology education requirement. Each applicant who completes an advanced practice registered nurse program after January 1, 1997 shall have completed three college hours in advanced pharmacology or the equivalent.

(h) Advanced pathophysiology and advanced health assessment education requirement. Each applicant who completes an advanced practice registered nurse program after January 1, 2001 in a role other than anesthesia or midwifery shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.

(i) Advanced pathophysiology and advanced health assessment education requirement after July 1, 2009. Each applicant who completes an advanced practice registered nurse program after July 1, 2009 shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.

(j) Refresher course requirement. In spite of the provisions of subsections (b) through (i), each applicant for a license as an advanced practice registered nurse who has not gained 1,000 hours of advanced nursing practice during the five years preceding the date of application shall be required to successfully complete a refresher course as defined by the board.

(k) Verification of current Kansas license. Verification of a current Kansas license shall be provided to other state boards upon the applicant's request and payment of the fee prescribed by K.A.R. 60-4-101.

(I) Licensure for endorsement pursuant to K.S.A. 48-3406, and amendments thereto.

(1) The applicant shall demonstrate scope of practice as defined in K.S.A. 65-1130 and amendments thereto, K.A.R. 60-11-104, K.A.R. 60-11-104a, K.A.R. 60-11-105, and K.A.R. 60-11-106.

(2) "Active practice" shall mean that in a calendar year, the applicant worked for at least 1,000 hours in the scope of practice for which licensure is sought.

(m) Temporary emergency licensure. Each applicant for a temporary emergency license shall submit an application on a form adopted by the board to practice advanced nursing during a state of emergency declared by the legislature and submit proof that either of the following qualifications for licensure has been met:

(1) For licensure as a registered professional nurse, the applicant is currently licensed or has been licensed as a registered professional nurse by a state licensing board within five years of the application date.

(2) For licensure as an advanced practice registered nurse, the applicant is currently licensed or has been licensed as an advanced practice registered nurse by a state licensing board within five years of the application date, passed a course in cardiopulmonary resuscitation (CPR) for humans, has a current CPR certificate, and has the skills required to practice advanced practice nursing during the state of emergency declared by the legislature. (Authorized by K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1, K.S.A. 65-1131, and K.S.A. 2021 Supp. 48-3406; implementing K.S.A. 2021 Supp. 65-1118, K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1, K.S.A. 65-1131, K.S.A. 65-1131, K.S.A. 2021 Supp. 48-3406, K.S.A. 2021 Supp. 74-1106, and K.S.A. 74-1112; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended, T-60-11-14-90, Nov. 14, 1990; amended, T-60-3-14-91, March 14, 1991; amended Sept. 2, 1991; amended March 9, 1992; amended Sept. 14, 1992; amended April 26, 1993; amended Sept. 6, 1994; amended Jan. 3, 1997; amended March 31, 2000; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-1-26-22, Jan. 26, 2022; amended May 6, 2022; amended, T-60-6-30-22, July 1, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 103

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Licensure and educational requirements for advanced practice registered nurses

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1130

Implementing K.S.A. 65-1118 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

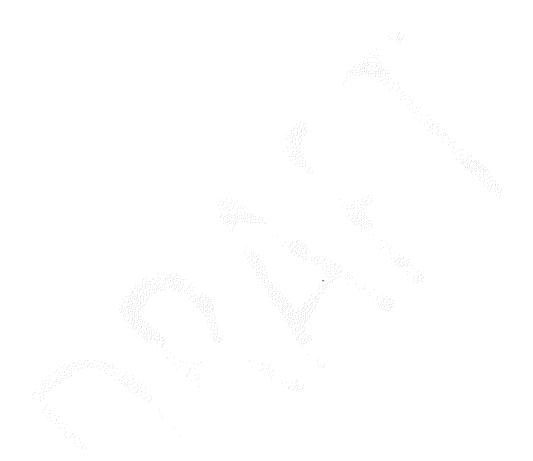
Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N _____

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4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)



Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-113. License renewal. (a) Advanced practice registered nurse licenses shall be renewed on the same biennial cycle as the cycle for the registered professional nurse licensure renewal, as specified in K.A.R. 60-3-108.

(b) On and after January 1, 2013, each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to the advanced practice registered nurse role during the most recent prior license period. Proof of completion of 30 contact hours of approved CNE in the advanced practice nurse 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 the advanced practice registered nursing role. 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 APRN license renewal shall also be applicable to the renewal of the registered professional nurse license.

(i) Any APRN whose initial licensure is before July 1, 2023 may submit evidence of APRN certification to the board upon license renewal.

(j) An APRN shall provide proof of malpractice insurance coverage when renewing the license if the APRN renders professional clinical services, unless the advanced practice registered nurse meets one of the exceptions listed in K.S.A. 65-1130 as amended by 2022 S Sub for HB 2279, sec. 1, and amendments thereto. (Authorized by K.S.A. 2021 Supp. 65-1117, K.S.A. 65-1129, and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; implementing K.S.A. 2021 Supp. 65-1117, K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; implementing K.S.A. 2021 Supp. 65-1117, K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1, and K.S.A. 65-1132; effective Sept. 2, 1991; amended May 9, 1994; amended July 29, 2005; amended May 18, 2012; amended, T-60-6-30-22, July 1, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 113

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: License renewal

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1117 and 65-1130

Implementing K.S.A. 65-1117 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y is or N

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-36 -

Additional information:

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-116. Reinstatement of inactive or lapsed license. (a) Each nurse anesthetist whose Kansas APRN license is inactive or has lapsed and who wants to obtain a reinstatement of APRN licensure shall meet the same requirements as those in K.A.R. 60-13-110.

(b) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license is inactive or has lapsed may, within five years of its expiration date, reinstate the license by submitting proof that the individual has met either of the following requirements:

(1) Obtained 30 hours of continuing nursing education related to the advanced practice registered nurse role within the preceding twoyear period; or

(2) been licensed in another jurisdiction and, while licensed in that jurisdiction, has accumulated 1,000 hours of advanced practice registered nurse practice within the preceding five-year period.

(c) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license is inactive or has lapsed for more than five years beyond its expiration date may reinstate the license by submitting evidence of having attained either of the following:

(1) A total of 1,000 hours of advanced practice registered nurse practice in another jurisdiction within the preceding five-year period and 30 hours of continuing nursing education related to the advanced practice registered nurse role; or

(2) completion of a refresher course approved by the board. (Authorized by K.S.A. 2019 Supp. 65-1117 and K.S.A. 65-1129; implementing K.S.A. 2019 Supp. 65-1117 and K.S.A. 65-1132; effective Sept. 2, 1991; amended March 22, 2002; amended May 18, 2012; amended Aug. 21, 2020.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 116

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Reinstatement of inactive or lapsed license

Type (New/Amended): Amended

Effective Date (history): August 21, 2020

Authorizing K.S.A. 65-1117 and 65-1129

Implementing K.S.A. 65-1117 and 65-1132

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N _____

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Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-118. Temporary permit to practice. (a) A temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days to an applicant for licensure as an advanced practice registered nurse who meets the following requirements:

(1) Was previously licensed in this state; and

(2) is enrolled in a refresher course required by the board for reinstatement of a license that has lapsed for more than five years.

(b) A one-time temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days pending completion of the application for a license. (Authorized by K.S.A. 65-1129; implementing K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 45; effective Sept. 2, 1991; amended April 26, 1993; amended May 18, 2012.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 118

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Temporary permit to practice

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1129

Implementing K.S.A. 65-1132

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y i or N

Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-120. Expiration dates of licenses; applications. The expiration dates of all licenses and applications shall be in accordance with K.A.R. 60-3-107 and 60-3-108. (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45, and K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 46; effective April 3, 1998; amended July 29, 2005; amended May 18, 2012.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 120

Article Title: 11- Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Expiration dates of licenses; applications

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1131

Implementing K.S.A. 65-1131

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

2. Is the rule and regulation being revoked? Y \square or N \square

3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N _____

Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-121. Exempt license. (a) An exempt license shall be granted only to an advanced practice registered nurse who meets these requirements:

(1) Is not regularly engaged as an advanced practice registered nurse in Kansas, but volunteers advanced practice registered nurse services or is a charitable health care provider, as defined by K.S.A. 75-6102 and amendments thereto; and

(2) (A) Has been licensed in Kansas for the five years previous to applying for an exempt license; or

(B) has been licensed, authorized, or certified in another jurisdiction for the five years previous to applying for an exempt license and meets all requirements for endorsement into Kansas.

(b) The expiration date of the exempt license shall be in accordance with K.A.R. 60-3-108.

(c) Each application for renewal of an exempt license shall be submitted upon a form furnished by the board and shall be accompanied by the fee in accordance with K.A.R. 60-11-119. (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45; effective April 3, 1998; amended Oct. 25, 2002; amended July 29, 2005; amended May 18, 2012.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 121

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Exempt license

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1131

Implementing K.S.A. 65-1131

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

2. Is the rule and regulation being revoked? Y \square or N \square

3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y is or N

Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-104. Functions of the advanced practice registered nurse in the role of nurse practitioner. Each advanced practice registered nurse in the role of nurse practitioner shall function in an advanced role at a specialized level, through the application of advanced knowledge and skills and shall be authorized to perform the following:

(a) Provide health promotion and maintenance, disease prevention, and independent nursing diagnosis, as defined in K.S.A. 65-1113 and amendments thereto, and treatment, as defined in K.S.A. 65-1113 and amendments thereto, of acute and chronic diseases;

(b) develop and manage the medical plan of care for patients or clients;

(c) provide health care services for which the nurse practitioner is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;

(d) provide health care for individuals by managing health problems encountered by patients and clients; and

(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 104

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Functions of the advanced practice registered nurse in the role of nurse practitioner

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1113 and 65-1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N _____

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Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.--Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-104a. Prescription orders. (a) Any advanced practice registered nurse may perform the following:

(1) Prescribe durable medical equipment;

(2) prescribe, procure, and administer any drug consistent with the licensee's specific role and population focus, except any drug that is intended to cause an abortion; and

(3) prescribe, procure, or administer any drug that is a controlled substance in accordance with the uniform controlled substances act as specified in K.S.A. 65-4101, and amendments thereto.

(b) Each prescription order in written form shall meet the following requirements:

(1) Include the name, address, and telephone number of the practice location of the advanced practice registered nurse;

(2) be signed by the advanced practice registered nurse with the letters A.P.R.N.; and

(3) contain the D.E.A. registration number issued to the advanced practice registered nurse when a controlled substance, as defined in K.S.A. 65-4101 and amendments thereto, is prescribed.

(c) Nothing in this regulation shall be construed to prohibit any registered nurse or licensed practical nurse or advanced practice registered nurse from conveying a prescription order orally or administering a drug if acting under the lawful direction of a person licensed to practice either medicine and surgery or dentistry or licensed as an advanced practice registered nurse.

(d) When used in this regulation, terms shall be construed to have the meanings specified in K.S.A. 65-1626, and amendments thereto. (Authorized by and implementing K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective, T-60-9-12-88, Sept. 12, 1988; effective Feb. 13, 1989; amended May 7, 1990; amended Jan. 3, 1995; amended March 31, 2000; amended May 18, 2012; amended, T-60-6-30-22, July 1, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 104a

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Prescription orders

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1130

Implementing K.S.A. 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y i or N

Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-105. Functions of the advanced practice registered nurse in the role of nurse-midwife. Each advanced practice registered nurse in the role of nurse-midwife shall function in an advanced role through the application of advanced skills and knowledge of women's health care through the life span and shall be authorized to perform the following:

(a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113 and amendments thereto, and treatment, as defined in K.S.A. 65-1113 and amendments thereto;

(b) develop and manage the medical plan of care for patients or clients;

(c) provide health care services for which the nurse-midwife is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;

(d) in a manner consistent with subsection (c), provide health care for women, focusing on gynecological needs, pregnancy, childbirth, the postpartum period, care of the newborn, and family planning, including indicated partner evaluation, treatment, and referral for infertility and sexually transmitted diseases; and

(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 105

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Functions of the advanced practice registered nurse in the role of nuremidwife

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1113 and 1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y ____ or N ____

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

60-11-107. Functions of the advanced practice registered nurse in the role of clinical nurse specialist. Each advanced practice registered nurse in the role of clinical nurse specialist shall function in an advanced role to provide evidence-based nursing practice within a speciality area focused on specific patients or clients, populations, settings, and types of care. Each clinical nurse specialist shall be authorized to perform the following:

(a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113 and amendments thereto, and treatment, as defined in K.S.A. 65-1113 and amendments thereto;

(b) develop and manage the medical plan of care for patients or clients;

(c) provide health care services for which the clinical nurse specialist is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;

(d) provide care for specific patients or clients or specific populations, or both, utilizing a broad base of advanced scientific knowledge, nursing theory, and skills in assessing, planning, implementing, and evaluating health and nursing care; and

(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 107

Article Title: 11 - Advanced Practive Registered Nurses (APRN)

Rule and Reg Title: Functions of the advanced practice registered nurse in the role of clinical nurse specialist

Type (New/Amended): Amended

Effective Date (history): October 14, 2022

Authorizing K.S.A. 65-1113 and 65-1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y is or N

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4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

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Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 11.—Advanced Practice Registered Nurses (APRN)

Printable Format

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.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 106

Article Title: 11 - Advanced Practice Registered Nurses (APRN)

Rule and Reg Title: Functions of the advanced practice registered nurse; nurse anesthetist

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1113 and 65-1130

Implementing K.S.A. 65-1113 and 65-1130

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

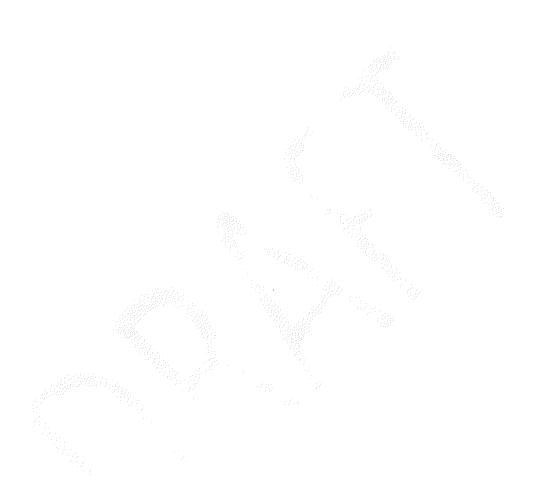
Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N ____

1

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)



2

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.-Fees; Registered Nurse Anesthetist

Printable Format

60-13-102. Approval procedure. (a) Each institution planning to offer a program in registered nurse anesthesia shall:

(1) notify the board of nursing and supply such information as the board of nursing may request;

(2) employ a qualified nurse anesthetist administrator. The name and qualifications of the administrator of the program shall be submitted to the board of nursing; and

(3) employ a second faculty member.

(b) In addition to the requirements in paragraph (a), each program for registered nurse anesthetists established after July 1, 1988 within the state of Kansas, shall be at the masters level. Upon successful completion of the program requirements, the school shall award the student a masters degree.

(c)(1) Written notification of the board's decision to approve or disapprove the program shall be sent to the institution. The program shall be approved by the board of nursing prior to the admission of students.

(2) Discontinuing a school of nurse anesthesia. Each school terminating its program shall submit a plan to the board for approval. The plan shall provide for students currently enrolled to complete their program and for the disposition of school records.

(3) Out of state programs. Out of state programs preparing registered nurse anesthetists may be approved after board of nursing review. (Authorized by K.S.A. 1986 Supp. 64-1160(b), L. 1987, Ch. 234, Sec. 3; implementing K.S.A. 1986 Supp. 65-1152(b); effective, T-88-48, Dec. 16, 1987; effective May 1, 1988.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 101

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: Approval procedure

Type (New/Amended): Amended

Effective Date (history): May 1,1988

Authorizing K.S.A.

Implementing K.S.A. 65-1152

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y _ or N _
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y i or N

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

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Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.—Fees; Registered Nurse Anesthetist

Printable Format

60-13-103. School approval requirements. (a) In order for a school of nurse anesthesia to be approved by the board of nursing, consideration shall be given as to whether the school meets the requirements in standards I, II, III, IV, and V and the appendix in the "standards for accreditation of nurse anesthesia educational programs," as revised by the council on accreditation of nurse anesthesia educational programs, " as revised by the council on accreditation of nurse anesthesia educational programs," as revised by the council on accreditation of nurse anesthesia educational programs, " as revised by the council on accreditation of nurse anesthesia educational programs," as revised by the council on accreditation of nurse anesthesia educational programs are hereby adopted by reference.

(b) An up-to-date list of approved programs shall be prepared and kept by the board.

(c) A program shall not be approved without the formal action of the board.

(d) (1) A program review shall be conducted by the board at least once every five years, or in conjunction with the council on accreditation review cycles.

(2) The school shall submit to the board of nursing for review a copy of a self-study report documenting compliance with the established standards.

(3) Additional information may be requested by the board of nursing to assess the school's compliance with standards.

(4) An on-site visit to the school of nurse anesthesia may be conducted by the board of nursing if there is reason to believe that the program is in violation of the established standards or if the program is placed on public probation by the council on accreditation. (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1152; effective, T-88-48, Dec. 16, 1987; effective May 1, 1988; amended March 22, 2002; amended March 6, 2009.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 103

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: School approval requirements

Type (New/Amended): Amended

Effective Date (history): March 6, 2009

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1152

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N ____

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4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

APRN 92

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

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Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.-Fees; Registered Nurse Anesthetist

Printable Format

60-13-104. Exam approval. The content outline of the examination administered by the council on certification of nurse anesthetists shall be reviewed and approved annually by the board of nursing. (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1152; effective, T-88-48, Dec. 16, 1987; effective May 1, 1988; amended March 6, 2009.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 103

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: School approval requirements

Type (New/Amended): Amended

Effective Date (history): March 6, 2009

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1152

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

2. Is the rule and regulation being revoked? Y \square or N \square

3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y ____ or N ____

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.—Fees; Registered Nurse Anesthetist

Printable Format

60-13-110. Reinstatement of inactive or lapsed authorization. (a) Any nurse anesthetist whose Kansas authorization is inactive or has lapsed may, within five years of its expiration date, reinstate the authorization by submitting proof that the individual has met either of the following requirements:

(1) Obtained 30 hours of continuing nursing education related to nurse anesthesia within the preceding two-year period; or

(2) been authorized in another jurisdiction and, while authorized in that jurisdiction, has accumulated 1,000 hours of nurse anesthesia practice within the preceding five-year period.

(b) Any nurse anesthetist whose Kansas authorization is inactive or has lapsed for more than five years beyond its expiration date may reinstate the authorization by submitting evidence of having attained either of the following:

(1) A total of 1,000 hours of nurse anesthesia practice in another jurisdiction within the preceding five-year period and 30 hours of continuing nursing education related to nurse anesthesia within the preceding two-year period; or

(2) satisfactory completion of a refresher course approved by the board. (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1155; effective Sept. 2, 1991; amended May 9, 1994; amended March 22, 2002; amended Aug. 21, 2020.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 110

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: Reinstatement of inactive or lapased authorization

Type (New/Amended): Amended

Effective Date (history): August 21, 2020

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1155

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N ____

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4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

APRN 102

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.-Fees; Registered Nurse Anesthetist

Printable Format

60-13-111. Continuing education definitions. Continuing education terms shall have the meanings in K.A.R. 60-9-105. (Authorized by K.S.A. 1990 Supp. 65-1164; implementing K.S.A. 1990 Supp. 65-1159; effective Sept. 2, 1991.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 111

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: Continuing education definitions

Type (New/Amended): Amended

Effective Date (history): September 2, 1991

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1159

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y ____ or N ____

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

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Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.-Fees; Registered Nurse Anesthetist

Printable Format

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.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 112

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: License renewal

Type (New/Amended): Amended

Effective Date (history): May 18, 2012

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1159

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- 2. Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y _____ or N _____

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

APRN 112

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Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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Agency 60

State Board of Nursing

Article 13.-Fees; Registered Nurse Anesthetist

Printable Format

60-13-113. Approval of registered nurse anesthetist continuing education. Approval of registered nurse anesthetist continuing education shall follow the rules of K.A.R. 60-9-107. (Authorized by K.S.A. 1989 Supp. 65-1164; implementing K.S.A. 1989 Supp. 65-1159; effective March 9, 1992.)

Printable Format

KSBN Regulation Review Form

Part 1 (completed by agency staff):

Regulation Number: 113

Article Title: 13 - Fees; Registered Nurse Anesthetist

Rule and Reg Title: Approval of registered nurse anesthetist continuing education

Type (New/Amended): Amended

Effective Date (history): March 9, 1992

Authorizing K.S.A. 65-1164

Implementing K.S.A. 65-1159

Part 2 (completed by committee members):

Necessity:

- 1. Is the rule and regulation necessary for the implementation and administration of state law? Y or N
- Does the rule and regulation service an identifiable public purpose in support of state law? Y or N

Potential for Revocation:

1. Briefly describe how revocation would affect Kansans (max. 800 characters)

- 2. Is the rule and regulation being revoked? Y \square or N \square
- 3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y is or N is

4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

Additional information:

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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65-1152. Qualifications for authorization to practice as a registered nurse anesthetist; approval of schools of nurse anesthesia, criteria. (a) In order to obtain authorization from the board of nursing to practice as a registered nurse anesthetist an individual shall meet the following requirements:

(1) Be licensed to practice professional nursing under the Kansas nurse practice act;

(2) has successfully completed a course of study in nurse anesthesia in a school of nurse anesthesia approved by the board;

(3) has successfully completed an examination approved by the board or has been certified by a national organization whose certifying standards are approved by the board as equal to or greater than the corresponding standards established under this act for obtaining authorization to practice as a registered nurse anesthetist; and

(4) be required to successfully complete a refresher course as defined in rules and regulations of the board if the individual has not been in active anesthesia practice for five years preceding the application.

(b) Approval of schools of nurse anesthesia shall be based on approval standards specified in K.S.A. <u>65-1133</u> and amendments thereto.

(c) Schools of nurse anesthesia approved by the board under this section shall offer, a masters level degree program in nurse anesthesia.

(d) For the purposes of determining whether an individual meets the requirements of item (2) of subsection (a), the board by rules and regulations shall establish criteria for determining whether a particular school of nurse anesthesia maintains standards which are at least equal to schools of nurse anesthesia which are approved by the board.

History: L. 1986, ch. 183, § 2; L. 1988, ch. 243, § 3; L. 1988, ch. 244, § 1; L. 1988, ch. 245, § 3; L. 1993, ch. 194, § 15; L. 1996, ch. 179, § 2; L. 1997, ch. 158, § 7; L. 2001, ch. 161, § 8; July 1.

ARTICLE VII. - COMMITTEES

Section 1. The committees serve as an advisory body to the Board.

- a. Standing committees shall be Practice, Continuing Nursing Education/IV
 Therapy, Advanced Practice, Finance, Investigative, Education, and Certified
 Nurse-Midwife Council.
- b. Committees may submit recommendations to the Board. A Board member will need to make the recommendation in a motion which would then be subject to approval by the entire Board.
- c. Committee meetings shall conform to the law regarding open meetings. The dates, times, and places of all committee meetings shall be listed with their agenda.
- d. Members of the Board on standing committees shall be appointed by the President in consultation with the Vice President following the annual meeting.
- e. Non-Board members shall be appointed to standing committees by the President in consultation with the Vice President and shall serve for two year terms. Each non-Board committee member shall have qualifications related to the committee of appointment.
- f. Appropriate Board staff shall serve as non-voting members of all committees.
 Board staff or designees shall provide support services to each committee, and prepare and distribute minutes and agendas of each meeting to committee members.

g. Agendas will be prepared in accordance with Agenda Policy (see attachment A).Section 4. Advanced Practice

a. Membership: A minimum of three Board Members including at least one APRN member and four non-Board members representing each of the categories of advanced practice registered nurses: clinical nurse specialist, nurse midwife, nurse practitioner, and registered nurse anesthetist. The K-TRACS Advisory Council representative should be a "licensed advanced practice provider" and prefer to have experience with prescribing controlled substances and using K-TRACS. This advisory council meets approximately every other month. There is always a virtual option, and some meetings have an in-person option at the Topeka office. The time commitment is generally the duration of meeting (1.5-3 hours) and any prep time needed to review materials before the meeting.

b. Purpose: To review and recommend revisions to statutes and regulations for approval of APRN and RNA programs in collaboration with the Education Committee. To hear updates about the K-TRACS program and provide feedback on future program directions as well as hearing confidential cases involving patients, prescribers and pharmacies of concern related to the use of controlled substances.

Section 8. Nurse-midwives Council

- a. Membership: A minimum of four non-Board Members who are certified nursemidwives licensed and appointed by the Board Nursing and a minimum of two members licensed by the board of Healing Arts to practice medicine and surgery and whose specialty and customary practice includes obstetrics, appointed by the Board of Healing Arts.
- Purpose: The statute establishes a Nurse-midwives Council to advise the Board of Healing Arts in developing, reviewing, and implementing the rules and regulation

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pertaining to certified nurse-midwives engaging in the independent practice of midwifery.