

Minnesota Attorney General: Administrative Rules Proceedings

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Version 3
August 20, 2018

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DEPARTMENT: Office of the Attorney General

STATE OF MINNESOTA

OFFICE MEMORANDUM

DATE: September 7, 1990

TO: JOYCE M. SCHOWALTER
Board of Nursing

FROM: MARTHA J. CASSERLY
Special Assistant
Attorney General

PHONE: 296-6839

SUBJECT: In the Matter of the Adopted Rule Relating to Licensing and Registration

The above-referenced rule has been approved as to its legality by the Attorney General on September 5, 1990.

Enclosed is your copy of the approved rule. This office has already filed two copies with the Secretary of State, who will forward one copy to the Revisor of Statutes. The fourth is being retained by this division of the Attorney General's Office for its records.

Also enclosed are any petitions, requests, submissions or comments along with any extra copies of documents which you submitted to the Attorney General.

Your next step is to arrange for publication of the Notice of Adoption in the State Register. In a day or two, you should receive from the Revisor's Office three copies of the notice of adoption of your rule. You should submit two copies of the Notice of Adoption to the State Register for publication. A permanent rule without a hearing does not become effective until five days after a notice of adoption is published in the State Register in accordance with Minn. Stat. § 14.27. An emergency rule becomes effective five working days after approval by the Attorney General; however, the agency must publish a notice in the State Register in accordance with Minn. Stat. § 14.34.

If you have any questions in this regard, please contact me.

MJC:sc

cc: Audrey Kaiser Manka
William Brown, Chief Judge
MaryAnn Hruby

MJC

RULE REVIEW CHECKLIST

File No. 1731
DATE RECEIVED 8-24-90
REVIEW DATE 9-4-90
DUE DATE 9-7-90
(DIS)APPROVED 9-5-90 mjc
WITHDRAWN

Docket No. 05.0009.0481
ADOPTED W/O HEARING
EMERGENCY RULE
TO REVISOR ON 8/24/90
REVISOR (DIS)APPROVED 8/30/90
FILED W/SEC. OF STATE 9/7/90
RETURNED TO AGENCY

Rule as adopted (4 copies)

Dec 4, 1989 Notice to Solicit Outside Information/Opinion (if applicable)

_____ Date published in State Register

_____ Comments

✓ Board's Authorizing Resolution

April 6, 1990 Date adopted

_____ Proposed Rule

_____ Revisor's Certificate

✓ Notice of Intent to Adoppt Rule, subds. 4 and 11

148.191 Statutory Authority

✓ Small Business Statement

NA Expenditure of public money statement

May 11, 1990 Signature

_____ Statement of Need and Reasonableness (if applicable)

_____ Small Business Statement

✓ Fees - § 16A.128

✓ Affidavit of Mailing Notice of Intent to Adopt Rule

May 23, 1990 Dated 30/25 days before adoption

✓ Notice attached indicates it is attached

_____ Copy of rule or summary attached

_____ Publication in State Register

May 29, 1990 Date 30/25 days before adoption

✓ 180-day deadline from:

NA Effective date of law requiring rule (14.12) (both rules) Amendments not new mat.

✓ end of comment period (§ 14.26) (rules without hearing)

_____ effective date of statutory authority (§ 14.29) (emergency rules)

✓ Resolution Adopting

Aug 3, 1990 Date adopted

_____ Findings of Fact, Conclusions & Order Adopting

Aug 3, 1990 Date

_____ Declaration of Attorney

Audrey Monka Name of SAAG representing agency

_____ Notice of Submission to Attorney General (if applicable)

_____ Affidavit of Mailing Notice to Attorney General (if applicable)

Rec 8-30-90

Comments - we need call Shelly

26 - 2 withdrew

8-28-90 Left Shelly a note to get information

Board of Nursing

Adopted Permanent Rules Relating to Licensing and Registration

Rules as Adopted

PROFESSIONAL AND PRACTICAL PROGRAM APPROVALS

6301.1700 CLINICAL SETTINGS.

Subpart 1. **Use of clinical settings.** Whenever a program uses a clinical setting to meet the requirements of parts 6301.1500 to 6301.2200 registered professional nurse faculty members must be responsible for determining clinical learning activities and for guiding and evaluating students in that setting.

Subps. 2. to 4. [See Repealer.]

6301.1800 NURSING ABILITIES TO BE EVALUATED.

[For text of subps 1 to 5, see M.R.]

Subp. 6. **Delegated medical treatment.** Students must be evaluated for the ability to:

[For text of items A to L, see M.R.]

M. observe effects of the administration of a prescribed medication;

N. follow procedure for working with controlled substances in the administration of prescribed medication; and

O. implement treatment related to cardiopulmonary function.

[For text of subps 7 and 8, see M.R.]

LICENSURE OF PROFESSIONAL AND PRACTICAL NURSES

6305.0100 DEFINITIONS.

Subpart 1. **Scope.** As used in parts 6305.0100 to 6305.0700, the following terms have the meanings given them.

[For text of subps 2 to 7, see M.R.]

Subp. 7a. **Disaster.** "Disaster" means an occurrence such as a tornado, storm, flood, high water, earthquake, drought, blizzard, pestilence, fire, explosion, building collapse,

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commercial transportation wreck, or other situation that causes human suffering or create human needs that require substantial assistance and exceed the health care resources of the community.

[For text of subps 8 and 9, see M.R.]

Subp. 10. **Final term of study.** "Final term of study" means the last academic period (quarter, term, session, or semester) that is necessary for an applicant to complete graduation requirements. The term must have officially begun at least one day before the examination.

[For text of subps 11 to 14, see M.R.]

Subp. 15. and 16. [See Repealer.]

[For text of subps 17 to 21, see M.R.]

6305.0200 PURPOSE AND AUTHORITY.

Parts 6305.0100 to 6305.0700 are adopted pursuant to Minnesota Statutes, section 148.191. The parts pertain to the authorization to practice, the requirements for licensure by examination, the requirements for licensure without examination, and nullification of applications. Part 6305.0400 applies to applicants who have not passed an examination acceptable to the board. Part 6305.0500 applies to applicants who have passed an examination acceptable to the board.

6305.0300 AUTHORIZATION TO PRACTICE NURSING.

Subpart 1. **Required authorization.** A Minnesota license and current registration certificate or a permit is required if an individual practices professional nursing as defined in Minnesota Statutes, section 148.171, clause (3), or practical nursing as defined in Minnesota Statutes, section 148.171, clause (5), whether for monetary compensation or as a volunteer, or if an individual is a faculty member for an out-of-state nursing or nursing assistant program and is supervising nursing students or nursing assistant students in Minnesota except as provided in Minnesota Statutes, section 148.271. If the permit is revoked or expires, whichever occurs first, an applicant must not practice nursing until a license has been issued.

Exceptions as identified in Minnesota Statutes, section

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148.271, include the following:

A. Nursing assistance in an emergency as referenced in Minnesota Statutes, section 148.271, clause (1), is interpreted to include nursing service as follows:

(1) to patients during transport into, through, or out of Minnesota including during flights and while at airports or depots or during the period of stabilization in preparation for transport;

(2) for disaster relief during a period not to exceed seven days; and

(3) providing nursing services at the scene of an accident.

B. Formal, structured course of study as referenced in Minnesota Statutes, section 148.271, clause (6), is interpreted to mean that the course is sponsored by an educational institution or the educational department of a health care facility; has written, measurable objectives; has an organized plan of study which includes instructors and, when appropriate, clinical supervisors; uses a formalized method of evaluating student performance; and issues a document which verifies completion of the course.

C. Nursing program approved by the board as referenced in Minnesota Statutes, section 148.271, clause (7), is interpreted to include any nursing program in the United States or Canada which is approved by the state or province in which the program is located. However, the supervising instructor must hold a Minnesota registered nurse license and current registration.

Subp. 1a. **Authorized abbreviations.** The categories of nursing personnel listed below may use abbreviations as follows:

A. Public health nurse, abbreviated "PHN."

B. Registered nurse, abbreviated "RN," may only be used by a registered nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

C. Licensed practical nurse, abbreviated "LPN," may

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only be used by a licensed practical nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

D. Registered nurses and licensed practical nurses who are licensed in Minnesota but who are not currently registered may use the abbreviation "RN" and "LPN" respectively for personal identification provided it is not used for monetary gain.

E. Nursing assistants who are on the long-term care registry of the board are nursing assistants/registered, abbreviated "NA/R."

[For text of subps 2 and 3, see M.R.]

Subp. 4. **Eligibility for permit to practice nursing with direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing under the direct supervision of a registered nurse if the applicant:

[For text of items A to F, see M.R.]

G. has graduated from an approved program as specified in part 6305.0400, subpart 4 or 5; and

[For text of item H, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Permit to practice nursing without direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing that does not require direct supervision if the applicant:

[For text of items A to D, see M.R.]

Subp. 7. **Length of permits.** The permit authorizing practice under the direct supervision of a registered nurse expires eight weeks after the administration of the examination or upon the applicant's notification by the board of failure on the examination, whichever occurs first. The board may extend this permit an additional eight weeks if the applicant's results are delayed due to a processing delay by another nurse licensing agency or <u>if the applicant has come under investigation by the</u>

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board after the issuance of the initial permit until the matter is resolved for the applicant who is under investigation by the board.

The permit authorizing practice without direct supervision expires six months after the date of issue, but the board shall extend this permit if licensure cannot occur because of a processing delay by another nurse licensing agency.

Subp. 8. **Revocation of permit.** The board shall revoke a permit in the following situations.

A. The board shall revoke a permit if the permit holder:

(1) does not write the scheduled examination;

(2) has been notified of the results of the examination;

(3) is licensed by the board;

(4) did not write in another jurisdiction an examination acceptable to the board;

(5) did not pass an examination in another jurisdiction with a score acceptable to the board;

(6) is not eligible for licensure; or

(7) did not graduate.

B. The board may act to decide whether to revoke a permit if the board determines that:

(1) an applicant for licensure by examination did not meet the graduation requirements in part 6305.0400, subpart 4 or 5;

(2) an applicant for licensure without examination presented fraudulent evidence of licensure in another jurisdiction or Canadian province; or

(3) an applicant has engaged in conduct which constitutes grounds for denial of a license.

Subp. 9. **Designated titles.** The permit holder who is an applicant for registered nurse licensure by examination shall use the title "graduate nurse," abbreviated "GN." The permit holder who is an applicant for registered nurse licensure without examination shall use the title registered nurse,

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abbreviated "RN." The permit holder who is an applicant for licensed practical nurse licensure by examination shall use the title "graduate practical nurse," abbreviated "GPN." The permit holder who is an applicant for licensed practical nurse licensure without examination shall use the title "licensed practical nurse," abbreviated "LPN."

6305.0400 REQUIREMENTS FOR LICENSURE BY EXAMINATION.

Subpart 1. **Licensure application.** An applicant shall obtain the application forms for licensure and instructions for filing from the board. An applicant shall respond to questions on the application that relate to the grounds for disciplinary action in Minnesota Statutes, section 148.261. An applicant shall submit true information. Falsification or omission of information provides grounds for disciplinary action. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

[For text of subp 2, see M.R.]

Subp. 3. **Further evidence.** The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261.

Subp. 4. **Graduation from approved professional nursing program.** An applicant who has graduated from an approved professional nursing program is eligible for licensure as a registered nurse if the applicant's nursing education includes classroom and clinical instruction. The learning activities must have been provided according to either item A or B.

[For text of items A and B, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Transcripts necessary for applicants educated in foreign countries.** An applicant who has graduated from a program in another country shall submit a transcript in addition to the affidavit of graduation required in subpart 8. The applicant shall also submit a course description if the entries on the transcript are not self-explanatory as to course

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content. In lieu of the course description, an official of the program may complete a form provided by the board. On a notarized form, the official must attest to the applicant's participation in classroom and clinical instruction consistent with the required learning activities in part 6315.0400, subpart 4, for registered nurse applicants or subpart 5 for licensed practical nurse applicants. If the transcript and course description are not in English, a translation must be done by an agency or individual specified by the board. The cost of this translation must be paid by the applicant.

If an official transcript cannot be submitted because of political unrest or alleged governmental reprisal if the school releases the documents or if the original school records were destroyed because of a disaster or record destruction decision, or the school is closed, the board will accept one of the following:

A. verification of the applicant's nursing education from the Commission on Graduates of Foreign Nursing Schools;

B. verification of the applicant's nursing education from a licensing authority;

C. verification of the applicant's nursing education from a credentialing body for refugees which was established by a national or international nursing or governmental organization;

D. a copy of a transcript of the applicant's nursing education from a college or university that accepted the applicant for further study, the copy certified as a true and correct copy of the transcript in the files and records of the college or university; or

E. a copy of the transcript of the applicant's nursing education from another licensing authority, the copy certified as a true and correct copy of the transcript in the files and records of the licensing authority.

If the entries on an official transcript are not self-explanatory as to course content and further educational information cannot be obtained because of political unrest,

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alleged governmental reprisal if the school releases the information, or if the records have been destroyed, the board shall accept the verifications of item A or C.

[For text of subp 7, see M.R.]

Subp. 8. **Affidavit of graduation.** An applicant shall have an affidavit of graduation completed and signed by an official of the nursing program. The completed affidavit must bear the seal or stamp of the program. For an applicant who has graduated from a program in another country, if the school does not notarize or does not complete the affidavit, the transcript may be accepted in lieu of the notarization. An applicant must submit the affidavit before the examination unless the applicant will be writing the examination before graduation. An applicant who graduates after writing an examination shall submit the affidavit after graduation but before licensure. An applicant who fails an examination shall submit the affidavit before reexamination.

If the board finds after the examination has been written that the affidavit of graduation was completed in error, the applicant's permit shall be considered void. The examination results shall not be released nor action taken on the application until the applicant has graduated. Graduation requirements must be met no later than the next available school term following notification of nongraduation. If there is evidence that the applicant was aware of nongraduation status before the examination and did not inform the board, the matter may be handled through a disciplinary proceeding.

[For text of subp 9, see M.R.]

Subp. 10. **Fees.** The board shall charge the following fees.

A. The licensure fee is $75 for an applicant for registered nurse licensure and $50 for an applicant for licensed practical nurse licensure. This fee must be paid to the board and must be received before evaluation of an applicant's qualifications for examination and licensure.

B. The examination fee is set by the examination vendor and must be submitted to the agency specified by the

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board each time an applicant wants to be scheduled to write an examination.

C. The reexamination fee is $50 for an applicant for registered nurse licensure and $40 for an applicant for licensed practical nurse licensure. The fee must be paid to the board.

D. A late filing fee of $50 must be remitted to the board if one or more of the following materials is not properly postmarked or delivered by the deadline:

(1) licensure application and fee;

(2) examination application and fee;

(3) reexamination application and fee.

E. Personal checks are not accepted. Each remittance must be in the form of United States currency, cashier's check, or money order.

F. If for any reason a license is not issued, fees are not refundable.

Subp. 11. **Deadline for submitting material.** The deadline for submitting all required applications and fees is 56 calendar days preceding an examination. The board shall use the postmark and address to determine compliance. If the required applications and fees are not received on time, the applicant must pay a late filing fee.

Late applications and fees, and the late filing fee if applicable, must be received no later than 4:30 p.m. two working days before the examination. All other documents must be received no later than 4:30 p.m. the day before an examination.

Subp. 12. **Written examination.** The licensure examinations are the examinations of the National Council of State Boards of Nursing, Inc. An applicant must receive a pass on the National Council Licensure Examination.

[For text of items A to F, see M.R.]

G. An applicant who fails an examination may apply for reexamination on a reexamination application supplied by the board and must obey all other applicable rules. An applicant shall respond to questions on the application that relate to the grounds for disciplinary action listed in Minnesota Statutes,

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section 148.261. The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action. An applicant must submit true information. Falsification or omission of information provides grounds for denial of a license. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

H. An applicant may write the examination for Minnesota licensure specified in this subpart in another jurisdiction if the board authorizes the applicant to do so and the jurisdiction is willing to administer the examination. The applicant must meet any procedural requirements and pay any fees set by the other jurisdiction.

6305.0500 REQUIREMENTS FOR LICENSURE WITHOUT EXAMINATION.

Subpart 1. **Proof of licensure in another jurisdiction or Canada.** To be licensed to practice nursing in Minnesota without writing an examination, an applicant must submit proof, on a form provided by the board, that the applicant is licensed in another jurisdiction or Canadian province and has passed an examination acceptable to the board as listed in subparts 11 and 12. Proof of licensure must be obtained from the jurisdiction or Canadian province in which the applicant wrote an acceptable examination as well as the jurisdiction or Canadian province in which the applicant was most recently employed. Proof of licensure must be obtained from the jurisdiction in which the applicant was first licensed, if this is different from the jurisdiction in which the applicant was licensed based on an acceptable examination.

Subp. 2. **Licensure application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall respond to questions on the application that relate to the grounds for disciplinary action listed in Minnesota Statutes, section 148.261. An applicant shall submit true information. Falsification or omission of any information provides grounds for denial of a license. The application must

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be notarized. If an application is received without a fee, it shall be returned to the applicant. Application for licensure begins on the date when an application and fee are received by the board.

Subp. 3. **Fee.** The fee for licensure is $55. This fee must be paid to the board and must be received before evaluation of an applicant's qualifications for licensure. Personal checks are not accepted. Remittance must be in the form of United States currency, cashier's check, or money order. If for any reason a license is not issued, the fee is not refundable.

Subp. 4. **Further evidence.** The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261.

[For text of subp 5, see M.R.]

Subp. 6. **Waiver of graduation requirement.** The board shall waive the requirement of graduation from an approved nursing program if:

[For text of item A, see M.R.]

B. an applicant for licensed practical nurse licensure has been licensed by another jurisdiction and passed an acceptable examination as specified in subpart 12 and has had at least 4,000 clock hours of employment as a licensed practical nurse in the 60 calendar months preceding application for licensure in Minnesota.

Subp. 7. **Current nursing education or experience.** An applicant who has been employed in nursing or who has graduated from an approved nursing program during the two years immediately preceding application for licensure is exempt from the continuing education requirements in subparts 8 and 9. Employment references must be submitted to verify employment dates. An affidavit of graduation or evidence from the nurse licensing agency in another jurisdiction or Canadian province must be submitted to verify the graduation date.

Subp. 8. **Continuing education for registered nurses.** An applicant for registered nurse licensure must participate in

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continuing education activities as follows:

A. If the applicant has not been employed as a registered nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in continuing education activities which meet the criteria in part 6310.2800 and must submit an affidavit of continuing education. The continuing education participation must have occurred within the 24 months preceding board action on the application for licensure.

B. If an applicant for registered nurse licensure has not been employed as a registered nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within the 24 months immediately preceding board action on the application for licensure.

Subp. 9. **Continuing education for practical nurses.** An applicant for licensed practical nurse licensure must participate in continuing education as follows:

A. If the applicant has not been employed as a licensed practical nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in at least 15 clock hours of nursing-related continuing education courses. <u>The continuing education may be part of an orientation program provided by an employer or potential employer.</u> The continuing education must have occurred within the 24 months preceding board action on the application for licensure. The applicant must submit an affidavit of continuing education.

B. If an applicant for licensed practical nurse licensure has not been employed as a licensed practical nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within

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the 24 months immediately preceding board action on the application for licensure.

Subp. 10. **Affidavit of graduation.** An applicant must submit an affidavit of graduation, signed by an official of the nursing program and bearing the seal or stamp of the program. If an official school transcript is submitted, it shall be accepted in lieu of an affidavit of graduation. An affidavit is not required if the licensing authority in another jurisdiction or Canadian province verifies graduation from an approved program. If a licensed practical nurse applicant has not graduated from an approved program, the applicant shall send his or her employer a form supplied by the board for documentation of 4,000 clock hours of employment. The form must be completed by the employer and returned to the board. The board shall determine if the employment fulfills the requirement of Minnesota Statutes, section 148.211, subdivision 4.

Subp. 11. **Acceptable examinations for registered nurses.** The requirement of having passed a written examination acceptable to the board for registered nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Registered Nurses (SBTPE-RN) before 1957;

B. passed the SBTPE-RN after December 31, 1956, and before July 1, 1982, with a scaled score of at least 350 on each of the five parts;

C. passed NCLEX-RN after June 30, 1982, and before February 1, 1989, with a scaled score of 1,600; or

D. passed NCLEX-RN after January 31, 1989, with a designation of pass.

Subp. 12. **Acceptable examinations for practical nurses.** The requirement of having passed a written examination acceptable to the board for licensed practical nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Practical Nurses

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(SBTPE-PN) before 1960;

B. passed the SBTPE-PN after December 31, 1959, and before January 1, 1970, with a scaled score of at least 370;

C. passed the SBTPE-PN after December 31, 1969, and before October 1, 1982, with a scaled score of at least 400;

D. passed NCLEX-PN after September 30, 1982, and before October 1, 1988, with a scaled score of at least 350; or

E. passed NCLEX-PN after September 30, 1988, with a designation of pass.

Subp. 13. **Insufficient score.** An applicant for licensure whose examination score does not meet the Minnesota score requirement in subpart 11 or 12 must write the examination currently used in Minnesota, achieve the passing score established for the current examination, and meet the requirements in part 6305.0400, subparts 2, 10, 11, and 12.

REGISTRATION OF PROFESSIONAL AND PRACTICAL NURSES

6310.2600 DEFINITIONS.

[For text of subps 1 to 4, see M.R.]

Subp. 5. **Continuing education report form.** "Continuing education report form" means the printed document provided by the board for use in reporting the information required in parts 6310.2800 to 6310.2900.

Subp. 5a. **Deferment.** "Deferment" means postponement of participation in and reporting of all or part of the continuing education activities for renewal.

[For text of subp 6, see M.R.]

Subp. 6a. **Late application fee.** "Late application fee" means the penalty fee authorized in Minnesota Statutes, section 148.231, subdivision 1.

[For text of subps 7 to 8, see M.R.]

Subp. 8a. and 8b. [See Repealer.]

[For text of subps 8c and 9, see M.R.]

Subp. 9a. **Permit.** "Permit" means the document issued by the board to an applicant for reregistration that authorizes practice of professional or practical nursing in Minnesota

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during participation in a formal, structured refresher course for nurses that includes clinical practice.

Subp. 9b. **Practical nurse.** "Practical nurse" means a person authorized by the board to engage in the practice of practical nursing as defined in Minnesota Statutes, section 148.171, clause (5).

Subp. 9c. **Professional nurse.** "Professional nurse" means a person authorized by the board to engage in the practice of professional nursing as defined in Minnesota Statutes, section 148.171, clause (3).

[For text of subps 10 to 14, see M.R.]

Subp. 15. **Registration period.** "Registration period" means a 24-month interval of time for which a registration certificate is issued. The period ends the last day of the licensee's month of birth in an even- or odd-numbered year according to the licensee's year of birth. The length may vary for a nurse's first registration period or reregistration period. For registration renewal, the period starts on the first day of the month following expiration of the previous registration period.

[For text of subp 16, see M.R.]

6310.2800 REGISTRATION RENEWAL REQUIREMENTS.

Subpart 1. **Requirement.** Each licensee is responsible for applying for renewal of registration if the person wishes to be authorized to practice as a professional or practical nurse in Minnesota.

Licensees are required to complete a registration renewal application and pay a renewal fee. In addition, professional nurses are required to accrue 30 contact hours of acceptable continuing education activities for registration renewal. Contact hours shall be accrued during a 24-month continuing education participation period ending one month before the professional nurse's registration expiration date. The number of contact hours and length of participation period may vary for a professional nurse's first registration renewal following

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licensure or reregistration according to part 6310.2900, subpart 6.

Subp. 2. **Demonstration of professional nursing skill.** At least one of the acceptable continuing education activities required for registration renewal shall require the professional nurse to show evidence of having successfully demonstrated to the instructor skill in performing one or a portion of a professional nursing function as indicated in Minnesota Statutes, section 148.171, clause (3).

Subp. 4. **Application submission.** Licensees shall submit a completed, signed application for registration renewal and a renewal fee to the board office. Renewal applications from professional nurses must be accompanied by a completed continuing education report form meeting the requirements of parts 6310.2800 and 6310.2900. Renewal applications, fees, and continuing education report forms must be received in the board office in the month preceding the month in which the applicant's registration expires. Resubmission of a previously incomplete or incorrect application form and renewal fee received before the month in which the licensee's registration expires, shall constitute timely submission if received in the board office on or before the licensee's registration expiration date.

Subp. 5. **Late application fee.** A licensee filing for registration renewal shall pay a late application fee, as well as the renewal fee for the current renewal period if the application or renewal fee is received in the board office during the month in which the licensee's registration expires.

[For text of subp 6, see M.R.]

Subp. 7. **True information.** A licensee shall submit true information. Falsification of any evidence for any registration period or failure to comply with parts 6310.2800 and 6310.2900 for any two registration periods shall provide grounds for disciplinary action.

[For text of subp 8, see M.R.]

6310.2900 REGISTRATION RENEWAL PROCEDURES.

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[For text of subpart 1, see M.R.]

Subp. 2. **Application mailing date.** The board shall mail a registration renewal application at least three full calendar months before a licensee's registration expiration date. The renewal application shall be mailed to the licensee's last known address. Failure to receive the registration renewal application shall not relieve a licensee of the obligation to comply with parts 6310.2800 and 6310.2900.

Subp. 3. **Late submission.** An application and renewal fee received in the board office during the month in which the licensee's registration expires, shall not be processed and shall be returned to a licensee for payment of a late application fee.

A renewal application and fee received one or more days after the licensee's registration expiration date shall be returned with an application for reregistration. The board will nullify incomplete registration renewal applications that are not completed within 30 days following notification of the deficiency or the licensees' registration expiration dates, whichever is later. For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process provided in Minnesota Statutes, section 138.17, subdivision 7.

Subp. 4. **Continuing education ~~evidence~~ report form.** For professional nurses, the registration renewal application shall include a continuing education report form. Information to be provided by the professional nurse on a report form shall include:

[For text of items A to D, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Initial registration and first registration renewal.** An individual who is issued a license by the board shall also be registered by the board. The licensure fee shall serve as payment for the initial registration period.

The initial registration period following licensure or reregistration is from six to 29 full calendar months ending the

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last day of the licensee's month of birth in an even-numbered year if the year of birth was an even-numbered year or in an odd-numbered year if the year of birth was an odd-numbered year.

Professional nurses shall accrue for the first registration renewal following licensure and reregistration the number of contact hours of acceptable continuing education activities equivalent to the number of full months in their initial registration period. The contact hours shall include at least one successful demonstration of skill in performing a portion of a component of professional nursing. The continuing education participation period begins on the date the license was issued or reregistration was completed and extends through the month immediately preceding the month in which initial registration expires.

[For text of subp 6a, see M.R.]

Subp. 7. **Substantiation of continuing education activities.** Following each renewal date the board may select a sample of professional nurses applying for registration renewal and require substantiation of participation in acceptable continuing education activities. Selected professional nurses shall submit in writing the following data obtained from the provider of each continuing education activity which verifies the information on the continuing education report form:

[For text of items A to F, see M.R.]

G. Proof of compliance with part 6310.2800, subpart 2.

H. For continuing education activities meeting part 6310.2800, subpart 6, item L, a copy of the certificate may be required and considered sufficient.

I. Any additional documentation the board deems necessary.

Subp. 8. **Insufficient hours.** If a professional nurse cannot demonstrate sufficient hours of acceptable continuing education activities for a continuing education participation period, the number of hours lacking may be deferred. If the licensee has the required number of contact hours but the contact hours do not include a demonstration of skill, the

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licensee must defer one contact hour. The deferred hours shall be added to the contact hours required in the immediately succeeding continuing education participation period. If the licensee does not renew for the continuing education participation period that included the deferred hours, the deferred hours will be required for reregistration. This part may be applied once for any one professional nurse.

[For text of subps 9 and 10, see M.R.]

6310.3100 REREGISTRATION.

Subpart 1. **Removal of name from list.** The names of licensees who do not return the complete renewal application, renewal fees, and late application fees by the registration expiration date shall be removed from the list of individuals authorized to practice professional or practical nursing during the current renewal period.

Subp. 2. **Reregistration requirements.** Reregistration shall be granted when the licensee has met all reregistration requirements. A licensee who applies for reregistration shall:

A. Submit a completed and signed reregistration application;

B. Respond to questions on the application that relate to the grounds for disciplinary action listed in Minnesota Statutes, section 148.261. The licensee shall submit true information. Falsification or omission of information provides grounds for disciplinary action. The board may require further information of the licensee in order to determine whether the licensee has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261;

C. Pay the registration renewal fee for the current period;

D. Pay the late application fee if registration expired within the last two years unless the licensee submitted evidence of an incomplete or incorrect renewal application before the registration renewal deadline; and

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E. Submit evidence of meeting all relevant requirements specified in subparts 2a to 8.

Subp. 2a. **Continuing education.** A professional nurse must submit evidence of meeting all requirements specified in parts 6310.2800 and 6310.2900. Participation in continuing education activities must have occurred during the 24 months immediately before board action on the application for reregistration. This requirement applies only to professional nurses whose registration expired within the two years immediately preceding application for reregistration.

Subp. 2b. **Deferred contact hours.** A professional nurse who has deferred continuing education contact hours on record shall make up all the deferred contact hours before board action on the application for reregistration. The nurse shall submit a report of participation in the required number of contact hours and submit the substantiating documents required in part 6310.2900, subpart 7. The board shall audit the substantiating documents to be certain that the requirements in part 6310.2900, subpart 7, are met.

Subp. 5. [See Repealer.]

Subp. 6. **Acceptable practice requirement.** A licensee without current registration who is applying for reregistration must submit proof of at least 320 hours of acceptable nursing practice in the four years immediately preceding receipt by the board of the application for reregistration or meet the requirement in subpart 7. To be acceptable the practice must have:

A. consisted of employment or volunteer nursing in any setting, or participation in clinical nursing courses or any combination of these activities;

B. occurred only while the licensee was authorized to practice nursing unless legal authorization for the practice was not required in the jurisdiction where it occurred; or

C. included one or more of the functions defined in Minnesota Statutes, section 148.171, clause (3), for professional nurses or Minnesota Statutes, section 148.171,

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clause (5), for practical nurses, or be determined by the patient, employer, volunteer supervisor, patient's family or physician, instructor, or peer as requiring the appropriate nursing license.

Subp. 7. **Refresher course requirement.** Licensees without current registration who do not demonstrate compliance with the acceptable practice requirement in subpart 6, shall successfully complete a refresher course and must submit an affidavit of successful completion of a refresher course which occurred within the 24 months immediately preceding board action on the application for reregistration. The affidavit must be signed by the person responsible for the course, hereinafter, coordinator. For a professional nurse, the refresher course may be used to fulfill the continuing education activities required in subpart 2a, provided the refresher course meets the criteria in part 6310.2800.

The refresher course must have been designed to meet the following criteria:

[For text of items A to C, see M.R.]

Subp. 8. **Permit to practice.** To participate in the clinical component of a refresher course, a licensee must have a permit. To receive a permit, the licensee must submit the completed reregistration application, fee, and an affidavit of enrollment in the refresher course that includes the request for a permit. When issued, the permit is valid only for participation in the clinical component of the refresher course and for no longer than 90 days. While the permit is in effect, a registered nurse may use the title registered nurse, abbreviated "RN," and a licensed practical nurse ~~licensee~~ may use the title licensed practical nurse, abbreviated "LPN." The affidavit must be signed by the refresher course coordinator.

[For text of subps 9 and 10, see M.R.]

Subp. 11. **Nullification and reapplication.** The board will nullify incomplete reregistration applications that are not completed within the six month period following receipt of fees or within the six month period following issuance of a permit

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for practice in a clinical component of a refresher course.

For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process in Minnesota Statutes, section 138.17, subdivision 7. If a licensee fails to submit an application and fee within six months after the board received any other documents relating to the application, the board may destroy the documents.

If a licensee whose application has been nullified wants to be reregistered, a new reregistration application must be submitted and all applicable reregistration requirements must be met.

[For text of subp 12, see M.R.]

6310.3300 CHANGE OF NAME AND ADDRESS ON RECORDS.

Subpart 1. **Name change.** The licensee who has changed names shall notify the board in writing as soon as possible and request a revised registration certificate. When requesting a revised registration certificate, the licensee shall return the current certificate to the board. The board may require substantiation of the name change by requiring official documentation.

[For text of subp 2, see M.R.]

6310.3400 DUPLICATE AND REPLACEMENT DOCUMENTS.

[For text of subpart 1, see M.R.]

Subp. 2. **Registration certificate.** A duplicate registration certificate shall not be issued. If a registration certificate is lost, stolen, or destroyed, the licensee shall submit a written explanation of the situation. On written request of the licensee, a replacement registration certificate may be issued for a fee. The replacement registration certificate shall be marked "Replacement."

If a licensee does not receive a registration certificate which has been issued and notifies the board office in writing within 60 days of the effective date, a replacement registration certificate may be issued without a fee.

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Subp. 3. **Lost, stolen, or destroyed documents.** If a licensee's license or registration certificate or permit is lost, stolen, or destroyed, the licensee must report the loss to the board.

6310.3600 REGISTRATION FEES.

Subpart 1. **Amount.** The amount of fees shall be as follows:

A. registration renewal, $32 per registration period;

B. late application, $20;

C. replacement license, $20;

D. replacement registration certificate, $5;

E. verification of licensure status, $20;

F. verification of examination scores, $20;

G. a copy of licensure application materials, $20; and

H. service charge for a dishonored check, $15.

Subp. 2. **Nonrefundable.** All fees are nonrefundable.

PUBLIC HEALTH NURSE REGISTRATION

6316.0100 REQUIREMENTS FOR REGISTRATION AS A PUBLIC HEALTH NURSE.

Subpart 1. **Licensure and current registration.** An applicant for registration as a public health nurse must be licensed and currently registered to practice professional nursing in Minnesota.

Subp. 2. **Application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall submit true information. The application must be notarized.

Subp. 3. **Fee.** An applicant must submit a fee of $25 with the application. This fee must be paid to the board in United States currency, cashier's check, or money order. Personal checks are not accepted. If for any reason a public health nurse registration certificate is not issued, the fee is not refundable.

Subp. 4. **Education.** An applicant must have a baccalaureate or higher degree with a major in nursing. The applicant's course work must have included theory and clinical

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practice in public health nursing. The theory portion of the public health nursing education must have been at least 30 hours in length. The public health nursing content in a hospital diploma or associate degree program does not qualify. At a minimum, the public health nursing education must have prepared the nurse to:

A. identify the incidence, distribution, and control of disease in a population, as well as the risk factors and environmental factors related to communities;

B. identify populations at high risk of illness, disability, premature death, or poor recovery;

C. intervene with high-risk populations;

D. evaluate the effect of interventions on the health status of a population; and

E. use community services, institutional resources, and other health care providers.

Subp. 5. **Affidavit of graduation.** An applicant must submit an affidavit of graduation from the institution that awarded the baccalaureate or higher degree. The affidavit must be completed by an official of the institution and bear the seal or stamp of the institution. An applicant may submit an official transcript in lieu of the affidavit.

Subp. 6. **Affidavit of completion of public health nursing education.** An applicant must submit an affidavit of completion of public health nursing education. Included with the affidavit must be evidence that the applicant successfully completed public health nursing education which meets the requirements in subpart 4. The affidavit must be completed by an official of the institution that provided public health nursing education which meets the requirements in subpart 4.

6316.0200 ISSUANCE OF PUBLIC HEALTH NURSE REGISTRATION CERTIFICATE.

Subpart 1. **Public health nurse registration certificate.** The board shall issue a public health nurse registration certificate to an applicant when the requirements have been

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met. The public health nurse registration certificate is valid only in conjunction with a current registration certificate for professional nursing.

Subp. 2. **Length of public health nurse registration certificate.** The public health nurse registration certificate is in effect when the nurse has a license and is currently registered to practice professional nursing in Minnesota. If a license is revoked or the nurse allows the registration to expire, the public health nurse registration certificate becomes invalid.

Subp. 3. **Replacement document.** If a nurse requests the replacement of a public health nurse registration certificate, the nurse shall explain in writing the reason for requesting a replacement. On written request of the nurse and the payment of a $5 fee, a replacement public health nurse registration certificate may be issued. The replacement certificate shall be marked "Replacement." The board may require substantiation of a name change by requiring official documentation. A replacement certificate shall not be issued for a change of address.

6316.0300 APPLICATION NULLIFICATION.

Subpart 1. **Time frame for nullification.** The board will nullify an application for public health nurse registration if the applicant fails to complete the application process within one year after submission of the application.

Subp. 2. **Destruction of application materials and forfeiture of fee.** For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process specified in Minnesota Statutes, section 138.17, subdivision 7. If the applicant failed to submit the application and fee within one year after the board received any other documents relating to the application, the board may destroy the documents.

NURSING PRACTICE AND DISCIPLINE

6321.0100 DEFINITIONS.

Subpart 1. **Scope.** The definitions in this part apply to

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~~this chapter~~ Minnesota Statutes, sections 148.171 to 148.285.

Subp. 2. **Monitoring.** "Monitoring" means the periodic inspection by a registered nurse or licensed practical nurse of a directed function or activity and includes watching during performance, checking, and tracking progress, updating a supervisor of progress or accomplishment by the person monitored, and contacting a supervisor as needed for direction and consultation.

Subp. 3. **Supervision.** "Supervision" means the guidance by a registered nurse for the accomplishment of a function or activity. The guidance consists of the activities included in monitoring as well as establishing the initial direction, delegating, setting expectations, directing activities and courses of action, critical watching, overseeing, evaluating, and changing a course of action.

6321.0200 POLICY.

Nothing in this chapter is intended to limit the ability of licensed practical nurses to function according to the provisions of the Nurse Practice Act, Minnesota Statutes, sections 148.171 to 148.285.

6321.0500 REPORTING OBLIGATIONS.

Subpart 1. **Institutions.** The reporting required of institutions in Minnesota Statutes, section 148.263, subdivision 2, is interpreted to include resignation in lieu of discharge, discharge, suspension, or other forms of discipline of a nurse for failure to carry out the responsibilities of a nurse. Examples of actions to be reported include but are not limited to dismissal of probationary employees, suspensions other than investigatory suspensions, restrictions or limitations of a nurses's practice, demotion, and discharge from employment.

Subp. 2. **Licensed professionals.** The reporting required of licensed professionals in Minnesota Statutes, section 148.263, subdivision 3, is interpreted to exclude the professional knowledge obtained in the course of a health professional-client relationship when the client is a nurse and

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the health professional successfully counsels the nurse to limit or withdraw from practice to the extent required by the impairment.

6330.0100 DEFINITIONS.

Subpart 1. **Advanced nursing practice.** "Advanced nursing practice" means the performance of health services by certified registered nurse anesthetists, abbreviated, "CRNA," and certified nurse midwives, abbreviated "CNM," certified nurse practitioners, abbreviated "RN,C," and certified clinical specialists in psychiatric or mental health nursing, abbreviated "RN,CS," as defined in Minnesota Statutes, section 62A.15, subdivision 3a.

Subp. 2. **Board.** "Board" means the Minnesota Board of Nursing.

Subp. 3. to 5. [See Repealer.]

6330.0200 PURPOSE.

Parts 6330.0100 to 6330.0300 establish criteria ~~certification of~~ for organizations which certify professional nurses to engage in advanced nursing practice. Part 6330.0350 lists professional nursing organizations that fulfill the criteria. The criteria and list are established under Minnesota Statutes, section 62A.15, subdivision 3a, in order to qualify advanced nursing services for reimbursement by third parties.

6330.0300 CRITERIA TO BE A PROFESSIONAL NURSING ORGANIZATION WHICH CERTIFIES NURSES IN ADVANCED NURSING PRACTICE.

In order to have the authority to certify professional nurses in advanced nursing practice as referenced in Minnesota Statutes, section 62A.15, subdivision 3a, the organization must have met the following criteria:

A. be national in the scope of its credentialing;

B. have an education requirement of at least one academic year or nine calendar months or its equivalent of full-time study beyond that required for registered nurse licensure;

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C. have practice requirements beyond those required for registered nurse licensure;

D. have testing requirements beyond those required for registered nurse licensure;

E. issue certificates to qualified professional nurses; and

F. periodically review the qualifications of certified individuals.

6330.0350 PROFESSIONAL NURSING ORGANIZATIONS WITH AUTHORITY TO CERTIFY.

The following organizations meet the criteria in part 6330.0300 and have the authority to certify registered nurses in the advanced nursing practice categories listed:

A. American Association of Nurse Anesthetists Council on Certification and Council on Recertification: nurse anesthetist.

B. American College of Nurse-Midwives: nurse midwife.

C. American Nurses Association:

(1) nurse practitioner:

(a) gerontological nurse practitioner;

(b) adult nurse practitioner;

(c) family nurse practitioner;

(d) school nurse practitioner;

(e) pediatric nurse practitioner.

(2) clinical specialist in psychiatric or mental health nursing:

(a) clinical specialist in adult psychiatric and mental health nursing;

(b) clinical specialist in child and adolescent psychiatric and mental health nursing.

D. National Certification Board of Pediatric Nurse Practitioners and Nurses: pediatric nurse practitioner.

E. Nurses Association of American College of Obstetrics and Gynecology Certification Corporation:

(1) obstetric-gynecological nurse practitioner;

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(2) neonatal nurse clinician/practitioner.

6330.0500 MAINTENANCE OF LISTS.

Subpart 1. **List updating.** Each January the board shall add to the list professional nursing organizations which have met the criteria within the previous year and which certify nurses for advanced nursing practice, and remove from the list organizations which no longer meet the criteria.

Subp. 2. [See Repealer.]

RENUMBER. Minnesota Rules, parts 6315.0600 and 6315.0700 are renumbered as 6305.0600 and 6305.0700.

REPEALER. Minnesota Rules, parts 6301.0100, subpart 3; 6301.1200, subpart 6; 6301.1700, subparts 2, 3, and 4; 6310.2600, subparts 8a and 8b; 6310.3100, subpart 5; 6315.0100, subparts 15 and 16; 6330.0100, subparts 3, 4, and 5; 6330.0400; 6330.0500, subpart 2; 6330.0600; and 6330.0700, are repealed.

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APPROVED AS TO FORM AND LEGALITY

September 5 19 90

HUBERT H. HUMPHREY, III
ATTORNEY GENERAL

BY MJ Carpenter
SPECIAL ASSISTANT ATTORNEY GENERAL

STATE OF MINNESOTA
DEPARTMENT OF STATE
FILED

SEP 05 1990

Joan Anderson Growe

Secretary of State

3:45 pm

The adoption of the amendments to the rules is authorized by *Minnesota Statutes*, section 256B.04, subdivision 2, which requires the Department to make uniform rules, not consistent with law, for carrying out the medical assistance program.

The State Department of Human Services requests information and opinions concerning the subject matter of the rule. Interested persons or groups may submit data or views on the subject matter of concern in writing or orally. Written statements should be addressed to:

Eleanor Weber
Rules Division
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, Minnesota 55155-3816

Oral statements will be received during regular business hours over the telephone at (612) 296-7454 by Nancy Bishop and in person at the above address.

All statements of information and opinions shall be accepted until further notice. Any written material received by the State Department of Human Services shall become part of the rulemaking record to be submitted to the attorney general or administrative law judge in the event that the amendment of the rule is adopted.

Eleanor E. Weber
Assistant Director, Rules Division

Department of Labor and Industry

Division of Labor Standards

Notice of Prevailing Wage Determinations for Commercial Projects

On December 1, 1989 the commissioner certified prevailing wage rates for commerical construction projects in the following Minnesota counties: **ANOKA, BENTON, BIG STONE, CARVER, CHIPPEWA, CHISAGO, DAKOTA, DOUGLAS, GRANT, HENNEPIN, ISANTI, KANABEC, KANDIYOHI, MCLEOD, MEEKER, MILLE LACS, MORRISON, PINE, POPE, RAMSEY, SCOTT, SHERBURNE, STEARNS, STEVENS, SWIFT, TODD, TRAVERSE, WASHINGTON, WRIGHT.**

A copy of the determined wage rates for Minnesota counties may be obtained by contacting the Minnesota Department of Labor and Industry, Prevailing Wage Section, 443 Lafayette Road, St. Paul, Minnesota 55155. The charges for the cost of copying and mailing are $.50 for the first county and $.30 for any subsequent copies of the same or other counties. The cost for a complete set of the above counties will be $15.00. A sales tax of 6% must be added to all orders.

A check or money order payable to the State of Minnesota must accompany each request.

Ken Peterson, Commissioner
Department of Labor and Industry

Board of Nursing

Notice of Solicitation of Outside Information or Opinions Regarding Proposed Rules Relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees

NOTICE IS HEREBY GIVEN that the Minnesota Board of Nursing (hereinafter "Board") is seeking information or opinions from sources outside the Board in preparing to propose the adoption and/or revision of rules relating to licensing, registration, registration renewal, registration of public health nurses, advanced nursing practice and fees. The adoption of the rules is authorized by *Minnesota Statutes* section 148.171, subd. 2, which permits the Board to adopt rules as may be necessary to carry out the purposes of sections 148.171 to 148.285.

The Board requests information and opinions concerning the subject matter of the rules. Interested persons or groups may submit data or views on the subject matter of concern in writing or orally. Written statements should be addressed to:

Joyce M. Schowalter, RN, Executive Director
Minnesota Board of Nursing
2700 University Ave. W., #108
St. Paul, MN 55114

Oral statements will be received during regular business hours over the telephone at 612-642-0567 and in person at the above address.

All statements of information and opinions shall be accepted until April 1, 1990. Any written material received by the Board shall become part of the rulemaking record to be submitted to the Attorney General or administrative law judge in the event that the rules are adopted.

Dated: 15 November 1989

Joyce M. Schowalter, RN
Executive Director

Office of the Ombudsman for Mental Health and Mental Retardation

Notice of Meeting

The Ombudsman for Mental Health and Mental Retardation Advisory Committee will hold a general meeting at 9:00 a.m. on Friday, December 15, 1989. The meeting will be held at the Ombudsman Office, Suite 202, Metro Square Building on 7th and Robert Street, St. Paul.

State Board of Vocational Technical Education

Notice of Intent to Solicit Outside Opinion Regarding Proposed Rules Governing the Rules for Licensure of Postsecondary Technical Education Personnel

NOTICE IS HEREBY GIVEN that the State Board of Vocational Technical Education is seeking information or opinions from sources outside the agency in preparing to amend Chapter Thirty-Five: Rules for Licensure of Vocational Technical Education Personnel and specifically in Agricultural Occupations - Swine Production Management. The promulgation of these rules is authorized by *Minnesota Statutes* § 136C.04, subd. 9, and 125.185, subd. 4.

The State Board of Vocational Technical Education requests information and comments concerning the subject matter of these rules. Interested or affected persons may submit written statements of information or comment orally. Written comments should be addressed to:

Ms. Georgia Pomroy
State Board of Vocational
Technical Education
100 Capitol Square Bldg.
550 Cedar Street
St. Paul, MN 55101
(612) 296-0680

Oral statements will be received during regular business hours over the telephone at (612) 296-0680 or in person at the above address.

All statements of information and comments shall be accepted until 4:30 p.m., Thursday, January 4, 1990. Any written material received by the State Board of Vocational Technical Education shall become part of the record to be submitted to the Attorney General or Administrative Law Judge in the event the rule is adopted.

Helen Henrie, Deputy Director
State Board of Vocational
Technical Education

CERTIFICATE OF THE

BOARD OF NURSING

AUTHORIZING RESOLUTION

I, Patricia Earle, do hereby certify that I am a member and the president of the Minnesota Board of Nursing (hereinafter "Board"), a board duly authorized under the laws of the State of Minnesota, and that the following is a true, complete, and correct copy of a resolution adopted at a meeting of the Board duly and properly called and held on the 6th day of April, 1990, that a quorum was present, and that a majority of those present voted for the resolution which has not been rescinded or modified:

> RESOLVED, that Joyce M. Schowalter, Executive Director of the Board, is hereby granted the authority and directed to sign and to give the Notice Of Intent To Adopt Rules Without A Public Hearing relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees to all persons who have registered their names with the Board for that purpose, to publish the notice and rules in the State Register, and to perform any and all acts incidental thereto.

IN WITNESS WHEREOF, I have hereunto subscribed my name

this 6th day of April, 1990.

Patricia Earle

PATRICIA EARLE
President

Nancy G Malmon

Attest by one other Board Member

Board of Nursing

Proposed Permanent Rules Relating to Licensing and Registration

Rules as Proposed

PROFESSIONAL AND PRACTICAL PROGRAM APPROVALS

6301.1700 CLINICAL SETTINGS.

Subpart 1. **Use of clinical settings ~~absent affiliation.~~** ~~If~~ Whenever a program uses a clinical setting to meet the requirements of parts 6301.1500 to 6301.2200 ~~and has no affiliation with that clinical setting, then~~ registered professional nurse faculty members must be responsible for determining clinical learning activities and for guiding and evaluating students in that setting.

Subps. 2. to 4. [See Repealer.]

6301.1800 NURSING ABILITIES TO BE EVALUATED.

[For text of subps 1 to 5, see M.R.]

Subp. 6. **Delegated medical treatment.** Students must be evaluated for the ability to:

[For text of items A to L, see M.R.]

M. observe effects of the administration of a prescribed medication; ~~and~~

N. follow procedure for working with controlled substances in the administration of prescribed medication; and

O. implement treatment related to cardiopulmonary function.

[For text of subps 7 and 8, see M.R.]

LICENSURE OF PROFESSIONAL AND PRACTICAL NURSES

~~6315.0100~~ 6305.0100 DEFINITIONS.

Subpart 1. **Scope.** As used in parts ~~6315.0100~~ 6305.0100 to ~~6315.0700~~ 6305.0700, the following terms have the meanings given them.

[For text of subps 2 to 7, see M.R.]

Subp. 7a. **Disaster.** "Disaster" means an occurrence such

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as a tornado, storm, flood, high water, earthquake, drought, blizzard, pestilence, fire, explosion, building collapse, commercial transportation wreck, or other situation that causes human suffering or create human needs that require substantial assistance and exceed the health care resources of the community.

[For text of subps 8 and 9, see M.R.]

Subp. 10. **Final term of study.** "Final term of study" means the last academic period (quarter, term, session, or semester) that is necessary for an applicant to complete graduation requirements. The term must have officially begun at least one day before the examination.

[For text of subps 11 to 14, see M.R.]

Subp. 15. and 16. [See Repealer.]

[For text of subps 17 to 21, see M.R.]

~~6315.0200~~ 6305.0200 PURPOSE AND AUTHORITY.

Parts ~~6315.0100~~ 6305.0100 to ~~6315.0700~~ 6305.0700 are adopted pursuant to Minnesota Statutes, section 148.191. The parts pertain to the authorization to practice, the requirements for licensure by examination, the requirements for licensure without examination, and nullification of applications. Part ~~6315.0400~~ 6305.0400 applies to applicants who have not passed an examination acceptable to the board. Part ~~6315.0500~~ 6305.0500 applies to applicants who have passed an examination acceptable to the board.

~~6315.0300~~ 6305.0300 AUTHORIZATION TO PRACTICE NURSING.

Subpart 1. **Required authorization.** A Minnesota license and current registration certificate or a permit is required if an individual practices professional nursing as defined in Minnesota Statutes, section 148.171, clause (3), or practical nursing as defined in Minnesota Statutes, section ~~148.29~~ 148.171, ~~subdivision 4~~ clause (5), whether for monetary compensation or as a volunteer, or if an individual is a faculty member for an out-of-state nursing or nursing assistant program and is supervising nursing students or nursing assistant students in Minnesota except as provided in Minnesota Statutes,

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~~sections~~ section 148.271 ~~and 148.295~~. If the permit is revoked or expires, whichever occurs first, an applicant must not practice nursing until a license has been issued.

~~Minnesota licensure is not required for a nurse licensed in another jurisdiction who is in Minnesota as a student enrolled in a course of study which involves nursing practice, such as a course leading to a higher degree or certification in a nursing specialty or to enhanced skills in a clinical field.~~ Exceptions as identified in Minnesota Statutes, section 148.271, include the following:

A. Nursing assistance in an emergency as referenced in Minnesota Statutes, section 148.271, clause (1), is interpreted to include nursing service as follows:

(1) to patients during transport into, through, or out of Minnesota including during flights and while at airports or depots or during the period of stabilization in preparation for transport;

(2) for disaster relief during a period not to exceed seven days; and

(3) providing nursing services at the scene of an accident.

B. Formal, structured course of study as referenced in Minnesota Statutes, section 148.271, clause (6), is interpreted to mean that the course is sponsored by an educational institution or the educational department of a health care facility; has written, measurable objectives; has an organized plan of study which includes instructors and, when appropriate, clinical supervisors; uses a formalized method of evaluating student performance; and issues a document which verifies completion of the course.

C. Nursing program approved by the board as referenced in Minnesota Statutes, section 148.271, clause (7), is interpreted to include any nursing program in the United States or Canada which is approved by the state or province in which the program is located. However, the supervising instructor must hold a Minnesota registered nurse license and

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current registration.

Subp. 1a. **Authorized abbreviations.** The categories of nursing personnel listed below may use abbreviations as follows:

A. Public health nurse, abbreviated "PHN."

B. Registered nurse, abbreviated "RN," may only be used by a registered nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

C. Licensed practical nurse, abbreviated "LPN," may only be used by a licensed practical nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

D. Registered nurses and licensed practical nurses who are licensed in Minnesota but who are not currently registered may use the abbreviation "RN" and "LPN" respectively for personal identification provided it is not used for monetary gain.

E. Nursing assistants who are on the long-term care registry of the board are nursing assistants/registered, abbreviated "NA/R."

[For text of subps 2 and 3, see M.R.]

Subp. 4. **Eligibility for permit to practice nursing with direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing under the direct supervision of a registered nurse if the applicant:

[For text of items A to F, see M.R.]

G. has graduated from an approved program as specified in part ~~6315.0400~~ 6305.0400, subpart 4 or 5; and

[For text of item H, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Permit to practice nursing without direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing that does not require direct supervision if the applicant:

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[For text of items A to D, see M.R.]

Subp. 7. **Length of permits.** The permit authorizing practice under the direct supervision of a registered nurse expires eight weeks after the administration of the examination or upon the applicant's notification by the board of failure on the examination, whichever occurs first. The board ~~shall not~~ may extend this permit ~~even if an applicant passes the examination~~ an additional eight weeks if the applicant's results are delayed due to a processing delay by another nurse licensing agency or until the matter is resolved for the applicant who is under investigation by the board.

The permit authorizing practice without direct supervision expires six months after the date of issue, but the board shall extend this permit if licensure cannot occur because of a processing delay by another nurse licensing agency.

Subp. 8. **Revocation of permit.** The board shall revoke a permit in the following situations.

A. The board shall revoke a permit if the permit holder:

(1) does not write the scheduled examination;

(2) has been notified of the results of the examination;

(3) is licensed by the board;

(4) did not write in another jurisdiction an examination acceptable to the board;

(5) did not pass an examination in another jurisdiction with a score acceptable to the board; ~~or~~

(6) is not eligible for licensure; or

(7) did not graduate.

B. The board may act to decide whether to revoke a permit if the board determines that:

(1) an applicant for licensure by examination did not meet the graduation ~~requirement specified~~ requirements in part ~~6315.0400~~ 6305.0400, subpart 4 or 5;

(2) an applicant for licensure without examination presented fraudulent evidence of licensure in

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another jurisdiction or Canadian province; or

(3) an applicant has engaged in conduct which constitutes grounds for denial of a license.

Subp. 9. **Designated titles.** The permit holder who is an applicant for registered nurse licensure by examination shall use the title "graduate nurse," abbreviated "GN." The permit holder who is an applicant for registered nurse licensure without examination shall use the title registered nurse, abbreviated "RN." The permit holder who is an applicant for licensed practical nurse licensure by examination shall use the title "graduate practical nurse," abbreviated ~~as~~ "GPN." The permit holder who is an applicant for licensed practical nurse licensure without examination shall use the title "licensed practical nurse," abbreviated "LPN."

~~6315.0400~~ 6305.0400 REQUIREMENTS FOR LICENSURE BY EXAMINATION.

Subpart 1. **Licensure application.** An applicant shall obtain the application forms for licensure and instructions for filing from the board. An applicant shall respond to questions on the application that relate to ~~causes for denial of licensure listed~~ the grounds for disciplinary action in Minnesota Statutes, section 148.261 ~~for the registered nurse and Minnesota Statutes, section 148.297 for the licensed practical nurse~~. An applicant shall submit true information. Falsification or omission of information ~~constitutes unethical conduct and~~ provides grounds for ~~denial of a license~~ disciplinary action. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

[For text of subp 2, see M.R.]

Subp. 3. **Further evidence ~~of good moral character and good mental health.~~** ~~An applicant shall verify on the application that he or she is of good moral character and in good mental health. The board may require further evidence of an applicant's character or mental health if the board has information satisfying one of the following conditions:~~

~~A. implying a violation of a federal, state, or local~~

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~~law or rule;~~

~~B. constituting grounds for denial of a license, if true;~~

~~C. implying that the applicant provided inaccurate information or omitted information solicited on the licensure or examination applications;~~

~~D. pertaining to behavior of the applicant during the applicant's educational period which suggests that the applicant is not of good moral character or not in good mental health;~~

~~E. showing that the applicant may have cheated on the licensing examination;~~

~~F. showing that the applicant was discharged from employment;~~

~~G. showing that disciplinary action was taken or is pending or the applicant is under investigation by another nurse licensing agency; or~~

~~H. showing that at the time of board action on an application the applicant is hospitalized for treatment of mental illness~~ The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261.

Subp. 4. **Graduation from approved professional nursing program.** An applicant who has graduated from an approved professional nursing program is eligible for licensure as a registered nurse if the applicant's nursing education includes classroom and clinical instruction. The learning activities must have been provided ~~in accordance with~~ according to either item A or B.

[For text of items A and B, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Transcripts necessary for applicants educated in foreign countries.** An applicant who has graduated from a program in another country shall submit a transcript in addition to the affidavit of graduation required in subpart 8. The applicant shall also submit a course description if the entries

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on the transcript are not self-explanatory as to course content. In lieu of the course description, an official of the program may complete a form provided by the board. On a notarized form, the official must attest to the applicant's participation in classroom and clinical instruction consistent with the required learning activities in part 6315.0400, subpart 4, for registered nurse applicants or subpart 5 for licensed practical nurse applicants. If the transcript and course description are not in English, a translation must be done by an agency or individual specified by the board. The cost of this translation must be paid by the applicant.

If an official transcript cannot be submitted because of political unrest or alleged governmental reprisal if the school releases the documents or if the original school records were destroyed because of a disaster or record destruction decision, or the school is closed, the board will accept one of the following:

A. verification of the applicant's nursing education from the Commission on Graduates of Foreign Nursing Schools;

B. verification of the applicant's nursing education from a licensing authority;

C. verification of the applicant's nursing education from a credentialing body for refugees which was established by a national or international nursing or governmental organization;

D. a copy of a transcript of the applicant's nursing education from a college or university that accepted the applicant for further study, the copy certified as a true and correct copy of the transcript in the files and records of the college or university; or

E. a copy of the transcript of the applicant's nursing education from another licensing authority, the copy certified as a true and correct copy of the transcript in the files and records of the licensing authority.

If the entries on an official transcript are not self-explanatory as to course content and further educational

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information cannot be obtained because of political unrest, alleged governmental reprisal if the school releases the information, or if the records have been destroyed, the board shall accept the verifications of item A or C.

[For text of subp 7, see M.R.]

Subp. 8. **Affidavit of graduation.** An applicant shall have an affidavit of graduation completed and signed by an official of the nursing program. The completed affidavit must bear the seal or stamp of the program. For an applicant who has graduated from a program in another country, if the school does not notarize or does not complete the affidavit, the transcript may be accepted in lieu of the notarization. An applicant must submit the affidavit ~~prior to~~ before the examination unless the applicant will be writing the examination before graduation. An applicant who graduates after writing an examination shall submit the affidavit after graduation but before licensure. An applicant who fails an examination shall submit the affidavit before reexamination.

If the board finds after the examination has been written that the affidavit of graduation was completed in error, the applicant's permit shall be considered void. The examination results shall not be released nor action taken on the application until the applicant has graduated. Graduation requirements must be met no later than the next available school term following notification of nongraduation. If there is evidence that the applicant was aware of nongraduation status before the examination and did not inform the board, the matter may be handled through a disciplinary proceeding.

[For text of subp 9, see M.R.]

Subp. 10. **Fees.** The board shall charge the following fees.

A. The licensure fee is $75 for an applicant for registered nurse licensure and $50 for an applicant for licensed practical nurse licensure~~, effective January 1, 1987~~. This fee must be paid to the board and must be received ~~prior to~~ before evaluation of an applicant's qualifications for examination and licensure.

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B. The examination fee is set by the examination vendor and must be submitted to the agency specified by the board each time an applicant wants to be scheduled to write an examination.

C. The reexamination fee is $50 for an applicant for registered nurse licensure and $40 for an applicant for licensed practical nurse licensure~~, effective January 1, 1987~~. The fee must be paid to the board.

D. ~~Effective January 1, 1987,~~ A late filing fee of $50 must be remitted to the board if one or more of the following materials is not properly postmarked or delivered by the deadline:

(1) licensure application and fee;

(2) examination application and fee;

(3) reexamination application and fee.

E. Personal checks are not accepted. Each remittance must be in the form of United States currency, cashier's check, or money order.

F. If for any reason a license is not issued, fees are not refundable.

Subp. 11. **Deadline for submitting material.** The deadline for submitting all required applications and fees is 56 calendar days preceding an examination. The board shall use the postmark and address to determine compliance. If the required applications and fees are not received on time, the applicant must pay a late filing fee.

~~All other documents,~~ Late applications and fees, and the late filing fee if applicable, must be received no later than 4:30 p.m. two working days before the examination. All other documents must be received no later than 4:30 p.m. the day ~~prior to~~ before an examination.

Subp. 12. **Written examination.** The licensure examinations are the examinations of the National Council of State Boards of Nursing, Inc. ~~The passing score required on the National Council licensure Examination for Registered Nurses (NCLEX-RN) is a scaled score of 1,600. The passing score required on the~~

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~~National Council Licensure Examination for Practical Nurses (NCLEX-PN) is a scaled score of 350~~ An applicant must receive a pass on the National Council Licensure Examination.

[For text of items A to F, see M.R.]

G. An applicant who fails an examination may apply for reexamination on a reexamination application supplied by the board and must obey all other applicable rules. An applicant shall respond to questions on the application that relate to the grounds for disciplinary action listed in Minnesota Statutes, section 148.261. The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action. An applicant must submit true information. Falsification or omission of information provides grounds for denial of a license. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

H. An applicant may write the examination for Minnesota licensure specified in this subpart ~~12~~ in another jurisdiction if the board authorizes the applicant to do so and the jurisdiction is willing to administer the examination. The applicant must meet any procedural requirements and pay any fees set by the other jurisdiction.

~~6315.0500~~ 6305.0500 REQUIREMENTS FOR LICENSURE WITHOUT EXAMINATION.

Subpart 1. **Proof of licensure in another jurisdiction or ~~country~~ Canada.** To be licensed to practice nursing in Minnesota without writing an examination, an applicant must submit proof, on a form provided by the board, that ~~he or she~~ the applicant is licensed in another jurisdiction~~,~~ or Canadian province~~, or country~~ and has passed an examination acceptable to the board as listed in subparts 11 and 12. Proof of licensure must be obtained from the jurisdiction~~,~~ or Canadian province~~, or country~~ in which the applicant ~~was first licensed and~~ wrote an acceptable examination as well as the jurisdiction or Canadian province in which the applicant was most recently

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employed. Proof of licensure must be obtained from the jurisdiction in which the applicant was first licensed, if this is different from the jurisdiction in which the applicant was licensed based on an acceptable examination.

Subp. 2. **Licensure application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall respond to questions on the application that relate to ~~causes for denial of licensure~~ the grounds for disciplinary action listed in Minnesota Statutes, section 148.261.~~, for the registered nurse and Minnesota Statutes, section 148.297, for the licensed practical nurse.~~ An applicant shall submit true information. Falsification or omission of any information ~~constitutes unethical conduct and~~ provides grounds for denial of a license. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant. Application for licensure begins on the date when an application and fee are received by the board.

Subp. 3. **Fee.** The fee for licensure is $55 ~~for registered nurse applicants and $55 for licensed practical nurse applicants, effective January 1, 1987~~. This fee must be paid to the board and must be received ~~prior to~~ before evaluation of an applicant's qualifications for licensure. Personal checks are not accepted. Remittance must be in the form of United States currency, cashier's check, or money order. If for any reason a license is not issued, the fee is not refundable.

Subp. 4. Further evidence ~~of good moral character and good mental health. An applicant shall verify on the application that he or she is of good moral character and in good mental health. The board may require further evidence of an applicant's character or mental health if the board has information satisfying one of the following conditions:~~

~~A. implying a violation of a federal, state, or local law or rule;~~

~~B. constituting grounds for denial of a license, if true;~~

~~C. showing that disciplinary action was taken or is~~

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~~pending-or-the-applicant-is-under-investigation-by-another-nurse licensing-agency;~~

~~D.--showing-that-the-applicant-provided-inaccurate information-or-omitted-information-solicited-on-the-licensure application;~~

~~E.--showing-that-the-applicant-was-discharged-from employment;-or~~

~~F.--showing-that-at-the-time-of-application-the applicant-is-hospitalized-for-treatment-of-mental-illness~~ The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261.

[For text of subp 5, see M.R.]

Subp. 6. **Waiver of graduation requirement.** The board shall waive the requirement of graduation from an approved nursing program if:

[For text of item A, see M.R.]

B. an applicant for licensed practical nurse licensure has been licensed by another jurisdiction and passed ~~NCLEX-PN-with-a-score~~ an acceptable examination as specified in subpart 12 and has had at least 4,000 clock hours of employment as a licensed practical nurse in the 60 calendar months preceding application for licensure in Minnesota.

Subp. 7. **Current nursing education or experience.** An applicant who has been employed in nursing or who has graduated from an approved nursing program during the two years immediately preceding application for licensure is exempt from the continuing education requirements ~~as-specified~~ in subparts 8 and 9. Employment references must be submitted to verify employment dates. An affidavit of graduation or evidence from the nurse licensing agency in another jurisdiction or Canadian province must be submitted to verify the graduation date.

Subp. 8. **Continuing education for registered nurses.** An applicant for registered nurse licensure ~~who~~ must participate in continuing education activities as follows:

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A. If the applicant has not been employed as a registered nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in continuing education activities which meet the criteria ~~specified~~ in part 6310.2800 and must submit an affidavit of continuing education. The continuing education participation must have occurred within the 24 months preceding board action on the application for licensure.

B. If an applicant for registered nurse licensure has not been employed as a registered nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within the 24 months immediately preceding board action on the application for licensure.

Subp. 9. **Continuing education for practical nurses.** An applicant for licensed practical nurse licensure ~~who~~ must participate in continuing education as follows:

A. If the applicant has not been employed ~~in nursing~~ as a licensed practical nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in ~~one of the following continuing education activities: at least 15 clock hours of a nurse refresher course;~~ at least 15 clock hours of nursing-related continuing education courses~~; or an orientation program at least 15 clock hours in length conducted by an employer or potential employer~~. The continuing education must have occurred within the 24 months preceding board action on the application for licensure. The applicant must submit an affidavit of continuing education.

B. If an applicant for licensed practical nurse licensure has not been employed as a licensed practical nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within

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the 24 months immediately preceding board action on the application for licensure.

Subp. 10. **Affidavit of graduation.** An applicant must submit an affidavit of graduation, signed by an official of the nursing program and bearing the seal or stamp of the program. If an official school transcript is submitted, it shall be accepted in lieu of an affidavit of graduation. An affidavit is not required if the licensing authority in another jurisdiction or Canadian province verifies graduation from an approved program. If a licensed practical nurse applicant has not graduated from an approved program, the applicant shall send his or her employer a form supplied by the board for documentation of 4,000 clock hours of employment. The form must be completed by the employer and returned to the board. The board shall determine if the employment fulfills the requirement of Minnesota Statutes, section ~~148.291~~ 148.211, subdivision ~~3~~ 4.

Subp. 11. **Acceptable examinations for registered nurses.** The requirement of having passed a written examination acceptable to the board for registered nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Registered Nurses (SBTPE-RN) ~~prior to~~ before 1957;

B. passed the SBTPE-RN after December 31, 1956, and before July 1, 1982, with a scaled score of at least 350 on each of the five parts; ~~or~~

C. passed NCLEX-RN after June 30, 1982, and before February 1, 1989, with a scaled score of 1,600; or

D. passed NCLEX-RN after January 31, 1989, with a designation of pass.

Subp. 12. **Acceptable examinations for practical nurses.** The requirement of having passed a written examination acceptable to the board for licensed practical nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Practical Nurses

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(SBTPE-PN) ~~prior to~~ before 1960;

B. passed the SBTPE-PN after December 31, 1959, and before January 1, 1970, with a scaled score of at least 370;

C. passed the SBTPE-PN after December 31, 1969, and before October 1, 1982, with a scaled score of at least 400; ~~or~~

D. passed NCLEX-PN after September 30, 1982, and before October 1, 1988, with a scaled score of at least 350; or

E. passed NCLEX-PN after September 30, 1988, with a designation of pass.

Subp. 13. **Insufficient score.** An applicant for licensure whose examination score does not meet the Minnesota score requirement ~~specified~~ in subpart 11 or 12 must write the examination currently used in Minnesota, achieve the passing score established for the current examination, and meet the requirements ~~specified~~ in part ~~6315.0400~~ 6305.0400, subparts 2, 10, 11, and 12.

REGISTRATION OF PROFESSIONAL AND PRACTICAL NURSES

6310.2600 DEFINITIONS.

[For text of subps 1 to 4, see M.R.]

Subp. 5. **Continuing education ~~evidence~~ report form.** "Continuing education ~~evidence~~ report form" means the printed document provided by the board for use in reporting the information required in parts 6310.2800 to 6310.2900.

Subp. 5a. **Deferment.** "Deferment" means postponement of participation in and reporting of all or part of the continuing education activities for renewal.

[For text of subp 6, see M.R.]

Subp. 6a. **Late application fee.** "Late application fee" means the penalty fee ~~as~~ authorized in Minnesota Statutes, ~~sections~~ section 148.231, subdivision 1 ~~and 148.294, subdivision 1~~.

[For text of subps 7 to 8, see M.R.]

Subp. 8a. and 8b. [See Repealer.]

[For text of subps 8c and 9, see M.R.]

Subp. 9a. **Permit.** "Permit" means the document issued by

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the board to an applicant for reregistration that authorizes practice of professional or practical nursing in Minnesota during participation in a formal, structured refresher course for nurses that includes clinical practice.

Subp. 9b. **Practical nurse.** "Practical nurse" means a person authorized by the board to engage in the practice of practical nursing as defined in Minnesota Statutes, section ~~148.29, subdivision 4~~ 148.171, clause (5).

Subp. ~~9b~~ 9c. **Professional nurse.** "Professional nurse" means a person authorized by the board to engage in the practice of professional nursing as defined in Minnesota Statutes, section 148.171, clause (3).

[For text of subps 10 to 14, see M.R.]

Subp. 15. **Registration period.** "Registration period" means a 24-month interval of time for which a registration certificate is issued. The period ~~begins the date the registration certificate is issued and~~ ends the last day of the licensee's month of birth in an even- or odd-numbered year according to the licensee's year of birth. The length may vary for a nurse's first registration period or reregistration period. For registration renewal, the period starts on the first day of the month following expiration of the previous registration period.

[For text of subp 16, see M.R.]

6310.2800 REGISTRATION RENEWAL REQUIREMENTS.

Subpart 1. **Requirement.** Each licensee is responsible for applying for renewal of registration if the person wishes to be authorized to practice as a professional or practical nurse in Minnesota.

Licensees are required to complete a registration renewal application and pay a renewal fee. In addition, professional nurses are required to accrue 30 contact hours of acceptable continuing education activities for registration renewal ~~on August 1, 1982, and thereafter~~. Contact hours shall be accrued during a 24-month continuing education participation period

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ending one month before the professional nurse's registration expiration date. The number of contact hours and length of participation period may vary for a professional nurse's first registration renewal following licensure or reregistration ~~in accordance with~~ according to part 6310.2900, subpart 6.

Subp. 2. **Demonstration of professional nursing skill.** At least one of the acceptable continuing education activities required for registration renewal ~~on or after August 1, 1986,~~ shall require the professional nurse to show evidence of having successfully demonstrated to the instructor skill in performing one or a portion of a professional nursing function as indicated in Minnesota Statutes, section 148.171, clause (3).

Subp. 4. **Application submission.** ~~Licensed practical nurses and registered nurses~~ Licensees shall submit a completed, signed application for registration renewal and a renewal fee to the board office. Renewal applications from professional nurses must be accompanied by a completed continuing education ~~evidence~~ report form meeting the requirements of parts 6310.2800 and 6310.2900. Renewal applications, fees, and continuing education report forms must be received in the board office in the month preceding the month in which the applicant's registration expires. Resubmission of a previously incomplete or incorrect application form and renewal fee received before the month in which the licensee's registration expires, shall constitute timely submission if received in the board office on or before the licensee's registration expiration date.

~~In 1988 and 1989 a registration renewal application and a renewal fee from a professional nurse who held current registration on July 31, 1987, shall be received in the board office on or before May 31 in the year in which the nurse's registration expires. Resubmission of a previously incomplete or incorrect application and renewal fee received on or before May 31 in the year in which the nurse's registration expires, shall constitute timely submission if received in the board office on or before July 31 of that year.~~

Subp. 5. **Late application fee.** A licensee filing for

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registration renewal shall pay a late application fee, as well as the renewal fee for the current renewal period if the application or renewal fee is received in the board office during the month in which the licensee's registration expires.

~~In 1988 and 1989 a registration renewal application received from a professional nurse who held current registration on July 31, 1987, shall incur a late application fee if the application or renewal fee is received in the board office during June or July in the year in which the nurse's registration expires.~~

[For text of subp 6, see M.R.]

Subp. 7. **True information.** A licensee shall submit true information. Falsification of any evidence for any registration period or failure to comply with parts 6310.2800 and 6310.2900 for any two registration periods shall ~~constitute unethical conduct and~~ provide grounds for ~~suspension or revocation of a license~~ disciplinary action.

[For text of subp 8, see M.R.]

6310.2900 REGISTRATION RENEWAL PROCEDURES.

[For text of subpart 1, see M.R.]

Subp. 2. **Application mailing date.** The board shall mail a registration renewal application at least three full calendar months before a licensee's registration expiration date ~~to the last known address of every licensee holding a current renewal certificate~~. The renewal application shall be mailed to the licensee's last known address. Failure to receive the ~~notice~~ registration renewal application shall not relieve a ~~license holder~~ licensee of the obligation to comply with parts 6310.2800 and 6310.2900. ~~In 1988 and 1989 registration renewal applications will be mailed by April 1 to professional nurses who held current registration on July 31, 1987.~~

Subp. 3. **Late submission.** An application and renewal fee received in the board office during the month in which the licensee's registration expires, shall not be processed and shall be returned to a licensee for payment of a late

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application fee. ~~In-1988-and-1989-a-registration-renewal application-from-a-professional-nurse-who-held-current registration-on-July-31,-1987,-which-was-received-in-the-board office-during-June-or-July-of-the-year-in-which-the-nurse's registration-expires-shall-not-be-processed-and-shall-be returned-to-the-nurse-for-payment-of-a-late-application-fee.~~

A renewal application and fee received one or more days after the licensee's registration expiration date shall be returned with an application for reregistration. The board will nullify incomplete registration renewal applications that are not completed within 30 days following notification of the deficiency or the licensees' registration expiration dates, whichever is later. For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process provided in Minnesota Statutes, section 138.17, subdivision 7.

Subp. 4. **Continuing education evidence form.** For professional nurses, the registration renewal application shall include a continuing education ~~evidence~~ report form. Information to be provided by the professional nurse on ~~an evidence~~ a report form shall include:

[For text of items A to D, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Initial registration and first registration renewal.** An individual who is issued a license by the board shall also be registered by the board. The ~~license~~ licensure fee shall serve as payment for the initial registration period.

~~Effective-August-1,-1987,-and-thereafter,~~ The initial registration period following licensure or reregistration is from six to 29 full calendar months ending the last day of the licensee's month of birth in an even-numbered year if the year of birth was an even-numbered year or in an odd-numbered year if the year of birth was an odd-numbered year.

~~A-licensee-who-does-not-supply-a-month,-day,-and-year-of birth-upon-a-second-request-from-the-board-shall-be-assigned-a month-and-year-for-registration-purposes.~~

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~~A licensee may correct the date of birth stated on the renewal application. The board may require a licensee who wishes to correct the date of birth on file with the board to substantiate the date with official documentation.~~

Professional nurses shall accrue for the first registration renewal following licensure and reregistration the number of contact hours of acceptable continuing education activities equivalent to the number of full months in their initial registration period. The contact hours shall include at least one successful demonstration of skill in performing a portion of a component of professional nursing. The continuing education participation period begins on the date the license was issued or reregistration was completed and extends through the month immediately preceding the month in which initial registration expires.

[For text of subp 6a, see M.R.]

Subp. 7. **Substantiation of continuing education activities.** Following each renewal date the board may select a sample of professional nurses applying for registration renewal and require substantiation of participation in acceptable continuing education activities. Selected professional nurses shall submit in writing the following data obtained from the provider of each continuing education activity which verifies the information on the ~~evidence~~ continuing education report form:

[For text of items A to F, see M.R.]

G. ~~In 1986 and thereafter,~~ Proof of compliance with part 6310.2800, subpart 2.

H. For continuing education activities meeting part 6310.2800, subpart 6, item L, a copy of the certificate may be required and considered sufficient.

I. Any additional documentation the board deems necessary.

Subp. 8. **Insufficient hours.** If a professional nurse cannot demonstrate sufficient hours of acceptable continuing education activities for a continuing education participation period, the number of hours lacking ~~to comply for that~~

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~~continuing-education-participation-period~~ may be deferred. If the licensee has the required number of contact hours but the contact hours do not include a demonstration of skill, the licensee must defer one contact hour. The deferred hours shall be added to the contact hours required in the immediately succeeding continuing education participation period. If the licensee does not renew for the continuing education participation period that included the deferred hours, the deferred hours will be required for reregistration. This part may be applied once for any one professional nurse.

[For text of subps 9 and 10, see M.R.]

6310.3100 REREGISTRATION.

Subpart 1. **Removal of name from list.** The names of licensees who do not return the complete renewal application, renewal fees, and late application fees by the registration expiration date shall be removed from the list of individuals authorized to practice professional or practical nursing during the current renewal period.

Subp. 2. **Reregistration requirements.** Reregistration shall be granted when the licensee has met all reregistration requirements. A licensee who applies for reregistration shall:

A. Submit a completed and signed reregistration application;

B. Respond to questions on the application that relate to ~~causes-for-denial-or-revocation-of-licensure~~ the grounds for disciplinary action listed in Minnesota Statutes, section 148.261 ~~for-professional-nurses-and-section-148.297-for-practical-nurses~~. The licensee shall submit true information. Falsification or omission of information provides grounds for disciplinary action. The board may require further information of the licensee in order to determine whether the licensee has engaged in conduct warranting disciplinary action as set forth in Minnesota Statutes, section 148.261;

C. Pay the registration renewal fee for the current period;

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D. Pay the late application fee if registration expired within the last two years unless the licensee submitted evidence of an incomplete or incorrect renewal application before the registration renewal deadline; and

E. Submit evidence of meeting all relevant requirements specified in subparts 2a to 8.

Subp. 2a. **Continuing education.** A professional nurse must submit evidence of meeting all requirements specified in parts 6310.2800 and 6310.2900. Participation in continuing education activities must have occurred during the 24 months immediately before board action on the application for reregistration. ~~Beginning April 1, 1988, and thereafter,~~ This requirement applies only to professional nurses whose registration expired within the two years immediately preceding application for reregistration.

Subp. 2b. **Deferred contact hours.** A professional nurse who has deferred continuing education contact hours on record shall make up all the deferred contact hours before board action on the application for reregistration. The nurse shall submit a report of participation in the required number of contact hours and submit the substantiating documents required in part 6310.2900, subpart 7. The board shall audit the substantiating documents to be certain that the requirements in part 6310.2900, subpart 7, are met.

Subp. 5. [See Repealer.]

Subp. 6. **Acceptable practice requirement.** ~~Beginning April 1, 1988, and thereafter,~~ A licensee without current registration who is applying for reregistration must submit proof of at least 320 hours of acceptable nursing practice in the four years immediately preceding receipt by the board of the application for reregistration or meet the requirement in subpart 7. To be acceptable the practice must have:

A. consisted of employment or volunteer nursing in any setting, or participation in clinical nursing courses or any combination of these activities;

B. occurred only while the licensee was authorized to

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practice nursing unless legal authorization for the practice was not required in the jurisdiction where it occurred; or

C. included one or more of the functions defined in Minnesota Statutes, section 148.171, clause (3), for professional nurses or Minnesota Statutes, section ~~148.29~~ 148.171, ~~subdivision 4~~ clause (5), for practical nurses, or be determined by the patient, employer, volunteer supervisor, patient's family or physician, instructor, or peer as requiring the appropriate nursing license.

Subp. 7. **Refresher course requirement.** ~~Beginning April 1, 1988, and thereafter,~~ Licensees without current registration who do not demonstrate compliance with the acceptable practice requirement in subpart 6, shall successfully complete a refresher course and must submit an affidavit of successful completion of a refresher course which occurred within the 24 months immediately preceding board action on the application for reregistration. The affidavit must be signed by the person responsible for the course, hereinafter, coordinator. For a professional nurse, the refresher course may be used to fulfill the continuing education activities required in subpart 2a, provided the refresher course meets the criteria in part 6310.2800.

The refresher course must have been designed to meet the following criteria:

[For text of items A to C, see M.R.]

Subp. 8. ~~Limited registration certificate~~ Permit to practice. ~~A licensee presenting an affidavit of enrollment in a refresher course will upon written request and submission of a reregistration application and fee be provided a registration certificate valid only for participation in the clinical experience component of the refresher course and no longer than 90 days.~~ To participate in the clinical component of a refresher course, a licensee must have a permit. To receive a permit, the licensee must submit the completed reregistration application, fee, and an affidavit of enrollment in the refresher course that includes the request for a permit. When issued, the permit is

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valid only for participation in the clinical component of the refresher course and for no longer than 90 days. While the permit is in effect, a registered nurse may use the title registered nurse, abbreviated "RN," and a licensed practical nurse licensee may use the title licensed practical nurse, abbreviated "LPN." The affidavit must be signed by the refresher course coordinator.

[For text of subps 9 and 10, see M.R.]

Subp. 11. **Nullification and reapplication.** The board will nullify incomplete reregistration applications that are not completed within the six month period following receipt of fees or within the six month period following issuance of a ~~registration certificate~~ permit for practice in a clinical component of a refresher course.

For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process ~~specified~~ in Minnesota Statutes, section 138.17, subdivision 7. If a licensee fails to submit an application and fee within six months after the board received any other documents relating to the application, the board may destroy the documents.

If a licensee whose application has been nullified wants to be reregistered, a new reregistration application must be submitted and all applicable reregistration requirements must be met.

[For text of subp 12, see M.R.]

6310.3300 CHANGE OF NAME AND ADDRESS ON RECORDS.

Subpart 1. **Name change.** The licensee who has changed names shall notify the board in writing as soon as possible and request a revised registration certificate. When requesting a revised registration certificate, the licensee shall return the current certificate to the board. ~~If the current certificate has been lost, stolen, or destroyed, the licensee shall provide a written explanation of the situation.~~ The board may require substantiation of the name change by requiring official

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documentation.

[For text of subp 2, see M.R.]

6310.3400 DUPLICATE AND REPLACEMENT DOCUMENTS.

[For text of subpart 1, see M.R.]

Subp. 2. **Registration certificate.** A duplicate registration certificate shall not be issued. If a registration certificate is lost, stolen, or destroyed, the licensee shall submit a written explanation of the situation. ~~Upon~~ On written request of the licensee, a replacement registration certificate may be issued for a fee. The replacement registration certificate shall be marked "Replacement."

If a licensee does not receive a registration certificate which has been issued and notifies the board office in writing within 60 days of the ~~date of issuance~~ effective date, a replacement registration certificate may be issued without a fee.

Subp. 3. **Lost, stolen, or destroyed documents.** If a licensee's license or registration certificate or permit is lost, stolen, or destroyed, the licensee must report the loss to the board.

6310.3600 REGISTRATION FEES.

Subpart 1. **Amount.** The amount of fees shall be as follows:

A. registration renewal, ~~$25~~ $32 per registration period ~~effective June 1, 1988, and $26 effective August 1, 1988~~;

B. late application, $20 ~~effective June 1, 1988~~;

C. replacement license, $20 ~~effective June 1, 1988~~;

D. replacement registration certificate, ~~$20~~ ~~effective June 1, 1988~~ $5;

E. verification of licensure status, $20 ~~effective June 1, 1988~~;

F. verification of examination scores, $20 ~~effective June 1, 1988~~;

G. a copy of licensure application materials, $20 ~~effective June 1, 1988~~; and

H. service charge for a dishonored check, $15.

Subp. 2. **Nonrefundable.** All fees are nonrefundable.

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PUBLIC HEALTH NURSE REGISTRATION

6316.0100 REQUIREMENTS FOR REGISTRATION AS A PUBLIC HEALTH NURSE.

Subpart 1. **Licensure and current registration.** An applicant for registration as a public health nurse must be licensed and currently registered to practice professional nursing in Minnesota.

Subp. 2. **Application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall submit true information. The application must be notarized.

Subp. 3. **Fee.** An applicant must submit a fee of $25 with the application. This fee must be paid to the board in United States currency, cashier's check, or money order. Personal checks are not accepted. If for any reason a public health nurse registration certificate is not issued, the fee is not refundable.

Subp. 4. **Education.** An applicant must have a baccalaureate or higher degree with a major in nursing. The applicant's course work must have included theory and clinical practice in public health nursing. The theory portion of the public health nursing education must have been at least 30 hours in length. The public health nursing content in a hospital diploma or associate degree program does not qualify. At a minimum, the public health nursing education must have prepared the nurse to:

A. identify the incidence, distribution, and control of disease in a population, as well as the risk factors and environmental factors related to communities;

B. identify populations at high risk of illness, disability, premature death, or poor recovery;

C. intervene with high-risk populations;

D. evaluate the effect of interventions on the health status of a population; and

E. use community services, institutional resources, and other health care providers.

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Subp. 5. **Affidavit of graduation.** An applicant must submit an affidavit of graduation from the institution that awarded the baccalaureate or higher degree. The affidavit must be completed by an official of the institution and bear the seal or stamp of the institution. An applicant may submit an official transcript in lieu of the affidavit.

Subp. 6. **Affidavit of completion of public health nursing education.** An applicant must submit an affidavit of completion of public health nursing education. Included with the affidavit must be evidence that the applicant successfully completed public health nursing education which meets the requirements in subpart 4. The affidavit must be completed by an official of the institution that provided public health nursing education which meets the requirements in subpart 4.

6316.0200 ISSUANCE OF PUBLIC HEALTH NURSE REGISTRATION CERTIFICATE.

Subpart 1. **Public health nurse registration certificate.** The board shall issue a public health nurse registration certificate to an applicant when the requirements have been met. The public health nurse registration certificate is valid only in conjunction with a current registration certificate for professional nursing.

Subp. 2. **Length of public health nurse registration certificate.** The public health nurse registration certificate is in effect when the nurse has a license and is currently registered to practice professional nursing in Minnesota. If a license is revoked or the nurse allows the registration to expire, the public health nurse registration certificate becomes invalid.

Subp. 3. **Replacement document.** If a nurse requests the replacement of a public health nurse registration certificate, the nurse shall explain in writing the reason for requesting a replacement. On written request of the nurse and the payment of a $5 fee, a replacement public health nurse registration certificate may be issued. The replacement certificate shall be

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marked "Replacement." The board may require substantiation of a name change by requiring official documentation. A replacement certificate shall not be issued for a change of address.

6316.0300 APPLICATION NULLIFICATION.

Subpart 1. **Time frame for nullification.** The board will nullify an application for public health nurse registration if the applicant fails to complete the application process within one year after submission of the application.

Subp. 2. **Destruction of application materials and forfeiture of fee.** For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process specified in Minnesota Statutes, section 138.17, subdivision 7. If the applicant failed to submit the application and fee within one year after the board received any other documents relating to the application, the board may destroy the documents.

NURSING PRACTICE AND DISCIPLINE

6321.0100 DEFINITIONS.

Subpart 1. **Scope.** The definitions in this part apply to this chapter.

Subp. 2. **Monitoring.** "Monitoring" means the periodic inspection by a registered nurse or licensed practical nurse of a directed function or activity and includes watching during performance, checking, and tracking progress, updating a supervisor of progress or accomplishment by the person monitored, and contacting a supervisor as needed for direction and consultation.

Subp. 3. **Supervision.** "Supervision" means the guidance by a registered nurse for the accomplishment of a function or activity. The guidance consists of the activities included in monitoring as well as establishing the initial direction, delegating, setting expectations, directing activities and courses of action, critical watching, overseeing, evaluating, and changing a course of action.

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6321.0500 REPORTING OBLIGATIONS.

Subpart 1. **Institutions.** The reporting required of institutions in Minnesota Statutes, section 148.263, subdivision 2, is interpreted to include resignation in lieu of discharge, discharge, suspension, or other forms of discipline of a nurse for failure to carry out the responsibilities of a nurse. Examples of actions to be reported include but are not limited to dismissal of probationary employees, suspensions other than investigatory suspensions, restrictions or limitations of a nurses's practice, demotion, and discharge from employment.

Subp. 2. **Licensed professionals.** The reporting required of licensed professionals in Minnesota Statutes, section 148.263, subdivision 3, is interpreted to exclude the professional knowledge obtained in the course of a health professional-client relationship when the client is a nurse and the health professional successfully counsels the nurse to limit or withdraw from practice to the extent required by the impairment.

6330.0100 DEFINITIONS.

Subpart 1. **Advanced nursing practice.** "Advanced nursing practice" means the performance of health services by certified registered nurse anesthetists ~~(~~, abbreviated, "CRNA~~)~~," and certified nurse midwives ~~(~~, abbreviated "CNM~~)~~," certified nurse practitioners, abbreviated "RN,C," and certified clinical specialists in psychiatric or mental health nursing, abbreviated "RN,CS," as defined in Minnesota Statutes, section 62A.15, subdivision 3a.

Subp. 2. **Board.** "Board" means the Minnesota Board of Nursing.

Subp. 3. to 5. [See Repealer.]

6330.0200 PURPOSE.

Parts 6330.0100 to ~~6330.0500~~ 6330.0300 establish criteria ~~for programs of study of~~ certification of professional nurses to engage in advanced nursing practice. ~~Parts 6330.0600 and 6330.0700 list programs~~ Part 6330.0350 lists professional

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nursing organizations that fulfill the criteria. The criteria and list are established under Minnesota Statutes, section 62A.15, subdivision 3a, in order to qualify advanced nursing services for reimbursement by third parties.

6330.0300 ~~ACCREDITATION-REQUIRED~~ CRITERIA TO BE A PROFESSIONAL NURSING ORGANIZATION WHICH CERTIFIES NURSES IN ADVANCED NURSING PRACTICE.

In order to ~~be-included-on-the-lists-found-in-parts 6330.0600-and-6330.0700,-a-program-of-study-must-consist-of subject-matter-beyond-that-required-for-registered-nurse licensure-and-meet-one-of-the-following-criteria:~~

~~A.--programs-preparing-nurse-anesthetists-must-be accredited-by-the-Council-on-Accreditation-of-Nurse-Anesthesia Education-Programs/Schools;-or~~

~~B.--programs-preparing-nurse-midwives-must-be accredited-by-the-Division-of-Accreditation,-American-College-of Nurse-Midwives.~~ have the authority to certify professional nurses in advanced nursing practice as referenced in Minnesota Statutes, section 62A.15, subdivision 3a, the organization must have met the following criteria:

A. be national in the scope of its credentialing;

B. have an education requirement of at least one academic year or nine calendar months or its equivalent of full-time study beyond that required for registered nurse licensure;

C. have practice requirements beyond those required for registered nurse licensure;

D. have testing requirements beyond those required for registered nurse licensure;

E. issue certificates to qualified professional nurses; and

F. periodically review the qualifications of certified individuals.

6330.0350 PROFESSIONAL NURSING ORGANIZATIONS WITH AUTHORITY TO CERTIFY.

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The following organizations meet the criteria in part 6330.0300 and have the authority to certify registered nurses in the advanced nursing practice categories listed:

A. American Association of Nurse Anesthetists Council on Certification and Council on Recertification: nurse anesthetist.

B. American College of Nurse-Midwives: nurse midwife.

C. American Nurses Association:

(1) nurse practitioner:

(a) gerontological nurse practitioner;

(b) adult nurse practitioner;

(c) family nurse practitioner;

(d) school nurse practitioner;

(e) pediatric nurse practitioner.

(2) clinical specialist in psychiatric or mental health nursing:

(a) clinical specialist in adult psychiatric and mental health nursing;

(b) clinical specialist in child and adolescent psychiatric and mental health nursing.

D. National Certification Board of Pediatric Nurse Practitioners and Nurses: pediatric nurse practitioner.

E. Nurses Association of American College of Obstetrics and Gynecology Certification Corporation:

(1) obstetric-gynecological nurse practitioner;

(2) neonatal nurse clinician/practitioner.

6330.0500 MAINTENANGE OF LISTS.

Subpart 1. **List updating.** Each January ~~and July~~ the board shall add to the ~~lists programs~~ list professional nursing organizations which have met the criteria within the previous ~~six months~~ year and which certify nurses for advanced nursing practice, and remove from the ~~lists programs~~ list organizations which no longer meet the criteria.

Subp. 2. [See Repealer.]

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RENUMBER. Minnesota Rules, parts 6315.0600 and 6315.0700 are renumbered as 6305.0600 and 6305.0700.

REPEALER. Minnesota Rules, parts 6301.0100, subpart 3; 6301.1200, subpart 6; 6301.1700, subparts 2, 3, and 4; 6310.2600, subparts 8a and 8b; 6310.3100, subpart 5; 6315.0100, subparts 15 and 16; 6330.0100, subparts 3, 4, and 5; 6330.0400; 6330.0500, subpart 2; 6330.0600; and 6330.0700, are repealed.

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Office of the Revisor of Statutes

Administrative Rules

TITLE: Proposed Permanent Rules Relating to Licensing and Registration

AGENCY: Board of Nursing

MINNESOTA RULES: Chapters 6301, 6305, 6310, 6315, 6316, 6321, and 6330

The attached rules are approved for publication in the State Register

Carla M. Riehle
Assistant Revisor

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE MINNESOTA

BOARD OF NURSING

In the Matter of the
Proposed Adoption of
Rules of the Board of
Nursing Relating to
Licensure, Registration,
Nursing Scholarships,
Advanced Nursing Practice,
Registration of Public Health
Nurses and Fees

NOTICE OF INTENT TO
ADOPT RULES WITHOUT
A PUBLIC HEARING

(1) Notice is hereby given that the Minnesota Board of Nursing (hereinafter "Board") intends to adopt the above-entitled rules without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in Minn. Stat. §§ 14.22 to 14.28 (1988). The statutory authority to adopt the rules is Minn. Stat. §§ 148.191, subd. 2 and 148.231, subd. 1.

(2) All persons have 30 days in which to submit comment in support of or in opposition to the proposed rules or any part or subpart of the rules. Comment is encouraged. (3) Each comment should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on the rules within the 30-day comment period. (4) If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. (6) Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rules addressed, the reason for the request, and any change proposed. (7) If a public hearing is required, the Board will proceed pursuant to Minn. Stat. §§ 14.131 to 14.20 (1988).

(5) Comments or written requests for a public hearing must be submitted to:

Joyce M. Schowalter
Executive Director
Minnesota Board of Nursing
Suite 108
2700 University Avenue West
St. Paul, Minnesota 55113
Telephone: (612) 642-0567

(8) The proposed rules may be modified if the modifications are supported by data and views submitted to the Board and do not result in a substantial change in the proposed rules as noticed.

(11) A copy of the rules is attached.

(12) A Statement Of Need And Reasonableness that describes the need for and reasonableness of each provision of the proposed rules and identifies the data and information relied upon to support the proposed rules has been prepared and is available from Joyce M. Schowalter upon request.

(14) Minn. Stat. § 14.115 specifies certain actions which an agency must take if an agency engages in rulemaking which may affect small businesses. It is the Board's position that the Board's rules are not subject to section 14.115 pursuant to subdivision 7(b) or (c). Nevertheless, should the rules be subject to section 14.115 and it is determined that they will impact on small businesses, the Statement of Need and Reasonableness addresses this impact.

(9) If no hearing is required, upon adoption of the rules, the rules and the required supporting documents will be submitted to the Attorney General for review as to legality and form to the extent the form relates to legality. Any person may request notification of the date of submission to the Attorney General. Persons who wish to be advised of the submission of this material to the Attorney General or who wish to receive a copy of the adopted rules must submit the written request to Joyce M. Schowalter.

Date: May 11, 1990.

Joyce M. Schowalter
JOYCE M. SCHOWALTER
Executive Director

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE

MINNESOTA BOARD OF NURSING

In the Matter of the Proposed Adoption of Rules of the Board of Nursing Relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees

STATEMENT OF NEED AND REASONABLENESS

PROFESSIONAL PROGRAM APPROVALS

6301.0100 DEFINITIONS.

Subp. 3. **Affiliation.** Repeal of this definition is necessary as the word has been struck throughout the revision of Chapter 6301. Repeal of this definition is reasonable as the word affiliation is no longer in Minnesota Statutes Chapter 148.

6301.1200 ADVANCED STANDING.

Subp. 6. **Compliance deadline.** The deadline in this rule has been passed, making repeal of this subpart possible. It is reasonable to repeal this subpart as all approved programs are complying with the immediately preceding subparts.

6301.1700 CLINICAL SETTINGS.

Subpart 1. **Use of clinical settings absent affiliation.** The language in this subpart regarding affiliation is being repealed as Minnesota Statutes Chapter 148 no longer authorizes the Board to approve affiliations. The concept of "absent affiliation" is no longer in evidence. As no approved programs have had an affiliation with a clinical facility for the purpose of meeting parts 6301.1500 to 6301.2200 since this subpart was promulgated in 1983.

The language added to this subpart is necessary to clarify the responsibilities of nurse faculty members in regard to clinical learning activities. This change is in accordance with part 6301.1300 which has, since 1983, given professional nurse faculty members the responsibility for teaching and evaluating student understanding of nursing theory and practice. Students gain much of their understanding of nursing theory and practice during learning experiences in clinical facilities. This responsibility must rest with nurse faculty members as only they know the entire curriculum, each student's learning needs, and the expected student outcomes sufficiently to guide and evaluate students during their clinical learning experiences.

Holding nurse faculty members responsible for determining clinical learning activities is reasonable as they have clearly been fulfilling these responsibilities throughout the seven years since these rules were promulgated. Faculty members will continue to have the freedom necessary to determine how best to implement these responsibilities. Such discretion is necessary given the various levels of students being taught in a wide variety of clinical

settings. The need for this discretion was emphasized in written comment received from a practical nursing program director. No other written responses were received after this proposed rule was sent to all approved program directors.

6301.1700 CLINICAL SETTINGS.

Subp. 2. **Clinical use authorizations.** Repeal of this subpart is necessary and reasonable as the Board is no longer authorized in Minnesota Statutes, Chapter 148 to approve affiliations.

Subp. 3. **Beginning affiliation.** Repeal of this subpart is necessary and reasonable as the Board is no longer authorized in Minnesota Statutes, Chapter 148 to approve affiliations.

Subp. 4. **Continuing affiliation.** Repeal of this subpart is necessary and reasonable as the Board is no longer authorized in Minnesota Statutes, Chapter 148 to approve affiliations.

6301.1800 NURSING ABILITIES TO BE EVALUATED.

Subpart 6. **Delegated medical treatment.**

O. The ability to implement treatment related to cardiopulmonary function is being added as this body system has not been specified in this subpart. It is reasonable to correct this omission as new graduates of practical and professional programs must be able to carry out a physician's orders pertaining to this vital body system and its functions. This addition to the rules is necessary to ensure that all program graduates have been evaluated for this crucial ability.

The inclusion of delegated medical treatment related to cardiopulmonary function is consistent with the approach of the other program approval rules. The predeterminations that faculties will make in regard to the delegated treatment to be included in the evaluations and the nursing actions that students must perform to demonstrate the ability, will serve to keep the requirement current and effective.

Faculties may elect to meet this requirement through a cardiopulmonary resuscitation course or through faculty conducted evaluation. Consequently, students who are unable to perform cardiopulmonary resuscitation may be evaluated for the ability to perform a treatment other than cardiopulmonary resuscitation.

LICENSURE OF PROFESSIONAL AND PRACTICAL NURSES

The rule numbers for this chapter are being changed so that the licensure rules will come before the registration rules. This is consistent with the fact that an individual must be licensed before the individual can be registered.

6315.0100 DEFINITIONS.

Subpart 1. **Scope.** The numbers referenced in this subpart are changed to be consistent with the change in all of the numbers for this chapter.

Subp. 7a. **Disaster.** A definition for disaster is being added because of the addition of a new subpart that refers to disaster. The addition is in the section titled "AUTHORIZATION TO PRACTICE". The definition is taken from the American Red Cross. However, events that do not occur in Minnesota, such as hurricanes were omitted from the definition used by the Red Cross. The statement "exceed the health care resources of the community." is not part of the definition of disaster from the American Red Cross. It is added because it is part of what would necessitate allowing individuals licensed in a jurisdiction other than Minnesota to practice without a Minnesota license.

Subp. 10. **Final term of study.** The statement, "The term must have officially begun at least one day prior to the examination" is added for clarification. According to the law applicants may write the examination while they are in their last term. The majority of the questions related to this provision are for clarification of the time frame. According to the law, before the applicant can be admitted to the examination, applicants must submit evidence that they are in their final term of study. Accepting evidence the day before the examination is more than reasonable. Therefore at a minimum the term must have started the day before the examination.

Subp. 15. **Mental Health.** The definition for mental health is being deleted because the requirement for good mental health has been deleted from the law.

Subp. 16. **Moral Character.** The definition for moral character is being deleted because the requirement for good mental health has been deleted from the law.

6315.0300 AUTHORIZATION TO PRACTICE NURSING.

Subpart 1. **Required authorization.** The phrase "and current registration certificate" is added for clarity. According to the law, individuals cannot practice unless they are duly licensed and currently registered to do so. The statement regarding faculty members of-out-of state schools is added for clarification. Again, anyone who practices nursing in Minnesota must be licensed and currently registered to do so. Faculty members of Minnesota schools must be licensed and currently registered. It is reasonable to require the same of faculty of out of state schools. The paragraph that is struck has been deleted because it is a restatement of a provision in the law.

Minnesota Statutes, section 148.271 provides that licensure and current registration are not required when furnishing nursing assistance in an emergency. An emergency has not been defined or clarified in rule. The situations listed in this part of the rule are to clarify what constitutes an emergency.

Because Minnesota borders on four other states, there are frequent situations in which ambulance and air transport teams come into Minnesota to transport a patient to a medical facility outside of Minnesota. There are also situations in which patients from other states are brought to Minnesota medical facilities from other states. It is reasonable to exempt the nurses involved in transport from licensure since it is for a limited time and during a specific activity. The stabilization period in this rule should not be construed to include nurses working in Minnesota facilities whose responsibilities include

stabilizing patients. If care is given after transport or stabilization, a Minnesota license and current registration is required.

Recent events such as the airplane disaster in Iowa, the hurricane in South Carolina and the earthquake in California have prompted boards of nursing to consider allowing nurses from other jurisdictions to provide care during a disaster. At least one other jurisdiction has adopted a provision that allows a nurse from another jurisdiction to provide nursing care without initiating the process of licensure. The key in this rule is that the situation involves a disaster and the needs exceed the health care resources of the community.

Although the Good Samaritan Law addresses the provision of reasonable assistance to an individual at the scene of an emergency, it does not deal with nurses providing reasonable assistance at the scene of an emergency. For clarity this exception to licensure and current registration is included.

According to the statute, an individual does not have to be licensed and currently registered in Minnesota if the individual is licensed in another jurisdiction and is in Minnesota as a student enrolled in a formal course. For clarity and consistency of understanding, the components of a formal, structured course are specified. Courses within an educational institution have written objectives, a course outline, grading system and transcipts that verify the completion of courses and grades received. In order for continuing education activities to be acceptable, the activities must include the following: objectives written in measurable terms, the instructor's qualifications in the subject shall be stated in written form, the method to be utilized to determine whether learning occurred must be in written form, a grade indicating successful completion is provided, and a written statement of participation is provided. Therefore, it is reasonable to include these elements in the definition of a formal, structured course.

It is appropriate to include education departments of health care facilities because the provision in the law includes the enhancement of skills in a clinical field. The statement "in the clinical field" implies that the individual should have the opportunity to acquire or improve their skills while interacting with patients. Many patients are within health care facilities.

A definition of "approved" already exists that is consistent with the language that is proposed in this rule. Since faculty members of Minnesota programs must be licensed and currently registered in Minnesota, it is reasonable to require the same of faculty members of out-of-state schools who are in Minnesota to supervise the practice of nursing students.

Subpa. 1a. **Authorized abbreviations.** According to Minnesota Statute 148.281 it is unlawful for an individual to use any abbreviation tending to imply licensure unless the individual is licensed and currently registered except as authorized by the board by rule. This rule fulfills the provision in the law by authorizing abbreviations.

A. Public Health Nurse is in the law. There is a provision that it is unlawful for anyone to use any abbreviation or other designation tending to imply registration as a public health nurse unless duly registered by the board. This implies an abbreviation. Therefore it is reasonable to recommend an abbreviation for these individuals.

B. Although registered nurse, abbreviated "RN," is covered in the law, it is reasonable to restate in rule so that there is a complete list of acceptable abbreviations.

C. Although licensed practical nurse, abbreviated "LPN," is covered in the law, it is reasonable to restate in rule so that there is a complete list of acceptable abbreviations.

D. There are individuals who have retired from nursing who are proud of the profession and their participation in it. It is distressing to this group of individuals that they cannot use the titles and abbreviations of registered nurse and licensed practical nurse. Since these individuals are licensed and will not be engaging in activities for which they will receive monetary compensation, it is appropriate for them to use the titles and abbreviations.

Licensees who are in the reregistration process and are taking a refresher course that involves clinical are required to chart and sign the charting. Therefore, these individuals need to know what title and abbreviation they are authorized to use. These licensees do not have current registration. It is reasonable for these licensees to use the titles and abbreviations proposed because they have used the title "registered nurse" abbreviated "RN" and licensed practical nurse, abbreviated "LPN" when they did have current registration. Further, introducing another title or requiring these individuals to use the title "graduate nurse" or graduate practical nurse and the associated abbreviations will only confuse people. Most people interpret the titles "graduate nurse" and "graduate practical nurse" and the associated abbreviations to mean individuals who have just graduated from their nursing programs and who are writing the licensing examnination. Reregistration applicants with permits for the clinical component of the refresher course would not be using the titles or abbreviations for monetary gain.

E. The law provides that no one can use any abbreviation or other designation tending to imply licensure except as authorized by the board by rule. To comply with this provision in the law, titles and abbreviations are suggested for those individuals who function in an assisting role. It is reasonable to distinguish the nursing assistants who are on the registry from the nursing assistants who function in other types of settings.

Subp. 4. **Eligibility for permit to practice with direct supervision.** The reason for disciplinary action is to protect the public. It is reasonable to delay the issuance of a temporary document until the board is assured that allowing the individual to practice will not put the public at risk. According to the law, the burden of proof is on the applicant.

Subp. 5. **Permit to practice nursing without direct supervision.** The reason for disciplinary action is to protect the public. It is reasonable to delay the issuance of a temporary document until the board is assured that allowing the individual to practice will not put the public at risk. According to the law, the burden of proof is upon the applicant.

Subp. 7. **Length of permits.** Permit is made plural so that it is clear that more than one type of permit is addressed in this subpart. The law provides that the permit shall be valid until the board takes action on the application. The board cannot take action until the results of the examination are known. So that permits which are open-ended are not issued, an expiration date is recommended that is reasonable based on experience. From experience we know that the examination results are received and processed within eight weeks

following the examination. However, applicants for licensure who wrote the examination in another jurisdiction may not receive the result within the eight weeks following the administration of the examination. Neither the applicants for licensure who have taken the examination in another jurisdiction before moving to Minnesota nor the board have control over the length of time it will take for the other jurisdiction to process the results of the examination. Our experience has been that the results are received by all individuals within 16 weeks following the examination. Therefore, an eight week extension is being proposed as reasonable.

Subp. 8. **Revocation of permit.** The requirements for the issuance of a permit are that the individual has made application for licensure, paid the required fee, presented evidence of having graduated from an approved program, and is taking the first examination following graduation. Occasionally the board receives evidence from a school that an individual has graduated. Later the school informs the board that the statement regarding graduation was completed in error. In most instances, the permit has been issued. Because one of the requirements for a permit has not been met, it is reasonable to revoke the permit.

The change from "requirement specified" to "requirements" was made by the revisor.

Subp. 9. **Designated titles.** Until the recent changes in the law, it was unlawful for anyone to use the title "registered nurse," abbreviated "RN," or the title, "licensed practical nurse," abbreviated "LPN," unless the individual was duly licensed and currently registered in Minnesota. The change in the law allows the use of abbreviations or titles if they are authorized by the board by rule. This rule authorizes those individuals who have been licensed in another jurisdiction and applying for licensure in Minnesota and who have been issued a Minnesota permit to use the title and abbreviation appropriate to their application for licensure. This authorization is being proposed because individuals who have been licensed in another jurisdiction have been using the title "RN" or "LPN". Also, most people interpret the titles "graduate nurse" and "graduate practical nurse" and the associated abbreviations "GN" and "GPN" to mean individuals who have just graduated from their nursing programs and who are writing the licensing examination.

6315.0400 REQUIREMENTS FOR LICENSURE BY EXAMINATION.

Subpart 1. **Licensure application.** The phrase "causes for denial of licensure" is deleted and replaced with "the grounds for disciplinary action" because the law uses "GROUNDS FOR DISCIPLINARY ACTION."

The phrase "for the registered nurse and Minnesota Statutes, section 148.297 for licensed practical nurses" is deleted because the registered nurse and licensed practical nurse sections were combined in the law.

The phrase "constitutes unethical conduct" is struck because it is redundant. One of the grounds for disciplinary action is employment of fraud or deceit in procurring or attempting to procur a permit, license, or registration certificate.

Subp. 3. **Evidence of good moral character and good mental health.** The evidence of good moral character and good mental health statements are struck because this requirement was deleted from the law. However, the law states that the burden of proof is upon the applicant to demonstrate the qualifications and

satisfaction of requirements. The statement regarding further evidence clarifies for the applicant that the board may request further information in order to make the determination about whether the applicant meets the requirements for licensure (that there are no grounds for the board to deny licensure).

Subp. 6. **Transcripts necessary for applicants educated in foreign countries.** The statement, "in addition to the affidavit of graduation required in subpart 8," has been added for clarity.

From experience we have found that course descriptions are not always helpful. Because of integrated curriculums it is difficult to determine whether the course content meets the educational requirements. School officials are familiar with course content. It is appropriate for the officials to designate whether the student had courses that included the required content. By requesting that this information be submitted on a form prepared by the board, there is assurance that the information that the board requires will be provided.

There have been applicants who have been unable to obtain the required documents because of political situations in their country or because documents have been destroyed. It is appropriate to provide applicants with options for demonstrating the required educational preparation when the individuals have no control over events and that make it impossible to obtain the required documents directly from the school. It is reasonable to accept documents from an official agency because the validity of the documents or statements can be trusted.

Subp. 8. **Affidavit of graduation.** From experience we have found that some countries do not have notary services. Therefore, it is appropriate to provide an alternative for the applicant. We use the affidavit of graduation as evidence that the individual has completed an approved program. We need the transcript from individuals who were educated in a foreign country in order to determine whether their education meets the requirements. The transcript also verifies that the individual graduated from an acceptable program. It is reasonable to accept the transcript to verify completion of a program as well as to verify the content of the courses.

The change from "prior to" to "before" was done by the revisor.

Graduation is one of the requirements for the issuance of a permit, admission to the examination and for licensure. When information is received that the affidavit was completed in error, it is appropriate to reverse any action taken or postpone any actions that are based on the fact that the individual has graduated.

The law requires that individuals be graduated or in their last term at the time of the examination. It is not possible for individuals to be in their last term at the time of the examination if they are notified after the examination that they have not graduated. It is reasonable to require thatindividuals complete requirements for graduation during the next available school term. Another option is to void the writing of the examination. The purpose of the examination is to determine whether an individual has the necessary knowldedge to provide nursing care in a safe manner. If the individual demonstrates this by passing the examination, nothing is gained by requiring the individual to redemonstrate this.

If the individual knew before the examination that graduation requirements were not met and wrote the examination anyway, it is reasonable to handle the

situation through a disciplinary proceeding. One of the grounds for disciplinary action is the employment of fraud or deceit in procuring or attempting to procure a permit or license.

Subp. 10. **Fees.** The effective dates are being deleted since the date is past and the fees are in effect.

Subp. 11. **Deadline for submitting material.** Changing the deadline for the receipt of a late application and fee is reasonable because the day before the examination, a final roster for use at the examination must be printed. A seating assignment must be effected so that the applicant's name can be typed on the work sheet which the proctor must use at the examination to record the distribution of test booklets. Even with good planning and time management there are always last minute details to attend to. If the rule is not changed, individuals can present an application and fee up to 4:30 the day prior to the examination. This does not allow the staff to prepare the necessary documents for use in the administration of the examination during normal office hours. Since Minnesota is one of the few states that accepts late applicants, we are already demonstrating a willingness to assist individuals as much as possible.

Subp. 12 **Written examination.** The licensing examinations used by the board are from the National Council of State Boards of Nursing, Inc. Every board of nursing belongs to the National Council. The voting body of the National Council, the Delegate Assembly, voted for a pass/fail reporting of the results of the examination. The pass/fail reporting was initiated with the October, 1988 examination. The rule reflects this change in the reporting of the results of the examination.

The addition to this subpart G. is reasonable since it is the same requirement as for the original application. The applicant's situation may have changed since the submission of the original application.

6315.0500 REQUIREMENTS FOR LICENSURE WITHOUT EXAMINATION.

Subpart 1. **Proof of licensure in another jurisdiction or country.** "Country" is deleted and "Canada" is inserted because Canada is the only foreign country that used a licensure examination acceptable to the board. Since applicants from Canada are the only foreign country applicants that can qualify for licensure without examination, it is appropriate to be specific.

Current rules provide for verification of licensure from the state of original licensure and from the state in which the individual was most recently employed. The state of original licensure is not synonymous with the state in which the individual wrote an examination acceptable to the board. One of the requirements for licensure that is specified in the law is passing an examination acceptable to the board. Therefore, this addition authorizes the board to request information from the state in which the individual passed an examination acceptable to the board.

Subp. 2 **Licensure application.** The phrase, "causes for denial of licensure," is deleted and replaced with "the grounds for disciplinary action" for consistency with the language in the law. The phrase, "for the registered nurse and Minnesota Statutes, section 148.297 for licensed practical nurses," is deleted because the registered nurse and licensed practical nurse sections were combined in the law. The phrase, "constitutes unethical conduct," is struck because it is redundant.

Subp. 3. **Fee.** The date is deleted because it was a date of implementation. The date is past and the rule is in effect.

Since the fee is the same for registered nurses and licensed practical nurses it is unnecessary to list both.

"Prior to" was changed to "before" by the revisor.

Subp. 4. **Evidence of good moral character and good mental health.** Evidence of good moral character and good mental health statements are struck because this requirement was deleted from the law. However, the law states that the burden of proof is upon the applicant to demonstrate the qualifications and satisfaction of requirements. The statement regarding further evidence clarifies for the applicant that the board may request further information in order to make the determination about whether the applicant meets the requirements for licensure (that there are no grounds for the board to deny licensure).

Subp. 6. **Waiver of graduation requirements.** "NCLEX PN" is struck because it is too restrictive. Minnesota Statutes, section 148.211, subd. 4. states "a licensing examination acceptable to the board." NCLEX PN is not the only acceptable examination.

Subp. 8. **Continuing education for registered nurses.** The additions to this rule provide for continuing education requirements that are similar to the requirements for reregistration. It is reasonable to expect the same level of preparation for return to practice whether the individual is applying for licensure or for reregistration.

Subp. 9. **Continuing education for practical nurses.** The additions to this rule provide for continuing education requirements that are similar to the requirements for reregistration. It is reasonable to expect the same level of preparation for return to practice whether the individual is applying for licensure or for reregistration.

The statement, "in nursing" was struck and "as a licensed practical nurse" was inserted so that the registered nurse requirement and the licensed practical nurse requirement were consistent. Further, the phrase "in nursing" is not clear and is open to interpretation.

The statement regarding 15 clock hours of a refresher course are struck. The requirement for the refresher course is outlined in the second paragraph. Participation in an orientation course is struck because participation in an orientation program has seldom been used by an applicant. Participation in an orientation program requires a permit. Not all applicants qualify for a permit.

Subp. 10. **Affidavit of graduation.** Since the purpose of the affidavit is to verify that the applicant graduated from an approved program and a transcript provides verification of graduation, it is reasonable to accept a transcript in lieu of an affidavit of graduation. There are instances when an affidavit can not be completed; for example, when a school has closed, there is no school official to sign an affidavit. However, transcripts are available.

Subp. 11. **Acceptable examination for registered nurses.** The additions reflect the change in the way the examination result are reported. The board uses the examination available through the National Council of State Boards of Nursing, Inc. All boards of nursing are members of the Council and use this examination for licensure purposes. The voting body of the Council, the

Delegate Assembly, voted to report the results of the examination by a pass/fail designation.

Subp. 12. **Acceptable examination for practical nurses.** The additions reflect the change in the way the examination result are reported. The board uses the examination available through the National Council of State Boards of Nursing, Inc. All boards of nursing are members of the Council and use this examination for licensure purposes. The voting body of the Council, the Delegate Assembly, voted to report the results of the examination by a pass/fail designation.

REGISTRATION OF PROFESSIONAL AND PRACTICAL NURSES

6310.2600 DEFINITIONS

Subp. 5. **Continuing education evidence form.** Changing the continuing education evidence form to report form is done for clarification. Evidence of continuing education is required for audit but not for the renewal process. The form completed for renewal of registration is for reporting information about continuing education only. Each reference to evidence form in the rules is changed to report form.

Subp. 5a. **Deferment.** A definition for deferment is added for clarity.

Subp. 6a. **Late application fee.** Changes are made in this subpart for grammatical reasons and to be consistent with the changes in the law. There no longer is a section 148.294.

Subp. 8a. **Mental Health.** Mental Health is being deleted because evidence of good mental health was deleted from the law.

Subp. 8b. **Moral character.** Moral character is being deleted because evidence of good moral character was deleted from the law.

Subp. 9a. **Permit.** A definition of permit is added because a provision for the issuance of a permit for participation in a refresher course was added to the law. The definition is needed for clarity so as to distinguish the permit in this section from the permits issued to applicants for licensure.

Subp. 9b. **Practical nurse.** The reference to Minnesota Statutues, section 148.29, subdivision 4 is struck because there is no such section in the present law.

Subp. 15. **Registration period.** The registration period definition is being changed for clarification and accuracy. The registration does not begin at the time the certificate is issued. The certificate is printed after the renewal application has been processed and renewal requirements have been met. The certificate is issued while a registration period is still in effect. The registration period begins when the current period ends.

6310.2800 REGISTRATION RENEWAL REQUIREMENTS

Subpart 1. **Requirement.** The date is being deleted because it is a date of implementation. The date is past and the requirement is in effect.

Subp. 2. **Demonstration of professional nursing skill.** The date is being deleted because it is a date of implementation. The date is past and the requirement is in effect. The change from "in accordance with" to "according to" was made by the revisor.

Subp. 4. **Application submission.** Licensed practical nurses and registered nurses are licensees. The submission process is the same for both groups. Therefore it is reasonable to use the inclusive term, "licensee." The second paragraph of the subpart is being deleted because it was date specific and is no longer applicable.

Subp. 5. **Late application fee.** The second paragraph of the subpart is being deleted because it was date specific and is no longer applicable.

Subp. 7. **True information.** The phrase "consititute unethical conduct" is deleted because it is redundant. One of the grounds for disciplinary action is the employment of fraud or deceit in procuring or attempting to procure a permit, license or registration certificate. Suspension or revocation of a license is deleted and disciplinary action is inserted because the former are only two of the many forms of disciplinary action that the board may take. It is inappropriate to limit the action the board may take.

6310.2900 REGISTRATION RENEWAL PROCEDURES

Subp. 2. **Application mailing date.** This rule is being amended for clarity. Applications do not go out to every licensee with a current certificate. Applications are mailed only to those licensees who are due to renew registration. It is the actual renewal application that is sent and not just a notice that it is time to renew. It is appropriate to use the term "licensee" rather than to use the definition of a licensee (license holder). The dates are deleted since the mailing dates were for a specific period of time. The dates are no longer applicable.

Subp. 3. **Late submission.** A portion of this subpart is being deleted because it was date specific and is no longer applicable.

Subp. 4. **Continuing education evidence form.** For clarity the form is changed from an evidence form to a report form. The licensee is not required to provide evidence of continuing education unless the licensee is being audited. The licensee must report participation in continuing education.

Subp. 6. **Initial registration and first registration renewal.** The date is being deleted because it was a date of implementation. The date is past and the process is in effect. The provision regarding obtaining or correcting birth date on the renewal application is no longer necessary. The birth date was necessary in setting up the registration period for every licensee. This has been completed. The birth date is no longer printed on the renewal application.

Subp. 7. **Substantiation of continuing education activities.** For consistency throughout the rules evidence form is deleted and continuing education report form is inserted. The date reference is deleted because it was a date of implementation. The date is past and the requirement is in effect.

Subp. 8. **Insufficient hours.** The word "deferment" is not used until the next subpart entitled "Substantitation after deferment." Since deferment is an option for a licensee who does not have enough hours to report, it is

appropriate to introduce the term when outlining the process for dealing with insufficient hours.

The inclusion of the information about the deferment of a demonstration of skill is added for clarity. The demonstration of skill must be part of one of the continuing education activities and a continuing education activity must be at least one contact hour. Therefore, if the licensee lacks a demonstration of skill one contact hour must be deferred. This is implied. It is reasonable to state it. The licensee is responsible to make up deferred hours. The licensee who does not renew should know about the process for make-up of the deferred hours. Therefore, it is reasonable to include the fact that the deferred hours will be added to the reregistration process.

6310.3100 REREGISTRATION

Subp. 2. **Reregistration requirements.** The initial statement in this subpart is added for clarity. The reference to moral character and mental health is struck because the licensure requirements for good moral character and good mental health have been removed from the law. In place of the requirement for good moral character and good mental health, the requirement is that the applicant has not engaged in conduct warranting disciplinary action. Since applicants for reregistration have not been working, there has been no opportunity for others to observe the individual's ability to engage safely in the practice of professional or practical nursing. Therefore it seems reasonable to require that the individual respond to questions on the application that relate to the causes for the board to take disciplinary action. It is appropriate to require that the licensee submit true information since one of the grounds for disciplinary action is the employment of fraud or deceit in procuring or attempting to procur a permit, license or registration certificate.

Subp. 2a. **Continuing education.** The date is being deleted because it was the date of implementation. The date is past and the requirement is in effect.

Subp. 2b. **Deferred contact hours.** This subpart is being added for clarity. In 6310.2900, subparts 8 and 9, there are provisions for reporting deferred hours in the subsequent renewal period. It is implied that if an individual does not renew, the licensee is not relieved of the responsibility for the deferred hours. Therefore it is appropriate to have a statement in the reregistration rules that clearly details this responsibility and specifies how the licensee must complete the deferred hours before registration is granted.

Subp. 5. **Evidence of moral character and mental health.** Evidence of moral character and mental health is being deleted because good moral character and good mental health have been deleted from the law.

Subp. 6. **Acceptable practice requirement.** The date in this subpart is being deleted because it was the date of implementation. The date is past and the requirement is in effect. The phrase, "by the board," is added for clarity. Section 148.29, subdivision 4, is deleted because there is no section with this number in the current law.

Subp. 7. **Refresher course requirement.** The date in the subpart is being deleted because it was a date of implementation. The date is past. The requirement is in effect. The statement "shall successfully complete a refresher course" is added for clarity. It was implied by the statement "must submit an affidavit of successful completion of a refresher course."

Applicants for reregistration have questioned whether they could use a refresher course to fulfill the refresher course requirement as well as the continuing education requirement. A refresher course is a continuing education activity. The board has accepted a refresher course to fulfill both requirements. It is appropriate to clarify that a refresher course can be used to fulfill the continuing education requirement if it meets the requirements of acceptability.

Subp. 8. **Limited registration certificate.** "Limited registration certificate" is changed to "permit to practice" because of a change in the law which provides for the issuance of a permit. The term "limited" is being used in the law for restrictions on practice. Limited is put on the certificates of licensees who have agreed to this type of disciplinary action. Thus, this change is important for clarity and for compliance with the law.

The remaining portion of the rule is necessary in order to inform the licensee about how to obtain the permit, its length, what it authorizes and what title can be used while the permit is in effect.

Subp. 11. **Nullification and reapplication.** "Registration certificate" is deleted and "permit" is substituted to be in compliance with the law. The word "specified" has been struck by the revisor.

6310.3300 CHANGE OF NAME AND ADDRESS ON RECORDS

Subpart 1. **Name change.** The part that is being deleted is being moved to another section and subpart. The statement that is being deleted does not relate to name change. Therefore it is inappropriate for it to be in this subpart.

6310.3400 DUPLICATE AND REPLACEMENT DOCUMENTS

Subp. 2. **Registration certificate.** The word "upon" has been changed by the revisor to "on." Date of issuance is being struck and effective date is being substituted. Licensees do not know when the certificate is printed/issued. Therefore it is unrealistic to expect that licensees can write to the board within 60 days of a date unknown to them. The effective date is a known date.

Subp. 3. **Lost, stolen or destroyed documents.** This subpart is new to this section. It was moved from the **Name change** subpart because it was not appropriate to that subpart. Since the statements provide for the replacement of lost, stolen or destroyed documents, it is appropriate to be in the section titled "DUPLICATE AND REPLACEMENT DOCUMENTS".

6310.3600 REGISTRATION FEES.

All effective dates are being repealed because they are no longer needed. The proposed fees will go into effect whenever the rules become effective.

Subpart 1. **Amount.**

A. The registration renewal fee is proposed to increase from $26.00 to $32.00 per 24 month registration period. The increased fee is

needed to provide sufficient income to balance expenditures during the current biennium. Minnesota Statutes section 214.06 requires the Board to adjust fees so that the total fees collected "..will as closely as possible equal anticipated expenditures during the fiscal biennium."

The anticipated expenditures for fiscal years 1990 and 1991 are $1,177,000 and $1,194,000 respectively, for a total of $2,371,000. The totals are made up of the following:

Expenditures	FY 90	FY 91
Appropriation	$1,044	$1,050
Salary Supplement	6	6
Statewide Indirect Costs	26	36
Agency Indirect Costs	11	12
Attorney General Costs	90	90
	$1,177	$1,194

The income for the same period is projected to be $1,036,575 and $1,320,765 for a total of $2,357,765, less than one percent short of anticipated receipts. A FEE REVIEW, FEE REVIEW - Details of Costs and Estimated and Actual Registration Renewal Receipts is attached.

D. The replacement registration certificate fee is proposed to be reduced from $20.00 to $5.00. Experience has shown that the $20.00 fee discouraged licensees from obtaining a replacement certificate when they had a name or address change. The Board has encouraged licensees to maintain accurate data in their records and on the certificates they carry. The Board believes that the $5.00 fee will cover most of the cost of processing the replacements and will not deter the licensee from obtaining a corrected certificate. It is anticipated that the reduction of approximately $400.00 in income from miscellaneous fees will be off set by the increasing number requesting a replacement certificate. Any variation is insignificant in the total budget.

PUBLIC HEALTH NURSE REGISTRATION

6316.0100 REQUIREMENTS FOR REGISTRATION AS A PUBLIC HEALTH NURSE

Subpart 1. **License and current registration.** It is appropriate to require licensure and current registration in Minnesota as a prerequisite for registration as a public health nurse since, according to the law an individual cannot practice nursing in Minnesota unless duly licensed and currently registered to do so.

Subp. 2. **Application.** It is reasonable for the applicant to obtain the application forms from the board of nursing, the agency responsible for registration of public health nurses. The requirement that the information be true and that the form be notarized is consistent with the requirements for licensure.

Subp. 3. **Fee.** Minnesota Statute, Section 148.191, Subd. 2 provides the authority to require a fee. Because of the board's experience with NSF (nonsufficient fund) checks, it is reasonable to require payment in a form other

than personal checks. Although personal checks are accepted for renewal of registration, there are subsequent renewal periods available when the board can contact the licensee. Like licensure, registration as a public health nurse is proposed to be a one-time process.

The fee of $25.00 is reasonable as an estimate of the cost of processing applications and promulgating the rules. The Board estimates, based on prior experience of the Minnesota Department of Health, that 1000 applications will be processed each year. The annual income is projected to be $25,000.00. The supporting documents are attached.

The Board believes that Minn. Stat. section 14.11 does not apply because the estimated expenditure of public money by local public bodies should not exceed $100,00 in either of the two years immediately following adoption of this rule.

Subp. 4. **Education.** It is reasonable to require at least a baccalaureate degree with a major in nursing, considering the following facts:

1. An article in the Journal of Nursing Education titled "Does the Baccalaureate Make a Difference?: Differentiating Nurse Performance by Education and Experience" states that the results of the study suggest that education promotes a broader range of abilities than does experience. In the study, nurses with a baccalaureate degree demonstrated more nursing competencies when compared with their associate degree or diploma colleagues.
2. At a consensus conference on the essentials of public health nursing practice and education conducted in 1984, the participants agreed that a student graduating with a nursing major from a baccalaureate program is prepared to accept an entry level position as a public health nurse. The participants made specific recommendations regarding public health nursing preparation at the baccalaureate level. Since there were no similar recommendations for preparation of individuals at a lesser level, it is reasonable to conclude that the minimum requirement should be preparation at the baccalaureate level.
3. At the 116th Annual Meeting of the American Public Health Association in 1988, the point was made that public health nursing was a specialty which required additional preparation and supervised practice. One of the concerns raised at this meeting was whether the preparation at the baccalaureate level was adequate. A quote from a paper presented at this meeting is as follows: "Public health nursing is a specialty, and it requires more than a basic educational preparation." If there is concern that baccalaureate preparation may not be ideal, certainly less than a baccalaureate would not be appropriate.
4. A report was prepared by the Department of Health Services of California for the California Legislature in 1983. According to this report, public health nursing in the United States has traditionally been recognized as a specialty in which nurses must function independently and in unstructured situations. California, the only other state that certifies public health nurses requires a minimum of a baccalaureate degree.
5. The National Organization of Public Health Nursing believed as early as 1918 that public health nurses should be educated in institutions of higher learning.
6. Public health nursing is a particular specialization in nursing that combines nursing skills with public health science. This definition was affirmed by the American Nurse's Association in a publication, "Standards of Community Health Nursing Practice," in which this specialization of nursing is defined as a practice that "promotes and preserves the health of populations by integrating the skills and

knowledge relevant to both nursing and public health. The practice is comprehensive and general, and is not limited to a particular age or diagnostic group: it is continual, and is not limited to episodic care." The American Nurse's Association says that "Nurses prepared at less than the baccalaureate level are not educationally prepared to meet these standards."

7. Since 1962, a baccalaureate degree in nursing has been the educational requirement of the Public Health Nursing Section of the Minnesota Department of Health for the registration of public health nurses.
8. The board solicited responses to a draft of the rules. A baccalaureate or higher degree was in the draft. We received 31 letters supporting the rules. However, one recommendation included in 28 of the letters was that the baccalaureate or higher degree be in nursing. The majority of these letters were from directors of nursing in county health departments. A letter from the Public Health Nursing Cooperative which represents the seven county metro area also recommended that the baccalaureate or higher degree be in nursing. The Minnesota Association of Colleges of Nursing recommended that the language be changed to "a baccalaureate or higher degree with a major in nursing."

It is reasonable to specify the course content for the public health portion of the individual's education stemming from the following sources:

1. The consensus conference of September 5-7, 1984. The participants recommended that the essential content be as follows:
   epidemiology, statistics and research;
   orientation to health care systems;
   identification of high-risk populations;
   application of public health concepts to the care of groups of culturally diverse persons;
   interventions with high-risk populations; and
   orientation to regulations affecting public health nursing practice.
2. The document, Essentials of College and University Education for Professional Nursing, released by the American Association of Colleges of Nursing in 1986. Preparation of this document was directed by a national panel of representatives from nursing, health care and higher education communities. The major portion of the panel's work was the identification of the essential areas of knowledge for the professional nurse. In addition to nursing knowledge applicable to all situations the panel recommended the following content areas:
   data collection tools and techniques of assessment for individuals, families, groups and communities;
   characteristics, concepts, and process related to communities including epidemiology, risk factors and their implications for selected populations, resources and resource assessment techniques, environmental factors and social organizations;
   community services, institutional resources, and roles of other health care providers;
   the interactive nature of the sociopolitical, economic and legislative arenas and the system of health care delivery.
3. Twenty-three letters received from county health departments. In each of these letters, there was a statement supporting the inclusion of the specific content for public health nursing education. The Public Health Nursing Cooperative stated in a letter "We agree that the minimal educational preparation is that of a baccalaureate in nursing, with a curriculum that includes the content outlined in Subpart 4. 1-5."

The content areas listed in the rules are a combination of the content areas listed in 1 and 2 above.

Thirty hours of theory is reasonable as a minimum requirement since it is equivalent to a three credit course.

In the past, the requirement has been that the program be accredited by the National League for Nursing (NLN). This approach is not reasonable when the following is considered:

1. It is too restrictive for several reasons. The first is that it automatically disqualifies individuals with adequate preparation in another country, specifically Canada, from being eligible for registration. NLN accreditation is granted only to schools in the United States. A report prepared by the Department of Health Services of California cited that "the National League for Nursing accreditation requirement did not include competent graduates of foreign schools." The NLN criteria for approval of baccalaureate programs is not specific as to course content. Secondly, graduates of programs prior to NLN accreditation would not qualify for registration. Also, it excludes individuals who graduate from a non-NLN accredited baccalaureate in nursing.
2. The supporting documents cited above addressed the importance of essential public health content in preparing for entry into public health nursing practice. Therefore, it is reasonable to take the approach of requiring applicants to document that they have had the essential public health content.
3. The "Criteria for the Evaluation of Baccalaureate and Higher Degree Programs in Nursing" of the National League for Nursing does not have specific content requirements for public health nursing. In examining the characteristics of baccalaureate education in nursing prepared by NLN, a description of what a graduate of the baccalaureate program in nursing is able to do includes the following:
   a. Assess health status and health potential; plan, implement and evaluate nursing care of individuals, families and communities.
   b. Collaborate with colleagues and citizens on the interdisciplinary health team to promote the health and welfare of people.
   c. Participate in identifying community and societal health needs and in designing nursing roles to meet these needs.

   Although reference is made to communities, societal health needs and collaborating with colleagues and citizens to promote the health and welfare of people, specific content is still not addressed.
4. If there would be any concern about omitting an accrediting body from the requirements, the following should be kept in mind:
   a. Registration as a public health nurse requires licensure in Minnesota, and one of the requirements for licensure is graduation from an approved program. Programs must be approved by the licensing authority. Although some individuals who apply will have graduated from programs for RNs and therefore do not fall under the jurisdiction of the licensing authority, the requirement that the baccalaureate is in nursing should provide some quality assurance to the program. Existing programs that are of concern, such as the College of St. Francis, does not offer a baccalaureate in nursing.
   b. Naming an accrediting body disqualifies individuals educated in other countries.

The comments received support preparation at the baccalaureate or higher degree level with a major in nursing and identification of minimum core content in public health nursing.

Subp. 5. **Affidavit of Graduation.** This is the evidence that is required for initial licensure. It is reasonable to accept the same type of document as verification of graduation from a baccalaureate or higher degree program.

Subp. 6. **Affidavit of completion of public health nursing education.** Since the emphasis is on the public health nursing courses that the individual took, it is reasonable to obtain evidence that the courses covered the essential content areas specified in the rules.

6316.0200 ISSUANCE OF PUBLIC HEALTH NURSE REGISTRATION CERTIFICATE.

Subpart 1. **Public health nurse registration certificate.** This rule clarifies when the certificate will be issued. It is reasonable that the certificate is only in effect while the individual is authorized to practice nursing in Minnesota. The necessary authorization is licensure and current registration. Current registration is documented through a registration certificate. Because current registration is documented by a registration certificate and public health nurse registration is documented by a registration certificate it is important to use the complete name of each certificate in order to distinguish one document from the other.

Subp. 2. **Length of the public health nurse registration certificate.** It is reasonable that the certificate is only in effect while the individual is authorized to practice nursing in Minnesota. The necessary authorization is licensure and current registration. Current registration is documented through a registration certificate.

Subp. 3. **Replacement document.** This provision is similar to the provision for the replacement of the registration certificate. Changes in name are not unusual and documents are lost or destroyed. Therefore it is reasonable to make provision for the replacement of the document. Individuals should be able to assure employers of their credentials. One of the ways to do this is to present the employer with the document. Therefore it is appropriate to provide for the replacement of the public health nurse registration certificate.

NURSING PRACTICE AND DISCIPLINE

6321.0100 DEFINITIONS.

Subpart 1. **Scope.** This introductory statement is needed to clarify the limited scope of usage of the two proposed definitions.

Subp. 2. **Monitoring.** The word monitor and it's other forms are used twice in the Nurse Practice Act: sections 148.261, subdivision 1 (5) and 148.271 (4). The word refers to a function which both registered nurses and licensed practical nurses carry out. It is necessary to define the word in order to distinguish the function of monitoring from the function of supervising which is carried out only by registered nurses.

The language proposed is reasonable because it clearly describes the parts of supervision that are performed by licensed practical nurses and are within their knowledge and ability. Nurses learn these skills either in their original nursing education program or through on the job training.

During the past ten years of processing complaints about licensed practical nurses, the issue of improper or insufficient monitoring of others was the second most common problem, after chemical abuse. This simple statement, based on general dictionary definitions, will provide the necessary guidance to practicing nurses and employers.

Subp. 3. **Supervision.** The word supervision and its other forms as applied to registered nurses appear several places in the Nurse Practice Act: sections 148.171 (3), 148.261, subdivision 1 (5) and 148.271 (4). It is necessary to define the word in order to differentiate the function from monitoring. Supervising appears only in the definition of professional nursing and is not included in the definition of practical nursing.

The words used to define supervision are from standard dictionaries and reflect the activities of the nursing process. Professional nurses are taught to perform supervision as defined when they obtain their initial nursing education.

6321.0500 REPORTING OBLIGATIONS.

Subpart 1. **Institutions.** This rule is needed in order to provide as much clarity as possible to employers so that they can determine which actions they take are reportable to the Board. The content is reasonable because it adds examples and makes more specific the phrase from section 148.263 subdivision 1 "...or any other disciplinary action."

The terms used are included in employment contracts which hospital and nursing homes have with nurses, therefore they are readily identifiable.

Subp. 2. **Licensed professionals.** It is necessary to include a rule which explains how a therapist should respond to the reporting requirement. It is reasonable to recognize that a client-therapist privilege may exist in some cases and that public protection will be accomplished if the nurse does not continue to function in the troublesome setting.

ADVANCED NURSING PRACTICE

6330.0100 DEFINITIONS.

Subpart 1. **Advanced nursing practice.** Changes made in Minnesota Statutes in 1988 make it necessary and reasonable to broaden this definition to include all of the practitioners specified in the statute. It is necessary to specify the abbreviations for each advanced nurse practitioner for clarity and completeness. The abbreviations for certified registered nurse anesthetists, CRNA, and certified nurse midwives, CNM, remain the same.

Certified nurse practitioners commonly use the abbreviation RN,C. Although the use of the RN,C abbreviation is not exclusive to the specified nurse practitioners, it is the only abbreviation commonly understood to signify nurse practitioner. While some of the specified nurse practitioners may use another

abbreviation for their specialty certificate, RN,C is more generally understood. It is necessary to include this abbreviation for clarification because the comma is often omitted.

Certified clinical specialists commonly use the abbreviation RN,CS. Although the abbreviation is not exclusive to specialists in psychiatric or mental health nursing, it is the only abbreviation used by these nurses.

Subp. 3. **Professional nursing organization for nurse anesthetists.** The repeal of the definition regarding this organization is necessary as the revision of the subsequent parts of this rule makes the definition redundant. The repeal is reasonable as this organization is specified in subsequent subparts.

Subp. 4. **Professional nursing organization for nurse midwives.** The repeal of the definition regarding this organization is necessary as the revision of the subsequent parts of this rule makes the definition redundant. The repeal is reasonable as this organization is specified in subsequent subparts.

Subp. 5. **Program of study.** Repeal of the definition for this term is necessary as the term is not used in the revision of this rule.

6330.0200 PURPOSE.

This revision is necessary to clarify the way in which the purpose of this chapter has been affected by the 1989 amendment of Minnesota Statutes. In keeping with the recent change in the law, the method of determining the services qualified for reimbursement has been changed from the Board listing the programs of study that have been completed by nurses to listing the professional nursing organizations authorized to certify nurses in specific advanced nursing practice roles.

6330.0300 CRITERIA TO BE A PROFESSIONAL NURSING ORGANIZATION WHICH CERTIFIES NURSES IN ADVANCED NURSING PRACTICE.

It is necessary to delete the requirements regarding accreditation of programs of study as the law now focuses on certification by professional organizations rather that accreditation.

It is reasonable to delete the references to programs of study as one of the criteria (new B.) specifies the minimum education requirement which certifying organizations must hold.

It is necessary to specify criteria for the organizations listed so there is a clear standard for updating the list. The criteria are reasonable as none of the professional organizations presently certifying nurses in the advanced nursing practice rules specified in the law are excluded by the criteria.

The criteria are also reasonable in as much as Minnesota nurses have been able to meet the certification requirements of each of the organizations that meet the criteria. Although numbers of certified nurses are not available from each organization, the American Nurses Association indicated that as of October 1, 1989 the following number of Minnesota were certified as:

Adult Nurse Practitioner - 196,
Family Nurse Practitioner - 65,
Gerontological Nurse Practitioner - 21,
School Nurse Practitioner - 3,
Pediatric Nurse Practitioner - 15,
Clinical Specialist in Child and Adolescent Psychiatric and Mental Health Nursing - 2
Clinical Specialist in Adult Psychiatric and Mental Health Nursing - 33

The American College of Nurse Midwives indicates that approximately 61 certified nurse midwives reside in Minnesota. The Council on Recertification of Nurse Anesthetists indicates that there are 55 newly certified and 727 recertified nurse anesthetists in Minnesota.

A. This criterion is necessary to assure that the national nature of current certification is maintained and weakening local modifications are prohibited. It is reasonable to insist on a national approach to certification as local variations could result in total confusion for the public.

B. It is necessary to specify the minimum amount of education now required so at least that standard is upheld in the future. While many certifying organizations have announced goals for high requirements by specified target dates, at least the current minimum requirement must be assured in any new certification programs. This minimal criterion is clearly reasonable as higher requirements have already been specified by many of the certifying organizations.

C. This criterion is necessary as it is the advanced practice of nursing that is to be certified. Without this criterion it would be possible for certifying organizations to credential a nurse who had never practiced in an advanced role. The criterion is reasonable given the clinical nature of the certification.

D. This criterion is necessary to prevent future certification of nurses based solely on education and/or practice. While education and practice are necessary components of certification requirements, testing is the only fair way to determine whether a nurse applying for certification has had the knowledge and ability necessary to safely and effectively engage in advanced nursing practice.

The criterion is reasonable given the specialized nature of the practice being certified. All of the organizations make the information regarding the test plan available to applicants.

E. This criterion is necessary to assure that nurses' certificates are effective for a discreet period. In view of the constantly enlarging knowledge base, the many changes occurring in practice and the fact that the capabilities of a nurse may change, lifetime certification would not be safe or effective.

It is reasonable to require that the certificate be limited in time as nurses can qualify for re-certification.

F. This criterion is necessary to assure that the certifying organizations take the steps necessary to assure that the caliber of practice by certified nurses remains high. Without periodic review, certification would provide documentation of ability at only one point in the nurse's

career. Periodic review is necessary to provide continued validation of the nurse's ability.

This criterion is reasonable because the organizations make the requirements for the periodic review known to the certified nurses at the time of certification.

6330.0350 PROFESSIONAL NURSING ORGANIZATIONS WITH AUTHORITY TO CERTIFY.

It is necessary to list the professional organizations now certifying professional nurses in the advanced nurse practice roles specified in the law so all interested parties will know what nursing services qualify for reimbursement. It is reasonable to initiate the publication of this list in as much as the list is exhaustive. The professional nursing organizations listed are the only such organizations now certifying nurses for the advanced nurse practice roles specified in the law.

6330.0400 DEMONSTRATING COMPLIANCE.

Repeal of this subpart is necessary as the programs of study are no longer the focus of determining compliance. It is reasonable to repeal this subpart as the criteria for being listed as an organization authorized to certify professional nurses as advanced nursing practitioners includes, in 6330.0300 new B., a minimum education requirement.

6330.0500 MAINTENANCE OF LISTS.

Subpart 1. **List updating.** It is necessary to periodically update the list so the public can readily determine the services eligible for reimbursement. Revision the list annually rather than every six months is reasonable as in the last two years the organizations offering such certification have neither increased or decreased.

Subp. 2. **New accreditations.** All references to accreditations of programs of study are being repealed as the focus of the list has been changed to organizations.

6330.0600 LIST OF NURSE ANESTHESIA PROGRAMS OF STUDY.

6330.0700 LIST OF NURSE MIDWIFERY PROGRAMS OF STUDY.

All lists of programs of study are being repealed as organizations are now listed.

SMALL BUSINESS CONSIDERATIONS.

Minn. Stat. section 14.115 requires administrative agencies, when proposing a rule or an amendment to an existing rule, to consider various methods for reducing the impact of the proposed rule or amendment on small businesses and to provide an opportunity for small businesses to participate in the rulemaking process.

It is the position of the Board that this provision does not apply to the rules it promulgates. Minn. Stat. section 14.115, subd. 7.b (1988) states that section 14.115 does not apply to "agency rules that do not affect small businesses directly." The Board's authority relates only to nurses not to the businesses they operate. Furthermore, although the Board does not compile statistics on the issue, almost all nurses are simply employees of the facilities at which they work. In these cases, it is clear that a nurse should not be considered a small business.

The Board is also exempt from the provisions of section 14.115, pursuant to its subdivision 7.c. which states that section 14.115 does not apply to "service businesses regulated by government bodies, for standards and costs, such as ... providers of medical care." Nurses provide nursing care and medical care and are regulated for standards and costs. The Board regulates nurses for standards and the Minnesota Department of Human Services regulates some nurses for costs.

However, should these proposed rules in some way be construed as being subject to Minn. Stat. section 14.115, the Board notes below how the five suggested methods listed in section 14.115, subdivision 2, for reducing the impact of the rules on small businesses should be applied to the proposed rules. The five suggested methods enumerated in subdivision 2 are as follows:

(a) the establishment of less stringent compliance or reporting requirements for small businesses;

(b) the establishment of less stringent schedules or deadlines for compliance or reporting requirements for small businesses;

(c) the consolidation or simplification of compliance or reporting requirements for small businesses;

(d) the establishment of performance standards for small businesses to replace design or operational standards required in the rule; and

(e) the exemption of small businesses from any or all requirements of the rule.

The feasibility of implementing each of the five suggested methods and whether implementing any of the five methods would be consistent with the statutory objectives that are the basis for this rule making are considered below.

1. <u>It would not be feasible to incorporate any of the five suggested methods into these proposed rules.</u>

Methods (a) to (c) of subdivision 2 relate to lessening compliance or reporting requirements for small businesses either by (a) establishing less stringent requirements, (b) establishing less stringent schedules or deadlines for compliance with requirements, or (c) consolidating or simplifying the requirements. Since the Board is not proposing any compliance or reporting requirements for either small or large businesses, it follows that there are no such requirements for the Board to lessen with respect to small businesses. If, however, these proposed rule amendments are viewed as compliance or reporting requirements for businesses, then the Board finds that it would be unworkable to lessen the requirements for those few nurses who practice in a solo or group setting of fewer than 50 employees since the proposed rules have no effect on their businesses. Method (d) suggests replacing design or operational standards with performance standards for small businesses. The Board's rules do not

propose design or operational standards for businesses and therefore there is no reason to implement performance standards for small businesses as a replacement for design or operational standards that do not exist. Finally, method (e) suggests exempting small businesses for any or all requirements of the rules. The application of this provision would exempt a few licensees from the purview of the rules with the result that a small number of nurses would be total unregulated, a clear conflict with existing nursing statutes.

2. Reducing the impact of the proposed amendments on small businesses would undermine the objectives of the Minnesota licensing law for nurses.

Pursuant to Minn. Stat. section 148.171 et seq., the Board was created for the purpose of establishing requirements for licensure and adopting standards for disciplinary action to govern the practices or behavior of all licensees. Pursuant to Minn. Stat. section 148.191, subd. 2, the Board is specifically mandated to promulgate rules as may be necessary to carry out the Board's purposes. Given these statutory mandates, it is the Board's duty to establish licensure qualifications and disciplinary standards which apply to and govern all applicants and licensees regardless of the nature of their practice. As it has been stated above, it is the Board's position that the proposed rules will not affect small businesses and certainly do not have the potential for imposing a greater impact on nurses in a solo or small practice than on those employed by agencies and organizations. It has also been explained above that the Board considers it unfeasible to implement any of the five suggested methods enumerated in subdivision 2 of the small business statute. Nonetheless, to the extent that the proposed rules may affect the business operation of a nurse or group of nurses and to the extent it may be feasible to implement any of the suggested methods for lessening the impact on small businesses, the Board believes it would be unwise and contrary to the purposes to be served by these rules for the Board to exempt one group of nurses from the requirements of these rules. Similarly, the Board believes it would be unwise and contrary to its statutory mandate for the Board to adopt one set of standards for those nurses (which may consist of a nonexistent class) who work as employees and adopt another, less stringent, set of standards to be applied to those nurses who practice in a solo or small group practice. It is the Board's view that these rules must apply equally to all nurses if the public whom they serve is to be adequately protected.

Licensees, regardless of whether they are considered as individuals or small businesses, have had and will continue to have an opportunity to participate in the rulemaking process for these proposed amendments. The Board has kept the various associations well informed of the proposed rules as they were developed and the associations have in turn informed their constituents. In addition, the Board mailed a copy of the proposed rules to everyone on the mailing list to receive proposed rules.

Board of Nursing

May 18, 1990

Date

Joyce M. Schowalter

Joyce M. Schowalter
Executive Director

STATE OF MINNESOTA

Department: Board of Nursing

OFFICE MEMORANDUM



Date: April 10, 1990

To: Bruce J. Reddemann, Director
Budget Operation and Support Division
Department of Finance

From: Joyce M. Schowalter
Executive Director JMS

Phone: 642-0567

Subject: Approval of Proposed Fees

The Board of Nursing has found it necessary to propose an increase in the registration renewal fee in order to balance receipts and expenditures during Fiscal Years 1990 and 1991. We also propose to reduce the replacement registration certificate fee in order to encourage more licensees to keep their records up-to-date following name and address changes. The changes proposed are as follows:

Fee	From	To	Effective Date
Registration Renewal	$26	$32	Passage of Rules
Replacement Registration Certificate	20	5	Passage of Rules

In addition the Board was granted the responsibility of registering public health nurses and the authority to charge a fee (Minnesota Statute Section 148.191, subdivision 2). This function was transferred to the Board from the Minnesota Department of Health.

Past experience suggests that the Board can expect about 1000 applications per year. The proposed fee of $25.00 is set to cover the costs of promulgating the rules relating to public health nurse registration and the recurring costs of processing the applications. Since the fee is for lifetime registration the amount is very reasonable.

A fee review form and other documentation is attached.

We request approval of the two fee changes and one new fee proposed above.

If you have any questions, please do not hesitate to call me.

Approved: B J Reddemann 4-11-90
Bruce J. Reddemann Date

JMS:tjz
Enclosures
cc: Pamela Wheelock
Executive Budget Officer

FI-00184-05 (12/87)

Department of Finance
FEE REVIEW

Date Prepared: 4/1/90

Department/Agency: Board of Nursing

Budget Activity:

Fee Name:

Legal Citation: M.S. 148.171-148.285

Fee Set By: [ ] Law [X] Agency

Purpose of Fee:
To license registered nurses and licensed practical nurses, approve nursing programs, verify licensure to other states, process complaints and register nursing corporations.

[ ] Dedicated [X] Non-Dedicated

Revenue Code: 310

APID: 21513:00 | Fund: 12 | Accumulated Difference Thru 1986: 444

Dollars in Thousands (137,522 = 137.5)

Fiscal Year	Actual F.Y. 87	Actual F.Y. 88	Actual F.Y. 89	Requested F.Y. 90	Requested F.Y. 91
Actual/Anticipated Receipts	687	992	1318	1037	1321
Less Actual/ Anticipated Costs	893	890	1070	1177	1194
Current Difference	(206)	102	248	(140)	127
Accumulated Difference	(206)	(104)	144	4	131
Number Paying Fee					
Present Fee					
Date Fee Last Changed					

Remarks:

Department Authorized Signature:

Finance Department Recommendation:

Executive Budget Officer Signature:

FI-00195-01

Department of Finance
FEE REVIEW – Details of Costs

Date Prepared: 4/1/90

Department/Agency: Board of Nursing

Budget Activity:

Fee Name:

Fiscal Year	Actual F.Y. 87	Actual F.Y. 88	Estimated F.Y. 89	Requested F.Y. 90	Requested F.Y. 91
Detailed Listing of Items Included as Costs on Fee Review Form FI-00194-06				Dollars in Thousands (137,522 = 137.5)	
Agency Direct Expenditures	793	791	900	1,044	1,050
Salary Increases	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	6	6
Attorney General	85	90	138	90	90
Statewide Indirect	6	0	22	26	36
Agency Indirect	9	9	10	11	12
Totals – must agree with cost on Fee Review Form	893	890	1,070	1,177	1,194

Remarks: Estimated receipts for FY 90 and 91

	FY 90			FY 91		
RN Fees	Fee Amt.	Number	Amount	Fee Amt.	Number	Amount
PHN Registration	$25	0	0	$25	1,000	25,000
Nsg. Corp.	$25	20	$ 500	$25	20	$ 500
Misc. fees	20	150	3,000	20	140	2,800
Misc. fee	-	-	-	5	40	200
Endorsement	55	1,000	55,000	55	1,100	60,500
Examination	75	1,400	105,000	75	1,500	112,500
Re-examination	50	250	12,500	50	250	12,500
Verification	20	2,000	40,000	20	2,250	45,000
Renewal	26	18,300	475,800	32	20,520	656,640
Late penalty	20	800	16,000	20	800	16,000
Late filing fee	50	50	2,500	50	50	2,500
NSF service charge	15	15	225	15	15	225
LPN Fees						
Misc. fees	20	150	3,000	20	140	2,800
Misc. fee	-	-	-	5	40	200
Endorsement	55	250	13,750	55	300	16,500
Examination	50	750	37,500	50	750	37,500
Re-examination	40	100	4,000	40	100	4,000
Verification	20	450	9,000	20	450	9,000
Renewal	26	9,600	249,600	32	9,600	307,200
Late penalty	20	400	8,000	20	400	8,000
Late filing fee	50	15	750	50	15	750
NSF service charge	15	30	450	15	30	450
Total			$1,036,575			$ 1,320,765

MINNESOTA BOARD OF NURSING

Estimated and Actual Registration Renewal Receipts

FY 88 - 93

Group	Actual FY 88 Number	Actual FY 88 Amount[A]	Actual FY 89 Number	Actual FY 89 Amount[B]	Estimated FY 90 Number	Estimated FY 90 Amount	Estimated FY 91 Number	Estimated FY 91 Amount	Estimated FY 92 Number	Estimated FY 92 Amount	Estimated FY 93 Number	Estimated FY 93 Amount
RN												
Odd					2,300 1,000	$ 59,800[C] 26,000[C]	5,520	$176,640[F]	21,000	$672,000	21,000	$672,000
Even					15,000	390,000[D]	15,000	480,000[G]				
LPN												
Odd					4,800	124,800[E]	4,800	153,600[H]				
Even					4,800	124,800	4,800	153,600	9,600	307,200	9,600	307,200
Total		$708,699		$913,265		$725,400		$963,840		$979,200		$979,200

FY 88 & 89 = 1,621,964

FY 90 & 91 = 1,689,240

FY 92 & 93 = 1,958,400

A. $20 and $25 fees during conversion period.

B. $26 fee during conversion period.

C. 5 groups of 460 @ $26.

D. 12 groups of 1,250 @ $26.

E. 12 groups of 400 @ $26.

F. 12 groups of 460 @ $32.

G. 12 groups of 1,250 @ $32.

H. 12 groups of 400 @ $32.

JMS 1/90

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE MINNESOTA

BOARD OF NURSING

In the Matter of the
Proposed Adoption of
Rules of the Board of
Nursing Relating to
Licensure, Registration,
Nursing Scholarships,
Advanced Nursing Practice,
Registration of Public Health
Nurses and Fees

AFFIDAVIT OF MAILING
THE NOTICE OF INTENT
TO ADOPT RULES WITHOUT
A PUBLIC HEARING AND
CERTIFICATE OF MAILING LIST

STATE OF MINNESOTA)
) ss.
COUNTY OF RAMSEY)

Tamera J. Zappa, being duly sworn, says:

I hereby certify that the list of persons and associations who have requested, pursuant to Minnesota Statute Sections 14.14, subd. 1(a) and 14.22 or 14.30, that their names be placed on the Board of Nursing's rulemaking mailing list is accurate, complete, and current as of this 23rd day of May, 1990.

That on the 23rd day of May, 1990, at the City of St. Paul, County of Ramsey, State of Minnesota, I mailed the attached Notice Of Intent to Adopt Rules Without A Public Hearing by depositing in the State of Minnesota Central Mail System for United States mailing a copy thereof, with postage prepaid, to all persons and associations of the aforementioned mailing list.

Tamera J. Zappa
Sceretary

Subscribed and sworn to before
me this 23rd day of May, 1990.

Marilyn A. Wolner
NOTARY PUBLIC

MARILYN A. WOLNER
NOTARY PUBLIC-MINNESOTA
HENNEPIN COUNTY
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Proposed Rules

Pursuant to Minn. Stat. §§ 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing, as long as the agency determines that the rules will be noncontroversial in nature. The agency must first publish a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. The notice must advise the public:

1. that they have 30 days in which to submit comment on the proposed rules;
2. that no public hearing will be held unless 25 or more persons make a written request for a hearing within the 30-day comment period;
3. of the manner in which persons shall request a hearing on the proposed rules; and
4. that the rule may be modified if the modifications are supported by the data and views submitted.

If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§ 14.14-14.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register*.

Pursuant to Minn. Stat. §§ 14.29 and 14.30, agencies may propose emergency rules under certain circumstances. Proposed emergency rules are published in the *State Register* and, for at least 25 days thereafter, interested persons may submit data and views in writing to the proposing agency.

Board of Nursing

Proposed Permanent Rules Relating to Licensing and Registration

Notice of Intent to Adopt Rules Without a Public Hearing

NOTICE IS HEREBY GIVEN that the Minnesota Board of Nursing (hereinafter "Board") intends to adopt the above-entitled rules without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in *Minnesota Statutes* §§ 14.22 to 14.28 (1988). The statutory authority to adopt the rules is *Minnesota Statutes* §§ 148.191, subd. 2 and 148.231, subd. 1.

All persons have 30 days in which to submit comment in support of or in opposition to the proposed rules or any part or subpart of the rules. Comment is encouraged. Each comment should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on the rules within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the proposed rules addressed, the reason for the request, and any change proposed. If a public hearing is required, the Board will proceed pursuant to *Minnesota Statutes* §§ 14.131 to 14.20 (1988).

Comments or written requests for a public hearing must be submitted to:

Joyce M. Schowalter
Executive Director
Minnesota Board of Nursing
Suite 108
2700 University Avenue West
St. Paul, Minnesota 55113
Telephone: (612) 642-0567

The proposed rules may be modified if the modifications are supported by data and views submitted to the Board and do not result in a substantial change in the proposed rules as noticed.

A copy of the rules is attached.

A STATEMENT OF NEED AND REASONABLENESS that describes the need for and reasonableness of each provision of the proposed rules and identifies the data and information relied upon to support the proposed rules has been prepared and is available from Joyce M. Schowalter upon request.

Minnesota Statutes § 14.115 specifies certain actions which an agency must take if an agency engages in rulemaking which may affect small businesses. It is the Board's position that the Board's rules are not subject to section 14.115 pursuant to subdivision 7(b) or (c). Nevertheless, should the rules be subject to section 14.115 and it is determined that they will impact on small business, the Statement of Need and Reasonableness addresses this impact.

If no hearing is required, upon adoption of the rules, the rules and the required supporting documents will be submitted to the Attorney General for review as to legality and form to the extent the form relates to legality. Any person may request notification of

the date of submission to the Attorney General. Persons who wish to be advised of the submission of this material to the Attorney General or who wish to receive a copy of the adopted rules must submit the written request to Joyce M. Schowalter.

Dated: 11 May 1990.

Joyce M. Schowalter
Executive Director

Rules as Proposed

PROFESSIONAL AND PRACTICAL PROGRAM APPROVALS

6301.1700 CLINICAL SETTINGS.

Subpart 1. **Use of clinical settings ~~absent affiliation.~~** ~~If~~ Whenever a program uses a clinical setting to meet the requirements of parts 6301.1500 to 6301.2200 ~~and has no affiliation with that clinical setting, then~~ registered professional nurse faculty members must be responsible for determining clinical learning activities and for guiding and evaluating students in that setting.

Subps. 2. to 4. [See Repealer.]

6301.1800 NURSING ABILITIES TO BE EVALUATED.

[For text of subps 1 to 5, see M.R.]

Subp. 6. **Delegated medical treatment.** Students must be evaluated for the ability to:

[For text of items A to L, see M.R.]

M. observe effects of the administration of a prescribed medication; ~~and~~

N. follow procedure for working with controlled substances in the administration of prescribed medication; and

O. implement treatment related to cardiopulmonary function.

[For text of subps 7 and 8, see M.R.]

LICENSURE OF PROFESSIONAL AND PRACTICAL NURSES

~~6315.0100~~ 6305.0100 DEFINITIONS.

Subpart 1. **Scope.** As used in parts ~~6315.0100~~ 6305.0100 to ~~6315.0700~~ 6305.0700, the following terms have the meanings given them.

[For text of subps 2 to 7, see M.R.]

Subp. 7a. **Disaster.** "Disaster" means an occurrence such as a tornado, storm, flood, high water, earthquake, drought, blizzard, pestilence, fire, explosion, building collapse, commercial transportation wreck, or other situation that causes human suffering or create human needs that require substantial assistance and exceed the health care resources of the community.

[For text of subps 8 and 9, see M.R.]

Subp. 10. **Final term of study.** "Final term of study" means the last academic period (quarter, term, session, or semester) that is necessary for an applicant to complete graduation requirements. The term must have officially begun at least one day before the examination.

[For text of subps 11 to 14, see M.R.]

Subp. 15. and 16. [See Repealer.]

[For text of subps 17 to 21, see M.R.]

~~6315.0200~~ 6305.0200 PURPOSE AND AUTHORITY.

Parts ~~6315.0100~~ 6305.0100 to ~~6315.0700~~ 6305.0700 are adopted pursuant to *Minnesota Statutes*, section 148.191. The parts pertain to the authorization to practice, the requirements for licensure by examination, the requirements for licensure without examination, and nullification of applications. Part ~~6315.0400~~ 6305.0400 applies to applicants who have not passed an examination acceptable to the board. Part ~~6315.0500~~ 6305.0500 applies to applicants who have passed an examination acceptable to the board.

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **ADOPTED RULES SECTION** — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

~~6315.0300~~ 6305.0300 AUTHORIZATION TO PRACTICE NURSING.

Subpart 1. **Required authorization.** A Minnesota license and current registration certificate or a permit is required if an individual practices professional nursing as defined in *Minnesota Statutes*, section 148.171, clause (3), or practical nursing as defined in *Minnesota Statutes*, section ~~148.29~~ 148.171, ~~subdivision~~ 4 clause (5), whether for monetary compensation or as a volunteer, or if an individual is a faculty member for an out-of-state nursing or nursing assistant program and is supervising nursing students or nursing assistant students in Minnesota except as provided in *Minnesota Statutes*, ~~sections~~ section 148.271 ~~and 148.295~~. If the permit is revoked or expires, whichever occurs first, an applicant must not practice nursing until a license has been issued.

~~Minnesota licensure is not required for a nurse licensed in another jurisdiction who is in Minnesota as a student enrolled in a course of study which involves nursing practice, such as a course leading to a higher degree or certification in a nursing specialty or to enhanced skills in a clinical field.~~ Exceptions as identified in *Minnesota Statutes*, section 148.271, include the following:

A. Nursing assistance in an emergency as referenced in *Minnesota Statutes*, section 148.271, clause (1), is interpreted to include nursing service as follows:

(1) to patients during transport into, through, or out of Minnesota including during flights and while at airports or depots or during the period of stabilization in preparation for transport;

(2) for disaster relief during a period not to exceed seven days; and

(3) providing nursing services at the scene of an accident.

B. Formal, structured course of study as referenced in *Minnesota Statutes*, section 148.271, clause (6), is interpreted to mean that the course is sponsored by an educational institution or the educational department of a health care facility; has written, measurable objectives; has an organized plan of study which includes instructors and, when appropriate, clinical supervisors; uses a formalized method of evaluating student performance; and issues a document which verifies completion of the course.

C. Nursing program approved by the board as referenced in *Minnesota Statutes*, section 148.271, clause (7), is interpreted to include any nursing program in the United States or Canada which is approved by the state or province in which the program is located. However, the supervising instructor must hold a Minnesota registered nurse license and current registration.

Subp. 1a. **Authorized abbreviations.** The categories of nursing personnel listed below may use abbreviations as follows:

A. Public health nurse, abbreviated "PHN."

B. Registered nurse, abbreviated "RN," may only be used by a registered nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

C. Licensed practical nurse, abbreviated "LPN," may only be used by a licensed practical nurse who is currently registered in Minnesota or an applicant for licensure in Minnesota who holds a permit as authorized in subpart 9.

D. Registered nurses and licensed practical nurses who are licensed in Minnesota but who are not currently registered may use the abbreviation "RN" and "LPN" respectively for personal identification provided it is not used for monetary gain.

E. Nursing assistants who are on the long-term care registry of the board are nursing assistants/registered, abbreviated "NA/R."

[For text of subps 2 and 3, see M.R.]

Subp. 4. **Eligibility for permit to practice nursing with direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing under the direct supervision of a registered nurse if the applicant:

[For text of items A to F, see M.R.]

G. has graduated from an approved program as specified in part ~~6315.0400~~ 6305.0400, subpart 4 or 5; and

[For text of item H, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Permit to practice nursing without direct supervision.** The board shall grant an applicant who is not the subject of a pending investigation or disciplinary action a permit to practice nursing that does not require direct supervision if the applicant:

[For text of items A to D, see M.R.]

Subp. 7. **Length of permits.** The permit authorizing practice under the direct supervision of a registered nurse expires eight weeks after the administration of the examination or upon the applicant's notification by the board of failure on the examination, whichever occurs first. The board ~~shall not~~ may extend this permit ~~even if an applicant passes the examination~~ an additional eight weeks if the applicant's results are delayed due to a processing delay by another nurse licensing agency or until the matter is resolved for the applicant who is under investigation by the board.

The permit authorizing practice without direct supervision expires six months after the date of issue, but the board shall extend this permit if licensure cannot occur because of a processing delay by another nurse licensing agency.

Subp. 8. **Revocation of permit.** The board shall revoke a permit in the following situations.

A. The board shall revoke a permit if the permit holder:

(1) does not write the scheduled examination;

(2) has been notified of the results of the examination;

(3) is licensed by the board;

(4) did not write in another jurisdiction an examination acceptable to the board;

(5) did not pass an examination in another jurisdiction with a score acceptable to the board; ~~or~~

(6) is not eligible for licensure; or

(7) did not graduate.

B. The board may act to decide whether to revoke a permit if the board determines that:

(1) an applicant for licensure by examination did not meet the graduation ~~requirement specified~~ requirements in part ~~6315.0400~~ 6305.0400, subpart 4 or 5;

(2) an applicant for licensure without examination presented fraudulent evidence of licensure in another jurisdiction or Canadian province; or

(3) an applicant has engaged in conduct which constitutes grounds for denial of a license.

Subp. 9. **Designated titles.** The permit holder who is an applicant for registered nurse licensure by examination shall use the title "graduate nurse," abbreviated "GN." The permit holder who is an applicant for registered nurse licensure without examination shall use the title registered nurse, abbreviated "RN." The permit holder who is an applicant for licensed practical nurse licensure by examination shall use the title "graduate practical nurse," abbreviated ~~as~~ "GPN." The permit holder who is an applicant for licensed practical nurse licensure without examination shall use the title "licensed practical nurse," abbreviated "LPN."

~~6315.0400~~ 6305.0400 REQUIREMENTS FOR LICENSURE BY EXAMINATION.

Subpart 1. **Licensure application.** An applicant shall obtain the application forms for licensure and instructions for filing from the board. An applicant shall respond to questions on the application that relate to ~~causes for denial of licensure listed~~ the grounds for disciplinary action in *Minnesota Statutes*, section 148.261 ~~for the registered nurse and *Minnesota Statutes*, section 148.297 for the licensed practical nurse~~. An applicant shall submit true information. Falsification or omission of information ~~constitutes unethical conduct and~~ provides grounds for ~~denial of a license~~ disciplinary action. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

[For text of subp 2, see M.R.]

Subp. 3. **Further evidence ~~of good moral character and good mental health.~~** ~~An applicant shall verify on the application that he or she is of good moral character and in good mental health. The board may require further evidence of an applicant's character or mental health if the board has information satisfying one of the following conditions:~~

~~A. implying a violation of a federal, state, or local law or rule;~~

~~B. constituting grounds for denial of a license, if true;~~

~~C. implying that the applicant provided inaccurate information or omitted information solicited on the licensure or examination applications;~~

~~D. pertaining to behavior of the applicant during the applicant's educational period which suggests that the applicant is not of good moral character or not in good mental health;~~

~~E. showing that the applicant may have cheated on the licensing examination;~~

~~F. showing that the applicant was discharged from employment;~~

~~G. showing that disciplinary action was taken or is pending or the applicant is under investigation by another nurse licensing agency; or~~

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~~H. showing that at the time of board action on an application the applicant is hospitalized for treatment of mental illness~~ The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in *Minnesota Statutes*, section 148.261.

Subp. 4. **Graduation from approved professional nursing program.** An applicant who has graduated from an approved professional nursing program is eligible for licensure as a registered nurse if the applicant's nursing education includes classroom and clinical instruction. The learning activities must have been provided ~~in accordance with~~ according to either item A or B.

[For text of items A and B, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Transcripts necessary for applicants educated in foreign countries.** An applicant who has graduated from a program in another country shall submit a transcript in addition to the affidavit of graduation required in subpart 8. The applicant shall also submit a course description if the entries on the transcript are not self-explanatory as to course content. In lieu of the course description, an official of the program may complete a form provided by the board. On a notarized form, the official must attest to the applicant's participation in classroom and clinical instruction consistent with the required learning activities in part 6315.0400, subpart 4, for registered nurse applicants or subpart 5 for licensed practical nurse applicants. If the transcript and course description are not in English, a translation must be done by an agency or individual specified by the board. The cost of this translation must be paid by the applicant.

If an official transcript cannot be submitted because of political unrest or alleged governmental reprisal if the school releases the documents or if the original school records were destroyed because of a disaster or record destruction decision, or the school is closed, the board will accept one of the following:

A. verification of the applicant's nursing education from the Commission on Graduates of Foreign Nursing Schools;

B. verification of the applicant's nursing education from a licensing authority;

C. verification of the applicant's nursing education from a credentialing body for refugees which was established by a national or international nursing or governmental organization;

D. a copy of a transcript of the applicant's nursing education from a college or university that accepted the applicant for further study, the copy certified as a true and correct copy of the transcript in the files and records of the college or university; or

E. a copy of the transcript of the applicant's nursing education from another licensing authority, the copy certified as a true and correct copy of the transcript in the files and records of the licensing authority.

If the entries on an official transcript are not self-explanatory as to course content and further educational information cannot be obtained because of political unrest, alleged governmental reprisal if the school releases the information, or if the records have been destroyed, the board shall accept the verifications of item A or C.

[For text of subp 7, see M.R.]

Subp. 8. **Affidavit of graduation.** An applicant shall have an affidavit of graduation completed and signed by an official of the nursing program. The completed affidavit must bear the seal or stamp of the program. For an applicant who has graduated from a program in another country, if the school does not notarize or does not complete the affidavit, the transcript may be accepted in lieu of the notarization. An applicant must submit the affidavit ~~prior to~~ before the examination unless the applicant will be writing the examination before graduation. An applicant who graduates after writing an examination shall submit the affidavit after graduation but before licensure. An applicant who fails an examination shall submit the affidavit before reexamination.

If the board finds after the examination has been written that the affidavit of graduation was completed in error, the applicant's permit shall be considered void. The examination results shall not be released nor action taken on the application until the applicant has graduated. Graduation requirements must be met no later than the next available school term following notification of nongraduation. If there is evidence that the applicant was aware of nongraduation status before the examination and did not inform the board, the matter may be handled through a disciplinary proceeding.

[For text of subp 9, see M.R.]

Subp. 10. **Fees.** The board shall charge the following fees.

A. The licensure fee is $75 for an applicant for registered nurse licensure and $50 for an applicant for licensed practical nurse licensure~~, effective January 1, 1987~~. This fee must be paid to the board and must be received ~~prior to~~ before evaluation of an applicant's qualifications for examination and licensure.

B. The examination fee is set by the examination vendor and must be submitted to the agency specified by the board each time an applicant wants to be scheduled to write an examination.

C. The reexamination fee is $50 for an applicant for registered nurse licensure and $40 for an applicant for licensed practical nurse licensure. The fee must be paid to the board.

D. A late filing fee of $50 must be remitted to the board if one or more of the following materials is not properly postmarked or delivered by the deadline:

(1) licensure application and fee;

(2) examination application and fee;

(3) reexamination application and fee.

E. Personal checks are not accepted. Each remittance must be in the form of United States currency, cashier's check, or money order.

F. If for any reason a license is not issued, fees are not refundable.

Subp. 11. **Deadline for submitting material.** The deadline for submitting all required applications and fees is 56 calendar days preceding an examination. The board shall use the postmark and address to determine compliance. If the required applications and fees are not received on time, the applicant must pay a late filing fee.

Late applications and fees, and the late filing fee if applicable, must be received no later than 4:30 p.m. two working days before the examination. All other documents must be received no later than 4:30 p.m. the day before an examination.

Subp. 12. **Written examination.** The licensure examinations are the examinations of the National Council of State Boards of Nursing, Inc. An applicant must receive a pass on the National Council Licensure Examination.

[For text of items A to F, see M.R.]

G. An applicant who fails an examination may apply for reexamination on a reexamination application supplied by the board and must obey all other applicable rules. An applicant shall respond to questions on the application that relate to the grounds for disciplinary action listed in *Minnesota Statutes*, section 148.261. The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action. An applicant must submit true information. Falsification or omission of information provides grounds for denial of a license. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant.

H. An applicant may write the examination for Minnesota licensure specified in this subpart 12 in another jurisdiction if the board authorizes the applicant to do so and the jurisdiction is willing to administer the examination. The applicant must meet any procedural requirements and pay any fees set by the other jurisdiction.

6315.0500 6305.0500 REQUIREMENTS FOR LICENSURE WITHOUT EXAMINATION.

Subpart 1. **Proof of licensure in another jurisdiction or country Canada.** To be licensed to practice nursing in Minnesota without writing an examination, an applicant must submit proof, on a form provided by the board, that he or she the applicant is licensed in another jurisdiction, or Canadian province, or country and has passed an examination acceptable to the board as listed in subparts 11 and 12. Proof of licensure must be obtained from the jurisdiction, or Canadian province, or country in which the applicant was first licensed and wrote an acceptable examination as well as the jurisdiction or Canadian province in which the applicant was most recently employed. Proof of licensure must be obtained from the jurisdiction in which the applicant was first licensed, if this is different from the jurisdiction in which the applicant was licensed based on an acceptable examination.

Subp. 2. **Licensure application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall respond to questions on the application that relate to causes for denial of licensure the grounds for disciplinary action listed in *Minnesota Statutes*, section 148.261, for the registered nurse and *Minnesota Statutes*, section 148.297, for the licensed practical nurse. An applicant shall submit true information. Falsification or omission of any information constitutes unethical conduct and provides grounds for denial of a license. The application must be notarized. If an application is received without a fee, it shall be returned to the applicant. Application for licensure begins on the date when an application and fee are received by the board.

Subp. 3. **Fee.** The fee for licensure is $55 for registered nurse applicants and $55 for licensed practical nurse applicants, effective January 1, 1987. This fee must be paid to the board and must be received prior to before evaluation of an applicant's qualifications

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for licensure. Personal checks are not accepted. Remittance must be in the form of United States currency, cashier's check, or money order. If for any reason a license is not issued, the fee is not refundable.

Subp. 4. **Further evidence ~~of good moral character and good mental health.~~** ~~An applicant shall verify on the application that he or she is of good moral character and in good mental health. The board may require further evidence of an applicant's character or mental health if the board has information satisfying one of the following conditions:~~

~~A. implying a violation of a federal, state, or local law or rule;~~

~~B. constituting grounds for denial of a license, if true;~~

~~C. showing that disciplinary action was taken or is pending or the applicant is under investigation by another nurse licensing agency;~~

~~D. showing that the applicant provided inaccurate information or omitted information solicited on the licensure application;~~

~~E. showing that the applicant was discharged from employment; or~~

~~F. showing that at the time of application the applicant is hospitalized for treatment of mental illness~~ The board may require further information of the applicant in order to determine whether the applicant has engaged in conduct warranting disciplinary action as set forth in *Minnesota Statutes*, section 148.261.

[For text of subp 5, see M.R.]

Subp. 6. **Waiver of graduation requirement.** The board shall waive the requirement of graduation from an approved nursing program if:

[For text of item A, see M.R.]

B. an applicant for licensed practical nurse licensure has been licensed by another jurisdiction and passed ~~NCLEX-PN with a score~~ an acceptable examination as specified in subpart 12 and has had at least 4,000 clock hours of employment as a licensed practical nurse in the 60 calendar months preceding application for licensure in Minnesota.

Subp. 7. **Current nursing education or experience.** An applicant who has been employed in nursing or who has graduated from an approved nursing program during the two years immediately preceding application for licensure is exempt from the continuing education requirements ~~as specified~~ in subparts 8 and 9. Employment references must be submitted to verify employment dates. An affidavit of graduation or evidence from the nurse licensing agency in another jurisdiction or Canadian province must be submitted to verify the graduation date.

Subp. 8. **Continuing education for registered nurses.** An applicant for registered nurse licensure ~~who~~ must participate in continuing education activities as follows:

A. If the applicant has not been employed as a registered nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in continuing education activities which meet the criteria ~~specified~~ in part 6310.2800 and must submit an affidavit of continuing education. The continuing education participation must have occurred within the 24 months preceding board action on the application for licensure.

B. If an applicant for registered nurse licensure has not been employed as a registered nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within the 24 months immediately preceding board action on the application for licensure.

Subp. 9. **Continuing education for practical nurses.** An applicant for licensed practical nurse licensure ~~who~~ must participate in continuing education as follows:

A. If the applicant has not been employed ~~in nursing~~ as a licensed practical nurse during the two years immediately preceding receipt by the board of the application, the applicant must participate in ~~one of the following continuing education activities: at least 15 clock hours of a nurse refresher course;~~ at least 15 clock hours of nursing-related continuing education courses~~; or an orientation program at least 15 clock hours in length conducted by an employer or potential employer~~. The continuing education must have occurred within the 24 months preceding board action on the application for licensure. The applicant must submit an affidavit of continuing education.

B. If an applicant for licensed practical nurse licensure has not been employed as a licensed practical nurse at least 320 hours within the four years preceding receipt by the board of the application for licensure, the applicant shall successfully complete a refresher course and submit an affidavit of completion. The refresher course must be completed within the 24 months immediately preceding board action on the application for licensure.

Subp. 10. **Affidavit of graduation.** An applicant must submit an affidavit of graduation, signed by an official of the nursing program and bearing the seal or stamp of the program. If an official school transcript is submitted, it shall be accepted in lieu of an affidavit of graduation. An affidavit is not required if the licensing authority in another jurisdiction or Canadian province verifies graduation

from an approved program. If a licensed practical nurse applicant has not graduated from an approved program, the applicant shall send his or her employer a form supplied by the board for documentation of 4,000 clock hours of employment. The form must be completed by the employer and returned to the board. The board shall determine if the employment fulfills the requirement of *Minnesota Statutes*, section ~~148.291~~ 148.211, subdivision ~~3~~ 4.

Subp. 11. **Acceptable examinations for registered nurses.** The requirement of having passed a written examination acceptable to the board for registered nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Registered Nurses (SBTPE-RN) ~~prior to~~ before 1957;

B. passed the SBTPE-RN after December 31, 1956, and before July 1, 1982, with a scaled score of at least 350 on each of the five parts; ~~or~~

C. passed NCLEX-RN after June 30, 1982, and before February 1, 1989, with a scaled score of 1,600; or

D. passed NCLEX-RN after January 31, 1989, with a designation of pass.

Subp. 12. **Acceptable examinations for practical nurses.** The requirement of having passed a written examination acceptable to the board for licensed practical nurse licensure is fulfilled if an applicant has:

A. passed a state-constructed examination or the State Board Test Pool Examination for Practical Nurses (SBTPE-PN) ~~prior to~~ before 1960;

B. passed the SBTPE-PN after December 31, 1959, and before January 1, 1970, with a scaled score of at least 370;

C. passed the SBTPE-PN after December 31, 1969, and before October 1, 1982, with a scaled score of at least 400; ~~or~~

D. passed NCLEX-PN after September 30, 1982, and before October 1, 1988, with a scaled score of at least 350; or

E. passed NCLEX-PN after September 30, 1988, with a designation of pass.

Subp. 13. **Insufficient score.** An applicant for licensure whose examination score does not meet the Minnesota score requirement ~~specified~~ in subpart 11 or 12 must write the examination currently used in Minnesota, achieve the passing score established for the current examination, and meet the requirements ~~specified~~ in part ~~6315.0400~~ 6305.0400, subparts 2, 10, 11, and 12.

REGISTRATION OF PROFESSIONAL AND PRACTICAL NURSES

6310.2600 DEFINITIONS.

[For text of subps 1 to 4, see M.R.]

Subp. 5. **Continuing education ~~evidence~~ report form.** "Continuing education ~~evidence~~ report form" means the printed document provided by the board for use in reporting the information required in parts 6310.2800 to 6310.2900.

Subp. 5a. **Deferment.** "Deferment" means postponement of participation in and reporting of all or part of the continuing education activities for renewal.

[For text of subp 6, see M.R.]

Subp. 6a. **Late application fee.** "Late application fee" means the penalty fee ~~as~~ authorized in *Minnesota Statutes*, ~~sections~~ section 148.231, subdivision 1 ~~and 148.294, subdivision 1~~.

[For text of subps 7 to 8, see M.R.]

Subp. 8a. and 8b. [See Repealer.]

[For text of subps 8c and 9, see M.R.]

Subp. 9a. **Permit.** "Permit" means the document issued by the board to an applicant for reregistration that authorizes practice of professional or practical nursing in Minnesota during participation in a formal, structured refresher course for nurses that includes clinical practice.

Subp. 9b. **Practical nurse.** "Practical nurse" means a person authorized by the board to engage in the practice of practical nursing as defined in *Minnesota Statutes*, section ~~148.29, subdivision 4~~ 148.171, clause (5).

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Subp. ~~9b~~ 9c. **Professional nurse.** "Professional nurse" means a person authorized by the board to engage in the practice of professional nursing as defined in *Minnesota Statutes*, section 148.171, clause (3).

[For text of subps 10 to 14, see M.R.]

Subp. 15. **Registration period.** "Registration period" means a 24-month interval of time for which a registration certificate is issued. The period ~~begins the date the registration certificate is issued and~~ ends the last day of the licensee's month of birth in an even- or odd-numbered year according to the licensee's year of birth. The length may vary for a nurse's first registration period or reregistration period. For registration renewal, the period starts on the first day of the month following expiration of the previous registration period.

[For text of subp 16, see M.R.]

6310.2800 REGISTRATION RENEWAL REQUIREMENTS.

Subpart 1. **Requirement.** Each licensee is responsible for applying for renewal of registration if the person wishes to be authorized to practice as a professional or practical nurse in Minnesota.

Licensees are required to complete a registration renewal application and pay a renewal fee. In addition, professional nurses are required to accrue 30 contact hours of acceptable continuing education activities for registration renewal ~~on August 1, 1982, and thereafter~~. Contact hours shall be accrued during a 24-month continuing education participation period ending one month before the professional nurse's registration expiration date. The number of contact hours and length of participation period may vary for a professional nurse's first registration renewal following licensure or reregistration ~~in accordance with~~ according to part 6310.2900, subpart 6.

Subp. 2. **Demonstration of professional nursing skill.** At least one of the acceptable continuing education activities required for registration renewal ~~on or after August 1, 1986,~~ shall require the professional nurse to show evidence of having successfully demonstrated to the instructor skill in performing one or a portion of a professional nursing function as indicated in *Minnesota Statutes*, section 148.171, clause (3).

Subp. 4. **Application submission.** ~~Licensed practical nurses and registered nurses~~ Licensees shall submit a completed, signed application for registration renewal and a renewal fee to the board office. Renewal applications from professional nurses must be accompanied by a completed continuing education ~~evidence~~ report form meeting the requirements of parts 6310.2800 and 6310.2900. Renewal applications, fees, and continuing education report forms must be received in the board office in the month preceding the month in which the applicant's registration expires. Resubmission of a previously incomplete or incorrect application form and renewal fee received before the month in which the licensee's registration expires, shall constitute timely submission if received in the board office on or before the licensee's registration expiration date.

~~In 1988 and 1989 a registration renewal application and a renewal fee from a professional nurse who held current registration on July 31, 1987, shall be received in the board office on or before May 31 in the year in which the nurse's registration expires. Resubmission of a previously incomplete or incorrect application and renewal fee received on or before May 31 in the year in which the nurse's registration expires, shall constitute timely submission if received in the board office on or before July 31 of that year.~~

Subp. 5. **Late application fee.** A licensee filing for registration renewal shall pay a late application fee, as well as the renewal fee for the current renewal period if the application or renewal fee is received in the board office during the month in which the licensee's registration expires.

~~In 1988 and 1989 a registration renewal application received from a professional nurse who held current registration on July 31, 1987, shall incur a late application fee if the application or renewal fee is received in the board office during June or July in the year in which the nurse's registration expires.~~

[For text of subp 6, see M.R.]

Subp. 7. **True information.** A licensee shall submit true information. Falsification of any evidence for any registration period or failure to comply with parts 6310.2800 and 6310.2900 for any two registration periods shall ~~constitute unethical conduct and~~ provide grounds for ~~suspension or revocation of a license~~ disciplinary action.

[For text of subp 8, see M.R.]

6310.2900 REGISTRATION RENEWAL PROCEDURES.

[For text of subpart 1, see M.R.]

Subp. 2. **Application mailing date.** The board shall mail a registration renewal application at least three full calendar months before a licensee's registration expiration date ~~to the last known address of every licensee holding a current renewal certificate~~. The renewal application shall be mailed to the licensee's last known address. Failure to receive the ~~notice~~ registration renewal application shall not relieve a ~~license holder~~ licensee of the obligation to comply with parts 6310.2800 and 6310.2900. ~~In 1988 and 1989 registration renewal applications will be mailed by April 1 to professional nurses who held current registration on July 31, 1987.~~

Subp. 3. **Late submission.** An application and renewal fee received in the board office during the month in which the licensee's registration expires, shall not be processed and shall be returned to a licensee for payment of a late application fee. ~~In 1988 and 1989 a registration renewal application from a professional nurse who held current registration on July 31, 1987, which was received in the board office during June or July of the year in which the nurse's registration expires shall not be processed and shall be returned to the nurse for payment of a late application fee.~~

A renewal application and fee received one or more days after the licensee's registration expiration date shall be returned with an application for reregistration. The board will nullify incomplete registration renewal applications that are not completed within 30 days following notification of the deficiency or the licensees' registration expiration dates, whichever is later. For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process provided in *Minnesota Statutes*, section 138.17, subdivision 7.

Subp. 4. **Continuing education evidence form.** For professional nurses, the registration renewal application shall include a continuing education ~~evidence~~ report form. Information to be provided by the professional nurse on ~~an evidence~~ a report form shall include:

[For text of items A to D, see M.R.]

[For text of subp 5, see M.R.]

Subp. 6. **Initial registration and first registration renewal.** An individual who is issued a license by the board shall also be registered by the board. The ~~license~~ licensure fee shall serve as payment for the initial registration period.

~~Effective August 1, 1987, and thereafter,~~ The initial registration period following licensure or reregistration is from six to 29 full calendar months ending the last day of the licensee's month of birth in an even-numbered year if the year of birth was an even-numbered year or in an odd-numbered year if the year of birth was an odd-numbered year.

~~A licensee who does not supply a month, day, and year of birth upon a second request from the board shall be assigned a month and year for registration purposes.~~

~~A licensee may correct the date of birth stated on the renewal application. The board may require a licensee who wishes to correct the date of birth on file with the board to substantiate the date with official documentation.~~

Professional nurses shall accrue for the first registration renewal following licensure and reregistration the number of contact hours of acceptable continuing education activities equivalent to the number of full months in their initial registration period. The contact hours shall include at least one successful demonstration of skill in performing a portion of a component of professional nursing. The continuing education participation period begins on the date the license was issued or reregistration was completed and extends through the month immediately preceding the month in which initial registration expires.

[For text of subp 6a, see M.R.]

Subp. 7. **Substantiation of continuing education activities.** Following each renewal date the board may select a sample of professional nurses applying for registration renewal and require substantiation of participation in acceptable continuing education activities. Selected professional nurses shall submit in writing the following data obtained from the provider of each continuing education activity which verifies the information on the ~~evidence~~ continuing education report form:

[For text of items A to F, see M.R.]

G. ~~In 1986 and thereafter,~~ Proof of compliance with part 6310.2800, subpart 2.

H. For continuing education activities meeting part 6310.2800, subpart 6, item L, a copy of the certificate may be required and considered sufficient.

I. Any additional documentation the board deems necessary.

Subp. 8. **Insufficient hours.** If a professional nurse cannot demonstrate sufficient hours of acceptable continuing education activities for a continuing education participation period, the number of hours lacking ~~to comply for that continuing education participation period~~ may be deferred. If the licensee has the required number of contact hours but the contact hours do not include a demonstration of skill, the licensee must defer one contact hour. The deferred hours shall be added to the contact hours required in the immediately succeeding continuing education participation period. If the licensee does not renew for the continuing education participation period that included the deferred hours, the deferred hours will be required for reregistration. This part may be applied once for any one professional nurse.

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[For text of subps 9 and 10, see M.R.]

6310.3100 REREGISTRATION.

Subpart 1. **Removal of name from list.** The names of licensees who do not return the complete renewal application, renewal fees, and late application fees by the registration expiration date shall be removed from the list of individuals authorized to practice professional or practical nursing during the current renewal period.

Subp. 2. **Reregistration requirements.** Reregistration shall be granted when the licensee has met all reregistration requirements. A licensee who applies for reregistration shall:

A. Submit a completed and signed reregistration application;

B. Respond to questions on the application that relate to ~~causes for denial or revocation of licensure~~ the grounds for disciplinary action listed in *Minnesota Statutes*, section 148.261 ~~for professional nurses and section 148.297 for practical nurses~~. The licensee shall submit true information. Falsification or omission of information provides grounds for disciplinary action. The board may require further information of the licensee in order to determine whether the licensee has engaged in conduct warranting disciplinary action as set forth in *Minnesota Statutes*, section 148.261;

C. Pay the registration renewal fee for the current period;

D. Pay the late application fee if registration expired within the last two years unless the licensee submitted evidence of an incomplete or incorrect renewal application before the registration renewal deadline; and

E. Submit evidence of meeting all relevant requirements specified in subparts 2a to 8.

Subp. 2a. **Continuing education.** A professional nurse must submit evidence of meeting all requirements specified in parts 6310.2800 and 6310.2900. Participation in continuing education activities must have occurred during the 24 months immediately before board action on the application for reregistration. ~~Beginning April 1, 1988, and thereafter,~~ This requirement applies only to professional nurses whose registration expired within the two years immediately preceding application for reregistration.

Subp. 2b. **Deferred contact hours.** A professional nurse who has deferred continuing education contact hours on record shall make up all the deferred contact hours before board action on the application for reregistration. The nurse shall submit a report of participation in the required number of contact hours and submit the substantiating documents required in part 6310.2900, subpart 7. The board shall audit the substantiating documents to be certain that the requirements in part 6310.2900, subpart 7, are met.

Subp. 5. [See Repealer.]

Subp. 6. **Acceptable practice requirement.** ~~Beginning April 1, 1988, and thereafter,~~ A licensee without current registration who is applying for reregistration must submit proof of at least 320 hours of acceptable nursing practice in the four years immediately preceding receipt by the board of the application for reregistration or meet the requirement in subpart 7. To be acceptable the practice must have:

A. consisted of employment or volunteer nursing in any setting, or participation in clinical nursing courses or any combination of these activities;

B. occurred only while the licensee was authorized to practice nursing unless legal authorization for the practice was not required in the jurisdiction where it occurred; or

C. included one or more of the functions defined in *Minnesota Statutes*, section 148.171, clause (3), for professional nurses or *Minnesota Statutes*, section ~~148.29~~ 148.171, ~~subdivision~~ 4 clause (5), for practical nurses, or be determined by the patient, employer, volunteer supervisor, patient's family or physician, instructor, or peer as requiring the appropriate nursing license.

Subp. 7. **Refresher course requirement.** ~~Beginning April 1, 1988, and thereafter,~~ Licensees without current registration who do not demonstrate compliance with the acceptable practice requirement in subpart 6, shall successfully complete a refresher course and must submit an affidavit of successful completion of a refresher course which occurred within the 24 months immediately preceding board action on the application for reregistration. The affidavit must be signed by the person responsible for the course, hereinafter, coordinator. For a professional nurse, the refresher course may be used to fulfill the continuing education activities required in subpart 2a, provided the refresher course meets the criteria in part 6310.2800.

The refresher course must have been designed to meet the following criteria:

[For text of items A to C, see M.R.]

Subp. 8. ~~**Limited registration certificate**~~ **Permit to practice.** ~~A licensee presenting an affidavit of enrollment in a refresher course will upon written request and submission of a reregistration application and fee be provided a registration certificate valid only for participation in the clinical experience component of the refresher course and no longer than 90 days.~~ To participate in the clinical component of a refresher course, a licensee must have a permit. To receive a permit, the licensee must submit the completed reregistration application, fee, and an affidavit of enrollment in the refresher course that includes the request for a permit. When

issued, the permit is valid only for participation in the clinical component of the refresher course and for no longer than 90 days. While the permit is in effect, a registered nurse may use the title registered nurse, abbreviated "RN," and a licensed practical nurse licensee may use the title licensed practical nurse, abbreviated "LPN." The affidavit must be signed by the refresher course coordinator.

[For text of subps 9 and 10, see M.R.]

Subp. 11. **Nullification and reapplication.** The board will nullify incomplete reregistration applications that are not completed within the six month period following receipt of fees or within the six month period following issuance of a ~~registration certificate~~ permit for practice in a clinical component of a refresher course.

For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process ~~specified~~ in *Minnesota Statutes*, section 138.17, subdivision 7. If a licensee fails to submit an application and fee within six months after the board received any other documents relating to the application, the board may destroy the documents.

If a licensee whose application has been nullified wants to be reregistered, a new reregistration application must be submitted and all applicable reregistration requirements must be met.

[For text of subp 12, see M.R.]

6310.3300 CHANGE OF NAME AND ADDRESS ON RECORDS.

Subpart 1. **Name change.** The licensee who has changed names shall notify the board in writing as soon as possible and request a revised registration certificate. When requesting a revised registration certificate, the licensee shall return the current certificate to the board. ~~If the current certificate has been lost, stolen, or destroyed, the licensee shall provide a written explanation of the situation.~~ The board may require substantiation of the name change by requiring official documentation.

[For text of subp 2, see M.R.]

6310.3400 DUPLICATE AND REPLACEMENT DOCUMENTS.

[For text of subpart 1, see M.R.]

Subp. 2. **Registration certificate.** A duplicate registration certificate shall not be issued. If a registration certificate is lost, stolen, or destroyed, the licensee shall submit a written explanation of the situation. ~~Upon~~ On written request of the licensee, a replacement registration certificate may be issued for a fee. The replacement registration certificate shall be marked "Replacement."

If a licensee does not receive a registration certificate which has been issued and notifies the board office in writing within 60 days of the ~~date of issuance~~ effective date, a replacement registration certificate may be issued without a fee.

Subp. 3. **Lost, stolen, or destroyed documents.** If a licensee's license or registration certificate or permit is lost, stolen, or destroyed, the licensee must report the loss to the board.

6310.3600 REGISTRATION FEES.

Subpart 1. **Amount.** The amount of fees shall be as follows:

A. registration renewal, ~~$25~~ $32 per registration period ~~effective June 1, 1988, and $26 effective August 1, 1988~~;

B. late application, $20 ~~effective June 1, 1988~~;

C. replacement license, $20 ~~effective June 1, 1988~~;

D. replacement registration certificate, ~~$20 effective June 1, 1988~~ $5;

E. verification of licensure status, $20 ~~effective June 1, 1988~~;

F. verification of examination scores, $20 ~~effective June 1, 1988~~;

G. a copy of licensure application materials, $20 ~~effective June 1, 1988~~; and

H. service charge for a dishonored check, $15.

Subp. 2. **Nonrefundable.** All fees are nonrefundable.

PUBLIC HEALTH NURSE REGISTRATION

6316.0100 REQUIREMENTS FOR REGISTRATION AS A PUBLIC HEALTH NURSE.

Subpart 1. **Licensure and current registration.** An applicant for registration as a public health nurse must be licensed and currently

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registered to practice professional nursing in Minnesota.

Subp. 2. **Application.** An applicant shall obtain the application forms and instructions for filing from the board. An applicant shall submit true information. The application must be notarized.

Subp. 3. **Fee.** An applicant must submit a fee of $25 with the application. This fee must be paid to the board in United States currency, cashier's check, or money order. Personal checks are not accepted. If for any reason a public health nurse registration certificate is not issued, the fee is not refundable.

Subp. 4. **Education.** An applicant must have a baccalaureate or higher degree with a major in nursing. The applicant's course work must have included theory and clinical practice in public health nursing. The theory portion of the public health nursing education must have been at least 30 hours in length. The public health nursing content in a hospital diploma or associate degree program does not qualify. At a minimum, the public health nursing education must have prepared the nurse to:

A. identify the incidence, distribution, and control of disease in a population, as well as the risk factors and environmental factors related to communities;

B. identify populations at high risk of illness, disability, premature death, or poor recovery;

C. intervene with high-risk populations;

D. evaluate the effect of interventions on the health status of a population; and

E. use community services, institutional resources, and other health care providers.

Subp. 5. **Affidavit of graduation.** An applicant must submit an affidavit of graduation from the institution that awarded the baccalaureate or higher degree. The affidavit must be completed by an official of the institution and bear the seal or stamp of the institution. An applicant may submit an official transcript in lieu of the affidavit.

Subp. 6. **Affidavit of completion of public health nursing education.** An applicant must submit an affidavit of completion of public health nursing education. Included with the affidavit must be evidence that the applicant successfully completed public health nursing education which meets the requirements in subpart 4. The affidavit must be completed by an official of the institution that provided public health nursing education which meets the requirements in subpart 4.

6316.0200 ISSUANCE OF PUBLIC HEALTH NURSE REGISTRATION CERTIFICATE.

Subpart 1. **Public health nurse registration certificate.** The board shall issue a public health nurse registration certificate to an applicant when the requirements have been met. The public health nurse registration certificate is valid only in conjunction with a current registration certificate for professional nursing.

Subp. 2. **Length of public health nurse registration certificate.** The public health nurse registration certificate is in effect when the nurse has a license and is currently registered to practice professional nursing in Minnesota. If a license is revoked or the nurse allows the registration to expire, the public health nurse registration certificate becomes invalid.

Subp. 3. **Replacement document.** If a nurse requests the replacement of a public health nurse registration certificate, the nurse shall explain in writing the reason for requesting a replacement. On written request of the nurse and the payment of a $5 fee, a replacement public health nurse registration certificate may be issued. The replacement certificate shall be marked "Replacement." The board may require substantiation of a name change by requiring official documentation. A replacement certificate shall not be issued for a change of address.

6316.0300 APPLICATION NULLIFICATION.

Subpart 1. **Time frame for nullification.** The board will nullify an application for public health nurse registration if the applicant fails to complete the application process within one year after submission of the application.

Subp. 2. **Destruction of application materials and forfeiture of fee.** For a nullified application, the fee shall be forfeited and the application and other documents may be destroyed according to the process specified in *Minnesota Statutes*, section 138.17, subdivision 7. If the applicant failed to submit the application and fee within one year after the board received any other documents relating to the application, the board may destroy the documents.

NURSING PRACTICE AND DISCIPLINE

6321.0100 DEFINITIONS.

Subpart 1. **Scope.** The definitions in this part apply to this chapter.

Subp. 2. **Monitoring.** "Monitoring" means the periodic inspection by a registered nurse or licensed practical nurse of a directed function or activity and includes watching during performance, checking, and tracking progress, updating a supervisor of progress or accomplishment by the person monitored, and contacting a supervisor as needed for direction and consultation.

Subp. 3. **Supervision.** "Supervision" means the guidance by a registered nurse for the accomplishment of a function or activity. The guidance consists of the activities included in monitoring as well as establishing the initial direction, delegating, setting expectations, directing activities and courses of action, critical watching, overseeing, evaluating, and changing a course of action.

6321.0500 REPORTING OBLIGATIONS.

Subpart 1. **Institutions.** The reporting required of institutions in *Minnesota Statutes*, section 148.263, subdivision 2, is interpreted to include resignation in lieu of discharge, discharge, suspension, or other forms of discipline of a nurse for failure to carry out the responsibilities of a nurse. Examples of actions to be reported include but are not limited to dismissal of probationary employees, suspensions other than investigatory suspensions, restrictions or limitations of a nurses's practice, demotion, and discharge from employment.

Subp. 2. **Licensed professionals.** The reporting required of licensed professionals in *Minnesota Statutes*, section 148.263, subdivision 3, is interpreted to exclude the professional knowledge obtained in the course of a health professional-client relationship when the client is a nurse and the health professional successfully counsels the nurse to limit or withdraw from practice to the extent required by the impairment.

6330.0100 DEFINITIONS.

Subpart 1. **Advanced nursing practice.** "Advanced nursing practice" means the performance of health services by certified registered nurse anesthetists ~~(~~, abbreviated, "CRNA~~)~~," and certified nurse midwives ~~(~~, abbreviated "CNM~~)~~," certified nurse practitioners, abbreviated "RN,C," and certified clinical specialists in psychiatric or mental health nursing, abbreviated "RN,CS," as defined in *Minnesota Statutes*, section 62A.15, subdivision 3a.

Subp. 2. **Board.** "Board" means the Minnesota Board of Nursing.

Subp. 3. to 5. [See Repealer.]

6330.0200 PURPOSE.

Parts 6330.0100 to ~~6330.0500~~ 6330.0300 establish criteria ~~for programs of study of~~ certification of professional nurses to engage in advanced nursing practice. ~~Parts 6330.0600 and 6330.0700 list programs~~ Part 6330.0350 lists professional nursing organizations that fulfill the criteria. The criteria and list are established under *Minnesota Statutes*, section 62A.15, subdivision 3a, in order to qualify advanced nursing services for reimbursement by third parties.

6330.0300 ~~ACCREDITATION REQUIRED~~ CRITERIA TO BE A PROFESSIONAL NURSING ORGANIZATION WHICH CERTIFIES NURSES IN ADVANCED NURSING PRACTICE.

In order to ~~be included on the lists found in parts 6330.0600 and 6330.0700, a program of study must consist of subject matter beyond that required for registered nurse licensure and meet one of the following criteria:~~

~~A. programs preparing nurse anesthetists must be accredited by the Council on Accreditation of Nurse Anesthesia Education Programs/Schools; or~~

~~B. programs preparing nurse midwives must be accredited by the Division of Accreditation, American College of Nurse Midwives.~~ have the authority to certify professional nurses in advanced nursing practice as referenced in *Minnesota Statutes*, section 62A.15, subdivision 3a, the organization must have met the following criteria:

A. be national in the scope of its credentialing;

B. have an education requirement of at least one academic year or nine calendar months or its equivalent of full-time study beyond that required for registered nurse licensure;

C. have practice requirements beyond those required for registered nurse licensure;

D. have testing requirements beyond those required for registered nurse licensure;

E. issue certificates to qualified professional nurses; and

F. periodically review the qualifications of certified individuals.

6330.0350 PROFESSIONAL NURSING ORGANIZATIONS WITH AUTHORITY TO CERTIFY.

The following organizations meet the criteria in part 6330.0300 and have the authority to certify registered nurses in the advanced nursing practice categories listed:

A. American Association of Nurse Anesthetists Council on Certification and Council on Recertification: nurse anesthetist.

B. American College of Nurse-Midwives: nurse midwife.

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C. American Nurses Association:

(1) nurse practitioner:

(a) gerontological nurse practitioner;

(b) adult nurse practitioner;

(c) family nurse practitioner;

(d) school nurse practitioner;

(e) pediatric nurse practitioner.

(2) clinical specialist in psychiatric or mental health nursing:

(a) clinical specialist in adult psychiatric and mental health nursing;

(b) clinical specialist in child and adolescent psychiatric and mental health nursing.

D. National Certification Board of Pediatric Nurse Practitioners and Nurses: pediatric nurse practitioner.

E. Nurses Association of American College of Obstetrics and Gynecology Certification Corporation:

(1) obstetric-gynecological nurse practitioner;

(2) neonatal nurse clinician/practitioner.

6330.0500 MAINTENANCE OF LISTS.

Subpart 1. **List updating.** Each January ~~and July~~ the board shall add to the ~~lists programs~~ list professional nursing organizations which have met the criteria within the previous ~~six months~~ year and which certify nurses for advanced nursing practice, and remove from the ~~lists programs~~ list organizations which no longer meet the criteria.

Subp. 2. [See Repealer.]

RENUMBER. *Minnesota Rules*, parts 6315.0600 and 6315.0700 are renumbered as 6305.0600 and 6305.0700.

REPEALER. *Minnesota Rules*, parts 6301.0100, subpart 3; 6301.1200, subpart 6; 6301.1700, subparts 2, 3, and 4; 6310.2600, subparts 8a and 8b; 6310.3100, subpart 5; 6315.0100, subparts 15 and 16; 6330.0100, subparts 3, 4, and 5; 6330.0400; 6330.0500, subpart 2; 6330.0600; and 6330.0700, are repealed.

Department of Revenue

Proposed Permanent Rules Relating to Sales Tax Administration

Notice of Intent to Adopt Rules Without a Public Hearing

NOTICE IS HEREBY GIVEN that the Minnesota Department of Revenue intends to adopt the above-entitled rules without a public hearing following the procedures set forth in the Administrative Procedure Act for adopting rules without a public hearing in *Minnesota Statutes*, sections 14.22 to 14.28. Rules 8130.2400, 8130.2800, 8130.4100, 8130.8200 are proposed to be repealed in their entirety. The statutory authority to adopt these rules are *Minnesota Statutes* sections 297A.25, subd. 20; 297A.27; and 297A.29.

All persons have 30 days in which to submit comment in support of or in opposition to these proposed rules or any part or subpart of the rules. Comment is encouraged. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

Any person may make a written request for a public hearing on these rules within the 30-day comment period. If 25 or more persons submit a written request for a public hearing within the 30-day comment period, a public hearing will be held unless a sufficient number withdraw their request in writing. Any person requesting a public hearing should state his or her name and address, and is encouraged to identify the portion of the proposed rule addressed, the reason for the request, and any change proposed. If a public hearing is required, the agency will proceed pursuant to *Minnesota Statutes*, sections 14.131 to 14.20.

Comments or written requests for a public hearing must be submitted to:

Terese Koenig Smith, Attorney
Business Tax Unit
Appeals and Legal Services Division
10 River Park Plaza
Mail Station 2220
St. Paul, MN 55146-222
(612) 296-3438

CERTIFICATE OF THE

BOARD OF NURSING

RESOLUTION ADOPTING RULES

I, Patricia Earle, do hereby certify that I am a member and the president of the Minnesota Board of Nursing (hereinafter "Board"), a board duly authorized under the laws of the State of Minnesota, and that the following is a true, complete, and correct copy of a resolution adopted at a meeting of the Board, duly and properly called and held on the 3rd day of August, 1990, that a quorum was present, and that a majority of those present voted for the resolution which has not been rescinded or modified:

> RESOLVED, that the rules relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees are approved and adopted pursuant to authority vested in the Board by Minn. Stat. § 148.171, subd. 2. Joyce M. Schowalter, Executive Director of the Board, is authorized to sign the findings of fact, conclusions and order adopting the rules and further is authorized to modify the rules if necessary to obtain the approval of the rules by the Attorney General (or other stated circumstances) and to perform the necessary acts to provide that the rules shall have the force and effect of law.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 3rd day of August, 1990.

Patricia Earle

PATRICIA EARLE
President

Christine Sprengeler

Attest by one other Board member

STATE OF MINNESOTA
COUNTY OF RAMSEY

BEFORE THE MINNESOTA
BOARD OF NURSING

In the Matter of the
Proposed Adoption of
Rules of the Board of
Nursing Relating to
Licensure, Registration,
Nursing Scholarships,
Advanced Nursing Practice,
Registration of Public Health
Nurses and Fees

FINDINGS OF FACT,
CONCLUSIONS, AND ORDER
ADOPTING RULES WITHOUT
A PUBLIC HEARING

(1) Notice of the Board of Nursing's (hereinafter "Board") intent to adopt the above-entitled rules was published in the State Register on May 29, 1990, and was sent by United States mail to all persons on the list maintained by the Board pursuant to Minn. Stat. §§ 14.14, subd. 1(a) and 14.22 on May 23, 1990. (2) The statement of need and reasonableness was prepared before the Notice Of Intent To Adopt Rules Without A Public Hearing was mailed to all persons on the rulemaking mailing list and published in the State Register and was available to the public. (3) Before the notice was submitted to the State Register, a copy of the Notice Of Intent To Adopt Rules Without A Public Hearing and the proposed rules were sent to the chairs of the house appropriations committee and senate finance committee.

(4) All persons were given the opportunity to submit comment on the rules for 30 days after notice of proposed rulemaking. (5) The Board did receive 26 requests for a public hearing, but two of those requests were subsequently withdrawn, so the Board does not have requests for a public hearing from 25 or more persons which were not withdrawn. - We need the comments

Comments on the rules were received by the Board from the Minnesota Licensed Practical Nurses' Association; the Minnesota Nurses Association; and Patti

Cullen Garvey of Care Providers of Minnesota. Oral comments from Dave Siegal, of the Minnesota Department of Health, and an unidentified nurse were also received and considered. No requests for notice of submission to the Attorney General were received by the Board.

Based on the comments and evidence in the record before the Board, including the statement of need and reasonableness which is incorporated herein as the Board's findings, the Board concludes that the above-captioned rules are both needed and reasonable.

Several changes are being made in the rules as adopted compared to the rules proposed. The following changes are made in response to comments received and considered by the Board:

Page 5, line 10. Part 6305.0300, subp. 7, was modified to add the phrase "if the applicant has come under investigation by the Board after the issuance of the initial permit." This phrase merely clarifies the rule and makes it consistent with Minn. Rules pt. 6305.0300, subp. 6.

Page 14, line 27. Part 6305.0500 was modified to add the following sentence: "The continuing education may be part of an orientation program provided by an employer or potential employer." The original rule proposed that employer orientation sessions be removed. The Minnesota Licensed Practical Nurses' Association noted that removal of this option could result in an unnecessary financial burden for some licensees. By modifying the rule as adopted, the Board has maintained the option but clarified that only those portions of the orientation which are actually nursing education will be acceptable.

Page 20, line 17. Part 6310.2900, subp. 4. The Board decided to delete the word "evidence" and insert the word "report" in the heading so the heading is consistent with the text of the rule.

Page 25, line 5. Part 6310.3100, subp. 8. The Board decided to delete the word "licensee" to provide consistency with the referenced to registered nurse on line 3 of this subpart.

Page 29, line 20. Part 6310.0100, subp. 1. The Board decided to strike the words "this chapter" and substitute the correct statutory reference of "Minnesota Statutes sections 148.171 to 148.285."

Page 29, after line 34. Part 6321.0100 has been modified to add a new subpart 3, which states: "Nothing in these rules is intended to limit the ability of licensed practical nurses to function in accordance with the provisions of the Nurse Practice Act." This subpart was added in response to concerns raised by the Minnesota Licensed Practical Nurses' Association that the definitions of monitoring and supervision would be used to restrict the current practice of practical nurses. This language makes clear that the definition of these terms does not limit the practice of a practical nurse beyond any limitations which already exist in the Nurse Practice Act. It is reasonable to specify that the definitions are not intended to limit the scope of practice granted by the statute.

NOW, THEREFORE, IT IS HEREBY ORDERED that the rules identified as Rules of the board of Nursing Relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees are adopted this 3rd day of August, 1990, pursuant to authority vested in the Board by Minn. Stat. § 148.171, subd. 2.

Joyce M. Schowalter

JOYCE M. SCHOWALTER
Executive Director

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE MINNESOTA

BOARD OF NURSING

In the Matter of the
Proposed Adoption of
Rules of the Board of
Nursing Relating to
Licensure, Registration,
Nursing Scholarships,
Advanced Nursing Practice,
Registration of Public Health
Nurses and Fees

DECLARATION OF COUNSEL

I, Audrey Kaiser Manka, Special Assistant Attorney General, do hereby declare that I have examined the above-captioned rules and the supporting rulemaking record and that, based on my examination, the Administrative Procedure Act and Minn. Rules ch. 2010 have been followed. Any exceptions are listed below. For Attorney General billing purposes, the four-digit docket client code is 0481.

Dated: August 24, 1990.

Sworn and subscribed this August 24, 1990

Marian K Simacek

MARIAN K. SIMACEK
NOTARY PUBLIC-MINNESOTA
DAKOTA COUNTY
MY COMMISSION EXPIRES MAY 17, 1994

Audrey Kaiser Manka

AUDREY KAISER MANKA
Special Assistant
Attorney General

MINNESOTA BOARD OF NURSING

2700 University Avenue West #108 St. Paul, MN 55114 Telephone: (612) 642-0567

May 23, 1990

Representative Wayne Simoneau, Chairman
House Appropriations Committee
State Office Building, Room 365
St. Paul, Minnesota 55155

Dear Representative Simoneau:

Pursuant to Minnesota Statutes, section 16A.128, subdivision 2a, enclosed please find a Notice of Intent to Adopt Rules Without a Public Hearing and a copy of the proposed rules which fix fees of the Board of Nursing.

Sincerely,

Joyce M. Schowalter
Executive Director

JMS:tjz
Enclosures

cc: Audrey Kaiser Manka
Special Assistant
Attorney General

MINNESOTA BOARD OF NURSING

2700 University Avenue West #108 St. Paul, MN 55114 Telephone: (612) 642-0567

May 23, 1990

Senator Gene Merriam, Chairman
Senate Finance Committee
Capitol Building, Room 122
St. Paul, Minnesota 55155

Dear Senator Merriam:

Pursuant to Minnesota Statutes, section 16A.128, subdivision 2a, enclosed please find a Notice of Intent to Adopt Rules Without a Public Hearing and a copy of the proposed rules which fix fees of the Board of Nursing.

Sincerely,

Joyce M. Schowalter
Executive Director

JMS:tjz
Enclosures

cc: Audrey Kaiser Manka
Special Assistant
Attorney General

Minnesota Licensed Practical Nurses' Association

2700 University Ave. W. Suite 50
St. Paul, Minnesota 55114
PHONE: 612/646-1306

JUN 1990
MN BOARD
OF NURSING

HAND DELIVERED

June 26, 1990

Ms. Joyce Schowalter, Executive Director
Minnesota Board of Nursing
2700 University Ave. W. Suite #108
St. Paul, MN 55114

Dear Ms. Schowalter:

In accordance with our conversation of June 21 1990, I am hereby submitting the concerns of the Minnesota Licensed Practical Nurses Association (MLPNA) regarding the proposed changes in the Board of Nursing's Permanent Rules Relating To Licensing And Regulation. I am also including changes which MLPNA feels would resolve our concerns.

pg 5

As indicated in our conversation, the changes contained in Chapter 6305.0300, Subp. 7, seems to be inconsistent with the language contained in Subp. 4 and Subp. 6. Specifically, the language in Subp. 7, which states "... or until the matter is resolved for the applicant who is under investigation by the board.", contradicts the language in Subp. 4 and Subp. 6, which states, "... who is not the subject of a pending investigation or disciplinary action....". Subp. 4 and Subp. 6. state that a nurse who is the subject of a pending investigation by the board will not be granted a permit to practice nursing while Subp. 7 states that such a person may be granted such a permit. MLPNA proposes that the following change be made to eliminate the inconsistency. In the last sentence, after the words, "... by another nurse licensing agency ...", put in the following language:

> "... or if the applicant has come under investigation by the board since the issuance of the initial permit until the matter is resolved for the applicant who is under investigation by the board."

pg. 14

With regard to Chapter 6305.0500, Subp. 9, paragraph A, MLPNA objects to the deletion of the paragraph which allows an applicant to meet the educational requirement for licensure by taking a course offered by an employer. There are several reasons for our objections:

1.) The applicants are individuals who have practiced previously and there is no statutory requirement for LPN's seeking relicensure to have continuing education.

2.) There would be an economic burden placed on the applicant which did not previously exist.

3.) The removal of the employer orientation option would make it more difficult for applicants to return to nursing, thereby exacerbating an already existing shortage.

4.) The Board has presented no evidence to substantiate the need for deleting the provision in question.

For the above cited reasons, MLPNA, recommends that the following phrase be reinserted in Subp. 9, paragraph A:

> "..., or an orientation program at least fifteen (15) clock hours in length conducted by an employer, or potential employer, ...".

MLPNA also find itself in disagreement with proposed Chapter 6321.0100. MLPNA is well aware of the legislative history regarding the development of the terms "monitoring" and "supervision" as they are used in this Chapter. The Board is also aware of MLPNA's position with regards to this issue. MLPNA agreed to support these changes in the Nurse Practice Act with the understanding that they would in no way alter the existing ability of the LPN to supervise the functions of nursing assistants, or other LPN's, or to function in a charge nurse capacity. The board gave MLPNA this assurance. This Chapter however, appears to mitigate those assurances. In order to assure common understanding, interpretation, and implementation of this chapter, MLPNA requests that a new Subp. 4 be added as follows:

Nothing in ~~this Chapter~~ is intended to limit the ~~ability of Licensed Practical Nurses to direct the functions and activities of nursing assistants, or other LPN's, or to act in a charge nurse capacity.~~

Pg. 30

The final difficulty MLPNA finds with this document is contained in Chapter 6321.0500, Subp. 1. While MLPNA totally believes in the necessity of protecting the public, this subpart appears to impinge upon the protections which employees are granted under the National Labor Relations Act. It appears to intrude upon the rights of parties who conclude an agreement under the aegis of that Act. In accordance with the doctrine of the supremacy of Federal law over State law when conflicts exist, it appears that this chapter is illegal and unenforcable. MLPNA suggests the following changes to avoid these difficulties:

1.) delete the phrase, "... resignation in lieu of discharge ....".

2.) At the end of the first sentence delete, "... the responsibilities of the nurse.", and add, "... nursing functions, duties or responsibilities as defined in written job descriptions of the institution or the law."

Due to the fact that there are several areas of concern that need to be addressed, MLPNA is enclosing a written request signed by at least 25 persons requesting a public hearing on the proposed changes. If you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Joseph Cohn
Representative, MLPNA

cc: Judy L. Domning, Executive Director, MLPNA

THE UNDERSIGNED HEREBY REQUESTS A PUBLIC HEARING IN ACCORDANCE WITH MINNESOTA STATUTES ON THE PROPOSED PERMANENT RULES RELATING TO LICENSING AND REGULATION.

1. Judy L. Manning
2. [illegible]
3. Lisa K Price
4. LuEtta Bleibaum
5. A. El Jundaili
6. F. L. Burns
7. Helen Henning
8. Willodean Hall
9. Claudia Page
10. Dawn Kuells
11. Denise A. Roth
12. Cindy Gibbon
13. Shirley Anderson
14. Barbara Olson
15. Dawn Prince
16. Phyllis A. Klein
17. Susan Haller
18. M. Severson RN
19. Karen Theusen
20. Jeanette M. Bisek
21. Lauren M. Manske
22. Mabel Cooper
23. Elizabeth Arthur
24. Terri Pauley
25. Judith A. Johnson
Rose Nelson

Minnesota Nurses Association
1295 BANDANA BLVD. NO., SUITE 140
ST. PAUL, MINNESOTA 55108-5115
(612) 646-4807



June 12, 1990

Joyce Schoewalter
Minnesota Board of Nursing
Suite 108
2700 University Ave. W.
St. Paul, MN 55114

Dear Ms. Schoewalter,

Thank you for the opportunity to comment on the rules relating to the Nurse Practice Act. MNA has several comments with regard to these rules. The comments are as follows:

6301.1800 Implement Treatment related to Cardiopulmonary Functions

Subpart 6.0

It is our belief that the intent of this language is to address Cardiopulmonary Resuscitation. Cardiopulmonary function implies a number of skills and procedures beyond C.P.R. Treatments related to cardiopulmonary function could be pacemaker insertion, intubation or chemical resuscitation. C.P.R. is a more accurate term which should be added to the language in place of cardiopulmonary function.

6321.0500 Reporting Obligations

Subpart 1

MNA would request to have this subpart further clarified to make it clear that institutions shall report discipline of a nurse for failure to carry out the responsibilities of a nurse as they are specifically written in the grounds for disciplinary action. This section implies that nurses could be reported for any action which led to their dismissal which could include failure to follow institutional procedures unrelated to patient care.

Subpart 2

The reporting required of licensed professionals should also exclude nurses who are acting in an advocacy relationship with the nurse as a client. This would include nurses who are attorneys or union representatives

who are called upon to represent a nurse in a professional-client relationship.

It is MNA's belief that requiring reporting to the Board of Nursing would seriously hamper the ability of a nurse to obtain representation when handling grievances with employers. This situation is very similar to a nurse-client relationship in health care and should be afforded that same protection.

6330.0100 Definitions

The abbreviation listed in the rule for Certified Nurse Practitioner (RN, C) is not specific enough especially in light of the fact that nurse practitioners now have prescribing authority. A more specific abbreviation would provide guidance to the pharmacists and others who are seeking to understand a particular nurse practitioners practice area. MNA suggests the following abbreviations:

R.N.C. N.NP	(Neonatal Nurse Practitioner)
R.N.C. P.NP	(Pediatric Nurse Practitioner)
R.N.C. A.NP	(Adult Nurse Practitioner)
R.N.C. G.NP	(Geriatric Nurse Practitioner)

These particular abbreviations are consistent with those used today in current practice. The added specificity provides information to the public which is valuable as they interact with the Certified Nurse Practitioners in a variety of settings.

If you have any questions about MNA's comments, please feel free to call.

Sincerely yours,

Susan Stout

Susan Stout, RN
Staff Specialist, Governmental Affairs

Gretchen Musicant

Gretchen Musicant, RN, MPH
Staff Specialist, Governmental Affairs

GMSS:caa

Care Providers
Of Minnesota



June 22, 1990

Ms. Joyce M. Schowalter
Executive Director
Minnesota Board of Nursing
Suite 108
2700 University Avenue West
St. Paul, MN 55113

Dear Ms. Schowalter:

Care Providers of Minnesota has reviewed the proposed permanent rules relating to the licensing and registration (6301.1700 - 6330.0500); and we have a few suggestions for changes in the rules.

Several of our members have a bit of confusion with 6310.3400, subpart 3, regarding lost, stolen, or destroyed documents. In our interpretation it appears that a nurse could be disciplined for not reporting a lost license, or certificate and we question what the consequences actually are if a nurse does not report a loss of their certificate to the Board. Secondly, we have a suggested change to 6321.0500 subpart 1, which is found on page 30 of the proposed rule. We have a concern that under this section it is possible that nursing homes would be required to report disciplining nurses for tardiness or no shows or no calls. And in our opinion, neither tardiness or no call are grounds for discipline under the nursing statutes but rather should be a institution's decision in terms of disiplinary action. Thus facility discipline should not be grounds for discipline by the Board of Nursing. Because of this we are suggesting that on page 30, line 6, after the period you insert the following language, "The reporting described by this subpart is required only if the action (discipline) pertains to grounds for disciplinary action under Minnesota Statutes 148.261".

Our last comment is not a suggestion for change but rather a reaffirming of the language that you added at 6321.0500 subpart 2, where the Board has clarified the reporting obligations of licensed professions. We think this is a positive inclusion in these proposed rules. If you have any questions on these suggested changes, feel free to contact me at the Care Providers of Minnesota Association office.

Sincerely,

Patti Cullen Garvey
Associate Director of Public Affairs

cc: Rick E. Carter, President
R. Pete Madel, Chairman of the Board
Larry Juhl, Public Affairs Chairperson
Jayne Stecker, Regulatory Committee

3E:letter:24

2850 Metro Drive, Suite 200 • Bloomington, Minnesota 55425 • (612) 854-2844 • 1-800-462-0024 (MN Toll Free)

June 28, 1990

An unidentified nurse called several days after rules were published in State Register. Her concern was that we are placing employment or refresher course requirements on interstate endorsement applicants that we did not require of renewal applicants. She wasn't opposed to the requirements, but seemed in favor of employment or refresher course for those individuals who renew their registration but are not employed.

Sandra MacKenzie

Dave Siegal, Minnesota Department of Health, called on June 1, 1990, to suggest a clarification in part 6321.0100, subpart 1. It should read, "The definitions in this part apply to Minnesota Statute Section 148.171 to 148.285."

Joseph Cohn, representing MLPNA, called on June 21, 1990, raising several questions.

1) Part 6305.0300, subpart 7 (page 5, lines 10-11), seems to contradict subpart 6 (page 4, lines 33-34).
2) Part 6305.0500, subpart 9 (page 14, lines 26-27). They do not believe this should be struck out.
3) Part 6310.2600, subpart 9a (page 16, line 35; page 17, line 4), they believe contradicts the previous permit sections.
4) Part 6321.0100, subpart 2 (page 29, lines 21-27), they do not like the definition.
5) Part 6321.0500, subpart 1 (page 30, lines 4 and 6), they do not like these phrases, believe they impinge on the association's bargaining rights.

He will send us recommended language.

Joyce M. Schowalter

MINNESOTA BOARD OF NURSING

2700 University Avenue West #108 St. Paul, MN 55114 Telephone: (612) 642-0567

DATE: 9/5/90

TO: Patricia Nolte

FAX NUMBER: 297-2576

FROM: Joyce Schowalter

PHONE: 642-0567

NUMBER OF PAGES: 3 (including this one)

Minnesota Licensed Practical Nurses' Association
2700 University Ave. W. Suite 50
St. Paul, Minnesota 55114
PHONE: 612/646-1306

JUL 1990
MN BOARD
OF NURSING

HAND DELIVERED

July 5, 1990

Ms. Joyce Schowalter, Executive Director
Minnesota Board of Nursing
2700 University Ave. W., Suite #108
St. Paul, Minnesota 55114

Dear Ms. Schowalter:

Based upon the agreement reached between the Minnesota Board of Nursing and the Minnesota Licensed Practical Nurses' Association which will result in a new addition to Subp. 4 of Chapter 6321.0100 of the Permanent Rules Relating To Licensing and Regulation which will read,

> "Nothing in these rules is intended to limit the ability of Licensed Practical Nurses to function in accordance with the provisions of the Nurse Practice act.",

please withdraw my request for a hearing on this issue.

If you have any questions, please contact me.

Sincerely,

Jerry L. Domning

J. L. Domning
Executive Director

Minnesota Licensed Practical Nurses' Association
2700 University Ave. W. Suite 50
St. Paul, Minnesota 55114
PHONE: 612/646-1306

JUL 1990
MN BOARD
OF NURSING

HAND DELIVERED

July 5, 1990

Ms. Joyce Schowalter, Executive Director
Minnesita Board of Nursing
2700 University Ave. W., Suite #108
St. Paul, Minnesota 55114

Dear Ms. Schowalter:

Based upon the agreement reached between the Minnesota Board of Nursing and the Minnesota Licensed Practical Nurses' Association which will result in a new addition to Subp. 4 of chapter 6321.0100 of the Permanent Rules Relating To Licensing and Regulation which will read,

> "Nothing in these rules is intended to limit the ability of Licensed Practical Nurses to function in accordance with the provisions of the Nurse Practice Act.",

please withdraw my request for a hearing on this issue.

If you have any questions, please contact me.

Sincerely,

Frances L. Burns

Frances L. Burns
Administrative Assistant

11

Stat Authority

148.191 subd 2

The Board is authorized to adopt and from time to time, revise rules not inconsistent with the law, as may be necessary to enable it to carry into effect the provisions of sections 148.171 to 148.299

Rules

p. 4 subd 1a D. ,, may use "RN" or "LPN" for personal identification provided not used for monetary gain? does that mean they can't work? yep - See SNR

p. 5 subd 8 A (7) did not graduate from where I think they mean a nursing program it should be stated as such.

Disregard looked at adopted

P. 6 subd 3 where's the rest of the sentence if it goes with H The shouldn't be capitalized

did fees

They did not change the fees so its not necessary to obtain permission from Finance even though they did send the letter to Finance Comm.

ATTORNEY GENERAL - Health

August 20, 1990

RC 8-24-90

PATRICIA NOLTE
Legal Assistant

Audrey Kaiser Manka
Special Assistant
Attorney General

297-5933

In the Matter of the Proposed Adoption of Rules of the Minnesota Board of Nursing Relating to Licensure, Registration, Nursing Scholarships, Advanced Nursing Practice, Registration of Public Health Nurses and Fees

Enclosed for your review, pursuant to Minn. Stat. { 14.26 (1988) and Minn. Rules pt. 2010.0300 (1989), are the following documents to support the above-referenced rules:

1. Notice Of Solicitation Of Outside Information;
2. Certificate Of Board's Authorizing Resolution;
3. Rules as proposed with a certificate of approval as to form by the Revisor of Statutes attached;
4. Notice Of Intent To Adopt Rules Without A Public Hearing (as mailed);
5. Statement Of Need And Reasonableness;
6. Affidavit Of Mailing The Notice Of Intent To Adopt Rules Without A Public Hearing;
7. Notice Of Intent To Adopt Rules Without A Public Hearing (as published in the State Register);
8. Rules as adopted (original and three copies);
9. Certificate Of Board's Resolution Adopting Rules;
10. Findings Of Fact, Conclusions, And Order Adopting Rules Without A Public Hearing;
11. Declaration Of Counsel.

AKM:

Enclosures

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE MINNESOTA

BOARD OF NURSING

In the Matter of the
Proposed Adoption of
Rules of the Board of
Nursing Relating to
Licensure, Registration,
Nursing Scholarships,
Advanced Nursing Practice,
Registration of Public Health
Nurses and Fees

DECLARATION OF COUNSEL

I, Audrey Kaiser Manka, Special Assistant Attorney General, do hereby declare that I have examined the above-captioned rules and the supporting rulemaking record and that, based on my examination, the Administrative Procedure Act and Minn. Rules ch. 2010 have been followed. Any exceptions are listed below. For Attorney General billing purposes, the four-digit docket client code is 0481.

Dated: August 24, 1990.

Sworn and subscribed this August 24, 1990

Maria K Smiacek

Audrey Kaiser Manka

AUDREY KAISER MANKA
Special Assistant
Attorney General