

STATE OF MINNESOTA

BEFORE THE

COUNTY OF RAMSEY

MINNESOTA BOARD OF NURSING

In the Matter of the Proposed Adoption of Amendments to Rules of the State Board of Nursing Governing the Definition of Nursing Personnel in the Program Approval Rules, Registration and Related Topics, and the Advanced Nursing Practice List of Programs.

STATEMENT OF NEED AND REASONABLENESS

The following facts and explanations are presented to establish the need for and reasonableness of the proposed parts 6301.0100; 6310.2600 - 6310.3700; 6330.0600 - 6330.0700 and the repeal of parts 6310.2800, subpart 3; 6310.2900, subpart 6a; 6310.3100, subparts 3 and 4 and 6310.7600 - 6310.8100.

These rule parts are being promulgated to revise one of the definitions pertaining to the approval of nursing programs, to revise the present requirements and procedures for registration of professional and practical nurses and to update the lists of anesthesia and midwifery programs. The repeal of the current parts pertaining to registration of licensed practical nurses is needed to allow for the establishment of consistency in rule format. This revision merges the registration requirements for professional and practical nurses. The program approval rule requirements for professional and practical nursing programs were merged in 1983. The practical and professional nurse licensure requirements were merged in 1984. When the registration requirements are different for a professional or a practical nurse there is a statement in the rule parts that identifies the requirement specific to the professional or practical nurse.

Many of the procedures to be followed in the proposed registration rule parts are different from those in the current parts to facilitate the conversion

of registration from the Statewide Licensing (SWL) system to the board's computer system. Explanations regarding these numerous modifications to the parts are included in this document.

Most of the requirements in the current rule parts are incorporated into the proposed rule parts because they are basic to implementing the registration requirements. Where there has been no significant changes in the wording of a part, a statement to that effect has been made in this document.

The following facts and explanations are presented to establish the need for and reasonableness of the proposed parts 6301.0100; 6310.2600 - 6310.3700; 6330.0600 - 6330.0700 and the repeal of parts 6310.2800, subpart 3; 6310.2900, subpart 6a; 6310.3100, subparts 3 and 4 and 6310.7600 - 6310.8100.

#### **6301.0100 DEFINITIONS.**

##### Subpart 15. Nursing personnel.

This definition amendment is needed as nursing students are excluded from the current definition. This means that nursing personnel must be used when evaluating student's ability to delegate, supervise and teach, when complying with part 6301.1900, subparts 6, 7 and 8. A change in the part will allow professional programs to use nursing students to simulate the roles of nurses and nursing assistants for the purpose of evaluation.

The amendment is needed to permit nursing programs to utilize the alternative methods to evaluate the ability of nursing students to delegate, supervise and teach. The request for a rule change was initiated by the University of Minnesota School of Nursing. Administrators of that program expressed concern regarding the amount of time required by nursing personnel in clinical agencies to assist in student activities. This is time taken away from patient care.

In the Minneapolis/St. Paul area there are approximately 950 professional nursing students requiring evaluation of nursing abilities each year. The

exclusion of nursing students from the definition of nursing personnel make compliance with the part difficult in that clinical agencies must provide nursing personnel to meet the student need. Decreases in numbers of nursing personnel in some institutions, increasing demands on their time, and changing patterns of care and supervision make this evaluation method problematic.

The amendment is reasonable in that other appropriate means exist for evaluating the abilities of delegation, supervision and teaching, such as role play and simulation with nursing students.

There is nothing in this part that prohibits the use of nursing personnel for the evaluation of abilities in part 6301.1900, subpart 6, 7 and 8. The utilization of nursing personnel continues to be required in part 6301.2200, subpart 1.

#### **6301.2600 DEFINITIONS.**

##### Subpart 1. Acceptable continuing education activity.

The change in this definition and in subsequent parts of "registered" to "professional" nurse is needed for consistency in board rules. Minnesota Statutes, section 148.171 paragraph (2) clarifies that the registered nurse practices professional nursing. In the merger of registration rule parts, the term "professional nurses and practical nurses" is more readily wielded than the term "registered nurses and licensed practical nurses".

##### Subp. 2. Board.

Unchanged.

##### Subp. 3. Contact hour.

This amendment is necessary so professional nurses taking courses in educational institutions with 45 minute class periods are able to utilize these classes for registration renewal provided the classes meet all the other criteria in part 6310.2800, subpart 6. This amendment is reasonable as a 45



minute class in an educational institution may include as much content as is presented in a 50 minute class presented outside of an educational institution. A 45 minute class cannot reasonably be looked upon as fragmented and therefore unacceptable because it is five minutes less than acceptable activities. Fifty consecutive minutes will continue to be required for all activities taught outside of an education institution.

Subp. 4. Continuing education participation period.

The insertion of the term "registration" is needed for clarity. Merger of the registration rule parts dictates that the term licensee in this and subsequent parts be used for both practical and professional nurses. Continuing education is required only for professional nurses, hence the change in this definition from licensee to professional nurse.

While most professional nurses renewing their registration will have a 24 month participation period, it is necessary to point out that the length of the participation period for the first registration period following licensure and reregistration may vary from the 24 month interval.

Subp. 5. Continuing education evidence form.

The insertion of the term "continuing education" is necessary for clarity.

Subp. 6. Instructor.

Unchanged.

Subp. 6a. Late application fee.

This term and its definition are needed for clarity.

Subp. 7. License.

This insertion is necessitated by the merger of the rules.

Subp. 7a. Licensee.

This new definition is necessitated by the merger of the rules. This definition is consistent with the use of the term in other agency rule parts.

Subp. 8. Licensure.

This insertion is necessitated by the merger of the rules.

Subp. 8a. Mental health.

This term is needed to continue the implementation of Minnesota Statutes, section 148.211, subd. 1 and 148.291, subd. 1. The definition of "mental health" as offered in this part comes from Webster's New Collegiate Dictionary. Further World Book defines mental health as "the state of being well mentally, characterized by soundness of thought and outlook, adaptability to one's environment, and balanced behavior." This definition is the same as that in part 6315.0100, subpart 15.

Subp. 8b. Moral character.

This term is needed to continue the implementation of Minnesota Statutes, sections 148.211, subd. 1 and 148.291. Webster's New Collegiate Dictionary defines moral as "of or relating to principles of right and wrong in behavior." Character is defined as "one of the attributes or features that make up and distinguish the individual." Further World Book defines moral as "good in character or conduct, capable of understanding right and wrong, having to do with character or with the difference between right and wrong." This definition is the same as in part 6315.0100, subpart 16.

Subp. 8c. Nursing ability.

This term is needed to implement Minnesota Statutes, sections 148.171 paragraph (3) and 148.29, subd. 4. It is consistent with the definition for program approval, part 6301.0100, subpart 13, and licensure rules, part 6315.0100, subpart 17. This term is needed to clarify for the refresher course coordinator the required student outcomes.

Subp. 9. Participation.

This insertion is necessitated by the merger of the rules.

Subp. 9a. Practical nurse.

This new definition is necessitated by the merger of the rules and is consistent with the agency's other rule parts.

Subp. 9b. Professional nurse.

This new definition is necessitated by the merger of the rules and is consistent with the agency's other rule parts.

Subp. 10. Registration.

The dictionary definition of registration is the act of registering; an entry in a register. Substituting the term "listed" for "recorded on a roster" is consistent with Minnesota Statutes, sections 148.213, subd. 5 and 148.294, subd. 3 as well as with the dictionary definition. The addition of "or practical" to the definition is necessitated by the merger of the rules. Renewal means to repeat or to do again. Therefore it is inappropriate to refer to a licensee's first period of registration as a renewal. Similarly it is inappropriate to refer to renewal of registration for a licensee who does not have current registration.

Subp. 11. Registration renewal.

It is necessary to change the term "renewal" to "registration" for consistency with subpart 10.

Subp. 12. Registration renewal deadline.

This term continues to be necessary in order to let licensees know the time by which applications must be submitted to receive their registration certificate before the expiration date. Changing to individualized registration expiration dates makes it necessary to express the deadline in terms of each licensee's expiration date.

Subp. 13. Registration certificate.

"Registration" is used throughout the parts rather than "renewal" for the reasons stated for subp. 10. The certificate is issued as evidence that the individual is registered. The merger of the rules requires the insertion of

"practical nurse."

Subp. 14. Registration expiration date.

This definition change is necessary to facilitate the conversion of registration from Statewide Licensing (SWL) system to the board's computer system. In that conversion the expiration of registration will be set in relation to each licensee's birthdate. The expiration date becomes the focal point of the rule parts rather than the first date in the nurse's renewal period. The focus on the expiration date is warranted by the fact that practicing nursing beyond that date without having current registration is unlawful according to Minnesota Statutes sections 148.281, subd. 1 (3) and 148.293, subd. 3.

Subp. 15. Registration period.

The substitution of "registration" rather than "renewal" is needed for consistency. The substantive change in the definition of this term is necessary due to the change from a set expiration date for each type of license to one related to each licensee's month and year of birth. Explaining that the length of the period may vary for first registration and reregistration is necessary to alert individuals to this difference.

Subp. 16. Reregistration.

The merger of the rules requires the insertion of "practical nurses." When a licensee must apply for reregistration is changed. This change should be reflected in the definition so that individuals are duly notified.

**6310.2700 PURPOSE.**

This part is needed to inform readers and those regulated of the intent of the rule parts in this chapter. The rule parts have been designed to carry out the board's responsibility to protect the public. These rule parts assure that only qualified licensees will be initially registered, and that only qualified



licensees will be granted renewal of registration or reregistration. These parts clarify the process for verification of data on a licensee to other jurisdictions.

#### **6310.2800 REGISTRATION RENEWAL REQUIREMENTS.**

##### Subpart 1. Requirement.

The continuing education contact hour requirement for professional nurses between 1978 and 1982 should be repealed because they are no longer relevant. Stating that it is the licensees' responsibility to apply for renewal of registration is needed for clarity. This statement appeared in part 6310.7600, subpart 1 which will be repealed.

The change to a registration expiration date related to each licensee's month and year of birth makes it necessary to redefine the end point of the continuing education participation period for professional nurses. While most nurses' continuing education participation periods will remain 24 months long, it is necessary to clarify that the number of contact hours and length of participation period will vary as the nurse enters or reenters the system.

##### Subp. 2. Demonstration of professional nursing skill.

Merger of the rules makes it necessary to clarify that this requirement continues to apply only to professional nurses.

##### Subp. 3. Renewal fee.

This part may be repealed as the renewal fee is stated in part 6310.3700, subpart 1, item A.

##### Subp. 4. Application submission.

It is necessary to specify that applications must be received in the board office by a certain date rather than be postmarked by a specified date for the following reasons. Postmarks may be missing or may be illegible. Private postal meter machines may be set with incorrect dates. While it is true that nurses who drop their applications in a mailbox will not be certain when their



applications will be delivered, under the current requirement such licensees are not certain when their application will be postmarked.

It is reasonable for the agency to require receipt of the application in the board office by a certain date as the board cannot initiate the registration process until the application is received. Using a postmark deadline obligates the board through an agency over which it has no control. Mail is received in the board office a varying number of days following the postmark date.

Setting a deadline for submission of applications before registration expiration is necessary to assure that the board can process the registration and register the individual before registration expiration. The deadline establishes lead time that is necessary to enable licensees to comply with Minnesota Statutes sections 148.281, subd. 1 (3) and 148.293, subd. 3 which indicate that the practice of professional and practical nursing is unlawful unless duly licensed and currently registered to do so.

Because registration expiration dates are established in relation to each licensee's month and year of birth, it is necessary to set the application deadline date in relation to each licensee's expiration date. Setting the deadline one month before expiration is reasonable. Office automation will provide the board with the resources to process applications within the one month time frame. For consistency the one month deadline is established for the professional and practical nurse applications.

Historically applications are submitted closer to the deadline. Reducing the submission period from two months to one month for the professional nurse will fit the pattern of submission for this group.

For the practical nurse in the past the application deadline date was the same as the expiration date. This has lead to the faulty assumption that putting the application in the mail by the deadline was all that was necessary

in order to continue practicing. Changing the deadline date so that it precedes the expiration date by one month clarifies the requirement that in order to practice, registration must be granted. To grant registration the board needs time to process the application and send out the evidence (registration certificate) that an individual is authorized to practice.

It is reasonable to continue to permit resubmission of an application without payment of a late application fee provided that the stated conditions are met. It is necessary to change the language to conform with the other changes regarding the point at which the application must be initially submitted.

It is necessary to maintain the already established deadline date for the professional nurses renewing in 1988 and 1989 who will have had registration on July 31, 1987 in the Statewide Licensing (SWL) system. That deadline date marks the end of their 24 month continuing education participation period. This period was announced to this group when they renewed in either 1986 or 1987. It is also reasonable to permit this group to resubmit applications without paying late penalty fees because this provision has been in effect in the past.

Subp. 5. Late application fee.

It is necessary to change the conditions related to the collection of this fee to be consistent with the requirements established for application submission. It is reasonable to change the name of this fee to clarify that it is assessed because of late submission of the application.

For the professional nurses who will have current registration on July 31, 1987, it is necessary to continue the practice of requiring a late application fee during the two months following their application deadline date. This approach is consistent with their preset continuing education participation period.

Subp. 6. Acceptable continuing education activity.

The insertion of the term "professional nurse" is necessitated by the merger of the rules.

A through E. Unchanged.

F. The insertion of the term "professional nurse" is necessitated by the merger of the rules. The changes of "renewal" to "registration" and "date" to "period" are necessary for consistency with changes in terminology.

G. through I. Unchanged.

J. The insertion of the term "professional nurse" is necessitated by the merger of the rules.

K. In 1978 the board opted for a system for continuing education activities that was not based on prior approval. Prior board approval was deemed to be costly and time consuming. The board determined the criteria that would be applied to continuing education activities and established the system of nurses determining if an activity met these requirements. Because a consideration was efficiency at that time and is still a consideration, it is reasonable to utilize approval which is carried out by other selected entities.

The board designated criteria A through J as defining an acceptable continuing education activity. It is not necessary that all the board's criteria be met when an activity has been approved by one of the specified bodies. It will be most efficient for all concerned to determine that such approved activities met only the criteria of being at least one contact hour in duration, being completed in the professional nurse's participation period, not being identical to any other activity reported during the participation period, providing a written statement of participation to the nurse, and not being taught by the nurse.

It is reasonable to accept the approval of a continuing education activity or the provider of the continuing education activity by the specified bodies in



lieu of the activity meeting the board's criteria regarding acceptable content, objectives, instructor's qualifications, and written self-evaluation or successful completion. The approval process of the specified organizations will alleviate the need for determining that the activity met these criteria. The fact that an approved activity might not provide a list of measurable objectives or written tool for self-assessment, will not inhibit the nurse's ability to learn or to implement that learning into practice.

The approval bodies specified all address instructor's qualifications in various ways. In all cases nurses will be able to learn the instructor's qualifications and may continue to make informed decisions about whether to attend.

Nurse administrators have indicated that they need continuing education content related to their practice. The board's criterion for acceptable content is based on the legal practice definition which does not include administration as a function all nurses are authorized to perform. The lack of any other basis for determining content acceptability for this group, and any other such groups, will be resolved by utilizing the screening of content by the entities specified in this part. Acceptance of content approved by the specified entities is reasonable as content acceptability will be determined by other creditable groups whose approval mechanisms are designed to judge continuing education activities for high quality in many areas including content which will improve practice.

This requirement is necessary to utilize the continuing education approval process of other boards of nursing and thereby ease the movement of professional nurses between states. Lacking this requirement, many nurses who have been actively participating in continuing education in another state find upon moving to Minnesota that their continuing education activities may not be accepted because they cannot prove that the activities met all of the board's criteria.

The board has long recognized the nursing education programs approved by other boards of nursing as a basis for licensure and it is now time to extend that utilization of approval to approval of continuing education activities.

It is reasonable to also utilize the approval of continuing education activities by Minnesota health-related licensing boards mentioned in Minnesota Statutes section 214.01, subd. 2. Health related continuing education activities are suitable for professional nurses. Such approval makes it unnecessary for the board to again determine that the activity also met all of the board's criteria. In the past many nurses have attended these activities and found them helpful to their practice even though some of these activities did not meet all of the board's criteria for registration renewal. This requirement is needed to broaden the continuing education options for registered nurses.

Many nursing, medical and allied health organizations of state, regional and national level also approve continuing education activities. Where such approval exists, it is unnecessary for the board to again determine that the activity also met all of the board's criteria. This amendment is needed to increase the available continuing education opportunities for nurses. Some nationally approved educational providers have not offered continuing education activities here in the past because they have not wanted to meet yet another state's requirements.

L. It is reasonable to permit professional nurses to substitute a current advanced nursing practice certificate for a report of participation in continuing education activities when the certificate is based upon meeting periodic continuing education or other current competency recertification requirements. Such substitution will accomplish at least the same purpose as directly meeting the board's continuing education requirement. This change is

necessary to prevent overregulation of professional nurses who have met the requirements for current competency which have been determined by a national professional organization, as required for their type of practice. The requirements for recertification as an advanced nurse practitioner which have been reviewed to date have in every case far exceeded the board's continuing education requirement.

It is reasonable to specify that professional nurses must fulfill previous obligations by meeting any previously deferred contact hour requirement. This requirement is needed to assure all nurses are treated equally. Once the deferred contact hour requirement has been met by the nurse, a current advanced nurse practice certificate may be used to meet the continuing education requirement for registration renewal.

Subp. 7. True information.

The addition to this part is necessary for clarity. The deletion of the term "renewal" is necessary for consistency with the revision of the definitions.

Subp. 8. Records retention.

It is reasonable to reduce the amount of time that professional nurses must retain records documenting the acceptability of continuing education activities from four years to two years. This reduction is possible as it has been found that it is possible to complete all audits of continuing education records within two years. This change is necessary to reduce the record keeping burden for the board and nurses.

6310.2900 REGISTRATION RENEWAL PROCEDURES.

Subpart 1. Service.

The changes in this part are necessary for clarity.

Subpart 2. Application mailing date.

This part is necessary to inform licensees that the board will send



registration renewal applications to them in adequate time for processing. The merger of the rules causes this subpart to apply to all licensees. The time needed to process applications for all licensees who wish to renew will be three months.

It is reasonable to reduce the lead time in mailing out the applications to professional nurses from 120 days to 3 full calendar months as that length of time will be ample for submission. Even when mailed out four months ahead, the majority of the nurses have completed renewal in three months. Practical nurses' registration renewal applications have been mailed approximately three months before expiration and this has proven satisfactory.

It will be necessary in 1988 and 1989 to service the professional nurses who hold current registration on July 31, 1987 by mailing their renewal applications 120 days prior to expiration so they will have the usual two month warning before their continuing education participation period ends. The continuing education participation period was announced to them when they renewed in 1986 and 1987.

Once these professional nurses' registration expiration dates have been converted to relate to their birth month and year and these two groups have been subdivided into 24 groups, mailing the applications three months before expiration will be adequate service. The continuing education participation period will be shifted forward one month so the applications will still provide professional nurses with a two month warning.

Subp. 3. Late submission.

It is necessary to change the language regarding the required time of submission and the title of the fee to be consistent with the requirement in part 6300.2800. It is also necessary to add language to this part to provide a one-time continuance of the present application deadline date for professional

nurses currently in the SWL system when they submit the application leading to conversion to an expiration date related to month and year of birth.

It is necessary to require licensees who do not submit an application prior to their registration expiration date to reregister. Ending the opportunity to renew registration after the registration expiration date is necessary to clarify that there is no grace period following registration expiration. This requirement is necessary to implement Minnesota Statutes Sections 148.281, subd. 1 (3) and 148.293 subd. 1 (3). This change is reasonable as licensees have had three months during which to renew their registration and those do not renew during that time will be able to reregister.

It is necessary to let licensees know that incomplete applications will be nullified and fees forfeited. Such procedures are necessary to enable the board to continue processing valid applications. The requirement is reasonable as nurses have three months during which to apply and will receive a notice of incomplete application within 30 days of submittal.

Subp. 4. Continuing education evidence form.

The insertions in this part are necessary to clarify that the evidence form relates to continuing education which continues to be a requirement for professional nurses.

Subp. 5. Incomplete applications; notice.

It is necessary to change this part to facilitate the processing of applications using the board's computer system. It will now be possible to maintain record of receipt of applications and fees so it will no longer be necessary to reject all incomplete applications. The procedure as revised is reasonable as the licensee will still receive notice within 30 calendar days of receipt of the application by the board of any deficiencies and be given instructions for completion or correction.

Subp. 6. Initial registration and first registration renewal.

The clarification that the license fee serves as payment for initial registration is not truly an addition to the part. This policy is presently stated in the language that must be repealed because of the changes being made in registration expiration dates.

The additions to this part are necessary to clarify the establishment of registration expiration dates related to month and year of birth for each new licensee and reregistrant. Individualized registration expiration dates will effectively spread out the board's two year workload in renewing registration from four large groups to twenty four small groups.

In 1977 the Continuing Education Task Force recommended to the board that registration renewal be related to licensees' birthdate. This task force was comprised of professional staff nurses, nurse administrators, nurse educators and nurse practitioners. The recommendation was offered in the interest of efficiency. At that time the board was advised by those beginning the SWL system that renewing the registration of small groups every month would be difficult to do in the new SWL system. Now that the board is able to develop its own computer system, it is not only possible but preferable to even out the registration renewal in this fashion.

Relating each licensee's registration date their month and year of birth should make it easier for licensee's to remember when renewal is needed. Driver's license expiration has accustomed many to this advantage. Unlike the driver's license the registration certificate will not reveal the nurse's age.

Employers are encouraged to check to see that the licensees on their staff have renewed their registration and so are authorized to continue practicing. It is true that some employers will need to make such a check each month rather than twice a year. Maintenance of a tickler file for this check is common practice so the change should not be a burden. Employers should realize it is



not necessary for them to shepherd each licensee through the renewal process, renewal is the licensee's responsibility. The advantage for employers will be that if a few licensee's do not renew their registration on time and are not authorized to practice, that proportion of staff would be only a fraction of one-twenty-fourth of the staff rather than a fraction of half of the staff.

Six months was established as the length of the shortest certificate to ensure that licensees would not need to renew their registration immediately. The longest certificate will be good for 29 months in order to spread licensees' expiration dates over 24 months. Succeeding registration certificates will continue to be 24 months in length.

This requirement is reasonable as the board already has dates of birth for all but approximately 80 licensees. These dates have been taken from microfilmed license applications and entered into the computer data base.

The requirement is necessary to clarify the procedure the board will follow if a licensee will not supply birthdate information upon second request. In such cases it is reasonable to assign a month and year for registration purposes so the licensee will receive a registration certificate.

The procedure is reasonable as the nurse may correct the date of birth stated on the renewal application. It is necessary that the board be able to require official documentation of such date of birth corrections to assure that the data in the licensee's record include only accurate identifiers.

It is necessary to clarify for professional nurses entering the registration renewal system following licensure or reentering following reregistration, the number of contact hours they will need to accrue for their first registration renewal. It is reasonable to require the number of contact hours accrued during this registration period be set in relation to the length of that registration period. It would be confusing to precisely prorate the usual requirement of 30 contact hours accrued in 24 months requirement to this

period which may range in length from six to 29 months. It is reasonable to require each nurse to accrue one contact hour per month in their initial registration period. This simple formula should be easy to understand and remember. Those with the longest period will have to collect 29 contact hours. Those with the shortest period six contact hours.

Beginning the continuing education participation period at the time of licensure or reregistration is necessary to assure that nurses will begin to participate in continuing education to maintain and update their knowledge and skills from the moment they enter or reenter nursing. This requirement is reasonable as nurses will have five months in which to accrue six contact hours of acceptable continuing education and 28 months in which to accrue 29 contact hours. The present requirement has established that nurses are able to accrue 15 contact hours in as little as four months and 30 contact hours in 24 months.

Subp. 6a. Conversion period.

It is necessary to clarify the procedures for licensees whose registration has been in the SWL system and whose registration expiration date does not now relate to their date of birth. One registration period, known as the conversion period, will be necessary to change registration expiration for these licensees from the present set date to a date related to their month and year of birth.

A. This item is necessary in order to clarify that the licensees who are affected will be assigned, in accord with their birthdate, a registration period ranging from six to 29 months thereby establishing a new registration expiration date.

B. This item is necessary to clarify for the licensees affected, that the usual registration renewal fee will be prorated in relation to the length of their conversion registration period. This requirement is reasonable as the amount charged each licensee for the conversion registration period is

equal in terms of cost per month of registration. The amount for six months of registration will be \$5.00. The amount for 29 months of registration will be \$24.00. On January 15, 1987, John Schorn, Executive Budget Officer indicated that because the cost per month will be the same whether the registration period is for 24 months or 29 months the Department of Finance saw no problems in collecting this conversion fee.

C. This item is necessary to clarify for professional nurses the amount of continuing education they will need to accrue during their conversion registration period. The amount is reasonable as it is related to the length of their conversion registration period. See the explanation for Subpart 6 for specific details.

It is necessary to delay the reporting of the contact hours accrued during this registration period to the end of the next full 24 month registration period in order for the board to establish the new system. It is reasonable to delay these continuing education reports so the board can make the new system operational. Once the new system is operating the workload will be evenly distributed over 24 months and the staff will be able to review the continuing education reports. The board decided to delay the report of continuing education participation rather than waive the continuing education report as some state boards of nursing have done during the time of converting renewal to birthdates. While it is true some nurses may put off the accrual of continuing education contact hours until the end of the second participation period, that seems preferable to excusing all nurses from accrual of contact hours. Professional nurses who do not renew their registration and therefore do not have to make the delayed continuing education report will have to meet the reregistration requirements before they are again authorized to practice.

It is necessary to clarify for professional nurses that when they report their continuing education activities for the conversion participation period

and the next full 24 month participation period, the total number of contact hours that must be accrued must also include two demonstrations of skill. This requirement is reasonable as one demonstration of skill in performing nursing per participation period is minimal for this practice oriented profession. The requirement is consistent with that currently being met by newly licensed and reregistered professional nurses.

D. It is necessary to enable professional nurses who lack sufficient contact hours to defer those contact hours when they enter the conversion period. It is reasonable to add those deferred contact hours to the report which will be received at the end of the nurse's next full 24 month period so the board can concentrate its energies on establishing the new computerized system.

Subp. 7. Substantiation of continuing education activities.

It is necessary to clarify that the required substantiation must be obtained from the provider of the continuing education activity. This requirement is reasonable as it is consistent with 6310.2800, subp. 1 which indicates that falsification of any evidence for registration renewal shall constitute unethical conduct and provide grounds for suspension or revocation of a license.

The insertion of the term "professional nurse" is necessitated by the merger of the rules.

Subp. 8. Insufficient hours.

The merger of the rules requires the clarification that this requirement continues to apply only to professional nurses.

Subp. 9. Substantiation after deferment.

The merger of the rules requires the clarification that this requirement continues to apply only to professional nurses.



Subp. 10. Noncompliance audit.

The merger of the rules requires the clarification that this requirement continues to apply only to professional nurses.

6310.3100 REREGISTRATION

Subp. 1. Removal of name from list.

It is reasonable to clarify for licensees that in keeping with Minnesota Statutes sections 148.281, subd. 1(3) and 148.293, subd. 1(3), if registration has not been renewed it does not exist and therefore the licensee is not authorized to practice nursing. It is necessary to end the opportunity to renew registration for three months after registration expiration as individuals should not be permitted to renew that which does not exist. The opportunity to renew registration after it had expired often gave nurses the false impression that there was a grace period which permitted practice. The requirement is reasonable as licensees without registration who want authorization to practice can reregister.

Subp. 2. Reregistration requirements.

The merger of the rules makes many of the changes in these requirements necessary to clarify the requirements for both types of licensees and those requirements that apply only to professional nurses or only to practical nurses.

A. The addition to this item is necessary for clarification.

B. This item is necessary to permit the board to determine whether or not one of the causes for revocation of licensure has occurred between the time of last registration and this application for reentry on the list of those authorized to practice. The requirement is reasonable given the board's charge to protect the health, safety and welfare of the public in regard to nursing practice.

C. This item is necessary to clarify the fee.

D. This item is necessary to prevent licensees from avoiding the

late application fee. Without this requirement licensee's who are due to renew registration could wait one more day and reregister without paying a late application fee. The requirement is reasonable as licensees who can present evidence of submission of an incomplete or incorrect renewal application prior to the renewal deadline do not have to pay late application fee.

E. This item is necessary to clarify the current competency requirements for licensees.

Subp. 2a. Continuing education.

Requiring professional nurses to submit evidence of meeting the requirements in parts 6310.2800 and 6310.2900 in the 24 months immediately preceding submission of the application for reregistration is not new. Beginning April 1, 1988 it is reasonable to require the continuing education evidence from only the professional nurses whose registration expired within the two years immediately preceding application for reregistration. It is necessary to maintain the continuing education requirement for nurse's who were eligible to renew in order to prevent that group from avoiding the continuing education requirement. It is reasonable that nurses who should have renewed have to report continuing education participation when they reregister.

Proposed new requirements in subparts 6 and 7 make it possible to repeal the continuing education requirement for nurses whose registration has expired more than two years ago. This is necessary so the board is not overregulating professional nurses.

Subp. 3. Substitution for continuing education.

The merger of the rules requires clarification that this requirement continues to apply only to professional nurses.

Subp. 4. Requirements if not registered for five years or more.

This requirement is not new for practical nurses. The reorganization of

the rules will cause the present part to be repealed. There are only two changes from the requirement as it is now stated in part 6310.7800, subpart 2.

One change is to add language so that to be acceptable, compliance regarding current competency may occur within the five year period before board action on the application rather than have to continue to occur before submittal of the application. This clarification is necessary to permit practical nurses submitting incomplete applications to meet the requirements and become reregistered.

The other change in the requirement is the elimination of the option of submitting "such other similar evidence" of current competency. The deletion of this item is reasonable as experience has established that the specified forms of evidence are sufficient and no similar evidence has been received. The repeal is needed to reduce confusion of reregistration applicants about the optional requirements.

Subp. 5. Evidence of good moral character and mental health.

This requirement is necessary to continue implementation of Minnesota Statutes sections 148.211, subd. 1 and 148.291, subd. 1. It is reasonable to expect licensees who do not have current registration to attest to their good moral character and good mental health because they have the most intimate and comprehensive information about themselves. It is reasonable to ask moral character and mental health related questions of those applying for reinstatement of their registration as similar questions are asked of all applicants for licensure. Reregistering licensees should be held responsible for proving that they still meet the requirement of good moral character and good mental health. However, it is reasonable to indicate that if there is information that creates a doubt about the licensee's good moral character and/or good mental health the board does have the authority to require more than paper certification regarding good moral character and good mental health.

The board has authority via Minnesota Statutes sections 148.261 and 148.297 to revoke licensure for such reasons as proof that the person employed fraud or deceit in procuring a license or registration or has been convicted of a felony or gross misdemeanor. Items A through E relate to the causes for licensure denial and revocation. Item F relates directly to the individual's mental health. This part is restricted to those individuals in the hospital for treatment of mental illness. It is reasonable to restrict it to those individuals who are hospitalized since hospitalization is required by individuals who can no longer cope. Discharge or referral to outpatient treatment is indicative of the individual's ability to again cope.

Subp. 6. Acceptable practice requirement.

The board has the responsibility under Minnesota Statutes sections 148.231, subd. 5. and 148.294, subd. 3 to make a determination that professional and practical nurses desiring to resume practice in Minnesota are currently competent to do so. The licensees who apply for reregistration are nurses who have not renewed their registration because of an oversight, or because they have either temporarily left nursing or have been practicing nursing in another state or country. The length of time between registration and reregistration may vary from one day to fifty years. In 1986, 848 professional nurses and 475 practical nurses reregistered.

The background about the development of subparts 6 and 7 may be of interest. In 1985 the board received recommendations from the Nurse Practice Act Steering Committee which was comprised of representatives from the board, Sigma Theta Tau, Minnesota League for Nursing, Minnesota Nurses Association, Minnesota Licensed Practical Nurses association and Professional and Technical Health Care Employees Union Local 113. The board referred to the Registration Committee for study that group's recommendation to require incrementally more



stringent requirements for reregistration based on years out of practice.

The board's registration committee explored alternative mechanisms for determining that licensees are currently competent to return to practice. The National Council of State boards of Nursing, Inc. (NCSBN) defines current competency as having the ongoing ability to render safe, direct nursing care or the ongoing ability to make sound judgment upon which that nursing care is based. The alternative mechanisms were evaluated in light of available resources, accessibility, validity and reliability. Any continued competency regulation is somewhat costly to the board, the employer, the licensee and the public. However, incompetent nursing practice may ultimately be more expensive.

Because current research does not support any single method of ensuring continued competence the Registration Committee recommended the alternative of requirements found in subparts 6 and 7. The acceptable practice requirement is necessary to determine if a licensee is currently competent to resume nursing in Minnesota or if the refresher course required in subpart 7 must be completed before practice authorization (registration certification) is issued. On September 26, 1986 the NCSBN reported that as of 1984 fourteen states required a refresher course for re-entry into nursing practice and ten states had a minimal practice requirement.

Proof of acceptable nursing practice within the last four years will alleviate the need for proof that the licensee has taken a refresher course. Refresher course teachers have found that while refresher courses may be helpful to licensees who have been out of practice three years, a refresher course is not essential until the licensee has been away from nursing practice four or more years. It is estimated that 45 percent of reregistering licensees would be able meet this requirement and would not need a refresher course.

There is no point in beginning to require proof of current practice until

the refresher courses are ready to accept nurses who cannot meet the acceptable practice requirement. Therefore, implementation of this requirement is delayed until April 1, 1988 to permit nurse educators to modify refresher courses to meet the criteria in subpart 7.

For implementation, it is necessary to specify the amount of acceptable practice required within the last four years. To avoid acceptance of one day of employment as an indicator of competence, an arbitrary boundary must be established. Three hundred twenty hours of practice is the minimal amount needed to determine a licensee is able to provide nursing care. The requirement is reasonable as it will assure that licensees will have at least practiced 40 hours a week for eight weeks or practiced eight hours a month for forty months.

A. It is necessary to specify the kinds of practice and practice sites which will be acceptable. The requirement is reasonable as it encompasses all kinds of practice in any setting.

B. This item is necessary to assure that the practice used to meet this requirement has not been unlawful. It is reasonable that licensees not be able to meet the requirement through practice that was not legally authorized.

C. This requirement is necessary to clarify the functions that will constitute acceptable practice for professional nurses and practical nurses. Use of the statutory practice definitions and acceptance of the responsible person's indication that a nursing license is required is in keeping with the board's current practices. The requirement is reasonable as the board must have verification from a responsible party that the practice was acceptable. The requirement is not unreasonable as it permits confirmation of the licensee's practice by a wide range of responsible persons in the settings where nurses practice.

It is recognized that current competency in all settings is not guaranteed

by 320 hours of nursing practice in one or more settings. However, this requirement will provide a rationale basis for deciding whether a licensee is minimally safe to resume practice in this state or if a refresher course is needed. The requirement is reasonable as licensees who do not document sufficient acceptable practice may reregister by successfully completing a refresher course.

Subp. 7. Refresher course requirement.

Background information about the development of this requirement is presented in the explanation regarding subpart 6. The implementation date of this requirement is set at April 1, 1988 to permit nurse educators to modify refresher courses to meet this requirement.

Once the requirements for the courses have been promulgated, it is expected that refresher courses will be modified to meet the requirements. There has been informal indications from some of the refresher course teachers in the vocational system and community college system that they will be interested in making the necessary course modifications and in developing self study learning materials that can be used by licensees in any areas of the state at any time of year. Baccalaureate institutions may elect to begin offering refresher courses too.

The date for implementation was set after asking several instructors the time needed for course modifications. The time allotted is adequate for developing new courses. It will be more than adequate for modifying present courses, especially if the coordinator draws upon evaluation materials already prepared by each faculty of every nursing program preparing students for professional and practical nurse licensure. A positive response to this requirement is expected as Minnesota's post secondary institutions are used to responding to the demand for programs to enable adults to re-enter the job market. With this lead time refresher courses can be made readily available to

licensees throughout the state. Therefore, no problem is anticipated in the availability of refresher courses which meet the criteria by April 1, 1988. However, if such refresher courses do not become generally available the board can revise the implementation date.

This requirement is necessary to assure the current competency of licensees who are seeking reinstatement of their registration and who are unable to meet the acceptable practice requirement. To assure such licensees are ready to practice, it is necessary to require successful completion of the refresher course. This requirement is in keeping with the fact that the rapid expansion and technology makes education a life long process. Without this requirement licensees could begin but not complete the course or might not be evaluated or could be evaluated but not receive a passing grade.

It is reasonable to require that the affidavit be signed by the person responsible for the refresher course as that person will be responsible for seeing that a determination regarding successful completion is made. The affidavit is necessary to avoid licensees claiming to have successfully completed the refresher course when they did not do so. It is necessary to specify that the refresher course be completed within the 24 months immediately preceding board action on the application to assure that the knowledge and skills the licensee obtained in the refresher course have not become obsolete.

A. It is necessary to require that the coordinator of the refresher course be a registered nurse to assure that the person responsible for the presentation of nursing theory and skill and evaluation of students is a person who is acquainted with nursing. The requirement is reasonable in that all other qualifications of the coordinator may be judged by licensees wishing to take a refresher course.

B. This requirement is necessary to assure that the course will



prepare licensees for resumption of practice. If the clinical experience component was not required, licensees might elect to not take that component or coordinators might offer courses which did not include this vital component. Educators who have dealt with inactive licensees wishing to resume practice find that it is crucial to expose these students to current day practices in clinical settings before they assume sole responsibility for ministering to patients. The most frequently cited difficulty inactive nurses have been found to have upon return to practice, according to the nursing refresher course literature, is general lack of self-confidence. The best way to build confidence in practice can be accomplished in refresher courses which include exposure to practice in the current-day work world. Such exposure may be gained only in actual care settings.

It is reasonable to specify the nursing abilities to be evaluated and to let the coordinator determine the amount of time necessary for theory and clinical experience within that boundary. This discretion is necessary to permit accommodation to teaching the amount of theory and skill needed and the methods used in teaching as well as accommodation to the various learning rates of these adult students. Specifying the nursing abilities that must be evaluated will assure the course will be long enough for students to accomplish the specified student outcomes (nursing abilities). The coordinator will be able to individualize the course as needed to assist students who, due to their various backgrounds, will all have different learning needs in preparing to demonstrate that they possess the required nursing abilities. Specifying the nursing abilities that are required will also facilitate testing out any students who are unable to verify acceptable practice but not feel the need for a complete refresher course.

It is necessary to permit the preparation of self study materials so coordinators can prepare materials that will make it possible for licensees to

take refresher courses when they want to and to do so near their homes. Without this feature refresher courses could not be available in places where or at times when there are not enough students to support offering a classroom course. The development of home study materials will also be a boon to licensees who need to continue to care for small children or an ill partner while taking the course. It would be unreasonable not to permit coordinators and students to utilize this legitimate teaching-learning method.

It is necessary to permit licensees to arrange for the clinical experience with the coordinator's approval so licensees in sparsely populated areas of the state will not have to move to another community for a coordinator arranged clinical experience. The North Dakota Board of Nursing has found that permitting self-study and self-arranged clinical experiences has worked well in their state which also has many areas without post-secondary educational institutions and areas without clinical facilities large enough to accommodate a group of students. Allowing individuals to arrange their own clinical experience will also make it possible for the coordinator to individualize the course for students in urban as well as rural areas who wish preparation in a particular clinical setting.

C. This item is necessary to assure that each refresher course student will have demonstrated to the instructor the ability to combine the nursing abilities required of students initially seeking licensure. The nursing abilities in subparts of 6301.1800 and 6301.1900 were taken from the statutory definitions of practical and professional nursing. The nursing abilities represent steps in or ways of performing the nursing functions drawn from the legal practice definitions found in Minnesota Statutes, sections 148.171, paragraph 3 and 148.29, subd. 4.

The nursing abilities are goal oriented and general in nature. The

abilities are reasonable as they cause nurses to focus on promoting health rather than waiting for patients to evidence needs to problems. The list of nursing abilities is not exhaustive. When these abilities were justified at the time the program approval rules were promulgated in 1982-1983, each ability was proven to be essential to the provision of minimally complete and safe nursing care.

It is reasonable to require licensees who have not practiced for 4 or more years and who wish to return to practice in Minnesota to demonstrate that they have the same nursing abilities that are required of graduates entering practice. The ability to practice can be measured. It is reasonable to do so to assure the public that nurses can do nursing.

Evaluation of the ability to combine nursing actions is necessary to assure that licensees are able to provide a coordinated, interrelated performance of nursing actions. The practice of nursing itself requires that nurses combine nursing abilities. The nature of nursing is such that nurses rarely exhibit a single ability exclusively when caring for patients. The ability to combine nursing actions indicates that the licensee is able to maintain the integrity of the patient as a human being.

Combining abilities from at least three categories of nursing practice is necessary to assure the licensee is able to establish sequence and coordinate a series of actions. Combining from at least three categories will determine if the licensee can obtain internal harmony and consistency among the different actions required.

The number of nursing abilities to be evaluated may be of special concern to refresher course coordinators. Because all practical and professional nurses are licensed as generalists, there is no way to reduce the abilities to be evaluated. However, there is no limitation on the number of abilities that may be evaluated in combination. Coordinators may combine the abilities so it will

be possible to evaluate for all the nursing abilities in one or two evaluation situations for practical nurses and in four or five evaluation situations for professional nurses.

The context in which nurses practice has variables that cannot be replicated in a classroom laboratory. Therefore, licensees must be evaluated while caring for actual patients in clinical settings. It is necessary to require evaluation of all the nursing abilities in clinical settings in order to determine if the licensee who has not practiced for four or more years can function in current practice settings. This requirement does not preclude preliminary evaluations of nursing abilities in an educational laboratory. The components of the evaluation in clinical settings will need to be structured by the coordinator to the extent necessary to assure the opportunity to judge the licensee's ability to coordinate and interrelate the actions taken.

Having the refresher course coordinator evaluate the reregistration applicant's ability to combine all of the nursing abilities is a reasonable way to assure that the applicant still has the ability to practice nursing as defined by law. The board has imposed no constraints on the coordinator's freedom of choice in designing evaluation methods. There are many ways in which an evaluator may collect enough data about a student's performance to judge if the criteria are met and the standard set as the basis for decision is met or exceeded. The coordinator may also elect to use evaluation methods already developed by faculties of nursing programs preparing students for licensure.

Minnesota nurses are licensed as generalists. While some licensees may not plan to immediately engage in practice that encompasses all nursing functions, it is reasonable to require demonstration of all nursing abilities as the registration certificate, once issued, will enable them to engage in all nursing functions. The public must be able to rely on licensees with current



registration certificates being able to carry out with a minimal degree of safety, all of the functions authorized by law. If nursing abilities are not needed in employment such as in reviewing insurance claims, the employer should not specify licensure as an employment requirement. If an employer believes a professional nurse returning to work in a specialized setting such as the operating room does need nursing abilities, it is likely the employer needs an operating room technician rather than a registered nurse. But if an employer requires an employee to have a professional or practical nursing license, the employer must be able to rely on the nurse having at least the same nursing abilities as new graduates.

Subp. 8. Limited registration certificate.

This requirement is necessary as clinical facilities may require licensees taking a refresher course to have legal authorization to practice before accepting them as participants in a clinical experience. Before issuing a limited registration certificate, it is reasonable for the board to determine, through an affidavit of enrollment that is signed by the refresher course coordinator, that the applicant is enrolled in a refresher course. The issuance of a registration certificate to a licensee who meets this requirement is reasonable as the certificate will be limited to the participation in the clinical experience component of the refresher course. The certificate will be valid for no more than 90 days.

Subp. 9. Waiver.

This requirement is necessary as approximately 50 percent of the boards of nursing in other U.S. jurisdictions require individuals applying for licensure to prove that they have current licensure or registration in another state. It is possible that a Minnesota licensee who has not practiced for more than four years may need to seek reregistration in Minnesota in order to obtain licensure in another state. For such a licensee who is already residing in another state,

it may be impossible to arrange for the required refresher course clinical experience in that state. It would be unreasonable to require Minnesota licensees in other states who do not want to practice in Minnesota to return to Minnesota to complete a refresher course. Therefore, it is reasonable to permit a licensee who resides in another state and who is reregistering for the purpose of licensure in another state to be reregistered without meeting the Minnesota refresher course requirement.

Subp. 10. Refresher course audit.

Permitting the board to audit the application materials of a licensee who met the criteria in subpart 7. is necessary to assure that the refresher course the licensee took did indeed meet the criteria. The requirement is a reasonable way to assure compliance with these criteria without establishing a costly prior approval criteria system. The staff will, of course, review courses for refresher course coordinators who wish to know if their courses meet the criteria.

Subp. 11. Nullification and reapplication.

It is reasonable to specify the length of time a licensee has to complete a reregistration application. This requirement is needed to deal with the people who are unable to complete the application or who may procrastinate or who do not notify the board they have changed their minds about completing reregistration. The requirement is reasonable as licensees who still want to reregister may do so by submitting another application.

The requirement is reasonable as completing the application in a six month period after filing the application or beginning the clinical component of a refresher course will not be a hardship. After six months the information that has been provided will have become outdated or the reregistration requirements may have changed. Storing such applications after six months would present a

problem.

Subp. 12. First renewal following reregistration.

This requirement is necessary in order to clarify for licensees the renewal requirements which they are expected to meet.

6310.3300 CHANGE OF NAME AND ADDRESS ON RECORDS.

Subp. 1. Name change.

The changes in this part are necessary due to the changes in definitions.

Subp. 2. Address change.

The changes in this part are necessary due to the changes in definitions.

6310.3400 DUPLICATE LICENSE AND REPLACEMENT DOCUMENTS.

Subp. 1. License.

The changes in this part are necessary as all fees are placed in part 6310.3600 for ready reference.

Subp. 2. Registration certificate.

The changes in this part are consistent with the changes in the definitions. The computer system being installed in the board office will permit issuance of a replacement registration certificate.

It is necessary to require the notice be sent to the board in writing so the board has the nurse's statement that the certificate was not received. Such a requirement is a reasonable way to reduce the chances of issuing a replacement registration certificate to an imposter.

It is reasonable to change the length of time during which a licensee will, without cost, be issued a replacement certificate from 90 days to 60 days as licensees who do not receive their registration certificates will be able to notify the board in writing well within that length of time. Until the registration certificate is received, licensees do not know if they have been authorized to continue practice. It is necessary to reduce as much as possible the length of time in which licensees may not bother to determine if their

registration has been renewed.

#### 6310.3500 VERIFICATION OF MINNESOTA LICENSE.

##### Subp. 1. Verification of licensure.

The changes in this part are necessary to fully implement Minnesota Statutes sections 148.231, subd. 6 and 148.294, subd. 4 which authorize the board to verify Minnesota licensure to an agency, facility, school or institution as well as to licensing authorities in other jurisdictions. It is reasonable to repeal this part regarding the fee for verification as it is stated in part 6310.3600.

##### Subp. 1a. Verification of examination scores.

This requirement is necessary to clarify that the board does supply examination scores upon request and payment of fee.

##### Subp. 2. Copies of license application.

It is necessary to clarify that copies of license application materials as well as transcripts may be purchased. It is reasonable to specify that the board will not supply transcripts or other application materials which are available from nursing programs in the United States as obtaining such copies from the original source will not be a hardship. Repealing the previous language is necessary to enable the board to supply such materials to nurses from other countries. Foreign educated licensees find the current requirement to be a burden as it often takes a long time to get documents from other countries.

#### 6310.3600 REGISTRATION FEES.

##### Subp. 1. Amount.

None of these fees or the amounts of the fees are new. These fees have been removed from individual parts and put together to facilitate ready reference. If any future changes in fee amounts become necessary, changing one



part is more efficient than changing many parts.

Subp. 2. Effective date.

These fees have been effective since January 1, 1987. The addition to this part is necessary to clarify that fees will not be refunded. It is reasonable to specify that these fees are nonrefundable as they are earned whether they result in the end product of the service being issued.

6310.3700 DISHONORED CHECKS.

Subp. 1. Service charge.

This requirement is authorized by Minnesota Statute section 332.50, subd. 2. The service charge is necessary to offset the cost of trying to collect the fee for which the dishonored check was submitted. This requirement is reasonable as the agency permits the submission of personal checks for registration and verification.

Subp. 2. Nullified registration.

It is only reasonable to nullify registration obtained by use of a dishonored check when the dishonored check is not replaced and the service charge is not paid. This part is necessary so the end product of the service does not remain valid when the fees have not been paid.

Subp. 3. Additional fee.

This requirement is necessary to permit the board to continue to try to collect money for a dishonored check which was not replaced and for a service charge that was not paid. It is only reasonable to collect this money for services which were provided before it was known the check was dishonored.

6330.0600 LIST OF NURSE ANESTHESIA PROGRAMS OF STUDY.

Subpart. 1. Alabama.

A. - D. Unchanged.

Subp. 2. California.

A. - D. Unchanged.

E. This change is necessary to accurately reflect the current name of the program.

Subp. 3. Colorado.

This change is necessary to accurately reflect the current name of the program.

Subp. 4. Connecticut.

A. This change is necessary to accurately reflect the current name of the program.

B. This change is necessary to accurately reflect the current name of the program.

C. Unchanged.

Subp. 5. Delaware.

A. and B. Unchanged.

Subp. 6. District of Columbia.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 7. Florida.

A. and B. Unchanged.

Subp. 8. Georgia.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 9. Hawaii.

This change is necessary to accurately reflect the current name of the program.

Subp. 10. Illinois.

A. - D. Unchanged.

Subp. 11. Kansas.

A. This change is necessary to accurately reflect the current name of the program.

B. and C. Unchanged.

D. This change is necessary to accurately reflect the current name of the program.

Subp. 12. Kentucky.

Unchanged.

Subp. 13. Louisiana.

This change is necessary to accurately reflect the current name of the program.

Subp. 14. Maine.

A. and B. Unchanged.

C. This change is necessary to accurately reflect the current name of the program.

Subp. 15. Maryland.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

C. This change is necessary to accurately reflect the current name of the program.

Subp. 16. Massachusetts.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

C. This change is necessary to accurately reflect the current name of the program.

D. Unchanged.

Subp. 17. Michigan.

A. This change is necessary to accurately reflect the current name of the program.

B. This change is necessary to accurately reflect the current name of the program.

C. Unchanged.

D. This change is necessary to accurately reflect the current name of the program.

E. This change is necessary to accurately reflect the current name of the program.

Subp. 18. Minnesota.

A. - D. Unchanged.

E. This change is necessary to accurately reflect the current name of the program.

F. Unchanged.

G. This change is necessary to accurately reflect the current name of the program.

H. - P. Unchanged.

Q. This change is necessary to accurately reflect the current name of the program.

Subp. 19. Mississippi.

Unchanged.

Subp. 20. Missouri.

A. This addition of a newly accredited program is necessary according to part 6330.0500, subp. 1.

B. Unchanged.



C. This change is necessary to accurately reflect the current name of the program.

D. This change is necessary to accurately reflect the current name of the program.

Subp. 21. Nebraska.

A. This change is necessary to accurately reflect the current name of the program.

B. Unchanged.

Subp. 22. New Hampshire.

Unchanged.

Subp. 23. New Jersey.

A. This change is necessary to accurately reflect the current name of the program.

B. Unchanged.

Subp. 24. New York.

A. and B. Unchanged.

C. This change is necessary to accurately reflect the current name of the program.

D. - H. Unchanged.

Subp. 25. North Carolina.

A. - C. Unchanged.

D. This change is necessary to accurately reflect the current name of the program.

Subp. 26. North Dakota.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

C. Unchanged.

Subp. 27. Ohio.

A. - C. Unchanged.

D. This change is necessary to accurately reflect the current name of the program.

E. - H. Unchanged.

Subp. 28. Pennsylvania.

A. and B. Unchanged.

C. This change is necessary to accurately reflect the current name of the program.

D. This change is necessary to accurately reflect the current name of the program.

E. - G. Unchanged.

H. This change is necessary to accurately reflect the current name of the program.

I. and J. Unchanged.

K. This change is necessary to accurately reflect the current name of the program.

L. - O. Unchanged.

P. This change is necessary to accurately reflect the current name of the program.

Q. This change is necessary to accurately reflect the current name of the program.

R. This change is necessary to accurately reflect the current name of the program.

S. and T. Unchanged.

U. This change is necessary to accurately reflect the current name of the program.

V. and W. Unchanged.

Subp. 29. Rhode Island.

A. and B. Unchanged.

Subp. 30. South Carolina.

A. and B. Unchanged.

Subp. 31. South Dakota.

A. and B. Unchanged.

Subp. 32. Tennessee.

A. and B. Unchanged.

C. This change is necessary to accurately reflect the current name of the program.

D. Unchanged.

Subp. 33. Texas.

A. This change is necessary to accurately reflect the current name of the program.

B. This change is necessary to accurately reflect the current name of the program.

C. This change is necessary to accurately reflect the current name of the program.

D. Unchanged.

E. This change is necessary to accurately reflect the current name of the program.

F. This change is necessary to accurately reflect the current name of the program.

G. This change is necessary to accurately reflect the current name of the program.

H. Unchanged.

Subp. 34. Virginia.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

C. This change is necessary to accurately reflect the current name of the program.

D. Unchanged.

E. This change is necessary to accurately reflect the current name of the program.

F. Unchanged.

G. This change is necessary to accurately reflect the current name of the program.

Subp. 35. Washington.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 36. West Virginia.

A. and B. Unchanged.

Subp. 37. Wisconsin.

A. This change is necessary to accurately reflect the current name of the program.

B. Unchanged.

C. This change is necessary to accurately reflect the current name of the program.

D. Unchanged.

**6330.0700 LIST OF NURSE MIDWIFERY PROGRAMS OF STUDY.**

Subp. 1. Arizona.

Unchanged.



Subp. 2. California.

A. - D. Unchanged.

Subp. 3. Colorado.

Unchanged.

Subp. 4. Connecticut.

This change is necessary to accurately reflect the current name of the program.

Subp. 5. District of Columbia.

Unchanged.

Subp. 6. Florida.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 7. Georgia.

Unchanged.

Subp. 8. Illinois.

A. This change is necessary to accurately reflect the current name of the program.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 9. Kentucky.

A. and B. Unchanged.

Subp. 10. Maryland.

This change is necessary to accurately reflect the current name of the program.

Subp. 11. Minnesota.

Unchanged.

Subp. 12. Mississippi.

Unchanged.

Subp. 13. Missouri.

Unchanged.

Subp. 14. New Jersey.

This change is necessary to accurately reflect the current name of the program.

Subp. 15. New York.

A. Unchanged.

B. This change is necessary to accurately reflect the current name of the program.

Subp. 16. Ohio.

This change is necessary to accurately reflect the current name of the program.

Subp. 17. Oregon.

Unchanged.

Subp. 18. Pennsylvania.

A. and B. Unchanged.

Subp. 19. South Carolina.

This change is necessary to accurately reflect the current name of the program.

Subp. 20. Tennessee.

This change is necessary to accurately reflect the current name of the program.

Subp. 20a. Texas.

This addition of the newly accredited program is necessary according to part 6330.0500, subp. 1.

Subp. 21. Utah.

Repealer

6310.2800, subpart 3.

It is necessary to repeal this subpart on July 31, 1987 as the renewal fee is specified in 6310.3600, subpart 1, item A, which will become effective on August 1, 1987.

6310.7600 - 6310.8100

It is necessary to repeal these parts on July 31, 1987 as the practical nursing requirements and procedures for registration, change of name and address, duplicate and replacement documents and verification of Minnesota license are specified in 6310.2600 - 6310.3700, which will become effective on August 1, 1987.

6310.3100, subpart 3.

The repeal of this subpart on March 31, 1988 is necessary because the addition to subpart 2a specifies that on April 1, 1988 only the professional nurses whose registration expired within the last two years must submit evidence of meeting continuing education requirements for reregistration. Because subpart 2a has narrowed down this requirement to only the professional nurses who should not be able to evade their continuing education obligation, it is reasonable to not permit substitution of employment for the continuing education report.

6310.3100, subpart. 4.

It is necessary to repeal this subpart on March 31, 1988 as the requirement will be replaced on April 1, 1988 when practical nurses who are reregistering will be required to document meeting the acceptable nursing practice requirement in subpart 6. or prove satisfactory completion of a refresher course that meets the criteria specified in subpart 7.

6310.2900, subpart 6a.

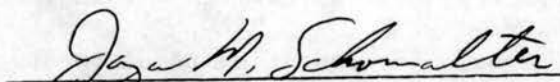
It is reasonable to repeal this subpart on December 31, 1993 as by that

date the registration expiration dates of licensees in the SWL system will have all been converted to relate to their month and year of birth.

Dated: April 3, 1987

STATE OF MINNESOTA

BOARD OF NURSING

  
\_\_\_\_\_  
JOYCE M. SCHOWALTER, RN  
EXECUTIVE DIRECTOR



STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE

MINNESOTA BOARD OF NURSING

In the Matter of the Proposed  
Adoption of Amendments to  
Rules of the State Board of  
Nursing Governing the Definition  
of Nursing Personnel in the Program  
Approval Rules, Registration and  
Related Topics, and the Advanced  
Nursing Practice List of Programs.

SUPPLEMENTAL STATEMENT OF  
NEED AND REASONABLENESS

The following facts and explanations are presented in response to the testimony received during the 30 day comment period. Written testimony was received from three individuals and one professional association. Even though the proposed rules were not controversial, the testimony was useful in identifying two areas in the Statement of Need and Reasonableness that were incorrect.

Correction to the Statement of Need and Reasonableness, page 16, regarding Subpart 5.

It is necessary to correct the second sentence regarding subpart 5. That sentence should read: "It will now be possible to maintain record of receipt of applications and fees so it will no longer be necessary to return all incomplete applications.

The need for correction is due to inadvertent use of the word "reject" in this sentence. The substitution of the word "return" is necessary to be consistent with the proposed rule. The board will continue to reject incomplete applications even though the incomplete application materials will be retained whenever possible.

Correction to the Statement of Need and Reasonableness, page 25, regarding Subpart 5, item F.

It is necessary to correct the three sentences at the end of the section

regarding subpart 5. The three sentences were inadvertently taken from another document and do not apply to item F.

Item F. is necessary to permit the board to seek further evidence regarding the mental health of an applicant for reregistration when evidence is received which implies an applicant for reregistration may be mentally incompetent or mentally ill. Seeking further evidence is in keeping with Minnesota Statutes, sections 148.211, subd. 1(b) and 148.291, subd. 1(b) which specifies mental health as one of the requirements for licensure. Mental health is defined for these rules as an individual's emotional or intellectual ability to adapt to a changing environment.

In cases where the board receives evidence implying mental incompetence or mental illness, it is reasonable that the board seek evidence to determine whether the applicant for reregistration can adapt to a changing environment. An applicant's emotional or intellectual ability must be such that the nurse can adapt to sudden changes in the patient care environment.

A licensee who is reregistered must be able to safeguard patients during environmental changes. If a licensee's mental functions are impaired to the extent that adaptations to environmental changes cannot be made, the consequences to patients in that environment could be serious indeed. For example, during a heat wave, a geriatric patient would need to be given increased fluids to avoid life-threatening dehydration and electrolyte imbalance.

Dated: June 1, 1987

STATE OF MINNESOTA

BOARD OF NURSING

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