KANSAS STATE BOARD OF NURSING LANDON STATE OFFICE BUILDING 900 SW JACKSON, SUITE 1051 TOPEKA, KS 66612-1230

LPN IV Therapy Course Provider Application

Individual organizations, agencies, and practical nursing programsK. desiring to obtain approval to provide a course for LPNs in IV Therapy administration must complete and submit an application to the Kansas State Board of Nursing (KSBN). Please review the following rules and regulations related to IV Therapy for LPNs and continuing nursing education in the Nurse Practice Act (available on-line at ksbn.kansas.gov):

IV Therapy:

K.S.A. 65-1136

K.A.R. 60-16-101

K.A.R. 60-16-102

K.A.R. 60-16-103

K.A.R. 60-16-104

CNE:

K.A.R. 60-9-107

Please review these instructions before completing the application.

- 1. Applications are to be submitted thirty (30) days prior to the first course.
- 2. The cover page must be completed.
- 3. The content should be typed and organized in the order of the application criteria listed under "Regulation Description" on the attached form and the pages should be numbered. All items listed under "regulation description" must be addressed and "additional information" attached where noted.
- 4. Examples submitted in support of narrative statements must be referenced by page or appendix number and name of applicant
- 5. Photocopies must be readable.
- 6. If you are a current LT CNE provider you may award at least 32 contact hours to each LPN who successfully completes the course. Each RN who successfully completes the course may be awarded 20 contact hours, one time only.
- 7. If you are not a LT CNE provider you may apply by submitting a single offering provider application at no fee for initial application. If approved the program providership will be effective for 2 years and may be renewed by submitting new application and fee prior to expiration.

INSTRUCTIONS FOR KSBN LPN IV THERAPY COURSE PROVIDER APPLICATION

Approval of the Kansas State Board of Nursing (KSBN) LPN IV Therapy course application is based on an analysis of the submitted information to determine the applicant's capacity to provide LPNs IV Therapy education that meets the statutes and regulations outlined in the Nurse Practice Act.

The purpose of the intravenous fluid therapy course shall be to prepare licensed practical nurses to perform safely and competently the activities defined in K.A.R. 60-16-102. The course shall be based on the nursing process and current intravenous nursing standards of practice.

APPLICATION REVIEW PROCESS

The completed LPN IV Therapy providership application will be reviewed by the Education Specialist, for compliance with the LPN IV Therapy statutes and regulations.

If an application has been reviewed and found deficient, or has approval pending, the coordinator shall submit all materials required before the date of the offering. Following approval by the Education Specialist, written notification will be sent including an IV Therapy provider number.

If applying for single offering CNE approval for the LPN IV therapy course the single program application shall be completed. There shall be no cost to this provider for the initial single offering providership. KAR 60-16-103 b (7)(B)

The single program providership shall be effective for two years and may be renewed by submitting the single offering provider application and by paying the fee specified in K.A.R. 60-4-103(a)(5).

Each long-term provider shall submit the materials outlined in KAR 60-16-103 subsection (b) with the five year long-term provider renewal.

KANSAS STATE BOARD OF NURSING IV THERAPY COURSE PROVIDER APPLICATION

Regulation and Description	Additional information
Name and address of organization	Add to cover page
Name and address of department or unit within the organization responsible for the IV Therapy providership	Add to cover page
Name and qualification of the coordinator $K.A.R.\ 60-16-103(b)(1)$ The intravenous therapy course coordinator shall meet the following requirements: be licensed as a registered professional nurse; be responsible for the development and implementation of the intravenous fluid therapy course; and have experience in intravenous fluid therapy and knowledge of the intravenous fluid therapy standards. $KAR\ 60-16-103\ d\ (1)(2)\&(3)$	Add to cover page and Include resume/CV for coordinator

Name and qualifications of each faculty member of the course: $K.A.R. 60-16-103(b)(2)$	Add to policy
Each primary faculty member shall meet the following requirements: be	Include faculty and guest lecturer resumes/CV's
currently licensed to practice as a registered professional nurse in Kansas; have clinical experience within the past 5 years that includes introverse and projection assumptions of the introverse and fluid	
intravenous therapy; and maintain competency in intravenous fluid therapy. KAR 60-16-103 (d)(2) (A) (B) & (C)	
Each guest lecturer shall have professional preparation and qualifications for the specific subject area in which the individual instructs. $KAR\ 60-16-103(d)(3)$	
The mechanism through which the provider will determine that the	
licensed practical nurse seeking to take the course meets the admission guidelines: $K.A.R.\ 60-16-103(a)(3)$	Add to policy
To be eligible to enroll in an intravenous fluid therapy course, the individual shall be a nurse with a current license. <i>KAR 60- 16-103(b)</i>	
Description of the educational and clinical facilities that will be utilized: <i>K.A.R.</i> 60-16-103(a)(4)	Add to policy
The facility in which the clinical practice and competency examinations are conducted shall allow the students and faculty access to the intravenous fluid therapy equipment and intravenous fluid therapy recipients, and to the pertinent records for the purpose of documentation. Each classroom shall contain sufficient space, equipment, and teaching aids to meet the course objectives. <i>K.A.R.</i> 60-16-103 (e)(1)	Include description of where class room hours and clinical hours will take place.
There shall be a signed, written agreement between the provider and the cooperating healthcare facility that specifies the roles, responsibilities, and liabilities of each party. This written agreement shall not be required if the only health care facility to be used is also the provider. <i>K.A.R.</i> 60-16-103 (e)(2)	Include contracts with clinical sites for clinical portion of course that denotes availability of supplies, patients, and charts. Also describe roles, responsibilities, and
	liabilities of parties within the clinical site.
Outlines of the classroom curriculum and the clinical curriculum, including time segments. These curricula shall meet the requirements of	Add to policy Include course breakdown
K.A.R. 60-16-104 (g). <i>K.A.R.</i> 60-16-103 (a)(5) The course shall consist of at least 30 clock-hours of instruction and	for classroom and clinical instruction
require at least 8 hours of supervised clinical practice, which shall include at least one successful peripheral venous access procedure and	Include course syllabus of
the initiation of an intravenous infusion treatment modality on an individual. KAR 60-16-103 (c) (1)(A) & (B)	classroom and clinical instruction
	Include course (time segment) agenda
	Include details and description of resources to be used by the faculty and students

The methods of student evaluation that will be used, including a copy of the final written competency examination and the final skills competency examination $K.A.R.\ 60-16-103\ (a)(6)$	Add to policy Include copies of final written competency exam and final clinical competency exam.	
Each stand-alone course, final written competency examination, and final clinical competency examination shall meet the board approved curriculum requirement specified in K.A.R. 60-16-104 (b) (1)-(23). <i>K.A.R.</i> 60-16-103 (c)(2)		
If applicable, send an application for continuing nursing education approval. OPTIONAL	Add to policy	
For each long-term program provider, the IV therapy course provider number shall be printed on the certificates and the course roster, along with the long-term provider number. <i>K.A.R.</i> 60-16-103 b (7)(A) For each single offering program provider, the single program application shall be completed. There shall be no cost to this provider for the initial single offering providership. <i>K.A.R.</i> 60-16-103 b (7)(B)	It is not required to offer CNE contact hours for course completion Separate Single offering provider application will need to be completed for the offering of approved CNE	
If applicable, continuing education providers shall award at least 32 contact hours to each LPN who completes the course. Continuing education providers may award 20 contact hours, one time only, to each RN who completes the course. <i>K.A.R.</i> 60-16-103 (g)	Add to policy	
After initial approval, each change in the course shall be provided to the board for approval before the change is implemented. <i>K.A.R.</i> 60-16-103 (h)	Add to policy	
Each IV Fluid therapy course shall submit to the board an annual report for the period of July 1 through June 30 of the respective year that includes the total number of licensees taking the intravenous fluid therapy course, the number passing the course, and the number of courses held. <i>K.A.R.</i> 60-16-103 (i) (1)	Add to policy	
Single program providers shall be effective for 2 years and may be renewed by submitting the single offering providership application and paying the fee. <i>K.A.R.</i> 60-16-103 (i) (2) Long-term providers shall submit the materials included in the IV Therapy proposal with their 5 year long term providership renewal. <i>K.A.R.</i> 60-16-103 (i) (3)		

The faculty shall complete the final record sheet, which shall include competencies and scores $K.A.R.\ 60-16-103\ (f)(1)$	Add to policy
The intravenous fluid therapy course coordinator shall perform the following: Award a certificate to each licensed nurse documenting successful completion of both the final competency examination and the final clinical competency examination. <i>K.A.R.</i> 60-16-103 (f)(1)(B)	Add to policy Submit proposed certificate of completion
Submit to the board, within 15 days, a typed, alphabetized roster listing the name license number of each individual who has successfully completed the course and the date of completion. The coordinator shall ensure that each roster meets all requirements. $K.A.R.\ 60-16-103\ (f)(1)(C)$	Use Board approved standardized roster
RN and LPN participants shall be listed on separate rosters; and the roster shall include the providers name and address, the single or long-term provider number, the IV therapy provider number, and the signature of the coordinator $K.A.R.\ 60-16-103\ (f)\ (1)(C)(i)$ and (ii).	
Maintain records of each individual who has successfully completed the course for a period of at least five years. $K.A.R.\ 60-16-103$ $(f)(D)$	Add to policy

IV THERAPY COURSE FOR LPN'S PROVIDERSHIP APPLICATION COVER PAGE

Name of Provider:
Legal Body (If different from provider):
Address of Provider:
Telephone:
Email:
Offering Title:
Proposed Date of First Offering (mm/dd/yyyy):
Program Coordinator (RN):
Long-Term CNE Provider Number (If applicable):
Single Program Approval Application Attached: Yes No

Program Management

Course Coordinator & Faculty Qualifications

Coordinator: The intravenous therapy course coordinator shall meet the following requirements: (1) be licensed as a registered professional nurse; (2) be responsible for the development and implementation of the intravenous fluid therapy courses; and (3) have experience in intravenous fluid therapy and knowledge of the intravenous therapy standards. KAR 60-16-104(d)

Faculty: Each primary faculty member shall meet the following requirements: (A) Be currently licensed to practice as a registered nurse in Kansas; (B) have clinical experience within the past 5 years that includes intravenous fluid therapy; and (C) maintain competency in intravenous fluid therapy. KAR 60-16-103 (d)(2) (A)(B) & (C)

Each guest lecturer shall have professional preparation and qualification for the specific subject area in which that individual instructs. KAR 60-16-103(d)(3)

Attach policies and procedures

Course Admission Criteria

Mechanism through which the provider will determine that each licensed practical nurse seeking to take the course meets the admission criteria.

To be eligible to enroll in an intravenous fluid therapy course, the individual shall be a nurse with a current license. KAR 60-16-103 (b)

Attach policies and procedures

Description of Educational and Clinical Facilities that will be Utilized

Each classroom shall contain sufficient space, equipment, and teaching aides to meet the course objectives. 60-16-103 (e)(1)

The facility in which the clinical practice and competency examinations are conducted shall allow the students and faculty access to the intravenous fluid therapy equipment and intravenous fluid therapy recipients, and to the pertinent records for the purpose of documentation. 60-16-103 (e)(1)

There shall be a signed, written agreement between the provider and the cooperating healthcare facility that specifies the roles, responsibilities, and liabilities of each party. This written agreement shall not be required if the only health care facility to be used is also the provider. 60-16-103 (e)(2)

Attach policies and procedures.

Outline of Classroom and Clinical Curricula, including Time Segments

The course shall consist of at least 30 hours of instruction and require at least 8 hours of supervised clinical practice, which shall include at least one successful peripheral venous access procedure and the initiation of an intravenous infusion treatment modality on an individual. KAR 60-16-103 (a)(5)

Attach policies and procedures.

Methods of Student Evaluation that will be used
The methods of student evaluation that will be used, including a copy of the final written competency examination and the final skills competency examination. K.A.R. 60-16-103 (a)(6)
Attach policies and procedures.

If Applicable, send an Application for Continuing Education Approval

For each long-term program provider, the IV therapy course provider number shall be printed on the certificates and the course roster, along with the long-term provider number. 60-16-103 b (7)(A)

For each single offering program provider, the single program application shall be completed. There shall be no cost to this provider for the initial single offering providership. 60-16-103 b (7)(B)

Sample copies of roster and certificate of completion must be attached.

Attach policies and procedures.

Continuing education providers shall award at least 32 contact hours to each LPN who completes the course. Continuing education providers may award 20 contact hours, one time only, to each RN who completed the course.
Attach policies and procedures.
Process of Notification 60-16-103 (h)
After Initial Approval, each change in the course shall be provided to the board for approval before the change is implemented.
Attach policies and procedures.
Attach policies and procedures.
Process for Record Keeping and Storage 60-16-103 (f)(D)
The faculty shall complete the final record sheet, which shall include competencies and scores.
Attach policies and procedures.

If Applicable, Awarding of CNE 60-16-103 (g)

Process for Documenting Successful Completion The intravenous

fluid therapy course coordinator shall:

Award a certificate to each licensed nurse documenting successful completion of both the final written competency examination and the final clinical competency examination. 60-16-103 (f)(1)(B)

Submit to the Board, within 15 days, a typed, alphabetized roster listing the name and license number of each individual who has successfully completed the course and the date of completion. Use Board approved standardized roster. 60-16-103 (f)(1)(C)

Verify that you will maintain the records of each individual who has successfully completed the course for a period of at least five years. 60-16-103 (f)(D)

Attach policies and procedures.

Process for Submitting Annual Report 60-16-103 (i)(1)

Each IV Therapy course coordinator shall submit to the board an annual report for the period of July 1 through June 30 of the respective year that includes the total number of licensees taking the intravenous fluid therapy course, the number passing the course, and the number of courses held.

Attach policies and procedures.

Note: Each applicant must attach all documents required by KAR 60-16-103

SUBMIT:

- Coordinator resume/CV
- Faculty resume/CV
- Course breakdown (Agenda)
- Course roster
- Course bibliography
- Certificate of completion
- Course learning objectives
- Outlines of course curriculum (didactic & clinical)
- Copy of final written competency exam
- Copy of final clinical competency exam
- Clinical contracts (not required if only the healthcare facility where course is taking place is being used)

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I realize that this application is a legal document and that by signing below I am declaring under penalty of perjury under the laws of the State of Kansas that the information I have provided is true and correct to the best of my knowledge.

If all the above information is correct please sign below.

Otherwise please go back and correct any information that is necessary.

Signature:	Date: