

BEFORE THE BOARD OF NURSING  
DEPARTMENT OF LABOR AND INDUSTRY  
STATE OF MONTANA

In the matter of the proposed transfer and ) NOTICE OF PUBLIC HEARING  
amendment of ARM 8.32.301 through ) ON PROPOSED TRANSFER  
8.32.308, 8.32.401 through 8.32.405, 8.32.408, ) AND AMENDMENT,  
8.32.411 through 8.32.413, 8.32.415, 8.32.417, ) ADOPTION, REPEAL,  
8.32.426 through 8.32.430, 8.32.501, 8.32.502, ) AND TRANSFER  
8.32.507, 8.32.601, 8.32.604 through 8.32.606, )  
8.32.801, 8.32.802, 8.32.806 through 8.32.808, )  
8.32.1102, 8.32.1104 through 8.32.1111, )  
8.32.1113, 8.32.1116, 8.32.1118, 8.32.1119, )  
8.32.1402 through 8.32.1412, 8.32.1414, )  
8.32.1501 through 8.32.1505, 8.32.1508, )  
8.32.1509, 8.32.1601 through 8.32.1604, )  
8.32.1606, 8.32.1607, 8.32.1609 through )  
8.32.1611, 8.32.1721, 8.32.1722, 8.32.1725, )  
and 8.32.1732, adoption of NEW RULE I, )  
repeal of 8.32.504 through 8.32.506, 8.32.1101, )  
and 8.32.1401, and transfer of 8.32.101, )  
8.32.201, 8.32.202, 8.32.409, 8.32.410, )  
8.32.416, 8.32.425, 8.32.603, 8.32.608, )  
8.32.610, 8.32.804, 8.32.1103, 8.32.1112, )  
8.32.1114, 8.32.1413, 8.32.1506, 8.32.1510, )  
8.32.1605, 8.32.1608, 8.32.1612, 8.32.1723, )  
8.32.1724, 8.32.1726 through 8.32.1731, )  
and 8.32.1733 pertaining to nursing )

TO: All Concerned Persons

1. On May 12, 2006, at 9:00 a.m., a public hearing will be held in room 471, 301 South Park Avenue, Helena, Montana to consider the proposed transfer and amendment, adoption, repeal, and transfer of the above-stated rules.

2. The Department of Labor and Industry (department) will make reasonable accommodations for persons with disabilities who wish to participate in this public hearing or need an alternative accessible format of this notice. If you require an accommodation, contact the department no later than 5:00 p.m., May 5, 2006, to advise us of the nature of the accommodation that you need. Please contact Marilyn Kelly-Clark, Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513; telephone (406) 841-2355; Montana Relay 1-800-253-4091; TDD (406) 444-2978; facsimile (406) 841-2305; e-mail dlibsdnur@mt.gov.

3. GENERAL REASONABLE NECESSITY STATEMENT: The Board of Nursing was transferred from the Department of Commerce to the Department of Labor and Industry by the 2001 legislature by Chapter 483, Laws of Montana 2001.

The Board of Nursing is using this transfer as an opportunity to not only transfer the rules to put them into a more user-friendly order in Title 24, the Department of Labor and Industry, but to also amend the rules to break the rules into license type (LPN, RN, APRN, Medication Aide) and insert all license type rules together in individual subchapters.

It is necessary to rearrange the rules in order to group related rules together and to group together rules by license type because licensees, board members, and others have complained that the current rules are not user-friendly, are poorly or illogically arranged, and that information being sought is sometimes found embedded in seemingly unrelated rules.

Insufficient rule numbers had been reserved in each subchapter in the past and as a result, some rules got codified in illogical places. In addition, when the arrangement of the current rules was initially undertaken, the board believed that an arrangement by topic was the best approach. Currently, a rule on any given topic will contain several paragraphs describing how the rule applies to each license type. Upon reconsideration, the board now believes that arrangement by license type would be more user-friendly.

As part of the general review of the rules, the proposed amendments are intended to ensure consistent use of terminology rather than use of various terms that mean the same thing. For instance, references to the Board of Nursing are proposed to be amended to "board" and references to licensed practical nurse is proposed to be amended to "practical nurse" which are the defined references.

Amendments in this notice also provide clarity and consistency, eliminate outdated terminology, make references gender neutral, and provide for overall effectiveness in the rules. Grammatical and format errors are also being amended in order to comply with recent changes adopted by the Secretary of State.

Also, repetitious references to statutory requirements were identified and proposed for deletion, as well as deleting statutes that have been repealed.

Transferring and amending the rules in this manner will find rules applicable to all licensees found in subchapters 1 through 4, 6, 16, 20, and 21. The medication aide rules will be found in subchapter 9, practical nurse (PN) rules will be found in subchapter 10, registered nurse (RN) rules will be found in subchapter 12, and advanced practice registered nurse (APRN) rules will be found in subchapter 14.

This general statement of reasonable necessity is applicable to all the proposed actions. When warranted, specific reasonable necessity statements are listed as applicable.

Numerous rules have been proposed to be transferred to more than one location because they are applicable to each license type. Rules will also be amended as

necessary to make the rule specific to the license type found in that subchapter. These rules are as follows:

| <u>OLD</u> | <u>PROPOSED</u> |             |             |
|------------|-----------------|-------------|-------------|
| 8.32.401   | 24.159.1022     | 24.159.1222 | 24.159.1415 |
| 8.32.402   | 24.159.1024     | 24.159.1224 | 24.159.1417 |
| 8.32.405   | 24.159.1028     | 24.159.1228 | 24.159.1418 |
| 8.32.408   | 24.159.1021     | 24.159.1221 |             |
| 8.32.409   | 24.159.1036     | 24.159.1236 | 24.159.1426 |
| 8.32.410   | 24.159.1040     | 24.159.1240 | 24.159.1430 |
| 8.32.411   | 24.159.1037     | 24.159.1237 | 24.159.1427 |
| 8.32.412   | 24.159.1038     | 24.159.1238 | 24.159.1428 |
| 8.32.416   | 24.159.1041     | 24.159.1241 | 24.159.1431 |
| 8.32.417   | 24.159.1046     | 24.159.1246 | 24.159.1436 |
| 8.32.501   | 24.159.1023     | 24.159.1223 | 24.159.1416 |
| 8.32.502   | 24.159.1052     | 24.159.1252 | 24.159.1442 |
| 8.32.507   | 24.159.1053     | 24.159.1253 | 24.159.1443 |
| 8.32.1409A | 24.159.1006     | 24.159.1206 |             |

4. The rules proposed to be transferred and amended provide as follows, stricken matter interlined, new matter underlined:

8.32.415 (24.159.301) DEFINITIONS As used in Title 37, chapter 8, MCA, and this chapter, unless defined specifically in a particular subchapter, the following definitions apply:

(1) "Board" means the Montana Board of Nursing.

(2) "Competency" means performing skillfully and proficiently the functions that are within the role of the licensee; and, demonstrating the interrelationship of essential knowledge, judgment, and skills.

(3) "Health team" means a group of health care providers which may, in addition to health care practitioners, include the client, family, and significant others.

~~(4)~~ (4) "Nursing procedures" means those nursing actions selected and performed in the delivery of safe and effective patient/client care.

(5) "Nursing process" means the traditional systematic method nurses use when they provide:

(a) nursing care including assessment;

(b) nursing analysis;

(c) planning;

(d) nursing intervention; and

(e) evaluation.

(6) "Practical nurse" means the same thing as "licensed practical nurse", "PN", and "LPN" unless the context of the rule dictates otherwise. The practice of practical nursing is defined at 37-8-102, MCA.

(7) "PRN medication" ("pro re nata", Latin for "according as circumstances may require") means medication taken as necessary for the specific reason stated in the medication order, together with specific instructions for its use.

(8) "Registered nurse" means the same thing as "RN" and "professional nurse" unless the context of the rule dictates otherwise. The practice of professional nursing is defined at 37-8-102, MCA.

(9) "Routine medication" means medication taken regularly at the same time each day using the same route, or on the same days of the week, at the same time, using the same route.

(10) "Standard" means an authoritative statement by which the board can judge the quality of nursing education or practice.

(2) (11) "Standardized procedures" means routinely executed nursing actions for which there is an established level of knowledge and skill.

(12) "Strategy of care" means the goal-oriented plan developed to assist individuals or groups to achieve optimum health potential. This includes initiating and maintaining comfort measures, promoting and supporting human functions and responses, establishing an environment conducive to well being, providing health counseling and teaching, and collaborating on certain aspects of the medical regimen, including but not limited to, the administration of medications and treatments.

(3) (13) "Supervision" means provision of guidance by a qualified nurse or a person specified in 37-8-102, MCA, for the accomplishment of a nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing the task or activity.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-101, 37-8-102, 37-8-202, 37-8-422, MCA

REASON: It is reasonable and necessary to amend this rule to incorporate definitions from ARM 8.32.1401 that are applicable to all license types. By consolidating these definition rules, this amendment will provide clarity and make the definitions more user-friendly. The substance of the definitions from ARM 8.32.1401 is not being substantially changed, but small format changes are being modified to make all definitions consistent. ARM 8.32.1401 is proposed to be repealed in this notice.

The board has determined it is also reasonable and necessary to indicate the various identifiers for the license types of practical nursing and professional nursing. These references to these license types are commonly used, and the board feels it is necessary to identify that the references can be used interchangeably unless the context dictates otherwise.

8.32.428 (24.159.402) FEE ABATEMENT (1) The board of nursing adopts and incorporates by reference the September 24, 2004, fee abatement rule of the Department of Labor and Industry found at ARM 24.101.301.

(2) remains the same.

AUTH: 37-1-131, MCA

IMP: 17-2-302, 17-2-303, 37-1-134, MCA

8.32.601 (24.159.406) BOARD OBJECTIVES (1) The board of nursing shall function in the field of nursing as an administrative and supervisory agency within the governmental structure and shall:

- (a) implement the Nursing Practice Act by promulgating and enforcing rules and regulations to protect the public health, safety, and welfare;
- (b) prescribe standards for the evaluation of nursing education programs preparing persons for registration and licensure and approve those ~~nursing education~~ programs which have achieved and are maintaining these minimum standards;
- (c) assure safe standards of nursing practice through examination, licensure, and renewal of licenses of qualified applicants including endorsement of qualified registered and practical nurses from other jurisdictions;
- (d) through (f) remain the same.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule for clarity and syntax. It is proper to describe the type of program in the first instance rather than the second.

8.32.604 (24.159.407) MEETINGS OF THE BOARD (1) The annual meeting shall be held in the first quarter of the state fiscal year.

(2) Special meetings may be called by the president or at the written request of two board members. The reason for the special meeting shall be stated in the call.

(3) remains the same.

(4) ~~The agenda for board members to review shall be mailed to board members~~ Board members shall receive a meeting agenda and other information as applicable to review prior to each meeting.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule for clarity and syntax.

8.32.605 (24.159.409) DUTIES OF THE PRESIDENT OF THE BOARD

(1) remains the same.

(a) preside at all board meetings. In the event that the president is absent from ~~any a board~~ meeting, a president pro-tem shall be elected by members present at the meeting to serve for that meeting;

(b) remains the same.

(c) serve as the official representative of the board in its contacts with governmental, civic, business, and other organizations;

(d) and (e) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule to clarify that the president does not preside over committee meetings.

8.32.606 (24.159.410) DUTIES OF MEMBERS OF THE BOARD (1) The members acting as the board of nursing shall:

- (a) transact the general business of the board of nursing;
- (b) through (e) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1102 (24.159.601) STATEMENT OF PURPOSE FOR NURSING EDUCATION PROGRAM STANDARDS (1) These requirements provide a basis for the board to evaluate and approve nursing education programs and a format for nursing faculty and administrators to plan, implement, and evaluate nursing education for the following professional and practical nursing programs:

- (a) through (3) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1109 (24.159.605) ORGANIZATION AND ADMINISTRATION OF THE NURSING EDUCATION PROGRAMS (1) and (2) remain the same.

(a) Cooperative agreements between nursing programs and clinical facilities must be current, in writing, and signed by the responsible officers of each, and must include the following:

- (i) through (4) remain the same.

(5) Faculty and administration should participate in governance of the parent institution and policy development, including but not limited to, matters related to appeals and grievances. Policies governing faculty employment, promotion, and tenure must be in writing and consistent with those of the parent institution.

- (6) remains the same.

(a) admission, readmission, progression, dismissal, and graduation requirements;

- (b) through (8) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1116 (24.159.606) EDUCATIONAL FACILITIES FOR NURSING EDUCATION PROGRAMS (1) remains the same.

(2) Physical facilities must be designed to meet the educational and clinical needs of the program. Classrooms, laboratories, offices, and conference rooms must be of adequate size, number, and type according to the number of students and purposes for which these areas are to be used.

(3) and (3)(a) remain the same.

(b) adequate and convenient access by students and faculty to library/ and information resources, including sufficient titles, periodicals, computer data bases, and similar media resources.

(4) through (4)(b) remain the same.

(5) Each program director, with faculty input, shall determine appropriate student- to instructor ratios in the clinical setting. The ratio must provide safe, accessible, and appropriate supervision based on client health status, care setting, and student level of preparation. The ratio must not exceed ~~40~~ ten students to one instructor.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1108 (24.159.609) PROGRAM EVALUATION (1) through (2)(b) remain the same.

(c) policies governing recruitment, selection, progression, graduation, and other matters affecting education and health of students;

(d) and (e) remain the same.

(f) the adequacy of educational facilities including classrooms, technology, skills laboratories, and library/ and information resources; and

(g) and (3) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.806 (24.159.612) PROGRAM ANNUAL REPORT (1) through (2)(c)(i) remain the same.

(ii) policies or practices used for selection, progression, and graduation of students;

(iii) remains the same.

(iv) curriculum plan, course descriptions, resources, and facilities;

(d) through (f) remain the same.

(g) current enrollment by course, including student- to teacher ratios for clinical experiences;

(h) through (l) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, 37-8-302, MCA

8.32.1118 (24.159.615) RECOGNIZED ACCREDITATION BODIES (1) The board recognizes the following national accreditation bodies for purposes of approving nursing education programs:

(a) and (b) remain the same.

(2) The board recognizes the following regional accreditation body for purposes of approving nursing education programs:

(a) remains the same.

AUTH: 37-8-202, 37-8-301, MCA  
IMP: 37-8-301, 37-8-302, MCA

**REASON:** It is reasonable and necessary to amend this rule to identify why the board recognizes accreditation bodies. This amendment is proposed in order to clarify the rule and put it in context with the nursing education programs.

8.32.801 (24.159.625) APPLICATION FEASIBILITY STUDY FOR INITIAL APPROVAL OF NURSING PROGRAM (1) through (2)(a) remain the same.

(b) purpose and classification of program;

(c) availability of qualified faculty;

(d) budgeted faculty positions;

(e) remains the same.

(f) evidence of financial resources adequate for the planning, implementation, and continuation of the program;

(g) through (i) remain the same.

(3) When the data submitted in the feasibility study are reviewed, the board may request additional information and may conduct a site visit to evaluate the information submitted. ~~The board will review the feasibility study at their January or October board meeting.~~

(4) through (5)(b) remain the same.

(c) For programs under the jurisdiction of the Montana Board of Regents, the board will make a recommendation to the Montana Board of Regents concerning the quality of the proposed program's curriculum, faculty, and clinical experiences and will make its final decision on approval only after receiving notification of the program's approval from the Board of Regents. The program may then admit students who shall be eligible upon completion of the program to take the licensing examination.

(6) and (7) remain the same.

(8) Following graduation of the first class, a self-study report of compliance with ~~ARM Title 8, chapter 32, subchapter 11~~ Title 24, chapter 159, subchapter 6, shall be submitted and a site visit may be made.

AUTH: 37-8-202, 37-8-301, MCA  
IMP: 37-8-202, 37-8-301, 37-8-302, MCA

**REASON:** It is reasonable and necessary to amend the catchphrase of this rule to more accurately indicate the content of the rule substance. Also, the rule is amended to remove the specific time identifier for board review of feasibility studies, thereby removing a potential restriction on board process, and to identify the correct rules implied by the internal reference in (8). Normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, subchapter 6 will include applicable rules other than just rules from subchapter 11. Therefore, this is a substantive change and must be identified as an amendment to the rule.



8.32.802 (24.159.630) CONTINUED APPROVAL OF SCHOOLS SITE VISITS AND CONTINUED APPROVAL OF SCHOOLS (1) through (8)(a) remain the same.

(b) The second consecutive year a program's average pass rate is 40 ~~ten~~ percentage points or more below the national average, the program will be placed on conditional ~~approval~~ status by the board. The program must submit to the board a written plan to improve the pass rate.

(c) and (d) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-8-301, 37-8-302, MCA

REASON: It is reasonable and necessary to amend this rule to correctly identify the consequence for failing to meet the national average by using the correct terminology. The board can put a deficient program on conditional or approval status. This amendment remedies the use of an incorrect word.

8.32.807 (24.159.635) REQUIREMENTS FOR SPECIAL REPORTS ON CHANGES AFFECTING PROGRAM INCLUDING PROGRAM EXPANSION

(1) remains the same.

(a) changes in legal status, control, ownership, or resources of the institution;  
(b) through (f) remain the same.

(i) an increase in the number of students served by a program that equals or exceeds the numerator in the student/ to faculty ratio requirements for clinical settings set by the board and national nursing accrediting agency standards; and

(ii) through (10) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, 37-8-302, MCA

8.32.808 (24.159.640) CHANGE IN APPROVAL STATUS (1) through (6) remain the same.

(7) A program on conditional ~~approval~~ status cannot be considered for any type of program expansion.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, 37-8-302, MCA

REASON: It is reasonable and necessary to amend this rule to use the correct terminology. The board can put a deficient program on conditional or approval status. This amendment remedies the use of an incorrect word.

8.32.1110 (24.159.650) NURSING EDUCATION PROGRAM DIRECTOR

(1) through (2)(a) remain the same.

(3) The director of the associate of science degree RN program shall possess a master's degree in nursing or public health with a major in nursing, from a

nationally recognized accredited program, with preparation in education and administration.

(4) and (4)(a) remain the same.

(b) a master's degree with a major in nursing or a minimum of a baccalaureate degree in nursing, supplemented by courses in curriculum development, principles and methods of teaching, and measurement and evaluation;

(c) through (5) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1111 (24.159.655) NURSING EDUCATION FACULTY

RESPONSIBILITY (1) through (6) remain the same.

(a) planning, implementing, and evaluating learning experiences;

(b) through (d) remain the same.

(e) providing opportunity for creative student activities that contribute to positive changes in nursing, nursing education, or health care;

(f) providing service to the parent institution, nursing program, profession, and community; and

(g) through (9) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1113 (24.159.662) FACULTY - FOR PRACTICAL NURSE NURSING EDUCATION PROGRAMS (1) All nursing faculty, including part-time, shall hold at least a baccalaureate in nursing or a master's degree from a nationally accredited program supplemented by courses in curriculum development, principles and methods of teaching, and measurement and evaluation.

(2) through (4) remain the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1119 (24.159.666) USE OF CLINICAL RESOURCE REGISTERED NURSES (CRRNS) IN NURSING EDUCATION PROGRAMS (1) A clinical resource registered nurse (CRRN) is an RN with an unencumbered Montana nursing license who provides supervision, demonstration, and evaluation of direct patient care in a clinical or laboratory setting to students enrolled in a nursing education program.

(2) remains the same.

(3) Although a CRRN is not considered to be a faculty member of a program, a CRRN may be used by the program to maintain a 10: to 1 student-to-instructor supervision ratio in a clinical or laboratory setting.

(4) remains the same.

(a) ensuring safe, accessible, and appropriate supervision based on client health status, care setting, course objectives, and student level of preparation; and

(b) remains the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, 37-8-302, MCA

8.32.1104 (24.159.670) CURRICULUM - GOALS AND GENERAL REQUIREMENTS FOR PROFESSIONAL NURSING EDUCATION: IN BACCALAUREATE AND ASSOCIATE DEGREE PROGRAMS (1) remains the same.

(2) The faculty shall develop, review, and update the curriculum on an ongoing basis. The curriculum for the professional nursing educational programs must meet the following general criteria:

(a) reflect the philosophy, organizational framework, purpose, and educational objectives of the nursing education program and be consistent with the laws governing the practice of professional nursing;

(b) through (f) remain the same.

(3) The curriculum shall include concepts related to the promotion, maintenance, and restoration of the health of clients across the lifespan. ~~Board~~ Content areas and learning activities include, but are not limited to:

(a) through (d) remain the same.

(4) The curriculum shall include non-nursing courses that provide knowledge in relevant physical sciences, social sciences, and arts and humanities.

(a) through (b)(vi) remain the same.

(5) The length, organization, and placement of courses must be consistent with the philosophy and objectives of the program. Course organization and sequencing shall assure that prerequisite concepts and understanding are used and further developed as the program progresses. Course instruction should focus on understanding and application of knowledge, and extend throughout the program.

(6) remains the same.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

8.32.1105 (24.159.674) CURRICULUM - GOALS SPECIFIC TO BACCALAUREATE DEGREE REGISTERED NURSE (1) The baccalaureate degree nurse graduate shall be prepared to plan, deliver, and coordinate care for clients including individuals, families, and communities in a variety of structured and unstructured settings with an emphasis on care management, complex care situations, and clients with unpredictable outcomes. The baccalaureate degree nurse functions as a change agent in the health care system and utilizes nursing research findings in the delivery of care. ~~(Adapted from America Association of Colleges of Nursing Position Statement: Nursing Education's Agenda for the 21st Century.)~~

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

REASON: It is reasonable and necessary to amend ARM 8.32.1105 (24.159.674) to delete unnecessary information.

8.32.1106 (24.159.677) CURRICULUM - GOALS SPECIFIC TO ASSOCIATE DEGREE REGISTERED NURSE (1) The role of the associate degree nurse graduate is to provide direct care to clients, individuals, or groups, in a variety of structured settings with clear policies and procedures. Within this context, the curriculum must relate to the roles of the provider of the associate degree nurse as provider of care, manager of care, and member of the discipline of nursing. (~~Adapted from the National League for Nursing, Educational Outcomes of Associate Degree Nursing Programs: Roles and Competencies, 1990.~~)

- (a) through (a)(iii) remain the same.
  - (iv) effective communication with clients, families, and health team members;
  - (v) remains the same.
  - (vi) collaboration with members of the health care team; and
  - (vii) through (c)(iii) remain the same.
  - (iv) political, economic, and societal forces affecting nursing practice and health care delivery; and
  - (v) remains the same.
- (2) Non-nursing courses must provide graduates with basic knowledge in the relevant physical sciences, social sciences, and arts and humanities.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

REASON: It is reasonable and necessary to amend ARM 8.32.1106 (24.159.677) to delete unnecessary information and to correct punctuation within the rule. Also, (1)(a)(vi) is proposed to be amended to make the reference to health team consistent throughout the rules and to use the language that has been defined.

8.32.1107 (24.159.680) CURRICULUM GOALS AND REQUIREMENTS FOR PRACTICAL NURSING EDUCATION PROGRAMS (1) The primary role of the practical nurse graduate is to provide nursing care for clients in structured health care settings who are experiencing common, well-defined health problems. In their roles as members of the discipline of nursing, practical nurses actively participate in and subscribe to the legal and ethical tenets of the discipline. The practical nurse functions under supervision as set forth in 37-8-102, MCA. (~~Adapted from National League for Nursing, Council of Practical Nursing Programs, 1989.~~)

- (2) through (2)(d) remain the same.
- (3) The curriculum must provide for progressive development of knowledge, skills, and professional conduct.
- (4) The choice and placement of courses, selection of learning activities, and the organization of these must provide continuity, sequence, and integration in the total curriculum.
- (5) Learning experiences must be based on written behavioral objectives which include demonstration of knowledge, comprehension, and application.
- (6) through (7)(g) remain the same.

(h) delivery of long-term care.

(8) Content of the course work related to the role of charge nurse shall be developed in recognition of the role of charge nurse as supervisor of care provided as well as care needed, assessment of clients, notifying the professional nurse supervisor, notifying physicians, and the administration of medications and treatments.

(9) and (9)(a) remain the same.

(b) the following types of intravenous solutions [~~of the following types~~]:

(i) isotonic;

(ii) hypotonic; and

(iii) hypertonic; ;

(c) through (i) remain the same.

(10) Content of the courses shall be developed in recognition of the role of the ~~licensed~~ practical nurse to perform intravenous therapy in accordance with the standards set forth at ARM 8.32.1409.

AUTH: 37-8-202, 37-8-301, MCA

IMP: 37-8-301, MCA

REASON: It is reasonable and necessary to amend ARM 8.32.1107 (24.159.680) to delete unnecessary information, correct punctuation, and for clarity.

8.32.427 (24.159.905) GENERAL REQUIREMENTS FOR MEDICATION AIDE TRAINING PROGRAMS AND INSTRUCTORS (1) through (1)(f) remain the same.

(g) adverse reactions, side effects, and allergies to medications;

(h) through (5)(a) remain the same.

(b) have at least two years of nursing experience in the last five years, one year of which shall be in long-term care, or home health, hospice, assisted living, or other community based setting; or, be a state certified nursing assistant instructor; and

(c) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-8-101, 37-8-202, 37-8-422, MCA

8.32.426 (24.159.910) GENERAL REQUIREMENTS FOR LICENSURE AS MEDICATION AIDE (1) The applicant for licensure may apply to take the Montana medication aide exam if the applicant:

(a) ~~the applicant~~ has completed a board approved medication aide training program as outlined in these rules; or

(b) ~~the applicant~~ holds an unencumbered certification or license in another state or U.S. jurisdiction to administer medications.

(2) through (6) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-101, 37-8-202, MCA

8.32.1414 (24.159.915) STANDARDS RELATED TO THE MEDICATION AIDE'S RESPONSIBILITIES AS A MEMBER OF HEALTH TEAM (1) through

(1)(c)(ii) remain the same.

(d) administer only PRN and routine medications as defined in ARM

~~8.32.1404~~ 8.32.415;

(e) administer medications only by allowable routes as defined in ARM

~~8.32.1404~~ [NEW RULE I], except:

(i) insulin may be subcutaneously injected from a pre-filled, labeled, unit dose syringe; and

(f) through (f)(ii) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-8-202, 37-8-422, MCA

8.32.1405 (24.159.1003) PURPOSE OF STANDARDS OF NURSING PRACTICE FOR THE LICENSED PRACTICAL NURSE (1) The purpose of the standards is to:

~~(1)~~ (a) establish minimal acceptable levels of safe and effective practice for the ~~licensed~~ practical nurse; and

~~(2)~~ (b) serve as a guide for the board to evaluate safe and effective nursing care.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule to conform to administrative rule format requirements and make the rule consistent with other rules when describing practice levels.

8.32.1406 (24.159.1004) STANDARDS RELATED TO THE LICENSED PRACTICAL NURSE'S CONTRIBUTION TO THE NURSING PROCESS (1) The ~~licensed~~ practical nurse shall:

~~(1)~~ contribute to the nursing assessment by:

(a) collecting, reporting, and recording objective and subjective data in an accurate and timely manner. Data collection includes;

(i) observation about the condition or change in condition of the client; and

(ii) remains the same.

(2) The practical nurse shall participate in the development of the strategy of care by:

(a) and (b) remain the same.

(c) contributing to setting realistic and measurable goals; and

(d) assisting in the identification of measures to maintain comfort, support human functions and responses, maintain an environment conducive to well-being, and provide health teaching.

(3) The practical nurse shall participate in the implementation of the strategy of care by:

- (a) providing care for clients under the supervision of a registered nurse, a physician, dentist, osteopath, or podiatrist;
- (b) remains the same.
- (c) documenting nursing interventions and responses to care; and
- (d) remains the same.
- (4) The practical nurse shall contribute to the evaluation of the responses of individuals or groups to nursing interventions;
- ~~(a)~~ (5) Evaluation data shall be documented and communicated to appropriate members of the health care team;
- ~~(b)~~ (6) The licensed practical nurse shall contribute to the modification of the strategy of care on the basis of the evaluation.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1407 (24.159.1005) STANDARDS RELATING RELATED TO THE LICENSED PRACTICAL NURSE'S RESPONSIBILITIES AS A MEMBER OF THE HEALTH TEAM (1) The licensed practical nurse shall:

- (1) (a) have knowledge of the statutes and ~~regulations~~ rules governing nursing and function within the legal boundaries of practical nursing practice;
- (2) (b) accept responsibility for individual nursing actions and competence;
- (3) (c) function under the supervision of a registered nurse, a physician, dentist, osteopath, or podiatrist;
- (4) (d) consult with registered nurses and/or other health team members and seek guidance as necessary;
- (5) (e) obtain instruction and supervision as necessary when implementing nursing techniques or practices;
- (6) (f) function as a member of the health team;
- (7) (g) contribute to the formulation, interpretation, implementation, and evaluation of the objectives and policies related to practical nursing practice within the employment setting;
- (8) (h) participate in the evaluation of nursing through peer review;
- (9) (i) report unsafe nursing practice to the board and unsafe practice conditions to recognized authorities;
- (10) (j) report the practice of nursing by unlicensed individuals to the board;
- (11) (k) conduct practice without discrimination on the basis of age, race, religion, sex, sexual preference, national origin, or handicap;
- (12) (l) respect the dignity and rights of clients regardless of social and or economic status, personal attributes, or nature of health problems;
- (13) (m) respect the client's right to privacy by protecting confidential information, unless obligated by law to disclose such information; and
- (14) (n) respect the property of clients, family, significant others, and the employer.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1409A (24.159.1006) STANDARDS RELATED TO THE LICENSED PRACTICAL NURSE'S ROLE IN COSMETIC PROCEDURES (1) A licensed practical nurse who has the proper training and on-going competency may perform the following tasks and procedures only under the on-site supervision of a physician:  
(a) through (g)(v) remain the same.

AUTH: 37-8-202, MCA  
IMP: ~~37-2-102~~, 37-8-102, MCA

REASON: It is reasonable and necessary to amend the implementing cite to correct a typographical error.

8.32.1408 (24.159.1010) STANDARDS RELATING RELATED TO THE LICENSED PRACTICAL NURSE'S ROLE IN INTRAVENOUS (IV) THERAPY  
(1) through (4)(k) remain the same.  
(l) discontinue peripheral IVs except for PICC line;  
(m) through (6)(d) remain the same.

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-202, MCA

8.32.1409 (24.159.1011) PROHIBITED IV THERAPIES (1) through (1)(b)(xiii) remain the same.  
(xiv) hypertonic solutions, except as in ARM 8.32.1408(3);  
(xv) and (xvi) remain the same.  
(xvii) thrombolytic agents; ;  
(c) through (d) remain the same.

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-202, MCA

8.32.408 (24.159.1021) TEMPORARY PRACTICE PERMIT (1) Graduates of approved professional or practical United States nursing education programs may be granted a temporary permit to practice professional or practical nursing, respectively, practical nursing provided that:

(a) application for Montana licensure, supporting credentials, and fee have been submitted and approved by the ~~executive director of the Montana~~ board of nursing; and

(b) remains the same.

(2) The temporary permit issued to a graduate who ~~fails~~ does not pass the exam referred to in (1)(b) becomes null, void, and invalid three days after the board mails notification to the graduate of the ~~said~~ exam result. Mailing is completed when ~~said~~ notification is deposited in the U.S. mail. The graduate shall immediately return the temporary permit to the board office upon receipt of the notice that ~~s/he~~ the graduate failed the exam referred to in (1)(b). Failure to do so is grounds for denial of a subsequent license application from the graduate and such other remedies as are provided by law.



(3) The temporary permit issued to a graduate who passes the exam referred to in (1)(b) remains valid until the license is granted or until two weeks after the board mails notification to the graduate of the ~~said~~ exam result, whichever occurs first. Mailing is completed when ~~said~~ notification is deposited in the U.S. mail.

(4) An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice ~~professional~~ or practical nursing provided the applicant has submitted a completed application as described in ARM ~~8.32.405(1)(a)~~ 24.159.1028 and that the initial screening by board staff shows no current discipline as identified in ARM ~~8.32.405(2)~~ 24.159.1028 in the last two years. The temporary permit will remain valid until a license is granted or until notice of proposal to deny license is served, whichever occurs first. In the event that neither contingency has occurred within 90 days of issuance of the temporary permit to the endorsement applicant, the temporary permit shall expire on the 90th day following its issuance unless an extension is granted by the board.

(5) Any practical nurse who is employed under a temporary practice permit shall function only under the supervision of a registered nurse, physician, dentist, osteopath, or podiatrist, who is on the premises where and when the permittee is working and is specifically assigned the responsibility of supervising the performance of the temporary practice permittee.

AUTH: 37-8-202, MCA

IMP: 37-1-305, 37-8-103, MCA

REASON: It is reasonable and necessary to amend this rule for the reasons stated in the general necessity statement and to modify internal references. Normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.405 is proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify that the intent of the reference is to be to the rule applicable to practical nurses only. This is a substantive change and must be identified as an amendment to the rule.

#### 8.32.401 (24.159.1022) GENERAL REQUIREMENTS FOR LICENSURE

(1) The requirements for licensure of ~~registered and~~ practical nurses in Montana include the provision that the applicant has written a state board test pool examination/ or national council licensing examination (NCLEX) in a state of the United States.

AUTH: 37-8-202, MCA

IMP: 37-8-406, 37-8-416, MCA

#### 8.32.501 (24.159.1023) GROUNDS FOR DENIAL OF A LICENSE

(1) through (1)(b) remain the same.

(c) fraud or misrepresentation in association with the examination application, licensure application, or licensure examination;

(d) and (e) remain the same.

AUTH: 37-1-136, 37-8-202, MCA  
IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.402 (24.159.1024) LICENSURE BY EXAMINATION REQUIREMENTS

(1) The board shall administer the national council licensing examinations for ~~registered nurse licensure and~~ practical nurse licensure by computerized adaptive testing (CAT). Each examination differs from any other administered examination.

(2) The executive director is authorized to negotiate the contract ~~with the national council of state boards of nursing, inc.~~ for licensing examination services.

(3) All candidates desiring to take the licensing examination for ~~registered nursing or~~ practical nursing shall make application for licensure to the board on a form provided by the board and shall make application for the examination to the national council licensing examinations (NCLEX) on a form distributed by the board as provided by the National Council of State Boards of Nursing.

(4) and (5) remain the same.

(6) A passing score on the appropriate NCLEX examination shall be required for licensure as a ~~professional or~~ practical nurse. The National Council of State Boards of Nursing's panel of content experts determines the passing score.

(7) and (8) remain the same.

(9) Candidates who pass shall receive ~~the results of the examination and~~ a license to practice as a ~~registered/~~ practical nurse.

(10) through (13) remain the same.

AUTH: 37-8-202, MCA  
IMP: 37-1-131, 37-8-406, 37-8-416, MCA

REASON: It is reasonable and necessary to amend this rule to remove references to registered nurses since this version of the rule is applicable to practical nurses. It is also necessary to amend this rule to remove the specific vendor name listed in (2). In the event the contract is awarded to a different vendor, the rule will not need to be amended, thereby avoiding a potential conflict.

8.32.404 (24.159.1025) ~~RE-EXAMINATION-~~ PRACTICAL NURSE

REEXAMINATION (1) Candidates who ~~fail~~ do not pass the licensing examination will be permitted to retake the examination one time after 45 days from the first examination. ~~Effective October 1, 2000, a candidate may retake the examination one time.~~

(2) If a candidate does not pass the retake, the candidate will be required to present a plan of study to the board before becoming eligible to take the examination again.

(3) A candidate may take the test a maximum of five times in three years.

(a) The individual will be required to complete a school of nursing program before being able to test a sixth time.

AUTH: 37-1-131, 37-8-202, 37-8-406, MCA  
IMP: 37-8-202, 37-8-416, MCA

8.32.405 (24.159.1028) LICENSURE BY ENDORSEMENT

REQUIREMENTS (1) through (1)(a)(i) remain the same.

(ii) the application will be kept on file for one year. If the applicant fails to complete the application requirements for application licensure by endorsement within one year, a new application will be required;

(b) and (c) remain the same.

(d) verification and documentation of licensure status from all jurisdictions of licensure for preceding two years; and

~~(e) professional nurse applicants shall present evidence of having passed a licensure examination as follows:~~

~~(i) a passing score on a state-constructed licensure examination prior to the use of the state board test pool examination in the original state of licensure; or~~

~~(ii) 350 on each part of the state board test pool examination for registered nurses; or~~

~~(iii) a minimum scaled score of 1600 on a NCLEX-RN (national council licensure examination for registered nurses) examination taken prior to September, 1988; or~~

~~(iv) a passing score on a NCLEX-RN examination taken after September, 1988;~~

(f) ~~(e)~~ practical nurse applicants shall present evidence of having passed a licensure examination as follows:

(i) remains the same.

~~(ii) (iii) a minimum scaled score of 350 on a NCLEX-PN (national council licensure examination for practical nurses) examination taken prior to September, 1988; or~~

~~(iii) (ii) a passing score on a NCLEX-PN examination taken after September, 1988; or~~

~~(g) (f)~~ the required fees for licensure by endorsement as specified in ~~subchapter 11~~ ARM 8.32.425; and

~~(h) (g)~~ if the applicant's education was obtained in a foreign country, the applicant must also meet the conditions of ~~ARM 8.32.429 and 8.32.430.~~

(2) remains the same.

(3) An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice ~~professional or~~ practical nursing pursuant to the provisions of ~~ARM 8.32.408(3)~~ 24.159.1021.

(4) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-304, MCA

REASON: It is reasonable and necessary to amend this rule to arrange sections listing the current requirements first in order to aid the user.

Also, is it reasonable and necessary to amend (1)(g) to delete the internal reference to ARM 8.32.429 that is applicable to registered nurses. Also, normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM

8.32.408 is proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify the intent of the reference in (3) is to be to the rule applicable to practical nurses only. This is a substantive change and must be identified as an amendment to the rule.

8.32.430 (24.159.1029) FOREIGN EDUCATED APPLICANTS FOR PRACTICAL NURSE LICENSURE REQUIREMENTS (1) and (2) remain the same.

(a) fulfill the requirements of ARM ~~8.32.402~~ 24.159.1024;

(b) through (3) remain the same.

(a) fulfill the requirements of ARM ~~8.32.405~~ 24.1159.1028;

(b) through (d) remain the same.

(4) The provisions of (2)(d) and (3)(d) do not apply if the foreign educated applicant graduated from a nursing program at a college, university, or professional nurses' training school in one of the following countries:

(a) through (g) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-8-101, 37-8-405, 37-8-415, MCA

REASON: It is reasonable and necessary to amend this rule to modify internal references. Normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.402 and 8.32.405 are proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify that the intent of the reference is to be to the rule applicable to practical nurses only. This is a substantive change and must be identified as an amendment to the rule.

8.32.411 (24.159.1037) RENEWALS (1) In November of each even-numbered year, the board of nursing shall mail an application for renewal of license to all currently licensed, ~~registered nurses and licensed~~ practical nurses. The licensee must fill out the application and return it to the board ~~BEFORE~~ prior to January 1 of the next year, together with the renewal fee. Upon receiving the renewal application and fee, the board shall issue a certificate of renewal for the current year beginning January 1 of the odd-numbered year, and expiring December 31 of the even-numbered year. If the renewal application is postmarked ~~subsequent to~~ after December 31 of the renewal year, it is subject to a late fee of two times the renewal fee.

(2) A license shall be renewed by January 1 of the odd-numbered years. Any person practicing nursing during the time a license has elapsed lapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.

~~(3) In November of even-numbered years, the board shall mail an application for renewal of license to all currently licensed advanced practice registered nurses (APRNs). The licensee shall complete the application and return it, the proof of continuing education required by ARM 8.32.411, and the renewal fee to the board before January 1. Upon receiving the completed renewal application and fee, the~~

~~board shall issue a certificate of renewal for the current two-year period beginning January 1 and expiring December 31. If the renewal application is postmarked subsequent to December 31, it is subject to a late fee of two times the renewal fee. Any person practicing during the time a license has lapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.~~

~~(a) The renewal application includes a declaration made under penalty of perjury of the laws of Montana. The declaration must include:~~

~~(i) a description of how the individual will implement the plan of quality assurance, including identification of the reviewer(s);~~

~~(ii) an acknowledgement of the scope of the individual's practice;~~

~~(iii) a description of the continuing education units earned or applicable to the renewal period;~~

~~(iv) the location of practice site(s); and~~

~~(v) the individual's current DEA registration number, if applicable.~~

~~(4) All APRNs shall complete 20 continuing education units per year, or 40 units per renewal period, pertaining to the areas of the individual's certification. APRNs who practice in a subspecialty setting shall complete the majority of the required continuing education credits in the area of the individual's subspecialty.~~

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-134, 37-8-202, ~~37-8-431~~, MCA

8.32.412 (24.159.1038) INACTIVE STATUS (1) A licensed practical nurse who wishes to retain a license but who will not be practicing nursing may obtain an inactive status license upon submission of an application and payment of the appropriate fee. An individual licensed on inactive status may not practice nursing during the period in which ~~he or she~~ the licensee remains on inactive status.

(2) An individual may not remain licensed on inactive status for longer than two years without re-establishing qualifications for licensure, including, but not limited to, passage of the licensing examination.

(3) An individual licensed A licensee on inactive status may convert his ~~or her~~ an inactive status license to active status by submission of an appropriate application and payment of the renewal fee for the current renewal period.

~~(4) An APRN must also hold a registered nurse license.~~

~~(5) An APRN may request inactive status if the APRN's RN license is either active or inactive.~~

~~(6) To reactivate an inactive APRN license, the APRN shall submit proof of 20 continuing education units obtained within the 12 month period preceding reactivation.~~

~~(a) If prescriptive authority is requested, an additional five continuing education units are required in pharmacology or pharmaceutical management.~~

AUTH: 37-1-131, 37-1-319, 37-8-202, MCA

IMP: ~~37-8-431~~, 37-1-131, 37-1-319, MCA

8.32.417 (24.159.1046) SUPERVISION OF PROBATIONARY LICENSES LICENSEES (1) Any practical nurse working pursuant to a probationary license must work under the direct supervision of another nurse or physician, as follows:

- ~~(a) The supervisor for an LPN on probation must be an RN, APRN, or physician with a current, unencumbered license;~~
- ~~(b) the supervisor for an RN on probation must be an RN, APRN or physician with a current, unencumbered license; and~~
- ~~(c) the supervisor for an APRN on probation must be an APRN or a physician with a current, unencumbered license.~~

AUTH: 37-1-136, 37-1-319, 37-8-202, MCA  
IMP: 37-1-136, 37-1-319, 37-8-202, MCA

8.32.502 (24.159.1052) LICENSEE PROBATION OR REPRIMAND OF A LICENSEE (1) A licensee may be placed on probation or reprimanded based on grounds specified in 37-1-316, MCA, or ARM 8.32.413(2).

AUTH: 37-1-136, 37-8-202, MCA  
IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.507 (24.159.1053) LICENSE REAPPLICATION CONSIDERATIONS OF REAPPLICATION FOR A LICENSE AFTER PREVIOUS DENIAL, REVOCATION, OR SUSPENSION (1) Reapplication for a license previously denied, revoked, or suspended must include evidence of rehabilitation, or elimination or cure of the conditions for denial, revocation, or suspension.

- (2) Evaluation of reapplication for a license denied ~~under section 37-8-441, MCA~~ will be based upon, but not limited to:
  - (a) through (c) remain the same.
  - (d) compliance with any condition the board may have stipulated as a prerequisite for reapplication; and/or
  - (e) and (f) remain the same.

AUTH: 37-8-202, MCA  
IMP: 37-1-136, 37-8-202, MCA

8.32.1402 (24.159.1203) PURPOSE OF STANDARDS OF NURSING PRACTICE FOR THE REGISTERED NURSE (1) The purpose of the standards is to:

- ~~(1) (a) to establish minimal acceptable levels of safe and effective practice for the registered nurse; and~~
- ~~(2) (b) to serve as a guide for the board to evaluate safe and effective nursing care.~~

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-202, MCA

8.32.1403 (24.159.1204) STANDARDS RELATED TO THE REGISTERED NURSE'S RESPONSIBILITY TO APPLY THE NURSING PROCESS (1) The registered nurse shall:

(1) conduct and document nursing assessments of the health status of individuals and groups by:

(a) collecting objective and subjective data from observations, examinations, interviews, and written records in an accurate and timely manner. The data includes, but is not limited to:

(i) biophysical, emotional, and mental status;

(ii) remains the same

(iii) cultural, spiritual, and socio-economic background;

(iv) through (ix) remain the same.

(x) environmental factors (e.g., physical, social, emotional, and ecological);

and

(xi) available and accessible human and material resources;

(b) sorting, selecting, reporting, and recording the data;

(c) validating, refining, and modifying the data by utilizing available resources, including interactions with the client, family, significant others, and health team members.

(2) The registered nurse shall establish and document nursing analysis which serves as the basis for the strategy of care;

(3) The registered nurse shall develop the strategy of care based upon data gathered in the assessment and conclusions drawn in the nursing analysis. This includes:

(a) and (b) remain the same.

(c) prescribing nursing intervention(s) based on the nursing analysis; and

(d) identifying measures to maintain comfort, to support human functions and positive responses, and to maintain an environment conducive to teaching to include appropriate usage of health care facilities.

(4) The registered nurse shall implement the strategy of care by:

(a) initiating nursing interventions through;

(i) and (ii) remain the same.

(iii) assigning and delegating care; and

(iv) ~~collaboration~~ collaborating and/or ~~referral~~ referring when appropriate;

(b) remains the same.

(c) documenting nursing interventions and responses to care to other members of the health team; and

(d) remains the same.

(5) The registered nurse shall evaluate the responses of individuals or groups to nursing interventions. Evaluation shall involve the client, family, significant others, and health team members.

(a) Evaluation data shall be documented and communicated to appropriate members of the health care team.

(b) Evaluation data shall be used as a basis for reassessing client health status, modifying nursing analysis, revising strategies of care, and prescribing changes in nursing interventions.

(c) remains the same.

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-202, MCA

8.32.1404 (24.159.1205) STANDARDS RELATED TO THE REGISTERED NURSE'S RESPONSIBILITIES AS A MEMBER OF THE NURSING PROFESSION

- (1) remains the same.
- (a) have knowledge of the statutes and ~~regulations~~ rules governing nursing and function within the legal boundaries of nursing practice;
- (b) through (f) remain the same.
- (g) contribute to the formulation, interpretation, implementation, and evaluation of the objectives and policies related to nursing practice within the employment setting;
- (h) remains the same.
- (i) report unsafe nursing practice to immediate supervisor and the board of ~~nursing~~, and unsafe practice conditions to any and all recognized federal, state, county, municipal, or private bodies organized with powers to regulate and enforce nursing practice conditions;
- (j) report practice of nursing by unlicensed individuals to the board of ~~nursing~~;
- (k) through (m) remain the same.
- (n) conduct practice without discrimination on the basis of age, race, religion, sex, sexual preference, national origin, or handicap;
- (o) respect the dignity and rights of clients regardless of social or economic status, personal attributes, or nature of health problems;
- (p) respect the client's right to privacy by protecting confidential information unless obligated by law to disclose the information; and
- (q) respect the property of clients, family, significant others, and the employer.

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-202, MCA

8.32.1409A (24.159.1206) STANDARDS RELATED TO THE LICENSED REGISTERED NURSE'S ROLE IN COSMETIC PROCEDURES (1) A licensed registered nurse who has the proper training and on-going competency may perform the following tasks and procedures only under the on-site supervision of a physician:

- (a) through (g)(v) remain the same.

AUTH: 37-8-202, MCA  
IMP: ~~37-2-102~~, 37-8-102, MCA

REASON: It is reasonable and necessary to amend the implementing cite to correct a typographical error.

8.32.408 (24.159.1221) TEMPORARY PRACTICE PERMIT (1) Graduates of approved professional or ~~practical~~ United States nursing education programs may



be granted a temporary permit to practice ~~professional or practical nursing, respectively,~~ registered nursing provided that:

(a) application for Montana licensure, supporting credentials, and fee have been submitted and approved by the ~~executive director of the Montana board of nursing;~~ and

(b) remains the same.

(2) The temporary permit issued to a graduate who ~~fails~~ does not pass the exam referred to in (1)(b) becomes null, void, and invalid three days after the board mails notification to the graduate of the ~~said~~ exam result. Mailing is completed when ~~said~~ notification is deposited in the U.S. mail. The graduate shall immediately return the temporary permit to the board office upon receipt of the notice that ~~s/he~~ the graduate failed the exam referred to in (1)(b). Failure to do so is grounds for denial of a subsequent license application from the graduate and such other remedies as are provided by law.

(3) The temporary permit issued to a graduate who passes the exam referred to in (1)(b) remains valid until the license is granted or until two weeks after the board mails notification to the graduate of the ~~said~~ exam result, whichever occurs first. Mailing is completed when ~~said~~ notification is deposited in the U.S. mail.

(4) An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice ~~professional or practical~~ registered nursing provided the applicant has submitted a completed application as described in ~~ARM 8.32.405(1)(a)~~ 24.159.1228 and that the initial screening by board staff shows no current discipline as identified in ~~ARM 8.32.405(2)~~ 24.159.1228 in the last two years. The temporary permit will remain valid until a license is granted or until notice of proposal to deny license is served, whichever occurs first. In the event that neither contingency has occurred within 90 days of issuance of the temporary permit to the endorsement applicant, the temporary permit shall expire on the 90th day following its issuance unless an extension is granted by the board.

(5) Any registered nurse who is employed under a temporary practice permit shall function only under the supervision of a registered nurse, physician, dentist, osteopath, or podiatrist, who is on the premises where and when the permittee is working and is specifically assigned the responsibility of supervising the performance of the temporary practice permittee.

AUTH: 37-8-202, MCA

IMP: 37-1-305, 37-8-103, MCA

REASON: It is reasonable and necessary to amend this rule for the reasons stated in the general necessity statement and to modify internal references. Normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.405 is proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify that the intent of the reference is to be to the rule applicable to registered nurses only. This is a substantive change and must be identified as an amendment to the rule.

8.32.401 (24.159.1222) GENERAL REQUIREMENTS FOR LICENSURE

(1) The requirements for licensure of registered and ~~practical~~ nurses in Montana include the provision that the applicant has written a state board test pool examination/ or national council licensing examination (NCLEX) in a state of the United States.

AUTH: 37-8-202, MCA

IMP: 37-8-406, 37-8-416, MCA

8.32.501 (24.159.1223) GROUNDS FOR DENIAL OF A LICENSE

(1) through (1)(b) remain the same.

(c) fraud or misrepresentation in association with the examination application, licensure application, or licensure examination;

(d) and (e) remain the same.

AUTH: 37-1-136, 37-8-202, MCA

IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.402 (24.159.1224) LICENSURE BY EXAMINATION REQUIREMENTS

(1) The board shall administer the national council licensing examinations for registered nurse licensure and ~~practical nurse licensure~~ by computerized adaptive testing (CAT). Each examination differs from any other administered examination.

(2) The executive director is authorized to negotiate the contract ~~with the national council of state boards of nursing, inc.~~ for licensing examination services.

(3) All candidates desiring to take the licensing examination for registered nursing or ~~practical nursing~~ shall make application for licensure to the board on a form provided by the board and shall make application for the examination to the national council licensing examinations (NCLEX) on a form distributed by the board as provided by the National Council of State Boards of Nursing.

(4) and (5) remain the same.

(6) A passing score on the appropriate NCLEX examination shall be required for licensure as a ~~professional or practical~~ registered nurse. The National Council of State Boards of Nursing's panel of content experts determines the passing score.

(7) and (8) remain the same.

(9) Candidates who pass shall receive ~~the results of the examination and a license to practice as a registered/practical nurse.~~

(10) through (13) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-1-131, 37-8-406, 37-8-416, MCA

REASON: It is reasonable and necessary to amend this rule to remove references to practical nurses since this version of the rule is applicable to registered nurses. It is also necessary to amend this rule to remove the specific vendor name listed in (2). In the event the contract is awarded to a different vendor, the rule will not need to be amended, thereby avoiding a potential conflict.

8.32.403 (24.159.1225) RE-EXAMINATION- REGISTERED NURSE REEXAMINATION (1) Candidates who ~~fail~~ do not pass the licensing examination will be permitted to retake the examination one time after 45 days from the first examination. ~~Effective October 1, 2000, a candidate may retake the examination one time.~~

(2) If a candidate does not pass the retake, the candidate will be required to present a plan of study to the board before becoming eligible to take the examination again.

(3) A candidate may take the test a maximum of five times in three years.

(a) The individual will be required to complete a school of nursing program before being able to test a sixth time.

AUTH: 37-1-131, 37-8-202, 37-8-406, MCA

IMP: 37-8-202, 37-8-406, MCA

8.32.405 (24.159.1228) LICENSURE BY ENDORSEMENT REQUIREMENTS (1) through (1)(a)(i) remain the same.

(ii) the application will be kept on file for one year. If the applicant fails to complete the application requirements for application licensure by endorsement within one year, a new application will be required;

(b) and (c) remain the same.

(d) verification and documentation of licensure status from all jurisdictions of licensure for preceding two years; ~~and~~

(e) ~~professional~~ registered nurse applicants shall present evidence of having passed a licensure examination as follows:

(i) and (ii) remain the same.

~~(iii)~~(iv) a minimum scaled score of 1600 on a NCLEX-RN (~~national council licensure examination for registered nurses~~) examination taken prior to September, 1988; ~~or~~

~~(iv)~~(iii) a passing score on a NCLEX-RN examination taken after September, 1988; ~~or~~

~~(f) practical nurse applicants shall present evidence of having passed a licensure examination as follows:~~

~~(i) 350 on the state board test pool examination for practical nurses; or~~

~~(ii) a minimum scaled score of 350 on a NCLEX-PN (national council licensure examination for practical nurses) examination taken prior to September, 1988; or~~

~~(iii) a passing score on a NCLEX-PN examination taken after September, 1988;~~

~~(g)~~(f) the required fees for licensure by endorsement as specified in subchapter 14 ARM 8.32.425; and

~~(h)~~(g) if the applicant's education was obtained in a foreign country, the applicant must also meet the conditions of ARM 8.32.429 ~~and 8.32.430~~.

(2) remains the same.

(3) An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice ~~professional or practical~~ registered nursing pursuant to the provisions of ARM 8.32.408(3) 24.159.1221.

(4) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-304, MCA

REASON: It is reasonable and necessary to amend this rule to arrange sections listing the current requirements first in order to aid the user.

Also, it is reasonable and necessary to amend (1)(g) to delete the internal reference to ARM 8.32.430 that is applicable to practical nurses. Also, normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.408 is proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify that the intent of the reference in (3) is to be to the rule applicable to registered nurses only. This is a substantive change and must be identified as an amendment to the rule.

8.32.429 (24.159.1229) FOREIGN EDUCATED APPLICANTS FOR REGISTERED NURSE LICENSURE REQUIREMENTS (1) and (2) remain the same.

(a) fulfill the requirements of ARM ~~8.32.402~~ 24.159.1224;

(b) through (3) remain the same.

(a) fulfill the requirements of ARM ~~8.32.405(1)(a), (b), and (c)~~ 24.159.1228;

(b) through (e) remain the same.

(4) The provisions of (2)(c)(i) and (3)(d) do not apply if the foreign educated applicant graduated from a nursing program at a college, university, or professional nurses' training school in one of the following countries:

(a) through (g) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-8-101, 37-8-405, 37-8-415, MCA

REASON: It is reasonable and necessary to amend this rule to modify internal references. Normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.402 and 8.32.405 are proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify the intent of the reference is to be to the rule applicable to registered nurses only. This is a substantive change and must be identified as an amendment to the rule.

8.32.411 (24.159.1237) RENEWALS (1) In November of each even-numbered year, the board of nursing shall mail an application for renewal of license to all currently licensed registered nurses ~~and licensed practical nurses~~. The licensee must fill out the application and return it to the board ~~BEFORE~~ prior to January 1 of the next year, together with the renewal fee. Upon receiving the renewal application and fee, the board shall issue a certificate of renewal for the

current year beginning January 1 of the odd-numbered year, and expiring December 31 of the even-numbered year. If the renewal application is postmarked ~~subsequent to~~ after December 31 of the renewal year, it is subject to a late fee of two times the renewal fee.

(2) A license shall be renewed by January 1 of the odd-numbered years. Any person practicing nursing during the time a license has ~~elapsed~~ lapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.

~~(3) In November of even-numbered years, the board shall mail an application for renewal of license to all currently licensed advanced practice registered nurses (APRNs). The licensee shall complete the application and return it, the proof of continuing education required by ARM 8.32.411, and the renewal fee to the board before January 1. Upon receiving the completed renewal application and fee, the board shall issue a certificate of renewal for the current two-year period beginning January 1 and expiring December 31. If the renewal application is postmarked subsequent to December 31, it is subject to a late fee of two times the renewal fee. Any person practicing during the time a license has lapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.~~

~~(a) The renewal application includes a declaration made under penalty of perjury of the laws of Montana. The declaration must include:~~

~~(i) a description of how the individual will implement the plan of quality assurance, including identification of the reviewer(s);~~

~~(ii) an acknowledgement of the scope of the individual's practice;~~

~~(iii) a description of the continuing education units earned or applicable to the renewal period;~~

~~(iv) the location of practice site(s); and~~

~~(v) the individual's current DEA registration number, if applicable.~~

~~(4) All APRNs shall complete 20 continuing education units per year, or 40 units per renewal period, pertaining to the areas of the individual's certification. APRNs who practice in a subspecialty setting shall complete the majority of the required continuing education credits in the area of the individual's subspecialty.~~

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-134, 37-8-202, ~~37-8-431~~, MCA

8.32.412 (24.159.1238) INACTIVE STATUS (1) A licensed registered nurse who wishes to retain a license but who will not be practicing nursing may obtain an inactive status license upon submission of an application and payment of the appropriate fee. An individual licensed on inactive status may not practice nursing during the period in which ~~he or she~~ the licensee remains on inactive status.

(2) An individual may not remain licensed on inactive status for longer than two years without re-establishing qualifications for licensure, including but not limited to, passage of the licensing examination.

(3) An individual licensed A licensee on inactive status may convert his ~~or her~~ an inactive status license to active status by submission of an appropriate application and payment of the renewal fee for the current renewal period.

~~(4) An APRN must also hold a registered nurse license.~~

~~(5) An APRN may request inactive status if the APRN's RN license is either active or inactive.~~

~~(6) To reactivate an inactive APRN license, the APRN shall submit proof of 20 continuing education units obtained within the 12 month period preceding reactivation.~~

~~(a) If prescriptive authority is requested, an additional five continuing education units are required in pharmacology or pharmaceutical management.~~

AUTH: 37-1-131, 37-1-319, 37-8-202, MCA

IMP: ~~37-8-434, 37-1-131, 37-1-319, MCA~~

8.32.417 (24.159.1246) SUPERVISION OF PROBATIONARY LICENSEES

LICENSEES (1) Any registered nurse working pursuant to a probationary license must work under the direct supervision of another nurse or physician, ~~as follows:~~

~~(a) the supervisor for an LPN on probation must be an RN, APRN or physician with a current, unencumbered license;~~

~~(b) ~~the~~ supervisor for an RN on probation must be an RN, APRN, or physician with a current, unencumbered license; and~~

~~(c) the supervisor for an APRN on probation must be an APRN or a physician with a current, unencumbered license.~~

AUTH: 37-1-136, 37-1-319, 37-8-202, MCA

IMP: 37-1-136, 37-1-319, 37-8-202, MCA

8.32.502 (24.159.1252) LICENSEE PROBATION OR REPRIMAND OF A

LICENSEE (1) A licensee may be placed on probation or reprimanded based on grounds specified in 37-1-316, MCA, or ARM 8.32.413~~(2)~~.

AUTH: 37-1-136, 37-8-202, MCA

IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.507 (24.159.1253) LICENSE REAPPLICATION CONSIDERATIONS OF REAPPLICATION FOR A LICENSE AFTER PREVIOUS DENIAL,

REVOCATION, OR SUSPENSION (1) Reapplication for a license previously denied, revoked, or suspended must include evidence of rehabilitation, or elimination or cure of the conditions for denial, revocation, or suspension.

(2) Evaluation of reapplication for a license denied ~~under section 37-8-441, MCA~~ will be based upon, but not limited to:

(a) through (c) remain the same.

(d) compliance with any condition the board may have stipulated as a prerequisite for reapplication; and/or

(e) and (f) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-1-136, 37-8-202, MCA

8.32.1502 (24.159.1401) DEFINITIONS The following definitions apply in and for this subchapter.

(1) "Accrediting organization" ~~is~~ means that professional organization which establishes standards and criteria for continuing education programs approved by the board of nursing.

(2) "Advanced practice registered nurse" or "APRN" ~~is~~ means a registered nurse recognized by the board to practice as an advanced practice registered nurse pursuant to 37-8-202, MCA, and ARM 8.32.305.

(a) and (b) remain the same.

(3) "Certifying body" ~~is~~ means a national certifying organization which uses psychometrically sound examinations to examine and validate competency of APRNs and which has been approved by the board of nursing as a certifying agency for APRN recognition.

(4) "Committee" ~~refers to~~ means the APRN committee, as established in ARM 8.32.1503.

(5) "Continuing education" ~~is~~ means that education either provided or approved by an academic institution of higher learning or a recognized certifying body. One continuing education unit equals 50 minutes of instruction.

(6) remains the same.

(7) "Drug" ~~is~~ means a substance defined by 37-7-101, MCA.

~~(9) (8) "Peer" means a licensed independent practitioner whose credentials and practice encompass the APRN's scope and setting of practice. If the APRN has prescriptive authority, the peer shall also have prescriptive authority.~~

(9) "Peer review" means the process of evaluating the practice of nursing, conducted by other nurses with similar qualifications.

(10) remains the same.

(11) "Prescribing" means specifying nursing intervention(s) intended to implement the defined strategy of care. This includes the nursing behaviors that nurses shall perform when delivering nursing care, though not necessarily sequentially or all in each given situation:

(a) assessment;

(b) nursing analysis;

(c) planning;

(d) nursing intervention; and

(e) evaluation.

~~(8)(12) "Prescription" is~~ means an order for a drug, as defined by 37-7-101, MCA, or any medicine, devices, or treatments, including controlled substances listed in schedule II-V, as defined by federal law in the Code of Federal Regulations (CFR), Title 21, section 1306.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule to insert the definitions of peer review and prescribing from ARM 8.32.1401 into this rule. The board has determined that these definitions are applicable to APRNs only and should therefore be in the APRN subchapter. It is further amended to put the existing definitions into

alphabetical order for ease in use and to conform to current ARM standards for definition rules.

8.32.1410 (24.159.1403) PURPOSE OF STANDARDS OF PRACTICE FOR THE ADVANCED PRACTICE REGISTERED NURSE (1) remains the same.

- (a) establish minimal acceptable levels of safe and effective practice for the APRN; and
- (b) remains the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1411 (24.159.1404) STANDARDS RELATED TO THE ADVANCED PRACTICE REGISTERED NURSE'S RESPONSIBILITY TO APPLY THE NURSING PROCESS (1) through (1)(a)(ii) remain the same.

- (b) establish and document an appropriate diagnosis, treatment plan, and strategy of care based on the assessment, including:
  - (i) through (v) remain the same.
  - (c) provide and document expert guidance and education when working with clients, families, and other members of the health team;
  - (d) and (e) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1412 (24.159.1405) STANDARDS RELATED TO THE ADVANCED PRACTICE REGISTERED NURSE'S RESPONSIBILITIES AS A MEMBER OF THE NURSING PROFESSION (1) and (1)(a) remain the same.

- (b) possess the requisite knowledge, judgement, and skill to safely and competently perform any function that the APRN undertakes;
- (c) through (c)(ii) remain the same.
- (d) immediately file with the board of ~~nursing~~ any proposed change in the method for referral, client record documentation, or quality assurance method. Any change will be subject to approval by the board of ~~nursing~~;
- (e) and (f) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.308 (24.159.1411) TEMPORARY PERMITS FOR GRADUATE ADVANCED PRACTICE REGISTERED NURSES (APRN) (1) and (1)(a) remain the same.

- (2) If the graduate passes the certifying examination, the temporary permit shall remain valid until the ~~Montana~~ board of ~~nursing~~ grants full APRN recognition. If the graduate does not pass the certifying examination, privileges granted by the temporary practice permit are voided and the temporary practice permit shall be returned to the board office immediately.



(3) and (4) remain the same.

AUTH: 37-1-305, 37-8-202, MCA

IMP: 37-1-305, 37-1-319, 37-8-202, MCA

8.32.306 (24.159.1412) APPLICATION FOR RECOGNITION (1) through (2)(f) remain the same.

(g) payment of non-refundable statutory fee.

(3) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-134, 37-8-202, ~~37-8-431~~, MCA

8.32.304 (24.159.1413) ADVANCED PRACTICE NURSING TITLE

(1) through (1)(a) remain the same.

(b) has submitted application with supporting credentials for advanced practice nursing title and application has been approved by the board of nursing;

(c) through (2)(h) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.305 (24.159.1414) EDUCATIONAL REQUIREMENTS AND OTHER QUALIFICATIONS APPLICABLE TO ADVANCED PRACTICE REGISTERED NURSING (1) remains the same.

~~(a)~~ (b) Successful completion of a post-basic professional nursing education program in the advanced practice registered nurse area of specialty with the minimum length of one academic year consisting of at least 250 hours of didactic instruction and 400 hours under a preceptor; and, individual certification from a board-approved certifying body for those recognized prior to July 1, 1995; ;

~~(b)~~ (a) For original recognition after June 30, 1995, a master's degree from an accredited nursing education program, or a certificate from an accredited post master's program as defined in (1)~~(a)~~ (b), which prepares the registered nurse for the APRN recognition sought; and, individual certification from a board-approved certifying body. APRNs who completed an accredited APRN program and obtained national certification prior to June 30, 1995, may be recognized in Montana. ;

(2) through (5) remain the same.

AUTH: 37-1-319, 37-8-202, MCA

IMP: 37-8-202, 37-8-409, MCA

REASON: It is reasonable and necessary to amend this rule to arrange sections listing the current requirements first in order to aid the user.

8.32.401 (24.159.1415) GENERAL REQUIREMENTS FOR LICENSURE

(1) The requirements for licensure of registered ~~and practical~~ nurses in Montana include the provision that the applicant has written a state board test pool

examination/ or national council licensing examination (NCLEX) in a state of the United States.

AUTH: 37-8-202, MCA

IMP: 37-8-406, 37-8-416, MCA

8.32.501 (24.159.1416) GROUNDS FOR DENIAL OF A LICENSE

(1) through (1)(b) remain the same.

(c) fraud or misrepresentation in association with the examination application, licensure application, or licensure examination;

(d) and (e) remain the same.

AUTH: 37-1-136, 37-8-202, MCA

IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.402 (24.159.1417) LICENSURE BY EXAMINATION REQUIREMENTS

(1) The board shall administer the national council licensing examinations for registered nurse licensure and ~~practical nurse licensure~~ by computerized adaptive testing (CAT). Each examination differs from any other administered examination.

(2) The executive director is authorized to negotiate the contract ~~with the national council of state boards of nursing, inc.~~ for licensing examination services.

(3) All candidates desiring to take the licensing examination for registered nursing or ~~practical nursing~~ shall make application for licensure to the board on a form provided by the board and shall make application for the examination to the national council licensing examinations (~~NCLEX~~) on a form distributed by the board as provided by the National Council of State Boards of Nursing.

(4) and (5) remain the same.

(6) A passing score on the appropriate NCLEX examination shall be required for licensure as a ~~professional or practical~~ registered nurse. The National Council of State Boards of Nursing's panel of content experts determines the passing score.

(7) and (8) remain the same.

(9) Candidates who pass shall receive ~~the results of the examination and a license to practice as a registered/practical nurse.~~

(10) through (13) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-1-131, 37-8-406, 37-8-416, MCA

REASON: It is reasonable and necessary to amend this rule to remove references to practical nurses since this version of the rule is applicable to APRNs. It is also necessary to amend this rule to remove the specific vendor name listed in (2). In the event the contract is awarded to a different vendor, the rule will not need to be amended, thereby avoiding a potential conflict.

8.32.405 (24.159.1418) LICENSURE BY ENDORSEMENT REQUIREMENTS (1) through (1)(a)(i) remain the same.

(ii) the application will be kept on file for one year. If the applicant fails to complete the application requirements for application licensure by endorsement within one year, a new application will be required;

(b) and (c) remain the same.

(d) verification and documentation of licensure status from all jurisdictions of licensure for preceding two years; ~~and~~

(e) ~~professional~~ registered nurse applicants shall present evidence of having passed a licensure examination as follows:

(i) and (ii) remain the same.

~~(iii)~~ (iv) a minimum scaled score of 1600 on a NCLEX-RN (~~national council licensure examination for registered nurses~~) examination taken prior to September, 1988; ~~or~~

~~(iv)~~ (iii) a passing score on a NCLEX-RN examination taken after September, 1988; ~~or~~

~~(f)~~ practical nurse applicants shall present evidence of having passed a licensure examination as follows:

~~(i)~~ 350 on the state board test pool examination for practical nurses; ~~or~~

~~(ii)~~ a minimum scaled score of 350 on a NCLEX-PN (~~national council licensure examination for practical nurses~~) examination taken prior to September, 1988; ~~or~~

~~(iii)~~ a passing score on a NCLEX-PN examination taken after September, 1988;

~~(g)~~ (f) the required fees for licensure by endorsement as specified in ~~subchapter 14~~ ARM 8.32.425; and

~~(h)~~ (g) if the applicant's education was obtained in a foreign country, the applicant must also meet the conditions of ARM 8.32.429 ~~and 8.32.430~~.

(2) remains the same.

(3) An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice ~~professional or practical~~ registered nursing pursuant to the provisions of ARM 8.32.408(3) 24.159.1221.

(4) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-304, MCA

REASON: It is reasonable and necessary to amend this rule to arrange sections listing the current requirements first in order to aid the user.

Also, it is reasonable and necessary to amend (1)(g) to delete the internal reference to ARM 8.32.430 that is applicable to practical nurses. Also, normally, in a rule transfer, internal references are just modified to indicate the new reference. However, with the proposed numbering structure planned with this notice, ARM 8.32.408 is proposed to be transferred and amended into multiple locations specific to the license type. Therefore, it is reasonable and necessary to identify that the intent of the reference in (3) is to be to the rule applicable to registered nurses only. This is a substantive change and must be identified as an amendment to the rule.

~~8.32.411 (24.159.1427) RENEWALS (1) In November of each even-numbered year, the board of nursing shall mail an application for renewal of license to all currently licensed registered nurses and licensed practical nurses. The licensee must fill out the application and return it to the board BEFORE January 1 of the next year, together with the renewal fee. Upon receiving the renewal application and fee, the board shall issue a certificate of renewal for the current year beginning January 1 of the odd-numbered year, and expiring December 31 of the even-numbered year. If the renewal application is postmarked subsequent to December 31 of the renewal year, it is subject to a late fee of two times the renewal fee.~~

~~(2) A license shall be renewed by January 1 of the odd-numbered years. Any person practicing nursing during the time a license has elapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.~~

~~(3) In November of even-numbered years, the board shall mail an application for renewal of license to all currently licensed advanced practice registered nurses (APRNs). The licensee shall complete the application and return it, the proof of continuing education required by ARM 8.32.411 (3), and the renewal fee to the board before January 1. Upon receiving the completed renewal application and fee, the board shall issue a certificate of renewal for the current two-year period beginning January 1 and expiring December 31. If the renewal application is postmarked subsequent to after December 31, it is subject to a late fee of two times the renewal fee.~~

~~(4) Any person practicing during the time a license has lapsed shall be considered an illegal practitioner and may be subject to the penalties provided for violators under the provisions of this chapter.~~

~~(a) remains the same, but is renumbered (2).~~

~~(i) through (v) remain the same, but are renumbered (a) through (e).~~

~~(4) remains the same, but is renumbered (3).~~

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-134, 37-8-202, ~~37-8-431~~, MCA

REASON: It is reasonable and necessary to amend existing (3) to modify the reference to "proof of continuing education as required by ARM 8.32.411", which is a reference to this rule, and make the reference specific to the applicable section of the rule that pertains to the continuing education requirements listed in the section that will become (3). This change makes the reference more clear and accurate.

8.32.412 (24.159.1428) INACTIVE STATUS (1) A licensed advanced practice registered nurse who wishes to retain a license but who will not be practicing nursing may obtain an inactive status license upon submission of an application and payment of the appropriate fee. An individual licensed on inactive status may not practice nursing during the period in which he or she the licensee remains on inactive status.

(2) An individual may not remain licensed on inactive status for longer than two years without re-establishing qualifications for licensure, including but not limited to, passage of the licensing examination.

(3) An individual licensed A licensee on inactive status may convert his or her an inactive status license to active status by submission of an appropriate application and payment of the renewal fee for the current renewal period.

(4) through (6)(a) remain the same.

AUTH: 37-1-131, 37-1-319, 37-8-202, MCA

IMP: ~~37-8-431,~~ 37-1-131, 37-1-319, MCA

8.32.417 (24.159.1436) SUPERVISION OF PROBATIONARY LICENSEES LICENSEES (1) Any APRN nurse working pursuant to a probationary license must work under the direct supervision of another nurse or physician, as follows:

~~(a) the supervisor for an LPN on probation must be an RN, APRN or physician with a current, unencumbered license;~~

~~(b) the supervisor for an RN on probation must be an RN, APRN or physician with a current, unencumbered license; and~~

~~(c) The supervisor for an APRN on probation must be an APRN or a physician with a current, unencumbered license.~~

AUTH: 37-1-136, 37-1-319, 37-8-202, MCA

IMP: 37-1-136, 37-1-319, 37-8-202, MCA

8.32.502 (24.159.1442) LICENSEE PROBATION OR REPRIMAND OF A LICENSEE (1) A licensee may be placed on probation or reprimanded based on grounds specified in 37-1-316, MCA, or ARM 8.32.413~~(2)~~.

AUTH: 37-1-136, 37-8-202, MCA

IMP: 37-1-136, 37-1-137, 37-1-316, MCA

8.32.507 (24.159.1443) LICENSE REAPPLICATION CONSIDERATIONS OF REAPPLICATION FOR A LICENSE AFTER PREVIOUS DENIAL, REVOCATION, OR SUSPENSION (1) Reapplication for a license previously denied, revoked, or suspended must include evidence of rehabilitation, or elimination or cure of the conditions for denial, revocation, or suspension.

(2) Evaluation of reapplication for a license denied ~~under section 37-8-441,~~ MCA will be based upon, but not limited to:

(a) through (c) remain the same.

(d) compliance with any condition the board may have stipulated as a prerequisite for reapplication; and/or

(e) and (f) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-1-136, 37-8-202, MCA

8.32.1501 (24.159.1461) PRESCRIPTIVE AUTHORITY FOR ELIGIBLE APRNS (1) ~~This subchapter will be known and may be cited as the APRN prescriptive authority rules.~~

~~(2)~~ An APRN granted prescriptive authority by the board of nursing may prescribe and dispense drugs pursuant to applicable state and federal laws. If the APRN has prescriptive authority, the peer shall also have prescriptive authority.

(a) and (b) remain the same.

~~(3)~~ (2) Prescriptive authority permits the APRN to receive pharmaceutical samples, and to prescribe, dispense, and administer prescription drugs in the prevention of illness, the restoration of health, and/or the maintenance of health in accordance with 37-2-104, MCA.

~~(4)~~ (3) The Board of Pharmacy will be notified in a timely manner by the board when the prescriptive authority of an APRN is terminated, suspended, or reinstated.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1503 (24.159.1462) ADVANCED PRACTICE NURSING COMMITTEE

(1) There is an advanced practice nursing committee. The committee is composed of at least three members of the board of nursing, two of whom shall be RNs.

(2) The committee or its designee will review and approve complete, typed, or word processed applications from individuals seeking advanced practice and/or prescriptive authority. The committee will recommend action to the full board of nursing. The application must describe the individual's proposed:

(a) through (e) remain the same.

(3) The committee will review all non-routine, complete, typed, or word processed applications for advanced practice licensure and will recommend action to the full board of nursing.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1504 (24.159.1463) INITIAL APPLICATION REQUIREMENTS FOR PRESCRIPTIVE AUTHORITY

(1) The advanced practice registered nurse shall submit a completed application provided by the board of nursing, and a non-refundable fee. The application must include:

(a) evidence of completion of a minimum of 15 education hours in pharmacology and/or the clinical management of drug therapy from an accredited body which have been obtained within a three-year period immediately prior to the date the application is received at the board office. No more than two hours may concern the study of herbal or complementary therapies. Six of the 15 continuing education hours must have been obtained within one year immediately prior to the date the application is received at the board office. One-third of all education hours must be face-to-face meetings or interaction;

(b) through (e) remain the same.

(2) The committee will make a recommendation only with respect to completed, typed, or word processed applications. The board of nursing may deny the application if the applicant has a license which is encumbered.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

8.32.1505 (24.159.1464) PRESCRIBING PRACTICES (1) and (2) remain the same.

(a) name, title, address, and phone number of the advanced practice registered nurse who is prescribing;

(b) through (3) remain the same.

(4) ~~(a)~~ The advanced practice registered nurse with prescriptive authority who wishes to prescribe schedule II-V drugs will comply with federal Drug Enforcement Administration requirements prior to prescribing controlled substances.

~~(b)~~ (5) The advanced practice registered nurse will immediately file any and all of his or her the nurse's DEA registrations and numbers with the board of nursing.

~~(c)~~ (6) The board of nursing will maintain current records of all advanced practice registered nurses with DEA registration and numbers.

~~(d)~~ (7) In an emergency situation, schedule II drugs may be phoned in to the pharmacist pursuant to 21 CFR 1306.11(d).

~~(5)~~ (8) An advanced practice registered nurse with prescriptive authority will not delegate the prescribing or dispensing of drugs to any other person.

~~(6)~~ (9) An APRN with prescriptive authority who also possesses inpatient care privileges shall practice pursuant to a written agreement between the agency and the APRN which is consistent with the rules, regulations, and guidelines set forth in 37-8-202 and 37-2-104, MCA, and ~~ARM 8.32.301 through 8.32.303, and this subchapter~~ ARM [24.159.1461 through 24.159.1468] , and 8.32.301, 8.32.302, and 8.32.303.

~~(7)~~ (10) An APRN with prescriptive authority from the board of nursing will comply with the requirements of 37-2-104, MCA.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

8.32.1508 (24.159.1466) QUALITY ASSURANCE OF ADVANCED PRACTICE REGISTERED NURSE PRACTICE (1) An advanced practice

registered nurse performing direct patient care shall submit a method of quality assurance for evaluation of the advanced practice registered nurse's practice. The quality assurance method must be approved by the board of nursing prior to licensure.

(2) remains the same.

(a) 15 charts or 5% of all charts handled by the advanced practice registered nurse, whichever is less, must be reviewed quarterly. The charts being reviewed must be evaluated by a peer review, by a physician of the same practice specialty, or by others as approved by the board. Each evaluator shall hold an unencumbered license;

(b) through (e) remain the same.

(3) An advanced practice registered nurse shall immediately file with the board of nursing any proposed change in the quality assurance method. Any change is subject to prior approval by the board of nursing.

(4) remains the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1509 (24.159.1467) TERMINATION OF PRESCRIPTIVE AUTHORITY

(1) The board of nursing may impose discipline up to and including termination of an advanced practice registered nurse's prescriptive authority when one or more of the following criteria apply:

(a) the advanced practice registered nurse has not met the requirements for renewal of prescriptive authority in accordance with ~~this subchapter~~ ARM [24.159.1461 through 24.159.1468];

(b) through (d)(ii) remain the same.

(iii) otherwise violated the provisions of the prescriptive authority rules contained in ~~this subchapter~~ ARM [24.159.1461 through 24.159.1468]; or

(e) remains the same.

(2) An advanced practice registered nurse whose prescriptive authority has terminated will not prescribe until the advanced practice registered nurse has received written notice from the board of nursing that ~~his or her~~ the nurse's prescriptive authority has been reinstated by the board.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.301 (24.159.1470) NURSE PRACTITIONER PRACTICE (1) Nurse practitioner practice means the independent and/or collaborative management of primary and/or acute health care of individuals, families, and communities including:

(a) assessing the health status of individuals and families using methods appropriate to the client population and area of practice such as:

(i) health history taking;

(ii) physical examination; and

(iii) assessing developmental health problems;

(b) through (d) remain the same.

(e) providing instruction and counseling to individuals, families, and groups in the areas of health promotion and maintenance, including involving such persons in planning for their health care; and

(f) remains the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.302 (24.159.1475) NURSE MIDWIFERY PRACTICE (1) Nurse midwifery practice means the independent management of care of essentially normal newborns and women, antepartally, intrapartally, postpartally, and/or



gynecologically. This occurs within a health care system that provides for medical consultation, collaborative management, and referral.

(2) remains the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-8-202, 37-8-409, MCA

8.32.303 (24.159.1480) NURSE ANESTHETIST PRACTICE (1) Nurse anesthetist practice is the independent and/or collaborative performance of or the assistance in any act involving the determination, preparation, administration, or monitoring of any drug used in the administration of anesthesia or related services for surgical and other therapeutic procedures which require the presence of persons educated in the administration of anesthetics.

(2) remains the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.307 (24.159.1485) CLINICAL NURSE SPECIALIST PRACTICE

(1) through (1)(b) remain the same.

(c) plan for health promotion, disease prevention, and/or therapeutic intervention in collaboration with the client. The goal is to enhance the problem-solving and self-care abilities of the client whenever and to whatever extent possible. The clinical nurse specialist works with other health care providers to maximize resources available to the client and family;

(d) through (g) remain the same.

(h) educate clients, families, other health care professionals, and the public;

(i) and (j) remain the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.307A (24.159.1490) PSYCHIATRIC-MENTAL HEALTH PRACTITIONER PRACTICE (1) Psychiatric-mental health NP or psychiatric CNS practice means the independent and/or collaborative management of primary mental health care for individuals, families, and communities throughout the life span and for those who have or are at risk for developing mental health problems. The psychiatric-mental health practitioner may be educated as an NP or a CNS in the area of psychiatric-mental health advanced practice nursing. The practice of psychiatric-mental health practitioners includes:

(a) through (h) remain the same.

(i) instructing and counseling individuals, families, and groups in mental health promotion and maintenance, including involving the clients in planning for their health care; and

(j) remains the same.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1721 (24.159.1601) PURPOSE (1) The purpose of these rules relating to delegation and assignment is to:

- (a) ~~to~~ serve as a standard for nurses who hire, supervise, and/or serve as a delegator to unlicensed assistive personnel (UAP); and
- (b) ~~to~~ establish minimal acceptable levels of safe and effective delegation.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1722 (24.159.1602) DEFINITIONS The following words and terms as used in this subchapter have the following meanings:

(1) through (6) remain the same.

(7) "Competency" means performance standards including demonstrated skills, knowledge, abilities, and understanding of specific tasks that are required in a specific role and setting.

(8) through (19) remain the same.

(20) "Pharmacology course" means a nursing course that introduces the student to the basic principles of pharmacology in nursing practice and the skills necessary to safely administer medications. Students will be able to demonstrate accurate dosage calculations, correct medication administration, knowledge of drug classifications, and therapeutic and nursing implications of medication administration.

(21) through (23) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1725 (24.159.1605) STANDARDS RELATED TO THE FACILITY'S CHIEF NURSING OFFICER REGARDING DELEGATION PRACTICES (1) and (1)(a) remain the same.

(b) the UAP's skills are observed, evaluated, and documented;

(c) through (2) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1732 (24.159.1631) ADVANCED DELEGATION TO UAP NURSING STUDENTS (1) through (1)(b)(ii) remain the same.

(iii) whose satisfactory completion of ~~a course in the~~ fundamentals of nursing course, as defined in ARM 8.32.1722, has been verified by the facility's chief nursing officer; and

(iv) through (3)(l) remain the same.

AUTH: 37-1-131, 37-8-202, MCA

IMP: 37-1-131, 37-8-202, MCA

8.32.1601 (24.159.2001) INTRODUCTION OF THE NURSES' ASSISTANCE PROGRAM (1) The nurses' assistance program (NAP) is a specially designed program to assist Montana nurses whose competency may be impaired due to the abuse of drugs or alcohol. The NAP will have two tracks:

- (a) the disciplinary track; and
- (b) the non-disciplinary track.

(2) The NAP will monitor the nurses' rehabilitation process to ensure public safety. Information that relates to the abuse of addictive drugs, alcohol, or any other drug or substance, may be reported by the licensee to the NAP in lieu of reporting to the board.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1610 (24.159.2002) ADMINISTRATION OF THE PROGRAM (1) The ~~nurses' assistance program~~ NAP will be under the jurisdiction of the board of nursing. The board may contract with a consultant to administer the NAP.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1611 (24.159.2003) CONSULTANT REQUIREMENTS (1) remains the same.

(a) a an unencumbered license as a registered nurse in Montana with a minimum of a baccalaureate degree in nursing;

(b) through (e) remain the same.

(f) two years employment experience in a recognized treatment program for chemical dependency.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1602 (24.159.2010) DISCIPLINARY TRACK (1) Participation in the ~~nurses' assistance program~~ NAP may be mandated as a part of disciplinary action by the board of ~~nursing~~ or if a complaint against the licensee has been submitted to the board of ~~nursing~~.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1603 (24.159.2011) ADMISSION CRITERIA - DISCIPLINARY TRACK (1) remains the same.

(a) the licensee has violated the statutes ~~and~~ or rules related to nursing practice which involved alcohol and/or drugs and whom the board has stipulated the NAP as a part of disciplinary action;

(b) the licensee agrees to abide by the terms of the NAP; or

(c) the nurse is from another state, has applied for a nursing license in Montana, and is mandated by ~~stipulation~~/ final order of that state board of nursing to attend a NAP program.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to amend this rule to indicate that a licensee does have to violate both statute and rule relating to nursing practice involving alcohol and/or drugs. It could be possible for a violation of one and not the other if using a literal interpretation of the current language. Also, it is reasonable and necessary to delete the reference to stipulation to correctly identify that a final order mandating an assistance program is necessary.

8.32.1604 (24.159.2012) PROGRAM REQUIREMENTS - DISCIPLINARY TRACK (1) through (2)(a) remain the same.

(b) reporting to the board any violations of the NAP contract or any reasonable suspicion that the licensee may not be able to practice safe nursing to ~~the board~~.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

8.32.1606 (24.159.2020) NON-DISCIPLINARY TRACK (1) The non-disciplinary track of the NAP is open to:

(a) any licensee who identifies a drug/alcohol problem and requests admission to the NAP; ~~and~~ or

(b) ~~to~~ those licensees referred by the board.

(2) Licensees may be reported directly to the NAP in lieu of a formal complaint to the board. The identity of participants in the non-disciplinary track of the NAP will remain unknown to the board unless there is a failure to enroll or comply with the requirements of the NAP. Failure to enroll/ or comply with the NAP will result in a formal complaint to the board by the NAP.

AUTH: 37-8-202, MCA  
IMP: 37-8-202, MCA

8.32.1607 (24.159.2021) ADMISSION CRITERIA - NON-DISCIPLINARY TRACK (1) A licensee may be admitted to the NAP non-disciplinary track if ~~he/she~~ the licensee is a:

(a) a licensed nurse or previously licensed nurse in the state of Montana who requests admission;

(b) a licensed nurse from another state who has applied for a nursing license in Montana and is in a similar monitoring program in another state;

(c) a licensee without a previous disciplinary action from any licensing board;

(d) a licensee against whom no notice of proposed board action or similar notice issued by a licensing board is pending; or

(e) a licensee who successfully completed the NAP or similar monitoring program when enrolled.

(2) remains the same.

(3) A licensee who has diverted controlled substances or caution legend drugs for purposes of sale, or distribution, or personal use is not eligible for the non-disciplinary track.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.1609 (24.159.2023) DISCHARGE CRITERIA - NON-DISCIPLINARY TRACK (1) The licensee ~~Licensee~~ shall be discharged from the NAP non-disciplinary track when the licensee:

(a) ~~the licensee~~ successfully completes the NAP;

(b) ~~the licensee~~ does not comply with the NAP. The NAP will submit a report to the board; or

(c) ~~the licensee~~ voluntarily withdraws from the NAP. The NAP will submit a complaint to the board.

(2) ~~The~~ A licensee may be discharged if ~~he/she~~ the licensee violates any of the statutes ~~and~~ or rules related to nursing which results in disciplinary action by the board.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

8.32.413 (24.159.2301) CONDUCT OF NURSES (1) remains the same.

(a) While working as a nurse, all nurses will identify themselves with a name badge disclosing their first and last name, as it appears on their nursing license, and license type. The identification badge will be written in a standard bold face font with a font size of no less than 18.

(b) through (2)(g) remain the same.

(h) falsifying patients' records, or intentionally charting incorrectly, or failing to chart;

(i) through (n) remain the same.

(o) practicing professional or practical nursing as a registered or licensed practical nurse in this state without a current active Montana license or permit;

(p) failing to report, to the board ~~of nursing~~ information known to the individual regarding any possible violation of the statutes ~~and~~ or rules relating to nursing;

(q) and (r) remain the same.

(s) refusing to sign for or accept a certified mailing from the board office; or

(t) failing to participate and cooperate in a ~~professional and occupational licensing division~~ Department of Labor and Industry investigation; and

(u) remains the same.

AUTH: 37-1-319, 37-8-202, MCA

IMP: 37-1-316, 37-1-319, 37-8-202, MCA

5. The rule proposed to be adopted provides as follows:

NEW RULE I DEFINITIONS As used in this subchapter, the following definitions apply:

(1) "Allowable routes" means oral, sublingual, topical, ophthalmic, otic, nasal, and inhalant methods of administration, except as otherwise provided by rule.

(2) "General supervision", with respect to a medication aide, means at least quarterly on-site review, by a supervising nurse, of a medication aide's medication administration skills and the guidance of a supervising nurse to include a written plan addressing questions and situations that may arise when the supervising nurse is not available. Such a plan must include access to a health care professional.

(3) "Medication aide" means an employee of an assisted living facility who, under the general supervision of a Montana licensed nurse, administers PRN and routine medication as defined in ARM 8.32.415, to residents of the assisted living facility, and who:

(a) is 18 years of age or older;

(b) has a high school diploma; and

(c) has successfully passed a board approved medication aide training program and examination.

AUTH: 37-8-202, MCA

IMP: 37-8-202, MCA

REASON: It is reasonable and necessary to adopt this rule to insert the definitions of allowable routes, general supervision, and medication aide from ARM 8.32.1401 into this rule. The board has determined that these definitions are applicable to medication aides only and should therefore be in the medication aide subchapter.

6. The rules proposed to be repealed are as follows:

8.32.504 DISCIPLINARY PROCEDURES IN ANOTHER JURISDICTION found at ARM page 8-980.11.

AUTH: 37-8-202, MCA

IMP: 37-1-136, 37-8-202, 37-8-441, MCA

8.32.505 NOTIFICATION OF DENIAL OR DISCIPLINARY ACTION found at ARM page 8-980.12.

AUTH: 37-8-202, MCA

IMP: 37-1-136, MCA

8.32.506 REQUEST FOR HEARING found at ARM page 8-980.12.

AUTH: 37-8-202, MCA

IMP: 37-1-121, 37-1-136, 37-8-441, 37-8-442, MCA

REASON: It is reasonable and necessary to repeal ARM 8.32.504, 8.32.505, and 8.32.506 because discipline and due process issues are adequately covered in Title 37, chapter 1, MCA and the Montana Administrative Procedure Act, Title 2, chapter 4, MCA. Therefore, these rules are unnecessary and should be removed instead of transferring into Title 24, Department of Labor and Industry.

8.32.1101 EFFECTIVE DATE OF ARM 8.32.1101 THROUGH 8.32.1116  
found at ARM page 8-1005.

AUTH: 37-8-202, MCA  
IMP: 37-8-301, MCA

REASON: It is reasonable and necessary to repeal ARM 8.32.1101 because this rule is no longer needed and has served its original purpose. These rules have been in place for over eight years. The original effective date of these rules is easily recognized by the notation in the history note identifying each rule as being new and effective on July 1, 1997.

8.32.1401 DEFINITIONS found at ARM page 8-1013.

AUTH: 37-1-131, 37-8-202, MCA  
IMP: 37-1-131, 37-8-101, 37-8-102, 37-8-202, 37-8-422, MCA

REASON: It is reasonable and necessary to repeal this rule in order to consolidate definition rules that were located in several subchapters. The substance of the words defined in this rule is proposed to be inserted into the other proposed definition rules.

7. The rules proposed to be transferred are as follows:

| <u>OLD</u> | <u>NEW</u>  |                            |
|------------|-------------|----------------------------|
| 8.32.101   | 24.159.101  | Board Organization         |
| 8.32.201   | 24.159.201  | Procedural Rules           |
| 8.32.202   | 24.159.202  | Public Participation       |
| 8.32.409   | 24.159.1036 | Preparation of Licenses    |
|            | 24.159.1236 | Preparation of Licenses    |
|            | 24.159.1426 | Preparation of Licenses    |
| 8.32.410   | 24.159.1040 | Duplicate or Lost Licenses |
|            | 24.159.1240 | Duplicate or Lost Licenses |
|            | 24.159.1430 | Duplicate or Lost Licenses |
| 8.32.416   | 24.159.1041 | Verification of Licensure  |
|            | 24.159.1241 | Verification of Licensure  |
|            | 24.159.1431 | Verification of Licensure  |

|           |             |   |
|-----------|-------------|---|
| 8.32.425  | 24.159.401  | Fees  |
| 8.32.603  | 24.159.408  | Officers <u>of the Board</u>  |
| 8.32.608  | 24.159.411  | Parliamentary Authority   |
| 8.32.610  | 24.159.416  | <u>Qualifications for Executive Director--</u><br><u>Qualifications of the Board</u>  |
| 8.32.804  | 24.159.656  | Faculty Qualification Report  |
| 8.32.1103 | 24.159.604  | Philosophy, Educational Objectives, and<br>Expected Outcomes <u>of Nursing Education</u><br><u>Programs</u>                 |
| 8.32.1112 | 24.159.659  | Faculty for Registered Nursing <u>Education</u><br><u>Programs</u>  |
| 8.32.1114 | 24.159.665  | Preceptors <u>in Nursing Education Programs</u>   |
| 8.32.1413 | 24.159.903  | Purpose of Standards of Practice for the<br>Licensed Medication Aide  |
| 8.32.1506 | 24.159.1465 | Special Limitations Related to the<br>Prescribing of Controlled Substances  |
| 8.32.1510 | 24.159.1468 | <del>Renewal of Prescriptive Authority</del> <u>Renewal</u><br><u>Requirements</u>  |
| 8.32.1605 | 24.159.2013 | Discharge Criteria - Disciplinary Track   |
| 8.32.1608 | 24.159.2022 | Program Requirements - Non-Disciplinary<br>Track  |
| 8.32.1612 | 24.159.2004 | Consultant Activities   |
| 8.32.1723 | 24.159.1610 | Accountability  |
| 8.32.1724 | 24.159.1611 | Criteria for Delegation of Nursing Tasks  |
| 8.32.1726 | 24.159.1612 | Standards Related to the Nurse<br>Functioning as a Delegator  |
| 8.32.1727 | 24.159.1616 | Nursing Tasks Related to Medications<br>That May be Delegated   |
| 8.32.1728 | 24.159.1625 | General Nursing Functions and Tasks That<br>May Not be Delegated  |
| 8.32.1729 | 24.159.1630 | Advanced Delegation, Generally  |
| 8.32.1730 | 24.159.1636 | Advanced Delegation to UAPs Working<br>in the Emergency Department  |
| 8.32.1731 | 24.159.1640 | Advanced Delegation to UAPs Working<br>in the Dialysis Unit   |
| 8.32.1733 | 24.159.1604 | Tasks Which May be Routinely Assigned to<br>an Unlicensed Person in any Setting When<br>a Nurse-Patient Relationship Exists |



8. Concerned persons may present their data, views, or arguments either orally or in writing at the hearing. Written data, views, or arguments may also be submitted to the Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513, by facsimile to (406) 841-2305, or by e-mail to [dlibsdnur@mt.gov](mailto:dlibsdnur@mt.gov), and must be received no later than 5:00 p.m., May 22, 2006.

9. An electronic copy of this Notice of Public Hearing is available through the department's and board's site on the World Wide Web at [www.nurse.mt.gov](http://www.nurse.mt.gov). The department strives to make the electronic copy of this Notice of Public Hearing conform to the official version of the Notice, as printed in the Montana Administrative Register, but advises all concerned persons that in the event of a discrepancy between the official printed text of the Notice and the electronic version of the Notice, only the official printed text will be considered. In addition, although the department strives to keep its website accessible at all times, concerned persons should be aware that the website may be unavailable during some periods, due to system maintenance or technical problems, and that a person's technical difficulties in accessing or posting to the e-mail address do not excuse late submission of comments.

10. The Board of Nursing maintains a list of interested persons who wish to receive notices of rulemaking actions proposed by this board. Persons who wish to have their name added to the list shall make a written request which includes the name and mailing address of the person to receive notices and specifies that the person wishes to receive notices regarding all Board of Nursing administrative rulemaking proceedings or other administrative proceedings. Such written request may be mailed or delivered to the Board of Nursing, 301 South Park Avenue, P.O. Box 200513, Helena, Montana 59620-0513, faxed to the office at (406) 841-2305, e-mailed to [dlibsdnur@mt.gov](mailto:dlibsdnur@mt.gov), or may be made by completing a request form at any rules hearing held by the agency.

11. The bill sponsor notice requirements of 2-4-302, MCA, do not apply.

12. Lorraine Schneider, attorney, has been designated to preside over and conduct this hearing.

BOARD OF NURSING  
KAREN POLLINGTON, R.N., CHAIRPERSON

/s/ MARK CADWALLADER  
Mark Cadwallader  
Alternate Rule Reviewer

/s/ Keith Kelly  
Keith Kelly, Commissioner  
DEPARTMENT OF LABOR AND INDUSTRY

Certified to the Secretary of State April 10, 2006