DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

DIRECTOR'S OFFICE

BOARD OF NURSING - GENERAL RULES

(By authority conferred on the director of the department of licensing and regulatory affairs by section 16145(3) and 17201 of 1978 PA 368, MCL 333.16145(3) and 333.17201 and Executive Reorganization Order Nos. 1996-1, 1996-2, 2003-1, and 2011-4, MCL 330.3101, 445.2001, 445.2011, and 445.2030)

PART 1. GENERAL PROVISIONS

R 338.10101 Definitions.

Rule 101. (1) As used in these rules:

(a) "Authorized representative" means the chairperson, vice chairperson, or such other member of the board or staff as the board may formally designate.

(b) "Board" means the Michigan board of nursing.

(c) "Code" means 1978 PA 368, MCL 333.1101 to 333.25211.

(d) "Department" means the Michigan department of licensing and regulatory affairs.

(2) Terms defined in the code have the same meanings when used in these rules.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10102 Rescinded.

History: 1989 AACS; 2001 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10103 Rescinded.

History: 1989 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10104 Delegation.

Rule 104. (1) Only a registered nurse may delegate nursing acts, functions, or tasks. A registered nurse who delegates nursing acts, functions, or tasks shall do all of the following:

(a) Determine whether the act, function, or task delegated is within the registered nurse's scope of practice.

(b) Determine the qualifications of the delegatee before such delegation.

(c) Determine whether the delegatee has the necessary knowledge and skills for the acts, functions, or tasks to be carried out safely and competently.

(d) Supervise and evaluate the performance of the delegatee.

(e) Provide or recommend remediation of the performance when indicated.

(2) The registered nurse shall bear ultimate responsibility for the performance of nursing acts, functions, or tasks performed by the delegatee within the scope of the delegation.

History: 1989 AACS; 2003 AACS.

R 338.10105 Training standards for identifying victims of human trafficking; requirements.

Rule 105. (1) Pursuant to section 16148 of the code, MCL 333.16148, an individual licensed or seeking licensure shall complete training in identifying victims of human trafficking that meets the following standards:

(a) Training content shall cover all of the following:

(i) Understanding the types and venues of human trafficking in this state or the United States.

(ii) Identifying victims of human trafficking in health care settings.

(iii) Identifying the warning signs of human trafficking in health care settings for adults and minors.

(iv) Identifying resources for reporting the suspected victims of human trafficking.

(b) Acceptable providers or methods of training include any of the following:

(i) Training offered by a nationally recognized or state-recognized health-related organization.

(ii) Training offered by, or in conjunction with, a state or federal agency.

(iii) Training obtained in an educational program that has been approved by the board for initial licensure, or by a college or university.

(iv) Reading an article related to the identification of victims of human trafficking that meets the requirements of subdivision (a) of this subrule and is published in a peer review journal, health care journal, or professional or scientific journal.

(c) Acceptable modalities of training include any of the following

(i) Teleconference or webinar.

(ii) Online presentation.

(iii) Live presentation.

(iv) Printed or electronic media.

(2) The department may select and audit a sample of individuals and request documentation of proof of completion of training. If audited by the department, an individual shall provide an acceptable proof of completion of training, including either of the following:

(a) Proof of completion certificate issued by the training provider that includes the date, provider name, name of training, and individual's name.

(b) A self-certification statement by an individual. The certification statement must include the individual's name and either of the following:

(i) For training completed pursuant to subrule (1)(b)(i) to (iii) of this rule, the date, training provider name, and name of training.

(ii) For training completed pursuant to subrule (1)(b)(iv) of this rule, the title of article, author, publication name of peer review journal, health care journal, or professional or scientific journal, and date, volume, and issue of publication, as applicable.

(3) Pursuant to section 16148 of the code, MCL 333.16148, the requirements specified in subrule (1) of this rule shall apply for license renewals beginning with the first renewal cycle after the promulgation of this rule and for initial licenses issued 5 or more years after the promulgation of this rule.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10199 Rescission.

Rule 199. R 338.1201 of the Michigan Administrative Code, appearing on page 2479 of the 1979 Michigan Administrative Code, is rescinded.

History: 1989 AACS.

PART 2. LICENSURE

R 338.10201 Rescinded.

History: 1990 AACS; 1994 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10202 Examination; adoption; passing scores.

Rule 202. The board approves and adopts the examinations developed by the national council of state boards of nursing, inc., hereafter identified as the "NCLEX-RN" for the registered nurse and the "NCLEX-PN" for the practical nurse. Examinees shall achieve a score of pass on the NCLEX computerized adaptive test (cat).

History: 1990 AACS; 1994 AACS; 2003 AACS.

R 338.10203 Licensure by examination; registered professional nurse; requirements.

Rule 203. (1) An applicant for licensure by examination shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the other requirements of the code, an applicant shall satisfy the requirements of this rule.

(2) An applicant for a registered nurse license shall establish that he or she meets the eligibility requirements to sit for the NCLEX-RN examination set forth in R 338.10204 and shall pass the NCLEX-RN examination.

(3) An applicant for licensure shall comply with section 16174(3) of the code, MCL 333.16174(3), and submit his or her fingerprints to the department of state police to have a criminal background check conducted by the state police and the federal bureau of investigation.

History: 1990 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10204 Examinations; registered professional nurse; eligibility; reexaminations.

Rule 204. (1) To determine eligibility for the examination, an applicant shall submit a completed application on forms provided by the department, together with the requisite fee.

(2) To be eligible to take the NCLEX-RN examination, an applicant shall establish that he or she has successfully completed a registered nurse education program that satisfies 1 of the following:

(a) The applicant has successfully completed a registered professional nurse education program that is located in this state and is approved by the board.

(b) The applicant has successfully completed a registered professional nurse education program that is located in another state of the United States, as required by section 16186(1) of the code, MCL 333.16186(1), and that program is substantially equivalent to the program requirements of article 15 of the code, MCL 333.16101 to 333.18838, and the rules promulgated by the board.

(c) The applicant is a graduate of a registered professional nurse education program or an equivalent education program that is outside the United States and has been certified pursuant to R 338.10208 by the Commission on Graduates of Foreign Nursing Schools (CGFNS) or its successor agency, to have substantially similar education credentials as a program approved by the board.

(3) An applicant for licensure as a registered professional nurse shall comply with all of the following:

(a) Take the NCLEX-RN examination within 2 years of graduation from a registered nurse education program or after obtaining certification from the certification program of the CGFNS.

(b) Successfully pass the NCLEX-RN examination within 12 months of the first examination attempt in this state or another state. An applicant who has not successfully passed this examination shall comply with the following provisions:

(i) An applicant who did not pass the NCLEX-RN examination on any attempt shall wait 45 days before taking the examination again.

(ii) An applicant who did not pass the NCLEX-RN examination by the third attempt is not eligible to repeat the examination until he or she has completed an approved NCLEX-RN review course with content pertaining specifically to the registered nurse scope of practice.

(iii) An applicant shall submit to the department, prior to retesting, documentation of having completed an approved NCLEX-RN review course.

(iv) An applicant who has completed the NCLEX-RN review course may sit for the NCLEX-RN examination a maximum of 3 times after completion of the review course.

(c) An applicant who has not passed the NCLEX-RN examination after attempting the examination 6 times within 2 years of the first attempt shall repeat an entire registered professional nurse education program that has been approved by the board pursuant to R 338.10303a and is in compliance with R 338.10303b.

(4) "Approved NCLEX-RN review course" means 1 of the following:

(a) A review course sponsored by a nursing education program that is approved by the board pursuant to R 338.10303a and is in compliance with R 338.10303b.

(b) A review course sponsored by 1 of the following providers:

(i) Assessment Technologies Institute Nursing Education.

(ii) Elsevier/Health Education System Incorporated.

(iii) Hurst Review Services.

(iv) Kaplan.

(v) National Council of State Boards of Nursing.

(c) A college or university provided NCLEX-RN review course that is approved by another state board of nursing.

(d) A review course approved by the board.

History: 1990 AACS; 1994 AACS; 1996 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10206 Licensure by endorsement; registered professional nurse; requirements.

Rule 206. (1) An applicant for licensure by endorsement shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the other requirements of the code and the administrative rules promulgated pursuant to the code, an applicant who satisfies the requirements of this rule shall be considered as meeting the requirements of section 16186(1) of the code, MCL 333.16186(1).

(2) An applicant for a registered nurse professional license by endorsement shall meet both of the following requirements:

(a) Complete a registered nurse education program specified in R 338.10204(2)(a) or (b).

(b) Is currently licensed in another state and was initially licensed by examination in another state.

(3) An applicant who is a graduate of a nurse education program that is located outside the United States shall comply with the provisions of R 338.10208(3) or (4) and submit evidence of compliance with all of the following:

(a) Graduation from a registered nurse education program that is not less than 60 weeks in duration and that includes courses in both theory and clinical practice for registered nurse applicants.

(b) Completion of the core curriculum for registered nurse applicants.

(4) An applicant's license shall be verified by the licensing agency of all other states of the United States in which the applicant holds a current license or ever held a license as a registered professional nurse. Verification shall include the record of any disciplinary action taken or pending against the applicant.

History: 1990 AACS; 1994 AACS; 1996 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10207 Lapsed registered professional nurse license; relicensure requirements.

Rule 207. An applicant for relicensure whose Michigan registered professional nurse license has lapsed, under the provisions of section 16201(3) or (4) of the code, MCL 333.16201(3) or (4), as applicable, may be relicensed by complying with the following requirements as noted by $(\sqrt{)}$:

(1) For a registered professional nurse who has let his or her Michigan license lapse and who is not currently licensed in another state:	Lapsed 0-3 Years	Lapsed more than 3 years, but less than 7 years	Lapsed 7 or more years
(a) Application and fee: Submit a completed application on a form provided by the department, together with the requisite fee.	\checkmark	\checkmark	\checkmark
(b) Establish that he or she is of good moral character as defined under section to 7 of 1974 PA 381, MCL 338.41 to 338.47.	V	\checkmark	
(c) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174(3).		\checkmark	
 (d) Continuing education: Submit proof of having completed 25 hours of continuing education in courses and programs approved by the board, including at least 2 hours in pain and symptom management, all of which were earned within the 2-year period immediately preceding the application for relicensure. 	\checkmark		
 (e) Continuing education: Submit proof of having completed 25 hours of continuing education in courses and programs approved by the board, including at least 2 hours in pain and symptom management, with a minimum of 3 hours in each of the following areas, all of which were earned within the 2-year period immediately preceding the application for relicensure: (i) Safe documentation for nurses. (ii) Critical thinking skills for nurses. (iii) Pharmacology. (iv) Preventing medication errors. 		V	~

(y) Professional and legal accountshility for			
(v) Professional and legal accountability for			
nurses.			
(vi) Delegation.			
(f) Certification of skill competency: Within 3			
years of the period immediately preceding the		1	1
application for relicensure, receive written			\checkmark
certification of skill competency from a nurse			
education program approved pursuant to R			
338.10303a. Certification of competency			
must cover the following skills:			
(i) Head-to-toe physical assessment, including			
vital signs.			
(ii) Medication administration.			
(iii) Documentation.			
(iv) Surgical asepsis and infection control.			
(v) Safety, including fall prevention, body			
mechanics, and transfers.			
(g) NCLEX-RN Examination: Within 3 years of			
the period immediately following approval of			
the application for relicensure, retake and pass			
the NCLEX-RN examination.			
(h) Proof of license verification from another			
state: An applicant's license shall be verified			
by the licensing agency of all other states of	2	2	N
	v	v	v
the United States in which the applicant ever			
held a license as a registered professional			
nurse. Verification shall include the record of			
any disciplinary action taken or pending			
against the applicant.			

(2) For a registered professional nurse who has let his or her Michigan license lapse, but who holds a current and valid registered professional nurse license in another state:	Michigan license Lapsed 0-3 Years	Michigan license Lapsed more than 3	Michigan license Lapsed 7 or
neense in another state.	0-5 1 cars	years, but	more
		less than 7	years
		years	
(a) Application and fee: Submit a completed			
application on a form provided by the	\checkmark	\checkmark	\checkmark
department, together with the requisite fee.			
(b) Establish that he or she is of good moral			
character as defined under sections 1 to 7	\checkmark	\checkmark	
of 1974 PA 381, MCL 338.41 to 338.47.			
(c) Submit fingerprints as required under			
section 16174(3) of the code, MCL		\checkmark	

333.16174(3).			
(d) Continuing education: Submit proof of			
completion of 25 hours of continuing			
education, including at least 2 hours in pain			
and symptom management, earned within			
the 2-year period immediately preceding			
the application for relicensure.			
(e) Proof of license verification from another			
state: An applicant's license shall be			
verified by the licensing agency of all other	\checkmark	\checkmark	
states of the United States in which the			
applicant holds a current license or ever			
held a license as a registered professional			
nurse. Verification shall include the record			
of any disciplinary action taken or pending			
against the applicant.			

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10208 Graduate from non-accredited program; graduate from non-board approved program; registered professional nurse program; requirements.

Rule 208. (1) Except as provided in subrules (3) and (4) of this rule, if the applicant is a graduate of a registered professional nurse education program that is located outside of the United States, the applicant shall have his or her nursing education reviewed and certified by the Certification Program of the CGFNS or its successor agency. Certification from CGFNS is required before receiving authorization from the department to take the NCLEX-RN examination under R 338.10204. Information about the certification program can be obtained from the CGFNS website at www.cgfns.org.

(2) If an applicant's educational program was taught in a language other than English, an applicant shall demonstrate a working knowledge of the English language by obtaining a score of not less than 83 on the Test of English as a Foreign Language Internet-Based Test (TOEFL IBT) administered by the Educational Testing Service.

(3) If the applicant is a graduate of a registered professional nurse education program that is located outside of the United States, has passed the NCLEX-RN examination, and has maintained an active license with no disciplinary sanctions in the United States for at least 5 years immediately preceding the application for a Michigan license, then the applicant shall be exempt from completing the nursing education review and certification process through the Certification Program of the CGFNS.

(4) If the applicant is a graduate of a Canadian registered nurse education program that is approved by a province in Canada, then the applicant shall be exempt from completing the nursing education review and certification process through the certification program of the CGFNS if all of the following are met:

- (a) The registered nurse education program was taught in English.
- (b) The applicant has a current active license to practice nursing in Canada.
- (c) The applicant has not been sanctioned by the applicable Canadian nursing authority.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10209 Licensure by examination; licensed practical nurse; requirements.

Rule 209. (1) An applicant for licensure by examination shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the other requirements of the code and the administrative rules promulgated pursuant to the code, an applicant shall satisfy the requirements of this rule.

(2) An applicant for a licensed practical nurse license shall establish that he or she meets the eligibility requirements to sit for the NCLEX-PN examination set forth in R 338.10210 and shall pass the NCLEX-PN examination.

(3) An applicant for licensure shall comply with section 16174(3) of the code, MCL 333.16174(3), and submit his or her fingerprints to the department of state police to have a criminal history check conducted by the state police and the federal bureau of investigation.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10210 Examinations; licensed practical nurse; eligibility; reexaminations.

Rule 210. (1) To determine eligibility for the examination, an applicant shall submit a completed application on forms provided by the department, together with the requisite fee.

(2) To be eligible to take the NCLEX-PN examination, an applicant shall establish that he or she has successfully completed a licensed practical nurse education program that satisfies 1 of the following:

(a) The applicant has successfully completed a practical nurse education program that is located in this state and is approved by the board.

(b) The applicant has successfully completed a practical nurse education program that is located in another state of the United States, as required by section 16186(1) of the code, MCL 333.16186(1), and that program is substantially equivalent to the program requirements of article 15 of the code, MCL 333.16101 to 333.18838, and the rules promulgated by the board.

(c) The applicant is a graduate of a practical nurse education program or an equivalent program that is located outside the United States and has been certified by either the CGFNS, the National Association of Credential Evaluation Services (NACES), or their successor agencies, to have substantially similar education credentials as a program approved by the board.

(d) The applicant has successfully completed a registered nurse education program that meets the requirements of R 338.10204(2). The applicant shall be certified to take the NCLEX-PN examination by a practical nurse program that is approved by the board pursuant to subdivision (a) of this subrule.

(3) An applicant for licensure as a licensed practical nurse shall comply with all of the following:

(a) Take the NCLEX-PN examination within 2 years of graduation from a practical nurse education program.

(b) Successfully pass the NCLEX-PN examination within 12 months of the first examination attempt in this state or another state. An applicant who has not successfully passed this examination shall comply with the following provisions:

(i) An applicant who did not pass the NCLEX-PN examination on any attempt shall wait 45 days before taking the examination again.

(ii) An applicant who did not pass the NCLEX-PN examination by the third attempt is not eligible to repeat the examination until he or she has completed an approved NCLEX-PN review course with content pertaining specifically to the licensed practical nurse scope of practice

(iii) An applicant shall submit to the department, prior to retesting, documentation of having completed an approved NCLEX-PN review course.

(iv) An applicant who has completed the NCLEX-PN review course may sit for the NCLEX-PN examination a maximum of 3 times after completion of the review course.

(c) An applicant who has not passed the NCLEX-PN examination after attempting the examination 6 times within 2 years of the first attempt shall repeat an entire practical nurse education program that has been approved by the board pursuant to R 338.10303a and is in compliance with R 338.10303b.

(4) "Approved NCLEX-PN review course" means 1 of the following:

(a) A review course sponsored by a nursing education program that is approved by the board pursuant to R 338.10303a and is in compliance with R 338.10303b.

(b) A review course sponsored by 1 of the following providers:

(i) Assessment Technologies Institute Nursing Education.

(ii) Elsevier/Health Education system Incorporated.

(iii) Hurst Review Services.

(iv) Kaplan.

(v) National Council of State Boards of Nursing.

(c) A college or university provided NCLEX-PN review course that is approved by another state board of nursing.

(d) A review course approved by the board.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10211 Licensure by endorsement; licensed practical nurse; requirements.

Rule 211. (1) An applicant for licensure by endorsement shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the other requirements of the code and the administrative rules promulgated pursuant to the code, an applicant who satisfies the requirements of this rule shall be deemed to meet the requirements of section 16186(1) of the code, MCL 333.16186(1).

(2) An applicant for a practical nurse license shall meet both of the following requirements:

(a) Complete a practical nurse education program specified in R 338.10210(2).

(b) Be licensed in another state and initially licensed by examination in another state.

(3) An applicant's license shall be verified by the licensing agency of all other states of the United States in which the applicant holds a current license or ever held a license as a licensed practical nurse. Verification shall include the record of any disciplinary action taken or pending against the applicant.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10212 Graduate of non-accredited program; licensed practical nurse; requirements.

Rule 212. (1) Except as provided in subrule (2) of this rule, if the applicant is a graduate of a licensed practical nurse education program that is located outside of the United States, the applicant shall have his or her nursing education reviewed and certified by either a credentialing agency that is accredited by the National Association of Credential Evaluation Services (NACES) or through the Credential Evaluation Service (CES) of the Commission on Graduates of Foreign Nursing Schools (CGFNS) or their successor agencies. Certification from these agencies is required before receiving authorization from the department to take the NCLEX-PN examination under R 338.10209. The list of NACES approved credentialing agencies can be found on its website at <u>www.naces.org</u>. Information about CES can be obtained from the CGFNS website at <u>www.cgfns.org</u>.

(2) If the applicant is a graduate of a licensed practical nurse education program that is located outside of the United States, has passed the NCLEX-PN examination, and has maintained an active license with no disciplinary sanctions in this country for at least 5 years immediately preceding the application for a Michigan license, then the applicant shall be exempt from completing the nursing education review and certification process through either a credentialing agency that is accredited by NACES or through the Credentials Evaluation Service (CES) of the CGFNS.

(3) If an applicant's licensed practical nurse educational program was taught in a language other than English, an applicant shall demonstrate a working knowledge of the English language by obtaining a score of not less than 83 on the Test of English as a Foreign Language Internet-Based Test (TOEFL IBT) administered by the Educational Testing Service.

(4) If an applicant is a graduate of a Canadian registered nurse education program that is approved by a province in Canada, the applicant shall be exempt from completing the nursing education review and certification process through either a credentialing agency that is accredited by NACES or through the CES of the CGFNS provided that all of the following are met:

(i) The registered nurse education program was taught in English.

(ii) The applicant has a current active license to practice nursing in Canada.

(iii) The applicant has not been sanctioned by the applicable Canadian nursing authority.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10213 Lapsed licensed practical nurse license; relicensure requirements.

Rule 213. An applicant for relicensure whose Michigan licensed practical nurse license has lapsed under the provisions of section 16201(3) or (4) of the code, MCL 333.16201(3) or (4), may be relicensed by complying with the following requirements as noted by $(\sqrt{)}$:

 (1) For a licensed practical nurse who has let his or her Michigan licensed practical nurse license lapse and who is not currently licensed in another state: 	Lapsed 0-3 Years	Lapsed more than 3 years, but less than 7 years	Lapsed 7 or more years
(a) Application and fee: Submit a completed			
application on a form provided by the			
department, together with the requisite fee.			
(b) Establish that he or she is of good moral			
character as defined under sections 1 to 7 of			
1974 PA 381, MCL 338.41 to 338.47.			
(c) Submit fingerprints as set forth in section		\checkmark	
16174(3) of the code, MCL 333.16174(3).			
(d) Continuing education: Submit proof of			
having completed 25 hours of continuing			
education in courses and programs approved by	\checkmark		
the board, including at least 2 hours in pain and			
symptom management, all of which were			
earned within the 2-year period immediately			
preceding the application for relicensure.			
(e) Continuing education: Submit proof of having			
completed 25 hours of continuing education in			
courses and programs approved by the board,			
including at least 2 hours in pain and symptom			
management, with a minimum of 3 hours in			
each of the following areas, all of which were			
earned within the 2-year period immediately			
preceding the application for relicensure:			
(i) Safe documentation for nurses.			
(ii) Critical thinking skills for nurses.			
(iii) Pharmacology.			
(iv) Preventing medication errors.			
(v) Professional and legal accountability for			
nurses.			
(f) Certification of skill competency: Within 3			
years of the period immediately preceding the		,	
application for relicensure, receive written		\checkmark	
certification of skill competency from a nurse			
education program approved pursuant to R			
338.10303a. Certification of competency			
must cover the following skills:			

(i) Head-to-toe physical assessment, including	ng			
vital signs.				
(ii) Medication administration.				
(iii) Documentation.				
(iv) Surgical asepsis and infection control.				
(v) Safety, including fall prevention, body				
mechanics, and transfers.				
(g) NCLEX-PN Examination: Within 3 years o	f			
the period immediately following approval of th				\checkmark
application for relicensure, retake and pass the				
NCLEX-PN examination.				
(h) Proof of license verification from another				
state: An applicant's license shall be verified by	J			
the licensing agency of all other states of the	,			
United States in which the applicant ever held a		· ·	,	,
license d as a licensed practical nurse. If				
applicable, verification shall include the record	of			
any disciplinary action taken or pending against				
the applicant.				
the appreant.				
(2) For a licensed practical nurse who has let his	М	lichigan	Michigan	Michigan
or her Michigan license lapse, but who holds a		cense	license	license
•				
current and valid licensed practical nurse license in another state:		psed 3 Years	lapsed more	lapsed
incense in another state:	0-	5 rears	than 3 years,	7 or
			but less than	more
(a) Application and fact. Submit a completed			7 years	years
(a) Application and fee: Submit a completed		.1	.1	. /
application on a form provided by the		N	N	N
department, together with the requisite fee.			1	,
(b) Establish that he or she is of good moral		N	N	N
character as defined under sections 1 to 7 of				
1974 PA 381, MCL 338.41 to 338.47.				
(c) Submit fingerprints as set forth in section			\checkmark	\checkmark
16174(3) of the code, MCL 333.16174(3).				
(d) Continuing education: Submit proof of				
			\checkmark	
(d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain			\checkmark	\checkmark
(d) Continuing education: Submit proof of completion of 25 hours of continuing			\checkmark	\checkmark
(d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain			\checkmark	
(d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was			\checkmark	\checkmark
(d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was earned within the 2-year period immediately			\checkmark	√
 (d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was earned within the 2-year period immediately preceding the application for relicensure. 			\checkmark	√
 (d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was earned within the 2-year period immediately preceding the application for relicensure. (e)Proof of license verification from another state: An applicant's license shall be 		√	√	
 (d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was earned within the 2-year period immediately preceding the application for relicensure. (e)Proof of license verification from another 		√		√
 (d) Continuing education: Submit proof of completion of 25 hours of continuing education, including at least 2 hours in pain and symptom management, all of which was earned within the 2-year period immediately preceding the application for relicensure. (e)Proof of license verification from another state: An applicant's license shall be verified by the licensing agency of all other 		√	√ √	√

If applicable, verification shall include the		
record of any disciplinary action taken or		
pending against the applicant.		

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10299 Rescission.

Rule 299. R 338.1201 to R 338.1235 of the Michigan Administrative Code, appearing on pages 2479 to 2482 of the 1979 Michigan Administrative Code, are rescinded.

History: 1990 AACS.

PART 3. NURSING EDUCATION PROGRAMS

R 338.10301 Definitions.

Rule 301. As used in this part:

(a) "Clinical experience" means direct nursing care experiences with patients or clients that offer students the opportunity to integrate, apply, and refine specific skills and abilities that are based on theoretical concepts and scientific principles. Clinical experience may include simulated nursing experiences.

(b) "Clinical laboratory hours" means those hours of the curriculum which are assigned to laboratory practice, basic skills training, and observational experiences which offer the student the opportunity to meet educational outcomes.

(c) "Cohort" means a group of students admitted in the same academic semester or term with the intention of completing the nursing program at the same graduation date. This includes students who transfer into the program at the same academic level.

(d) "Conceptual framework" means the distinct, systematic organization of concepts and planned student outcomes of the program that are consistent with relevant professional nursing standards and the mission, goals, philosophy, and purposes of the sponsoring institution, and which gives direction to the curriculum.

(e) "Cooperating agency" means an individual, organization, or institution which, by written agreement or letter of intent, accepts students and faculty for nursing educational experiences.

(f) "Core curriculum for licensed practical nurse applicants" means courses in didactic instruction and planned clinical experience, which encompass the LPN scope of practice, in each of the following areas of nursing:

(i) Adult health nursing, which consists of the study of nursing care throughout the adult lifespan; providing care for the acute or chronic phases of a medical illness; providing care before, during, and after a surgical procedure; health promotion; and disease prevention.

(ii) Maternal and reproductive nursing must consist of the study of nursing care for women and their families in the gynecological, antepartum, labor and delivery, and postpartum phases of pregnancy, and includes the care of the newborn infant.

(iii) Children's nursing must consist of the study of nursing care for children whose ages range from birth through adolescence and who are receiving nursing care for both medical and surgical reasons.

(iv) Surgical nursing, which consists of the study of nursing care throughout the adult lifespan, providing care before, during, and after a surgical procedure, health promotion, and disease prevention.

(g) "Core curriculum for registered professional nurse applicants" means courses in didactic instruction and planned clinical experience, which encompass the RN scope of practice, in each of the following areas of nursing:

(i) Adult health nursing, which consists of the study of nursing care throughout the adult lifespan; providing care for the acute or chronic phases of a medical illness; providing care before, during, and after a surgical procedure; health promotion; and disease prevention.

(ii) Maternal and reproductive nursing must consist of the study of nursing care for women and their families in the gynecological, antepartum, labor and delivery, and postpartum phases of pregnancy, and includes the care of the newborn infant.

(iii) Children's nursing must consist of the study of nursing care for children whose ages range from birth through adolescence and who are receiving nursing care for both medical and surgical reasons.

(iv) Mental health nursing, which consists of the nursing care of patients who are receiving nursing care for an acute or chronic psychiatric disorder or physical disorder and shall not be limited only to areas of physical disorders that cause impaired mental function or neurological diseases.

(v) Surgical nursing, which consists of the study of nursing care throughout an adult lifespan, providing care before, during, and after a surgical procedure, health promotion, and disease prevention.

(h) "Course student learning outcomes" means statements of educational expectations written in measurable terms for the knowledge, skills, or behaviors students should demonstrate by the end of the course. The statements should reflect contemporary evidence-based nursing practice and enhance achievement of end of program student learning outcomes.

(i) "Curriculum" means implementation of the philosophy, purposes, program outcomes, and conceptual framework of the nursing program through the systematic arrangement of courses, including outcomes stated in measurable terms and accomplished through appropriate learning experiences planned for a clearly defined group of students and extending over a period of time. Systematic and ongoing evaluation within the context of measurable outcomes is inherent in the curriculum.

(j) "End of program student learning outcomes" means statements of educational expectations written in measurable terms for the knowledge, skills, or behaviors students should demonstrate by the end of the program. The statements should reflect professional standards, guidelines, contemporary nursing practice, guide the curriculum, and increase in complexity as students progress through the curriculum.

(k) "Final approval report" means a self-study done after the graduation of the second cohort and before the graduation of the fourth cohort that is submitted to the board when the program is seeking full program approval.

(1) "Full program approval" means approval of a program granted after satisfactory demonstration to the board of compliance with these rules.

(m) "Initial approval" means approval that is granted by the board to inaugurate a program of nursing education.

(n) "Instruction" means educational methodology for achieving curriculum outcomes.

(o) "Learning experiences" means planned learning situations, which may include clinical experiences, clinical laboratory hours, or classroom instruction.

(p) "Major program change" means any of the following:

(i) Revision of the program's philosophy, conceptual framework, curriculum, program outcomes, student learning outcomes, or changes that increase the use of simulation more than 10% of the total clinical hours in a program.

(ii) Change in primary instruction delivery methods.

(iii) Elimination of separate course content for an integrated approach.

(iv) A permanent expansion in the number of students served.

(v) Increase or decrease in overall program credits.

(q) "Minor program change" means a change that does not permanently affect the program's philosophy, conceptual framework, program outcomes, student learning outcomes, approved enrollment numbers, increase simulation experiences by more than 10%, change the primary instruction delivery methods, eliminate a separate course content for an integrated approach, permanently expand the number of students served, or increase or decrease the overall program credits.

(r) "Nurse education consultant" means a nurse with expertise in curriculum development and nursing program administration or education that independently examines a nursing program under disciplinary review.

(s) "National accreditation" means a self-regulatory process that meets or exceeds educational quality standards and criteria set forth by a national nursing accreditation agency.

(t) "Nursing education program report" means a report completed and submitted at the halfway point between the self-study submissions. This report may also be required in the years between the self-study submissions during the program approval phase to provide the board with information as to the program's admissions, attrition courses, clinical experience, faculty program evaluation, and outcomes.

(u) "Nurse site reviewer" means a nurse with expertise in curriculum development and nursing program administration or education that independently examines a nursing program applying for program approval.

(v) "Nursing process" means the ongoing assessment, analysis, nursing diagnosis, planning, implementation, and evaluation of nursing care.

(w) "Observational experience" means a planned learning situation that is not direct patient care, does not require intervention by the student, meets preplanned stated outcomes, and provides for student evaluation.

(x) "Philosophy" means the stated beliefs of faculty about nursing education and practice that determine the design of the curriculum and the evaluation of the program and that are consistent with the educational philosophy of the sponsoring agency.

(y) "Practical nurse program" means a nursing program to prepare students for practical nurse licensure.

(z) "Preceptor" means an experienced nurse, paired in a 1-to-1 relationship with a nursing student, who actively participates in the education, mentoring, and evaluation of the nursing student in a clinical setting.

(aa) "Probationary status" means the period when a program is under disciplinary action by the board.

(bb) "Program director" means a nurse who is delegated the authority and accountability for the nursing program by the sponsoring agency.

(cc) "Program of nursing education" means a plan or design indicating the relationship of the components necessary to achieve the goal of preparing persons for licensure as registered or practical nurses under the code.

(dd) "Program outcomes" means documented and measurable indicators that reflect the program's overall effectiveness.

(ee) "Registered professional nurse program" means a nursing program to prepare students for initial registered nurse licensure.

(ff) "Self-study report" means an in-depth written review of all aspects of a nursing education program that contains evidence of the program's compliance with all the requirements of these rules.

(gg) "Simulation laboratory" means activities that replicate patient care scenarios and are designed to foster clinical decision-making and critical thinking. Scenarios may include the use of medium- or high-fidelity mannequins, standardized patients, role playing, skills stations, and computer-based critical thinking simulations.

(hh) "Site visit" means a physical inspection of an institution and all the components of its program of nursing education for the purpose of determining compliance with the requirements of this part.

(ii) "Sponsoring agency" means the organization or institution of which the nursing program is a component.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10302 Rescinded.

History: 1989 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10303 Initial program approval; procedure.

Rule 303. The following requirements are established for initial approval of a program of nursing education:

(a) The sponsoring agency shall submit all of the following to the board:

(i) A letter of intent to initiate a program of nursing education.

(ii) A feasibility study that clearly demonstrates all of the following, with supporting documentation relative to the proposed program location:

(A) Need for the program.

(B) Need for graduates of the proposed program.

(C) Availability of students.

(D) Impact on all existing nursing education programs in a 50-mile radius of the proposed program.

(E) Ability of proposed clinical education sites to provide students with clinical experiences that meet course outcomes, provide students the opportunity to practice skills with individuals or groups across the life span and meet the requirements of R 338.10307(5), (6), (7), and (8). Evidence shall also include documentation of the effect on other schools utilizing the proposed clinical facilities and letters of intent from the proposed clinical education sites, signed by the chief nursing officer, or an equivalent position, outlining the plan to accommodate all of the sponsoring agency's students.

(iii) Evidence that the mission of the sponsoring agency is consistent with the philosophy and purpose of a program to prepare students for the practice of nursing as defined in section 17201(1)(a) of the code, MCL 333.17201(1)(a).

(iv) Evidence that the sponsoring agency will provide funding and other support for the nursing education program that meets all of the following requirements:

(A) A 5-year budget in which the first 2 years of the budget do not include tuition and the remaining 3 years of the budget includes tuition.

(B) A financial statement prepared by an independent certified public accountant or auditor, a bank line of credit, or a surety bond that equals the total tuition for all students who have been enrolled for 2 years.

(C) Submission of evidence that the sponsoring agency will provide appropriate physical facilities and other support services for the nursing education program, in conjunction with other departments in the sponsoring agency, including faculty, administration, and student participation in governance of the sponsoring agency, a grievance or complaint process, counseling, academic advising, career placement, financial aid, and learning resource centers or library.

(v) Evidence of approval to provide financial aid for students, under Title IV of the Higher Education Act of 1965, 20 U.S.C. 1070 § 400 et seq.

(vi) A sponsoring agency that is an institution requiring approval from the department's proprietary schools unit, or its successor agency, to conduct a nursing education program or to confer a particular degree or certificate upon the graduates of the program shall submit to the board a copy of the approval. A proprietary school shall possess a state-issued license, be in operation for 2 years, offer health-related courses, and demonstrate student success by certifying that exam results meet or exceed state or national averages.

(vii) Proposed number of students to be enrolled in the program annually, the number of times that enrollment periods will be held per year, and the dates when enrollment periods will be held annually.

(viii) Proposed first date of admission of students to the nursing sequence of the program.

(ix) Plans to recruit and employ a program director and other faculty members sufficiently in advance of admitting students to the nursing sequence to ensure consistency in the planning and implementation of the curriculum. If already appointed, the names and qualifications of the director of the program and other faculty members shall be provided.

(x) The sponsoring agency shall provide evidence of a tuition policy in which students pay as they proceed through the program either by semesters, terms, units, or other time

frame as specified by the sponsoring agency. The sponsoring agency shall also provide evidence of a refund policy that adheres to the refund policies of applicable state, federal, and accrediting agencies.

(xi) Evidence that students possess the necessary prerequisite education before admissions to the program. The program shall not be the provider of the prerequisite education, unless it is a state-approved higher educational institution or has the approval of the state to offer prerequisite courses.

(xii) A student contract or enrollment application that outlines the nursing education program's admission requirements, a tuition refund policy that complies with subdivision (a)(x) of this subrule, a withdrawal and failure policy, and academic progression and program completion requirements.

(b) Following initial approval from the board and before admitting the first cohort, the program director shall submit a self-study report to be approved by the board. The report shall set forth evidence of plans for compliance with the following:

(i) History of sponsoring agency.

(ii) Philosophy.

(iii) Conceptual framework.

(iv) Curriculum to include end of program student learning outcomes and course student learning outcomes.

(v) Course descriptions and outlines.

(vi) Signed clinical contracts or letters of commitment for clinical placements.

(vii) Evaluation methods and tools.

(viii) Program outcomes.

(ix) Director and faculty credentials.

(x) Student policies and support services.

(c) The board may require a site visit to the program by a board-approved nurse site reviewer. A report of the site visit shall be prepared by the nurse site reviewer and provided to the board and the sponsoring agency.

(d) After the first cohort has been admitted and during the initial approval period, the program director shall submit an annual nursing education program report to the board. The nursing education program report shall include information about each of the following:

(i) Admission, progression, and retention of students.

(ii) Student achievement on the required licensure examination.

(iii) Systematic program evaluation results, including, but not limited to, student evaluations, faculty reviews, NCLEX evaluation results, and attrition rates.

(iv) Program changes.

(v) Faculty qualifications, assignments, and any faculty exceptions.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10303a Full program approval; procedure.

Rule 303a. (1) The sponsoring agency may apply to the board for full approval of the program after graduation of the second cohort, but shall apply no later than graduation of

the fourth cohort. The sponsoring agency shall comply with the following requirements for full approval of a nursing education program:

(a) The sponsoring agency shall make application to the board in the form of a letter.

(b) The sponsoring agency shall submit an updated self-study report to the board. The self-study report shall review the program's progress since initial approval was granted and shall include a review and evaluation of program implementation.

(c) The board may require a subsequent site visit to the program by a board-approved nurse site reviewer before considering full approval. If conducted, a report of the site visit shall be prepared by the nurse site reviewer and provided to the board and the sponsoring agency.

(2) When granted full approval for the program of nursing education, the sponsoring agency shall continue to meet all of the requirements of this part.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10303b Continued program approval; requirements.

Rule 303b. (1) A program shall submit a comprehensive self-study report and a nursing education program report at designated intervals. The self-study report shall be submitted every 8 years for a non-accredited program or at the midpoint of the accreditation cycle for nationally accredited programs.

(2) A program may submit a self-study report prepared for accreditation or reaccreditation by a nationally recognized accrediting agency of nursing education programs instead of the self-study report prepared for the board. The schedule for submission of a self-study report for accredited programs shall follow the schedule of the nationally recognized accrediting agency. The self-study report shall include documentation of decisions and recommendations from the accrediting agency and be submitted to the board within 1 month following receipt of the nationally recognized accrediting agency's decision on accreditation of the nursing education program. Programs that have accreditation date changes shall notify the board of nursing to determine a submission date.

(3) Starting at the expiration of the first year after a program has been granted full approval, the sponsoring agency shall submit a nurse education program report to the board every 4 years for a non-accredited program or at the midpoint of the accreditation cycle for nationally accredited programs that contain the following information:

(a) Admission, progression, and retention of students.

(b) Student achievement on the required licensure examination.

(c) Systematic program evaluation results and action plan, including but not limited to, student evaluations, faculty reviews, NCLEX evaluation results, and attrition rates.

(d) Program changes.

(e) Faculty qualifications, assignments, and any faculty exceptions.

(4) The sponsoring agency of a program that is accredited by a nationally recognized nursing education accrediting organization may submit a self-study report approved by the nationally recognized nursing education accrediting organization instead of submitting a nursing education program report referenced in subrule (1) of this rule.

(5)The board shall notify the program director of the date by which a nursing education program report must be submitted.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10303c Program changes; requirements.

Rule 303c. (1) A nursing education program shall submit major program changes to the board in writing and shall be approved by the board before implementation. All of the following information shall be submitted when requesting approval of a major program change:

(a) A comparative description of the current and proposed program or portion of the program which is proposed for change.

(b) Rationale for the change.

(c) Plans to evaluate the effect of the change.

(d) Any supporting documents.

(2) A nursing education program shall submit minor program changes to the department in writing as notification to the board of nursing before implementation. Minor program changes include, but are not limited to, all of the following:

(a) Changing prerequisites, co-requisites, or both.

(b) A temporary expansion of students. After 1 year, a major program change must be submitted if the temporary expansion of students is desired.

(c) Separation of 1 course into 2 courses.

(d) Moving a course from 1 semester to another.

(e) Combining 2 courses.

(f) Changing the sequence in which courses are offered.

(3) The type of program approval, initial or full, under which a program is conducted, shall not be altered when program changes are approved.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10303d Accreditation.

Rule 303d. (1) A nursing education program approved by the board shall be accredited pursuant to 1 of the following:

(a) A nursing education program that has received full board approval pursuant to R 338.10303a, before the promulgation of this rule, shall receive nursing accreditation by a board-recognized nursing accreditation agency no later than January 1, 2025.

(b) A nursing education program that has initial approval of the board shall receive nursing accreditation by a board-recognized nursing accreditation agency within 6 years of receiving full program approval pursuant to R 338.10303a.

(c) A nursing education program that fails to achieve nursing accreditation by a board-recognized nursing accreditation agency as set forth by this rule shall be removed from the list of approved programs pursuant to section 17242 of the code, MCL 333.17242.

(2) The board recognizes the following nursing education accrediting agencies or their successor organizations:

(a) Accreditation Commission for Education in Nursing (ACEN).

(b) Commission for Nursing Education Accreditation (CNEA).

(c) Commission on Collegiate Nursing Education (CCNE).

(3) Failure to maintain accreditation from an approved national nursing accrediting agency shall result in withdrawal of school approval pursuant to section 17242 of the code, MCL 333.17242 and R 338.10311.

History: 2018 AACS.

R 338.10304 Program approval; decision.

Rule 304. (1) Within 90 days after all materials requested by the board have been received, the board shall do either of the following:

(a) Grant initial or full approval of the program or approve the program change when the board finds that the requirements of this part are substantially met.

(b) Deny initial or full approval or approval of the program change when the board finds that the requirements of this part are not substantially met.

(2) The board shall issue its decision in writing.

(3) If approval is denied, the sponsoring agency may request a hearing which shall be conducted pursuant to the provisions of 1969 PA 306, MCL 24.201 et seq.

History: 1989 AACS; 2003 AACS.

R 338.10305 Registered professional nurse and licensed practical nurse programs; program requirements; generally.

Rule 305. Programs of registered professional nursing education and licensed practical nursing education shall meet all of the following requirements:

(a) Comply with the curriculum requirements established by the board and with other requirements set forth in this part.

(b) Contribute to the safe practice of nursing by including the standards of practice, nursing behaviors, and other skills and knowledge in the curriculum to prepare persons for the practice of nursing as defined in section 17201(1)(a) of the code, MCL 333.17201(1)(a).

(c) Prepare students to meet the requirements for eligibility to take the required licensure examination.

(d) Establish requirements for admission, progression, and graduation which shall be made known and available in written form to prospective and current students.

(e) Establish a system for the permanent maintenance of course descriptions and student and graduate transcripts.

History: 1989 AACS; 1996 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10305a Registered professional nursing education program; program requirements; faculty requirements.

Rule 305a. (1) The program director and all nurse faculty members shall hold a current unrestricted license to practice as a registered professional nurse in this state.

(2) If clinical experiences are offered by the nursing education program at sites that are not located in this state, then any nurse faculty members at those sites shall hold a current unrestricted license to practice as a registered nurse in the state or Canadian province where the clinical experience is located.

(3) The program director shall hold a minimum of a graduate degree with a major in nursing.

(4) A member of the nursing faculty who provides didactic/theory instruction shall hold a minimum of a graduate degree. The majority of the didactic/theory faculty shall hold a graduate degree with a major in nursing, unless an exception is granted under subrule (7) of this rule. If the graduate degree is not in nursing, the faculty member shall hold a minimum of a baccalaureate degree in nursing or an equivalent standing in a nationally nursing accredited Associate's Degree in Nursing to Master's of Science in Nursing (ADN to MSN) nursing education program with attestation of baccalaureate level competency from that educational program. Courses that are non-nursing in content but are health-related are exempt from the requirements of this subrule and may be taught by non-nurse faculty.

(5) A member of the nursing faculty who provides instruction in either the clinical or simulation laboratory shall hold a minimum of a baccalaureate degree in nursing or an equivalent standing in a nationally nursing accredited ADN to MSN nursing education program with attestation of baccalaureate level competency from that educational program.

(6) Notwithstanding section 16148(6) of the code, MCL 333.16148(6), all nursing faculty shall meet the requirements of subrules (4) and (5) of this rule by January 6, 2022.

(7) An exception may be made to the requirements of subrule (4) of this rule for fulltime or part-time nursing faculty and shall be based on the faculty member's progress toward meeting the requirements of these rules during each year for which the exception is requested. Board approval for faculty exception requests must be received before the faculty member begins course instruction. A maximum of 5 yearly exceptions shall be granted to any full-time or part-time faculty member.

(8) Nursing faculty shall be sufficient in number to prepare students to achieve the outcomes of the program. The maximum ratio of students to faculty in clinical areas involving direct care of patients shall be not more than 8 students to 1 faculty member. The maximum ratio of students to faculty in clinical areas involving non-direct patient care shall be not more than 10 students to 1 faculty member. The required ratio of 8 students to 1 faculty member may be reduced in specialty units, subject to a sponsoring clinical hospital or agency determination, to ensure safe and competent direct patient care.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10305b Licensed practical nursing education program; program requirements; faculty requirements.

Rule 10305b. (1) The program director and all nurse faculty members shall hold a current unrestricted license to practice as a registered professional nurse in this state.

(2) If clinical experiences are offered by the nursing education program at sites that are not located in this state, then any nurse faculty members at those sites shall hold a current unrestricted license to practice as a registered professional nurse in the state or Canadian province where the clinical experience is located.

(3) The program director shall hold a minimum of a graduate degree in nursing.

(4) Every member of the nursing faculty shall hold a minimum of a baccalaureate degree in nursing, unless an exception is granted under subrule (6) of this rule.

(5) Notwithstanding section 16148(7) of the code, MCL 333.16148(7), all nursing faculty shall comply with the requirements of subrule (4) of this rule within 5 years after the effective date of these rules.

(6) An exception may be made to the requirements of subrule (4) of this rule for fulltime or part-time nursing faculty and shall be based on the faculty member's progress toward meeting the requirements of these rules during each year for which the exception is requested. Board approval for faculty exception requests must be received before the faculty member begins course instruction. A maximum of 5 yearly exceptions shall be granted to any full-time or part-time faculty member.

(7) Nursing faculty shall be sufficient in number to prepare students to achieve the outcomes of the program. The maximum ratio of students to faculty in clinical areas involving direct care of patients shall be not more than 8 students to 1 faculty member. The maximum ratio of students to faculty in clinical areas involving non-direct patient care shall be not more than 10 students to 1 faculty member. The required ratio of 8 students to 1 faculty member may be reduced in specialty units, subject to a sponsoring clinical hospital or agency determination, to ensure safe and competent direct patient care.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10305c Registered professional nursing and licensed practical nursing education programs; preceptor requirements.

Rule 10305c. (1) A program of nursing education that uses the personnel of a clinical facility as preceptors to facilitate the faculty-directed clinical experience of students shall meet all of the following requirements:

(a) Each preceptor shall be approved by the faculty of the program of nursing education.

(b) Each preceptor shall meet either of the following education and experience requirements:

(i) Be educated at the same or higher level as the academic program in which the student is enrolled, have demonstrated competencies that are appropriate for the student's learning experience, and have a minimum 1 year of clinical nursing experience and supervisor recommendation.

(ii) Have a minimum of an associate's degree or diploma in nursing, demonstrated competencies that are appropriate for the student's learning experience, and a minimum of 1 year of clinical nursing experience and supervisor recommendation.

(c) Each preceptor shall hold an unencumbered license in the state where the clinical experience occurs.

(d) The faculty of the program of nursing education shall ensure that each preceptor is provided education including the roles and responsibilities of students, faculty members, and preceptors. The program shall maintain documentation of preceptor education.

(e) Before the preceptor begins instruction of the students, the faculty of the program of nursing shall develop written learning outcomes and provide a copy of those outcomes to each preceptor.

(f) The faculty member shall retain authority and responsibility for the student's learning experiences and shall confer routinely and periodically with the preceptor and student to monitor and evaluate the learning experiences.

(g) The maximum ratio of precepted students to a supervising faculty member shall be not more than 10 students to 1 faculty member.

(h) If the faculty member is not physically present in the area in which students are practicing, he or she shall be immediately available by telephone or other means of telecommunication when students are engaged in clinical activities with a preceptor.

(i) Preceptors shall not be used to replace clinical faculty in prelicensure certificate, associate, or baccalaureate degree nursing programs.

(j) A preceptor shall supervise not more than 1 student during any 1 scheduled work time or shift.

(2) This rule does not apply to staff nurses used by faculty intermittently during nonprecepted clinical experiences.

History: 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10306 Registered nursing and practical nursing education programs; curriculum requirements; generally.

Rule 306. The sponsoring agency's curriculum shall include all of the following:

(a) A statement of philosophy shall be established that is consistent with the philosophy of the sponsoring agency and that is implemented in the program of nursing education.

(b) End of program student learning outcomes and course student learning outcomes shall be established to serve as a guide in the development, implementation, and evaluation of the curriculum. The outcomes shall be leveled in a manner that shows progression throughout the program, and shall be reviewed periodically and revised as necessary.

(c) Learning experiences and methods of instruction shall be selected to fulfill the stated outcomes of each nursing course.

(d) Related clinical experiences and clinical laboratory and simulation laboratory hours shall be provided concurrently with, or immediately after, the theoretical presentation of the course content. Simulation laboratory hours shall be limited to no more than 50% of each clinical experience. In practical nursing education programs, simulation laboratory hours for obstetrics and pediatrics courses are unlimited and may equal 100% of the clinical experience hours.

(e) Evaluation methods and tools to be used for measuring student achievement shall be determined by the faculty in keeping with the assessment methods of the sponsoring agency. These methods and tools shall be known to the students in the program.

(f) The director and faculty shall evaluate all aspects of the curriculum on a systematic basis. Records of the results of the evaluation shall be maintained for board review, if requested.

History: 1989 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 MR 5, Eff. March 8, 2018.

R 338.10307 Registered professional nursing and licensed practical nursing education programs; curriculum; organization, development, implementation, control, and evaluation.

Rule 307. (1) The program director and faculty shall organize, develop, implement, control, and evaluate the curriculum on a regularly scheduled basis within the framework of the philosophy, purposes, and outcomes of the sponsoring agency and those approved by the board.

(2) The curriculum outcomes shall identify the behavioral expectations of the graduate of the program and shall be used for all of the following purposes:

(a) Developing, organizing, implementing, and evaluating the curriculum.

(b) Identifying outcomes for levels of progression and course and program completion.

(c) Providing to the student an organized pattern to follow in which the sequence of learning is from the simple to the complex and from the known to the unknown, with each learning experience built on previously learned information of nursing and related scientific knowledge.

(d) Organizing the courses to approximate, as closely as possible, the schedules of the sponsoring agency in terms, quarters, semesters, or trimesters.

(e) Distributing the courses throughout the curriculum so that an unreasonable overload does not exist in any segment of the sequence.

(3) The philosophy and conceptual framework or rationale for the program shall be the basis for the organization of the nursing content of the curriculum.

(4) The course content and other learning experiences shall promote student growth in all of the following areas:

(a) The understanding of the roles and responsibilities of the members of the nursing profession.

(b) The application of the principles of nursing and the sciences which are basic to nursing practice in the development of plans of care for the patient or client.

(c) The provision of direct and indirect nursing care.

(d) The understanding of effective human relations and demonstrating the ability to use these principles in nursing situations.

(e) The recognition of physical, psychosocial, and spiritual needs of diverse patient/client populations in the provision of nursing care.

(f) The understanding of health, including the manifestations of disease and the initiation, organization, and application of the principles underlying the nursing care provided.

(g) Developing skills and abilities in the administration of all aspects of nursing care, including all of the following:

(i) Communications.

(ii) Critical thinking, clinical reasoning, and problem solving.

(iii) Understanding legal and professional responsibilities.

(iv) Inter-professional relationships with other health care providers.

(v) Evidence-based practice.

(vi) Quality and safety.

(h) Understanding and protecting the rights of patients or clients.

(5) All cooperating agencies selected for clinical laboratory and simulation laboratory experiences shall have standards of nursing care that demonstrate concern for the patient or client and evidence the skillful application of all measures of quality and safe, evidence-based nursing practice.

(6) All cooperating agencies shall have a current license, if required, for their operation and adhere to the local zoning ordinances governing their operation.

(7) When a nurse site reviewer visits a site, he or she may survey cooperating agencies as a part of the review process to determine the contribution each makes to the course and program outcomes. Selection shall be made by the nurse site reviewer.

(8) Each resource selected to provide clinical experience shall indicate a willingness to cooperate in the curriculum by providing a letter of intent, a written agreement, or a formal contract. Each cooperating agency shall provide experiences of a quality and quantity that will enable all students to meet the outcomes established for the clinical experience pursuant to R 338.10303.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10308 Registered professional nursing education program; curriculum; implementation.

Rule 308. (1) The director and faculty of a program of nursing education leading to licensure as a registered professional nurse shall comply with all of the following provisions:

(a) Select courses and ensure teaching concepts for basic content in the biological, physical, behavioral, and other courses supportive of the nursing major which shall assist the student to succeed in the nursing sequence.

(b) Provide courses and clinical and simulation laboratory experiences in the care of individuals across diverse age groups, genders, races and cultures, in medical, surgical, pediatric, geriatric, obstetrical, and psychiatric nursing. Opportunities for learning experiences in community aspects of nursing shall be made available. The elements of the nursing process shall be emphasized in all nursing courses. Clinical laboratory, simulation laboratory, and clinical experience hours shall be sufficient in number to meet the course and program outcomes.

(c) Ensure that courses include content relating to all of the following:

(i) The legal scope of practice of a registered nurse.

(ii) The standards of practice and performance and code of ethics for the nursing profession.

(iii) Historical perspectives of nursing and current legal-ethical issues.

(iv) Licensure requirements.

(d) Select cooperating agencies that meet the requirements of R 338.10307(5), (6), and (8).

(2) A registered professional nurse program may substitute up to 50% of clinical hours in any single course with simulation laboratory experiences. For simulation laboratory experiences, the board adopts by reference the standards of the International Nursing Association for Clinical Simulation and Learning, as specified in the publication entitled, "Standards of Best Practice: Simulation" 2016. The standards are available from the International Nursing Association for Clinical Simulation and Learning's website at <u>http://www.inacsl.org</u> at no cost. Copies of the standards are available for inspection and distribution at cost from the Board of Nursing, Bureau of Professional Licensing, Department of Licensing and Regulatory Affairs, 611 W. Ottawa Street, P.O. Box 30670, Lansing, Michigan 48909.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10309 Licensed practical nursing education program; curriculum; implementation.

Rule 309. (1) The director and faculty of a program of nursing education leading to licensure as a licensed practical nurse shall comply with all of the following provisions:

(a) Select courses and ensure teaching concepts on which the theory and practice of practical nursing are based. The basic principles of the natural and applied sciences that are fundamental to the theory and practice of practical nursing and that are applied in the planning and implementation of nursing care shall be included.

(b) Provide courses and clinical and simulation laboratory experiences in the care of individuals across diverse age groups, genders, races and cultures, in medical, surgical, pediatric, obstetrical, and geriatric nursing and provide supervised practice in the administration of medications. Clinical laboratory, simulation laboratory, and clinical experience hours shall be sufficient to meet the outcomes of the curriculum.

(c) Ensure that courses include content relating to all of the following:

(i) The legal scope of practice of a licensed practical nurse.

(ii) The standards of conduct for members of the nursing profession and, in particular, a licensed practical nurse.

(iii) Historical perspectives of nursing and current legal-ethical issues.

(iv) Licensure requirements.

(d) Select cooperating agencies that meet the requirements of R 338.10307(5), (6), and (8).

(2) A licensed practical nursing education program may substitute up to 50% of clinical hours in any single course with simulation laboratory experiences, except for pediatric and obstetric clinical hours. A licensed practical nursing education program may substitute up to 100% of pediatric and obstetric clinical hours with simulation laboratory. For simulation laboratory experiences, the board adopts by reference the standards of the International Nursing Association for Clinical Simulation and Learning, as specified in the publication entitled, "Standards of Best Practice: Simulation" 2016. The standards

are available from the International Nursing Association for Clinical Simulation and Learning's website at <u>http://www.inacsl.org</u> at no cost. Copies of the standards are available for inspection and distribution at cost from the Board of Nursing, Bureau of Health Care Services, Department of Licensing and Regulatory Affairs, 611 W. Ottawa Street, P.O. Box 30670, Lansing, Michigan 48909.

History: 1989 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10310 Board evaluation of a nursing education program.

Rule 310. The board may evaluate a program of nursing education when any of the following occurs:

(a) A request for initiating a program of nursing education is submitted.

(b) A request for full approval of a program is submitted.

(c) A request for approval of a major program change is submitted.

(d) The failure rate for first-time test takers on the required licensure examination reaches or exceeds 25% for any 1 year of compiled statistics or reaches or exceeds 15% for any 2 of 3 consecutive years of compiled annual statistics.

(e) Complaints regarding the conduct of the program are received and it is necessary to validate the complaints, pursuant to section 17242 of the code, MCL 333.17242.

(f) Failure of a nursing education program to submit a report or self-study pursuant to the time frames set forth in R 338.10303b.

(g) Failure of a nursing education program to submit faculty exception requests before the start date of the semester under R 338.10305a and R 338.10305b.

History: 1989 AACS; 1998-2000 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10310a Nursing education program; board action following evaluation.

Rule 10310a. The board shall require a nursing education program evaluated pursuant to section 17242 of the code, MCL 333.17242, and R 338.10310 and determined to be in noncompliance with any provision of the code or the administrative rules to comply with all of the following, as applicable:

(a) An action plan: The board shall require an action plan as the first step for improvement of the identified problem areas. The sponsoring agency shall submit the action plan within 6 months of the evaluation or with the next 4-year report as defined in Rule 338.10303b, whichever comes first. All of the following apply:

(i) The plan shall indicate that an evaluation of the nursing education program was conducted by the program's director and faculty to identify problem areas. The plan shall include specific steps that are being taken to affect changes in the program. The action plan shall also provide a method for the evaluation of the changes and further action to be taken, if program performance continues to be out of compliance.

(ii) The program shall have 1 year from report submission to implement the changes that are specified in the action plan.

(iii) If there is no evidence of improvement 1 year from the plan's implementation, then the board shall place the program on "probationary status" and the program shall comply with subdivision (b) of this rule.

(b) A self-study: The board shall require a full self-study of the program of nursing education as the second step for improvement. The sponsoring agency shall submit the self-study within 6 months of notification from the board or department. All of the following apply:

(i) The self-study shall be a complete review of the program including, but not limited to, admission policies, curriculum, teaching methods, faculty credentials, testing methods, remediation methods, and failure policies.

(ii) If the result of the self-study concludes that a major program change is necessary, a major program change shall be developed by the sponsoring agency. The major program change shall be submitted to the board for its review and approval prior to the changes taking effect.

(iii) If the result of the self-study concludes that a minor program change is necessary, a minor program change shall be developed by the sponsoring agency. The minor program change shall be submitted to the department for its review and approval prior to the changes taking effect.

(iv) The program shall have 1 cohort cycle to demonstrate improvement.

(v) After the graduation and NCLEX testing of that cohort, if there is no evidence of improvement, the program shall comply with subdivision (c) of this rule.

(c) A nursing education consultant: The program shall employ the services of a nursing education consultant whose credentials shall be submitted to the board. All of the following apply:

(i) The program shall require the consultant to conduct a full and comprehensive review of the nursing education program and prepare a report of the findings and recommendations for improvement.

(ii) The program shall submit the nursing education consultant's report of the findings and recommendations to the board. The program shall also submit a plan to implement the recommendations of the consultant to the board.

(iii) If the recommendation involves a major program change, the sponsoring agency shall submit it to the board for its approval prior to the implementation of the program change.

(iv) The program shall have 1 cohort cycle under the major program change to demonstrate improvement.

(v) If the recommendations do not involve a major program change, the school then has 1 year from report submission to implement the changes.

(vi) If there is no evidence of improvement after the NCLEX examination of the cohort or by the end of 1 year following report submission, the program shall comply with subdivision (d) of this rule.

(d) A reduction in admissions: The program shall reduce admissions to a board-recommended level. Both of the following apply:

(i) The program shall have 1 cohort cycle under the reduction in admissions to demonstrate improvement.

(ii) If there is no evidence of improvement, the board shall commence withdrawal of program approval pursuant to section 17242(2) of the code, MCL 333.17242(2).

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10311 Failure of program to comply with rules; withdrawal of approval.

Rule 311. (1) The board shall proceed under section 17242 of the code, MCL 333.17242, if the board determines that a program of nursing education does not meet the requirements of this part.

(2) Withdrawal of board approval of the program of nursing education for stated deficiencies which were not remediated does not necessarily make any bona fide student enrolled in the program at the time of withdrawal of approval ineligible for the required licensure examination upon satisfactory completion of that program or another program of nursing education which has been approved by the board.

(3) Failure of a nursing program to meet all of the requirements of this part shall not, in and of itself, make a graduate from the program ineligible for licensure in this state. Approval of the program in a jurisdiction that maintains substantially equivalent requirements shall be considered in compliance with these rules.

History: 1989 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10312 Program termination; interruption or reduction of admissions.

Rule 312. (1) The program director shall inform the board if a date is established for termination of the program of nursing education.

(2) The program director shall inform the board regarding the system of retention of student records which are needed for endorsement purposes and proof of scholastic achievement. The system of records retention shall be in accordance with all applicable federal and state laws and regulations. The board shall retain this information so that graduates may be given the source of information upon request.

(3) The program director shall inform the board if admissions to the program of nursing education are to be reduced or interrupted.

History: 1989 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

PART 4. NURSE SPECIALTY CERTIFICATION

R 338.10401 Definitions.

Rule 401. As used in this part:

(a) "Clinical nurse specialist" means an individual who is licensed under part 172 of the code, MCL 333.17201 to 333.17242, as a registered nurse, who is certified by the board to use the title clinical nurse specialist, and who focuses on continuous improvement of patient outcomes and nursing care with broad focus across the areas of direct patient care, patient education, nursing education, nursing practice, and

organizational systems. A clinical nurse specialist is responsible and accountable for diagnosis and treatment of health/illness states, including the prescription and use of pharmacological and nonpharmacological interventions that are within the clinical nurse specialist's speciality role and scope of practice; disease management, health promotion; and prevention of illness and risk behaviors among individuals, families, groups, and communities. Nursing care provided by a clinical nurse specialist also includes the evaluation of patient outcomes; the translation of evidence into practice; and the development, planning, coordination and direction of programs of care for acute and chronically ill patients and their families.

(b) "Nurse anesthetist" means an individual who is licensed under part 172 of the code, MCL 333.17201 to 333.17242, as a registered nurse, who is certified by the board to use the title nurse anesthetist, and who is prepared to provide the full spectrum of anesthesia care and anesthesia-related care that is within the nurse anesthetist's specialty role and scope of practice for individuals across the lifespan, whose health status may range from healthy through all recognized levels of acuity, including persons with immediate, severe, or life-threatening illnesses or injury.

(c) "Nurse midwife" means an individual who is licensed under part 172 of the code, MCL 333.17201 to 333.17242, as a registered nurse, who is certified by the board to use the title nurse midwife, and who focuses on primary care services for women throughout their lifespan, including comprehensive maternity care that includes prenatal care, childbirth in diverse settings, postpartum care, and newborn care; gynecological, reproductive, and contraceptive care; physical exams; diagnosis and treatment of common health problems with consultation or referral as indicated; prescribing pharmacological and nonpharmacological interventions and treatments that are within the nurse midwife's specialty role and scope of practice; and treatment of male partners for sexually transmitted infection and reproductive health.

(d) "Nurse practitioner" means an individual who is licensed under part 172 of the code, MCL 333.17201 to 333.17242, as a registered nurse, who is certified by the board to use the title nurse practitioner, and who focuses on the performance of comprehensive assessments; providing physical examinations and other health assessments and screening activities; and diagnosing, treating, and managing patients with acute and chronic illnesses and diseases. Nursing care provided by a nurse practitioner includes ordering, performing, supervising, and interpreting laboratory and imaging studies; prescribing pharmacological and nonpharmacological interventions and treatments that are within the nurse practitioner's specialty role and scope of practice; health promotion; disease prevention; health education; and counseling of patients and families with potential, acute, and chronic health disorders.

History: 1986 AACS; 2018 AACS.

R 338.10401a Temporary certification.

Rule 401. Temporary certification in a nursing specialty field is not available in this state.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10402 Automatic suspension or revocation of specialty certification. Rule 402. The suspension or revocation of a license as a registered nurse shall automatically cause the suspension or revocation of the specialty certification.

History: 1986 AACS.

R 338.10403 Advertisement of services.

Rule 403. Only nurses certified in a nursing specialty field may hold themselves out to the public as nurse specialists using the title clinical nurse specialist, nurse anesthetist, nurse midwife, or nurse practitioner. Conduct contrary to this rule is considered a violation of section 16221(d) of the code, MCL 333.16221(d).

History: 1986 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10404 Specialty certification qualifications; nurse anesthetist.

Rule 404. A specialty certification for a nurse anesthetist shall be granted to a registered professional nurse who satisfies all of the following requirements:

(a) Holds a current and valid license to practice nursing in this state.

(b) Submits an application for certification as a nurse anesthetist on a form provided by the department, with the required fee.

(c) Possesses current certification from the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA), or a successor organization.

History: 1986 AACS; 1990 AACS; 1998-2000 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10404a Specialty certification qualifications; nurse midwife.

Rule 404a. A specialty certification for nurse midwife shall be granted to a registered professional nurse who satisfies all of the following requirements:

(a) Holds a current and valid license to practice nursing in this state.

(b) Submits an application for certification as a nurse midwife on a form provided by the department with the required fee.

(c) Possesses a current certification from the American Midwifery Certification Board, Inc. (AMBC), or a successor organization.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10404b Specialty certification qualifications; nurse practitioner.

Rule 404b. A specialty certification for nurse practitioner shall be granted to a registered professional nurse who satisfies all of the following requirements:

(a) Holds a current and valid license to practice nursing in this state.

(b) Submits an application for certification as a nurse practitioner, on a form provided by the department with the required fee.

(c) Possesses advanced practice certification from 1 of the following certification organizations, or successor organizations:

(i) The American Nurses Credentialing Center.

(ii) The Pediatric Nursing Certification Board.

(iii) The National Certification Corporation for Women's Health Care Nurse Practitioner and Neonatal Nurse Practitioner.

(iv) The American Academy of Nurse Practitioners for Adult Nurse Practitioners, Family Nurse Practitioners, and Adult-Gerontology Primary Care Nurse Practitioners.

(v) The Oncology Nursing Certification Corporation.

(vi) The American Association of Critical Care Nurses Certification Corporation for Acute Care Nurse Practitioner.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10404c Specialty certification qualifications; clinical nurse specialist.

Rule 404c. (1) A specialty certification for a clinical nurse specialist shall be granted to a registered professional nurse who satisfies all of the following requirements:

(a) Holds a current and valid license to practice nursing in this state.

(b) Submits an application for certification as a clinical nurse specialist, on a form provided by the department with the required fee.

(c) Possesses either of the following:

(i) An advanced practice certification from either of the following certification organizations, or successor organizations:

(A) The American Nurses Credentialing Center.

(B) The American Association of Critical Care Nurses Certification Corporation.

(ii) If an applicant is unable to take a national certification exam due to graduation from an accredited clinical nurse specialist master's or doctoral nursing program before the development of clinical nurse specialist core competencies and the requirement of 500 clinical practice hours, he or she may be granted a specialty certification as a clinical nurse specialist based upon submission of a portfolio of evidence that demonstrates knowledge and skill competence in the clinical nurse specialist role and population focus. The portfolio must include all of the following:

(A) Transcripts from an accredited master's or doctoral level educational program in clinical nursing with preparation as a clinical nurse specialist.

(B) Curriculum vitae demonstrating work history in a clinical nurse specialist position before April 9, 2017.

(C) Three letters of recommendation, including 1 from a clinical nurse specialist with national board certification and 2 letters from nursing administrators, nursing supervisors, or advanced practice nurses attesting that the applicant has at least 3,000 hours of practice as a clinical nurse specialist before April 9, 2017. These letters must provide evidence that the applicant engaged in practice consistent with the standards for a clinical nurse

specialist as described by the National Association of Clinical Nurse Specialists (NACNS) in the publication entitled "Clinical Nurse Specialist and Core Competencies" 2010. A copy of the standards and requirements is available at no cost from the association's website at <u>www.nacns.org</u>. A copy of the standards and requirements also is available for inspection and distribution at no cost from the Board of Nursing, Michigan Department of Licensing and Regulatory Affairs, 611 West Ottawa, Lansing, MI 48909

(2) Application for certification as a clinical nurse specialist granted under the criteria set forth in subrule (1)(c)(ii) of this rule shall be permitted for not more than 2 years after the effective date of this rule set.

History: 2018 AACS.

R 338.10405 Nurse anesthetist specialty certification renewal or reregistration; schedule; requirements; maintenance of evidence of compliance.

Rule 405. (1) Specialty certification renewal shall correspond with the same schedule as the license renewal.

(2) An applicant for renewal or reregistration of a lapsed certification shall have obtained recertification or maintained certification, within the 2-year period immediately preceding the application, from the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA), or a successor organization.

(3) An applicant or licensee shall maintain evidence of his or her compliance with the requirements of this rule for a period of 4 years after the date of application, during which time the board may require the licensee to submit such evidence for audit.

History: 1986 AACS; 1991 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10405a Nurse midwife specialty certification renewal or reregistration; schedule; requirements; maintenance of evidence of compliance.

Rule 405a. (1) Specialty certification renewal shall correspond with the same schedule as the license renewal.

(2) An applicant for specialty certification renewal or reregistration of a lapsed certification shall have obtained recertification or maintained certification within the 2-year period immediately preceding the application, from the American Midwifery Certification Board (AMCB), or a successor organization.

(3) An applicant or licensee shall maintain evidence of his or her compliance with the requirements of this rule for a period of 4 years after the date of application, during which time the board may require the licensee to submit such evidence for audit.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10405b Nurse practitioner specialty certification renewal or reregistration; schedule; requirements; maintenance of evidence of compliance.

Rule 405b. (1) Specialty certification renewal shall correspond with the same schedule as the license renewal.

(2) An applicant for renewal or reregistration of a lapsed certification shall meet the following requirements appropriate to his or her current source of certification:

(a) An applicant who holds national certification as a nurse practitioner shall have obtained recertification or maintained certification within the 2-year period immediately preceding the application from 1 of the following organizations or successor organizations:

(i) The American Nurses Credentialing Center.

(ii) The Pediatric Nursing Certification Board.

(iii) The National Certification Corporation for Women's Health Care Nurse Practitioner and Neonatal Nurse Practitioner.

(iv) The American Academy of Nurse Practitioners.

(v) The Oncology Nursing Certification Corporation.

(vi) The American Association of Critical Care Nurses Certification Corporation.

(vii) The American Association of Nurse Practitioners.

(b) An applicant who obtained Michigan board certification as a nurse practitioner before 1991 shall have completed 40 continuing education hours in the nursing specialty field within the 2-year period immediately preceding the application. The board approves and adopts by reference in this rule the standards listed in R 338.10602 for approving continuing education activities for the nurse practitioner.

(3) An applicant or licensee shall maintain evidence of his or her compliance with the requirements of this rule for a period of 4 years after the date of application, during which time the board may require the licensee to submit such evidence for audit.

History: 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10405c Clinical nurse specialist specialty certification renewal; schedule; requirements; maintenance of evidence of compliance.

Rule 405c. (1) Specialty certification renewal shall correspond with the same schedule as the license renewal.

(2) An applicant for renewal of a certification shall meet the following requirements appropriate to his or her current source of certification:

(a) An applicant who holds national certification as a clinical nurse specialist shall have obtained recertification or maintained certification within the 2-year period immediately preceding the application from either of the following organizations or successor organizations:

(i) American Nurses Credentialing Center.

(ii) American Association of Critical Care Nurses Certification Corporation.

(b) An applicant who does not possess national certification as a clinical nurse specialist shall have met the continuing education requirements for his or her role and population focus consistent with the recertification standards as established by the American Nurses Credentialing Center or the American Association of Critical Care Nurses Certification Corporation for the 2-year period immediately preceding the certification renewal.

(3) An applicant or licensee shall maintain evidence of his or her compliance with the requirements of this rule for a period of 4 years after the date of application, during which time the board may require the licensee to submit this evidence for audit.

History: 2018 AACS.

R 338.10406 Expired certification.

Rule 406. (1) If the nursing license has expired, the requirements for a registered nurse license shall be satisfied before applying for certification in a specialty field.

(2) The board shall certify a licensee who has allowed certification to expire if the applicant submits evidence that the current initial certification requirements have been met.

History: 1986 AACS.

PART 6. CONTINUING EDUCATION

R 338.10601 License renewals; requirements; applicability.

Rule 601. (1) Pursuant to section 16201 of the code, MCL 333.16201, an applicant for license renewal who has been licensed for the 2-year period immediately preceding the expiration date of the license, shall accumulate at least 25 hours of continuing education that are approved by the board pursuant to these rules during the 2 years preceding an application for renewal. This part applies to an application for renewal that is filed for the renewal cycle 1 year or more after the effective date of these rules.

(2) An applicant for license renewal shall complete at least 2 hours of continuing education in pain and pain symptom management in each renewal period pursuant to section 16204(2) of the code, MCL 333.16204(2). Continuing education in pain and pain symptom management may include, but is not limited to, courses in behavior management, psychology of pain, pharmacology, behavior modification, stress management, clinical applications, and drug interventions as they relate to professional practice.

(3) Submission of an application for renewal shall constitute the applicant's certification of compliance with the requirements of this rule. A nurse shall retain documentation of meeting the requirements of this rule for a period of 4 years from the date of applying for license renewal. The board may require an applicant to submit evidence to demonstrate compliance with this rule. Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221(h).

(4) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department before the expiration date of the license.

(5) The requirements of this part do not apply to an applicant during an initial licensure cycle.

R 338.10602 Acceptable continuing education; requirements; limitations.

Rule 602. (1) The 25 hours of continuing education required pursuant to R 338.10601(1) for the renewal of a license shall comply with the following, as applicable:

(a) No more than 12 credit hours shall be earned during a 24-hour period for online or electronic media, such as videos, internet web-based seminars, video conferences, online continuing education programs, and online journal articles.

(b) An applicant may not earn credit for a continuing education program or activity that is identical to a program or activity the applicant has already earned credit for during that renewal period.

ACCEPTABLE CONTINUING EDUCATION ACTIVITIES			
(a)	Completion of an approved continuing education program or activity related to the practice of nursing or any non-clinical subject	The number of hours approved by the sponsor or the approving organization.	
	relevant to the practice of nursing. A continuing education program or activity is approved, regardless of the format in which it is offered, if it is approved or offered for continuing education credit by any of the	for a set number of hours, then 1	
	 following: The American Association of Nurse Anesthetists (AANA). The American Association of Nurse 	A minimum of 25 hours shall be earned in each renewal period.	
	 Practitioners (AANP). The Accreditation Council for Continuing Medical Education (ACCME). 		
	• The American College of Nurse- Midwives (ACNM).		
	• The American Nurses Credentialing Center (ANCC).		
	• The American Osteopathic Association (AOA).		
	• The National Association of Clinical Nurse Specialists.		
	• The National Association for Practical Nurse Education and Service, Inc.		
	(NAPNES).The National League for Nursing (NLN).		
	• Another state or provincial board of nursing.		

	 A continuing nursing education program offered by a nursing education program that is approved by the board under R 338.10303a. If audited, an applicant shall submit a copy of 	
	a letter or certificate of completion showing the applicant's name, number of hours earned, sponsor name or the name of the organization that approved the program or activity for continuing education credit, and the date on which the program was held or activity completed.	
(b)	Completion of academic courses related to nursing practice offered in a nursing education program approved by the board.	Five hours of continuing education may be earned for each semester credit hour earned.
	If audited, an applicant shall submit an official transcript that reflects completion of the academic course and number of semester or quarter credit hours earned.	Three hours of continuing education may be earned for each quarter credit hour earned.
(c)	Obtaining specialty certification or maintaining certification as 1 of the following: Clinical nurse specialist. Nurse anesthetist. Nurse midwife. Nurse practitioner. If audited, an applicant shall submit proof of certification or recertification.	Twenty-five hours may be credited for obtaining or maintaining specialty certification during the renewal period.
(d)	Successful completion of a national nursing specialty examination.	Ten hours may be earned in the year in which the applicant achieves a passing score.
	If audited, an applicant shall submit proof of a passing score on the examination.	A maximum of 20 hours may be earned in each renewal period. Credit will not be given for repeating the same examination in a renewal period.
(e)	 Initial publication of a chapter or an article related to the practice of nursing or allied health in either of the following: A nursing or health care textbook. A peer-reviewed textbook. A nursing or health care peer-reviewed journal. 	Ten hours per publication. A maximum of 10 hours may be earned in each renewal period.

	If audited, an applicant shall submit a copy of the publication that identifies the applicant as the author or a publication acceptance letter.	
(f)	Independent reading of articles or viewing or listening to media related to nursing practice that do not include a self-assessment component.	One hour for each 50 to 60 minutes of participation. A maximum of 4 hours may be
	If audited, an applicant shall submit an affidavit attesting to the number of hours the applicant spent participating in these activities and that includes a description of the activity.	earned in each renewal period.
(g)	Participation on a health care organization committee dealing with quality patient care or utilization review.	One hour for each 60 minutes of participation.
	If audited, an applicant shall submit a letter from an organization official verifying the applicant's participation and the number of hours the applicant spent participating on the committee.	A maximum of 4 hours may be earned in each renewal period.
(h)	Presentation of an academic or continuing education program that is not a part of the applicant's regular job description.	Three hours may be earned for each 60 minutes of presentation.
	If audited, an applicant shall submit a copy of the curriculum and a letter from the program sponsor verifying the length and date of the presentation.	A maximum of 6 hours may be earned in each renewal period.
(i)	Participation as a preceptor for at least 1 nursing student or new employee undergoing orientation.	A maximum of 5 hours of continuing education may be
	A preceptorship shall be for a minimum of 120 hours and have a 1 student/employee to 1 preceptor ratio. This may involve more than 1 student or employee.	earned in each renewal period.
	If audited, an applicant shall submit written documentation from the educational institution or preceptor's supervisor verifying the dates and hours of the preceptorship.	

History: 1996 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10603 Rescinded.

History: 1996 AACS; 2003 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

PART 7. NURSING PROFESSIONAL FUND SCHOLARSHIP PROGRAM

R 338.10701 Definitions.

Rule 701. "Nurse professional fund" means the fund established under section 16315(6) of the code, MCL 333.16315(6).

History: 1998-2000 AACS; 2017 MR 1, Eff. Jan. 6, 2017.

R 338.10702 Board determination of categories and areas of need for designating awards; department required to communicate board's determination of need to nursing programs; applications.

Rule 702. (1) The board shall annually determine categories and areas of need for designating scholarship awards to eligible programs of nursing. The board may consider any of the following in establishing categories and areas of need:

(a) Data generated from Michigan licensure renewal information and nursing surveys.

(b) National and state trends that have identified nursing shortages.

(c) Data identifying medically underserved areas (MUA), medically underserved populations (MUP), or health professional shortage areas (HPSA).

(d) Health status and nursing care needs of the state's residents.

(2) The department shall communicate the board's determination as to categories and areas of need to approved nursing education programs in this state.

(3) The department shall provide applications to approved programs of nursing that meet the established eligibility criteria in R 338.10703.

History: 1998-2000 AACS; 2018 AACS.

R 338.10703. Eligibility of and allocation to nursing education programs.

Rule 703. (1) To be eligible for a scholarship award, a school shall meet 1 of the following criteria:

(a) Provide a prelicensure nursing program that complies with all of the following:

(i) Is approved by the Michigan board of nursing.

(ii) Has a primary campus located in this state.

(iii) Offers a program of nursing that meets the predetermined category and area of need as established by the board under R 338.10702.

(iv) File an application approved by the department declaring a notice of intent to participate in the scholarship.

(b) Provide a post-licensure nursing program that complies with all of the following:

(i) Is accredited by a national nursing education accrediting entity.

(ii) Has a primary campus located in this state.

(iii) File an application approved by the department declaring a notice of intent to participate in the scholarship.

(2) A school may submit an application for participation for only those programs that are included in the annual list of scholarship program categories and areas of need as determined by the board pursuant to R 338.10702.

(3) The department shall annually determine the allocation for each eligible education program.

History: 1998-2000 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10704 Nursing education program awards to eligible students; requirements, procedures.

Rule 704. (1) An eligible nursing education program, upon receiving an allocation, shall award a scholarship to a student who meets all of the following criteria:

(a) Is a permanent resident of this state.

(b) If licensed as a nurse, holds an unencumbered Michigan license to practice nursing.

(c) Is not in receipt of a full scholarship from another source.

(d) Maintains satisfactory progress as determined by the eligible nursing education program.

(2) A nursing education program shall apply a scholarship award first to the cost of tuition, books, and fees associated with the program. A nursing program shall then provide the remainder of the award, if any, to the student in the form of a stipend.

(3) The nursing education program shall notify the department, in writing, of its intent to award a scholarship. The notice shall contain all of the following information:

(a) The name of the recipient.

(b) Course of study or program in which the recipient is enrolled.

(c) Validation that all criteria have been met.

(4) A student may receive a scholarship award only once for each level of nursing education.

(5) If a recipient withdraws from the nursing education program, then within 30 days of withdrawal, the nursing education program shall notify the department, in writing, of its intent to award the remaining scholarship monies in accordance with subrule (3) of this rule or return the unused funds to the department.

(6) The nursing education program shall account for all of the funds disbursed by the department no later than February 15 of the academic year in which the funds were distributed. Both of the following apply:

(a) The department shall supply the accounting form to each program that is participating in the nurse professional fund scholarship program.

(b) Failure of a program to submit an accounting statement to the department in accordance with subrule (6) of this rule will result in the department withholding future scholarship funds from the program until all past due accounting statements have been submitted and approved.

History: 1998-2000 AACS; 2017 MR 1, Eff. Jan. 6, 2017; 2018 AACS.

R 338.10705 School ineligibility; notification; hearing.

Rule 705. (1) If a school is deemed ineligible for a nursing scholarship award, then the department shall notify the school in writing.

(2) Upon receipt of notification of ineligibility, a school may request a hearing. The department shall conduct a hearing under Act No. 306 of the Public Acts of 1969, as amended, being §24.201 et seq. of the Michigan Compiled Laws.

History: 1998-2000 AACS.