AN ACT

RELATING TO BUSINESSES AND PROFESSIONS - NURSES AND NURSE ANESTHETISTS

Introduced By: Senators Doyle, and Gallo

Date Introduced: February 28, 2012

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

SECTION 1. Sections 5-34-3, 5-34-4, 5-34-7, 5-34-35, 5-34-36, 5-34-36, 5-34-37, 5-34-38, 5-34-39, 5-34-40 and 5-34-42 of the General Laws in Chapter 5-34 entitled “Nurses” are hereby amended to read as follows:

5-34-3. Definitions. -- As used in this chapter:

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

(2) "Approval" means the process where the board of nursing evaluates and grants official recognition to basic nursing education programs meeting established criteria and standards.

(3) “Certified registered nurse practitioner” “Advanced Practice Registered Nurse (APRN) (including Certified Nurse Practitioner (CNP); Certified Registered Nurse Anesthetist (CRNA); Certified Clinical Nurse Specialist, (CNS))” is an advanced practice nurse utilizing independent knowledge of physical assessment and management of health care and illnesses. The practice may include prescriptive privileges. The practice includes collaboration with other licensed health care professionals including, but not limited to, physicians, pharmacists, podiatrists, dentists and nurses. Practice as an APRN means an expanded scope of nursing in a role and population focus accepted by the BON with or without compensation or personal profit.
and includes the RN scope of practice. The scope of an APRN includes, but is not limited to, performing acts of advanced assessment, diagnosing, prescribing and ordering. APRNs may serve as primary care providers of record.

APRNs are expected to practice as licensed practitioners within their scope of practice recognized by the BON or state statute. Each APRN is accountable to patients, the nursing profession and the BON for complying with the requirements of this section and the quality of advanced nursing care rendered; for recognizing limits of knowledge and experience; planning for the management of situations beyond the APRN’s expertise; and for consulting with or referring patients to other health care providers as appropriate.

(4) "Department" means the department of health.

(5) "Health" means optimum well-being.

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

(7) "Licensed" means the status of qualified individuals who have completed a designated process by which the board of nursing grants permission to individuals accountable and/or responsible for the practice of nursing and to engage in that practice, prohibiting all others from legally doing so.

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

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

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

(11) "Psychiatric and mental health nurse clinical specialist" is an advanced practice nurse utilizing independent knowledge and management of mental health and illnesses. The practice may include prescription privileges of certain legend medications, controlled substances from Schedule II classified as stimulants, and controlled substances from Schedule IV within the scope of their practice. The practice may include collaboration with other licensed health care professionals, including, but not limited to, psychiatrists, psychologists, physicians, pharmacists, and nurses. The psychiatric and mental health clinical specialist holds the qualifications defined in § 5-34-40.1.

5-34-4. Board of nursing – Establishment – Composition – Appointment, terms, and removal of members – Director of nurse registration and nursing education. -- (a) Within the division of professional regulation, pursuant to chapter 26 of this title, there is a board of nurse registration and nursing education. The board shall be composed of fifteen (15) members. The term of office shall be for three (3) years. No member shall serve more than two (2) consecutive terms. The member shall serve until a qualified successor is appointed to serve. In making those appointments, the director of the department of health shall consider persons suggested by professional nurse organizations and the practical nurse's association.

(b) Present members of the board holding office under the provisions of this chapter shall serve as members of the board until the expiration of their terms or until qualified successors are appointed. The fifteen (15) member board shall include: eleven (11) professional nurses, two (2) practical nurses appointed by the director of health and approved by the governor and two (2) members of the general public appointed by the governor. Three (3) professional nurses shall be from different basic education programs preparing students to become nurses; one professional nurse shall be from a nursing service administration; four (4) professional non-administrative, clinical nurses not licensed as advanced practice nurses, and three (3) professional advanced practice nurses, one who holds a license as a certified registered nurse anesthetist, one who holds
a license as a certified registered nurse practitioner, and one who holds a license as a psychiatric and mental health nurse clinical nurse specialist. No educational program or cooperating agency shall have more than one representative on the board.

(c) The director of health may remove any member from the board for cause including, but not limited to, neglect of any duty required by law, or incompetence, or unprofessional conduct, or willful misconduct. A member subject to disciplinary proceedings shall be disqualified from board business until the charge is adjudicated. There shall also be a director of nurse registration and nursing education appointed by the director of health in accordance with the provisions of chapter 4 of title 36.

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

(1) Adopt, review, or revise rules, and regulations consistent with the law that may be necessary to effect provisions of the chapter;

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

(3) Require standards for nursing practice within organized nursing services and the individual practice of licensees;

(4) Approve the examinations for licensure;

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

(6) Conduct hearings upon charges calling for discipline of a licensee or revocation of a license;

(7) Issue subpoenas to, compel the attendance of witnesses at, and administer oaths to persons giving testimony at hearings;

(8) Cause the prosecution or enjoiner of all persons violating this chapter;

(9) Maintain a record of all its proceedings;

(10) Submit an annual report to the director of the department of health;

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

(12) Conduct public hearings, investigations, and studies of nursing practice, nursing education, and related matters and prepare and issue publications that, in the judgment of the board, allow the nursing profession to provide safe, effective nursing services to the public;

(13) Determine qualifications necessary for prescriptive privileges for certified registered nurse practitioners APRNs;

(14) Grant certified registered nurse practitioners APRNs prescriptive privileges;

(15) Determine qualification necessary for the prescriptive privileges for psychiatric and
mental health clinical nurse specialists; and

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

5-34-35. Qualifications of a certified registered nurse practitioner applicant

Qualifications of an APRN applicant. -- (a) An applicant for licensure to practice as a certified registered nurse practitioner APRN shall submit to the board of nurse registration and nursing education written evidence on forms furnished by the division of professional regulation, verified by oath, that:

(1) The applicant is a registered nurse who has completed an accredited educational program resulting in a master's degree, and/or a doctoral degree, in nursing and/or an approved nurse practitioner APRN course of study. This curriculum must include both a didactic component and supervised clinical experience that includes nationally recognized education standards and core competencies for programs preparing individuals in the role. Effective January 1, 2004, all applicants for initial licensure must complete an accredited educational program resulting in a master's degree with a major in nursing.

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

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

5-34-36. Licensing of certified registered nurse practitioners. Licensing of APRN --

A license to practice as a certified nurse practitioner APRN shall be issued if the applicant meets the qualifications for the certified registered nurse practitioner (R.N.P.) APRN license. Persons who meet the qualifications of a certified registered nurse practitioner, as stated in 5-34-35, and are currently licensed as certified registered nurse practitioners by examination or endorsement under the laws of another state of the United States and/or the District of Columbia shall be allowed to practice as certified registered nurse practitioners in this state for a period not to exceed ninety (90) days from the date of clearance by the board of nurse registration and nursing education of the department of health, provided that they are licensed in this state within ninety (90) days. The original privilege to work ninety (90) days from the date of clearance shall not be extended or renewed.

5-34-37. Application fee for certified registered nurse practitioners. Application fee
The initial application fee for licensure as a certified registered nurse practitioner (APRN) shall be one hundred and thirty dollars ($130). The renewal fee for a certified registered nurse practitioner (APRN) shall be one hundred and thirty dollars ($130) biennially, ninety dollars ($90.00) for registered nurse fee plus forty dollars ($40.00) for the certified registered nurse practitioner (APRN) license. The fee for application for prescriptive privileges shall be fifty dollars ($50.00).

5-34-38. Right to use certified registered nurse practitioner title. — Right to use advanced practice registered nurse title — Any person who holds a license to practice as a certified registered nurse practitioner (APRN) in this state has the right to use the title certified registered nurse practitioner (APRN) and use the abbreviation “R.N.P. APRN”. No other person may assume that title or use that abbreviation or any other words or letters, signs, figures, or devices to indicate that the person using it is a certified registered nurse practitioner (APRN) and use the abbreviation “R.N.P. APRN”. Individuals are licensed or granted privilege to practice as APRNs in the roles of Certified Registered Nurse Anesthetist (CRNA), Certified Clinical Nurse Specialist (CNS), and Certified Nurse Practitioner (CNP), and in the population foci of family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women’s health/gender-related, or psychiatric/mental health.

Each APRN shall use the designation “APRN” plus role title as a minimum for purposes of identification and documentation. When providing nursing care, the APRN shall provide clear identification that indicates his/her APRN designation. The APRN with an earned doctorate in nursing may use the term doctor or abbreviation “Dr.” when providing nursing care.


(1) Shall be granted under the governance and supervision of the department, board of nurse registration and nurse education; and

(2) Shall include prescription of legend medications and prescription of controlled substances from schedules II, III, IV and V that are established in regulation; and

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

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

5-34-40. Advanced practice nurse advisory committee. -- (a) The nine (9) member committee consists of two (2) certified registered nurse practitioners, two (2) certified registered nurse anesthetists, two (2) psychiatric and mental health certified clinical nurse specialists, one physician and two (2) consumers. The director of health shall appoint the committee. In making appointments to the committee, the director shall consider persons recommended by professional nurse organizations and professional medical associations. The professional members of the committee shall be currently engaged in practice. The consumer members shall be: (1) knowledgeable in consumer health concerns; (2) a resident of the state; (3) not licensed as a health care practitioner; (4) not a parent, spouse, sibling, or child of a person licensed as a health care practitioner, and not a student in a professional program; (5) not having a direct financial interest in health care services; (6) not a member or an employee of any board of control of any public or private health care service.

(b) Each member appointment shall be for three (3) years, with no member serving more than two (2) consecutive three (3) year terms except that in making the initial appointments the director designates: four (4) members for a term of two (2) years; three (3) members for a term of three (3) years; and the consumer members for three (3) year terms.

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

(1) To assess advanced nursing practice for the purpose of improving patient care.

(2) To review all complaints regarding advanced practice nurses, and recommend any and all disciplinary or corrective action that they deem appropriate, including revocation and suspension of license, upon proof that an advanced practice nurse has:

(A) Aided or abetted an uncertified person to practice as an advanced practice nurse;

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

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

(D) Had his or her authorization to practice as an advanced practice nurse denied, revoked or suspended in another state;

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

(F) Willfully failed to file or record medical records and reports;
(G) Mental incompetence; or

(H) Willfully failed to maintain standards established by the nursing profession.

(ii) The recommendation shall be submitted to the board of nursing for implementation.

(3) To advise periodically to the board of nurse registration and nursing education regarding advanced nurse practice.

5-34-42. Global signature authority of certified registered nurse. Global signature authority of APRN -- Whenever any provision of the general or public law, or regulation requires a signature, certification, stamp, verification, affidavit or endorsement by a physician, it shall be deemed to include a signature, certification, stamp, verification, affidavit or endorsement by a certified registered nurse practitioner, an advanced practice registered nurse; provided, however, that nothing in this section shall be construed to expand the scope of practice of nurse practitioners APRNs.

SECTION 2. Sections 5-34-40.1 and 5-34-40.2 of the General Laws in Chapter 5-34 entitled “Nurses” are hereby repealed in its entirety.

5-34-40.1. Qualifications of a psychiatric and mental health clinical nurse specialist applicant. -- (a) An applicant for licensure as a psychiatric and mental health clinical nurse specialist shall submit to the board written evidence on forms furnished by the department of health, verified by oath, that the applicant:

(1) Is a registered nurse who has completed an accredited educational program resulting in a master's degree in psychiatric and mental health nursing; and/or

(2) Passed a national qualifying examination recognized by the board.

(b) All persons who are engaged in the practice of a psychiatric and mental health clinical nurse specialist on July 1, 2003, who meet the definition in § 5-34-3(i) may be considered to have met the qualifications for licensure providing they have three (3) years experience acceptable to the board between January 1, 1997, and January 1, 2003. After January 1, 2004, all applicants for initial licensure must complete an accredited educational program resulting in a master's degree in nursing and must pass a national qualifying examination recognized by the board.

5-34-40.2. Licensing of psychiatric and mental health clinical nurse specialists. -- A license to practice as a psychiatric clinical nurse specialist shall be issued if the applicant meets the qualifications for the psychiatric and mental health clinical nurse specialist. Persons who meet the qualifications of a psychiatric and mental health clinical nurse specialist, as stated in § 5-34-40.1, and are currently licensed as psychiatric and mental health clinical nurse specialists by examination or endorsement under the laws of another state or territory of the United States and/or the District of Columbia shall be allowed to practice as psychiatric and mental health
clinical nurse specialists in this state for a period not to exceed ninety (90) days from the date of

clearance by the board of nurse registration and nursing education of the Rhode Island department

of health, provided that they are licensed in this state within ninety (90) days. The original

privilege to work ninety (90) days from the date of clearance shall not be extended or renewed.

SECTION 3. Chapter 5-34 of the General Laws entitled “Nurses” is hereby amended by

adding thereto the following section:

5-34-44. Status of current licensees.— (a) Any person holding a license to practice

nursing as a Registered Nurse Practitioner (RNP), Psychiatric Clinical Nurse Specialist, Certified

Registered Nurse Anesthetist in this state that is valid on December 31, 2013 shall be deemed to

be licensed as an APRN, with his or her current privileges and shall be eligible for renewal of

such license as defined under the provisions of this chapter or chapter 5-34.2.

(b) Any person holding a valid license to practice nursing, having graduated from an

accredited course of study, actively practicing in an advanced practice role, and holding national

certification related to his or her current practice setting, as of Dec. 31, 2013, as defined in

chapters 5-34 or 5-34.2 shall be deemed to be eligible to license as an APRN.

(c) After December 31, 2013, all new applicants for APRN licensure must meet the

stipulated licensure requirements.

(d) An APRN applying for licensure by endorsement in another state would be eligible

for licensure if he/she demonstrates that the following criteria have been met:

(1) Current, active practice in the advanced role; and

(2) Current active national certification, or recertification as applicable, in the advanced

role.

SECTION 4. Sections 5-34.2-2 and 5-34.2-3 of the General Laws in Chapter 5-34.2

entitled “Nurse Anesthetists” are hereby amended to read as follows:

5-34.2-2. Definitions.— (a) “Board” means the board of nurse registration and nurse

education established in § 5-34-4.

(b) “Certified registered nurse anesthetist” (CRNA) means a registered nurse who has

successfully met the requirements stated in this chapter.

(c) “Practice of certified registered nurse anesthesia” means providing certain health

care services under the supervision of, in collaboration with, anesthesiologists, licensed physicians,

or licensed dentists in accordance with § 5-31.1-1(16) which requires substantial specialized

knowledge, judgment and skill related to the administration of anesthesia, including preoperative

and postoperative assessment of patients; administering anesthetics; monitoring patients during

anesthesia; management of fluid in intravenous therapy and management of respiratory care.
5-34.2-3. Requirements for licensure of the nurse anesthetist. -- Requirements for licensure as a nurse anesthetist shall consist of the following:

(1) Current licensure as a professional registered nurse in the state; and

(2) Graduation from an educational program accredited by the American Association of Nurse Anesthetists council on accreditation of nurse anesthesia educational programs or its predecessors or successors, and which has as its objective preparation of nurses to practice nurse anesthesia; and

(3) Initial certification by the American Association of Nurse Anesthetists council on certification of nurse anesthetists and recertification, as applicable by the American Association of Nurse Anesthetists council on recertification of nurse anesthetists or their predecessors or successors.

(4) The requirements stated in subdivision (3) of this section do not apply to a graduate nurse anesthetist awaiting initial certification results, providing that initial certification is accomplished within ninety (90) days upon completion of an accredited nurse anesthesia educational program.

(5) The requirements stated in subdivisions (2) and (3) of this section do not apply to a professional registered nurse who practices nursing in accordance with the provisions of the Nurse Practice Act, chapter 34 of this title, and who is enrolled as a bona fide student in an accredited nurse anesthesia program providing nurse anesthesia under the supervision of a certified registered nurse anesthetist and anesthesiologist.

(6) Beginning July 21, 1992, all nurse anesthetists shall be afforded the same period of time to become licensed. Notwithstanding the provisions of this section, no person practicing as a nurse anesthetist in Rhode Island on July 1, 1991, shall be required to obtain proper certification under this chapter. However, as required by subdivision (3) of this section, persons who become certified under this section shall become recertified as applicable.

SECTION 2. This act shall take effect upon passage.
EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
AN ACT
RELATING TO BUSINESSES AND PROFESSIONS - NURSES AND NURSE ANESTHETISTS

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1 This act would amend the general laws to recognize the Advanced Practice Registered Nurse.
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3 This act would take effect upon passage.

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