

**Vermont APRN Statutes
(APRN)**

§ 1612. Practice guidelines

(a) APRN licensees shall submit for review individual practice guidelines and receive board approval of the practice guidelines. Practice guidelines shall reflect current standards of advanced nursing practice specific to the APRN's role, population focus, and specialty.

(b) Licensees shall submit for review individual practice guidelines and receive board approval of the practice guidelines:

(1) prior to initial employment;

(2) if employed or practicing as an APRN, upon application for renewal of an APRN's registered nurse license; and

(3) prior to a change in the APRN's employment or clinical role, population focus, or specialty. (Added 2011, No. 66, § 5, eff. June 1, 2011; amended 2011, No. 116 (Adj. Sess.), § 21.)

§ 1613. Transition to practice

(a) Graduates with fewer than 24 months and 2,400 hours of licensed active advanced nursing practice in an initial role and population focus or fewer than 12 months and 1,600 hours for any additional role and population focus shall have a formal agreement with a collaborating provider as required by board rule. APRNs shall have and maintain signed and dated copies of all required collaborative provider agreements as part of the practice guidelines. An APRN required to practice with a collaborative provider agreement may not engage in solo practice, except with regard to a role and population focus in which the APRN has met the requirements of this subsection.

(b) An APRN who satisfies the requirements to engage in solo practice pursuant to subsection (a) of this section shall notify the board that these requirements have been met. (Added 2011, No. 66, § 5, eff. June 1, 2011.)

§ 1614. APRN renewal

An APRN license renewal application shall include:

(1) documentation of completion of the APRN practice requirement;

(2) a current certification by a national APRN specialty certifying organization;

(3) current practice guidelines; and

(4) a current collaborative provider agreement if required for transition to practice. (Added 2011, No. 66, § 5, eff. June 1, 2011.)

Vermont Board of Nursing
Administrative Rules
Effective: June 23, 2011

Vermont - Transition to Practice Regulation

15.14 Transition to Practice: Collaborative Provider Agreement

- (a) Graduates with fewer than 24 months and 2,400 hours of licensed active advanced nursing practice in an initial role and population focus shall have a formal agreement with a collaborating provider.
- (b) APRNs who obtain a subsequent certification in an additional role and population focus shall have a formal agreement with a collaborating provider for no fewer than 12 months and 1,600 hours.
- (c) APRNs shall have and maintain signed and dated copies of all required collaborative provider agreements as part of the practice guidelines. An APRN required to practice with a collaborative provider agreement may not engage in solo practice, except with regard to a role and population focus in which the APRN has met the requirements of this subsection.
- (d) An APRN group practice must include one or more APRNs who have more than 2 years and 2,400 hours of practice. This group practice requirement does not eliminate the collaborative provider requirement for APRNs with less than 2 years and 2,400 hours practice.
- (e) An APRN who satisfies the requirements to engage in solo practice pursuant to subsections (a) and (b) of this rule shall notify the board that these requirements have been met.

15.15 Audits The Board, in its discretion, may audit an APRN's certification and the practice and quality assurance activities, including outcomes, to verify compliance.

15.16 Collaborating Provider Graduates with fewer than 24 months and 2,400 hours of licensed active advanced nursing practice shall have a formal agreement with a collaborating provider as set forth below.

15.17 Collaborating Providers

(a) A collaborating provider is:

- (1) an APRN or
- (2) a physician licensed to practice medicine under Title 26, Chapter 23, or
- (3) an osteopathic physician licensed to practice under Title 26, Chapter 33.

(b) The collaborating provider's license must be in good standing, and the collaborating provider shall practice in the same role and population focus or specialty as the new graduate APRN's area of certification.

(c) An APRN collaborating provider shall have practiced in the same specialty for a minimum of four years. The Board may, in its discretion, waive the requirement that a collaborating provider be licensed in Vermont upon a showing of necessity by the APRN. Any waiver granted under this section will only apply to providers currently licensed in the United States.

15.18 Collaboration Agreement A collaborating provider agreement shall reflect the agreement between the APRN and the collaborating provider to advise, mentor and consult. The agreement shall be renewed with change of employment, change of collaborating relationship and upon renewal of APRN licensure.

15.19 Collaboration Agreement Contents A collaborating provider agreement shall reflect an understanding that the collaborating provider

(a) agrees to serve as an advisor, mentor and consultant to the APRN;

(b) has reviewed the APRN's practice guidelines;

(c) will participate in quality assurance activities.

15.20 Collaboration Agreement and Board Approval Prior to starting active practice as an APRN, an APRN with fewer than 24 months and 2,400 hours of licensed advanced nursing practice shall enter into a collaborating provider agreement and receive Board approval for the agreement.

15.21 Practice Limitation APRNs practicing with a collaborating provider agreement may not engage in solo practice.

15.22 Completion Reports APRNs will submit evidence of completion of clinical practice with a collaborating provider at the conclusion of the transition to practice period and at the request of the Board.