

## NOTICES OF PROPOSED RULEMAKING

Unless exempted by A.R.S. § 41-1005, each agency shall begin the rulemaking process by first submitting to the Secretary of State's Office a Notice of Rulemaking Docket Opening followed by a Notice of Proposed Rulemaking that contains the preamble and the full text of the rules. The Secretary of State's Office publishes each Notice in the next available issue of the *Register* according to the schedule of deadlines for *Register* publication. Under the Administrative Procedure Act (A.R.S. § 41-1001 et seq.), an agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before beginning any proceedings for making, amending, or repealing any rule. (A.R.S. §§ 41-1013 and 41-1022)

### NOTICE OF PROPOSED RULEMAKING

#### TITLE 4. PROFESSIONS AND OCCUPATIONS

#### CHAPTER 19. BOARD OF NURSING

*Editor's Note: The following Notices of Proposed Rulemaking were exempt from Executive Order 2012-03 as issued by Governor Brewer. (See the text of the executive order on page 3229.)*

[R12-229]

#### PREAMBLE

- | <u>1. Articles, Parts and Sections Affected (as applicable)</u> | <u>Rulemaking Action</u> |
|---|--------------------------|
| R4-19-101   | Amend                    |
| Table 1   | Amend                    |
| R4-19-301   | Amend                    |
| R4-19-302   | Amend                    |
| R4-19-303   | Amend                    |
| R4-19-304   | Amend                    |
| R4-19-305   | Amend                    |
| R4-19-306   | Amend                    |
| R4-19-307   | Amend                    |
| R4-19-308   | Amend                    |
| R4-19-309   | Amend                    |
| R4-19-310   | Amend                    |
| R4-19-312   | Amend                    |
| R4-19-313   | New Section              |
- 2. Citations to the agency's statutory rulemaking authority to include the authorizing statutes (general) and the implementing statutes (specific):**  
Authorizing statutes: A.R.S. §§ 32-1606 (A)(1), (B)(4), (B)(5), (B)(9), (B)(13), (B)(17), (B)(21) and 32-1668  
Implementing statutes: ARS §§32-1601(4), 32-1632, 32-1633, 32-1634, 32-1634.01,32-1634.02, 32-1634.03, 32-1634.04, 32-1635, 32-1637, 32-1638, 32-1639, 32-1639.01, 32-1639.02, 32-1640, 32-1642, 32-1643, 32-3208, and 41-1080.
- 3. Citations to all related notices published in the *Register* as specified in R1-1-409(A) that pertain to the record of the proposed rule:**  
Notice of Rulemaking Docket Opening: 18 A.A.R. 1384, June 22, 2012
- 4. The agency's contact person who can answer questions about the rulemaking:**  
Name: Pamela K. Randolph RN, MS  
Associate Director of Education and Evidence-based Regulation  
Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014  
Telephone: (602) 771-7803  
Fax: (602) 771-7888  
E-mail: prandolph@azbn.gov
- 5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

The Arizona State Board of Nursing (Board) is amending Article 3 for the following reasons:

1. To improve consistency between the Board's rules and other state laws, specifically A.R.S. §§ 32-3208 and 41-1080 regarding mandatory reporting of criminal offenses and proof of legal presence.
2. To incorporate "Uniform Licensure Requirements" adopted by the Delegate Assembly of the National Council of State Boards of Nursing in August, 2011. These requirements establish consistency between nursing regulatory agencies across the country.
3. To implement the plan for rule revision approved by the Governor's Regulatory Review Council on April 6, 2010, as part of the Five-Year Rule Review of Article 3.

Additionally the Board is amending Article 1 to incorporate additional definitions needed in Article 3. Specific changes to each Section are detailed below.

#### **R4-19-101. Definitions**

The Board is amending this Section by adding definitions of: "admission cohort", "eligibility for graduation", "substance use disorder," "CMA" and "verified application". The definition for "regionally accredited" is updated to allow for name changes in regional accrediting organizations.

#### **Table 1.**

This table is being amended to delete the Certified Registered Nurse Anesthetist (CRNA) prescribing time-frames as statutory changes effective August 2, 2012, prohibit a CRNAs from prescribing and add CRNA certification, temporary certification and renewal time-frames consistent with statutory changes. In addition, due to the addition of A.R.S. §32-1650, time frame requirements for Certified Medication Assistants are added. Other amendments are made to make time-frames for response to a deficiency notice uniform across all license/certification types.

#### **R4-19-301. Licensure by Examination**

This rule is being amended to clarify the requirements for licensure, including incorporating the criminal reporting requirements of A.R.S. § 32-3208 and the citizenship and alien status requirements of A.R.S. § 41-1080. Additionally the Board added the following uniform licensure requirements: self report of substance use disorder, current investigations and actions on licenses by other jurisdictions; participation in alternative to discipline programs; licensure of applicants eligible to graduate; role-delineation education for graduates of RN programs who want to obtain a practical nurse license; and self report of licensure status for internationally licensed nurses. The Board also amended the acceptable English language proficiency tests and revised the passing standards consistent with the research studies cited in item 6 below. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-302. Licensure by Endorsement**

The Board is amending this Section to incorporate a provision for licensure of applicants who do not meet the educational requirements of the Board, but are licensed in other jurisdictions and practicing safely. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-303. Requirements for Credential Evaluation Service (CES)**

The Board is amending this Section to remove the expiration provision for approval of a CES and add a requirement for a CES to report on the status of any foreign licenses held. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-304. Temporary License**

The Board is amending this Section to clarify that the applicant does not need a current nursing license to qualify for a temporary license and clarifies that the Board may issue a temporary license for the sole purpose of completing clinical requirements for a refresher or competency evaluation program for a nurse who does not meet the practice requirement. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-305. License Renewal**

The Board is amending this Section to include the criminal reporting requirements in A.R.S. § 32-3208 and uniform licensure requirements similar to amendments to R4-19-301. The Board is adding a provision for non-issuance of a renewal license until an investigation has been completed and the Board renders a decision if the applicant has a current or previous license in another jurisdiction that is or was revoked, surrendered, denied, suspended or placed on probation in another jurisdiction. Additionally, the Board is amending this Section to allow for the collection of workforce data. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-306. Inactive License**

The Board is amending this Section to specify provisions for transferring a license to retirement status. Other amendments are made to improve clarity, conciseness or understandability.

#### **R4-19-307. Application for a Duplicate License**

The Board is clarifying requirements for a duplicate license and incorporating electronic communication methods in this Section.

**R4-19-308. Change of Name or Address**

The Board is amending this Section to incorporate electronic communication methods.

**R4-19-309. School Nurse Certification Requirements**

At the request of stakeholders the Board is amending the requirements for school nurse certification to: eliminate award of certification without additional education, recognize national certification, and clarify the renewal requirements. This rule is also amended to be consistent with the amendments to R4-19-301 and R4-19-305. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-310. Certified Registered Nurse**

The Board is amending this Section to reflect the name change of a certifying agency. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-312. Practice Requirement**

The Board is amending this Section to clarify that international practice will meet the practice requirement and the circumstances under which care of a relative will meet the practice requirement. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-313. Background**

The Board is making this New Section for the purpose of incorporating the standards in “Uniform Licensure Requirements” adopted by the Delegate Assembly of the National Council of State Boards of Nursing in August, 2011, regarding evaluations for applicants disclosing substance use disorder or criminal convictions of a sexual nature.

**6. A reference to any study relevant to the rules that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

There were three relevant studies that the agency reviewed and proposes to rely on in the Board’s justification for amendments to R4-19-301, specifically related to the passing standards on English language proficiency exams. The studies are:

1. Woo, A., Dickison, P. & Jong, J. (June, 2010) Setting an English language proficiency passing standard for entry-level nursing practice using the Pearson Test of English Academic™. NCLEX Technical Brief. Available at National Council of State Boards of Nursing, 212 E. Wacker Drive, STE 2900, Chicago, IL www.ncsbn.org.
2. Wendt, A. & Woo, A. (August, 2009). A minimum English proficiency standard for Test of English as a Foreign Language™ (TOEFL®iBT). NCLEX Psychometric Research Brief. Available at National Council of State Boards of Nursing, 212 E. Wacker Drive, STE 2900, Chicago, IL www.ncsbn.org.
3. O’Neill, T., Buckendahl, C., Plake, B. & Taylor, L. (2007) Recommending a nursing-specific passing standard for the IELTS Examination. *Language Assessment Quarterly*. Available at: www.informaworld.com.

**7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable

**8. The preliminary summary of the economic, small business, and consumer impact:**

The proposed amendments to Article 3 are expected to have a small to moderate economic impact on the Board and little to no impact on any regulated entity or small businesses. The Arizona State Board of Nursing (Board) licenses approximately 72,000 registered nurses and 11,000 practical nurses. Additionally there are approximately 302 certified school nurses, representing a decrease of 231 certified school nurses from the 533 certified in 2004. Adopting uniform licensure requirements and the requirements of A.R.S. § 32-3208 will impact the Board as more self reports of possible unprofessional conduct are expected. It is anticipated that triage time will increase to accommodate the expected increase in self reporting. There also may be increased investigations for failure to provide accurate information on an application if an applicant does not self-report. It is difficult to determine the exact impact of these amendments on Board staffing, and the Board is not requesting increases in personnel or operating costs at the present time. The amendments will also impact applicants with a criminal or substance use history and may delay licensure causing potential loss of income. Nurses who have revoked licenses in another jurisdiction will also experience economic losses due to inability to renew the license before an investigation is concluded. These amendments, however, will apply to very few nurses.

Applicants from international jurisdictions may experience negative economic consequences due to inability to meet the revised standards for English language proficiency. The amended standards are grounded in evidence and will ensure that internationally educated nurses licensed in AZ have the necessary language proficiency to function at a minimally competent level. In 2011 the Board had 86 applications by exam from internationally educated nurses;

Notices of Proposed Rulemaking

approximately 25 percent of these applicants are from English speaking countries and would not be affected by English language proficiency requirements.

There are positive economic benefits to these amendments for school nurses who have national certification because their certification will meet both initial and renewal requirements for AZ school nurse certification. The public will benefit from the added scrutiny of applicants and the increased clarity of the rules. Small businesses are not expected to be impacted unless they are seeking to hire a nurse with a criminal or substance use background or significant action on a license in another state. The Board believes that the benefits of these amendments outweigh the costs.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Pamela K. Randolph RN, MS  
Associate Director of Education and Evidence-based Regulation  
Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014  
Telephone: (602) 771-7803  
Fax: (602) 771-7888  
E-mail: prandolph@azbn.gov  
Website: azbn.gov

**10. The time, place, and nature of the proceedings to make, repeal or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rules:**

The Board will hold an oral proceeding on January 14, 2013, at 4:00 p.m., in the Board offices at 4747 N. 7th St., Suite 200, Phoenix, AZ 85014. The Board will accept written comments submitted to Pamela Randolph, Associate Director of Education and Evidence-based Regulation, 4747 N. 7th St., Suite 200, Phoenix, AZ 85014 until the close of record at 5 p.m., January 14, 2013.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. § § 41-1052 and 41-1055 shall respond to the following question:**

There are no other matters prescribed by statute applicable to the Board or this specific class of rules

**a. Whether the rules requires a permit, whether a general permit is used and if not the reasons why a general permit is not used:**

This rulemaking does not require a permit however this Article relates to the issuance of a license which can be considered a general permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rules is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of the federal law:**

Federal law is not applicable to the subject of the rule.

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

There is no material incorporated by reference.

**13. The full text of the rules follows:**

**TITLE 4. PROFESSIONS AND OCCUPATIONS**

**CHAPTER 19. BOARD OF NURSING**

**ARTICLE 1. DEFINITIONS AND TIME-FRAMES**

Section  
R4-19-101. Definitions

**ARTICLE 3. LICENSURE**

Section  
R4-19-301. Licensure by Examination

R4-19-302.	Licensure by Endorsement
R4-19-303.	Requirements for Credential Evaluation Service ( <u>CES</u> )
R4-19-304.	Temporary License
R4-19-305.	License Renewal
R4-19-306.	Inactive License
R4-19-307.	Application for a Duplicate License
R4-19-308.	Change of Name or Address
R4-19-309.	School Nurse Certification Requirements
R4-19-310.	Certified Registered Nurse
R4-19-312.	Practice Requirement
<u>R4-19-313.</u>	<u>Background</u>

## ARTICLE 1. DEFINITIONS AND TIME-FRAMES

### R4-19-101. Definitions

In addition to the definitions in A.R.S. § 32-1601, in this Chapter:

“Abuse” means a misuse of power or betrayal of trust, respect, or intimacy by a nurse, nursing assistant, or applicant that causes or is likely to cause physical, mental, emotional, or financial harm to a client.

“Administer” means the direct application of a medication to the body of a patient by a nurse, whether by injection, inhalation, ingestion, or any other means.

“Admission cohort” means a group of students admitted at the same time to the same curriculum in a regulated nursing, nursing assistant, or advanced practice nursing program or the first clinical course in a regulated program.

“Applicant” means a person seeking licensure, certification, prescribing, or prescribing and dispensing privileges, or an entity seeking approval or re-approval, if applicable, of a:

- CNS or RNP nursing program,
- Credential evaluation service,
- Nursing assistant training program,
- Nursing program,
- Nursing program change, or
- Refresher program.

“Approved national nursing accrediting agency” means an organization recognized by the United States Department of Education as an accrediting agency for a nursing program.

“Assign” means a nurse designates nursing activities to be performed by another nurse that are consistent with the other nurse's scope of practice.

“Certificate or diploma in practical nursing” means the document awarded to a graduate of an educational program in practical nursing.

“Client” means a recipient of care and may be an individual, family, group, or community.

“Clinical instruction” means the guidance and supervision provided by a nursing program faculty member or NAT-CEP instructor while a student is providing client care.

“CMA” means certified medication assistant.

“CNA” means a certified nursing assistant, as defined in A.R.S. § 32-1601(14).

“CNS” means clinical nurse specialist, as defined in A.R.S. § 32-1601(6).

“Collaborate” means to establish a relationship for consultation or referral with one or more licensed physicians on an as-needed basis. Supervision of the activities of a registered nurse practitioner by the collaborating physician is not required.

“Contact hour” means a unit of organized learning, which may be either clinical or didactic and is either 60 minutes in length or is otherwise defined by an accrediting agency recognized by the Board.

“Continuing education activity” means a course of study related to nursing practice that is awarded contact hours by an accrediting agency recognized by the Board, or academic credits in nursing or medicine by a regionally or nationally accredited college or university.

“CRNA” means a certified registered nurse anesthetist who provides anesthesia services under A.R.S. § 32-1661.

“DEA” means the federal Drug Enforcement Administration.

“Dispense” means to package, label, and deliver one or more doses of a prescription-only medication in a suitable container for subsequent use by a patient.

“Dual relationship” means a nurse or CNA simultaneously engages in both a professional and nonprofessional relationship with a patient or resident that is avoidable, non-incident, and results in the patient being exploited financially, emotionally, or sexually.

“Eligibility for graduation” means that the applicant has successfully completed all program and institutional requirements for receiving a degree or diploma but is delayed in receiving the degree or diploma due to the graduation schedule of the institution.

“Endorsement” means the procedure for granting an Arizona nursing license to an applicant who is already licensed as a nurse in another state or territory of the United States and has passed an exam as required by A.R.S. §§ 32-1633 or 32-1638 or an Arizona nursing assistant certificate to an applicant who is already listed on a nurse aide register in another state or territory of the United States.

“Episodic nursing care” means nursing care at nonspecific intervals that is focused on the current needs of the individual.

“Failure to maintain professional boundaries” means any conduct or behavior of a nurse or CNA that, regardless of the nurse's or CNA's intention, is likely to lessen the benefit of care to a patient or resident or a patient's or resident's family or places the patient, resident or the patient's or resident's family at risk of being exploited financially, emotionally, or sexually;

“Full approval” means the status granted by the Board when a nursing program, after graduation of its first class, demonstrates the ability to provide and maintain a program in accordance with the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter.

“Good standing” means the license of a nurse, or the certificate of a nursing assistant, is current, and the nurse or nursing assistant is not presently subject to any disciplinary action, consent order, or settlement agreement.

“Independent nursing activities” means nursing care within an RN's scope of practice that does not require authorization from another health professional.

“Initial approval” means the permission, granted by the Board, to an entity to establish a nursing assistant training program, after the Board determines that the program meets the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter.

“Licensure by examination” means the granting of permission to practice nursing based on an individual's passing of a prescribed examination and meeting all other licensure requirements.

“LPN” means licensed practical nurse.

“NATCEP” means Nurse Aide Training and Competency Evaluation Program and includes both the nursing assistant training program and the required certification exam.

“NCLEX” means the National Council Licensure Examination.

“Nurse” means a licensed practical or registered nurse.

“Nursing diagnosis” means a clinical judgment, based on analysis of comprehensive assessment data, about a client's response to actual and potential health problems or life processes. Nursing diagnosis statements include the actual or potential problem, etiology or risk factors, and defining characteristics, if any.

“Nursing practice” means assisting individuals or groups to maintain or attain optimal health, implementing a strategy of care to accomplish defined health goals, and evaluating responses to care and treatment.

“Nursing process” means applying problem-solving techniques that require technical and scientific knowledge, good judgment, and decision-making skills to assess, plan, implement, and evaluate a plan of care.

“Nursing program” means a formal course of instruction designed to prepare its graduates for licensure as registered or practical nurses.

“Nursing program administrator” means a nurse educator who meets the requirements of A.R.S. Title 32, Chapter 15 and this Chapter and has the administrative responsibility and authority for the direction of a nursing program.

“Nursing program faculty member” means an individual working full or part time within a nursing program who is responsible for either developing, implementing, teaching, evaluating, or updating nursing knowledge, clinical skills, or curricula.

“Nursing-related activities or duties” means client care tasks for which education is provided by a basic nursing assistant training program.

“P & D” means prescribing and dispensing.

“Parent institution” means the educational institution in which a nursing program or nursing assistant training program is conducted.

“Patient” means an individual recipient of care.

“Pharmacology” means the science that deals with the study of drugs.

“Physician” means a person licensed under A.R.S. Title 32, Chapters 7, 8, 11, 13, 14, 17, or 29, or by a state medical board in the United States.

“Preceptor” means a registered nurse or other health professional who meets the requirements of A.R.S. Title 32, Chapter 15 and this Chapter who instructs, supervises and evaluates a licensee, clinical nurse specialist, nurse practitioner or pre-licensure nursing student, for a defined period.

“Preceptorship” means a clinical learning experience by which a learner enrolled in a registered nursing program, nurse refresher program, clinical nurse specialist, or registered nurse practitioner program or as part of a Board order provides nursing care while assigned to a health professional who holds a license or certificate equivalent to or higher than the level of the learner's program or in the case of a nurse under Board order, meets the qualifications in the Board order.

“Prescribe” means to order a medication, medical device, or appliance for use by a patient.

“Proposal approval” means that an institution has met the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter to proceed with an application for provisional approval to establish a pre-licensure nursing program in Arizona.

“Provisional approval” means that an institution has met the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter to implement a pre-licensure nursing program in Arizona.

“Refresher program” means a formal course of instruction designed to provide a review and update of nursing theory and practice.

“Regionally accredited” means an educational institution ~~is accredited by the New England Association of Schools and Colleges, Middle States Association of Colleges and Secondary Schools, North Central Association of Colleges and Schools, Northwest Association of Schools and Colleges, Southern Association of Colleges and Schools, or Western Association of Schools and Colleges~~ meets the standards and holds a current, valid certificate of accreditation from a regional accrediting organization recognized by the Council for Higher Education Accreditation (CHEA) or a subsequent equivalent organization.

“Register” means a listing of Arizona certified nursing assistants maintained by the Board that includes the following about each nursing assistant:

Identifying demographic information;

Date placed on the register;

Date of initial and most recent certification, if applicable; and

Status of the nursing assistant certificate, including findings of abuse, neglect, or misappropriation of property made by the Arizona Department of Health Services, sanctions imposed by the United States Department of Health and Human Services, and disciplinary actions by the Board.

“Resident” means a patient who receives care in a long term care facility or other residential setting.

“RN” means registered nurse.

“RNP” means a registered nurse practitioner as defined in A.R.S. § 32-1601(19).

“SBTPE” means the State Board Test Pool Examination.

“Self-study” means a written self-evaluation conducted by a nursing program to assess the compliance of the program with the standards listed in R4-19-201 through R4-19-206.

“School nurse” means a registered nurse who is certified under R4-19-309.

“Standards related to scope of practice” means the expected actions of any nurse who holds the identified level of licensure.

“Substance use disorder” means misuse, dependence or addiction to alcohol, illegal drugs or other substances.

“Supervision” means the direction and periodic consultation provided to an individual to whom a nursing task or patient care activity is delegated.

“Traineeship” means a clinical learning experience where a student enrolled in an approved nursing assistant training program provides care for residents in a long term care facility while working with a CNA employed by the facility under the supervision of an RN or LPN.

**Notices of Proposed Rulemaking**

“Unlicensed assistive personnel” or “UAP” means a CNA or any other unlicensed person, regardless of title, to whom nursing tasks are delegated.

“Verified application” means an affidavit signed by the applicant attesting to the truthfulness and completeness of the application and includes an oath that applicant will conform to ethical professional standards and obey the laws and rules of the Board.

**Table 1. Time-frames**

**Time-frames (in days)**

Type of License, Certificate, or Approval	Applicable Statute and Section	Board Overall Time-frame Without Investigation	Board Overall Time-frame With Investigation	Board Administrative Completeness Review Time-frame	Applicant Time to Respond to Deficiency Notice	Board Substantive Review Time-frame Without Investigation	Board Substantive Review Time-frame With Investigation	Applicant Time to Respond to Comprehensive Written Request
Nursing Program Proposal Approval	A.R.S. §§ 32-1606(B)(2), 32-1644; R4-19-207	150	Not applicable	60	180	90	Not applicable	120
Nursing Program Provisional Approval	A.R.S. §§ 32-1606(B)(2), 32-1644; R4-19-207	150	Not applicable	60	180	90	Not applicable	120
Nursing Program Full Approval or Re-approval	A.R.S. §§ 32-1606(B)(2), 32-1644; R4-19-208, R4-19-210	150	Not applicable	60	180	90	Not applicable	120
Nursing Program Change	A.R.S. § 32-1606(B)(1); R4-19-209	150	Not applicable	60	180	90	Not applicable	120
Refresher Program Approval or Re-approval	A.R.S. § 32-1606(B)(21); R4-19-214	150	Not applicable	60	180	90	Not applicable	120
CNS or RNP Nursing Program Approval or Re-approval	A.R.S. §§ 32-1606(B)(18), 32-1644; R4-19-503	150	Not applicable	60	180	90	Not applicable	120
Credential Evaluation Service Approval or Re-approval	A.R.S. §§ 32-1634.01(A)(1), 32-1634.02(A)(1), 32-1639.01(1), 32-1639.02(1); R4-19-303	150	Not applicable	60	180	90	Not applicable	120
Licensure by Exam	A.R.S. §§ 32-1606(B)(5), 32-1633, 32-1638, and R4-19-301	150	270	30	270	120	240	150
Licensure by Endorsement	A.R.S. §§ 32-1606(B)(5), 32-1634, 32-1639, and R4-19-302	150	270	30	270	120	240	150
Temporary License or Renewal	A.R.S. §§ 32-1605.01(B)(3), 32-1635, 32-1640; R4-19-304	60	90	30	60	30	60	90
License Renewal	A.R.S. §§ 32-1606(B)(5), 32-1642; R4-19-305	120	270	30	270	90	240	150
School Nurse Certification or Renewal	A.R.S. §§ 32-1606(A)(7) and (B)(13), 32-1643(A)(8); R4-19-309	150	270	30	270	120	240	150
Re-issuance or Subsequent Issuance of License	A.R.S. § 32-1664(O); R4-19-404	150	270	30	270	120	240	150
Registered Nurse Practitioner Certification or Renewal	A.R.S. §§ 32-1601(19), 32-1606(21); R4-19-505, R4-19-506	150	270	30	<del>180</del> 270	120	240	150

*Arizona Administrative Register / Secretary of State*

**Notices of Proposed Rulemaking**

RNP Prescribing and Dispensing Privilege	A.R.S. § 32-1601(19); R4-19-511	150	270	30	270	120	240	150
CNS Certification or Renewal	A.R.S. §§ 32-1601(6), 32-1606(21); R4-19-505, R4-19-506	150	270	30	270	120	240	150
CRNA Prescribing Privilege Certification or Renewal	A.R.S. § 32-1601(13)(m); R4-19-515	150	270	30	270	120	240	150
Temporary RNP, CRNA or CNS Certificate or Renewal	A.R.S. § 32-1635.01; R4-19-507	60	Not applicable	30	60	30	Not applicable	60
Nursing and Medication Assistant Training Programs Approval or Re-approval	A.R.S. §§ 32-1606(B)(11), 32-1650.01; R4-19-803, R4-19-804	120	Not applicable	30	180	90	Not applicable	120
Nursing Assistant and Medication Assistant Certification by Examination	A.R.S. §§ 32-1606(B)(11), 32-1647, 32-1650.02, 32-1650.03; R4-19-806	150	270	30	270	120	240	150
Nursing and Medication Assistant Certification by Endorsement	A.R.S. §§ 32-1606(B)(11), 32-1648, 32-1650.04; R4-19-807	150	270	30	270	120	240	150
Temporary CNA of CMA Certificate or Renewal	A.R.S. §§ 1646(A)(5), 32-1650.05; R4-19-808	60	Not applicable	30	60	30	Not applicable	60
Nursing and Medication Assistant Certificate Renewal	A.R.S. § 32-1606(B)(11); R4-19-809	120	270	30	270	90	240	150
Re-issuance or Subsequent Issuance of a Nursing Assistant Certificate	A.R.S. § 32-1664(O); R4-19-815	150	270	30	270	120	240	150

**ARTICLE 3. LICENSURE**

**R4-19-301. Licensure by Examination**

**A.** An applicant for licensure by examination shall:

1. Submit ~~to the Board~~ a verified application to the Board on a form furnished by the Board that provides the following information about the applicant:
  - a. Full legal name and ~~any~~ all former names used by the applicant;
  - b. Mailing address, including declared primary state of residence, and telephone number;
  - c. Place and date of birth;
  - d. Ethnic category and marital status and e-mail address, at the applicant's discretion;
  - e. Social Security number for an applicant who lives or works in the United States;
  - f. Post-secondary education, including the names and locations of all schools attended, graduation dates, and degrees received, if applicable;
  - g. Current employer or practice setting, including address, ~~telephone number~~, position, and dates of service, if employed or practicing in nursing or health care, ~~and previous employer or practice setting in nursing or health care, if any, if current employment is less than 960 hours within the past five years;~~
  - h. Information regarding the applicant's compliance with the practice or education requirements in A.A.C. R4-19-312;
  - ~~h~~ i. Any state, territory, or country in which the applicant holds or has held a registered or practical nursing license and the license number and status of the license, including original state of licensure, if applicable;
  - ~~I~~ j. The date the applicant previously filed an application for licensure in Arizona, if applicable ~~or known;~~
  - ~~J~~ k. Responses to questions regarding the applicant's background on the following subjects:
    - i. Current investigation or pending ~~Pending~~ disciplinary action by a nursing regulatory agency in the United

Notices of Proposed Rulemaking

- States or its territories ~~or current investigation of the applicant's nursing license in another state or territory of the United States;~~
- ~~ii.~~ Action taken on a nursing license by any other state
  - ~~iii.~~ Undesignated offense and felony ~~Felony conviction charges, convictions and plea agreements including deferred prosecution;~~ or conviction of an undesignated or other similar offense, and;
  - ~~iv.~~ Misdemeanor charges, convictions and plea agreements, including deferred prosecution, that are required to be reported under A.R. S. § 32-3208;
  - ~~iii-iv.~~ Unprofessional conduct as defined in A.R.S. § 32-1601;
  - ~~vi.~~ Substance use disorder within the last five years;
  - ~~vii.~~ Current participation in an alternative to discipline program in any other state;
- ~~k-1.~~ Detailed explanation ~~Explanation~~ and supporting documentation for each affirmative answer to questions regarding the applicant's background; and
- ~~l-m.~~ Certification in nursing including category, specialty, name of certifying body, date of certification, and expiration date.
2. Submit proof of United States citizenship or alien status as specified in A.R.S. § 41-1080; and
- ~~2-3.~~ Submit a completed fingerprint card ~~on a form provided by the Board or prints~~ for the purpose of obtaining a criminal history report under A.R.S. § 32-1606 if the applicant has not submitted a fingerprint card ~~or prints~~ to the Board within the last two years; and
45. Pay the applicable fees.
- B.** ~~If an applicant took the State Board Test Pool Examination (SBTPE), National Council Licensure Examination (NCLEX<sup>®</sup>) RN, or NCLEX PN in any state or territory of the United States or in Canada, the applicant shall indicate on the application:~~
- ~~1. The date of the examination;~~
  - ~~2. The location of the examination, and~~
  - ~~3. The result of the examination.~~
- CB.** ~~If an applicant is a graduate of a nursing program in the United States that has been assigned a program code by the National Council of State Boards of Nursing during the period of the applicant's attendance,~~ the applicant shall submit one of the following:
- 1. If the program is an Arizona-approved program, the requirements of subsection (B)(2) or a statement signed by a nursing program administrator or designee verifying that:
    - a. The applicant graduated from ~~or is eligible to graduate from~~ a registered nursing program for a registered nurse applicant; or
    - b. The applicant ~~completed~~ graduated from ~~or is eligible to graduate from~~ a practical nursing program or graduated from a registered nursing program and completed Board-prescribed role delineation education for a practical nurse applicant; or
  - 2. If the program is located either in Arizona or in another state or territory and meets educational standards that are substantially comparable to Board standards for educational programs under A.A.C. R4-19-201 to R4-19-206 when the applicant completed the program, an official transcript sent directly from one of the following as:
    - a. Evidence of graduation ~~or eligibility for graduation~~ from a diploma registered nursing program, associate degree registered nursing program, or baccalaureate or higher degree registered nursing program for a registered nurse applicant.
    - b. Evidence of ~~completion~~ graduation ~~or eligibility for graduation~~ of a practical nursing program, associate degree registered nursing program, or baccalaureate or higher degree registered nursing program for a practical nurse applicant.
- D.** ~~If an applicant is a graduate of a foreign ~~an international~~ nursing program and lacks items required in subsection (C), the applicant shall comply with subsections (A) and (B), submit verification of the status of any nursing licenses held ~~a self report on the status of any international nursing license,~~ and submit the following:~~
- 1. To demonstrate nursing program equivalency, one of the following:
    - a. If the applicant graduated from an Canadian nursing program, ~~Evidence~~ evidence of a passing score on the English language version of either the Canadian Nurses' Association Testing Service, ~~or~~ the Canadian Registered Nurse Examination, or NCLEX or an equivalent examination;
    - b. A Certificate or Visa Screen Certificate issued by the Commission on Graduates of Foreign Nursing Schools (CGFNS), or a report from CGFNS that indicates an applicant's program is substantially comparable to a U.S. program; or
    - c. A report from ~~another~~ any other credential evaluation service (CES) ~~that is accepted~~ approved by the Board. ~~The Board shall accept reports from a CES if acceptance is in the best interest of the public and the CES submits the information required by the Board under R4-19-303.~~
    - d. If a graduate of an international pre-licensure nursing program subsequently obtains a degree in nursing from an accredited U.S. nursing program, the requirement for a CES report may be waived ~~however the applicant may~~

- not be eligible for a multi-state compact license.
2. If an applicant's pre-licensure nursing program provided classroom instruction, textbooks, or clinical experiences in a language other than English, a test of written, oral, and spoken English is required. Clinical experiences are ~~deemed to have been provided held~~ in a foreign language if the principal or official language of the country or region where the ~~nursing program was held~~ clinical experience occurred is a language other than English according to the United States Department of State. ~~An applicant shall ensure that one of the following is submitted to the Board directly from the testing or certifying agency:~~
  3. An applicant who is required to demonstrate English language proficiency shall ensure that one of the following is submitted to the Board directly from the testing or certifying agency:
    - a. ~~Evidence of a minimum score of 540 on the paper and pencil version or 207 on the computer-based version of the Test of English as a Foreign Language (TOEFL) and a minimum score of 50 on the Test of Spoken English (TSE) or a minimum score of 76 84 with a minimum speaking score of 26 on the Internet-based TOEFL Test of English as a Foreign Language (TOEFL),~~
    - b. ~~Evidence of a minimum score of 6.5 overall with minimum of 6.0 on each module of on the Academic Exam and 7.0 on the spoken exam of the International English Language Test Service (IELTS) Examination,~~
    - e. ~~Evidence of a minimum score of 725 on the Test of English in International Communication (TOEIC) exam and 50 on the TSE,~~
    - c. Evidence of a minimum score of 55 overall with a minimum score of 50 on each section of the Pearson Test of English Academic exam.
    - d. A Visa Screen Certificate from CGFNS,
    - e. A CGFNS Certificate ~~and a score of 50 on the TSE if the applicant did not take the Internet-based TOEFL or IELTS to meet certification requirements,~~
    - f. Evidence of a similar minimum score on another written and spoken English proficiency exam determined by the Board to be equivalent to the other exams in this subsection, or
    - g. Evidence of employment for a minimum of 960 hours within the past five years as a nurse in ~~another~~ a country or territory where the principal language is English according to the United States Department of State.
- E. An applicant for a registered nurse license shall attain one of the following:
1. A passing score on the NCLEX-RN;
  2. A score of 1600 on the NCLEX-RN, if the examination was taken before July 1988; or
  3. A score of not less than 350 on each part of the SBTPE for registered nurses.
- F. An applicant for a practical nurse license shall attain:
1. A passing score on the NCLEX-PN;
  2. A score of not less than 350 on the NCLEX-PN, if the examination was taken before October 1988; or
  3. A score of not less than 350 on the SBTPE for practical nurses.
- G. The Board shall grant a license to practice as a registered or practical nurse to any applicant who meets the criteria established in statute and this Article. An applicant who is denied a license by examination may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.
- H. If the Board receives an application from a graduate of a nursing program and the program's approval was rescinded under A.A.C. R4-19-211 at any time during the applicant's nursing education, the Board shall ~~withdraw the application or~~ ensure that the applicant has completed a basic curriculum that is equivalent to that of a Board-approved nursing program and ~~either may do any of the following~~:
1. Grant licensure, if the program's approval was reinstated during the applicant's period of enrollment and the program provides evidence that the applicant completed a curriculum equivalent to that of a Board-approved nursing program;  
~~or~~
  2. By order, require successful completion of remedial education while enrolled in a Board approved nursing program which may include clinical experiences, before granting licensure. ~~The applicant shall obtain any required education while enrolled in a Board approved nursing program; or~~
  3. Withdraw or deny the application if the education was not equivalent and no remediation is possible.

**R4-19-302. Licensure by Endorsement**

- A. An applicant for a license by endorsement shall submit all of the information required in A.A.C. R4-19-301(A).
- B. In addition to the information required in subsection (A), an applicant for a license by endorsement shall:
  1. Submit evidence of a passing examination score in accordance with:
    - a. A.A.C. R4-19-301(E) for a registered nurse applicant, or
    - b. A.A.C. R4-19-301(F) for a practical nurse applicant.
  2. Submit evidence of the following:
    - a. Previous or current license in another state or territory of the United States, ~~and~~
    - b. Provide information related to the nurse's practice for the purpose of collecting nursing workforce data, and

Notices of Proposed Rulemaking

- b. One of the following:
  - i. Completion of a pre-licensure nursing program that has been assigned a nursing program code by the National Council of State Boards of Nursing (NCSBN) at the time of program completion and the program meets educational standards substantially comparable to Board standards for educational programs in A.A.C. R4-19-201 to R4-19-206;
  - ii. If the applicant completed a pre-licensure nursing program that has been assigned a program code by the NCSBN but the program's approval was rescinded under A.R.S. § 32-1644(D) or R4-19-215 during the applicant's enrollment in the program, proof of completion of the program ~~plus any~~ and completion of any remedial education required by the Board to mitigate the deficiencies in the applicant's initial nursing program;
  - iii. ~~Completion of a nursing program that met the qualifications for a program code at the time of the applicant's graduation if before 1986 and the applicant was issued an initial license in another state or territory of the United States without being required to obtain additional education or experience; or~~ If the applicant graduated from a U.S. nursing program before 1986 and the applicant was issued an initial license in another state or territory of the United States without being required to obtain additional education or experience, proof both of program completion and initial licensure without additional educational or experiential requirements;
  - iv. ~~For a graduate of a foreign~~ If the applicant graduated from an international nursing program, completion of a nursing program that meets proof of meeting the requirements in R4-19-301(D)(1). ~~In addition, an applicant who graduated from a foreign nursing program shall satisfy the English proficiency requirements in R4-19-301(D)(2) if the applicant has not practiced nursing for a minimum of 960 hours within the past five years in another state, territory, or country where English is the primary language.~~
  - v. If the Board finds that the documentation submitted by the applicant does not fulfill the above requirements, but the applicant has submitted verified employer evaluations demonstrating applicant's safe practice as a registered or practical nursing in another state for a minimum of two years full-time during the past three years and applicant otherwise meets licensure requirements, the Board may grant a single-state only license if the Board determines that licensure is in the best interest of the public.

C. The Board shall grant a license to practice as a registered or practical nurse to any applicant who meets the criteria established in statute and this Article. An applicant who is denied a license by endorsement may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-303. Requirements for Credential Evaluation Service (CES)**

- A. ~~A credential evaluation service CES that seeks~~ seeking to be accepted Board approval by the Board shall submit documentation to the Board ~~for initial acceptance and every three years~~ demonstrating that it:
  - 1. Provides a credential evaluation to determine comparability of registered nurse or practical nurse programs in other countries to nursing education in the United States;
  - 2. Evaluates original source documents;
  - 3. Has five or more years of experience in evaluating nursing educational programs or employs personnel that have this experience;
  - 4. Employs staff with expertise in evaluating nursing programs;
  - 5. Has access to resources pertinent to the field of nursing education and the evaluation of nursing programs;
  - 6. Issues a report on each applicant, and supplies the Board with a sample of such a report, regarding the comparability of the applicant's nursing educational program to nursing education in the United States that includes:
    - a. The current name of the applicant including any names formerly used by the applicant ~~former names~~,
    - b. Source and description of the documents evaluated,
    - c. Name and nature of the ~~institution~~ nursing education program including status of the parent institution,
    - d. Dates applicant attended,
    - e. References consulted,
    - f. A seal or some other security measure, ~~and~~
    - g. Notification of any falsification or misrepresentation of documents by the applicant;
    - h. A report on licensure examination results for the applicant, if an exam was required for licensure in the international jurisdiction, and
    - i. The status of any international nursing licenses held by the applicant.
  - 7. Has a quality control program that includes at a minimum:
    - a. Standards regarding the use of original documents,
    - b. ~~Verifying~~ Verification of authenticity of documents and translations,
    - c. ~~Security of documents~~ Processes and procedures to prevent and detect fraud;
    - d. Policies for maintaining Confidentiality confidentiality of applicant educational records,

Notices of Proposed Rulemaking

- e. Responsiveness to applicants, ~~including ensuring that include the criterion~~ that reports are issued no later than eight weeks from the receipt of an applicant's documents; and
  - f. Tracking ~~of~~ and notification ~~of to~~ the Board of any trends in falsification or misrepresentation of documents;
  8. Follows ~~or exceeds~~ the standards of the National Association of Credentialing Services (NACES) or an equivalent organization ~~regarding staffing, and resources;~~
  9. ~~Will allow the Board to conduct a site survey at any time deemed necessary by the Board~~ Responds to Board requests for information in a timely and thorough manner; and
  10. Agrees to notify the Board before any changes in any of the above criteria.
- B.** ~~Depending on the severity of the violation, If a CES fails to comply with the provisions of subsection A, the Board may revoke the its approval of a credential evaluation service that fails to comply with the criteria established in this Section the CES.~~
- C.** The Board shall approve a credential evaluation service that meets the criteria established in this Section. ~~An A CES~~ applicant who is denied approval or whose approval is revoked may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-304. Temporary License**

- A.** Subject to subsection (B), the Board shall issue a temporary license if:
1. An applicant:
    - a. Is qualified under:
      - i. A.R.S. § 32-1635 and applies for a temporary registered nursing license, or is qualified under A.R.S. § 32-1640 and applies for a temporary practical nursing license; and
      - ii. R4-19-301 for applicants for licensure by examination, or is qualified under R4-19-302 for applicants for licensure by endorsement; and
    - b. Submits an application for a temporary license with the applicable fee required under A.R.S. § 32-1643(A)(9); and
    - c. Submits an application for a license by endorsement or examination with the applicable fee required under A.R.S. § 32-1643(A).
  2. An applicant is seeking a license by examination, meets the requirements of R4-19-312(C), and the Board receives a report from the Arizona Department of Public Safety (DPS), verifying that DPS has no criminal history record information, as defined in A.R.S. § 41-1701, relating to the applicant or that any criminal history reported has been reviewed by the executive director or the director's designee and determined not to pose a threat to public health, safety, or welfare; or
  3. An applicant is seeking a license by endorsement, meets the requirements in R4-19-312(B), and the applicant submits evidence that the applicant has a current license in good standing in another state or territory of the United States or, if no current license, a previous license in good standing that was not the subject of an investigation or pending discipline; or
  4. An applicant ~~has an expired, inactive, or lapsed license for five or more years, or who~~ does not meet the practice requirements in R4-19-312(B) or (C), but provides evidence that the applicant has applied for enrollment in a refresher program or other competency program approved by the Board, may practice nursing under a temporary license during the clinical portion of the program only.
- B.** An applicant who has a criminal history, a history of disciplinary action by a regulatory agency, ~~or~~ a pending complaint before the Board, or answers affirmatively to any criminal background or disciplinary question in the application is not eligible for a temporary license or extension of a temporary license without Board approval.
- C.** A temporary license is valid for a maximum of 12 months unless extended for good cause under subsection (D) of this Section.
- D.** An applicant with a temporary license may apply for and the Board or the Executive Director or designee may grant an extension of the temporary license period for good cause. Good cause means reasons beyond the control of the temporary licensee, such as unavoidable delays in obtaining information required for licensure.
- E.** An applicant who receives a temporary license but does not meet the criteria for a regular license within the established period under subsections (C) and (D) is no longer eligible for a temporary license except for the purposes of completing a refresher program under subsection (A)(4) of this Section.

**R4-19-305. License Renewal**

- A.** An applicant for renewal of a registered or practical nursing license shall:
1. Submit ~~to the Board~~ a verified application to the Board obtained from on a form furnished by the Board that provides all of the following information about the applicant:
    - a. Full legal name, mailing address, telephone and declared primary state of residence;
    - b. A listing of all states in which the applicant is currently licensed, or, since the last renewal, was previously

Notices of Proposed Rulemaking

licensed or has been denied licensure;

- c. Marital status; and e-mail address, at the applicant's discretion;
  - d. Information regarding qualifications, including:
    - i. Educational background;
    - ii. Employment status; ~~and~~
    - iii. Practice setting; and
    - iv. Other information related to the nurse's practice for the purpose of collecting nursing workforce data.
  - e. Responses to questions regarding the applicant's background on the following subjects:
    - i. Criminal convictions for offenses involving drugs or alcohol since the time of last renewal;
    - ii. Undesignated offense and felony Felony charges, convictions and plea agreements including deferred prosecution; or convictions for undesignated or other similar offenses since the time of last renewal; and
    - iii. Misdemeanor charges, convictions and plea agreements, including deferred prosecution, that are required to be reported under A.R. S. § 32-3208;
    - ~~iii~~ iv. Unprofessional conduct as defined in A.R.S. § 32-1601 since the time of last renewal;
    - v. Substance use disorder within the last five years;
    - vi. Current participation in an alternative to discipline program in any other state;
    - vi. Disciplinary action or investigation related to the applicant's nursing license by any other state nursing regulatory agency since the last renewal.
  - f. ~~A detailed explanation~~ Explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
  - g. Information ~~about~~ related to the applicant's current or most recent nursing practice setting under R4-19-312, including position, address, telephone number, and dates of practice. ~~If the period of practice in the current position is less than 960 hours within the last five years, the nurse shall provide, if available, documentation of 960 hours of practice in the last five years; and~~
  - h. Information regarding the applicant's compliance with the practice or education requirements in A.A.C. R4-19-312;
  - ~~h.i.~~ National certification Certification in nursing including category, specialty, name of certifying body, date of certification, certification number, and expiration date, if applicable; and for an applicant certified as a registered nurse practitioner or clinical nurse specialist the patient population of the certification; and
- 2. Pay fees for renewal authorized by A.R.S. § 32-1643(6); and
  - 3. Pay an additional fee for late renewal authorized by A.R.S. § 32-1643(7) if the application for renewal is submitted after ~~August 1~~ May 1 of the year of renewal.

- B.** A license ~~renewed after July 1, 2000~~ expires ~~November 2~~ on August 1 of the year of renewal indicated on the license.
- C.** A licensee who fails to submit a renewal application before expiration of a license shall not practice nursing until the Board issues a renewal license.
- D.** If the applicant holds a license or certificate that has been or is currently revoked, surrendered, denied, suspended or placed on probation in another jurisdiction, the applicant is not eligible to renew or reactive a license until a review or investigation has been completed and a decision made by the Board.
- DE.** The Board shall renew the license of any registered or practical nurse applicant who meets the criteria established in statute and this Article. An applicant who is denied renewal of a license may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying renewal of the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-306. Inactive License**

- A.** A licensee in good standing may submit to the Board either as a separate written request document to the Board or as part of the renewal application, a request to transfer to inactive status, or retirement status under A.R.S. § § 32-1606 (A) (10) and 32-1636 (E), or request a transfer to inactive status on a verified renewal application.
- B.** The Board shall send a written notice to the licensee granting inactive or retirement status ~~in writing~~ or denying the request. A licensee denied a request for transfer to inactive or retirement status may request a hearing by filing a written request with the Board within 30 days of service of the denial of the request. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-307. Application for a Duplicate License**

- A.** A licensee shall report a lost or stolen license to the Board, in writing or electronically through the Board website, within 30 days of the loss.
- B.** A licensee requesting a duplicate license shall file an application on a form provided by the Board for a duplicate license and pay the applicable fee under A.R.S. § 32-1643(A) (14).

**R4-19-308. Change of Name or Address**

- A.** A licensee or applicant shall notify the Board, in writing or electronically through the Board website, of any legal change

in name within 30 days of the change, and submit a copy of the official document verifying the name change.

- B. A licensee or applicant shall notify the Board in writing or electronically through the Board website of any change in mailing address within 30 days.

**R4-19-309. School Nurse Certification Requirements**

A. ~~Application requirements.~~ An applicant for initial school nurse certification shall:

1. Hold a current license in good standing or multistate privilege to practice as a registered nurse in Arizona;
2. Submit ~~to the Board~~ a verified application to the Board on a form furnished by the Board that provides the following information about the applicant:
  - a. Full legal name and any former names used by the applicant;
  - b. Mailing address and telephone number;
  - c. Registered nurse license number;
  - d. Social security number;
  - e. A description of the applicant's educational background, including the number and location of schools attended, the number of years attended, the date of graduation, the type of degree or certificate awarded, and if applicable, ~~a statement~~ evidence that the applicant has satisfied the ~~educational~~ requirements specified in subsection (B), (C), or (D), or (E);
  - f. Current employer, including address, telephone number, position type, dates of employment, and previous employer if the current employment is less than 12 months;
  - g. The name of any national certifying organization, specialty area, certification number and date of certification, if applicable; and for an applicant certified in as a nurse practitioner or clinical nurse specialist, the population of the certification;
  - h. Responses to questions regarding the applicant's background on the following subjects:
    - i. Current investigation or pending ~~Pending~~ disciplinary action by a nursing regulatory agency in the United States or its territories or current investigation in another state or territory of the United States;
    - ii. Action taken on a nursing license by any other state;
    - iii. Undesignated offense and felony ~~Felony charges, conviction convictions and plea agreements including deferred prosecution, or conviction of an undesignated or other similar offense; and~~
    - iv. Misdemeanor charges, convictions and plea agreements, including deferred prosecution, that are required to be reported under A.R. S. § 32-3208;
    - v. Unprofessional conduct as defined in A.R.S. § 32-1601; and
    - vi. Substance use disorder within the last five years; and
    - vii. Current participation in an alternative to discipline program in any other state;
  - i. Detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background; and
  - j. E-mail address at the applicant's discretion.
3. Pay applicable fees.

B. ~~Initial level~~ National certification.

In addition to the requirements of subsection A of this Section, if an applicant provides evidence of current national certification as a school nurse or school nurse practitioner from an organization that meets the requirements of A.A.C. R4-19-310, the applicant qualifies for Arizona school nurse certification without the requirements in subsection (C) for as long as the national certification remains current. The nurse shall provide evidence of continuing certification upon each renewal under subsection (D).

1. ~~Only applicants who have never been certified by the Board or the Department of Education are eligible for certification at the initial level. The Board does not require additional education, exceeding that required for licensure as a registered nurse for initial level certification.~~
2. ~~Initial level certification expires three years after the issue date on the certificate.~~

C. ~~First level~~ Initial certification

1. ~~If the initial level certificate of a school nurse has expired, or the school nurse was previously certified by the Department of Education and has never renewed, the nurse shall apply for first level certification.~~ In addition to the requirements in subsection (A) of this Section, the registered nurse applicant shall provide evidence of completion of all the following:
  - a. Three semester hours in school nurse practice course work,
  - b. Three semester hours in physical assessment of the school-aged child course work unless the applicant provides evidence of current national certification from an organization that meets the requirements of A.A.C. R4-19-310 as a pediatric nurse practitioner, family nurse practitioner, or pediatric clinical nurse specialist and
  - c. Three semester hours in nursing care of the child with developmental disabilities special needs.
2. ~~A first level~~ Initial certificate expires ~~three~~ six years after the issue date on the certificate.

D. ~~Second level~~ Renewal of certification.

Notices of Proposed Rulemaking

1. If the ~~first level initial~~ certificate of a school nurse has expired and the applicant has met the requirements in subsections (B) or (C)(1) of this Section, or the school nurse was previously certified by the Department of Education and has renewed once, the nurse shall apply for second level certification. In addition to the requirements in subsection A, the applicant is eligible to apply for re-certification. Within the application, the applicant shall provide evidence of completion of one the following for renewal of certification:
    - a. Current national certification as a school nurse as specified in subsection (B),
    - ~~a.b.~~ A bachelor of science or graduate degree in nursing earned from an accredited institution as specified in A.A.C. R4-19-201 (A) within the last six years, or
    - ~~b.c.~~ Completion of the following educational requirements:
      - i. ~~Three semester hours in community health nursing theory or population-based care;~~
      - ii. ~~Three semester hours in management theory; and~~
      - iii. ~~Either three semester hours of upper division or graduate credit in nursing or health related subjects from a regionally-accredited institution, as defined in R4-19-101, or 45 Evidence of completion of a minimum of 90 contact hours of continuing education activity, as defined in A.A.C. R4-19-101, related to school nursing practice and completed within the last six years~~
  2. ~~A second level certificate~~ Renewal of certification expires six years after the issue date on the certificate.
- ~~E.~~ Third level certification:
1. If the ~~second level certificate~~ of a school nurse has expired or the school nurse was previously certified by the Department of Education and has renewed two or more times, the nurse shall apply for third level certification on all subsequent renewals. In addition to the requirements in subsection (A), the registered nurse applicant shall provide evidence of all the following:
    - ~~a. Six semester hours of upper division or graduate credit in nursing or health related subjects from a regionally accredited institution, as defined in R4-19-101; or~~
    - ~~b. Ninety contact hours of continuing education related to nursing practice.~~
  2. ~~Third level certification expires six years after the issue date on the certificate.~~
- ~~FE.~~ The Board shall grant a school nurse certificate to any applicant who meets the criteria established in statute and this Article. An applicant who is denied a school nurse certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the certificate. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-310. Certified Registered Nurse**

A registered nurse who has been certified by a nursing certification organization accredited by the ~~American Board of Nursing Specialties Accreditation Board for Specialty Nursing Certification~~, the National Commission for Certifying Agencies, or an equivalent accrediting agency as determined by the Board is deemed certified for the purposes of A.R.S. § 32-1601(4).

**R4-19-312. Practice Requirement**

- A. The Board shall not issue a license or renew the license of an applicant who does not meet the applicable requirements in subsections (B), (C), and (D) of this Section.
- B. An applicant for licensure by endorsement or renewal shall ~~either have complete~~ completed a post-licensure nursing program or practice nursing at the applicable level of licensure for a minimum of 960 hours in the five years before the date on which the application is received. This requirement is satisfied if the applicant verifies that the applicant has:
  1. Completed a post-licensure nursing education program at a school that is accredited under A.A.C. R4-19-201 (A) and obtained a degree, or an advanced practice certificate in nursing within the past five years; or
  2. Practiced for a minimum of 960 hours within the past five years where the nurse:
    - a. Worked for compensation or as a volunteer, as a licensed nurse in the United States or an international jurisdiction, and performed one or more acts under A.R.S. § 32-1601(13) as an RN for a an registered nurse RN applicant or A.R.S. § 32-1601(12) as an LPN for a practical nurse-an LPN applicant; or
    - b. Held a position for compensation or as a volunteer in the United States or an international jurisdiction that required or recommended, in the job description, the level of licensure being sought or renewed; or
    - c. Engaged in clinical practice as part of an RN-BSN, masters, doctoral, or nurse practitioner RN-to-Bachelor of Science in Nursing, Masters, Doctoral or Nurse Practitioner program.
3. Care of family members does not meet the requirements of Subsection (C)(2) of this Section unless the applicant submits evidence:
  - a. That the applicant is providing care as part of a medical foster home; or
  - b. That the specific care provided by the applicant was:
    - i. Ordered by another health care provider who is authorized to prescribe and was responsible for the care of the patient,
    - ii. The type of care would typically be authorized by a third-party payer, and
    - iii. The care was documented and reviewed by the health care provider.

Notices of Proposed Rulemaking

- C. An applicant for licensure by either examination or endorsement, who is a graduate of a nursing program located in the U.S or its territories and does not meet the requirements of subsection B of this Section, shall ~~have complete~~ completed the clinical portion of a pre-licensure nursing program within two years of the date of licensure. Examination applicants who were previously licensed in a foreign jurisdiction shall meet the applicable requirements of subsection (B) or (D) of this Section.
- D. A licensee or applicant who fails to satisfy the requirements of subsection (B) or (C) of this Section, shall submit evidence of satisfactory completion of a Board-approved refresher or competency program ~~that meets the requirements in R4-19-214~~ The Board may issue a temporary license stamped “for refresher course only” to any applicant who meets all requirements of this Article except subsection (B) or (C) of this Section and provides evidence of applying for enrollment in a Board-approved refresher or competency program.

**R4-19-313. Background**

- A. All applicants convicted of a sexual offense involving a minor or performing a sexual act against the will of another person shall be subject to a Board order under A.R.S. 32-1644 (F) and R4-19-405 unless the individual is precluded from licensure under A.R.S. §32-1606 (B)(17). If the evaluation identifies sexual behaviors of a predatory nature, the Board shall deny licensure or renewal of licensure.
- B. All individuals reporting a substance use disorder in the last five years may be subject to a Board order for an evaluation under A.R.S. § 32-1644 (F) and R4-19-405 to determine safety to practice.
- C. The Board may order the evaluation of other individuals on a case-by-case basis under A.R.S. 32-1644 (F) and R4-19-405.

**NOTICE OF PROPOSED RULEMAKING**

**TITLE 4. PROFESSIONS AND OCCUPATIONS**

**CHAPTER 19. BOARD OF NURSING**

[R12-231]

**PREAMBLE**

- | <b><u>1. Articles, Parts and Sections Affected (as applicable)</u></b> | <b><u>Rulemaking Action</u></b> |
|--|---------------------------------|
| R4-19-201  | Amend                           |
| R4-19-202  | Amend                           |
| R4-19-203  | Amend                           |
| R4-19-204  | Amend                           |
| R4-19-205  | Amend                           |
| R4-19-206  | Amend                           |
| R4-19-207  | Amend                           |
| R4-19-208  | Amend                           |
| R4-19-209  | Amend                           |
| R4-19-210  | Amend                           |
| R4-19-211  | New Section                     |
| R4-19-212  | Re-number                       |
| R4-19-212  | Amend                           |
| R4-19-213  | Re-number                       |
| R4-19-213  | Amend                           |
| R4-19-214  | New Section                     |
| R4-19-215  | Re-number                       |
| R4-19-215  | Amend                           |
| R4-19-216  | Re-number                       |
| R4-19-216  | Amend                           |
| R4-19-217  | Re-number                       |
| R4-19-217  | Amend                           |
| R4-19-702  | Amend                           |
- 2. **Citations to the agency’s statutory rulemaking authority to include the authorizing statutes (general) and the implementing statutes (specific):**
    - Authorizing statutes: A.R.S. § 1606 (B)(1), (B)(2), (B)(3), (B)(8), (B)(10) and (B)(23)
    - Implementing statutes: A. R. S. §§ 32-1601(2), (17), (18); 32-1644 (A), (B), (C), (D) and (E); 32-1664; 32-1666 (B); 32-1667 (3).
  - 3. **Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the**

**proposed rule:**

Notice of Rulemaking Docket Opening: 18 A.A.R. 3226, December 7, 2012 (*in this issue*).

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Pamela K. Randolph RN, MS  
Associate Director of Education and Evidence-based Regulation  
Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014  
Telephone: (602) 771-7803  
Fax: (602) 771-7888  
E-mail: prandolph@azbn.gov

**5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

The Arizona State Board of Nursing (Board) is engaging in this rulemaking to implement the plan for rule revision approved by the Governor's Regulatory Review Council on March 2, 2010, for Article 2, and January 10, 2012, for R4-19-702 as part of Five-Year Rule Reviews. Other changes have been proposed by stakeholders to increase regulatory effectiveness and public safety. Specific changes to each Section are summarized below.

**R4-19-201. Organization and Administration**

Amendments proposed by the Board will require nursing programs to: provide continuing evidence of institutional accreditation; evaluate graduation and attrition rates of each cohort; incorporate specific evaluation components related to protection of patient safety; and have an articulation agreement if providing an associate degree RN program. In addition, technical, grammatical and clarifying changes were made to this Section.

**R4-19-202. Resources, Facilities, Services and Records**

This rule is being amended to clarify the standards by which program resources will be evaluated. Other amendments include requirements for dedicated secretarial, laboratory and other support personnel; that supplies be in working order and organized; that technology support teaching; that records be kept for three years; and that programs keep records of grievances. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-203. Administrator; Qualifications and Duties**

Amendments to this Section include: requiring that both RN and PN nursing program administrators hold a minimum of a graduate degree in nursing, have three years nursing experience and at least one year teaching experience in a pre-licensure nursing program; clarifying that the administrator has a duty to evaluate faculty when performance concerns arise; clarifying that safety requirements for faculty and students be equivalent; requiring policies regarding minimum nursing skill set and knowledge for both students and faculty for the type of clinical unit assigned; requiring that the nursing program administrator not administer any other program unless there is an appointed assistant administrator. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-204. Faculty; Personnel Policies; Qualifications and Duties**

Most amendments to this Section were made to improve clarity, conciseness or understandability. There is one substantive amendment requiring written policies for orientation, continuous learning and evaluation of faculty.

**R4-19-205. Students; Policies and Admissions**

The Board is amending this Section to: delineate the duty of nursing programs to provide resources for admitted students and limit admissions if resources are not available; require written admission and progression criteria that are evidence-based; require a nursing program to enforce policies; require that certain policies be available to the general public; clarify notification that must be given to change policies. Additional amendments are made to improve clarity, conciseness and understandability.

**R4-19-206. Curriculum**

Amendments to this Section include: requiring that clinical sites provide experiences that meet objectives; detailing the standards for a written curriculum; clarifying course requirements including the inclusion of the Quality and Safety Education in Nursing (QSEN) competencies recommended by the Institute of Medicine (IOM) to reduce error; specifying standards for precepted experiences; allowing an LPN program to engage in precepted clinical experiences; and allowance for simulation as long as it does not completely substitute for a clinical experience; and established an on-time graduation standard.

**R4-19-207. New Programs; Proposal Approval; Provisional Approval**

The Board is amending this Section to: require that a qualified nurse write or direct the proposal and provisional applications; require new programs to merely notify other programs of their intent rather than estimating the effect on

other programs; clarify that programs must be structured consistent with Board regulations; amend evidence requirements regarding accreditation; require curriculum development at the proposal stage; provide evidence that clinical sites are secured for projected enrollment at both proposal and provisional stages; require that entities seeking to establish a program in Arizona that are in other jurisdictions have NCLEX and attrition results consistent with AZ regulations and have no substantiated complaints; limit enrollment to 60 students per year until Board verifies that the program is compliant with regulations; and require a report within one year and a Board site visit to verify compliance. Other amendments are made to improve clarity, conciseness or understandability.

**R4-19-208. Full Approval of a New Nursing Program**

Amendments are made to this Section to improve clarity, conciseness or understandability.

**R4-19-209. Nursing Program Change**

The Board is amending this Section to: require that nursing program changes be supported by evidence; clarify which changes to mission and goals need approval; clarifying that length of the program refers to academic credits in nursing; clarifying that deleting a geographical location does not need approval; requiring all programs regardless of size to gain approval to increase admissions annually by 30 students or more; and requiring Board approval for to establish a modification of a program with alternate admission or graduation requirements. Other amendments are made to this Section to improve clarity, conciseness or understandability.

**R4-19-210. Renewal of Approval of a Nursing Program not Accredited by a National Nursing Accrediting Organization**

Amendments are made to improve clarity, conciseness or understandability and incorporate electronic submission of documents.

**R4-19-211. Unprofessional Conduct**

Due to increasing complaints of unethical and unsafe instruction on the part of nursing program personnel, and based on legal advice and consultation with stakeholders, the Board is adding this new Section regarding acts that would be considered unprofessional program conduct.

**R4-19-212. Notice of Deficiency**

The Board is re-titling and amending this Section to improve clarity and understandability and allow for more options including discipline for programs that are non-compliant or have additional violations.

**R4-19-213. Nursing Programs Holding National Program Accreditation**

Amendments made to this Section provide additional clarity regarding the relationship between the Board and nationally accredited nursing programs. This includes the requirement to submit a copy of the accreditation report to the Board following an accreditation visit and notification of all visits.

**R4-19-214. Pilot Programs for Innovative Approaches in Nursing Education**

The Board is establishing this new Section to allow for program innovation and rule variance to explore new approaches to nursing education. The Section is consistent with national models for approving innovative programs and requires evidence and extensive evaluation of the innovative approach.

**R4-19-215. Voluntary Termination of a Nursing Program or a Refresher Program**

Amendments were made to this section clarifying that a program is considered voluntarily terminated when it no longer admits or plans to admit students after current students graduate.

**R4-19-216. Approval of a Refresher Program**

Amendments to this Section were made to incorporate curriculum recommendations from stakeholders including QSEN competencies, specify qualifications of the administrator and faculty and require insurance or a bond and a fire inspection for programs that are not sponsored by an accredited or private post-secondary approved entity. Other amendments provide the Board with the opportunity to evaluate and accept an applicant who completes a refresher program in another jurisdiction. Hearing rights for refresher programs are specified. Other amendments are made to this Section to improve clarity, conciseness or understandability.

**R4-19-217. Distance Learning Nursing Programs; Out-of-State Nursing Programs**

Amendments to this Section include requiring out of state programs seeking clinical opportunities in AZ to submit evidence of clinical placement and faculty within the state to supervise the clinical experience. Other amendments are made to this Section to improve clarity, conciseness or understandability.

**ARTICLE 7**

**R4-19-702. Petition for Rulemaking; Review of Agency Practice or Substantive Policy Statement; Objection to Rule Based Upon Economic, Small Business, or Consumer Impact**

The Board is amending this Section to reflect statutory changes.

Notices of Proposed Rulemaking

**6. A reference to any study relevant to the rules that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

There are no studies that Board either relied on or did not rely on in its evaluation or justification for the rules.

**7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable

**8. The preliminary summary of the economic, small business, and consumer impact:**

The proposed amendments to Article 2 are expected to have a little to no economic impact on the Board and may have varying impacts on regulated programs depending on their current state of affairs. The Board regulates 38 nursing programs, 13 refresher programs and has approved four out-of-state programs for clinical placements. Twenty-three RN nursing programs hold national program accreditation. The majority of regulated programs meet the proposed rule requirements and many were instrumental in crafting this rulemaking. These programs will incur no additional costs. Programs with inadequate resources or who frequently violate rules will incur additional expenses related to compliance. Applicant programs will have an increased burden to show they can provide sound education, however due to the number of applicant programs that are non-compliant with regulations within the first year of operation, improved outcomes are expected from these amendments. Limitations in the number of students that new programs accept may decrease the profit to be gained from establishing a nursing program and admitting large numbers of students. However, no new nursing program has been able to admit more than 60 qualified students during the first year of operations. Programs will benefit from the provision for a rule variance to support innovation in education.

Consumers, especially students are expected to benefit from the improved transparency required of programs with this rulemaking and the increased requirements related to safety and the attrition. The limitation of admissions in a new program is expected to limit risk to students who may enroll in a program that does not have the resources they purported to have in their application documents. Small businesses operating refresher programs may be affected by amendments to R4-19-216, however all refresher programs were contacted and provided input to this rule amendment. In summary, the Board believes that the benefits to students, consumers and patients outweigh the costs of compliance.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name:	Pamela K. Randolph RN, MS Associate Director of Education and Evidence-based Regulation
Address:	4747 N. 7th St., Suite 200 Phoenix, AZ 85014
Telephone:	(602) 771-7803
Fax:	(602) 771-7888
E-mail:	prandolph@azbn.gov
Web-site:	azbn.gov

**10. The time, place, and nature of the proceedings to make, repeal or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rules:**

The Board will hold an oral proceeding on January 14, 2012, at 3:30 pm in the Board offices at 4747 N. 7th St., Suite 200, Phoenix, AZ 85014. The Board will accept written comments submitted to Pamela Randolph, Associate Director of Education and Evidence-based Regulation, 4747 N. 7th St., Suite 200, Phoenix, AZ 85014 until the close of record at 5 p.m., January 14, 2012.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. § § 41-1052 and 41-1055 shall respond to the following question:**

There are no other matters prescribed by statute applicable to the Board or this specific class of rules

**a. Whether the rules requires a permit, whether a general permit is used and if not the reasons why a general permit is not used:**

This rulemaking does not require a permit however this Article relates to the issuance of a license which can be considered a general permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rules is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of the federal law:**

Federal law is not applicable to the subject of the rule.

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness**

**of business in this state to the impact on business in other states:**

No analysis was submitted

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

There is no material incorporated by reference.

**13. The full text of the rules follows:**

**TITLE 4. PROFESSIONS AND OCCUPATIONS**

**CHAPTER 9. BOARD OF NURSING**

**ARTICLE 2. ~~ARIZONA REGISTERED PROFESSIONAL AND PRACTICAL NURSING PROGRAMS,~~  
~~REFRESHER PROGRAMS~~**

Section

- R4-19-201. Organization and Administration
- R4-19-202. Resources, Facilities, Services, and Records
- R4-19-203. Administrator; Qualifications and Duties
- R4-19-204. Faculty; Personnel Policies; Qualifications and Duties
- R4-19-205. Students; Policies and Admissions
- R4-19-206. Curriculum
- R4-19-207. ~~Application for Provisional Approval of a Nursing Program~~ New Programs; Proposal Approval; Provisional Approval
- R4-19-208. ~~Application for Full Approval of a New Nursing Program~~
- R4-19-209. Nursing Program Change
- R4-19-210. Renewal of Approval of ~~Board-approved~~ Nursing Programs Not Accredited by a National Nursing Accrediting Agency
- R4-19-211. Unprofessional Conduct in a Nursing Program
- ~~R4-19-211~~R4-19-212. ~~Rescission of Approval~~ Notice of Deficiency
- ~~R4-19-212~~R4-19-213. ~~Nationally Accredited~~ Nursing Programs Holding National Program Accreditation
- R4-19-214. Pilot Programs for Innovative Approaches in Nursing Education
- ~~R4-19-213~~R4-19-215. Voluntary Termination of a Nursing Program or a Refresher Program
- ~~R4-19-214~~R4-19-216. Approval of a Refresher Program
- ~~R4-19-215~~R4-19-217. Distance Learning Nursing Programs; Out-of-State Nursing Programs

**ARTICLE 7. PUBLIC PARTICIPATION PROCEDURES**

Section

- R4-19-702. Petition for Rulemaking; Review of Agency Practice or Substantive Policy Statement; Objection to Rule Based Upon Economic, Small Business, or Consumer Impact

**ARTICLE 2. ~~ARIZONA REGISTERED PROFESSIONAL AND PRACTICAL NURSING PROGRAMS,~~  
~~REFRESHER PROGRAMS~~**

**R4-19-201. Organization and Administration**

- A. The parent institution of a nursing program shall be accredited as a post-secondary institution, college, or university, by an accrediting body that is recognized as an accrediting body by the U.S. Department of Education, and shall hold Arizona private post-secondary approval status if applicable. The parent institution shall submit evidence to the board of continuing accreditation after each reaccreditation review or action. If the parent institution holds both secondary and post-secondary accreditation, it shall operate any RN or PN program under its post-secondary accreditation.
- B. A nursing program shall have a written statement of mission and goals consistent with those of the parent institution and compatible with current concepts in nursing education and practice appropriate for the type of nursing program offered.
- C. A nursing program shall be an integral part of the parent institution and shall have at a minimum equivalent status with other academic units of the parent institution.
- D. The parent institution shall center the administrative control of the nursing program in the nursing program administrator and shall provide the support and resources necessary to meet the requirements of R4-19-203 and R4-19-204.
- E. A nursing program shall provide an organizational chart that identifies the actual relationships, lines of authority, and channels of communication within the program, and between the program and the parent institution.

Notices of Proposed Rulemaking

- F. A nursing program shall have a written agreement between the program and each clinical agency where clinical experience is provided to the program's students that:
1. Defines the rights and responsibilities of both the clinical agency and the nursing program,
  2. Lists the role and authority of the governing bodies of both the clinical agency and the nursing program,
  3. Allows faculty members of the program the right to participate in selecting learning experiences for students, and
  4. Contains a termination clause that provides sufficient time for enrolled students to complete the clinical experience upon termination of the agreement.
- G. A nursing program shall ~~have~~ implement written policies and procedures that provide a mechanism for student input into the development of academic policies and procedures and participation in the evaluation plan allow students to anonymously evaluate faculty, nursing courses, clinical experiences, resources and the overall program.
- H. The parent institution shall appoint a sole individual to the full-time position of nursing program administrator. The parent institution shall ensure that the individual appointed who meets or exceeds the requirements of, and fulfills the duties specified in, R4-19-203, whether on an interim or permanent basis.
- I. A nursing program shall ~~have develop and implement~~ a written plan for the systematic evaluation of the total program that is based on program and student learning outcomes and that incorporates continuous improvement based on the evaluative data. The plan shall include ~~the methodology, frequency of evaluation, assignment of responsibility, and evaluative criteria-measurable outcome criteria, logical methodology, frequency of evaluation, assignment of responsibility, actual outcomes and actions taken.~~ The following areas shall be evaluated:
1. Internal structure of the program, its relationship to the parent institution, and compatibility of program policies and procedures with those of the parent institution;
  2. Mission and goals;
  3. Curriculum;
  4. Education facilities, resources, and student support services;
  5. Clinical resources;
  6. Student achievement of program educational outcomes
  7. Graduation and attrition for each admission cohort including at a minimum:
    - a. Number and percent of students who left the program;
    - b. Number and percent of students who are out of sequence in the program; and
    - c. Number and percent of students who graduated within 100%, 150% or greater than 150% of time allotted in the curriculum plan.
  78. Graduate performance on the licensing examination;
  89. Faculty performance; and
  910. Protection of patient safety including but not limited to:
    - a. Student and faculty policies regarding supervision of students, practicing within scope and student safe practice;
    - b. The integration of safety concepts within the curriculum;
    - c. The application of safety concepts in the clinical setting; and
    - d. Policies made under R4-19-203(C)(6).
- J. A nursing program shall notify the Board of a vacancy or pending vacancy in the position of nursing program administrator within 15 days of the program's awareness of the vacancy or pending vacancy and do the following:
1. Appoint an interim administrator or a permanent administrator who meets the requirements of R4-19-203(A) within 15 days of the effective date of the vacancy, and
  2. Notify the Board of the appointment of an interim or permanent administrator within 15 days of appointment and provide a copy of the administrator's credentials to the Board.
- J. The parent institution shall provide adequate fiscal, human, physical, and learning resources to support program processes and outcomes necessary for compliance with this Article.
- K. The parent institution shall provide adequate resources to recruit, employ, and retain sufficient qualified faculty members necessary to meet program and student learning outcomes and the requirements of this Article.
- L. The parent institution shall notify the Board of a vacancy, pending vacancy, or leave of absence greater than 30 days in the position of nursing program administrator within 15 days of the program's awareness of the vacancy, pending vacancy, or leave of absence and do the following:
1. Appoint an interim or permanent administrator who meets the requirements of R4-19-203(A) within 15 days of the effective date of the vacancy or absence, and
  2. Notify the Board of the appointment of an interim or permanent administrator within 15 days of appointment and provide a copy of the administrator's credentials to the Board.
- M. A parent institution shall notify the Board within 15 days of any change or pending change in institutional accreditation status or reporting requirements.
- N. Prior to final approval for new nursing programs and by 2015 for existing programs, all RN nursing programs offering less than a bachelor's degree in nursing shall have a minimum of one articulation agreement with a Board approved and nationally accredited baccalaureate or higher nursing program that includes recognition of prior learning in nursing and

recognition of foundational courses.

**R4-19-202. Resources, Facilities, Services, and Records**

- A. The parent institution of a nursing program shall consider the size of the program including number of program faculty and number of program students and shall provide and maintain resources, services and facilities for the for the effective development and implementation of the program that are at a minimum:
1. Equivalent to those provided by approved programs of equivalent size and type, or in the case of no equivalent program, scaled relative to an approved program;
  2. Comparable to those provided to other academic units of the parent institution; and program
  3. that meet Meet the following requirements:
    - 1a. A private office for the administrator of the nursing program nursing program administrator;
    - 2b. Faculty offices that are conveniently located to program classrooms and secretarial support staff; and comparable to other faculty offices of the parent institution
    - 3c. Space for private faculty-student conferences. If faculty offices are not private, the parent institution shall provide dedicated space for private faculty-student conferences that is:
      - i. Conveniently located to faculty offices, and
      - ii. Available whenever confidential student information is discussed.
    - 4d. Space for clerical staff secretarial support and a secure area for records; and files, and equipment convenient to the nursing program faculty and administrator;
    - 5e. Facilities including classrooms Classrooms, laboratories, and conference rooms available at the time needed; of the size and type needed with furnishings and equipment consistent with the educational purposes for which the facilities are used; and equivalent in size, number, and type to facilities provided by approved programs of equivalent size and type or, in the case of no equivalent program, scaled relative to an approved program;
    - 6f. Acoustics, lighting, ventilation, plumbing, heating and cooling; in working order; seating arrangements, location, and storage, and supplies to simulate patient care equivalent to those provided by approved programs of equivalent size and scope, or in the case of no equivalent program, scaled relative to an approved program;
    - 7g. Dedicated Secretarial secretarial, laboratory and clerical other support personnel available to assist meet the needs of the program of the administrator and faculty.
    - 8h. Access to a comprehensive, current, and relevant collection of educational materials and learning resources for faculty members and students that are current and equivalent to materials and resources provided by an approved program of equivalent size or scope, or, in case of no equivalent program, scaled relative to an approved program.
      - i. Access to supplies and equipment to simulate patient care that are:
        - i. In working order.
        - ii. Organized in a manner so that they are readily available to faculty.
        - iii. Consistent with current clinical practices, and
        - iv. Of sufficient quantity for the number of students enrolled.
      - j. Current technology in working order to support teaching and learning. Institutions offering web-enhanced and distance education shall provide ongoing and effective technical, design and production support for faculty members and technical support services for students.
- B. A nursing program shall maintain current and accurate records of the following:
1. Student records, including admission materials, courses taken, grades received, scores in any standardized tests taken, and health and performance records, and health information submitted to meet program or clinical requirements for a minimum of three years after the fiscal year of program completion for academic records and one year after program completion for health records;
  2. Faculty records, including Arizona professional nursing license number, evidence of fulfilling the requirements in R4-19-204, and performance evaluations for faculty employed by the parent institution for one or more years. Records shall be kept current during the period of employment and retained for a minimum of three years after termination of employment;
  3. Minutes of faculty and committee meetings for a minimum of three years;
  4. Administrative records and reports Reports from accrediting agencies and the Board for a minimum of 10 years; and
  5. The statement of mission and goals, current curriculum, and course outlines and curricular materials consistent with the requirements of R4-19-206 for the current curriculum and, if the current curriculum is less than three years old, the previous curriculum; and
  6. Formal program complaints and grievances since the last site review with evidence of due process and resolution.

**R4-19-203. Administrator; Qualifications and Duties**

- A. A nursing program The nursing program administrator shall appoint an administrator who holds hold a current Arizona registered nurse license in good standing or multi-state privilege to practice in Arizona under A.R.S., Title 32, Chapter 15

Notices of Proposed Rulemaking

and:

1. For ~~registered professional nursing programs, a graduate degree with a major in nursing; or:~~
    - a. A graduate degree with a major in nursing;
    - b. A minimum of three years work experience as a registered nurse providing direct patient care; and
    - c. If appointed to the position of nursing program administrator on or after the effective date of these rules, have a minimum of one academic year full-time experience teaching in or administering a nursing education program leading to licensure; or
    - d. If lacking the requirements of subsection (A)(1)(c), the parent institution may appoint an individual to the position of "Interim Program Administrator" under the following conditions:
      - i. The individual is subject to termination based on performance and any factors determined by the institution;
      - ii. A direct supervisor evaluates performance periodically over the next 12 months to ensure institutional and program goals are being addressed; and
      - iii. If evaluations are satisfactory, the individual may be appointed to permanent status after 12 months in the interim position.
  2. For practical nursing programs, ~~a baccalaureate degree with a major in nursing;~~
    - a. If appointed prior to the effective date of these rules, a baccalaureate degree with a major in nursing; and
    - b. If appointed on or after the effective date of these rules, the requirements of subsection (A)(1).
- B.** The administrator shall have comparable status with other program administrators in the parent institution and shall report directly to an academic officer of the institution.
- C.** The administrator shall have the authority to direct the program in all its phases, including:
1. ~~Administer~~ Administering the nursing education program;
  2. ~~Facilitate and coordinate~~ Directing activities related to academic policies, personnel policies, curriculum, resources, facilities, services, and program evaluation;
  3. ~~Prepare~~ Preparing and administer administering the budget;
  4. ~~Recommend~~ Recommending candidates for faculty appointment, retention, and promotion;
  5. In addition to any other evaluation used by the parent institution, ~~ensure~~ ensuring that ~~faculty nursing program faculty members~~ are evaluated at a minimum:
    - a. ~~At least every three years,~~ Annually in the first year of employment and every three years thereafter;
    - b. Upon receipt of information that a faculty member, in conjunction with performance of their duties, may be engaged in intentional, negligent or other behavior that either is or might be:
      - i. Below the standards of the program or the parent institution,
      - ii. Inconsistent with nursing professional standards, or
      - iii. Potentially or actually harmful to a patient.
  - ~~bc.~~ By the nurse administrator or a nurse educator designated by the nurse administrator, and
  - ~~ed.~~ In the areas of teaching ability and application of nursing knowledge and skills relative to the teaching assignment.
  6. Maintain, enforce, and evaluate written policies and procedures that require all students, faculty, and preceptors who participate in clinical practice settings to be physically and mentally able to provide safe client care; and Together with faculty develop, enforce and evaluate equivalent student and faculty policies necessary for safe patient care and to meet clinical agency requirements regarding:
    - a. Physical and mental health.
    - b. Criminal background checks.
    - c. Substance use screens.
    - d. Functional abilities, and
    - e. Supervision of clinical activities.
  7. ~~Participate~~ Participating in activities that contribute to the governance of the parent institution--;
  8. Together with faculty develop, enforce and evaluate both student and faculty policies regarding minimal requisite nursing skills and knowledge necessary to provide safe patient care for the type of unit and patient assignment; and
  9. Enforcing consistent application of all nursing program policies.
- D.** The administrator of the nursing program shall not carry a teaching load of more than three clock hours per week if required to teach teach more than 45 contact hours per academic session.
- E.** The administrator may have administrative responsibilities other than the nursing program, provided that a nursing program faculty member is designated to assist with program management and the administrator is able to fulfill the duties of this Article.

**R4-19-204. Faculty; Personnel Policies; Qualifications and Duties**

- A.** A nursing program shall implement written personnel policies for didactic and clinical nursing faculty members including workload policies that at minimum conform to those for other faculty members of the parent institution and that are in accordance with accepted nursing educational standards or provide a written explanation of any differences not related to

the requirements of this Article.

- B. A nursing program shall provide at a minimum the number of qualified faculty members necessary for compliance with the provisions of this Article and comparable to that provided by approved programs of equivalent size and program type, or, in the case of no equivalent program, a number scaled relative to an approved program.
- C. The parent institution of a nursing program shall ensure that ~~the ratio of students to nursing faculty at least one nursing faculty member is assigned to no more than ten students~~ while students are directly or indirectly involved in the care of patients including precepted experiences is not more than ten to one.
- D. The faculty shall supervise all students in clinical areas in accordance with the acuity of the patient population, clinical objectives, demonstrated competencies of the student, ~~geographic placement of the student~~, and requirements established by the clinical agency.
- E. The parent institution of a nursing program shall ensure that every ~~registered professional~~ nursing program faculty member holds a current Arizona registered nurse license in good standing or multi-state privilege to practice in Arizona under A.R.S., Title 32, Chapter 15 and that every faculty member meets one of the following:
  - 1. If providing didactic instruction:
    - a. At least two years of experience as a ~~registered professional~~ nurse providing direct patient care; and
    - b. A graduate degree. The majority of the faculty members of a ~~registered professional~~ nursing program shall hold a graduate degree with a major in nursing. If the graduate degree is not in nursing, the faculty member shall hold a minimum of a baccalaureate degree in nursing; or
  - 2. If providing clinical instruction, as defined in R4-19-206, only:
    - a. The requirements for didactic faculty, or
    - b. A baccalaureate degree with a major in nursing and at least three years of experience as a ~~registered professional~~ nurse providing direct patient care.
- F. The parent institution of a nursing program shall ensure that each practical nursing program faculty member ~~has~~ holds a current Arizona registered nurse license in good standing or multi-state privilege to practice in Arizona under A.R.S., Title 32, Chapter 15 and that every faculty member meets the following:
  - 1. At least two years of experience as a registered professional nurse providing direct patient care, and
  - ~~2. A minimum of a baccalaureate degree with a major in nursing.~~
  - ~~2. A professional nurse license that is active and in good standing under A.R.S. Title 32, Chapter 15, and~~
  - ~~3. At least two years of experience as a professional nurse providing direct patient care.~~
- G. Under the leadership of the nursing program administrator, the nursing faculty, together with the program administrator, nursing program faculty members shall:
  - 1. Develop, implement, and evaluate, and revise the program of learning including the curriculum and learning outcomes of the program; and
  - 2. Develop, and implement, evaluate and revise standards for the admission, progression, and graduation of students;
  - 3. Participate in advisement and guidance of students;
- H. Together with the nursing program administrator, develop, implement and evaluate written policies for faculty orientation, continuous learning and evaluation.

**R4-19-205. Students; Policies and Admissions**

- ~~A.~~ The number of students admitted to a nursing program shall be determined by the number of qualified faculty, the size, number and availability of educational facilities and resources, and the availability of the appropriate clinical learning experiences for students. The number of students admitted shall not exceed the number for which the program was approved plus minor increases allowed under A.A.C. R4-19-209 without Board approval.
- ~~B.~~ A nursing program shall implement written student admission and progression requirements that are evidence-based, allow for a variety of clinical experiences and satisfy the licensure criteria of A.R.S. Title 32, Chapter 15 and A.A.C. Title 4 Chapter 19.
- ~~AC.~~ A nursing program shall have and enforce written policies available to students and the public regarding admission, readmission, transfer, advanced placement, progression, graduation, withdrawal, and dismissal.
- ~~BD.~~ A nursing program and parent institution shall have and enforce written policies that are readily available to students in either the college catalogue or nursing student handbook that address student rights, responsibilities, grievances, health, and safety.
- ~~CE.~~ A nursing program and parent institution shall provide accurate and complete written information that is readily available to all students and prospective students the general public about the program including, but not limited to:
  - 1. The nature of the program, including course sequence, prerequisites, co-requisites and academic standards;
  - 2. The length of the program;
  - 3. ~~The current cost of the program~~ Total program costs including tuition, fees and all program related expenses;
  - 4. The transferability of credits to other public and private educational institutions in Arizona; and
  - 5. A clear statement regarding any technology based instruction and the technical support provided to students. Program teaching methods and supporting technology.

E. A nursing program shall communicate changes in policies, procedures and program information clearly to all students, prospective students and the public and provide advance notice similar to the advance notice provided by an approved program of similar size and type.

**R4-19-206. Curriculum**

A. For the purposes of this Section, "clinical instruction" means the guidance and supervision provided by a qualified faculty member or designee while a nursing student is providing patient care. A nursing program shall assign students only to those clinical agencies that provide the experience necessary to meet the established clinical objectives of the course.

B. A nursing program shall provide a written program curriculum to students that includes:

1. Student centered outcomes for the program;
2. A curriculum plan that identifies the prescribed course sequencing and time required;
3. Specific course information that includes:
  - a. A course description;
  - b. Student centered and measurable didactic objectives;
  - c. Student centered and measurable clinical objectives, if applicable;
  - d. Student centered and measurable simulation objectives, if applicable;
  - e. A course content outline that relates to the course objectives;
  - f. Student centered and measurable objectives and a content outline for each unit of instruction.
  - g. Graded activities to demonstrate that course objectives have been met.

BC. A nursing program administrator and faculty members shall develop and implement a curriculum that includes level objectives, course objectives, measurable learning outcomes for each class session, and course content outlines for each course ensure that the curriculum:

1. Reflects its the nursing program's mission and goals;
2. Is designed so that the student is able to achieve program objectives within the curriculum plan;
3. Are Is logically consistent between and within courses and structured in a manner whereby each course builds on previous learning.
4. Incorporates established professional standards, guidelines or competencies; and
5. Are Is designed so that a student who completes the program will have the knowledge and skills necessary to function in accordance with the definition and scope of practice specified in A.R.S. § 32-1601(12) (16) and R4-19-401 for a practical nurse or A.R.S. § 32-1601(13) (20) and R4-19-402 for a registered professional nurse.

C.D. A nursing program shall provide for progressive sequencing of classroom and clinical instruction sufficient to meet the goals of the program and be organized in such a manner to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and practice.

1. A nursing program curriculum shall provide coursework that includes, but is not limited to:
  - a. Content in the biological, physical, social, psychological and behavioral sciences to provide a foundation for safe and effective nursing practice consistent with the level of the nursing program;
  - b. Content regarding professional responsibilities, legal and ethical issues, history and trends in nursing and health care;
  - c. Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration and maintenance of health in patients across the life span and from diverse cultural, ethnic, social and economic backgrounds to include:
    - i. Patient centered care.
    - ii. Teamwork and collaboration.
    - iii. Evidence-based practice.
    - iv. Quality improvement.
    - v. Safety, and
    - vi. Informatics.

42. A registered nursing (RN) program shall provide clinical instruction that includes, at a minimum, selected and guided experiences that develop a student's ability to apply core principles of registered nursing in varied settings when caring for:

- a. Adult and geriatric patients with acute, chronic, and complex, life-threatening, medical and surgical conditions;
- b. Patients experiencing pregnancy and delivery; Peri-natal patients and families;
- c. Neonates, infants, and children;
- d. Patients with mental, psychological, or psychiatric conditions; and
- e. Patients with wellness needs.

2. A practical nursing program (PN) shall provide clinical instruction that includes, at minimum, selected and guided experiences that develop an understanding of physiological, psychological, pathological, and basic nursing care needs when that develop a student's ability to apply core principles of practical nursing when caring for:

- a. Patients with medical and surgical conditions throughout the life span,

- b. Patients experiencing pregnancy and delivery, Peri-natal patients, and
- c. Neonates, infants, and children in varied settings.
- E.** A nursing program may provide precepted clinical instruction. Programs offering precepted clinical experiences shall:
  - 1. Develop and adhere to policies that require preceptors to:
    - a. Be licensed nurses at or above the level of the program either by holding an AZ license in good standing, holding multi-state privilege to practice in Arizona under A.R.S., Title 32, Chapter 15, or if practicing in a federal facility, meet requirements of A. R. S. § 32-1631(5);
    - b. For LPN preceptors, practice under the general supervision of an RN or physician according to A.R.S. §32-1601(16).
  - 2. Develop and implement policies that require a faculty member of the program to:
    - a. Together with facility personnel, select preceptors that possess clinical expertise sufficient to accomplish the goals of the preceptorship;
    - b. Supervise the clinical instruction according to the provisions of A.A.C. R4-19-204(C) and (D), and
    - c. Maintain accountability for student education and evaluation.
- F.** A nursing program may utilize simulation in accordance with the clinical objectives of the course. Unless approved under R4-19-214, a nursing program shall not utilize simulation for an entire clinical experience with any patient population identified in subsection (D) of this Section.
- DG.** A nursing program shall maintain at least a 75% 80% NCLEX® passing rate for graduates taking the NCLEX-PN® or NCLEX-RN® for the first time within 12 months of graduation. The Board shall issue a notice of deficiency to any program that has a NCLEX® passing rate less than 75% 80% for two consecutive calendar years or less than 75% for one calendar year.
- H.** At least 45% of students enrolled in the first nursing clinical course shall graduate within 100% of the prescribed period. "Prescribed period" means the time required to complete all courses and to graduate on time according to the nursing program's curriculum plan excluding the time to complete program pre-requisite or pre-clinical courses.

**R4-19-207. Application for New Programs; Proposal Approval; Provisional Approval of a Nursing Program**

- A.** At a minimum of one year before ~~Before~~ establishing a nursing program, a parent institution shall submit to the Board one electronic copy and ~~20~~ one paper copy of an application for proposal approval to the Board. ~~that~~ The parent institution shall ensure that the proposal application was written by or under the direction of a registered nurse who meets the requirements of R4-19-203 (A) and includes the following information and documentation:
  - 1. Name and address of the parent institution;
  - 2. Statement of intent to establish a nursing program, including the academic and licensure level of the program; and
  - 3. Proposal that includes, but is not limited to, the following information:
    - a. Documentation of the present and future need for the type and level of program in the state including availability of potential students, ~~and~~ need for entry level nurses at the educational level of the program and availability of clinical placements that meet the requirements of R4-19-206;
    - b. Potential effect on existing nursing programs in a 50 mile radius of the proposed program; Evidence that written notification of intent to establish a new nursing education program has been provided to the nursing program administrator of all existing Arizona-approved programs a minimum of 30 days prior to submission of the proposal application, to existing nursing programs within a 50 mile radius of the proposed program of the potential new program, including projected student enrollment and clinical sites;
    - c. Organizational structure of the educational institution documenting the relationship of the nursing program within the institution and the role of the nursing program administrator consistent with R4-19-201 and R4-19-203;
    - d. Evidence of institutional accreditation consistent with R4-19-201 and post-secondary approval status of the parent institution, if applicable. The institution shall provide the most recent full reports including findings and recommendations of the applicable accrediting organization or approval agency. The Board may request additional accreditation or approval evidence.
    - e. Purpose, ~~and~~ mission ~~and~~ goals of the nursing program,
    - f. Curriculum development documentation to include:
      - i. Student-centered outcomes for the program;
      - ii. A plan that identifies the prescribed course sequencing and time required; and
      - iii. Identification of established professional standards, guidelines or competencies upon which the curriculum will be based;
    - f.g. Availability of Name, qualifications, and job description of a nursing program administrator who meets the requirements of A.A.C. R4-19-203 and availability and job description of ~~qualified administrator and~~ faculty who meet qualifications of A.A.C. R4-19-204;
    - g-h. Number of budgeted clinical and didactic faculty positions from the time of the first admission to graduation of the first class;

Notices of Proposed Rulemaking

- ~~h.i. Source and description of Evidence that the program has secured clinical resources sites for its projected enrollment that meet the requirements of A.A.C. R4-19-206 for the program;~~
  - ~~i.j. Anticipated student population enrollment per session and annually;~~
  - ~~j.k. Documentation of planning for adequate academic facilities and secretarial and support staff to support the nursing program consistent with the requirements of R4-19-202;~~
  - ~~k.l. Evidence of program financial resources comparable to an approved program of similar size and type or, if there is no comparable program, scaled relative to an approved program adequate for the planning, implementation, and continuation of the nursing program; and~~
  - ~~l.m. Tentative time schedule for planning and initiating the nursing program including faculty hiring, entry date and size of student cohorts, and obtaining and utilizing clinical placements and the intended date for entry of the first class into the program from the expected date of proposal approval to graduation of the first cohort.~~
  - ~~n. A parent institution or owner corporation that has multiple nursing programs in one or more U.S. jurisdictions including Arizona, shall provide the following evidence for each nursing program:
    - ~~i. Program approval in good standing with no conditions, restrictions, ongoing investigations or deficiencies;~~
    - ~~ii. An NCLEX pass rate of at least 80% for the past two years or since inception; and~~
    - ~~iii. An on-time graduation rate consistent with the requirements of R4-19-206 (H).~~~~
- B. The Board shall grant proposal approval to any parent institution that ~~demonstrates~~ meets the requirements of subsection A if the Board deems that such approval is in the best interests of the public. Proposal approval expires one year from the date of Board issuance.
  - ~~1. The need for a program;~~
  - ~~2. The resources to operate a program;~~
  - ~~3. The availability of students;~~
  - ~~4. The availability and resources to secure a qualified administrator and faculty, and~~
  - ~~5. Satisfaction of the accreditation requirements in R4-19-201(A).~~
- C. A parent institution that is denied proposal approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for proposal approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- D. ~~A parent institution that receives proposal approval may submit 20 copies of an application to the Board for provisional approval that includes the following information and documentation: At a minimum of 180 days before planned enrollment of students, a parent institution that received proposal approval within the previous year may submit to the Board one electronic copy and one paper copy of an application for provisional approval. The parent institution shall ensure that the provisional approval application was written by or under the direction of a registered nurse who meets the requirements of R4-19-203 (A) and includes the following information and documentation:~~
  - ~~1. Name and address of parent institution; and~~
  - ~~2. Plan for A self-study that provides evidence supporting compliance with R4-19-201 through R4-19-206, including but not limited to and the following:~~
  - ~~3. Name Names and qualifications of:
    - ~~a. appointed The nursing program administrator,~~
    - ~~b. Names and qualifications of Didactic nursing faculty or one or more nurse consultants who are responsible for developing the curriculum and determining nursing program admission, progression and graduation criteria.~~~~
  - ~~4. Plan for recruiting and hiring additional didactic faculty for the first semester or session of operation at least 60 days before classes begin;~~
  - ~~5. Plan for recruiting and hiring additional clinical nursing faculty at least 30 days before the clinical rotation begin;~~
  - ~~e-6. Final program implementation plan including dates and number of planned student admissions not to exceed 60 per calendar year, recruitment and hire dates for didactic and clinical faculty for the period of provisional approval. An increase in student admissions may be sought under subsection H of this Section;~~
  - ~~d. Curriculum, including course outlines, program objectives, and learning outcomes;~~
  - ~~e 7. Descriptions of available and proposed physical facilities with dates of availability; and~~
  - ~~f 8. List of available clinical facilities within the geographic area, including facility type, size, number of beds, and type of patients: Detailed written plan for clinical placements for all planned enrollments until graduation of the first class that is:
    - ~~a. Based on current clinical availability and curriculum needs;~~
    - ~~b. Accompanied by documentation of commitment from proposed clinical agencies for the times and units specified, in addition to a signed clinical contract that meets the requirements of A.A.C. R4-19-201 (F) from each agency; and~~
    - ~~c. Lists any nursing programs who are currently using the planned clinical units for the times proposed and will be displaced.~~~~
- E. Following an onsite evaluation conducted according to A.R.S. § 41-1009, the Board shall grant provisional approval to a parent institution that meets the requirements of R4-19-201 through R4-19-206 if approval is in the best interest of the

public. A parent institution that is denied provisional approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for provisional approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

- F. The provisional approval of a nursing program expires 12 months from the date of the grant of provisional approval if a class of nursing students is not admitted by the nursing program within that time. The Board may rescind the provisional approval of a nursing program for a violation of any provision of this Article according to R4-19-211.
- G. One year after admission of the first nursing class into nursing courses, the program shall provide a report to the Board containing information on:
1. Implementation of the program including any differences from the plans submitted in the applications for proposal and provisional approval and an explanation of those differences; and
  2. The outcomes of the evaluation of the program according to the program's evaluation plan under R4-19-201(I);
- H. Following receipt of the report, a representative of the Board shall conduct a site survey visit under A.R.S. § 41-1009 to determine compliance with this Article. A report of the site visit shall be provided to the Board. After reviewing the consultant report and at the request of the program under A.A.C. R4-19-209, the Board may grant the permission to increase admissions.
- G.I. If a nursing program fails to apply for full approval within two years of graduating its first class of students, the Board shall rescind its provisional approval. A nursing program whose provisional approval is rescinded may request a hearing by filing a written request with the Board within 30 days of service of the Board's order rescinding the provisional approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- J. A nursing program or the parent institution or governing body of a nursing program under provisional approval may not admit additional students other than those specifically provided for in the application or subsequently approved by the Board under subsection H of this Section and A.A.C. R4-19-209 and may not expand to another geographical location.
- K. A nursing program whose provisional approval is rescinded may request a hearing by filing a written request with the Board within 30 days of service of the Board's order rescinding the provisional approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-208. Application for Full Approval of a New Nursing Program**

- A. A nursing program seeking full approval shall submit an electronic and one paper copy of an application that includes the following information and documentation:
1. Name and address of the parent institution,
  2. Date the nursing program graduated its first class of students, and
  3. ~~Twenty copies of a~~ A self-study report that contains evidence the program is in compliance with R4-19-201 through R4-19-206.
- B. Following an onsite evaluation conducted according to A.R.S § 41-1009, the Board shall grant full approval for a maximum of five years or the accreditation period for nationally accredited programs governed by ~~R4-19-212~~ R4-19-213, to a nursing program that meets the requirements of ~~R4-19-201 through R4-19-206~~ this Article and if approval is in the best interest of the public. A nursing program that is denied full approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for full approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- C. ~~A nursing program shall apply for full approval within a two-year period after graduating its first class or its provisional approval may be rescinded by the Board following notice and an opportunity for hearing.~~

**R4-19-209. Nursing Program Change**

- A. The program administrator shall ensure that the following changes to a nursing education program are evidence-based and supported by rationale. A nursing program administrator shall receive approval from the Board before implementing any of the following nursing program changes:
1. Substantive change in ~~Changing~~ the mission or goals of the program that requires revision of curriculum or program delivery method; ;
  2. Increasing or decreasing the length academic credits or units of the program excluding pre-requisite credits; ;
  3. Adding or deleting a geographical location of the program; ;
  4. Increasing the student enrollment admission capacity annually by more than 20% 30 students; ;
  5. Changing the level of educational preparation provided; ; ~~or~~
  6. Transferring the nursing program from one institution to another; ; ~~or~~
  7. Establishing different admission, progression or graduation requirements for specific cohorts of the program.
- B. The administrator shall submit one electronic and 20 one paper copies copy of the following materials with the request for nursing program changes:
1. The rationale for the proposed change and the anticipated effect on the program administrator, faculty, students, resources, and facilities;

Notices of Proposed Rulemaking

2. A summary of the differences between the current practice and proposed change;
  3. A timetable for implementation of the change; and
  4. The methods of evaluation to be used to determine the effect of the change.
- C. The Board shall approve a request for a nursing program change if the program demonstrates that it has the resources to implement the change and the change is evidence-based and consistent with R4-19-201 through R4-19-206. A nursing program that is denied approval of program changes may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for full approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-210. Renewal of Approval of ~~Board-approved~~ Nursing Programs Not Accredited by a National Nursing Accrediting Agency**

- A. An approved nursing program that is not accredited by an approved national nursing accrediting agency shall submit an application packet to the Board at least four months before the expiration of the current approval that includes the following:
1. Name and address of the parent institution,
  2. Evidence of ~~Current regional~~ current institutional accreditation status under R4-19-201,
  3. Copy of or on-line access to:
    - a. ~~the~~ A current catalog of the parent institution,
    - b. ~~4~~ Copy of current Current nursing program and institutional student and academic policies, and
    - c. Institutional and nursing program faculty policies and job descriptions for nursing program faculty, and
  54. Twenty One electronic copy and one paper copies copy of a self-study report that contains evidence of compliance with R4-19-201 through R4-19-206.
- B. Following an onsite evaluation conducted according to A.R.S. § 41-1009, the Board shall renew program approval for a maximum of five years if the nursing program meets the criteria in R4-19-201 through R4-19-206 and if renewal is in the best interest of the public. The Board shall determine the term of approval that is in the best interest of the public.
- C. If the Board denies renewal of approval, the nursing program may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-211. Unprofessional Conduct**

A disciplinary action, denial of approval, or notice of deficiency may be issued against a nursing or refresher program for any of the following acts of unprofessional conduct in a nursing program:

1. Failure to maintain minimum standards of acceptable and prevailing educational or nursing practice;
2. Deficiencies in compliance with the provisions of this Article;
3. Utilization of students to meet staffing needs in health care facilities;
4. Non-compliance with the program's or parent institution's mission or goals, program design, objectives, or policies;
5. Failure to provide the variety and number of clinical learning opportunities necessary for students to achieve program outcomes or minimal competence;
6. Student enrollments without necessary faculty, facilities, or clinical experiences;
7. Ongoing or repetitive employment of unqualified faculty or program administrator;
8. Failure to comply with Board requirements within designated time-frames;
9. Fraud or deceit in advertising, promoting or implementing the program;
10. Material misrepresentation of fact by a nursing or refresher program in any advertisement, application or information submitted to the Board;
11. Failure to allow Board staff to visit the program or conduct an investigation including failure to supply requested documents;
12. Any other evidence that gives the Board reasonable cause to believe the program's conduct may be a threat to the safety and well-being of students, faculty, patients or potential patients.

**~~R4-19-211~~R4-19-212. Rescission of Approval Notice of Deficiency**

- A. ~~The~~ Under A.R.S. § 32-1644 D, when surveying or re-surveying a nursing program, the Board shall, upon initially determining that a nursing program or a refresher program is not in compliance with applicable provisions of R4-19-201 through R4-19-214; this Article provide to the nursing program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct the deficiencies not to exceed 18 months. The time for correction may not exceed 18 months.
1. The administrator shall, within 30 days from the date of service of the notice of deficiencies, file a plan to correct each of the identified deficiencies after consultation with the Board or designated Board representative.
  2. The administrator may, within 30 days from the date of service of the notice of deficiencies, submit a written request for a hearing before the Board to appeal the Board's determination of deficiencies. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

Notices of Proposed Rulemaking

3. If the Board's determination is not appealed or is upheld upon appeal, the Board shall conduct periodic evaluations of the program during the time of correction to determine whether the deficiencies have been corrected.
- B. The Board shall, following a ~~Board-conducted survey and report~~ determination of continued non-compliance, rescind the approval of, or restrict admissions to a nursing program or ~~refresher program~~ if the program fails to comply with R4-19-201 through ~~R4-19-214~~ R4-19-216 within the time set by the Board in the notice of deficiencies served upon the program.
  1. The Board shall serve the administrator with a written notice of proposed rescission of approval or restriction of admissions that states the grounds for the proposed action. The administrator shall have 30 days to submit a written request for a hearing to show cause why the proposed action should not occur. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
  2. Upon the effective date of a decision to rescind program approval, the nursing program shall immediately cease operation and be removed from the official approved-status listing. A nursing program that has been ordered to cease operations shall assist currently enrolled students to transfer to an approved nursing program.
- C. In addition to the cause in subsection (B), ~~if the Board determines that the effectiveness of instruction to students is impaired~~, the Board may, depending on the severity and pattern of violations, issue discipline, rescind approval of or restrict admissions to a nursing program for any of the following causes:
  1. For a program that was served with a notice of deficiencies within the preceding three years and timely corrected the noticed deficiencies, subsequent noncompliance with the standards in ~~R4-19-201 through R4-19-214~~ this Article; ~~or~~
  2. Failure to comply with orders of or stipulations with the Board within the time determined by the Board; ~~or~~
  3. Unprofessional program conduct under R4-19-211.
- D. A parent institution that voluntarily terminates a nursing education program while under a Board action, including a Notice of Deficiency, shall not apply to open a new nursing education program for a period of two years and shall provide evidence in any future application that the basis for the Board action has been rectified.

**R4-19-212R4-19-213. Nationally Accredited Nursing Programs Holding National Program Accreditation**

- A. An approved nursing program that is accredited by an approved national nursing accrediting agency shall submit to the Board evidence of initial accreditation ~~and shall submit evidence of continuing accreditation after each reaccreditation review, including a copy of the site visit report and the official notice of accreditation.~~
- ~~B. The administrator shall submit to the Board any report from a national accrediting agency citing deficiencies or recommendations at the time the report is received by the nursing program.~~
- B. A nationally accredited nursing program or a program seeking national accreditation or re-accreditation shall inform the Board at least 30 days in advance of any pending visit by a nursing program accrediting agency and allow Board staff to attend all portions of the visit.
- ~~C. The administrator of a nursing program shall notify the Board within 10 days of any change in accreditation status.~~
- C. Following any visit by the accrediting agency, a nursing program shall submit a complete copy of all site visit reports to the Board within 15 days of receipt by the program and notify the Board within 15 days of any change or pending change in program accreditation status or reporting requirements.
- D. The administrator of a nursing program that loses its accreditation status or allows its accreditation status to lapse shall file an application for renewal of approval under R4-19-210 within 30 days of loss of or lapse in accreditation status.
- E. Under A.R.S. § 32-1644 (C) the Board may periodically re-survey a nationally accredited program to determine compliance with this Article and require a self study report. Board site visits may be conducted in conjunction with the national accrediting team.
- ~~EE.~~ Unless otherwise notified by the Board following receipt and review of the documents required by subsections (A), and (B) and (C), a nationally accredited nursing program continues to have full-approval status. The administrator of a nursing program that has its continuing approval-status rescinded by the Board may request a hearing by filing a written request with the Board within 30 days of service of the Board's order rescinding continuing full-approval status. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-214. Pilot Programs for Innovative Approaches in Nursing Education**

Under A.R.S. § 32-1606(A)(9) a nursing education program, refresher program or a certified nursing assistant program may implement a pilot program for an innovative approach by complying with the provisions of this Section. Education programs approved to implement innovative approaches shall comply with all other applicable provisions of A.R.S. Title 32, Chapter 15 and A.A.C. Title 4, Chapter 19.

- A. A program applying for a pilot program shall:
  1. Hold full approval.
  2. Have no substantiated complaints, discipline or deficiencies in the past two years, and
  3. Have been compliant with all Board regulations during the past two years.
- B. The following written information shall be provided to the Board at least 90 days prior to a Board meeting:
  1. Identifying information including name of program, address, responsible party and contact information;
  2. A brief description of the current program, including accreditation and Board approval status;

Notices of Proposed Rulemaking

3. Identification of the regulation or regulations that the proposed innovative approach would violate;
  4. Length of time for which the innovative approach is requested;
  5. Description of the innovative approach, including objectives;
  6. Brief explanation of the rationale for the innovative approach at this time;
  7. Explanation of how the proposed innovation differs from approaches in the current program;
  8. Available evidence supporting the innovative approach;
  9. Identification of resources that support the proposed innovative approach;
  10. Expected impact the innovative approach will have on the program, including administration, students, faculty, and other program resources;
  11. Plan for implementation, including timeline;
  12. Plan for evaluation of the proposed innovation, including measurable outcomes, method of evaluation, and frequency of evaluation; and
  13. Additional application information as requested by the Board.
- C.** The Board shall approve an application for innovation that meets the following criteria:
1. Eligibility criteria in subsection (A), and application criteria in subsection (B) are met;
  2. The innovative approach will not compromise the quality of education or safe practice of students;
  3. Resources are sufficient to support the innovative approach;
  4. Rationale with available evidence supports the implementation of the innovative approach;
  5. Implementation plan is reasonable to achieve the desired outcomes of the innovative approach;
  6. Timeline provides for a sufficient period to implement and evaluate the innovative approach; and
  7. Plan for periodic evaluation is comprehensive and supported by appropriate methodology.
- D.** The Board may:
1. Deny the application or request additional information if the program does not meet the criteria in subsections (A) and (B); or
  2. Rescind the approval of the innovation or require the program to make modifications if:
    - a. The Board receives substantiated evidence indicating adverse impact,
    - b. The program fails to implement or evaluate the innovative approach as presented and approved, or
    - c. The program fails to maintain eligibility criteria in subsection (A).
- E.** An education program that is granted approval for an innovation shall maintain eligibility criteria in subsection (A) and submit:
1. Progress reports conforming to the evaluation plan annually or as requested by the Board; and
  2. A final evaluation report that conforms to the evaluation plan, detailing and analyzing the outcomes data.
- F.** If the innovative approach has achieved the desired outcomes and the final evaluation has been submitted, the program may request that the innovative approach be continued.
- G.** The Board may grant the request to continue approval if the innovative approach has achieved desired outcomes and has not compromised public protection.

**~~R4-19-213~~R4-19-215. Voluntary Termination of a Nursing Program or a Refresher Program**

- A. The administrator of a nursing program or a refresher program shall notify the Board within 15 days of a decision to voluntarily terminate the program. The administrator shall, at the same time, submit a written plan for terminating the nursing program or refresher program. A program is considered voluntarily terminated when it no longer admits or plans to admit students after current students graduate.
- B. The administrator shall ensure that the nursing program or refresher program is maintained, including the nursing faculty, until the last student is transferred or completes the program. At that time the Board shall remove the program from the current list of approved programs.
- C. Within 15 days after the termination of a nursing program or refresher program, the administrator shall notify the Board of the permanent location and availability of all program records.

**~~R4-19-214~~R4-19-216. Approval of a Refresher Program**

- A. An applicant for approval of a refresher program for nurses whose licenses have been inactive or expired for five or more years, nurses under Board order to enroll in a refresher program, or nurses who have not met the requirements of R4-19-312 shall submit one electronic and one paper copy of a completed application that provides all of the following information and documentation:
  1. Applicant's name, address, e-mail address, telephone number, web site address, if applicable, and fax number;
  2. Proposed starting date for the program;
  3. Name and curriculum vitae qualifications of all instructors that meet the requirements of subsection (C);
  4. Statement describing the facilities, staff, and resources that the applicant will use to conduct the refresher program;
  5. A program and participant evaluation plan that includes student evaluation of the course, instructor, and clinical experience; ~~and~~

6. Evidence of a curriculum that meets the requirements of subsection (B)-;
- B.** A refresher program shall provide:
1. A minimum of 40 hours of didactic instruction ~~and 112 hours of supervised clinical practice~~; for a licensed practical nurse program ~~and 80 hours of didactic instruction for a registered nurse program~~. Didactic instruction shall include, at a minimum:
    - a. Nursing process and patient centered care;
    - b. Pharmacology, medication calculation, and medication administration;
    - c. Communication;
    - d. Critical thinking, clinical decision making and evidence-based practice;
    - e. Delegation, management, and leadership;
    - f. Working with interdisciplinary teams;
    - g. Meeting psychosocial and physiological needs of adult clients with medical-surgical conditions;
    - h. Ethics;
    - i. Documentation including electronic health records;
    - j. Informatics;
    - k. Quality Improvement; and
    - l. At the program's discretion, additional content hours in other populations of care for students who will be engaged in clinical experiences with these populations.
  2. ~~A minimum of 80 hours of didactic instruction and 160 hours of supervised clinical practice for a professional nurse program;~~
  2. A clinical experience of a type and duration to meet course objectives for each student which consists of a minimum of 112 hours for a practical nurse program and 160 hours for a registered nurse program. Relative to the clinical portion of the program, the program shall:
    - a. Ensure that each qualified student has a verified clinical placement within 12 months of course enrollment;
    - b. Provide program policies for clinical placement in advance of enrollment that specify both the obligations of the school and the student regarding placement;
    - c. Validate that a student has the necessary theoretical knowledge to function safely in the specific clinical setting before starting a clinical experience;
    - d. Ensure that clinical placements provide an opportunity to demonstrate safe and competent application of program didactic content through either direct or indirect client care; and
    - e. Include, at its discretion, up to 32 hours of scheduled clinical time in laboratory experiences including simulation.
  3. ~~A planned and supervised clinical experience that: consistent with course goals and provides an opportunity for the student to demonstrate safe and competent application of program content. The student may spend up to 24 of the required clinical hours in a supervised lab setting-~~
  - 4.3. Curriculum and other materials to students and prospective students that, including: include:
    - a. An overall program description including goals; and
    - b. Objectives, content, and hours allotted for each area of instruction;
    - c. Implemented course policies that include but are not limited to admission requirements, passing criteria, cause for dismissal, clinical requirements, grievance process and student responsibilities; and
    - d. Program costs and length of the program.
  5. ~~Instruction in current nursing care concepts and skills including:~~
    - a. ~~Nursing process;~~
    - b. ~~Pharmacology, medication calculation, and medication administration;~~
    - c. ~~Communication;~~
    - d. ~~Critical thinking, and clinical decision making;~~
    - e. ~~Delegation, management, and leadership; and~~
    - f. ~~Meeting psychosocial and physiological needs of clients;~~
- C.** Refresher program personnel qualifications and responsibilities
1. An administrator of a refresher program shall:
    - a. Hold a graduate degree in nursing or a bachelor of science in nursing degree and a graduate degree in either education or a health-related field; and
    - b. Be responsible for administering and evaluating the program.
  2. A faculty member of a refresher program shall:
    - a. Hold a minimum of a bachelor of science in nursing degree.
    - b. Be responsible for implementing the curriculum and supervising clinical experiences either directly or indirectly through the use of clinical preceptors.
  3. Licensure requirements for program administrator and faculty:
    - a. If the program is located in Arizona the administrator, and faculty members shall hold a current Arizona RN

Notices of Proposed Rulemaking

- license in good standing or a multi-state privilege under A.R.S., Title 32, Chapter 15;
- b. If the program is located in another state, the administrator and didactic faculty members shall either hold a current RN license in good standing in the state of the program location or meet the requirements of subsection (a)
4. If preceptors are used for clinical experiences the program shall adhere to the preceptorship requirements of R4-19-206 (E).
5. Other licensed health care professionals may participate in course instruction consistent with their licensure and scope of practice and under the direction of the program administrator or faculty.
- ~~C.~~ A refresher program may adapt the curriculum based on the need to incorporate content applicable to specialty and indirect care areas of nursing practice for students who plan to practice in those areas. The clinical experience for such students may include indirect care, depending on the course goals and objectives. The program shall include concepts and skills needed to deliver safe nursing care in any adapted curriculum.
- D.** Program types; bonding
1. A refresher program may be offered by:
- a. A private educational institution that is accredited by the private post-secondary board,
- b. A public post-secondary educational institution,
- c. A licensed health care institution, or
- d. A private individual, partnership or corporation.
2. If the refresher program is offered by a private individual, partnership or corporation, the program shall:
- a. Submit proof of insurance covering any potential or future claims for damages resulting from any aspect of the program or provide evidence of a surety bond from a surety company with a rating of "A" or better by either Best's Credit Ratings, Moody's Investor Service, or Standard and Poor's rating service in the amount of a minimum of \$15,000. The program shall ensure that:
- i. Bond or insurance distributions are limited to students or former students with a valid claim for instructional or program deficiencies;
- ii. The amount of the bond or insurance coverage is sufficient to reimburse the full amount of collected tuition and fees for all students during all enrollment periods of the program; and
- iii. The bond or insurance is maintained for an additional 24 months after program closure.
- b. For programs offering on-ground instruction, provide a fire inspection report of the classroom and building by the Arizona State Fire Marshall or an entity approved by the Arizona State Fire Marshall for each program location.
- c. Subsection (D) is effective immediately for new programs and within one year of the effective date for approved programs.
- ~~DE.~~ The Board shall approve a refresher program that meets the requirements of ~~subsection (A), of this Section,~~ if approval is in the best interest of the public, for a maximum term of ~~four~~ five years. An applicant who is denied refresher program approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- ~~EF.~~ The refresher program sponsor shall apply for renewal of approval in accordance with subsection (A) not later than 90 days before expiration of the current approval. The sponsor of a refresher program that is denied renewal of approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, and 4 A.A.C. 19, Article 6.
- ~~FG.~~ The sponsor of an approved refresher program shall provide written notification to the Board within 15 days of a participant's completion of the program of the following:
1. Name of the participant and whether the participant successfully completed or failed the program,
2. Participant's license, and
3. Date of participant's completion of the program.
- H.** The Board may accept a refresher program from another U.S. jurisdiction for an individual applicant on a case-by-case basis if the applicant provides verifiable evidence that the refresher program substantially meets the requirements of this Section. The acceptance of the program for an individual applicant does not confer approval status upon the program.
- I.** Within 30 days, a refresher program shall report to the Board changes in:
1. Name, address, electronic address, website address or phone number of the program;
2. Clinical or didactic hours of the program;
3. Program delivery method; or
4. Ownership including adding or deleting an owner.
- J.** The Board may take action against the approval of a refresher program under A.R.S § 32-1606 (C) and the provisions of this Article. The administrator of a refresher program whose approval is disciplined or subject to a notice of deficiency may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, and 4

A.A.C. 19, Article 6.

**~~R4-19-215~~R4-19-217. Distance Learning Nursing Programs; Out-of-State Nursing Programs**

- A. An out-of-state nursing program that is in good standing in another state that and plans to provide both distance based didactic instruction and on-ground clinical instruction in Arizona shall comply with the application requirements of R4-19-207 and R4-19-208. The program shall employ at least one faculty member who is physically present in this state to coordinate the education and clinical experience.
- B. ~~A~~ Any nursing program that delivers didactic instruction by distance learning methods, whether in this state or another, shall ensure that the methods of instruction are compatible with the program curriculum plan and enable a student to meet the goals, competencies, and objectives of the educational program and standards of the Board.
1. A distance learning nursing program shall establish a means for assessing individual student outcomes, and program outcomes including, at minimum, student learning outcomes, student retention, student satisfaction, and faculty satisfaction.
  2. For out-of-state nursing programs, the program shall be within the jurisdiction of and regulated by an equivalent United States nursing regulatory authority in the state from which the program originates, unless also providing clinical experience in Arizona.
  3. ~~Didactic Faculty~~ faculty members shall be licensed in the state of origination of a distance learning nursing program. Clinical supervising faculty shall be licensed in the location of the clinical activity
  4. A distance learning nursing program shall provide students with supervised clinical and laboratory experiences so that program objectives are met and didactic learning is validated by supervised, land-based clinical and laboratory experiences.
  5. A distance-learning nursing program shall provide students with access to technology, resources, technical support, and the ability to interact with peers, preceptors, and faculty.
- C. A nursing program, located in another state or territory of the United States, that wishes to provide clinical experiences in Arizona under A.R.S. § 32-1631(3), shall obtain Board approval before offering or conducting a clinical session. To obtain approval, the program shall submit a proposal package that contains:
1. A self study, describing the program's compliance with R4-19-201 through R4-19-206; and
  2. A statement regarding ~~the anticipated effect on clinical placements for students currently enrolled in an Arizona approved nursing program, the number and type of student placements planned, a copy of signed clinical contracts and written commitment by the clinical facilities to provide the necessary clinical experiences, the name and qualifications of faculty licensed in Arizona and physically present in the facility who will supervise the experience and verification of good standing of the program in the jurisdiction of origin.~~
- D. The Board may require a nursing program approved under this Section to file periodic reports for the purpose of data collection or to determine compliance with the provisions of this Article. A program shall submit a report to the Board within 30 days of the date on a written request from the Board or by the due date stated in the request if the due date is after the normal 30-day period.
- E. The Board shall approve an application to conduct clinical instruction in Arizona that meets the requirements in A.R.S. Title 32, Chapter 15 and this Chapter, and is in the best interest of the public. An applicant who is denied approval to conduct clinical instruction in Arizona may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- F. The Board may rescind an approval held by an out-of-state nursing program to conduct clinical instruction in Arizona, in accordance with R4-19-211 or R4-19-212.
- G. If the Board finds that a nursing program located and approved in another state or territory of the United States does not meet requirements for nursing programs prescribed in ~~R4-19-201 through R4-19-206~~ this Article the Board shall either provide a notice of deficiency to the program as prescribed in ~~R4-19-211~~ R4-19-212(A), (A)(1) and (A)(2) or take other disciplinary action depending on the severity of the offense under R4-19-211.
1. If the Board issues a notice of deficiency and the program fails to correct the deficiency before the expiration of the period of correction, the Board shall rescind approval of the program as prescribed in ~~R4-19-211~~ R4-19-212 (B)(1).
  2. If the period of rescission, from the date of rescission to the date of reinstatement, is at any time concurrent with an applicant's education from the date of admission to the date of graduation, the Board shall withhold licensure unless the applicant meets all licensure requirements and completes any remedial education prescribed by the Board under R4-19-301(H). The Board shall ensure that the applicant has completed a curriculum that is equivalent to that of an approved nursing program.
  3. If a nursing program provides evidence of compliance ~~with R4-19-201 through R4-19-206~~ with this Article after the rescission of approval, the Board shall review the evidence, determine whether or not the nursing program complies with these standards, and reinstate approval of the program if the program complies with these standards and reinstatement is in the best interest of the public.

ARTICLE 7. PUBLIC PARTICIPATION PROCEDURES

R4-19-702. Petition for Rulemaking; Review of Agency Practice or Substantive Policy Statement; Objection to Rule Based Upon Economic, Small Business, or Consumer Impact

A person may petition the Board, requesting the making of a final rule, or a review of an existing agency practice or substantive policy statement that the petitioner alleges to constitute a rule under A.R.S. § 41-1033, or objecting to a rule under A.R.S. § 41-1056.01, by filing a petition which contains the following:

- 1. The name, current address, and telephone number of the person submitting the petition.
2. For the making of a new rule, the specific language of the proposed rule.
3. For amendment of a current rule, the Arizona Administrative Code (A.A.C.) Section number, the Section heading, and the specific language of the current rule, with any language to be deleted stricken through but legible, and any new language underlined.
4. For repeal of a current rule, the A.A.C. Section number and Section heading proposed for repeal.
5. The reasons the rule should be made, specifically stating in reference to an existing rule, why the rule is inadequate, unreasonable, unduly burdensome, or otherwise not acceptable.
6. For a review of an existing agency practice or substantive policy statement alleged to constitute a rule, the reasons the existing agency practice or substantive policy statement constitutes a rule and the proposed action requested of the Board.
7. For an objection to a rule based upon the economic, small business, or consumer impact, evidence that:
8. The signature of the person submitting the petition.

NOTICE OF PROPOSED RULEMAKING

TITLE 4. PROFESSIONS AND OCCUPATIONS

CHAPTER 19. BOARD OF NURSING

[R12-233]

PREAMBLE

Table with 2 columns: Articles, Parts and Sections Affected (as applicable) and Rulemaking Action. Lists rule numbers R4-19-501 through R4-19-514 and their corresponding actions (Amend).

**2. Citations to the agency's statutory rulemaking authority to include the authorizing statutes (general) and the implementing statutes (specific):**

Authorizing statutes: A.R.S. §§ 32-1606 (A)(1), (A)(8), (B)(1), (B)(2), (B)(8), (B)(10), (B)(12), (B)(15), (B)(17), (B)(18), (B)(21) and (B)(22), 32-1456, 32-1921, and 32-3208.

Implementing statutes: A.R.S. §§ 32-1601(5), (6), (10), (13), (17), and (19), 32-1606, 32-1634.03, 32-1634.04, 32-1636, 32-1643, 32-1635.01, 32-1644, 32-1664, 32-1666, 32-1667, 32-3208 and 32-4180.

**3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**

Notice of Rulemaking Docket Opening: 18 A.A.R. 3226, December 7, 2012 (*in this issue*).

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Pamela K. Randolph RN, MS  
Associate Director of Education and Evidence-based Regulation  
Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014  
Telephone: (602) 771-7803  
Fax: (602) 771-7888  
E-mail: prandolph@azbn.gov

**5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

The Arizona State Board of Nursing (Board) is amending Article 5 for the following reasons:

1. To improve consistency between the Board's rules and other state laws, specifically A.R.S. §§ 32-3208 and 41-1080 regarding mandatory reporting of criminal offenses and proof of legal presence.

2. To incorporate "Uniform Licensure Requirements" adopted by the Delegate Assembly of the National Council of State Boards of Nursing (NCSBN) in August, 2011 and the "APRN Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, and Education" (Consensus Model) adopted by NCSBN on July 7, 2008. These requirements establish consistency between nursing regulatory agencies across the country. Consistent with the consensus model the term "population foci" is replacing the term "specialty area". However, due to current lack of congruence between education and certification, the Board is proposing more than the six population foci envisioned by the model.

"The requirements [of the consensus model]... specify that all APRNs will be educated, certified, and licensed in one of four roles and in at least one of six population foci. ... Education, certification, and licensure of an individual must be congruent in terms of role and population foci.

APRNs may specialize but they can not be licensed solely within a specialty area. Specialties can provide depth in ones practice within the established population foci. APRNs may also decide to choose a specialty to add to the level of care they can offer within their chosen population. Competence at the specialty level will not be assessed or regulated by boards of nursing but rather by professional organizations." <https://www.ncsbn.org/aprn.htm>

3. To implement the plan for rule revision approved by the Governor's Regulatory Review Council on May 3, 2011 as part of the Five-Year Rule Review of Article 5.

4. To reflect statutory changes regarding Certified Registered Nurse Anesthetists contained in Senate Bill 1362 which became effective August 2, 2012.

5. Other changes are made to provide clarity and understandability.

6. Changes to specific rules that fall into other categories are explained below.

**R4-19-504. Notice of Deficiency: Unprofessional Program Conduct**

The Board is adding a subsection to this Section to specify conditions under which a disciplinary action may be issued against an APRN program.

**R4-19-506. Expiration of APRN Certificate; Practice Requirement; Renewal**

The Board is deleting the option of maintaining certification to meet the practice requirement in subsection A. The Board is aware of nurses who have not practiced advanced practice or registered nursing for five or more years yet are able to maintain APRN certification through CE and self study tests. The Board believes and evidence supports that practice in the role is essential to maintain competencies. This amendment is similar to that for RN and LPN licensure renewal.

Notices of Proposed Rulemaking

**6. A reference to any study relevant to the rules that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

There were no relevant studies that were either relied upon or not relied upon in the Board's justification for this rule repeal.

**7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable

**8. The preliminary summary of the economic, small business, and consumer impact:**

The majority of proposed amendments to this Section are not expected to have an economic impact on any regulated entity, the Board, or small businesses.

The Arizona State Board of Nursing licenses approximately 72,000 registered nurses and 11,000 practical nurses and certifies approximately 26,000 nursing assistants. The Board certifies approximately 3700 nurse practitioners, 205 certified nurse-midwives, 188 clinical nurse specialists and recognizes 569 certified registered nurse anesthetists (CRNA). Additionally the Board oversees 38 in-state pre-licensure nursing programs, 12 refresher programs, 21 advanced practice nursing programs and approximately 130 nursing assistant programs.

Adopting uniform licensure requirements and the requirements of A.R.S. § 32-3208 will impact the Board as more self reports of possible unprofessional conduct are expected. It is anticipated that triage time will increase to accommodate the expected increase in self reporting. There also may be increased investigations for failure to provide accurate information on an application, if an applicant does not self-report. It is difficult to determine the exact impact of these amendments on Board staffing, and the Board is not requesting increases in personnel or operating costs at the present time. The amendments will also impact applicants with a criminal or substance use history and may delay certification causing potential loss of income. These amendments, however, will apply to very few nurses.

The deletion of the option to maintain certification to meet the practice requirement to renew an APRN certificate will negatively affect those nurses who maintain certification without practice. However the benefit to the public is expected to outweigh the negative effect on these individuals.

Amendments proposed delineating unprofessional conduct for nursing programs will provide programs and the public with additional guidelines regarding issues that may be reportable to the Board. To the Board's knowledge there are no current APRN programs that would be subject to discipline by adopting these standards. Amendments incorporating language consistent with the Consensus Model will benefit APRNs by providing consistency between states.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Pamela K. Randolph RN, MS  
Associate Director of Education and Evidence-based Regulation  
Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014  
Telephone: (602) 771-7803  
Fax: (602) 771-7888  
E-mail: prandolph@azbn.gov  
Web-site: azbn.gov

**10. The time, place, and nature of the proceedings to make, repeal or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rules:**

The Board will hold an oral proceeding on January 14, 2013, at 4:30 p.m., in the Board offices at 4747 N. 7th St., Suite 200, Phoenix, AZ 85014. The Board will accept written comments submitted to Pamela Randolph, Associate Director of Education and Evidence-based Regulation, 4747 N. 7th St., Suite 200, Phoenix, AZ 85014, until the close of record at 5 p.m., January 14, 2013.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. § § 41-1052 and 41-1055 shall respond to the following question:**

There are no other matters prescribed by statute applicable to the Board or this specific class of rules

**a. Whether the rules requires a permit, whether a general permit is used and if not the reasons why a general permit is not used:**

This rulemaking does not require a permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rules is more stringent than federal**

**law and if so, citation to the statutory authority to exceed the requirements of the federal law:**

Federal law is not applicable to the subject of the rule.

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

None

**13. The full text of the rules follows:**

**ARTICLE 5. ~~ADVANCED AND EXTENDED NURSING PRACTICE~~ = REGISTERED NURSING**

Section

- R4-19-501. ~~Categories~~ Roles and Specialty Areas ~~Population Foci~~ of Advanced Practice Registered Nursing (APRN); Certification Programs
- R4-19-502. Requirements for ~~Advanced Practice Registered Nursing~~ APRN Programs
- R4-19-503. Application for Approval of an Advanced Practice Registered Nursing Program; Approval by Board
- R4-19-504. ~~Reeission of Approval of an Advanced Practice Registered Nursing Program~~ Notice of Deficiency; Unprofessional Program Conduct
- R4-19-505. Requirements for ~~Advanced Practice Registered Nursing~~ Initial APRN Certification
- R4-19-506. Expiration of ~~Advanced Practice APRN Certificates~~ Certificate; Practice Requirement; Renewal
- R4-19-507. Temporary Advanced Practice Certificate; Temporary Prescribing and Dispensing Authority
- R4-19-508. ~~Scope of Standards Related to Practice of a Registered Nurse Practitioner~~ Scope of Practice
- R4-19-509. Delegation to Medical Assistants
- R4-19-511. Prescribing and Dispensing Authority; Prohibited Acts
- R4-19-512. Prescribing Drugs and Devices
- R4-19-513. Dispensing Drugs and Devices
- R4-19-514. ~~Scope Standards Related to of Practice of the Clinical Nurse Specialist~~ Scope of Practice

**ARTICLE 5. ~~ADVANCED AND EXTENDED NURSING PRACTICE~~ = REGISTERED NURSING**

**R4-19-501. ~~Categories~~ Roles and Specialty Areas ~~Population Foci~~ of Advanced Practice Registered Nursing (APRN); Certification Programs**

- A. The Board ~~uses~~ recognizes the following ~~APRN roles~~ advanced practice registered nursing:
1. Registered nurse practitioner (RNP) in a ~~specialty area~~ population focus ~~including~~ Certified Nurse Midwife as a ~~specialty area~~ population focus of RNP; and
  2. Clinical Nurse Specialist (CNS) ~~in a specialty area~~ population focus; and
  3. Certified Registered Nurse Anesthetist (CRNA).
- B. ~~RNPs and CNSs shall practice within one or more A specialty area population foci, consistent with their education and certification. Population foci include:~~ of advanced practice registered nursing is a field of practice that meets all of the following criteria. The specialty area is:
1. ~~Approved by the Board as a recognized advanced practice specialty area,~~
  2. ~~Broad enough for an educational program to be developed that prepares a registered nurse to function both within the scope of practice of a category of advanced practice under A.R.S. § 32-1601 and within the specialty area, and~~
    1. Family-individual across the life span;
    2. Adult-gerontology primary or acute care;
    3. Neonatal;
    4. Pediatric primary or acute care;
    5. Women's health-gender related;
    6. Psychiatric-mental health;
    7. For Certified Nurse Midwives, women's health gender related including childbirth and neonatal care;
    8. Other foci that have been recognized by the Board previously and new foci that meet the following conditions:
      - a. There is an accredited educational program and a national certifying process that meets the requirements of subsection C; and
      - b. The focus is broad enough for an educational program to be developed that prepares a registered nurse to function both within the scope of practice of the role and population focus.
- C. The Board shall accept advanced practice certification programs that meet the following qualifications:
31. Recognized The certification program: as an advanced practice specialty area by a national certifying body that:
    - a. Is accredited by the National Commission for Certifying Agencies, the American Board of Nursing Specialties,

Notices of Proposed Rulemaking

- or an equivalent organization as determined by the Board;
- b. ~~Has~~ Establishes educational requirements for certification that are consistent with the requirements in R4-19-505;
- c. Has an application process and credential review that ~~includes~~ requires an applicant to submit original source documentation that of the applicant's education and clinical practice is in the advanced practice specialty role and population focus, if applicable, for which certification is granted area being certified; and
- d. Is national in the scope of its credentialing.
- e-2. The certification program uses ~~Uses~~ an examination as a basis for certification in the advanced practice ~~specialty area role and population focus, as applicable~~ that meets all of the following criteria:
  - i-a. The examination is based upon job analysis studies conducted using standard methodologies acceptable to the testing community both initially and every five years;
  - ii-b. The examination assesses entry-level practice in the advanced practice ~~category role and specialty area population focus, if applicable;~~
  - iii-c. The examination assesses the knowledge, skills, and abilities essential for the delivery of safe and effective advanced nursing care to clients;
  - iv-d. Examination items are reviewed for content validity, cultural sensitivity, and correct scoring using an established mechanism, both before first use and periodically; items are reviewed for currency at least every three years;
  - v-e. The examination is evaluated for psychometric performance and conforms to psychometric standards that are routinely utilized for other types of high-stakes testing;
  - vi-f. The passing standard is established using accepted psychometric methods and is re-evaluated periodically;
  - vii-g. Examination security is maintained through established procedures;
  - viii-h. A re-take policy is in place; and
  - ix-i. Conditions for taking the certification examination are consistent with standards of the testing community;
- f-3. ~~Issues certification~~ Certification is issued based on ~~upon~~ passing the examination and meeting all other certification requirements;
- g-4. ~~Provides for periodic~~ The certification program periodically provides for re-certification that includes review of qualifications and continued competence;
- h-5. ~~Has~~ The certification program mechanisms in place for communication provides timely communication to the Board regarding ~~timely verification of an individual's a licensee or applicant's certification status, changes in an individual's certification status, exam failure~~ and changes in the certification program, including qualifications, test plan, and scope of practice; ~~and~~
- i-6. ~~Has~~ The certification program has an evaluation process to provide quality assurance in its certificate program; ~~and~~
- C.D.** The Board shall determine whether a certification ~~program or exam~~ program meets the requirements of this Section. The following ~~specialty area certifications and exams~~ certification programs meet the requirements of this Section as of the effective date of this rulemaking:
  - 1. For RNP:
    - a. American Academy of Nurse Practitioner certification ~~programs in the specialties of:~~
      - i. Adult nurse practitioner (discontinued in 2014),
      - ii. Family nurse practitioner,
      - iii. Gerontologic nurse practitioner (discontinued in 2014),
      - iv. Adult health-gerontological nurse practitioner (starting in 2013).
    - b. American Nurses Credentialing Center certification ~~programs in the specialties of:~~
      - i. Acute care nurse practitioner (adult/gerontology),
      - ii. Adult nurse practitioner (until 12/31/2015),
      - iii. Family nurse practitioner,
      - iv. Gerontological nurse practitioner (until 12/31/2015),
      - v. Pediatric nurse practitioner,
      - vi. Adult psychiatric and mental health nurse practitioner,
      - vii. Family psychiatric and mental health nurse practitioner,
      - viii. Adult health-gerontological nurse practitioner (starting in 2013),
    - c. Pediatric Nursing Certification Board certification ~~programs; in the specialty of pediatric nurse practitioner;~~
      - i. Pediatric nurse practitioner primary care.
      - ii. Pediatric nurse practitioner acute care.
    - d. National Certification Corporation for Obstetric, Gynecological, and Neonatal Nursing Specialties certification ~~programs in the specialties of:~~
      - i. Women's health nurse practitioner,
      - ii. Neonatal nurse practitioner,
    - e. ~~American College of Nurse-Midwives Certification Council~~ For a nurse-midwife, the American Midwifery Certification Board certification ~~program in the specialty of nurse midwife-midwifery,~~

- f. AACN Certification Corporation certification programs:
  - i. Adult acute care nurse practitioner (until Jan.30, 2015),
  - ii. Adult-gerontology acute care nurse practitioner (starting February, 2013).
- 2. For CNS:
  - a. ~~American Association of Critical Care Nurses certification in the specialties of:~~ AACN Certification Corporation certification programs:
    - i. Adult acute and critical care CNS,
    - ii. Pediatric acute and critical care CNS,
    - iii. Neonatal acute and critical care CNS,
  - b. ~~American Nurses Credentialing Center certification programs in the specialties of:~~
    - i. Adult psych/mental health going across the life span psychiatric and mental health CNS,
    - ii. Child/adolescent Family psych and mental health CNS,
    - iii. Community health CNS,
    - iv. Gerontological CNS,
    - v. Home health CNS,
    - vi. Medical-surgical Adult health CNS,
    - vii. Pediatric CNS.
- 3. For CRNA, National Board of Certification and Recertification for Nurse Anesthetists.

~~DE.~~ The Board shall approve a specialty area certification program that meets the criteria established in this Section. An entity that seeks approval of a specialty area certification program and is denied approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-502. Requirements for Advanced Practice Registered Nursing Programs**

- A. An educational institution or other entity that offers an ~~advanced practice registered nursing~~ APRN program in this state for registered nurse practitioners for RNP or clinical nurse specialists CNS roles shall ensure that the program:
  - 1. Is offered by or affiliated with a college or university that is accredited under A.R.S. § 32-1644;
  - 2. For new programs, the college or university offering the program has at least one additional nationally accredited nursing program as defined in R4-19-101 or otherwise provides substantial evidence of the ability to attain national APRN program accreditation for all graduating cohorts;
  - 2.3. Is a formal educational program, that is part of a masters or doctoral program or a post-masters program in nursing with a concentration in an advanced practice registered nursing category role and specialty population focus under R4-19-501;
  - 3.4. Is nationally accredited, or has achieved candidacy status for national accreditation by an approved national nursing accrediting agency as defined in R4-19-101;
  - 4.5. Offers a curriculum that covers the scope of practice for both the category role of advanced practice as specified in A.R.S. § 32-1601 and the specialty area population focus including:
    - a. Three separate graduate level courses in:
      - i. Advanced physiology and pathophysiology, including general principles across the life-span;
      - ii. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches;
      - iii. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad category agents;
    - b. Diagnosis and management of diseases across practice settings including diseases representative of all systems;
    - c. Preparation that provides a basic understanding of the principles for decision making in the identified role;
    - d. Preparation in the core competencies for the identified APRN role including legal, ethical and professional responsibilities; and
    - e. Role preparation in an identified population focus under R4-19-501.
  - 6. Verifies that each student has an unencumbered license to practice as an RN in the state of clinical practice;
  - 57. Includes a minimum of 500 hours of faculty supervised clinical practice; programs that prepare students for more than one role or population focus shall have 500 hours of clinical practice in each role and population focus.
  - 68. Notifies the Board of any changes in hours of clinical practice, or accreditation status, denial or deferral of accreditation, program administrator and responds to Board requests for information;
  - 79. Has financial resources sufficient to support accreditation standards and the educational goals of the program; and
  - 810. Establishes academic, professional, and conduct standards that determine admission to the program, progression in the program, and graduation from the program that are consistent with sound educational practices and recognized standards of professional conduct.
  - 11. Establishes provisions for recognition of prior learning and advanced placements in the curriculum for individuals holding a graduate degree in nursing who are seeking education in an APRN role and population focus. Advanced

*Arizona Administrative Register / Secretary of State*  
**Notices of Proposed Rulemaking**

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placement students shall master the same APRN competencies as students in the graduate-level APRN program.

12. The administrator of the advanced practice nursing program shall apply under the provisions of R4-19-209 (B) and (C) and receive approval from the Board before making any of the following changes:

- a. Changing the scope of the program, or
- b. Changing the level of educational preparation provided.

**B.** A CNS or RNP program shall appoint the following personnel:

1. An APRN program administrator who:

- a. Holds a current unencumbered RN license or multi-state privilege to practice in AZ and a current unencumbered APRN certificate issued by the Board;
- b. Holds an earned doctorate in nursing or health-related field if appointed after the effective date of this Section;
- c. Has at least two years clinical experience as an APRN;
- d. Holds current national certification as an APRN

~~B.2.~~ A lead faculty member who is educated and certified both nationally and by the Board in the same role and population focus and nationally certified in the same role or a related specialty area and certified as an advanced practice registered nurse by the Board shall to coordinate the educational component for the category role and specialty population focus in the advanced practice registered nursing program.

**C.** The parent institution of an advanced practice registered nursing program shall ensure that a nursing program faculty member is appointed to oversee any advanced practice registered nursing course that includes a clinical experience. The faculty member appointed shall hold:

1. An unencumbered active license in good standing or a multistate privilege to practice as a registered nurse in Arizona, and
2. A graduate degree with a major in nursing or a clinical specialty.
3. Nursing faculty to teach any APRN nursing course that includes a clinical learning experience who meet the following qualifications:
  - a. A current unencumbered RN license or multi-state privilege to practice registered nursing in AZ;
  - b. A current, active, unencumbered Arizona APRN certificate,
  - c. A graduate degree in nursing or health related field in the population focus,
  - d. Two years of APRN clinical experience, and
  - e. Current knowledge, competence and certification as an APRN in the role and population focus consistent with teaching responsibilities.
4. Adjunct or part-time clinical faculty employed solely to supervise clinical nursing experiences shall meet all of the faculty qualifications for the APRN program they are teaching;

~~D.5.~~ Other licensed health care professionals may teach a non-clinical course or assist in teaching a clinical course in an advanced practice registered nursing program within their area of licensure and expertise. Interdisciplinary faculty who teach non-clinical courses shall have advanced preparation in the areas of course content.

~~E.6.~~ The parent institution of an advanced practice nursing program shall ensure that a preceptor supervising a student in clinical practice: Clinical preceptors may be used to enhance faculty-directed clinical learning experiences, but not to replace them. A clinical preceptor shall be approved by program administration or faculty and:

- ~~1.a.~~ Hold an current unencumbered active license or multistate privilege to practice as a registered nurse or physician in the state in which the preceptor practices or, if employed by the federal government, holds an a current unencumbered active RN or physician license in the United States;
- ~~2.b.~~ Has Have at least one year clinical experience as a physician or an advanced practice nurse, and;
- c. Practice in a comparable practice focus as the APRN program;
- ~~3-d.~~ For nurse preceptors, has at least one of the following:
  - ~~a-i.~~ Current National national certification in the advanced practice category role and population focus of the course or program in which the student is enrolled;
  - ~~b-ii.~~ Current Board certification in the advanced practice category role and population focus of the course or program in which the student is enrolled; or
  - ~~e-iii.~~ If an advanced practice preceptor cannot be found who meets the requirements of (E)(3)(a) or (b), this subsection, educational and experiential qualifications that will enable the preceptor to precept students in the program, as determined by the nursing program and verified approved by the Board.

**C.** An entity that offers a CRNA program in AZ shall maintain full national program accreditation with no limitations from the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Educational Programs or an equivalent agency approved by the Board. The program shall notify the Board of all program accreditation actions within 30 days of official notification by the accrediting agency.

**R4-19-503. Application for Approval of an Advanced Practice Registered Nursing Program; Approval by Board**

**A.** An administrator of an educational institution that proposes to offer an advanced practice registered nursing program a CNS or RNP program shall submit the following to the Board:

Notices of Proposed Rulemaking

4. An application that includes all of the following information:
  - ~~a.1. Category, specialty area~~ Role, population focus that meets the criteria in R4-19-501(B); and ~~the faculty member coordinating the program~~ program administrator and lead faculty as required in ~~under~~ R4-19-502(B);
  - ~~b.2. Name, address, and~~ evidence verifying institutional accreditation status of the applicant or affiliated educational institution and program accreditation status of current nursing programs offered by the educational institution;
  - ~~e.3. The mission, goals, and objectives of the program consistent with generally accepted standards for advanced practice education in the role and population focus of the program;~~
  - ~~d.4. List of the required courses, and a description, measurable objectives, and content outline for each required course consistent with curricular requirements in R4-19-502;~~
  - ~~e.5. A proposed time schedule for implementation of the program and attaining national accreditation;~~
  - ~~f.6. The total hours allotted for both didactic instruction and supervised clinical practicum in the program;~~
    - ~~g. List of the names and qualifications of each faculty member; and~~
  7. A program proposal that provides evidence of sufficient financial resources, clinical opportunities and available faculty and preceptors for the proposed enrollment and planned expansion;
  - ~~h.8. A self-study that provides evidence of compliance with R4-19-502;~~
- B.** An entity that wishes to offer a CRNA program shall submit evidence of current accreditation by the American Association of Nurse Anesthetists' Council on Accreditation of Nurse Anesthesia Education Programs or an equivalent organization.
- BC.** The Board shall approve an advanced practice registered nursing program if approval is in the best interest of the public and the program meets the requirements of this Article. The Board may grant approval for a period of two years or less to an advanced practice nursing program where the program meets all the requirements of this Article except for accreditation by a national nursing accrediting agency, based on the program's presentation of evidence that it has applied for accreditation and meets accreditation standards.
- CD.** An educational institution or entity that is denied approval of an advanced practice registered nursing program may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying its application for approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
- DE.** Approval of an advanced practice registered nursing program expires 12 months from the date of approval if a class of students is not admitted within that time.

**R4-19-504. ~~Rescission of Approval Notice of Deficiency of an Advanced Practice Registered Nursing Program; Unprofessional Program Conduct~~**

- A.** The Board may periodically survey an advanced practice registered nursing program under its jurisdiction to determine whether criteria for approval are being met.
- B.** The Board shall, upon determining that an advanced practice registered nursing program is not in compliance with ~~R4-19-502~~ this Article, provide to the program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct the deficiencies. The time for correction may not exceed 18 months.
  1. The program administrator shall, within 30 days from the date of service of the notice of deficiencies, consult with the Board or designated Board representative and, after consultation, file a plan to correct each of the identified deficiencies.
  2. The program administrator may, within 30 days from the date of service of the notice of deficiencies, submit a written request for a hearing before the Board to appeal the Board's determination of deficiencies. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
  3. If the Board's determination is not appealed or is upheld upon appeal, the Board may conduct periodic evaluations of the program during the time of correction to determine whether the deficiencies have been corrected.
- C.** The Board shall, following a Board-conducted survey and report, rescind the approval or limit the ability of a program to admit students if the program fails to comply with R4-19-502 within the time set by the Board in the notice of deficiencies provided to the program administrator.
  1. The Board shall serve the program administrator with a written notice of proposed rescission of approval or limitation of admission of students that states the grounds for the rescission or limitation. The program administrator has 30 days to submit a written request for a hearing to show cause why approval should not be rescinded or admissions limited. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
  2. Upon the effective date of a decision to rescind program approval, the ~~effected~~ affected advanced practice registered nursing program shall immediately cease operation and be removed from the official approved-status listing. An advanced practice registered nursing program that is ordered to cease operations shall assist currently enrolled students to transfer to an approved nursing program.
- D.** ~~The Board may rescind approval of an advanced practice registered nursing program, based on the severity of the viola-~~

Notices of Proposed Rulemaking

tions, if recision is in the best interest of the public or for one or both of the following reasons:

1. For a program that was served with a notice of deficiencies within the preceding three years and timely corrected the noticed deficiencies, subsequent noncompliance with the standards in R4-19-502; or
2. Failure to comply with orders of or stipulations with the Board within the time determined by the Board.

A disciplinary action, denial of approval, or notice of deficiency may be issued against an RNP or CNS nursing program for any of the following acts of unprofessional conduct:

1. Failure to maintain minimum standards of acceptable and prevailing educational practice;
2. For a program that was served with a notice of deficiencies within the preceding three years and timely corrected the noticed deficiencies, subsequent noncompliance with the standards in this Article;
3. Utilization of students to meet staffing needs in health care facilities;
4. Non-compliance with the program or parent institution mission or goals, program design, objectives, or policies;
5. Failure to provide the variety and number of clinical learning opportunities necessary for students to achieve program outcomes or minimal competence;
6. Student enrollments without adequate faculty, facilities, or clinical experiences;
7. Ongoing or repetitive employment of unqualified faculty;
8. Failure to comply with Board requirements within designated time-frames;
9. Fraud or deceit in advertising, promoting or implementing a nursing program;
10. Material misrepresentation of fact by the program in any advertisement, application or information submitted to the Board;
11. Failure to allow Board staff to visit the program or conduct an investigation;
12. Any other evidence that gives the Board reasonable cause to believe the program's conduct may be a threat to the safety and well-being of students, faculty or potential patients.

**R4-19-505. Requirements for Initial Advanced Practice Registered Nursing APRN Certification**

A. An applicant for certification as a ~~registered nurse practitioner (RNP) or clinical nurse specialist (CNS) in a specialty area~~ an advanced practice registered nurse, shall:

1. Hold a current Arizona registered nurse (RN) license in good standing or an RN license in good standing from a compact party state with multistate privileges; and
2. Submit ~~an~~ a verified application to the Board on a form provided by the Board that provides all of the following:
  - a. Full legal name and ~~any~~ all former names used by the applicant;
  - b. Current mailing address, including primary state of residence and telephone number;
  - c. Place and date of birth;
  - d. RN license number, application for RN license, or copy of a multistate compact RN license;
  - e. Social security number for an applicant who lives or works in the United States;
  - f. Current e-mail address;
  - g. Educational background, including the name and location of ~~all~~ basic nursing program, the institution that awarded the highest degree held and any and all advanced practice registered nursing education programs or schools attended, including the number of years attended, the length of each program, the date of graduation or completion, and the type of degree or certificate awarded;
  - h. Category Role and specialty area population focus, as applicable for which the applicant is applying;
  - i. Each current and previous employer, including address, type of position, and dates of employment; Current employer or practice setting, including address, position, and dates of service, if employed or practicing in nursing or health care; ~~and previous employer or practice setting in nursing or health care, if any, if current employment is less than 960 hours within the past five years~~;
  - j. Information regarding Evidence of national certification or recertification as an advanced practice registered nurse in the category role and specialty area population focus, if applicable, of the application and by a certification program that meets the requirement of R4-19-501 (C). The applicant shall include for which the applicant is applying, including the name of the certifying organization, specialty area, certification number, date of certification, and expiration date;
  - k. For applicants holding a multistate compact RN license in a state other than AZ:
    - i. State of original licensure and license number;
    - ii. State of current compact RN license, license number and expiration date;
    - iii. Date of taking RN licensure exam and name of exam;
    - iv. Whether the applicant ever submitted an application for and was granted an AZ license and, if applicable, the date of AZ licensure;
    - v. Other information related to the nurse's practice for the purpose of collecting nursing workforce data; and
    - vi. State of licensure and license number of all RN licenses held;
  - l. Responses regarding the applicant's background on the following subjects: Whether the applicant is under investigation or has disciplinary action pending against the applicant's nursing license or advanced practice certificate

- or license in any state, other than Arizona, or territory of the United States;
- i. Current investigation or pending disciplinary action by a nursing regulatory agency in the United States or its territories
  - ii. Whether the applicant has ever been convicted, entered a plea of guilty, nolo contendere, or no contest, or ever been sentenced, served time in jail or prison, or had deferred prosecution or sentence deferred in any felony or undesignated offense;
  - iii. Undesignated offense and felony Felony conviction charges, convictions and plea agreements including deferred prosecution;
  - iv. Misdemeanor charges, convictions, and plea agreements, including deferred prosecution, that are required to be reported under A.R.S. § 32-3208.
  - v. Actions taken on a nursing license by any other state.
  - vi. Whether the applicant has committed an act of unprofessional Unprofessional conduct as defined in A.R.S. § 32-1601;
  - vii. Substance use disorder within the last five years;
  - viii. Current participation in an alternative to discipline program in any other state; and
  - ix. Information that the applicant meets the criteria in R4-19-506 (A) or (C).
3. Submit a ~~Completed~~ fingerprint card on a form provided by the Board or prints if the applicant has not submitted a fingerprint card fingerprints to the Board within the last two years; and
- i. Signature verifying the truthfulness of the information provided;
4. ~~Submit An~~ an official transcript from an institution accredited under A.R.S. § 32-1644 either sent directly from the institution or obtained from a Board-approved database that provides evidence of:
- a. a A graduate degree with a major in nursing for RNP and CNS Applicants, or
  - b. A graduate degree associated with a CRNA program for a CRNA applicant.
3. For a CNS applicant, submit evidence that the applicant completed a program in a clinical specialty that prepared the applicant to practice as a CNS, as part of a graduate degree or post-masters program, either directly from the program or a Board-approved database.
- 4.5. For an RNP applicant, submit The applicant shall cause the program to provide the Board with evidence of completion of an APRN program in the role and population focus of the application through of completion of an RNP program in the specialty area, for which the applicant is applying either submission of an official letter or other official program document sent either directly from the program, or from a reliable Board-approved data base, and one of the following The APRN program shall meet one of the following criteria during the period of the applicant's attendance in the program:
- a. Evidence of completion of an RNP program that The program was part of a graduate degree, or post-masters program at an institution accredited under A.R.S. 32-1644;
  - b. Evidence of completion of a Board-approved RNP program The program was approved or recognized in the U.S jurisdiction of program location for the purpose granting APRN licensure or certification;
  - c. An official transcript from an RNP program offered by or affiliated with a college or university accredited under A.R.S. § 32-1644, which was at least nine months or two full-time semesters in duration and included theory and clinical experience; or
  - d. If the program was not provided by an accredited college or university but is located in the U.S. or territories; an official transcript, a copy of a certificate, or an official letter that shows the program, the program:
    - i. Was at least nine months in length or equivalent to two semesters full-time study, or contained didactic and at least 500 hours clinical instruction;
    - ii. Contained theory and clinical experiences sufficient to prepare the graduate to practice within the category and specialty area of practice for which the nurse is applying under A.R.S. § 32-1601; and
    - iii. Was a RNP program recognized by the jurisdiction where it was located for the purpose of granting nurse practitioner licensure or certification.
- 5.6. For an applicant who completed an RNP program, CNS program, advanced practice or graduate program in a foreign jurisdiction, submit an evaluation from the Commission on Graduates of Foreign Nursing Schools or a Board-approved credential evaluation service that indicates the applicant's program is comparable to a U.S. graduate nursing or APRN program, clinical nurse specialist program, or registered nurse practitioner program in the specialty area;
6. For a Clinical Nurse Specialist or Certified Nurse Midwife applicant, or for a Registered Nurse Practitioner applicant submitting an application after July 1, 2004, submit verification of current national certification or recertification in the applicant's category and specialty, as applicable, from a certifying body that meets the criteria in R4-19-501(B)(3);
7. For a CNS applicant who submits an application to the Board, and completed a maternal-child clinical nurse specialist program that meets the requirements of subsection (A) but cannot be nationally certified due to lack of a certification exam that meets the requirements of R4-19-501, submit:
- a. A description of the applicant's scope of practice that is consistent with A.R.S. § 32-1601(5);

**Notices of Proposed Rulemaking**

- b. ~~One of the following:~~
  - i. ~~A letter from a faculty member who supervised the applicant during the graduate program attesting to the applicant's competence to practice within the defined scope of practice;~~
  - ii. ~~A letter from a supervisor verifying the applicant's competence in the defined scope of practice; or~~
  - iii. ~~A letter from a physician, RNP, or CNS attesting to the applicant's competence in the defined scope of practice; and~~
- e. ~~A form verifying that the applicant has practiced a minimum of 500 hours in the specialty area within the past two years, which may include clinical practice time in a CNS program; and~~

87. Submit the required fee.

**B. If the applicant satisfies all other requirements, the Board shall continue to certify:**

- 1. An RNP without a graduate degree with a major in nursing if the applicant:
  - a. Meets all other requirements for certification; and
  - b. ~~Provides~~ Ensures that the U.S. jurisdiction of an applicant's previous RNP licensure or certification submits evidence, directly from the U.S. jurisdiction, of the applicant's certification or licensure in the advanced practice category nurse practitioner role and specialty population focus in this or another state or territory of the United States, that either is current or was current at least six months before the application was received by the Board, and was originally issued:
    - i. Before January 1, 2001, if the RNP applicant lacks a graduate degree; or
    - ii. Before November 13, 2005 if the RNP's graduate degree is in a health-related area other than nursing.
- 2. An RNP or CNS applicant without evidence of national certification who received initial advanced practice certification or licensure in another state not later than July 1, 2004 and provides evidence, directly from the jurisdiction, that the certification or licensure is current; and
- 3. A CNS applicant without completion of a CNS program who received initial certification or advanced practice licensure in this or another state not later than November 13, 2005 and provides evidence, directly from the jurisdiction, that the certificate or license is current ~~without evidence that the applicant completed a program in a clinical specialty.~~
- 4. A CRNA who completed a CRNA program before the effective date of this Section without evidence of a graduate degree.
- 5. A CNS applicant who completed a women's health clinical nurse specialist program that was part of a graduate degree in nursing program under subsection (A), without evidence of national certification upon submission of the following:
  - a. A description of the applicant's scope of practice that is consistent with A.R.S. § 32-1601(5);
  - b. One of the following:
    - i. A letter from a faculty member who supervised the applicant during the graduate program attesting to the applicant's competence to practice within the defined scope of practice;
    - ii. A letter from a current supervisor verifying the applicant's competence in the defined scope of practice; or
    - iii. A letter from a physician, RNP, or CNS who has worked with the applicant within the past two years attesting to the applicant's competence in the defined scope of practice; and
  - c. A form verifying that the applicant has practiced a minimum of 500 hours in the specialty area within the past two years, which may include clinical practice time in a CNS program

**C. The Board shall issue a certificate to practice as a ~~registered nurse practitioner RNP in a population focus, or a clinical nurse specialist CNS in a specialty area population focus, or a registered nurse anesthetist~~ to a registered nurse who meets the criteria in this Section. An applicant who is denied a certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.**

**R4-19-506. Expiration of ~~Advanced Practice APRN Certificates~~ Certificate; Practice Requirement; Renewal**

- A. An advanced practice certificate issued after July 1, 2004, expires when the certificate holder's RN license expires. Certificates issued on or before July 1, 2004 or those issued without proof of national certification under R4-19-505(B)(5) and (B)(2) do not expire unless the RN license expires under A.R.S. § 32-1642 or the nurse has not practiced advanced practice nursing at the applicable level of certification for a minimum of 960 hours in the five years before the date the application is received. This requirement is satisfied if the applicant verifies that the applicant has:
  - 1. Completed an advanced practice nursing education program within the past five years; or
  - 2. Practiced for a minimum of 960 hours within the past five years where the nurse:
    - a. Worked for compensation or as a volunteer, as an ~~RNP or CNS, and~~ APRN and performed one or more acts under A.R.S. § 32-1601(~~§ 6~~) for a CNS ~~or~~ A.R.S. § 32-1601(~~45~~ 19) for an RNP or A.R.S. § 32-1634.04 for a CRNA; or
    - b. Held a position for compensation or as a volunteer that required, preferred or recommended, in the job description, the level of advanced practice certification being sought or renewed.
- B. A registered nurse requesting renewal of an advanced practice certificate or an RNP certificate issued after July 1, 2004

shall provide evidence of current national certification or recertification under R4-19-505(A)(6)-(2)(g i). This provision does not apply to a CNS granted a waiver of certification.

- C. An advanced practice nurse ~~requesting renewal of an advanced practice certificate~~ who does not satisfy the practice requirement of subsection (A) shall complete coursework or continuing education activities at the graduate or advanced practice level that includes, at minimum, 45 contact hours of advanced pharmacology and 45 contact hours in a subject or subjects related to the role and population focus of certification. Upon completion of the coursework, the nurse shall engage in a period of precepted clinical practice as specified in this subsection either:
1. ~~Provide evidence of current national certification in the category and specialty area of Board certification; or~~
  2. ~~Complete coursework or continuing education activities at the graduate or advanced practice level that includes, at minimum, 45 contact hours of advanced pharmacology and 45 contact hours in a subject or subjects related to the category and specialty area of certification. Upon completion of the coursework, the nurse shall engage in a period of precepted clinical practice as specified in this subsection:~~
    - 1a. ~~Precepted clinical practice shall be directly supervised by an advanced practice nurse in the same category role and specialty area population focus as the certification being renewed or a physician who engages in practice with the same population focus as the certification being renewed.~~
    - 2b. ~~Practice hours completed during the time-frame specified below may be applied to reduce the number of precepted clinical practice hours, except that in no case shall the hours be reduced by more than half the requirement. The nurse shall complete hours according to the following schedule:~~
      - i a. ~~300 hours if the applicant has practiced less than 960 hours in only the last five years;~~
      - ii b. ~~600 hours if the applicant has not practiced 960 hours in the last five years, but has practiced at least 960 hours in the last six years;~~
      - iii c. ~~1000 hours if the applicant has not practiced at least 960 hours in the last six years, but has practiced 960 hours in the last seven to 10 years; or~~
    - 3e. ~~If the nurse has not practiced 960 hours of advanced practice nursing in the category role and specialty area population focus being renewed in more than 10 years, complete a program of study as recommended by an approved advanced practice nursing program that includes, at minimum, 500 hours of faculty supervised clinical practice in the category role and specialty area population focus of certification. An applicant who qualifies for any option in subsection (C)(2) (b) may complete the requirements of this subsection to satisfy the practice requirement.~~
- D. ~~An applicant who, in addition to not meeting the requirements for continued APRN certification, does not meet the requirements for RN renewal, shall fulfill all RN renewal requirements before satisfying the requirements of this Section.~~
- ~~DE.~~ The Board shall renew a certificate to practice as a registered nurse practitioner in a population focus, ~~or a clinical nurse specialist in a specialty area population focus, or a registered nurse anesthetist~~ for a registered nurse who meets the criteria in this Section. An applicant who is denied renewal of a certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying renewal of certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-507. Temporary Advanced Practice Certificate; Temporary Prescribing and Dispensing Authority**

- A. Based on the registered nurse's qualifications, the Board may issue a temporary certificate to practice as a registered nurse practitioner or a clinical nurse specialist in a specialty area population focus or a registered nurse anesthetist. A registered nurse who is applying for a temporary certificate shall:
1. Apply for certification as an advanced practice nurse;
  2. Submit an application for a temporary certificate;
  3. Demonstrate authorization to practice as a registered nurse in Arizona on either a permanent or temporary Arizona license in good standing or a multistate compact privilege;
  4. Meet all requirements of R4-19-505 or meet the requirements of R4-19-505 with the exception of national certification for RNP and CNS applicants unless exempt under R4-19-505(A)(6)-(B); and
  5. Submit evidence that the applicant: ~~has applied for and is eligible to take or has taken an advanced practice certifying examination in the applicant's category and specialty area of practice, if applicable.~~
    - a. Has applied for and is eligible to take an approved national advanced practice certification exam in the role and population focus of the application;
    - b. Has requested that the certification program transmit all exam results directly to the Board; or
    - c. For a CRNA, holds national certification according to R4-19-501.
  6. If an applicant fails to meet criteria for national advanced practice certification or has failed a certification exam, the applicant is not eligible for a temporary certificate.
- B. The Board may issue temporary prescribing and dispensing authority for RNP applicants, if the applicant:
1. Meets all application requirements for temporary certification in this Section,
  2. Applies for and meets all requirements for prescribing and dispensing authority under A.A.C. R4-19-511,
  3. Has been certified or licensed as a nurse practitioner/nurse midwife with prescribing and dispensing authority in the same role and population focus in another state or territory of the United States.

Notices of Proposed Rulemaking

4. Either holds current national certification as a registered nurse practitioner in the population focus of the application, nurse midwife or is exempt from the certification under R4-19-505 (B), and
  5. Meets the practice requirement of R4-19-506 (A)(2).
- BC.** Temporary certification as an advanced practice nurse and temporary prescribing and dispensing authority expires expire in six months and may be renewed for an additional six months for good cause. Good cause means reasons beyond the control of the temporary certificate holder such as unavoidable delays in obtaining information required for certification.
- CD.** Notwithstanding subsection ~~(B)~~ (C), the Board shall withdraw a temporary advanced practice certificate and temporary prescribing and dispensing authority under any one of the following conditions. The temporary certificate holder:
1. Does not meet requirements for RN licensure in this state or the RN license is suspended or revoked,
  2. Fails to renew the RN license upon expiration,
  3. Loses the multistate compact privilege,
  4. Fails the national certifying examination, or
  5. Violates a statute or rule of the Board.
- D.** ~~A temporary registered nurse practitioner certificate does not qualify an applicant for prescribing or dispensing privileges.~~
- E.** An applicant who is denied a temporary certificate or temporary prescribing and dispensing authority may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the temporary certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-508. Scope of Standards Related to Practice of a Registered Nurse Practitioner Scope of Practice**

- A.** An RNP shall refer a patient to a physician or another health care provider if the referral will protect the health and welfare of the patient and consult with a physician and other health care providers if a situation or condition occurs in a patient that is beyond the RNP's knowledge and experience.
- B.** In addition to the scope of practice permitted a registered nurse, a registered nurse practitioner, under A.R.S. §§ 32-1601(15) and 32-1606(B)(12), may perform the following acts within the limits of the ~~specialty area~~ population focus of certification:
1. Examine a patient and establish a medical diagnosis by client history, physical examination, and other criteria;
  2. For a patient who requires the services of a health care facility:
    - a. Admit the patient to the facility,
    - b. Manage the care the patient receives in the facility, and
    - c. Discharge the patient from the facility;
  3. Order and interpret laboratory, radiographic, and other diagnostic tests, and perform those tests that the RNP is qualified to perform;
  4. Prescribe, order, administer and dispense therapeutic measures including pharmacologic agents and devices if authorized under R4-19-511, and non-pharmacological interventions including, but not limited to, durable medical equipment, nutrition, home health care, hospice, physical therapy and occupational therapy.
  - ~~4-5.~~ Identify, develop, implement, and evaluate a plan of care for a patient to promote, maintain, and restore health;
  - ~~5-6.~~ Perform therapeutic procedures that the RNP is qualified to perform;
  - ~~6-7.~~ Prescribe treatments; Delegate therapeutic measures to qualified assistive personnel including medical assistants under R4-19-509.
  - ~~7.~~ If authorized under R4-19-511, prescribe and dispense drugs and devices; and
  8. Perform additional acts that the RNP is qualified to perform and that are generally recognized as being within the role and population focus of certification.
- C.** An RNP shall only provide health care services including prescribing and dispensing within the ~~nurse practitioner's scope of practice~~ RNP's population focus and role and for which the RNP is educationally prepared and for which competency has been established and maintained. Educational preparation means academic coursework or continuing education activities that include both theory and supervised clinical practice.

**R4-19-509. Delegation to Medical Assistants**

- A.** Under A.R.S. §§ 32-1456 and 32-1601(15)(d)(vii), an RNP may delegate patient care to a medical assistant in an office or outpatient setting. The RNP shall verify that a medical assistant to whom the RNP delegates meets at least one of the following qualifications:
1. Completed an approved medical assistant training program as defined in A.A.C. R4-16-101(3);
  2. If a graduate of an unapproved medical assistant training program, passed the medical assistant examination administered by either the American Association of Medical Assistants or the American Medical Technologists;
  3. Completed an unapproved medical assistant training program and was employed as a medical assistant on a continuous basis since completion of the program before February 2, 2000;
  4. Was directly supervised by the same registered nurse practitioner for at least 2000 hours before February 2, 2000; or
  5. Completed a medical services training program of the Armed Forces of the United States.
- B.** ~~A medical assistant may perform, under the delegation and direct supervision, as defined in A.R.S. § 32-1401, of a regis-~~

~~tered nurse practitioner, those acts authorized under A.R.S. § 32-1456(A) and A.A.C. R4-16-402. An RNP may delegate the following acts to a medical assistant who is under the direct supervision of the RNP and demonstrates competency in the performance of the act:~~

- ~~1. Obtain vital signs;~~
- ~~2. Perform venipuncture and draw blood;~~
- ~~3. Perform capillary puncture;~~
- ~~4. Perform pulmonary function testing;~~
- ~~5. Perform electrocardiography;~~
- ~~6. Perform patient screening using established protocols;~~
- ~~7. Perform dosage calculations as applicable to written orders;~~
- ~~8. Apply pharmacology principles to prepare and administer oral, inhalant, topical, otic, optic, rectal, vaginal and parenteral medications (excluding intravenous medications);~~
- ~~9. Maintain medication and immunization records;~~
- ~~10. Assist provider with patient care;~~
- ~~11. Perform Clinical Laboratory Improvement Amendments (CLIA) waived hematology, chemistry, urinalysis, microbiological and immunology testing;~~
- ~~12. Screen test results;~~
- ~~13. Obtain specimens for microbiological testing;~~
- ~~14. Obtain patient history;~~
- ~~15. Instruct patients according to their needs to promote health maintenance and disease prevention;~~
- ~~16. Prepare a patient for procedures or treatments;~~
- ~~17. Document patient care and education;~~
- ~~18. Perform first aid procedures;~~
- ~~19. Perform whirlpool treatments;~~
- ~~20. Perform diathermy treatments;~~
- ~~21. Perform electronic galvaton stimulation treatments;~~
- ~~22. Perform ultrasound therapy;~~
- ~~23. Perform massage therapy (subject to regulation by massage therapy board);~~
- ~~24. Apply traction treatments;~~
- ~~25. Apply Transcutaneous Nerve Stimulation unit treatments;~~
- ~~26. Apply hot and cold pack treatments; and~~
- ~~27. Administer small volume nebulizer treatments.~~

**R4-19-511. Prescribing and Dispensing Authority; Prohibited Acts**

- A. ~~The Board shall authorize an RNP to prescribe and dispense (P&D) drugs and devices within the RNP's specialty area and category of practice population focus~~ only if the RNP does all of the following:
1. Obtains authorization by the Board to practice as a registered nurse practitioner;
  2. Applies for prescribing and dispensing privileges on the application for registered nurse practitioner certification;
  3. Submits a completed verified application on a form provided by the Board that contains all of the following information:
    - a. Name, address, e-mail address and home telephone number;
    - b. Arizona registered nurse license number, or copy of compact license;
    - c. Nurse practitioner ~~specialty~~ population focus;
    - d. Nurse practitioner certification number issued by the Board; and
    - e. Business address and telephone number; ~~and~~
    - f. ~~A sworn statement verifying the truthfulness of the information provided.~~
  4. Submits evidence of a minimum of 45 contact hours of education within the three years immediately preceding the application, covering one or both of the following topics consistent with the population focus of education and certification:
    - a. Pharmacology, or
    - b. Clinical management of drug therapy, and
  5. Submits the required fee.
- B. An applicant who is denied P & D authority may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the P & D authority. Board hearings shall comply with A.R.S. Title 41, Chapter 6, Article 10, and 4 A.A.C. 19, Article 6.
- C. An RNP shall not prescribe or dispense drugs or devices without Board authority or in a manner inconsistent with law. The Board may impose an administrative or civil penalty for each violation, suspend the RNP's P & D authority, or impose other sanctions under A.R.S. § 32-1606(C). In determining the appropriate sanction, the Board shall consider factors such as the number of violations, the severity of each violation, and the potential for or existence of patient harm.

Notices of Proposed Rulemaking

- D. In addition to acts listed under R4-19-403, for a nurse who prescribes or dispenses a drug or device, a practice that is or might be harmful to the health of a patient or the public, includes one or more of the following:
1. Prescribing a controlled substance to one's self or a member of the nurse's family;
  2. Providing any controlled substance or prescription-only drug or device for other than accepted therapeutic purposes;
  3. ~~Prescribing an amphetamine or similar Class II drug, in the treatment of exogenous obesity, for a period in excess of 30 days within a 12 month period for an individual; or the non therapeutic use of injectable amphetamines;~~
  - 4.3. Delegating the prescribing and dispensing of drugs or devices to any other person; ~~and~~
  4. Prescribing for a patient that is not in the RNPs population focus of education and certification except as authorized in subsection (6) (d); and
  5. Prescribing, dispensing, or furnishing a prescription drug or a prescription-only device to a person unless the nurse has examined the person and established a professional relationship, except when the nurse is engaging in one or more of the following:
    - a. Providing temporary patient care on behalf of the patient's regular treating and licensed health care professional;
    - b. Providing care in an emergency medical situation where immediate medical care or hospitalization is required by a person for the preservation or health, life, or limb; or
    - c. Furnishing a prescription drug to prepare a patient for a medical examination.
    - d. Prescribing antimicrobials to a person who is believed to be at substantial risk as a contact of a patient who has been examined and diagnosed with a communicable disease by the prescribing RNP even if the contact is not in the population focus of the RNPs certification.

**R4-19-512. Prescribing Drugs and Devices**

- A. An RNP granted P & D authority by the Board may:
1. Prescribe drugs and devices;
  2. Provide for refill of prescription-only drugs and devices for one year from the date of the prescription.
- B. An RNP with P & D authority who wishes to prescribe a controlled substance shall obtain a DEA registration number before prescribing a controlled substance. The RNP shall file the DEA registration number with the Board.
- C. An RNP with a DEA registration number may prescribe:
1. A Class II controlled substance as defined in the federal Uniform Controlled Substances Act, 21 U.S.C. § 801 et seq., or Arizona's Uniform Controlled Substances Act, A.R.S. Title 36, Chapter 27, but shall not prescribe refills of the prescription;
  2. A Class III or IV controlled substance, as defined in the federal Uniform Controlled Substances Act or Arizona's Uniform Controlled Substances Act, and may prescribe a maximum of five refills in six months; and
  3. A Class V controlled substance, as defined in the federal Uniform Controlled Substances Act or Arizona's Uniform Controlled Substances Act, and may prescribe refills for a maximum of one year.
- D. An RNP whose DEA registration is revoked or expires shall not prescribe controlled substances. An RNP whose DEA registration is revoked or limited shall report the action to the Board.
- E. In all outpatient settings or at the time of hospital discharge, an RNP with P & D authority shall personally provide a patient or the patient's representative with the name of the drug, directions for use, and any special instructions, precautions, or storage requirements necessary for safe and effective use of the drug if any of the following occurs:
1. A new drug is prescribed or there is a change in the dose, form, or direction for use in a previously prescribed drug;
  2. In the RNP's professional judgment, these instructions are warranted; or
  3. The patient or patient's representative requests instruction.
- F. An RNP with P & D authority shall ensure that all prescription orders contain the following:
1. The RNP's name, address, telephone number, and ~~specialty area~~ population focus;
  2. The prescription date;
  3. The name ~~and address~~ of the patient and either the address or a blank to fill in the address if the prescription is not being dispensed by the RNP;
  4. The full name of the drug, strength, dosage form, and directions for use;
  5. The letters "DAW", "dispense as written", "do not substitute", "medically necessary" or any similar statement on the face of the prescription form if intending to prevent substitution of the drug;
  6. The RNP's DEA registration number, if applicable; and
  7. The RNP's signature.

**R4-19-513. Dispensing Drugs and Devices**

- A. A registered nurse practitioner (RNP) granted prescribing and dispensing authority by the Board may:
1. Dispense drugs and devices to patients;
  2. Dispense samples of drugs packaged for individual use without a prescription order or additional labeling;
  3. Only dispense drugs and devices obtained directly from a pharmacy, manufacturer, wholesaler, or distributor; and
  4. Allow other personnel to assist in the delivery of medications provided that the RNP retains responsibility and

- accountability for the dispensing process.
- B.** If dispensing a drug or device, an RNP with dispensing authority shall:
1. Ensure that the patient has a written prescription that complies with R4-19-512(F) and contains the address of the patient and inform the patient that the prescription may be filled by the prescribing RNP or by a pharmacy of the patient's choice;
  2. Affix a prescription number to each prescription that is dispensed; and
  3. Ensure that all original prescriptions are preserved for a minimum of seven years and make the original prescriptions available at all times for inspection by the Board of Nursing, Board of Pharmacy, and law enforcement officers in performance of their duties.
  4. Report the dispensing of controlled substances to the Board of Pharmacy's Controlled Substance Prescription Monitoring Program as required in A.R.S. § 36-2608.
- C.** An RNP practicing in a public health facility operated by this state or a county or in a qualifying community health center under A.R.S. § 32-1921 (D) and (F) may dispense drugs or devices to patients without a written prescription if the public health facility or the qualifying community health center adheres to all storage, labeling, safety, and recordkeeping rules of the Board of Pharmacy.
- D.** An RNP ~~with dispensing authority~~ who dispenses a drug shall ensure that a ~~drug is dispensed with a label~~ is affixed that contains all of the following information:
1. Dispensing RNP's name and ~~specialty area~~ population focus;
  2. Address and telephone number of the location ~~at~~ from which the drug is dispensed;
  3. Date dispensed;
  4. Patient's name and address;
  5. Name and strength of the drug, quantity in the container, directions for use, and any cautionary statements necessary for the safe and effective use of the drug;
  6. Manufacturer and lot number; and
  7. Prescription order number.
- E.** An RNP ~~with dispensing authority~~ who dispenses a drug or device shall ensure that the following information about the drug or device is entered into the patient's medical record:
1. Name of the drug, strength, quantity, directions for use, and number of refills;
  2. Date dispensed;
  3. Therapeutic reason;
  4. Manufacturer and lot number; and
  5. Prescription order number.
- F.** An RNP with dispensing authority shall:
1. Keep all drugs in a locked cabinet or room in an area that is not accessible to patients;
  2. If dispensing a controlled substance:
    - a. Control access by a written policy that specifies:
      - i. Those persons allowed access, and
      - ii. Procedures to report immediately the discovery of a shortage or illegal removal of drugs to a local law enforcement agency and provide that agency and the DEA with a written report within seven days of the discovery;
    - b. Maintain and make available to the Board upon request an ongoing inventory and record of:
      - i. A Schedule II controlled substance, as defined in the federal Uniform Controlled Substances Act or Arizona's Uniform Controlled Substances Act, separately from all other records, and a prescription for a Schedule II controlled substance in a separate prescription file; and
      - ii. A Schedule III, IV, or V controlled substance, as defined in the federal Uniform Controlled Substances Act or Arizona's Uniform Controlled Substances Act, in a form that is readily retrievable from other records.
- G.** If a prescription order is refilled, an RNP with P & D authority shall record the following information on the back of the prescription order or in the patient's medical record:
1. Date refilled,
  2. Quantity dispensed if different from the full amount of the original prescription,
  3. RNP's name or identifiable initials, and
  4. Manufacturer and lot number.
- H.** Under the supervision of an RNP with P & D authority, other personnel may:
1. Receive and record a prescription refill request from a patient or a patient's representative;
  2. Receive and record a verbal refill authorization from the RNP including:
    - a. The RNP's name;
    - b. Date of refill;
    - c. Name, directions for use, and quantity of drug; and
    - d. Manufacturer and lot number;

Notices of Proposed Rulemaking

3. Prepare and affix a prescription label; and
4. Prepare a drug or device for delivery, provided that the dispensing RNP:
  - a. Inspects the drug or device and initials the label before issuing to the patient to ensure compliance with the prescription; and
  - b. Ensures that the patient is informed of the name of the drug or device, directions for use, precautions, and storage requirements.

**R4-19-514. ~~Scope Standards Related to Practice of the Clinical Nurse Specialist~~ Scope of Practice**

In addition to the functions of a registered nurse, a ~~clinical nurse specialist~~ CNS, under A.R.S. § 32-1601(5), may perform one or more of the following for an individual, family, or group within the ~~specialty area~~ population focus of certification and for which competency has been maintained:

1. ~~Perform a comprehensive~~ Conduct an advanced assessment, analysis, and evaluation of a patient's complex health needs;
2. ~~Diagnose symptoms, functional problems, risk behaviors, and health status~~ Establish primary and differential health status diagnoses;
3. Direct health care as an advanced clinician;
4. Develop, implement, and evaluate a treatment plan according to a patient's need for specialized nursing care;
5. Establish nursing standing orders, algorithms, and practice guidelines related to interventions and specific plans of care;
6. Manage health care according to written protocols;
7. Facilitate system changes on a multidisciplinary level to assist a health care facility and improve patient outcomes cost-effectively;
8. Consult with the public and professionals in health care, business, and industry in the areas of research, case management, education, and administration;
9. Perform psychotherapy if certified as a clinical nurse specialist in ~~adult or child and adolescent~~ psychiatric and mental health nursing;
10. Prescribe and dispense durable medical equipment; or
11. Perform additional acts that the clinical nurse specialist is qualified to perform.