# NURSE PRACTICE ACT STATUTES & ADMINISTRATIVE REGULATIONS

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KANSAS STATE BOARD OF NURSING
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**KANSAS STATE BOARD OF NURSING**
July 2015

Changes or revisions to the Nurse Practice Act or Licensed Mental Health Technician Act are available on the Kansas State Board of Nursing web site. www.ksbn.org

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**BOARD OF NURSING**
**GENERAL PROVISIONS**

**74-1106. Board of nursing; appointment; terms; vacancies; qualification; duties and powers; executive administrator and other employees; rules and regulations; compensation and expenses.**

(a) Appointment, term of office

(1) The governor shall appoint a board consisting of 11 members of which six shall be registered professional nurses, two shall be licensed practical nurses, and three shall be members of the general public, which shall constitute a board of nursing, with the duties, power and authority set forth in this act.

(2) Upon the expiration of the term of any registered professional nurse, the Kansas state nurses association shall submit to the governor a list of registered professional nurses containing names of not less than three times the number of persons to be appointed, and appointments shall be made after consideration of such list for terms of four years and until a successor is appointed and qualified.

(3) On the effective date of this act, the Kansas federation of licensed practical nurses shall submit to the governor a list of licensed practical nurses containing names of not less than three times the number of persons to be appointed, and appointments shall be made after consideration of such list for a term of four years and until a successor is appointed and qualified.

(4) Each member of the general public shall be appointed for a term of four years and successors shall be appointed for a like term.

(5) Whenever a vacancy occurs on the board of nursing, it shall be filled by appointment for the remainder of the unexpired term in the same manner as the preceding appointment. No person shall serve more than two consecutive terms as a member of the board of nursing and appointment for the remainder of an unexpired term shall constitute a full term of service on such board.

(b) Qualifications of members. Each member of the board shall be a citizen of the United States and a resident of the state of Kansas. Registered professional nurse members shall possess a license to practice as a professional nurse in this state with at least five years' experience in nursing as such and shall be actively engaged in professional nursing in Kansas at the time of appointment and reappointment. The licensed practical nurse members shall be licensed to practice practical nursing in the state with at least five years' experience in practical nursing and shall be actively engaged in practical nursing in Kansas at the time of appointment and reappointment. The governor shall appoint successors so that the registered professional nurse membership of the board shall consist of at least two members who are engaged in nursing service, at least two members who are engaged in nursing education and at least one member who is engaged in practice as an advanced practice registered nurse or a registered nurse anesthetist. The consumer members shall represent the interests of the general public. At least one consumer member shall not have been involved in providing health care. Each member of the board shall take and subscribe the oath prescribed by law for state officers, which oath shall be filed with the secretary of state.

(c) Duties and powers.

(1) The board shall meet annually at Topeka during the month of September and shall elect from its members a president, vice-president and secretary, each of whom shall hold their respective offices for one year. The board shall employ an executive administrator, who shall be a registered professional nurse, who shall not be a member of the board and who shall be in the unclassified service under the Kansas civil service act, and shall employ such other employees, who shall be in the classified service under the Kansas civil service act as necessary to carry on the work of the board. As necessary, the board shall be represented by an attorney appointed by the attorney general as provided by law, whose compensation shall be determined and paid by the board with the approval of the governor. The board may hold such other meetings during the year as may be deemed necessary to transact its business.

(2) The board shall adopt rules and regulations consistent with this act necessary to carry into effect the provisions thereof, and such rules and regulations may be published and copies thereof furnished to any person upon application.

(3) The board shall prescribe curricula and standards for professional and practical nursing programs and mental health technician programs, and provide for surveys of such schools and courses at such times as it may deem necessary. It shall accredit such schools and approve courses as meet the requirements of the appropriate act and rules and regulations of the board.

(4) The board shall examine, license and renew licenses of duly qualified applicants and conduct hearings upon charges for limitation, suspension or revocation of a license or approval of professional and practical nursing and mental health technician programs and may limit, deny, suspend or revoke for proper legal cause, licenses or approval of professional and practical nursing and mental health technician programs, as hereinafter provided. Examination for applicants for registration shall be given at least twice each year and as many other times as deemed necessary by the board. The board shall

promote improved means of nursing education and standards of nursing care through institutes, conferences and other means.

(5) The board shall have a seal of which the executive administrator shall be the custodian. The president and the secretary shall have the power and authority to administer oaths in transacting business of the board, and the secretary shall keep a record of all proceedings of the board and a register of professional and practical nurses and mental health technicians licensed and showing the certificates of registration or licenses granted or revoked, which register shall be open at all times to public inspection.

(6) The board may enter into contracts as may be necessary to carry out its duties.

(7) The board is hereby authorized to apply for and to accept grants and may accept donations, bequests or gifts. The board shall remit all moneys received by it under this paragraph (7) to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the grants and gifts fund which is hereby created. All expenditures from such fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or a person designated by the president.

(8) A majority of the board of nursing including two professional nurse members shall constitute a quorum for the transaction of business.

(d) Subpoenas. In all investigations and proceedings, the board shall have the power to issue subpoenas and compel the attendance of witnesses and the production of all relevant and necessary papers, books, records, documentary evidence and materials. Any person failing or refusing to appear or testify regarding any matter about which such person may be lawfully questioned or to produce any books, papers, records, documentary evidence or relevant materials in the matter, after having been required by order of the board or by a subpoena of the board to do so, upon application by the board to any district judge in the state, may be ordered by such judge to comply therewith. Upon failure to comply with the order of the district judge, the court may compel obedience by attachment for contempt as in the case of disobedience of a similar order or subpoena issued by the court. A subpoena may be served upon any person named therein anywhere within the state with the same fees and mileage by an officer authorized to serve subpoenas in civil actions in the same procedure as is prescribed by the code of civil procedure for subpoenas issued out of the district courts of this state.

(e) Compensation and expenses. Members of the board of nursing attending meetings of such board, or attending a subcommittee meeting thereof authorized by such board, shall be paid compensation, subsistence allowances, mileage and other expenses as provided in K.S.A. 75-3223, and amendments thereto. No member of the board of nursing shall be paid an amount as provided in K.S.A. 75-3223, and amendments thereto, if such member receives an amount from another governmental or private entity for the purpose for which such amount is payable under K.S.A. 75-3223, and amendments thereto.

**History:** (L. 1949, ch. 331, § 2; L. 1956, ch. 52, § 15; L. 1957, ch. 431, § 11; L. 1963, ch. 314, § 10; L. 1965, ch. 506, § 38; L. 1967, ch. 434, § 26; L. 1973, ch. 309, § 25; L. 1973, ch. 310, § 1; L. 1974, ch. 348, § 49; L. 1975, ch. 316, § 12; L. 1978, ch. 308, § 54; L. 1980, ch. 235, § 1; L. 1986, ch. 233, § 5; L. 1987, ch. 234, § 2; L. 1988, ch. 331, § 7; L. 1992, ch. 116, § 34; L. 1993, ch. 194, § 7; L. 1997, ch. 146, § 5; L. 2000, ch. 113, § 5; L. 2001, ch. 5, § 301; L. 2001, ch. 161, § 12; L. 2007, ch. 115, § 1; L. 2011, ch. 114, § 70; Jan. 1, 2012.)

**74-1108. Board of Nursing fee fund.** The executive administrator of the board of nursing shall remit all moneys received by the board from fees, charges or penalties, other than moneys received under K.S.A. 74-1109, and amendments thereto, to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury. Ten percent of each such deposit shall be credited to the state general fund and the balance shall be credited to the board of nursing fee fund. All expenditures from such fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or by a person or persons designated by the president.

**History:** (L. 1973, ch. 309, § 26; L. 1983, ch. 206, § 13; L. 1986, ch. 286, § 1; L. 2001, ch. 5, § 302; L. 2011, ch. 53, § 43; July 1.)

**74-1109. Fees for institutes, conferences and other educational programs offered by board; education conference fund.** The board of nursing is hereby authorized to fix, charge and collect fees for institutes, conferences and other educational programs offered by the board under subsection (c)(4) of K.S.A. 74-1106 and amendments thereto. The fees shall be fixed in order to recover the cost to the board for providing such programs. The executive administrator of the board shall remit all moneys received by the board from fees collected under this section to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the education conference fund which is hereby created. All expenditures from such fund shall be for the operating expenditures of

providing such programs and shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or by a person designated by the president.
**History:** (L. 1986, ch. 286, § 2; L. 2001, ch. 5, § 303; July 1.)

**74-1110. Civil fine.** The board of nursing, in addition to any other penalty prescribed by law, may assess a civil fine, after proper notice and an opportunity to be heard, against any person granted a license, certificate of qualification or authorization to practice by the board of nursing for a violation of a law or rule and regulation applicable to the practice for which such person has been granted a license, certificate of qualification or authorization by the board in an amount not to exceed $1,000 for the first violation, $2,000 for the second violation and $3,000 for the third violation and for each subsequent violation. All fines assessed and collected under this section shall be remitted to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the state general fund.
**History:** (L. 1992, ch. 151, § 6; L. 2001, ch. 5, § 304; July 1.)

**74-1111. Assistant attorney general to represent board in proceedings or litigation arising from discharge of board duties; appointment; salary.**

(a) The attorney general shall appoint, with the approval of the board of nursing, an assistant attorney general who shall carry out the duties under subsection (b). The attorney shall receive an annual salary fixed by the attorney general with the approval of the board of nursing. The salary shall be paid from moneys appropriated to the board of nursing in the board of nursing fee fund.
(b) The assistant attorney general appointed under subsection (a) shall represent the board of nursing in any proceedings or litigation that may arise in the discharge of the duties of the board of nursing and shall perform such other duties of a legal nature as may be directed by the board of nursing.

**History:** (L. 1993, ch. 194, § 19; July 1.)

**74-1112. Applicant for licensure as a professional nurse, practical nurse or mental health technician to be fingerprinted and submit to a state and national criminal history record check.**

(a) The board of nursing may require an original applicant for licensure as a professional nurse, practical nurse or mental health technician to be fingerprinted and submit to a state and national criminal history record check. The fingerprints shall be used to identify the applicant and to determine whether the applicant has a record of criminal history in this state or other jurisdictions. The board of nursing is authorized to submit the fingerprints to the Kansas bureau of investigation and the federal bureau of investigation for a state and national criminal history record check. The board of nursing may use the information obtained from fingerprinting and the applicant's criminal history for purposes of verifying the identification of any applicant and in the official determination of character and fitness of the applicant for any licensure to practice professional or practical nursing or mental health technology in this state.
(b) Local and state law enforcement officers and agencies shall assist the board of nursing in taking and processing of fingerprints of applicants to practice professional or practical nursing or mental health technology in this state and shall release all records of adult convictions and non convictions and adult convictions or adjudications of another state or country to the board of nursing.
(c) The board shall fix a fee for fingerprinting of applicants or licensees, or both, as may be required by the board in an amount necessary to reimburse the board for the cost of the fingerprinting. Fees collected under this subsection shall be deposited in the criminal background and fingerprinting fund.
(d) There is hereby created in the state treasury the criminal background and fingerprinting fund. All moneys credited to the fund shall be used to pay the Kansas bureau of investigation for the processing of fingerprints and criminal history background checks for the board of nursing. The fund shall be administered by the board of nursing. All expenditures from the fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or a person designated by the president.

**History:** (L. 2008, ch. 154, § 5; July 1.)

**65-1113. Definitions.** When used in this act and the act of which this section is amendatory:

(a) "Board" means the board of nursing.

(b) "Diagnosis" in the context of nursing practice means that identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen and shall be construed as distinct from a medical diagnosis.

(c) "Treatment" means the selection and performance of those therapeutic measures essential to effective execution and management of the nursing regimen, and any prescribed medical regimen.

(d) Practice of Nursing.

(1) The practice of professional nursing as performed by a registered professional nurse for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, means the process in which substantial specialized knowledge derived from the biological, physical, and behavioral sciences is applied to: the care, diagnosis, treatment, counsel and health teaching of persons who are experiencing changes in the normal health processes or who require assistance in the maintenance of health or the prevention or management of illness, injury or infirmity; administration, supervision or teaching of the process as defined in this section; and the execution of the medical regimen as prescribed by a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

(2) The practice of nursing as a licensed practical nurse means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and any amendments thereto, of tasks and responsibilities defined in part (1) of this subsection (d) which tasks and responsibilities are based on acceptable educational preparation within the framework of supportive and restorative care under the direction of a registered professional nurse, a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

(e) A "professional nurse" means a person who is licensed to practice professional nursing as defined in part (1) of subsection (d) of this section.

(f) A "practical nurse" means a person who is licensed to practice practical nursing as defined in part (2) of subsection (d) of this section.

(g) "Advanced practice registered nurse" or "APRN" means a professional nurse who holds a license from the board to function as a professional nurse in an advanced role, and this advanced role shall be defined by rules and regulations adopted by the board in accordance with K.S.A. 65-1130, and amendments thereto.

**History:** (L. 1949, ch. 331, § 1; L. 1963, ch. 314, § 1; L. 1975 ch. 316, § 1; 1978, ch. 240, § 1; L. 1980, ch. 186, § 1, L. 1983, ch. 206, § 6; L. 2011, ch. 114, § 39; Jan. 1, 2012.)

**65-1114. Unlawful acts.**

(a) It shall be unlawful for any person:

(1) To practice or to offer to practice professional nursing in this state;

(2) to use any title, abbreviation, letters, figures, sign, card or device to indicate that any person is a registered professional nurse;

(3) to practice or offer to practice practical nursing in this state; or

(4) to use any title, abbreviation, letters, figures, sign, card or device to indicate that any person is a licensed practical nurse, unless such person has been duly licensed under the provisions of this act.

(b) It shall be unlawful for any person:

(1) To practice or offer to practice as an advanced practice registered nurse in this state; or

(2) to use any title, abbreviation, letters, figures, sign, card or device to indicate that any person is an advance practice registered nurse, unless such person has been duly issued a license as an advanced practice registered nurse under the Kansas nurse practice act.

**History:** (L. 1949, ch.331, § 3, L. 1975, ch. 316, § 2; L. 1978, ch. 240; § 3; L. 1983, ch. 206, § 7; L. 2011, ch. 114, § 40; Jan. 1, 2012.)

**65-1115. Licensure of professional nurses; qualifications of applicants; examination; refresher course; renewal license; title and abbreviation; temporary permit; exempt license.**

(a) Qualifications of applicants. An applicant for a license to practice as a registered professional nurse shall:

(1) have graduated from an approved school of professional nursing in the United States or its territories or from a school of professional nursing in a foreign country which is approved by the board as defined in rules and regulations;

(2) have obtained other qualifications not in conflict with this act as the board may prescribe by rule and regulation; and

(3) file with the board written application for a license.

(b) Applicant deficient in qualifications. If the board finds in evaluating any applicant that such applicant is deficient in qualification or in the quality of such applicant's educational experience, the board may require such applicant to fulfill such remedial or other requirements as the board may prescribe.

(c) License.

(1) The board shall issue a license to an applicant to practice as a registered professional nurse who has:

(A) Met the qualifications set forth in subsections (a) and (b);

(B) passed a written examination as prescribed by the board; and

(C) no disqualifying factors under K.S.A. 65-1120 and amendments thereto.

(2) The board may issue a license to practice nursing as a registered professional nurse to an applicant who has been duly licensed as a registered professional nurse by examination under the laws of another state or territory if, in the opinion of the board, the applicant meets the qualifications required of a registered professional in this state. Verification of the applicant's licensure status shall be required from the original state of licensure.

(3) Refresher course. Notwithstanding the provisions of subsections (a) and (b), an applicant for a license to practice as a registered professional nurse who has not been licensed to practice professional nursing for five years preceding application shall be required to successfully complete a refresher course as defined by the board.

(4) Renewal license. A licensed professional nurse licensed under this act shall be eligible for renewal licenses upon compliance with K.S.A. 65-1117 and amendments thereto.

(5) Licensure examination within 24 months of graduation.

(A) Persons who do not take the licensure examination within 24 months after graduation shall petition the board for permission prior to taking the licensure examination. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination.

(B) Persons who are unsuccessful in passing the licensure examination within 24 months after graduation shall petition the board for permission prior to subsequent attempts. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination a subsequent time. The study plan shall contain subjects related to deficiencies identified on the failed examination profiles.

(6) An application for initial licensure or endorsement will be held awaiting completion of meeting qualifications for a time period specified in rules and regulations.

(d) Title and abbreviation. Any person who holds a license to practice as a registered professional nurse in this state shall have the right to use the title, ''registered nurse,'' and the abbreviation, ''R.N.'' No other person shall assume the title or use the abbreviation or any other words, letters, signs or figures to indicate that the person is a registered professional nurse.

(e) Temporary permit. The board may issue a temporary permit to practice nursing as a registered professional nurse for a period not to exceed 120 days. A temporary permit for 120 days may be issued to an applicant for licensure as a registered professional nurse who is a graduate of a professional school of nursing in a foreign country after verification of licensure in that foreign country and approval of educational credentials.

(f) Exempt license. The board may issue an exempt license to any licensee as defined in rules and regulations who makes written application for such license on a form provided by the board, who remits a fee as established pursuant to K.S.A. 65-1118 and amendments thereto and who is not regularly engaged in the practice of professional nursing in Kansas but volunteers professional nursing service or is a charitable health care provider as defined by K.S.A. 75-6102 and amendments thereto. Each exempt licensee shall be subject to all provisions of the nurse practice act, except as otherwise provided in this subsection (f). Each exempt license may be renewed biennially subject to the provisions of this section. The holder of the exempt license shall not be required to submit evidence of satisfactory completion of a program of continuing nursing education for renewal. To convert an exempt license to an active license, the exempt licensee shall meet all the requirements of subsection (c) or K.S.A. 65-1117 and amendments thereto. The board shall have authority to write rules and regulations to carry out the provisions of this section.

**History:** (L. 1949, ch. 331, § 4; L. 1963, ch 314, § 2; L. 1968, ch. 231, §1; L 1972, ch. 231, § 9; L. 1975, ch. 316, § 3; L. 1982, ch. 261, § 1; L. 1983, ch. 207, § 1; L. 1986, ch. 233, § 1; L. 1990, ch. 221, § 1; L. 1992, ch. 151, § 1; L. 1993, ch. 194, § 9; L. 1994, ch. 149, § 1; L. 1997, ch. 158, § 1; L. 1999, ch. 84, § 1; L. 2001, ch. 161, § 1; L. 2009, ch. 81, § 1; July 1.)

**65-1116. Licensure of practical nurses; qualifications of applicants; examination; refresher course; renewal license; title and abbreviation; temporary permit; exempt license.**

(a) Qualification. An applicant for a license to practice as a licensed practical nurse shall:

(1) Have graduated from an approved school of practical nursing or professional nursing in the United States or its territories or from a school of practical nursing or professional nursing in a foreign country which is approved by the board as defined in rules and regulations;

(2) have obtained other qualifications not in conflict with this act as the board may prescribe by rule and regulation; and
(3) file with the board a written application for a license.

(b) If the board finds in evaluating any applicant that such applicant is deficient in qualification or in the quality of such applicant's educational experience, the board may require such applicant to fulfill such remedial or other requirements as the board may prescribe.

(c) License.
(1) The board shall issue a license to an applicant to practice as a practical nurse who has:
(A) Met the qualifications set forth in subsections (a) and (b);
(B) passed a written examination as prescribed by the board; and
(C) no disqualifying factors under K.S.A. 65-1120 and amendments thereto.
(2) The board may issue a license to practice nursing as a practical nurse to an applicant who has been duly licensed as a practical nurse by examination under the laws of another state or territory if, in the opinion of the board, the applicant meets the qualifications required of a practical nurse in this state. Verification of the applicant's licensure status shall be required from the original state of licensure.
(3) The board may authorize the educational requirement under subsection (a)(1) to be waived for an applicant who has attained a passing score on the national council licensure examination for practical nurses and provided evidence to the board of such applicant's practical nursing experience with the military. To qualify for such a waiver, the applicant must have been a member of the army, navy, marine corps, air force, air or army national guard, coast guard or any branch of the military reserves of the United States, and separated from such military service with an honorable discharge. If such applicant was separated from such military service with a general discharge under honorable conditions and meets the requirements of this paragraph, the board may authorize the educational requirements under subsection (a)(1) be waived.
(4) Refresher course. Notwithstanding the provisions of subsections (a) and (b), an applicant for a license to practice as a licensed practical nurse who has not been licensed to practice practical nursing for five years preceding application shall be required to successfully complete a refresher course as defined by the board.
(5) Renewal license. A licensed practical nurse licensed under this act shall be eligible for renewal licenses upon compliance with K.S.A. 65-1117 and amendments thereto.
(6) Licensure examination within 24 months of graduation.
(A) Persons who do not take the licensure examination within 24 months after graduation shall petition the board for permission prior to taking the licensure examination. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination.
(B) Persons who are unsuccessful in passing the licensure examination within 24 months after graduation shall petition the board for permission prior to subsequent attempts. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination a subsequent time. The study plan shall contain subjects related to deficiencies identified on the failed examination profiles.
(7) An application for initial licensure or endorsement will be held awaiting completion of meeting qualifications for a time period specified in rules and regulations.

(d) Title and abbreviation. Any person who holds a license to practice as a licensed practical nurse in this state shall have the right to use the title, ‘‘licensed practical nurse,’’ and the abbreviation, ‘‘L.P.N.’’ No other person shall assume the title or use the abbreviation or any other words, letters, signs or figures to indicate that the person is a licensed practical nurse.

(e) Temporary permit. The board may issue a temporary permit to practice nursing as a licensed practical nurse for a period not to exceed 120 days. A temporary permit for 120 days may be issued to an applicant for licensure as a licensed practical nurse who is a graduate of a practical school of nursing in a foreign country after verification of licensure in that foreign country and approval of educational credentials.

(f) Exempt license. The board may issue an exempt license to any licensee as defined in rules and regulations who makes written application for such license on a form provided by the board, who remits a fee as established pursuant to K.S.A. 65-1118 and amendments thereto and who is not regularly engaged in the practice of practical nursing in Kansas but volunteers practical nursing service or is a charitable health care provider as defined by K.S.A. 75-6102 and amendments thereto. Each exempt licensee shall be subject to all provisions of the nurse practice act, except as otherwise provided in this subsection (f). Each exempt license may be renewed biennially subject to the provisions of this section. The holder of the exempt license shall not be required to submit evidence of satisfactory completion of a program of continuing nursing education for renewal. To convert an exempt license to an active license, the exempt licensee shall meet all the requirements of subsection (c) or K.S.A. 65-1117 and amendments thereto. The board shall have authority to write rules and regulations to carry out the provisions of this section.

**History:** **(**L. 1949, ch. 331, § 5; L. 1963, ch. 314, § 3; L. 1968, ch. 231, § 2; L. 1975, ch. 316, § 4; L. 1982, ch. 261, § 2; L. 1983, ch. 207, § 2; L. 1986, ch. 233, § 2; L. 1990, ch. 221, § 2; L. 1992, ch. 151, § 2; L. 1993, ch. 194, § 10; L. 1994, ch. 149, § 2; L. 1997, ch. 158, § 2; L. 1999, ch. 84, § 2; L. 2001, ch. 161, § 2; L. 2009, ch. 81, § 2; L. 2013, ch. 95, § 3; July 1.)

**65-1117. Renewal of license; inactive license, fee; continuing education requirements; rules and regulations; reinstatement of lapsed license; notification of change in name or address or criminal conviction.**

(a) All licenses issued under the provisions of this act, whether initial or renewal, shall expire every two years. The expiration date shall be established by the rules and regulations of the board. The board shall send a notice for renewal of license to every registered professional nurse and licensed practical nurse at least 60 days prior to the expiration date of such person's license. Every person so licensed who desires to renew such license shall file with the board, on or before the date of expiration of such license, a renewal application together with the prescribed biennial renewal fee. Every licensee who is no longer engaged in the active practice of nursing may so state by affidavit and submit such affidavit with the renewal application. An inactive license may be requested along with payment of a fee which shall be fixed by rules and regulations of the board. Except for the first renewal for a license that expires within 30 months following licensure examination or for renewal of a license that expires within the first nine months following licensure by reinstatement or endorsement, every licensee with an active nursing license shall submit with the renewal application evidence of satisfactory completion of a program of continuing nursing education required by the board. The board by duly adopted rules and regulations shall establish the requirements for such program of continuing nursing education. Continuing nursing education means learning experiences intended to build upon the educational and experiential bases of the registered professional and licensed practical nurse for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public. Upon receipt of such application, payment of fee, upon receipt of the evidence of satisfactory completion of the required program of continuing nursing education and upon being satisfied that the applicant meets the requirements set forth in K.S.A. 65-1115 or 65-1116 and amendments thereto in effect at the time of initial licensure of the applicant, the board shall verify the accuracy of the application and grant a renewal license.

(b) Any person who fails to secure a renewal license within the time specified herein may secure a reinstatement of such lapsed license by making verified application therefor on a form provided by the board, by rules and regulations, and upon furnishing proof that the applicant is competent and qualified to act as a registered professional nurse or licensed practical nurse and by satisfying all of the requirements for reinstatement including payment to the board of a reinstatement fee as established by the board. A reinstatement application for licensure will be held awaiting completion of such documentation as may be required, but such application shall not be held for a period of time in excess of that specified in rules and regulations.

(c) (1) Each licensee shall notify the board in writing of

(A) a change in name or address within 30 days of the change or

(B) a conviction of any felony or misdemeanor, that is specified in rules and regulations adopted by the board, within 30 days from the date the conviction becomes final.

(2) As used in this subsection, ''conviction'' means a final conviction without regard to whether the sentence was suspended or probation granted after such conviction. Also, for the purposes of this subsection, a forfeiture of bail, bond or collateral deposited to secure a defendant's appearance in court, which forfeiture has not been vacated, shall be equivalent to a conviction. Failure to so notify the board shall not constitute a defense in an action relating to failure to renew a license, nor shall it constitute a defense in any other proceeding.

**History:** **(**History: L. 1949, ch. 331, § 6; L. 1975, ch. 316, § 5; L. 1976, ch. 274, § 1; L. 1978, ch. 240, § 4; L. 1980, ch. 187, § 1; L. 1983, ch. 206, § 8; L. 1988, ch. 242, § 1; L. 1993, ch. 194, § 11; L. 1995, ch. 97, § 1; L. 1997, ch. 146, § 1; L. 2007, ch. 99, § 1; L. 2011, ch. 114, § 79; June 9.)

**65-1118. Fees.**

(a) The Board shall collect in advance fees provided for in this act as fixed by the board, but not exceeding:

| | |
|---|---|
| Application for license – professional nurse | $75.00 |
| Application for license – practical nurse | 50.00 |
| Application for biennial renewal of license – professional nurse and practical nurse | 60.00 |
| Application for reinstatement of license | 70.00 |
| Application for reinstatement of licenses with temporary permit | 100.00 |
| Certified copy of license | 25.00 |
| Duplicate of license | 25.00 |
| Inactive license | 20.00 |
| Application for license – advanced practice registered nurse | 50.00 |

Application for license with temporary permit – advanced practice registered nurse .....100.00
Application for renewal of license – advanced practice registered nurse .....60.00
Application for reinstatement of license – advanced practice registered nurse .....75.00
Application for authorization – registered nurse anesthetist .....75.00
Application for authorization with temporary authorization - registered nurse anesthetist.....110.00
Application for biennial renewal of authorization – registered nurse anesthetist.....60.00
Application for reinstatement of authorization – registered nurse anesthetist.....75.00
Application for reinstatement of authorization with temporary authorization –
registered nurse anesthetist.....100.00
Verification of license to another state .....30.00
Application for exempt license – professional and practical nurse .....50.00
Application for biennial renewal of exempt license – professional and practical nurse.....50.00
Application for exempt license – advanced practice registered nurse .....50.00
Application for biennial renewal of exempt license – advanced practice registered nurse .....50.00

(b) The board may require that fees paid for any examination under the Kansas nurse practice act be paid directly to the examination service by the person taking the examination.

(c) The board shall accept for payment of fees under this section personal checks, certified checks, cashier's checks, money orders or credit cards. The board may designate other methods of payment, but shall not refuse payment in the form of a personal check. The board may impose additional fees and recover any costs incurred by reason of payments made by personal checks with insufficient funds and payments made by credit cards.

**History:** (L. 1949, ch. 331, § 7; L. 1963, ch. 314, § 4; L. 1973, ch. 249, § 1; L. 1975, ch. 316, § 6; L. 1978, ch. 347, § 11; L. 1980, ch. 188, § 1; L. 1986, ch. 233, § 3; L. 1988, ch. 242, § 2; L. 1992, ch. 135, § 1; L. 1993, ch. 194, § 12; L. 1997, ch. 158, § 3; L. 1999, ch. 84, § 5; L. 2011, ch. 114, § 41; Jan.1, 2012.)

**65-1118a. Fees; consultants' travel expenses.**

(a) The board shall collect fees provided for in this act as fixed by the board, but not exceeding:
Application for approval — schools and programs of nursing.....$1,000.00
Annual fee of approval — schools and programs of nursing .....400.00
Application for approval of continuing education providers.....200.00
Annual fee for continuing nursing education providers .....75.00
Approval of single continuing nursing education offerings .....100.00
Consultation by request, not to exceed per day on site.....400.00

(b) In addition to the above prescribed fees, consultants' travel expenses shall be charged to the person, firm, corporation or institution requesting consultation services to be provided by the board.

**History:** (L. 1981, ch. 244, § 1; L. 1990, ch. 221, § 3; L. 1992, ch. 135, § 2; L. 1993, ch. 194, § 13; L. 2001, ch. 161, § 3; July 1.)

**65-1119. Schools of nursing; approval; approval of providers of continuing education offerings; application fee; criteria for evaluating out-of-state schools, nationally accredited schools of nursing**.

(a) Application for approval. An approved school of nursing is one which has been approved as such by the board as meeting the standards of this act, and the rules and regulations of the board. An institution desiring to conduct an approved school of professional or practical nursing shall apply to the board for approval and submit satisfactory proof that it is prepared to and will maintain the standards and basic professional nursing curriculum or the required curriculum for practical nursing, as the case may be, as prescribed by this act and by the rules and regulations of the board. Applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board. The approval of a school of nursing shall not exceed 10 years after the granting of such approval by the board. An institution desiring to continue to conduct an approved school of professional or practical nursing shall apply to the board for the renewal of approval and submit satisfactory proof that it will maintain the standards and basic professional nursing curriculum or the required curriculum for practical nursing, as the case may be, as prescribed by this act and by the rules and regulations of the board. Applications for renewal of approval shall be made in writing on forms supplied by the board. Each school of nursing shall submit annually to the board an annual fee fixed by the board by rules and regulations to maintain the approval status.

(b) Schools for professional nurses. To qualify as an approved school for professional nurses, the school must be conducted in the state of Kansas, and shall apply to the board and submit evidence that:
(1) It is prepared to carry out the professional curriculum as prescribed in the rules and regulations of the board; and
(2) it is prepared to meet such other standards as shall be established by this law and the rules and regulations of the board.

(c) Schools for practical nurses. To qualify as an approved school for practical nurses, the school must be conducted in the state of Kansas, and shall apply to the board and submit evidence that:
   (1) It is prepared to carry out the curriculum as prescribed in the rules and regulations of the board; and
   (2) it is prepared to meet such other standards as shall be established by this law and the rules and regulations of the board.

(d) Survey. The board shall prepare and maintain a list of approved schools for both professional and practical nurses whose graduates, if they have the other necessary qualifications provided in this act, shall be eligible to apply for a license as a registered professional nurse or as a licensed practical nurse. A survey of the institution or institutions and of the schools applying for approval shall be made by an authorized employee of the board or members of the board, who shall submit a written report of the survey to the board. If, in the opinion of the board, the requirements as prescribed by the board in its rules and regulations for an approved school for professional nurses or for practical nurses are met, it shall so approve the school as either a school for professional nurses or practical nurses, as the case may be. The board shall resurvey approved schools on a periodic basis as determined by rules and regulations. If the board determines that any approved school of nursing is not maintaining the standards required by this act and by rules and regulations prescribed by the board, notice thereof in writing, specifying the failures of such school, shall be given immediately to the school. A school which fails to correct such conditions to the satisfaction of the board within a reasonable time shall be removed from the list of approved schools of nursing until such time as the school shall comply with the standards. All approved schools shall maintain accurate and current records showing in full the theoretical and practical courses given to each student.

(e) Providers of continuing nursing education.
   (1) To qualify as an approved provider of continuing nursing education offerings, persons, organizations or institutions proposing to provide such continuing nursing education offerings shall apply to the board for approval and submit evidence that the applicant is prepared to meet the standards and requirements established by the rules and regulations of the board for such continuing nursing education offerings. Initial applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board.
   (2) A long-term provider means a person, organization or institution that is responsible for the development, administration and evaluation of continuing nursing education programs and offerings. Qualification as a long-term approved provider of continuing nursing education offerings shall expire five years after the granting of such approval by the board. An approved long-term provider of continuing nursing education offerings shall submit annually to the board the annual fee established by rules and regulations, along with an annual report for the previous fiscal year. Applications for renewal as an approved long-term provider of continuing nursing education offerings shall be made in writing on forms supplied by the board.
   (3) Qualification as an approved provider of a single continuing nursing education offering, which may be offered once or multiple times, shall expire two years after the granting of such approval by the board. Approved single continuing nursing education providers shall not be subject to an annual fee or annual report.
   (4) In accordance with rules and regulations adopted by the board, the board may approve individual educational offerings for continuing nursing education which shall not be subject to approval under other subsections of this section.
   (5) The board shall accept offerings as approved continuing nursing education presented by: Colleges that are approved by a state or the national department of education and providers approved by other state boards of nursing, the national league for nursing, the national federation of licensed practical nurses, the American nurses credentialing center or other such national organizations as listed in rules and regulations adopted by the board.
   (6) An individual designated by a provider of continuing nursing education offerings as an individual responsible for CNE who has held this position for the provider at least five years immediately prior to January 1, 1997, shall not be required to have a baccalaureate or higher academic degree in order to be designated by such provider as the individual responsible for CNE.

(f) Criteria for evaluating out-of-state schools. For the purpose of determining whether an applicant for licensure who is a graduate of a school of professional or practical nursing located outside this state meets the requirements of item (2) of subsection (a) of K.S.A. 65-1115 and amendments thereto or the requirements of item (2) of subsection (a) of K.S.A. 65-1116 and amendments thereto, as appropriate, the board by rules and regulations shall establish criteria for determining whether a particular school of professional nursing located outside this state maintains standards which are at least equal to schools of professional nursing which are approved by the board and whether a particular school of practical nursing located outside this state maintains standards which are at least equal to schools of practical nursing which are approved by the board. The board may send a questionnaire developed by the board to any school of professional or practical nursing located outside this state for which the board does not have sufficient

information to determine whether the school meets the standards established under this subsection (f). The questionnaire providing the necessary information shall be completed and returned to the board in order for the school to be considered for approval. The board may contract with investigative agencies, commission or consultants to assist the board in obtaining information about schools. In entering such contracts the authority to approve schools shall remain solely with the board.

(g) The board may accept nationally accredited schools of nursing as defined in rule and regulation.
   (1) Schools of nursing which have received accreditation from a board recognized national nursing accreditation agency shall file evidence of initial accreditation with the board and shall file all reports from the accrediting agency and any notice of any change in school accreditation status. The board may grant approval based upon evidence of such accreditation.
   (2) Schools of nursing holding approval based upon national accreditation are also responsible for complying with all other requirements as determined by rules and regulations of the board.
   (3) The board may grant approval to a school of nursing with national accreditation for a continuing period not to exceed 10 years.

**History:** (L. 1949, ch. 331, §8; L. 1963, ch. 314, §5; L. 1973, ch. 249, §2; L. 1978, ch. 240, § 5; L. 1980, ch. 188, § 2; L. 1980, ch. 186, § 2; L. 1981, ch. 244, § 2; L. 1982, ch. 261, § 3; L. 1983, ch. 207, § 3; L. 1983, ch. 206, §9; L. 1983, ch. 206, § 14; L. 1988, ch. 243, § 2; L. 1990, ch. 221, § 4, L. 1997, ch. 146, § 2; L. 2001, ch. 161, § 4; July 1.)

**65-1120. Grounds for disciplinary actions; proceedings; witnesses; costs; professional incompetency defined; criminal justice record information.**

(a) Grounds for disciplinary actions. The board may deny, revoke, limit or suspend any license or authorization to practice nursing as a registered professional nurse, as a licensed practical nurse, as an advanced practice registered nurse or as a registered nurse anesthetist that is issued by the board or applied for under this act or may publicly or privately censure a licensee or holder of a temporary permit or authorization, if the applicant, licensee or holder of a temporary permit or authorization is found after hearing:
   (1) To be guilty of fraud or deceit in practicing nursing or in procuring or attempting to procure a license to practice nursing;
   (2) to have been guilty of a felony or to have been guilty of a misdemeanor involving an illegal drug offense unless the applicant or licensee establishes sufficient rehabilitation to warrant the public trust, except that notwithstanding K.S.A. 74-120, and amendments thereto, no license or authorization to practice nursing as a licensed professional nurse, as a licensed practical nurse, as an advanced practice registered nurse or registered nurse anesthetist shall be granted to a person with a felony conviction for a crime against persons as specified in article 34 of chapter 21 of the Kansas Statutes Annotated, prior to their repeal, or article 54 of chapter 21 of the Kansas Statutes annotated, or K.S.A. 2012 Supp. 21-6104, 21-6325, 21-6326 or 21-6418, and amendments thereto;
   (3) to have committed an act of professional incompetency as defined in subsection (e);
   (4) to be unable to practice with skill and safety due to current abuse of drugs or alcohol;
   (5) to be a person who has been adjudged in need of a guardian or conservator, or both, under the act for obtaining a guardian or conservator, or both, and who has not been restored to capacity under that act;
   (6) to be guilty of unprofessional conduct as defined by rules and regulations of the board;
   (7) to have willfully or repeatedly violated the provisions of the Kansas nurse practice act or any rules and regulations adopted pursuant to that act, including K.S.A. 65-1114 and 65-1122 and amendments thereto;
   (8) to have a license to practice nursing as a registered nurse or as a practical nurse denied, revoked, limited or suspended, or to be publicly or privately censured, by a licensing authority of another state, agency of the United States government, territory of the United States or country or to have other disciplinary action taken against the applicant or licensee by a licensing authority of another state, agency of the United States government, territory of the United States or country. A certified copy of the record or order of public or private censure, denial, suspension, limitation, revocation or other disciplinary action of the licensing authority of another state, agency of the United States government, territory of the United States or country shall constitute prima facie evidence of such a fact for purposes of this paragraph (8); or
   (9) to have assisted suicide in violation of K.S.A. 21-3406, prior to its repeal, or K.S.A. 2012 Supp. 21-5407, and amendments thereto, as established by any of the following:
      (A) A copy of the record of criminal conviction or plea of guilty for a felony in violation of K.S.A. 21-3406, prior to its repeal or K.S.A. 2012 Supp. 21-5407, and amendments thereto.
      (B) A copy of the record of a judgment of contempt of court for violating an injunction issued under K.S.A. 2012 Supp. 60-4404, and amendments thereto.
      (C) A copy of the record of a judgment assessing damages under K.S.A. 2012 Supp. 60-4405, and amendments thereto.

(b) Proceedings. Upon filing of a sworn complaint with the board charging a person with having been guilty of any of the unlawful practices specified in subsection (a), two or more members of the board shall investigate the charges, or the board may designate and authorize an employee or employees of the board to conduct such investigation. After investigation, the board may institute charges. If an investigation, in the opinion of the board, reveals reasonable grounds for believing the applicant or licensee is guilty of the charges, the board shall fix a time and place for proceedings, which shall be conducted in accordance with the provisions of the Kansas administrative procedure act.

(c) Witnesses. No person shall be excused from testifying in any proceedings before the board under this act or in any civil proceedings under this act before a court of competent jurisdiction on the ground that such testimony may incriminate the person testifying, but such testimony shall not be used against the person for the prosecution of any crime under the laws of this state except the crime of perjury as defined in K.S.A. 2012 Supp. 21-5903, and amendments thereto.

(d) Costs. If final agency action of the board in a proceeding under this section is adverse to the applicant or licensee, the costs of the board's proceedings shall be charged to the applicant or licensee as in ordinary civil actions in the district court, but if the board is the unsuccessful party, the costs shall be paid by the board. Witness fees and costs may be taxed by the board according to the statutes relating to procedure in the district court. All costs accrued by the board, when it is the successful party, and which the attorney general certifies cannot be collected from the applicant or licensee shall be paid from the board of nursing fee fund. All moneys collected following board proceedings shall be credited in full to the board of nursing fee fund. All moneys collected following board proceedings shall be credited in full to the board of nursing fee fund.

(e) Professional incompetency defined. As used in this section, "professional incompetency" means:

(1) One or more instances involving failure to adhere to the applicable standard of care to a degree which constitutes gross negligence, as determined by the board;

(2) repeated instances involving failure to adhere to the applicable standard of care to a degree which constitutes ordinary negligence, as determined by the board; or

(3) a pattern of practice or other behavior which demonstrates a manifest incapacity or incompetence to practice nursing.

(f) Criminal justice information. The board upon request shall receive from the Kansas bureau of investigation such criminal history record information relating to arrests and criminal convictions as necessary for the purpose of determining initial and continuing qualifications of licensees of and applicants for licensure by the board.

**History:** (L. 1949, ch. 331, § 9; L. 1963, ch. 314, § 6; L. 1972, ch. 231, § 10; L. 1975, ch. 316, § 7; L. 1978, ch. 240, § 6; L. 1981, ch. 245, § 1; L. 1983, ch. 206, § 10; L. 1985, ch. 88, § 6; L. 1986 ch, 233, § 4; L. 1990, ch. 221, § 5; L. 1993, ch. 194, § 1, L. 1995, ch. 97, § 2, L. 1997, ch. 158, § 4; L. 1998, ch. 142 § 8; L. 2011, ch. 114 § 42; Jan. 1, 2012.)

**65-1121a. Judicial review of board's actions.**

(a) Any agency action of the board of nursing pursuant to the Kansas nurse practice act is subject to review in accordance with the Kansas judicial review act.

(b) This section shall be part of and supplemental to the Kansas nurse practice act.

**History:** (L. 1986, ch. 318, § 145; L. 2010, ch. 17, § 128; July 1.)

**65-1122. Misdemeanors; penalties.** It is a violation of law for any person, firm, corporation or association to:

(a) Sell or fraudulently obtain or furnish any nursing diploma, license or record or aid or abet therein;

(b) practice professional nursing, practical nursing or practice as an advanced practice registered nurse, unless duly licensed to do so;

(c) use in connection with such person's name any designation implying that such person is a licensed professional nurse, a licensed practical nurse or an advanced practice registered nurse unless duly licensed to practice under the provisions of the Kansas nurse practice act, and such license is then in full force;

(d) practice professional nursing, practical nursing or as an advanced practice registered nurse during the time a license issued under the provisions of the Kansas nurse practice act shall have expired or shall have been suspended or revoked;

(e) represent that a school for nursing is approved for educating either professional nurses or practical nurses, unless such school has been duly approved by the board and such approval is then in full force;

(f) violate any provisions of the Kansas nurse practice act or rules and regulations adopted pursuant to that act; or

(g) represent that a provider of continuing nursing education is approved by the board for educating either professional nurses or practical nurses, unless the provider of continuing nursing education has been approved by the board and the approval is in full force.

Any person who violates this section is guilty of a class B misdemeanor, except that, upon conviction of a second or subsequent violation of this section, such person is guilty of a class A misdemeanor.

**History:** (L. 1949, ch. 331, § 11; L. 1963, 314, § 7; L. 1975, ch. 316, § 9; L. 1978, ch. 240, § 8; L. 1983, ch. 206 § 12; L. 1993, ch. 194, § 2; L. 2001, ch. 161, § 5; L. 2011, ch. 114, § 43; Jan. 1, 2012.)

**65-1123. Injunctions.** When it appears to the board that any person is violating any of the provisions of this act or that any person, firm, corporation, institution or association is employing (except as permitted under K.S.A. 65-1124 and amendments thereto) a person to perform professional nursing or practical nursing in Kansas, who is not licensed under this act, the board may in its own name bring an action in a court of competent jurisdiction for an injunction against such violation or such employing, and the proper courts of this state may enjoin any person, firm or corporation, institution or association from violation of this act or such employing without regard to whether proceedings have been or may be instituted before the board or whether criminal proceedings have been or may be instituted.

**History:** (L. 1949, ch. 331, § 12; L. 1963, ch. 314, § 8; L. 1975, ch. 316, § 10; July 1.)

## ACTS WHICH ARE NOT PROHIBITED

**65-1124. Acts which are not prohibited.** No provision of this law shall be construed as prohibiting:

(a) Gratuitous nursing by friends or members of the family;
(b) the incidental care of the sick by domestic servants or persons primarily employed as housekeepers;
(c) caring for the sick in accordance with tenets and practices of any church or religious denomination which teaches reliance upon spiritual means through prayer for healing;
(d) nursing assistance in the case of an emergency;
(e) the practice of nursing by students as part of a clinical course offered through a school of professional or practical nursing or program of advanced registered professional nursing approved in the United States or its territories;
(f) the practice of nursing in this state by legally qualified nurses of any of the other states as long as the engagement of any such nurse requires the nurse to accompany and care for a patient temporarily residing in this state during the period of one such engagement not to exceed six months in length, and as long as such nurses do not represent or hold themselves out as nurses licensed to practice in this state;
(g) the practice by any nurse who is employed by the United States government or any bureau, division or agency thereof, while in the discharge of official duties;
(h) auxiliary patient care services performed in medical care facilities, adult care homes or elsewhere by persons under the direction of a person licensed to practice medicine and surgery or a person licensed to practice dentistry or the supervision of a registered professional nurse or a licensed practical nurse;
(i) the administration of medications to residents of adult care homes or to patients in hospital-based long-term care units, including state operated institutions for the mentally retarded, by an unlicensed person who has been certified as having satisfactorily completed a training program in medication administration approved by the secretary of health and environment and has completed the program on continuing education adopted by the secretary, or by an unlicensed person while engaged in and as a part of such training program in medication administration;
(j) the practice of mental health technology by licensed mental health technicians as authorized under the mental health technicians' licensure act;
(k) performance in the school setting of nursing procedures when delegated by a licensed professional nurse in accordance with the rules and regulations of the board;
(l) performance of attendant care services directed by or on behalf of an individual in need of in-home care as the terms "attendant care services" and "individual in need of in-home care" are defined under K.S.A. 65-6201 and amendments thereto;
(m) performance of a nursing procedure by a person when that procedure is delegated by a licensed nurse, within the reasonable exercise of independent nursing judgment and is performed with reasonable skill and safety by that person under the supervision of a registered professional nurse or a licensed practical nurse;
(n) the practice of nursing by an applicant for Kansas nurse licensure in the supervised clinical portion of a refresher course;
(o) the teaching of the nursing process in this state by legally qualified nurses of any of the other states while in consultation with a licensed Kansas nurse as long as such individuals do not represent or hold themselves out as nurses licensed to practice in this state.

**History:** (L. 1949, ch. 331 § 13; L. 1963, ch. 314, § 9; L. 1975, ch. 316, § 11; L. 1978, ch. 241, § 1; L. 1983, ch. 207, § 4; L. 1983, ch. 208, § 3; L. 1987, ch. 234, § 1; L. 1989, ch. 191, § 3; L. 1990, ch. 222, § 1; L. 1992, ch. 134, § 1; L. 1994, ch. 149, § 3; L. 1995, ch. 97, § 3; L. 1997, ch. 158, § 5; L. 2000, ch. 113, § 1; L. 2007, ch. 102, § 1; Oct. 1.)

**65-1126. Invalidity of part.** If any provision of this act or the application to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared to be severable.
**History:** (L. 1949, ch. 331, § 15; June 30.)

**65-1127. Immunity from liability in civil actions for reporting, communicating and investigating certain information concerning alleged malpractice incidents and other information; conditions.**

(a) No person reporting to the board of nursing under oath and in good faith any information such person may have relating to alleged incidents of malpractice or the qualifications, fitness or character of a person licensed to practice professional nursing or licensed to practice practical nursing shall be subject to civil action for damages as a result of reporting such information.
(b) Any state, regional or local association of registered professional nurses or licensed practical nurses and the individual members of any committee thereof, which in good faith investigates or communicates information pertaining to the alleged incidents of malpractice or the qualifications, fitness or character of any licensee or registrant to the board of nursing or to any committee or agent thereof, shall be immune from liability in any civil action, that is based upon such information or transmittal of information if the investigation and communication was made in good faith and did not represent as true any matter not reasonably believed to be true.

**History:** (L. 1976, ch. 261 § 4; July 1.)

**65-1129. Rules and regulations.** The board shall adopt and promulgate rules and regulations as necessary to carry out the provisions of this act (*).
**History:** (L. 1978, ch. 240, § 9; July 1.)

**65-1135. Complaint or information relating to complaint confidential; exceptions.**

(a) Any complaint or report, record or other information relating to the investigation of a complaint about a person licensed by the board which is received, obtained or maintained by the board is confidential and shall not be disclosed by the board or its employees in a manner which identified or enables identification of the person who is the subject or source of such information except:
    (1) In a disciplinary proceeding conducted by the board pursuant to law or in an appeal of the order of the board entered in such proceeding, or to any party to such proceeding or appeal or such party's attorney;
    (2) to the proper licensing or disciplinary authority of another jurisdiction, if any disciplinary action authorized by K.S.A. 65-1120 and amendments thereto has at any time been taken against the licensee or the board has at any time denied a license certificate or authorization to the person; or
    (3) to the person who is the subject of the information, but the board may require disclosure in such a manner as to prevent identification of any other person who is the subject or source of the information.
(b) This section shall be part of and supplemental to the Kansas nurse practice act.

**History:** (L. 1993, ch. 194, § 8; July 1.)

**65-1136. Intravenous fluid therapy; qualifications of licensed practical nurses to administer; definitions; rules and regulations; advisory committee established; prohibitions; exceptions.**

(a) As used in this section:
    (1) ‘‘Provider’’ means a person who is approved by the board to administer an examination and to offer an intravenous fluid therapy course which has been approved by the board.
    (2) ‘‘Person’’ means an individual, organization, agency, institution or other legal entity.
    (3) ‘‘Examination’’ means an intravenous fluid therapy competency examination approved by the board.
    (4) ‘‘Supervision’’ means provision of guidance by a qualified nurse for the accomplishment of a nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing the task or activity.
(b) A licensed practical nurse may perform a limited scope of intravenous fluid therapy under the supervision of a registered professional nurse.
(c) A licensed practical nurse may perform an expanded scope of intravenous fluid therapy under the supervision of a registered professional nurse, if the licensed practical nurse:
    (1) Successfully completes an intravenous fluid therapy course given by a provider and passes an intravenous fluid therapy examination administered by a provider; or
    (2) has had one year clinical experience, has performed intravenous fluid therapy prior to July 1, 1995, and has successfully passed an examination; or
    (3) has successfully completed an intravenous fluid therapy course and passed an intravenous fluid therapy examination not administered by a provider and, upon application to the board for review and approval of such course and examination, the board has determined that such course and examination meets or exceeds the standards required under this act for an approved course and approved examination; or

(4) prior to July 1, 2001, qualified under paragraph (3) of this sub-section (c), as such subsection existed immediately prior to July 1, 2001, to perform an expanded scope of intravenous fluid therapy.

(d) The board may adopt rules and regulations:
  (1) Which define the limited and expanded scope of practice of intravenous fluid therapy which may be performed by a licensed practical nurse under the supervision of a registered professional nurse;
  (2) which restricts specific intravenous fluid therapy practices;
  (3) which prescribe standards for an intravenous fluid therapy course and examination required of a provider;
  (4) which govern provider record requirements;
  (5) which prescribe the procedure to approve, condition, limit and withdraw approval as a provider; and
  (6) which further implement the provisions of this section.

(e) An advisory committee of not less than two board members and five nonboard members shall be established by the board to advise and assist the board in implementing this section as determined by the board. The advisory committee shall meet at least annually. Members of the advisory committee shall receive amounts provided for in subsection (e) of K.S.A. 75-3223 and amendments thereto for each day of actual attendance at any meeting of the advisory committee or any subcommittee meeting of the advisory committee authorized by the board.

(f) No licensed practical nurse shall perform intravenous fluid therapy unless qualified to perform intravenous fluid therapy under this section and rules and regulations adopted by the board.

(g) Nothing in this section shall be construed to prohibit the performance of intravenous fluid therapy by a registered professional nurse.

(h) Nothing in this section shall be construed to prohibit performance of intravenous fluid therapy by a licensed practical nurse when performed by delegation of a person licensed to practice medicine and surgery or dentistry.

(i) This section shall be part of and supplemental to the Kansas nurse practice act.

**History:** (L. 1994, ch. 218, § 1; L. 2000, ch. 113, § 3; L. 2001, ch. 161, § 7; July 1.)

**65-1165. Supervision of delegated nursing procedures**.

(a) All nursing procedures, including but not limited to administration of medication, delegated by a licensed nurse to a designated unlicensed person shall be supervised. The degree of supervision required shall be determined by the licensed nurse after an assessment of appropriate factors which may include:
  (1) The health status and mental and physical stability of the individual receiving the nursing care;
  (2) the complexity of the procedure to be delegated;
  (3) the training and competency of the unlicensed person to whom the procedure is to be delegated; and
  (4) the proximity and availability of the licensed nurse to the designated unlicensed person when the selected nursing procedure will be performed.

(b) As used in this section, "supervision" has the meaning ascribed to such term under subsection (a) of K.S.A. 65-1136 and amendments thereto.

(c) This section shall be part of and supplemental to the Kansas nurse practice act.

**History: (**L. 1995, ch. 97, § 7; July 1.)

## ADMINISTRATIVE REGULATIONS
## APPROVAL OF SCHOOLS OF NURSING

**60-1-102. Approval Procedure.**

(a) An institution contemplating the establishment of a school of nursing shall:
  (1) notify the board and supply such information as the board may require;
  (2) submit the name and qualifications of the nurse administrator to the board for approval;
  (3) employ a qualified nurse administrator;
  (4) employ a second faculty member;
  (5) have financial resources for faculty, other necessary personnel, equipment, supplies, counseling and other services;
  (6) have adequate clinical and educational facilities;
  (7) have courses required for general education available;
  (8) submit an application with detailed proposed three year budget, curriculum plan, list of prospective faculty, organizational chart, organizing curricular framework, program objectives/outcomes, student and faculty policies, program evaluation plan, contractual agreements for clinical facilities at least six months before enrollment of students; and
  (9) be approved before the admission of students.

**History:** (Authorized by and implementing K.S.A. 1991 Supp. 65-1119 effective Jan. 1, 1966; amended Jan. 1, 1973; amended, E-74-29, July 1, 1974; modified, L. 1975, ch. 302 & 1, May 1, 1975, amended April 26, 1993.)

**60-1-103. Discontinuing a school of nursing.** Each school terminating its program shall submit for approval to the board the school's plan for its currently enrolled students and the school's plan for disposition of records.
**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1119; effective Jan. 1, 1966; amended, E-74-29, July 1, 1974; amended May 1, 1975; amended April 26, 1993; amended Nov. 7, 2008.)

**60-1-104. Definitions.**

(a) "Affiliating agency" means an agency that cooperates with the nursing education program to provide facilities and clinical resources for selected student experiences.

(b) "Approval" means the status granted to a program that provides evidence of both of the following:
   (1) The program is operating on a sound educational basis that is consistent with the board's educational requirements as set forth in the nurse practice act.
   (2) The program has no deficiencies.

(c) "Articulation" means the process by which a registered professional nurse, licensed practical nurse, or mental health technician who is enrolled in a nursing education program is given credit for previous nursing or mental health technology education.

(d) "Capstone course" means an experiential nursing course for students to demonstrate integration of knowledge and professional nursing supervised by a preceptor during the final semester of the professional nursing program.

(e) "Clinical learning" means an active process in which the student participates in nursing activities while being guided by a member of the faculty.

(f) "Clinical observational experience" means the process in which the student views health care interventions but does not participate in the interventions. Affiliating agency personnel are responsible for patient care. However, a student may use any of the five senses while with the patient for the sole purpose of observing while the agency professional who has assessed and provided care to the patient supports the student. The instructor shall not be required to be present, but the students shall be included in the faculty-student ratio.

(g) "Conditional approval" means the limited-time status that the board imposes on a program if the board finds evidence that an approved nursing education program has failed to comply with educational requirements as set forth in the nurse practice act. When placed on conditional approval status, the program may be directed by the board to cease admissions.

(h) "Community-based health care" means health care provided outside of hospitals and long-term care facilities, including public health departments, ambulatory health clinics, prenatal and well-baby clinics, hospice agencies, doctors' offices, industrial settings, homeless shelters, nursing centers, home health agencies, and patients' homes.

(i) "Contractual agreement between a nursing education program and an affiliating agency" means a written contract or letter signed by the legal representatives for the nursing education program and the affiliating agency.

(j) "Converted nursing education program" means an already existing approved program that offers a terminal credential different from the credential originally offered or a nursing education program that is offered by a parent institution different from the institution originally approved.

(k) "Criteria for unscheduled survey visit" means those program characteristics indicating that the program is not meeting board standards.

(l) "Distance learning" means the acquisition of knowledge and skills through information and instruction encompassing a variety of technologies.

(m) "Faculty degree plan" means the plan for a course of study leading to a degree appropriate for a teaching position.

(n) "Faculty hire exception" means that a program is allowed by the board to hire, on a limited-time basis and in accordance with K.A.R. 60-2-103(c)(2), an instructor who does not meet the faculty qualifications if no qualified individuals are available.

(o) "Generic student" means one who enters at the beginning of the nursing education program and plans to complete the entire curriculum.

(p) "Initial approval" means the approval period from the first admission of nursing students to the program through the first full implementation of the curriculum and graduation.

(q) "Loss of approval" means the status that results when the board withdraws its approval of a program.

(r) "National nursing accreditation agency" means either the national league for nursing accrediting commission or the commission on collegiate nursing education.

(s) "Practical nursing education program" means a course of study in a technical school or college leading to a certificate and preparing an individual for licensure as a practical nurse.

(t) "Preceptor" means a registered professional nurse who is not employed by the nursing education program but who provides clinical supervision for nursing students in nursing courses taken during the nursing education program. Nothing in this definition shall be construed to prohibit any contracted affiliating agency's registered professional nurses from assisting with clinical activities selected by the nursing

education program faculty. The program faculty shall not be required to be in the affiliating agency's facilities but shall be immediately available by telephone.

(u) "Professional nursing education program" means a course of study preparing an individual for licensure as a registered professional nurse. This term shall include baccalaureate degree programs and associate degree programs.
  (1) A "baccalaureate degree program" shall be conducted in a four-year college or university and shall lead to a baccalaureate degree with a major in nursing.
  (2) An "associate degree program" shall be conducted in a college or university and shall lead to an associate of arts, science, or applied science degree with a major in nursing.

(v) "Refresher course" means an educational program for nurses whose licenses are inactive or have lapsed for more than five years.

(w) "Review course" means an education offering used to prepare students for the licensing examination.

(x) "Satellite program" means an existing, approved nursing education program that agrees to provide the resources that are lacking at a location geographically separate from the parent program. The students may spend a portion or all of their time at the satellite location. The curricula in all locations shall be the same, and the credential shall be given by the parent institution.

(y) A "school of nursing" means a nursing education program. This term may include any of the following:
  (1) A college;
  (2) a school;
  (3) division;
  (4) a department;
  (5) an academic unit; or
  (6) a program.

(z) "Transfer student" means one who is permitted to apply nursing courses completed at another institution to a nursing education program of study.

(aa) "Work-study" means a cooperative education course in which the student earns academic credit through on-the-job practical work experience. Work-study shall not replace the required nursing education program courses.

**History:** (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008.)

## REQUIREMENTS FOR APPROVED NURSING PROGRAMS

**60-2-101. Requirements for initial approval.**

(a) Administration and organization.
  (1) The nursing education program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide for the financial support of the nursing education program.
  (2) Authority and responsibility for administering the nursing education program shall be vested in the nurse administrator of the nursing education program.
  (3) The program shall be accredited, be part of an institution that is accredited, or be in the process of being accredited by an agency that is approved by the United States department of education.

(b) Application. Each new or converted nursing education program shall submit an initial application 60 days before a scheduled board meeting. The application shall include the following:
  (1) The course of study and credential to be conferred;
  (2) the name and title of the administrator of the nursing education program;
  (3) the name of the controlling body;
  (4) the name and title of the administrator of the controlling body;
  (5) all sources of financial support;
  (6) a proposed curriculum with the total number of hours of both theoretical and clinical instruction;
  (7) the number, qualifications, and assignments of faculty members;
  (8) a proposed date of initial admission of students to the program;
  (9) the number of admissions each year and the number of students per admission;
  (10) the admission requirements;
  (11) a description of clinical facilities;
  (12) copies of the current school bulletin or catalog;
  (13) the name of each hospital and affiliating agency providing facilities for clinical experience. Each such hospital and affiliating agency shall be licensed or approved by the appropriate entity or

entities; and

(14) signed contracts or letters from clinical facilities stating that they will provide clinical experiences for the program's students.

(c) Surveys. Each nursing education program shall be surveyed for initial approval by the board. An on-site visit shall be conducted by the board to validate information submitted in the program's initial application before granting initial approval.

(1) During an initial survey, the nurse administrator of the program shall make available the following:

(A) Administrators, prospective faculty and students, clinical facility representatives, and support services personnel to discuss the nursing education program;

(B) minutes of faculty meetings;

(C) faculty and student handbooks;

(D) policies and procedures;

(E) curriculum materials;

(F) a copy of the nursing education program's budget; and

(G) affiliating agency contractual agreements.

(2) The nurse administrator of the nursing education program or designated personnel shall take the survey team to inspect the nursing educational facilities, including satellite program facilities and library facilities.

(3) Upon completion of the survey, the nurse administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting comments to errors, unclear statements, and omissions.

(d) Approval. Each nursing education program seeking approval shall perform the following:

(1) Submit a progress report that includes the following:

(A) Updated information in all areas identified in the initial application;

(B) the current number of admissions and enrollments;

(C) the current number of qualified faculty; and

(D) detailed course syllabi; and

(2) have a site visit conducted by the board's survey team after the first graduation.

(e) Denial of approval. If a nursing education program fails to meet the requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny approval.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1119; effective Jan. 1, 1966; amended Jan. 1, 1968; amended Jan. 1, 1972; amended Jan. 1, 1973; amended, E-74-29, July 1, 1974; modified L. 1975, Ch. 302, Sec. 2; modified, L. 1975, Ch. 396, Sec. 1, May 1, 1975; amended May 1, 1987; amended April 4, 1997; amended June 14, 2002; amended Jan. 24, 2003; amended Nov. 7, 2008; amended April 29, 2016.)

**60-2-102. Reapproval requirements.**

(a) Based on the annual report, each nursing education program shall be reviewed for approval annually by the board and pay an annual fee to the board.

(b) Each resurvey of a nursing education program shall be valid for not more than 10 years. If the program is accredited by a national nursing accreditation agency, the resurvey visit may be made in coordination with a national nursing accreditation agency visit. Each program without national nursing accreditation shall be resurveyed every five years.

(c) A resurvey or unannounced site visit may be conducted at any time other than a scheduled survey visit if the board determines that there is consistent evidence reflecting deficiencies in meeting the requirements or the board is determining whether or not deficiencies have been corrected by a program on conditional approval status.

(d) The deficiencies sufficient to warrant action by the board shall include the deficiencies specified in subsections (e) through (h). Failure to correct any deficiency within the prescribed period may result in the board's placement of the program on conditional approval or may result in loss of approval.

(e) (1) If the first-time candidates in a nursing education program have an annual pass rate on the licensure examination of less than 75 percent for two consecutive years, the program shall receive a written notice of concern from the board.

(2) The nursing education program shall have three months after the date of the written notice of concern to submit a written report analyzing all aspects of the education program, identifying areas contributing to the pass rate and the program's plan of action to improve the pass rate. The program shall have one year after the date of the written notice to demonstrate evidence of implementing strategies to correct deficiencies to bring the pass rate up to at least the 75 percent criterion.

(3) If the nursing education program has an annual pass rate of less than 75 percent for three consecutive years, the program may receive a site visit for evaluation and recommendation. The nurse

administrator of the program shall appear before the board and present an analysis of the measures taken and an analysis of the reasons for the program's pass rate below 75 percent.

(f) A program that is accredited by a national nursing accrediting agency and is subsequently placed on warning or whose accreditation by the national nursing accreditation agency is withdrawn shall be scheduled immediately for a survey visit.

(g) Failure to meet education statutes and regulations shall result in action by the board.

(h) Each complaint involving educational statutes and regulations reported to board members or staff shall initiate an investigation by the board and may require a survey visit, depending on the seriousness and number of complaints.

(i) The nurse administrator of the nursing education program shall make the following information available during each site visit:

(1) Data about the program, including the following:

(A) The number of students;

(B) the legal body responsible for policy and support of program;

(C) the organizational chart;

(D) an audited fiscal report covering the previous two years, including a statement of income and expenditures;

(2) the nurse administrator's responsibilities;

(3) for each faculty member and preceptor, the following information:

(A) Job descriptions;

(B) selection policies;

(C) orientation plan;

(D) faculty organization by-laws;

(E) number of full-time and part-time faculty and non-nursing faculty with academic credentials and assignments; and

(F) faculty-student clinical ratio;

(4) degree plan;

(5) a copy of the current curriculum with the date of last revision;

(6) the testing process with test analysis and the written test procedure;

(7) a description of education facilities, including classrooms, offices, library, and computers;

(8) a list of clinical facilities;

(9) the number of students by classes; and

(10) the policies for students as listed in K.A.R. 60-2-107.

(j) During each resurvey, the nurse administrator of the nursing education program shall make available the following:

(1) The educational institution's administrators, faculty, support services personnel, and students;

(2) staff members of selected affiliating agencies;

(3) faculty minutes for at least the three previous years;

(4) faculty and student handbooks;

(5) student records;

(6) policies and procedures;

(7) curriculum materials;

(8) a copy of the nursing education program's audited fiscal report covering the previous two years, including income and expenditures;

(9) affiliating agency contractual agreements;

(10) program evaluation plan and evidence of program effectiveness; and

(11) school’s current catalog.

(k) The nurse administrator of the nursing education program or designated personnel shall take the survey team to the nursing educational facilities, including satellite program facilities, library facilities, and clinical agencies.

(l) Upon completion of the survey, the nurse administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting comments to errors, unclear statements, and omissions.

(m) If a nursing education program fails to meet the requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny reapproval. This notification shall be made pursuant to K.S.A. 77-512 and amendments thereto of the Kansas administrative procedures act and shall inform the program of its right to a hearing pursuant to the act. The parent institution shall be responsible for securing and providing for the permanent custody and storage of records of all students and graduates.

**History:** (Authorized by and implementing K.S.A. 65-1118a and 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008.)

**60-2-103. Faculty and preceptor qualifications.**

(a) Professional nursing education programs.

(1) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.

(2) Each preceptor shall meet the following requirements:

(A) Be licensed as a registered professional nurse in the state in which the individual is currently practicing nursing; and

(B) complete a preceptor orientation which shall include information about the factors influencing the student-preceptor relationship and course information.

(3) Each program shall have a written plan that includes the method of selection of preceptors, the roles of the faculty members and preceptors, and the methods of contact between faculty members and preceptors during the preceptorship.

(4) Each nurse faculty member shall have academic preparation and experience as follows:

(A) The nurse administrator who is responsible for the development and implementation of the nursing education program shall have had successful experience in administration or teaching and shall have a graduate degree. Each person who is hired as a nurse administrator after July 1, 1999 shall have a graduate degree in nursing, except for any person whose graduate degree is conferred on or before July 1, 1999.

(B) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree. Each person who is hired as a nurse faculty member after July 1, 2001 shall have a graduate degree in nursing, preferably in the clinical area being taught, except for any person whose graduate degree is conferred before July 1, 2001.

(C) Each nurse faculty member responsible for clinical instruction shall possess a graduate degree or provide to the board a faculty degree plan that projects completion of a graduate degree. Each person who is hired as a nurse faculty member responsible for clinical instruction after July 1, 2001 shall meet one of the following requirements:

(i) Have a graduate degree in nursing, preferably in the clinical area being taught, except for any person whose graduate degree is conferred on or before July 1, 2001; or

(ii) provide to the board a faculty degree plan that projects completion of a graduate degree with the graduate degree to be in nursing if the degree is projected to be completed after July 1, 2001.

(b) Practical nursing education programs.

(1) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.

(2) Each nurse faculty member shall have academic preparation and experience as follows:

(A) The nurse administrator who is responsible for the development and implementation of the nursing education program shall have had successful experience in administration or teaching and shall have a graduate degree. Each person who is hired as a nurse administrator after July 1, 1999 shall have a graduate degree in nursing, except for any person whose graduate degree is conferred on or before July 1, 1999.

(B) Each nurse faculty member who is assigned the responsibility of a course shall hold a baccalaureate degree. Each person who is hired as a nurse faculty member after July 1, 2001 shall have a baccalaureate or higher degree in nursing, except for any person whose degree is conferred on or before July 1, 2001.

(C) Each nurse faculty member responsible for clinical instruction shall possess a baccalaureate degree or provide to the board a faculty degree plan that projects completion of a baccalaureate degree. Each person who is hired as a nurse faculty member responsible for clinical instruction after July 1, 2001 shall meet one of the following requirements:

(i) Have a baccalaureate or higher degree in nursing, except for any person whose degree is conferred on or before to July 1, 2001; or

(ii) provide to the board a faculty degree plan that projects completion of a baccalaureate or higher degree, with the degree to be in nursing if the degree is projected to be completed after July 1, 2001.

(c) (1) For each nursing education program, each nurse administrator shall submit to the board the following:

(A) A faculty qualification report for each faculty member newly employed. Faculty with a continuing appointment shall have an appropriate degree;

(B) a faculty degree plan reflecting completion of the degree within six years for each instructor without the appropriate degree. Upon completion of the degree, a transcript showing completion of the program shall be submitted to the board; and

(C) notification and a rationale for each faculty member who is not following the degree plan as submitted.

(2) The nurse administrator may request a faculty hire exception to be approved by the board's professional staff, if faculty meeting the criteria specified in this regulation are not available, by providing documentation of the following:
    (A) A lack of qualified applicants;
    (B) a rationale for the need to hire the applicant;
    (C) the applicant's qualifications; and
    (D) a plan for faculty recruitment.

**History:** (Authorized by and implementing K.S.A. 2001 Supp. 65-1119; effective April 4, 1997; amended January 24, 2003.)

**60-2-104. Curriculum requirements.**

(a) The faculty in each nursing education program shall develop a curriculum to meet program and graduate outcomes and fulfill these requirements:
    (1) Identify the competencies of the graduate for the level of nursing practice;
    (2) determine the approach and content for learning experiences;
    (3) direct clinical instruction as an integral part of the program; and
    (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or outcomes of nursing courses.

(b) The curriculum in each nursing education program shall include the following:
    (1) Content in the biological, physical, social, and behavioral sciences that provides a foundation for safe and effective nursing practice;
    (2) the art and science of nursing; and
    (3) didactic content and clinical experience to meet the objectives or outcomes specified in subsection (c) or (d).

(c) Each professional nursing program shall provide instruction and clinical experience in the following areas:
    (1) The aspects of a safe, effective care environment, including the management of care, safety, and infection control;
    (2) health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease;
    (3) psychosocial integrity, including coping, adaptation, and psychosocial adaptation; and
    (4) physiological integrity, including basic care and comfort, pharmacology, parenteral therapies, reduction of risk potential, and physiological adaptation.

(d) Each practical nursing program shall provide instruction and clinical experience in the following areas:
    (1) The aspects of a safe, effective care environment, including the coordination of care, safety, and infection control;
    (2) health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease;
    (3) psychosocial integrity, including coping, adaptation, and psychosocial adaptation; and
    (4) physiological integrity, including basic care and comfort, pharmacology, reduction of risk potential, and physiological adaptation.

(e) Minimum length of program.
    (1) Each practical nursing education program shall have a minimum of 15 credit hours in nursing courses or the equivalent in clock-hours.
    (2) Each professional nursing education program shall have a minimum of 30 credit hours in the nursing major.

(f) The faculty in each nursing education program shall develop and implement a written plan that meets the following requirements:
    (1) Provides evidence of program evaluation and effectiveness; and
    (2) is used for ongoing program improvement.

(g) Each nursing education program shall submit major curriculum revisions for approval by the board at least 30 days before the board meetings. The program shall have received board approval before implementation. Major curriculum revisions shall include the following:
    (1) Any change in the plan of nursing curriculum organization involving philosophy, number of semesters of study, or the delivery method of nursing courses;
    (2) any change in content requiring a change of clock-hours or credit hours in nursing courses; and
    (3) any change in the number of students to be admitted to the nursing education program.

(h) Each nursing education program shall submit minor curriculum revisions of a course's content, title, objectives, or outcomes to the board's education specialist for approval, which shall be received by the program before implementation.

(i) The nurse administrator shall submit to the board office each change not requiring board approval. This information shall be submitted in writing with the annual report.

(j) Each nursing education program shall have an articulation plan.

**History:** (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008.)

**60-2-105. Clinical resources.**

(a) Written contractual agreements between the nursing education program and each affiliating agency shall be signed and kept on file in the nursing education program office.

(b) Clinical learning experiences and sites shall be selected to provide learning opportunities necessary to achieve the nursing education program objectives or outcomes.

(c) The faculty of each nursing education program shall be responsible for student learning and evaluation in the clinical area.

(d) The nursing education program shall provide verification that each affiliating agency used for clinical instruction has clinical facilities that are adequate for the number of students served in terms of space, equipment, and other necessary resources, including an adequate number of patients or clients necessary to meet the program objectives or outcomes.

(e) A maximum of a l:10 faculty-to-student ratio, including students at observational sites, shall be maintained during the clinical experience.

(f) Clinical observational experiences.

(1) The objectives or outcomes for each observational experience shall reflect observation rather than participation in nursing interventions.

(2) Affiliating agencies in which observational experiences take place shall not be required to be staffed by registered nurses.

(3) Observational experiences shall constitute no more than 15 percent of the total clinical hours for the course, unless approved by the board.

(g) Clinical experiences with preceptors shall be no more than 20 percent of the total clinical hours of the nursing education program. This prohibition shall not apply to the capstone course.

(h) Each affiliating agency used for clinical instruction shall be staffed independently of student assignments.

(i) The number of affiliating agencies used for clinical experiences shall be adequate for meeting curriculum objectives or outcomes. The nursing education program faculty shall provide the affiliating agency staff with the organizing curriculum framework and either objectives or outcomes for clinical learning experiences used.

(j) A sufficient number and variety of patients representing all age groups shall be utilized to provide learning experiences that meet curriculum objectives or outcomes. If more than one nursing education program uses the same affiliating agency, the nursing education programs shall document the availability of appropriate learning experiences for all students.

**History:** (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended March 6, 2009.)

**60-2-106. Educational facilities.**

(a) Classrooms, laboratories, and conference rooms shall be available when needed and shall be adequate in size, number, and type according to the number of students and the educational purposes for which the rooms are to be used.

(b) Each nursing education program shall provide the following:

(1) A physical facility that is safe and is conducive to learning;

(2) offices that are available and adequate in size, number, and type to provide the faculty with privacy in counseling students;

(3) secure space for nursing student records; and

(4) current technological resources.

(c) The library resources, instructional media, and materials shall be of sufficient recency, pertinence, level of content, and quantity as indicated by the curriculum to meet the needs of nursing students and faculty.

**History:** (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended March 6, 2009.)

**60-2-107. Student policies.**

(a) Each nursing education program shall have clearly defined written policies for the following:

(1) Admission:

(A) Generic students;

(B) transfer students; and

(C) articulation;

(2) oral and written English proficiency in reference to K.A.R. 60-3-106;

(3) readmission;

(4) progression;
(5) counseling and guidance;
(6) student role versus employee role;
(7) representation on faculty governance;
(8) graduation;
(9) refund policies governing all fees and tuition paid by students; and
(10) ethical practices for the performance of activities including recruitment, admission, and advertising.

(b) Each nursing education program shall have a written policy providing information to any student who may be subject to licensure denial under K.S.A. 65-1120, and amendments thereto. The information shall be provided before admission to the nursing education program.

**History:** (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Nov. 7, 2008.)

**60-2-108. Reports.**

(a) An annual report and all applicable fees shall be submitted to the board by each nursing education program on or before June 30 of each year and shall include the following:
(1) Changes in program policies, organizing curriculum framework, objectives or outcomes, and major and minor curriculum changes;
(2) faculty responsibilities for required and elective nursing courses;
(3) the name, license number, academic credentials, employment date, and full- or part-time status of each member of the faculty;
(4) for each preceptor, the name, license number, academic credentials, current clinical area of practice, and place where currently employed;
(5) the nurse administrator's teaching responsibilities;
(6) for each affiliating agency, the following information:
(A) The name;
(B) the location; and
(C) the student-faculty clinical ratio for the reporting period
(7) statistics for generic, articulation, and transfer students, including the following:
(A) Admissions, readmissions, withdrawals, and graduations; and
(B) first-time pass rate for each of the last five years;
(8) faculty statistics, including name, number, and credentials;
(9) the budget spent for library and audiovisual acquisitions to support the nursing program for the most recent year;
(10) an audited fiscal report covering the previous two years, including a statement of income and expenditures;
(11) any complaints involving educational statutes and regulations;
(12) a response to the recommendations and requirements from the last annual report or last survey visit;
(13) plans for the future;
(14) a description of the practices used to safeguard the health and well-being of students; and
(15) a copy of the school's current catalog.

(b) If the nursing education program fails to meet the requirements of the board or to submit required reports within a designated period of time, the program shall be removed from the list of approved nursing education programs after receiving notice and being given an opportunity to be heard.

**History:** These proceedings shall be conducted in accordance with the provisions of the Kansas administrative procedure act. (Authorized by and implementing K.S.A. 65-1119; effective April 4, 1997; amended Jan. 24, 2003; amended Nov. 7, 2008.)

## REQUIREMENTS FOR LICENSURE AND STANDARDS OF PRACTICE

**60-3-101. Licensure.**

(a) Licensure by examination.
(1) Not later than 30 days before the examination date, each applicant for licensure by examination shall file with the board a completed application and tender the fee prescribed by K.A.R. 60-4-101.
(2) The application shall be filed on a form adopted by the board.
(3) Each applicant for nursing licensure shall take and pass the examination prepared by the national council of state boards of nursing.

(b) Licensure by endorsement.
(1) Each applicant for licensure by endorsement shall file with the board a completed application and tender the fee prescribed by K.A.R. 60-4-101. The application shall be filed on a form adopted by the board.

(2) Verification of a current Kansas license shall be provided to other state boards upon request and upon payment of the prescribed fee.

(c) Information regarding examinations.

(1) The examination for licensure shall be administered at designated sites.

(2) Each candidate shall present a validated admission card in order to be admitted to the examination center.

(3) Any applicant cheating or attempting to cheat during the examination shall be deemed not to have passed the examination.

(4) If the answer key is lost or destroyed through circumstances beyond the control of the board, the candidate shall be required to retake the examination in order to meet requirements for licensure, except that there shall be no examination fee charged to the applicant.

(5) Individual examination results shall be released to the school from which the examinee graduated.

(6) Any candidate requesting modifications to the examination procedures or materials because of a learning disability shall provide written documentation from the appropriate medical professional confirming the learning disability, an evaluation completed within the last five years by a learning disabilities evaluation team, and a letter from the nursing program confirming learning and testing modifications made during the course of study.

(d) Application for reexamination. Any applicant who fails to make a passing score on the licensure examination may retake the examination and shall pay an examination fee for each retest as established by K.A.R. 60-4-101.

**History**: (Authorized by K.S.A. 65-1129; implementing K.S.A. 1997 Supp. 65-1115 and K.S.A. 1997 Supp. 65-1116; effective Jan. 1, 1966; amended Jan. 1, 1972; amended, E-74-29, July 1, 1974; modified, L. 1975, Ch. 302, Sec. 3, May 1, 1975; amended May 1, 1980; amended May 1, 1987; amended April 26, 1993; amended Jan. 29, 1999.)

**60-3-102. Duplicate of initial license.** When an individual's initial license has been lost or destroyed, a duplicate may be issued by the board upon payment of the fee specified in K.S.A. 65-1118, and amendments thereto.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 74-1106; effective Jan. 1, 1966; amended Jan. 1, 1972; modified, L. 1975, Ch. 302, Sec. 11, May 1, 1975; amended Nov. 21, 1994; amended April 29, 2016.)

**60-3-103. Change of name.** If an applicant for licensure or a licensee changes that individual's name after submitting an application or obtaining a license, the applicant or licensee shall submit legal documentation or an affidavit indicating the change of name upon a form approved by the board. The applicant or licensee shall submit the document to the board within 30 days of the change, pursuant to K.S.A. 65-1117 and amendments thereto.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1117; effective Jan 1, 1966; amended May 1, 1975; amended April 29, 2016.)

**60-3-105. Reinstatement of license.**

(a) Any applicant whose Kansas license has lapsed may, within five years of its expiration date, reinstate that license by submitting satisfactory proof that the applicant has obtained 30 contact hours of approved continuing nursing education within the preceding two-year period.

(b) Any applicant whose Kansas license has lapsed for more than five years beyond its expiration date may reinstate the license by submitting evidence of:

(1) current licensure in another jurisdiction which requires completion of a number of contact hours of continuing nursing education for license renewal which are equivalent to or greater than the number of hours required in Kansas;

(2) licensure in another jurisdiction sometime during the preceding five-year period, and completion of 30 contact hours of approved continuing nursing education within the preceding two-year period; or

(3) satisfactory completion of a refresher course approved by the board.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 1994 Supp. 65-1117, as amended by L. 1995, Ch. 97, § 1; implementing K.S.A. 1994 Supp. 65-1117, as amended by L. 1995, Ch. 97, § 1; effective Feb. 15, 1977; amended May 1, 1987; amended Sept. 2, 1991; amended May 9, 1994; amended February 16, 1996.)

**60-3-106. Licensure qualifications.**

(a) As part of the application process, each individual applying for original licensure in Kansas who is a graduate of a foreign nursing school shall submit that individual's education and licensure credentials for evaluation to a credentialing agency approved by the board.

(b) Any individual applying for licensure in Kansas who is a graduate of a foreign nursing school in which instruction was not in English may be granted a license if that individual meets all other requirements for

licensure in effect at the time of application and shows proof of proficiency in English by passing one of the following:
(1) The test of English as a foreign language and the test of spoken English; or
(2) similar examinations, as approved by the board.

(c) Each graduate of a foreign nursing school licensed in another jurisdiction shall submit that individual's education and licensure credentials for evaluation to a credentialing agency approved by the board or to the board's representative.

(d) If an individual fails to pass the licensure examination or does not take the licensure examination within 24 months after graduation, the individual shall petition the board in writing before being allowed to take or retake the licensure examination. The petition shall be submitted on a form provided by the board and shall contain the following, as applicable:
(1) The name of the school of graduation;
(2) the date of graduation;
(3) the number of months or years since graduation;
(4) the number of times that the individual has taken the licensure examination;
(5) the dates of the licensure examinations;
(6) areas of deficiency identified on the diagnostic profile for each examination;
(7) copies of all diagnostic profiles;
(8) any study completed since the last attempt of taking the licensure examination;
(9) any work experience in the last two years; and
(10) a sworn statement by the petitioner that the facts contained in the petition are true to the best of that person's knowledge and belief.

(e) An individual shall be allowed by the board to retake the licensure examination after 24 months from graduation only upon demonstrating to the board's satisfaction that the individual has identified and addressed the reasons for prior failure and that there is a reasonable probability that the individual will pass the examination. A plan of study or review course may be required by the board before the individual retakes the licensure examination.

(f) If the board requires a plan of study before retaking the licensure examination, the plan shall contain the following:
(1) A list of all the low performance areas of the test plan identified by the diagnostic profile from each examination;
(2) a specific content outline for all of the areas of low performance on the diagnostic profile;
(3) methods of study, including the following:
(A) Self-study;
(B) study groups;
(C) tutors; or
(D) any other methods approved by the board;
(4) a schedule for study that meets the following requirements:
(A) 30 hours for each low performance area;
(B) a start date; and
(C) completion in six months or the petition shall be considered abandoned;
(5) learning resources identified to be used in the study that meet these requirements:
(A) A written bibliography in a standard documentation format, with resources no more than five years old; and
(B) four types for each low performance area selected from the list as follows:
(i) Textbooks;
(ii) journals;
(iii) review books;
(iv) audiovisuals;
(v) computer-assisted instruction; or
(vi) computer review programs.

(g) A registered professional nurse shall provide written verification that the individual has completed the study plan.

(h) Academic nursing courses, clinical observations, or other learning activities to meet study requirements may also be prescribed by the board.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1115 and K.S.A. 65-1116; effective Feb. 15, 1977; amended Sept. 2, 1991; amended May 9, 1994; amended April 4, 1997; amended Jan. 29, 1999; amended June 14, 2002; amended Nov. 7, 2008.)

**60-3-106a. Temporary permit.**

(a) A temporary permit to practice as a registered professional nurse or licensed practical nurse for a period not to exceed 120 days may be issued to an applicant who holds a license in a state or territory of the United States that was granted by an examination approved by the board for either of the following:
   (1) To enable the applicant to gain employment while completing continuing education requirements necessary for reinstatement of a Kansas license; or
   (2) to enable the applicant to gain employment while completing the requirements necessary for endorsement.

(b) A copy of the applicant's current nursing license in another state or in a territory of the United States shall be required for issuance of a temporary permit for endorsement and for reinstatement of a Kansas license as prescribed by K.A.R. 60-3-105.

**History:**(Authorized by K.S.A. 65-1129 and K.S.A. 2007 Supp. 74-1106; implementing K.S.A. 65-1115, K.S.A. 65-1116, and K.S.A. 2007 Supp. 65-1117; effective May 9, 1994; amended April 3, 1998; amended July 29, 2005; amended Nov. 7, 2008.)

**60-3-107. Expiration dates of applications.** Applications for initial licensure by examination or endorsement and for reinstatement while awaiting documentation of qualifications shall be active for six months.

(a) The expiration date of each application shall be six months after the date of receipt at the board's office.

(b) If the application has expired, each individual seeking licensure shall submit a new application along with the appropriate fee as prescribed by K.A.R. 60-4-101.

**History:** (Authorized by and implementing K.S.A. 65-1115, K.S.A. 65-1116, and K.S.A. 65-1117; effective, E-77-8, March 19, 1976; effective Feb. 15, 1977; amended April 3, 1998; amended July 29, 2005.)

**60-3-108. License expiration and renewal.**

(a) Except as specified in subsection (b), all licenses for registered professional nurses and licensed practical nurses shall be renewed according to the following requirements:
   (1) The expiration date of each license shall be the last day of the month in which the licensee's birthday occurs.
   (2) (A) The renewal date for each licensee whose year of birth is an odd-numbered year shall be in each odd-numbered year.
      (B) The renewal date for each licensee whose year of birth is an even-numbered year shall be in each even-numbered year.

(b) If a licensee would otherwise be required to renew the license within six months from the date on which the licensee qualified for the license, the expiration and renewal date shall be the last day of the month following the licensee's third birthday from the date of licensure or reinstatement.

**History**: (Authorized by K.S.A. 65-1117 and K.S.A. 74-1106; implementing K.S.A. 65-1117; effective, E-77-8, March 19, 1976; effective Feb. 15, 1977; amended E-79-8, March 16, 1978; amended May 1, 1979; amended July 29, 2005.)

**60-3-109a. Standards of practice.**

(a) Each registered professional nurse shall be familiar with the Kansas nurse practice act, the standards of practice of the profession and the code of ethics for professional nurses.

(b) Each licensed practical nurse shall be familiar with the Kansas nurse practice act, the standards of practice and the code of ethics for practical nursing.

**History:** (Authorized by K.S.A. 65-1113; implementing K.S.A. 74-1106; effective May 1, 1985.)

**60-3-110. Unprofessional conduct.** Any of the following shall constitute "unprofessional conduct":

(a) Performing acts beyond the authorized scope of the level of nursing for which the individual is licensed;

(b) assuming duties and responsibilities within the practice of nursing without making or obtaining adequate preparation or maintaining competency;

(c) failing to take appropriate action or to follow policies and procedures in the practice situation designed to safeguard each patient;

(d) inaccurately recording, falsifying, or altering any record of a patient or agency or of the board;

(e) physical abuse, which shall be defined as any act or failure to act performed intentionally or carelessly that causes or is likely to cause harm to a patient. This term may include any of the following:
   (1) The unreasonable use of any physical restraint, isolation, or medication that harms or is likely to harm a patient;
   (2) the unreasonable use of any physical or chemical restraint, medication, or isolation as punishment, for convenience, in conflict with a physician's order or a policy and procedure of the facility or a state statute or regulation, or as a substitute for treatment, unless the use of the restraint, medication, or isolation is in furtherance of the health and safety of the patient;

(3) any threat, menacing conduct, or other nontherapeutic or inappropriate action that results in or might reasonably be expected to result in a patient's unnecessary fear or emotional or mental distress; or
(4) failure or omission to provide any goods or services that are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm;

(f) commission of any act of sexual abuse, sexual misconduct, or sexual exploitation related to the licensee's practice;
(g) verbal abuse, which shall be defined as any word or phrase spoken inappropriately to or in the presence of a patient that results in or might reasonably be expected to result in the patient's unnecessary fear, emotional distress, or mental distress;
(h) delegating any activity that requires the unique skill and substantial specialized knowledge derived from the biological, physical, and behavioral sciences and judgment of the nurse to an unlicensed individual in violation of the Kansas nurse practice act or to the detriment of patient safety;
(i) assigning the practice of nursing to a licensed individual in violation of the Kansas nurse practice act or to the detriment of patient safety;
(j) violating the confidentiality of information or knowledge concerning any patient;
(k) willfully or negligently failing to take appropriate action to safeguard a patient or the public from incompetent practice performed by a registered professional nurse or a licensed practical nurse. "Appropriate action" may include reporting to the board of nursing;
(l) leaving an assignment that has been accepted, without notifying the appropriate authority and allowing reasonable time for replacement;
(m) engaging in conduct related to licensed nursing practice that is likely to deceive, defraud, or harm the public;
(n) diverting drugs, supplies, or property of any patient or agency;
(o) exploitation, which shall be defined as misappropriating a patient's property or taking unfair advantage of a patient's physical or financial resources for the licensee's or another individual's personal or financial advantage by the use of undue influence, coercion, harassment, duress, deception, false pretense, or false representation;
(p) solicitation of professional patronage through the use of fraudulent or false advertisements, or profiting by the acts of those representing themselves to be agents of the licensee;
(q) advertising nursing superiority or advertising the performance of nursing services in a superior manner;
(r) failing to comply with any disciplinary order of the board;
(s) failing to submit to a mental or physical examination or an alcohol or drug screen, or any combination of these, when so ordered by the board pursuant to K.S.A. 65-4924 and amendments thereto, that the individual is unable to practice nursing with reasonable skill and safety by reason of a physical or mental disability or condition, loss of motor skills or the use of alcohol, drugs, or controlled substances, or any combination of these;
(t) failing to complete the requirements of the impaired provider program of the board;
(u) failing to furnish the board, its investigators, or its representatives with any information legally requested by the board;
(v) engaging in nursing practice while using a false or assumed name or while impersonating another person licensed by the board;
(w) practicing without a license or while the license has lapsed;
(x) allowing another person to use the licensee's license to practice nursing; or
(y) knowingly aiding or abetting another in any act that is a violation of any health care licensing act.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1120; effective May 1, 1982; amended Sept. 27, 1993; amended Sept. 6, 1994; amended Oct. 25, 2002; amended April 29, 2016.)

**60-3-111. Inactive license.**

(a) Before expiration of an active license, a registered professional nurse or licensed practical nurse may request to be put on inactive status.
(b) The request shall be accompanied by the inactive license fee, as prescribed by K.A.R. 60-4-101.
(c) Continuing nursing education shall not be required while on inactive status.
(d) The licensee shall remain on inactive status until filing an application and meeting all the requirements for reinstatement.

**History**: (Authorized by K.S.A. 65-1129; implementing K.S.A. 2000 Supp. 65-1117 and 65-1118; effective April 26, 1993; amended October 12, 2001.)

**60-3-112. Exempt license.**

(a) An exempt license shall be granted only to a registered professional or practical nurse who meets these requirements:
(1) Is not regularly engaged in nursing practice in Kansas, but volunteers nursing services or is a charitable

health care provider as defined by K.S.A. 75-6102 and amendments thereto; and

(2) (A) Has been licensed in Kansas for the five years previous to applying for an exempt license; or

(B) has been licensed in another jurisdiction for the five years previous to applying for an exempt license and meets all requirements for endorsement into Kansas.

(b) The expiration date of the exempt license shall be in accordance with K.A.R. 60-3-108.

(c) Each application for renewal of an exempt license shall be submitted upon a form furnished by the board and shall be accompanied by the fee in accordance with K.A.R. 60-4-101.

**History:** (Authorized by and implementing K.S.A. 65-1115 and K.S.A. 65-1116; effective April 3, 1998; amended Oct. 25, 2002; amended July 29, 2005.)

**60-3-113. Reporting of certain misdemeanor convictions by the licensee.** Pursuant to K.S.A. 65-1117 and amendments thereto, each licensee shall report to the board any misdemeanor conviction for any of the following substances or types of conduct, within 30 days from the date the conviction becomes final:

(a) Alcohol;

(b) any drugs;

(c) deceit;

(d) dishonesty;

(e) endangerment of a child or vulnerable adult;

(f) falsification;

(g) fraud;

(h) misrepresentation;

(i) physical, emotional, financial, or sexual exploitation of a child or vulnerable adult;

(j) physical or verbal abuse;

(k) theft;

(l) violation of a protection from abuse order or protection from stalking order; or

(m) any action arising out of a violation of any state or federal regulation.

**History:** Authorized by K.S.A. 2015 Supp. 65-1117 and K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1117; effective Nov. 7, 2008; amended April 29, 2016.

**60-3-114. Satisfactory completion of a refresher course approved by the board.**

(a) Each refresher course shall provide didactic instruction and clinical learning as follows:

(1) At least 120 clock-hours of didactic instruction; and

(2) at least 180 clock-hours of clinical learning, which shall be verified by the preceptor and refresher course administrator or by the refresher course faculty member, according to the following requirements:

(A) For the registered professional nurse refresher course, at least 110 of the required clock-hours in an acute care setting; and

(B) for the licensed practical nurse refresher course, all 180 clock-hours in an acute care or skilled nursing setting.

(b) The didactic instruction and clinical learning content areas of the registered professional nurse refresher course shall be the following:

(1) Safe, effective care environment, including management of care and safety and infection control;

(2) health promotion and maintenance;

(3) psychosocial integrity;

(4) physiological integrity, including basic care and comfort, pharmacological and parenteral therapies, reduction of risk potential, and physiological adaptation; and

(5) integrated content, including the nursing process, caring, communication, documentation, teaching, and learning.

(c) The didactic instruction and clinical learning content areas of the licensed practical nurse refresher course shall be the following:

(1) Safe and effective care environment, including coordinated care and safety and infection control;

(2) health promotion and maintenance;

(3) psychosocial integrity;

(4) physiological integrity, including basic care and comfort, pharmacological therapies, reduction of risk potential, and physiological adaptation; and

(5) integrated content, including the nursing process, caring, communication, documentation, teaching, and learning.

(d) (1) Each refresher course student shall be supervised by the course faculty member or preceptor.

(2) All clinical learning experiences shall be under the direct supervision of a registered professional nurse. Direct supervision shall mean that a registered professional nurse observes, directs, and evaluates the refresher course student's performance.

(3) The faculty member or preceptor shall be on site when the refresher course student is assigned responsibilities that include nursing skills and abilities in which the student has acquired proficiency and the care required is simple and routine.
(4) The faculty member or preceptor shall be on the premises when the refresher course student is assigned responsibilities that include nursing skills and abilities in which the student is gaining proficiency and the clients assigned to the student have severe or urgent conditions or are unstable, or both.
(5) Each student in a registered professional nurse refresher course shall demonstrate clinical skills appropriate for the scope of practice for the registered professional nurse.
(6) Each student in a licensed practical nurse refresher course shall demonstrate clinical skills appropriate for the scope of practice for the licensed practical nurse.
(7) Upon successful completion of the didactic portion of the refresher course, the unlicensed student shall submit an application for licensure in Kansas before beginning clinical learning.

**History:** (Authorized by K.S.A. 65-1115, 65-1116, and 65-1129; implementing K.S.A. 65-1115 and 65-1116; effective Nov. 7, 2008.)

## FEES

**60-4-101. Payment of fees.** The following fees shall be charged by the board of nursing:

(a) Fees for professional nurses.
(1) Application for license by endorsement to Kansas ..... $75.00
(2) Application for license by examination ..... 75.00
(3) Biennial renewal of license ..... 55.00
(4) Application for reinstatement of license without temporary permit ..... 70.00
(5) Application for reinstatement of license with temporary permit ..... 95.00
(6) Certified copy of Kansas license ..... 25.00
(7) Inactive license ..... 10.00
(8) Verification of licensure ..... 25.00
(9) Application for exempt license ..... 50.00
(10) Renewal of exempt license ..... 50.00

(b) Fees for practical nurses.
(1) Application for license by endorsement to Kansas ..... 50.00
(2) Application for license by examination ..... 50.00
(3) Biennial renewal of license ..... 55.00
(4) Application for reinstatement of license without temporary permit ..... 70.00
(5) Application for reinstatement of license with temporary permit ..... 95.00
(6) Certified copy of Kansas license ..... 25.00
(7) Inactive license ..... 10.00
(8) Verification of licensure ..... 25.00
(9) Application for exempt license ..... 50.00
(10) Renewal of exempt license ..... 50.00

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 2013 Supp. 65-1118; effective Jan. 1, 1966; amended Jan. 1, 1972; amended, E-74-29, July 1, 1974; modified, L. 1975, Ch. 302, Sec. 5, May 1, 1975; amended, E-77-8, March 19, 1976; amended Feb. 15, 1977; amended, E-79-8, March 16, 1978; amended May 1, 1979; amended May 1, 1980; amended May 1, 1983; amended March 9, 1992; amended May 17, 1993; amended May 9, 1994; amended Feb. 6, 1995; amended April 3, 1998; amended July 1, 2001; amended April 20, 2007; amended July 1, 2014.)

**60-4-103. Fees and travel expenses for school approval and approval of continuing education providers.**

(a) The fees for school approval and approval of continuing nursing education providers shall be the following:
(1) Application for approval -- schools of nursing ..... $1,000.00
(2) Annual report of approval -- schools of nursing ..... 200.00
(3) Application for approval of continuing nursing education providers ..... 200.00
(4) Annual report for continuing nursing education providers ..... 50.00
(5) Approval of single continuing nursing education offerings ..... 100.00
(6) Consultation by request, per day on site ..... 300.00

(b) All fees prescribed in subsection (a) shall be due at the time of application.

(c) The person, firm, corporation, or institution requesting the board's consultation services shall pay each consultant's travel expenses.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1118a; effective, E-82-18, Sept. 30, 1981; effective May 1, 1982; amended Sept. 14, 1992; amended May 17, 1993; amended May 9, 1994; amended June 14, 2002; amended April 17, 2015.)

## CONTINUING EDUCATION FOR NURSES

**60-9-105. Definitions.** For the purposes of these regulations, each of the following terms shall have the meaning specified in this regulation:

(a) "Approval" means the act of determining that a providership application or course offering meets applicable standards based on review of either the total program or the individual offering.

(b) "Approved provider" means a person, organization, or institution that is approved by the board and is responsible for the development, administration, and evaluation of the continuing nursing education (CNE) program or offering.

(c) "Authorship" means a person's development of a manuscript for print or a professional paper for presentation. Each page of text that meets the definition of continuing nursing education (CNE), as defined in K.S.A. 65-1117 and amendments thereto, and is formatted according to the American psychological association's guidelines shall equal three contact hours.

(1) Authorship of a manuscript means a person's development of an original manuscript for a journal article or text accepted by a publisher for statewide or national distribution on a subject related to nursing or health care. Proof of acceptance from the editor or the published work shall be deemed verification of this type of credit. Credit shall be awarded only once per topic per renewal period.

(2) Authorship of a professional research paper means a person's completion of a nursing research project as principal investigator, co-investigator, or project director and presentation to other health professionals. A program brochure, course syllabus, or letter from the offering provider identifying the person as a presenter shall be deemed verification of this type of credit. Credit shall be awarded only once each renewal period.

(d) "Behavioral objectives" means the intended outcome of instruction stated as measurable learning behaviors.

(e) "Certificate" means a document that is proof of completion of an offering consisting of one or more contact hours.

(f) "CE transcript" means a document that is proof of completion of one or more CNE offerings. Each CE transcript shall be maintained by a CNE provider.

(g) "Clinical hours" means planned learning experiences in a clinical setting. Three clinical hours equal one contact hour.

(h) "College course" means a class taken through a college or university, as described in K.S.A. 65-1119 and amendments thereto, and meeting the definition of CNE in K.S.A. 65-1117, and amendments thereto. One college credit hour equals 15 contact hours.

(i) "Computer-based instruction" means a learning application that provides computer control to solve an instructional problem or to facilitate an instructional opportunity.

(j) "Contact hour" means 50 total minutes of participation in a learning experience that meets the definition of CNE in K.S.A. 65-1117, and amendments thereto. Fractions of hours over 30 minutes to be computed towards a contact hour shall be accepted.

(k) "Distance learning" means the acquisition of knowledge and skills through information and instruction delivered by means of a variety of technologies.

(l) "Independent study" means a self-paced learning activity undertaken by the participant in an unstructured setting under the guidance of and monitored by an approved provider. This term shall include self-study programs, distance learning, and authorship.

(m) "Individual offering approval" and "IOA" mean a request for approval of an education offering meeting the definition of CNE, pursuant to K.S.A. 65-1117 and amendments thereto, but not presented by an approved provider or other acceptable approving body, as described in K.S.A. 65-1119 and amendments thereto.

(n) "In-service education" and "on-the-job training" mean learning activities in the work setting designed to assist the individual in fulfilling job responsibilities. In-service education and on-the-job-training shall not be eligible for CNE credit.

(o) "Offering" means a single CNE learning experience designed to enhance knowledge, skills, and professionalism related to nursing. Each offering shall consist of at least 30 minutes to be computed towards a contact hour.

(p) "Orientation" means formal or informal instruction designed to acquaint employees with the institution and the position. Orientation shall not be considered CNE.

(q) "Program" means a plan to achieve overall CNE goals.

(r) "Refresher course" means a course of study providing review of basic preparation and current developments in nursing practice.

(s) "Total program evaluation" means a systematic process by which an approved provider analyzes outcomes of the overall CNE program in order to make subsequent decisions.

**History:** (Authorized by and implementing K.S.A. 2015 Supp. 65-1117 and K.S.A. 65-1119; effective Sept. 2, 1991; amended March 9, 1992; amended April 26, 1993; amended April 3, 1998; amended April 20, 2001; amended Oct. 25, 2002; amended March 6, 2009; amended May 10, 2013; amended April 29, 2016.)

**60-9-106. Continuing nursing education for license renewal.**

(a) At the time of license renewal, any licensee may be required to submit proof of completion of 30 contact hours of approved continuing nursing education (CNE). This proof shall be documented as follows:

(1) For each approved CNE offering, a certificate or a transcript that clearly designates the number of hours of approved CNE that have been successfully completed, showing the following:

(A) Name of CNE offering;

(B) provider name or name of the accrediting organization;

(C) provider number or number of the accrediting organization, if applicable;

(D) offering date;

(E) number of contact hours awarded; and

(F) the licensee's name and license number as shown on the course roster; or

(2) an approved Kansas state board of nursing IOA, which shall include approval of college courses that meet the definition of continuing education in K.S.A. 65-1117, and amendments thereto.

(b) The required 30 contact hours of approved CNE shall have been completed during the most recent prior licensing period between the first date of the licensing period and the date that the licensee submits the renewal application as required in K.S.A. 65-1117, and amendments thereto, and K.A.R. 60-3-108. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.

(c) Acceptable CNE may include any of the following:

(1) An offering presented by an approved long-term or single provider;

(2) an offering as designated in K.S.A. 65-1119, and amendments thereto;

(3) an offering for which a licensee has submitted an IOA, which may include credit requested for a college course that meets the definition of continuing education in K.S.A. 65-1117, and amendments thereto. Before licensure renewal, the licensee may submit an application for an IOA to the board, accompanied by the following:

(A) An agenda representing exact learning time in minutes;

(B) official documentation of successfully completed hours, which may include a certificate of completion or an official college transcript; and

(C) learning or behavior objectives describing learning outcomes;

(4) a maximum of 15 contact hours for the first-time preparation and presentation as an instructor of an approved offering to licensed nurses. Two contact hours of instructor credit shall be granted for each hour of presentation;

(5) an offering utilizing a board-approved curriculum developed by the American heart association, emergency nurses association, or Mandt, which may include the following:

(A) Advanced cardiac life support;

(B) emergency nursing pediatric course;

(C) pediatric advanced life support;

(D) trauma nurse core course;

(E) neonatal resuscitation program; or

(F) Mandt program;

(6) independent study;

(7) distance learning offerings;

(8) a board-approved refresher course if required for licensure reinstatement as specified in K.A.R. 60-3-105 and K.A.R. 60-11-116;

(9) participation as a member of a nursing organization board of directors or the state board of nursing, including participation as a member of a committee reporting to the board. The maximum number of allowable contact hours shall be six and shall not exceed three contact hours each year. A letter from an officer of the board confirming the dates of participation shall be accepted as documentation of this type of CNE; or

(10) any college courses in science, psychology, sociology, or statistics that are prerequisites for a nursing degree.

(d) Fractions of hours over 30 minutes to be computed towards a contact hour shall be accepted.

(e) Contact hours shall not be recognized by the board for any of the following:

(1) Identical offerings completed within a renewal period;

(2) offerings containing the same content as courses that are part of basic preparation at the level of current licensure or certification;

(3) in-service education, on-the-job training, orientation, and institution-specific courses;

(4) an incomplete or failed college course or any college course in literature and composition, public speaking, basic math, algebra, humanities, or other general education requirements unless the course meets the definition of CNE;

(5) offerings less than 30 minutes in length; or

(6) a board-approved refresher course for license renewal.

**History:** (Authorized by and implementing K.S.A. 2015 Supp. 65-1117; effective Sept. 2, 1991; amended April 3, 1998; amended April 20, 2001; amended July 20, 2007; amended May 10, 2013; amended April 29, 2016.)

**60-9-107. Approval of continuing nursing education.**

(a) Offerings of approved providers shall be recognized by the board.

(1) Long-term provider. A completed application for initial approval or five-year renewal for a long-term continuing nursing education (CNE) providership shall be submitted to the board at least 60 days before a scheduled board meeting.

(2) Single offering provider. The application for a single CNE offering shall be submitted to the board at least 30 days before the anticipated date of the first offering.

(b) Each applicant shall include the following information on the application:

(1) (A) The name and address of the organization; and

(B) the name and address of the department or unit within the organization responsible for approving CNE, if different from the name and address of the organization;

(2) the name, education, and experience of the program coordinator responsible for CNE, as specified in subsection (c);

(3) written policies and procedures, including at least the following areas:

(A) Assessing the need and planning for CNE activities;

(B) fee assessment;

(C) advertisements or offering announcements. Published information shall contain the following statement: "(name of provider) is approved as a provider of CNE by the Kansas State Board of Nursing. This course offering is approved for contact hours applicable for APRN, RN, or LPN relicensure. Kansas State Board of Nursing provider number: _____";

(D) for long-term providers, the offering approval process as specified in subsection (d);

(E) awarding contact hours, as specified in subsection (e);

(F) verifying participation and successful completion of the offering, as specified in subsections (f) and (g);

(G) recordkeeping and record storage, as specified in subsection (h);

(H) notice of change of coordinator or required policies and procedures. The program coordinator shall notify the board in writing of any change of the individual responsible for the providership or required policies and procedures within 30 days; and

(I) for long-term providers, a copy of the total program evaluation plan; and

(4) the proposed CNE offering, as specified in subsection (i).

(c) (1) Long-term provider. The program coordinator for CNE shall meet these requirements:

(A) Be a licensed professional nurse;

(B) have three years of clinical experience;

(C) have one year of experience in developing and implementing nursing education; and

(D) have a baccalaureate degree in nursing, except those individuals exempted under K.S.A. 65-1119 (e)(6) and amendments thereto.

(2) Single offering provider. If the program coordinator is not a nurse, the applicant shall also include the name, education, and experience of the nurse consultant. The individual responsible for CNE or the nurse consultant shall meet these requirements:

(A) Be licensed to practice nursing; and

(B) have three years of clinical experience.

(d) For long-term providers, the policies and procedures for the offering approval process shall include the following:

(1) A summary of the planning;

(2) the behavioral objectives;

(3) the content, which shall meet the definition of CNE in K.S.A. 65-1117 and amendments thereto;

(4) the instructor's education and experience, documenting knowledge and expertise in the content area;

(5) a current bibliography that is reflective of the offering content. The bibliography shall include books published within the past 10 years, periodicals published within the past five years, or both; and

(6) an offering evaluation that includes each participant's assessment of the following:

(A) The achievement of each objective; and

(B) the expertise of each individual presenter.

(e) An approved provider may award any of the following:

(1) Contact hours as documented on an offering agenda for the actual time attended, including partial credit for one or more contact hours;

(2) credit for fractions of hours over 30 minutes to be computed towards a contact hour;

(3) instructor credit, which shall be twice the length of the first-time presentation of an approved offering, excluding any standardized, prepared curriculum;
(4) independent study credit that is based on the time required to complete the offering, as documented by the provider's pilot test results; or
(5) clinical hours.

(f) (1) Each provider shall maintain documentation to verify that each participant attended the offering. The provider shall require each participant to sign a daily roster, which shall contain the following information:
(A) The provider's name, address, provider number, and coordinator;
(B) the date and title of the offering, and the presenter or presenters; and
(C) the participant's name and license number, and the number of contact hours awarded.
(2) Each provider shall maintain documentation to verify completion of each independent study offering, if applicable. To verify completion of an independent study offering, the provider shall maintain documentation that includes the following:
(A) The provider's name, address, provider number, and coordinator;
(B) the participant's name and license number, and the number of contact hours awarded;
(C) the title of the offering;
(D) the date on which the offering was completed; and
(E) either the completion of a posttest or a return demonstration.

(g) (1) A certificate of attendance shall be awarded to each participant after completion of an offering, or a CE transcript shall be provided according to the policies and procedures of the long-term provider.
(2) Each certificate and each CE transcript shall be complete before distribution to the participant.
(3) Each certificate and each CE transcript shall contain the following information:
(A) The provider's name, address, and provider number;
(B) the title of the offering;
(C) the date or dates of attendance or completion;
(D) the number of contact hours awarded and, if applicable, the designation of any independent study or instructor contact hours awarded;
(E) the signature of the individual responsible for the providership; and
(F) the name and license number of the participant.

(h) (1) For each offering, the approved provider shall retain the following for two years:
(A) A summary of the planning;
(B) a copy of the offering announcement or brochure;
(C) the title and objectives;
(D) the offering agenda or, for independent study, pilot test results;
(E) a bibliography;
(F) a summary of the participants' evaluations;
(G) each instructor's education and experience; and
(H) documentation to verify completion of the offering, as specified in subsection (f).
(2) The record storage system used shall ensure confidentiality and easy retrieval of records by authorized individuals.
(3) Each approved single offering CNE provider shall submit to the board the original signature roster and a typed, alphabetized roster of individuals who have completed an offering, within 15 working days of course completion.

(i) (1) Long-term provider application. The provider shall submit two proposed offerings, including the following:
(A) A summary of planning;
(B) a copy of the offering announcement or brochure;
(C) the title and behavioral objectives;
(D) the offering agenda or, for independent study, pilot test results;
(E) each instructor's education and experience;
(F) a current bibliography, as specified in paragraph (d)(5); and
(G) the offering evaluation form.
(2) Single offering provider application. The provider shall submit the proposed offering, which shall include the information specified in paragraphs (i)(1)(A) through (G).

(j) (1) Long-term provider application. Each prospective coordinator who has submitted an application for a long-term CNE providership that has been reviewed once and found deficient, or has approval pending, shall submit all materials required by this regulation at least two weeks before the next board meeting. If the application does not meet all of the requirements or the prospective coordinator does not contact the board for an extension on or before this deadline, the application process shall be considered abandoned. A new application and fee shall be submitted if a providership is still desired.

(2) Single offering approval application. If the application for a single offering has been reviewed and found deficient, or has approval pending, the CNE coordinator shall submit all materials required by this regulation before the date of offering. If the application does not meet requirements before the offering deadline, the application shall be considered abandoned. There shall be no retroactive approval of single offerings.

(k) (1) Each approved long-term provider shall pay a fee for the upcoming year and submit an annual report for the period of July 1 through June 30 of the previous year on or before the deadline designated by the board. The annual report shall contain the following:

(A) An evaluation of all the components of the providership based on the total program evaluation plan;

(B) a statistical summary report; and

(C) for each of the first two years of the providership, a copy of the records for one offering as specified in paragraphs (h)(1)(A) through (H).

(2) If approved for the first time after January 1, a new long-term provider shall submit only the statistical summary report and shall not be required to submit the annual fee or evaluation based on the total program evaluation plan.

(l) (1) If the long-term provider does not renew the providership, the provider shall notify the board in writing of the location at which the offering records will be accessible to the board for two years.

(2) If a provider does not continue to meet the criteria for current approval established by regulation or if there is a material misrepresentation of any fact with the information submitted to the board by an approved provider, approval may be withdrawn or conditions relating to the providership may be applied by the board after giving the approved provider notice and an opportunity to be heard.

(3) Any approved provider that has voluntarily relinquished the providership or has had the providership withdrawn by the board may reapply as a long-term provider. The application shall be submitted on forms supplied by the board and accompanied by the designated, nonrefundable fee as specified in K.A.R. 60-4-103(a)(3).

**History:** (Authorized by and implementing K.S.A. 2011 Supp. 65-1117 and K.S.A. 65-1119; effective March 9, 1992; amended Sept. 27, 1993; amended April 3, 1998; amended Oct. 25, 2002; amended March 6, 2009; amended May 10, 2013.)

## PERFORMANCE OF SELECTED NURSING PROCEDURES IN SCHOOL SETTINGS

**60-15-101. Definitions and functions.**

(a) Each registered professional nurse in a school setting shall be responsible for the nature and quality of all nursing care that a student is given under the direction of the nurse in the school setting. Assessment of the nursing needs, the plan of nursing action, implementation of the plan, and evaluation of the plan shall be considered essential components of professional nursing practice and shall be the responsibility of the registered professional nurse.

(b) In fulfilling nursing care responsibilities, any nurse may perform the following:

(1) Serve as a health advocate for students receiving nursing care;

(2) counsel and teach students, staff, families, and groups about health and illness;

(3) promote health maintenance;

(4) serve as health consultant and a resource to teachers, administrators, and other school staff who are providing students with health services during school attendance hours or extended program hours; and

(5) utilize nursing theories, communication skills, and the teaching-learning process to function as part of the interdisciplinary evaluation team.

(c) The services of a registered professional nurse may be supplemented by the assignment of tasks to a licensed practical nurse or by the delegation of selected nursing tasks or procedures to unlicensed personnel under supervision by the registered professional nurse or licensed practical nurse.

(d) “Unlicensed person” means anyone not licensed as a registered professional nurse or licensed practical nurse.

(e) “Delegation” means authorization for an unlicensed person to perform selected nursing tasks or procedures in the school setting under the direction of a registered professional nurse.

(f) “Activities of daily living” means basic caretaking or specialized caretaking.

(g) “Basic caretaking” means the following tasks:

(1) Bathing;

(2) dressing;

(3) grooming;

(4) routine dental, hair, and skin care;

(5) preparation of food for oral feeding;

(6) exercise, excluding occupational therapy and physical therapy procedures;
(7) toileting, including diapering and toilet training;
(8) handwashing;
(9) transferring; and
(10) ambulation.

(h) "Specialized caretaking" means the following procedures:
(1) Catherization;
(2) ostomy care;
(3) preparation and administration of gastrostomy tube feedings;
(4) care of skin with damaged integrity or potential for this damage;
(5) medication administration;
(6) taking vital signs;
(7) blood glucose monitoring, which shall include taking glucometer readings and carbohydrate counting; and
(8) performance of other nursing procedures as selected by the registered professional nurse.

(i) "Anticipated health crisis" means that a student has a previously diagnosed condition that, under predictable circumstances, could lead to an imminent risk to the student's health.

(j) "Investigational drug" means a drug under study by the United States food and drug administration to determine safety and efficacy in humans for a particular indication.

(k) "Nursing judgment" means the exercise of knowledge and discretion derived from the biological, physical, and behavioral sciences that requires special education or curriculum.

(l) "Extended program hours" means any program that occurs before or after school attendance hours and is hosted or controlled by the school.

(m) "School attendance hours" means those hours of attendance as defined by the local educational agency or governing board.

(n) "School setting" means any public or nonpublic school environment.

(o) "Supervision" means the provision of guidance by a nurse as necessary to accomplish a nursing task or procedure, including initial direction of the task or procedure and periodic inspection of the actual act of accomplishing the task or procedure.

(p) "Medication" means any drug required by the federal or state food, drug, and cosmetic acts to bear on its label the legend "Caution: Federal law prohibits dispensing without prescription," and any drugs labeled as investigational drugs or prescribed for investigational purposes.

(q) "Task" means an assigned step of a nursing procedure.

(r) "Procedure" means a series of steps followed in a regular, specific order that is part of a defined nursing practice.

**History:** (Authorized by K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1129; implementing K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1165; effective, T-89-23, May 27, 1988; amended, T-60-9-12-88, Sept. 12, 1988; amended Feb. 13, 1989; amended Sept. 2, 1991; amended Sept. 11, 1998; amended July 29, 2005; amended March 6, 2009.)

**60-15-102. Delegation procedures.** Each registered professional nurse shall maintain the primary responsibility for delegating tasks to unlicensed persons. The registered professional nurse, after evaluating a licensed practical nurse's competence and skill, may decide whether the licensed practical nurse under the direction of the registered professional nurse may delegate tasks to unlicensed persons in the school setting. Each nurse who delegates nursing tasks or procedures to a designated unlicensed person in the school setting shall meet the requirements specified in this regulation.

(a) Each registered professional nurse shall perform the following:
(1) Assess each student's nursing care needs;
(2) formulate a plan of care before delegating any nursing task or procedure to an unlicensed person; and
(3) formulate a plan of nursing care for each student who has one or more long-term or chronic health conditions requiring nursing interventions.

(b) The selected nursing task or procedure to be delegated shall be one that a reasonable and prudent nurse would determine to be within the scope of sound nursing judgment and that can be performed properly and safely by an unlicensed person.

(c) Any designated unlicensed person may perform basic caretaking tasks or procedures as defined in K.A.R. 60-15-101 (g) without delegation. After assessment, a nurse may delegate specialized caretaking tasks or procedures as defined in K.A.R. 60-15-101 (h) to a designated unlicensed person.

(d) The selected nursing task or procedure shall be one that does not require the designated unlicensed person to exercise nursing judgment or intervention.

(e) If an anticipated health crisis that is identified in a nursing care plan occurs, the unlicensed person may provide immediate care for which instruction has been provided.

(f) The designated unlicensed person to whom the nursing task or procedure is delegated shall be adequately identified by name in writing for each delegated task or procedure.

(g) Each registered professional nurse shall orient and instruct unlicensed persons in the performance of the nursing task or procedure. The registered professional nurse shall document in writing the unlicensed person's demonstration of the competency necessary to perform the delegated task or procedure. The designated unlicensed person shall co-sign the documentation indicating the person's concurrence with this competency evaluation.

(h) Each registered professional nurse shall meet these requirements:

(1) Be accountable and responsible for the delegated nursing task or procedure;

(2) at least twice during the academic year, participate in joint evaluations of the services rendered;

(3) record the services performed; and

(4) adequately supervise the performance of the delegated nursing task or procedure in accordance with the requirements of K.A.R. 60-15-103.

**History:** (Authorized by K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1129; implementing K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1165; effective, T-89-23, May 27, 1988; amended, T-60-9-12-88, Sept. 12, 1988; amended Feb. 13, 1989; amended Sept. 2, 1991; amended Sept. 11, 1998; amended March 6, 2009.)

**60-15-103. Supervision of delegated tasks or procedures.** Each registered professional or licensed practical nurse shall supervise all nursing tasks or procedures delegated to a designated unlicensed person in the school setting in accordance with the following conditions.

(a) The registered professional nurse shall determine the degree of supervision required after an assessment of appropriate factors, including the following:

(1) The health status and mental and physical stability of the student receiving the nursing care;

(2) the complexity of the task or procedure to be delegated;

(3) the training and competency of the unlicensed person to whom the task or procedure is to be delegated; and

(4) the proximity and availability of the registered professional nurse to the designated unlicensed person when the selected nursing task or procedure will be performed.

(b) The supervising registered professional nurse may designate whether or not the nursing task or procedure is one that may be delegated or supervised by a licensed practical nurse.

(c) Each delegating registered professional nurse shall have a plan to provide nursing care when the delegating nurse is absent.

**History:** (Authorized by and implementing K.S.A. 1997 Supp. 65-1124; effective, T-89-23, May 27, 1988; amended, T-60-9-12-88, Sept. 12, 1988; amended Feb. 13, 1989; amended Sept. 2, 1991; amended Sept. 11, 1998.)

**60-15-104. Medication administration in a school setting.** Any registered professional nurse may delegate the procedure of medication administration in a school setting only in accordance with this article.

(a) Any registered professional nurse may delegate the procedure of medication administration in a school setting to unlicensed persons if both of the following conditions are met:

(1) The administration of the medication does not require dosage calculation. Measuring a prescribed amount of liquid medication, breaking a scored tablet for administration, or counting carbohydrates for the purpose of determining dosage for insulin administration shall not be considered calculation of the medication dosage.

(2) The nursing care plan requires administration by accepted methods of administration other than those listed in subsection (b).

(b) A registered professional nurse shall not delegate the procedure of medication administration in a school setting to unlicensed persons when administered by any of these means:

(1) By intravenous route;

(2) by intramuscular route, except when administered in an anticipated health crisis;

(3) through intermittent positive-pressure breathing machines; or

(4) through an established feeding tube that is not inserted directly into the abdomen.

**History:** (Authorized by K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1129; implementing K.S.A. 2007 Supp. 65-1124 and K.S.A. 65-1165; effective, T-89-23, May 27, 1988; amended, T-60-9-12-88, Sept. 12, 1988; amended Feb. 13, 1989; amended Sept. 2, 1991; amended Sept. 11, 1998; amended July 29, 2005; amended March 6, 2009.)

## INTRAVENOUS FLUID THERAPY FOR LICENSED PRACTICAL NURSE

**60-16-101. Definitions.**

(a) "Administration of intravenous fluid therapy" means utilization of the nursing process to deliver the therapeutic infusion or injection of substances through the venous system.

(b) "Admixing" means the addition of a diluent to a medication or a medication to an intravenous solution.
(c) "Calculating" means the mathematical determination of the flow rate and medication dosages.
(d) "Competency examination" means a written examination and demonstration of mastery of clinical components of intravenous fluid therapy.
(e) "Discontinuing" means stopping the intravenous flow or removing the intravenous access device, or both, based on an authorized order or nursing assessment.
(f) "Evaluating" means ongoing analysis of the monitored patient response to the prescribed intravenous therapy for determination of the appropriate patient outcomes.
(g) "Initiating" means the starting of intravenous therapy based on an authorized order by a licensed individual. Initiating shall include the following:
  (1) The patient assessment;
  (2) selection and preparation of materials;
  (3) calculation; and
  (4) insertion and stabilization of the cannula.
(h) "Intravenous push" means direct injection of medication into the venous circulation.
(i) "Maintaining" means adjusting the control device for continuance of the prescribed intravenous therapy administration rate.
(j) "Monitoring" means the ongoing assessment, observation, and communication of each patient's response to prescribed intravenous therapy. The infusion equipment, site, and flow rate shall be included in the monitoring process.
(k) "Titration of medication" means an adjustment of the dosage of a medication to the amount required to bring about a given reaction in the individual receiving the medication.

**History:** (Authorized by and implementing K.S.A. 2001 Supp. 65-1136; effective Nov. 21, 1994; amended June 12, 1998; amended Oct. 29, 1999; amended June 14, 2002.)

**60-16-102. Scope of practice for licensed practical nurse performing intravenous fluid therapy.**

(a) A licensed practical nurse under the supervision of a registered professional nurse may engage in a limited scope of intravenous fluid treatment, including the following:
  (1) Monitoring;
  (2) maintaining basic fluids;
  (3) discontinuing intravenous flow and an intravenous access device not exceeding three inches in length in peripheral sites only; and
  (4) changing dressings for intravenous access devices not exceeding three inches in length in peripheral sites only.
(b) Any licensed practical nurse who has met one of the requirements under K.S.A. 65-1136, and amendments thereto, may perform, in addition to the functions specified in subsection (a) of this regulation, the following procedures relating to the expanded administration of intravenous fluid therapy under the supervision of a registered professional nurse:
  (1) Calculating;
  (2) adding parenteral solutions to existing patent central and peripheral intravenous access devices or administration sets;
  (3) changing administration sets;
  (4) inserting intravenous access devices that meet these conditions:
    (A) Do not exceed three inches in length; and
    (B) are located in peripheral sites only;
  (5) adding designated premixed medications to existing patent central and peripheral intravenous access devices or administration sets either by continuous or intermittent methods;
  (6) maintaining the patency of central and peripheral intravenous access devices and administration sets with medications or solutions as allowed by policy of the facility;
  (7) changing dressings for central venous access devices;
  (8) administering continuous intravenous drip analgesics and antibiotics; and
  (9) performing the following procedures in any facility having continuous on-site registered professional nurse supervision:
    (A) Admixing intravenous medications; and
    (B) administering by direct intravenous push any drug in a drug category that is not specifically listed as a banned drug category in subsection (c), including analgesics, antibiotics, antiemetics, diuretics, and corticosteroids, as allowed by policy of the facility.
(c) A licensed practical nurse shall not perform any of the following:
  (1) Administer any of the following by intravenous route:
    (A) Blood and blood products, including albumin;
    (B) investigational medications;

(C) anesthetics, antianxiety agents, biological therapy, serums, hemostatics, immunosuppressants, muscle relaxants, human plasma fractions, oxytocics, sedatives, tocolytics, thrombolytics, anticonvulsants, cardiovascular preparations, antineoplastics agents, hematopoietics, autonomic drugs, and respiratory stimulants;

(D) intravenous fluid therapy in the home health setting, with the exception of the approved scope of practice authorized in subsection (a); or

(E) intravenous fluid therapy to any patient under the age of 12 or any patient weighing less than 80 pounds, with the exception of the approved scope of practice authorized in subsection (a);

(2) initiate total parenteral nutrition or lipids;

(3) titrate medications;

(4) draw blood from a central intravenous access device;

(5) remove a central intravenous access device or any intravenous access device exceeding three inches in length; or

(6) access implantable ports for any purpose.

(d) Licensed practical nurses qualified by the board before June 1, 2000 may perform those activities listed in subsection (a) and paragraph (b)(9)(A) regardless of their intravenous therapy course content on admixing.

(e) This regulation shall limit the scope of practice for each licensed practical nurse only with respect to intravenous fluid therapy and shall not restrict a licensed practical nurse's authority to care for patients receiving this therapy.

**History:** (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended Dec. 13, 1996; amended June 12, 1998; amended Oct. 29, 1999; amended Jan. 24, 2003; amended May 18, 2012; amended Oct. 18, 2013.)

**60-16-103. Course approval procedure.**

(a) Each person desiring to obtain approval for an intravenous (IV) fluid therapy course shall submit a proposal to the board.

(b) The proposal shall contain the following:

(1) The name and qualifications of the coordinator;

(2) the name and qualifications of each faculty member of the course;

(3) the mechanism through which the provider will determine that each licensed practical nurse seeking to take the course meets the admission requirements;

(4) a description of the educational and clinical facilities that will be utilized;

(5) the outlines of the classroom curriculum and the clinical curriculum, including time segments. These curricula shall meet the requirements of K.A.R. 60-16-104(g);

(6) the methods of student evaluation that will be used, including a copy of the final written competency examination and the final clinical competency examination; and

(7) if applicable, a request for continuing education approval meeting the following criteria:

(A) For each long-term provider, the IV therapy course provider number shall be printed on the certificates and the course roster, along with the long-term provider number ; and

(B) for each single program provider, the single program application shall be completed. There shall be no cost to this provider for the initial single offering providership.

(c) Continuing education providers shall award at least 32 contact hours to each LPN who completes the course. Continuing education providers may award 20 contact hours, one time only, to each RN who completes the course.

(d) After initial approval, each change in the course shall be provided to the board for approval before the change is implemented.

(e) (1) Each IV fluid therapy course provider shall submit to the board an annual report for the period of July 1 through June 30 of the respective year that includes the total number of licensees taking the intravenous fluid therapy course, the number passing the course, and the number of courses held.

(2) The single program providership shall be effective for two years and may be renewed by submitting the single offering provider application and by paying the fee specified in K.A.R. 60-4-103(a)(5). Each single program provider who chooses not to renew the providership shall notify the board in writing of the location at which the rosters and course materials will be accessible to the board for three years.

(3) Each long-term provider shall submit the materials outlined in subsection (b) with the five-year long-term provider renewal.

(f) If a course does not meet or continue to meet the criteria for approval established by the board or if there is a material misrepresentation of any fact with the information submitted to the board by a provider, approval may be withheld, made conditional, limited, or withdrawn by the board after giving the provider notice and an opportunity to be heard.

**History:** (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended June 14, 2002; amended July 29, 2005; amended May 18, 2012.)

**60-16-104. Standards for course; competency examination; recordkeeping.**

(a) The purpose of the intravenous fluid therapy course shall be to prepare licensed practical nurses to perform safely and competently the activities as defined in K.A.R. 60-16-102. The course shall be based on the nursing process and current intravenous nursing standards of practice.

(b) The course shall meet both of the following conditions:
  (1) Consist of at least 30 hours of instruction; and
  (2) require at least eight hours of supervised clinical practice, which shall include at least one successful peripheral venous access procedure and the initiation of an intravenous infusion treatment modality on an individual.

(c) To be eligible to enroll in an intravenous fluid therapy course, the individual shall be a nurse with a current license.

(d) The intravenous therapy course coordinator shall meet the following requirements:
  (1) Be licensed as a registered professional nurse;
  (2) be responsible for the development and implementation of the intravenous fluid therapy course; and
  (3) have experience in intravenous fluid therapy and knowledge of the intravenous therapy standards.

(e) (1) Each primary faculty member shall meet the following requirements:
    (A) Be currently licensed to practice as a registered professional nurse in Kansas;
    (B) have clinical experience within the past five years that includes intravenous fluid therapy; and
    (C) maintain competency in intravenous fluid therapy.
  (2) Each guest lecturer shall have professional preparation and qualifications for the specific subject area in which that individual instructs.

(f) (1) Each classroom shall contain sufficient space, equipment, and teaching aids to meet the course objectives.
  (2) The facility in which clinical practice and the competency examination are conducted shall allow the students and faculty access to the intravenous fluid therapy equipment and intravenous fluid therapy recipients, and to the pertinent records for the purpose of documentation.
  (3) There shall be a signed, written agreement between the provider and a cooperating health care facility that specifies the roles, responsibilities, and liabilities of each party. This written agreement shall not be required if the only health care facility to be used is also the provider.

(g) (1) The board-approved intravenous fluid therapy curriculum shall be the following standards of the infusion nurses society's supplement titled "infusion nursing standards of practice," volume 34, number 1S, dated January/February 2011, which are hereby adopted by reference:
    (A) "Nursing practice":
      (i) "Practice setting" standard 1.1, 1.2, 1.3;
      (ii) "neonatal and pediatric patients" standard 2.1, 2.2, 2.3, which shall be taught only for clinical knowledge and awareness;
      (iii) "older adult patients" standard 3.1, 3.2;
      (iv) "ethics" standard 4.1, 4.2, 4.3, 4.4;
      (v) "scope of practice" standard 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7;
      (vi) "competence and competency validation" standard 6.1, 6.2, 6.3, 6.4;
      (vii) "quality improvement" standard 7.1;
      (viii) "research and evidence-based practice" standard 8.1, 8.2, 8.3, 8.4; and
      (ix) "policies, procedures, and/or practice guidelines" standard 9.1, 9.2, 9.3, 9.4;
    (B) "patient care":
      (i) "Orders for the initiation and management of infusion therapy" standard 10.1, 10.2, 10.3, 10.4, 10.5, 10.6, 10.7;
      (ii) "patient education" standard 11.1, 11.2;
      (iii) "informed consent" standard 12.1, 12.2, 12.3; and
      (iv) "plan of care" standard 13.1, 13.2, 13.3, 13.4, 13.5, 13.6, 13.7;
    (C) "documentation":
      (i) "Documentation" standard 14.1, 14.2, 14.3, 14.4, 14.5;
      (ii) "unusual occurrence and sentinel event reporting" standard 15.1, 15.2;
      (iii) "product evaluation, integrity, and defect reporting" standard 16.1, 16.2, 16.3, 16.4, 16.5; and
      (iv) "verification of products and medications" standard 17.1, 17.2, 17.3;
    (D) "infection prevention and safety compliance":
      (i) "Infection prevention" standard 18.1, 18.2, 18.3, 18.4, 18.5, 18.6, 18.7, 18.8, 18.9;
      (ii) "hand hygiene" standard 19.1, 19.2, 19.3, 19.4;
      (iii) "scissors" standard 21.1, 21.2, 21.3;
      (iv) "safe handling and disposal of sharps, hazardous materials, and hazardous waste" standard 22.1, 22.2, 22.3, 22.4, 22.5, 22.6, 22.7, 22.8;
      (v) "disinfection of durable medical equipment" standard 23.1, 23.2, 23.3, 23.4;

(vi) "transmission-based precautions" standard 24.1, 24.2; and
(vii) "latex sensitivity or allergy" standard 25.1, 25.2, 25.3;

(E) "infusion equipment":
(i) "Add-on devices" standard 26.1, 26.2, 26.3;
(ii) "needleless connectors" standard 27.1, 27.2, 27.3, 27.4, 27.5;
(iii) "filters" standard 28.1, 28.2, 28.3, 28.4. 28.5, 28.6;
(iv) "flow-control devices" standard 29.1, 29.2, 29.3, 29.4, 29.5; and
(v) "tourniquets" standard 31.1, 31.2;

(F) "vascular access device selection and placement":
(i) "Vascular access device selection" standard 32.1, 32.2, 32.3, 32.4;
(ii) "site selection" standard 33.1, 33.2, 33.3, 33.4, 33.5. Standard 33.4 and 33.5 shall be taught only for clinical knowledge and awareness;
(iii) "local anesthesia for vascular access device placement and access" standard 34.1, 34.2, 34.3, 34.4;
(iv) "vascular access site preparation and device placement" standard 35.1, 35.2, 35.3, 35.4, 35.5, 35.6, 35.7, 35.8;
(v) "vascular access device stabilization" standard 36.1, 36.2, 36.3, 36.4;
(vi) "joint stabilization" standard 37.1, 37.2, 37.3, 37.4; and
(vii) "site protection" standard 38.1, 38.2, 38.3;

(G) "site care and maintenance":
(i) "Administration set change" standard 43.1, 43.2, 43.3, 43.4, 43.5, 43.6;
(ii) "vascular access device removal" standard 44.1, 44.2, 44.3, 44.4, 44.5, 44.6;
(iii) "flushing and locking" standard 45.1, 45.2, 45.3, 45.4; and
(iv) "vascular access device site care and dressing changes" standard 46.1, 46.2, 46.3, 46.4;

(H) "infusion-related complications":
(i) "Phlebitis" standard 47.1, 47.2, 47.3;
(ii) "infiltration and extravasation" standard 48.1, 48.2, 48.3;
(iii) "infection" standard 49.1, 49.2, 49.3, 49.4;
(iv) "air embolism" standard 50.1, 50.2, 50.3, 50.4, 50.5, 50.6;
(v) "catheter embolism" standard 51.1, 51.2, 51.3, 51.4;
(vi) "catheter-associated venous thrombosis" standard 52.1, 52.2, 52.3, 52.4; and
(vii) "central vascular access device malposition" standard 53.1, 53.2, 53.3, 53.4, 53.5; and

(I) "infusion therapies":
(i) "Parenteral medication and solution administration" standard 61.1, 61.2, 61.3, which shall be taught only for clinical knowledge and awareness;
(ii) "antineoplastic therapy" standard 62.1, 62.2, 62.3, 62.4, which shall be taught only for clinical knowledge and awareness;
(iii) "biologic therapy" standard 63.1, 63.2, 63.3, which shall be taught only for clinical knowledge and awareness;
(iv) "patient-controlled analgesia" standard 64.1, 64.2, 64.3, 64.4;
(v) "parenteral nutrition" standard 65.1, 65.2, 65.3, 65.4, 65.5, 65.6, 65.7, which shall be taught only for clinical knowledge and awareness;
(vi) "transfusion therapy" standard 66.1, 66.2, 66.3, 66.4;
(vii) "moderate sedation/analgesia using intravenous infusion" standard 67.1, 67.2, 67.3, 67.4, which shall be taught only for clinical knowledge and awareness; and
(viii) "administration of parenteral investigational drugs" standard 68.1, 68.2, 68.3, which shall be taught only for clinical knowledge and awareness.

(2) Each provider shall submit documentation of the use of the curriculum required in this subsection to the board on or before February 1, 2013.

(h) (1) (A) The final written competency examination shall be constructed from the board-approved pool of test questions and shall be based on the board-approved test plan.

(B) The final written competency examination shall consist of at least 50 questions and shall require a passing grade of 80 percent or above.

(2) The final clinical competency examination shall require successful completion of the procedures on the board-approved competency checklist, which shall include the following procedures: preparation for the insertion of an intravenous line, insertion of an intravenous access device, conversion of a peripheral catheter to an intermittent infusion device, calculation of infusion flow rate, changing an intravenous fluid container, changing administration set tubing, care of the infusion site, flushing an intermittent infusion device, discontinuance of an intravenous infusion, administration of intravenous medication including both piggyback administration and direct injection, and admixing intravenous medications.

(i) (1) The faculty shall complete the final record sheet, which shall include competencies and scores.
(2) The intravenous fluid therapy course coordinator shall perform the following:
(A) Award a certificate to each licensed nurse documenting successful completion of both the final written competency examination and the final clinical competency examination;
(B) submit to the board, within 15 days, a typed, alphabetized roster listing the name and license number of each individual who has successfully completed the course and the date of completion. The coordinator shall ensure that each roster meets the following requirements:
(i) RN and LPN participants shall be listed on separate rosters; and
(ii) the roster shall include the provider name and address, the single or long-term provider number, the IV therapy course provider number, and the signature of the coordinator; and
(C) maintain the records of each individual who has successfully completed the course for a period of at least five years.

**History:** (Authorized by and implementing K.S.A. 65-1136; effective Nov. 21, 1994; amended Dec. 13, 1996; amended Oct. 29, 1999; amended April 20, 2001; amended June 14, 2002; amended July 29, 2005; amended May 18, 2012.)

## ADVANCED PRACTICE REGISTERED NURSE STATUTES

**65-1130. Advance practice registered nurse; standards and requirements for licensure; rules and regulations; roles, titles and abbreviations; prescription of drugs authorized; licensure of currently registered individuals.**

(a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.
(b) The board shall establish standards and requirements for any professional nurse who desires to obtain licensure as an advanced practice registered nurse. Such standards and requirements shall include, but not be limited to, standards and requirements relating to the education of advanced practice registered nurses. The board may give such examinations and secure such assistance as it deems necessary to determine the qualifications of applicants.
(c) The board shall adopt rules and regulations applicable to advanced practice registered nurses which:
(1) Establish roles and identify titles and abbreviations of advanced practice registered nurses which are consistent with nursing practice specialties recognized by the nursing profession.
(2) Establish education and qualifications necessary for licensure for each role of advanced practice registered nurse established by the board at a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which advanced practice registered nurses are authorized to perform. Advanced practice registered nursing is based on knowledge and skills acquired in basic nursing education, licensure as a registered nurse and graduation from or completion of a master's or higher degree in one of the advanced practice registered nurse roles approved by the board of nursing.
(3) Define the role of advanced practice registered nurses and establish limitations and restrictions of such role. The board shall adopt a definition of the role under this subsection (c)(3) which is consistent with the education and qualifications required to obtain a license as an advanced practice registered nurse, which protects the public from persons performing functions and procedures as advance practice registered nurses for which they lack adequate education and qualifications and which authorizes advanced practice registered nurses to perform acts generally recognized by the profession of nursing as capable of being performed, in a manner consistent with the public health and safety, by persons with postbasic education in nursing. In defining such role the board shall consider:
(A) The education required for a licensure as an advanced practice registered nurse;
(B) the type of nursing practice and preparation in specialized advanced practice skills involved in each role of advanced practice registered nurse established by the board;
(C) the scope and limitations of advanced practice nursing prescribed by national advanced practice organizations; and
(D) acts recognized by the nursing profession as appropriate to be performed by persons with postbasic education in nursing.
(d) An advanced practice registered nurse may prescribe drugs pursuant to a written protocol as authorized by a responsible physician. Each written protocol shall contain a precise and detailed medical plan of care for each classification of disease or injury for which the advanced practice registered nurse is authorized to prescribe and shall specify all drugs which may be prescribed by the advanced practice registered nurse.

Any written prescription order shall include the name, address and telephone number of the responsible physician. The advanced practice registered nurse may not dispense drugs, but may request, receive and sign for professional samples and may distribute professional samples to patients pursuant to a written protocol as authorized by a responsible physician. In order to prescribe controlled substances, the advanced practice registered nurse shall

(1) register with the federal drug enforcement administration; and

(2) notify the board of the name and address of the responsible physician or physicians. In no case shall the scope of authority of the advanced practice registered nurse exceed the normal and customary practice of the responsible physician. An advanced practice registered nurse certified in the role of registered nurse anesthetist while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 65-1164, including, and amendments thereto, shall be subject to the provisions of K.S.A. 65-1151 and 65-1164, inclusive and amendments thereto, with respect to drugs and anesthetic agents and shall not be subject to the provisions of this subsection. For the purposes of this subsection, "responsible physician" means a person licensed to practice medicine and surgery in Kansas who has accepted responsibility for the protocol and the actions of the advanced practice registered nurse when prescribing drugs.

(e) As used in this section, “drug” means those articles and substances defined as drugs in K.S.A. 65-1626 and 65-4101, and amendments thereto.

(f) A person registered to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to the effective date of this act shall be deemed to be licensed to practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to the effective date of this act shall be processed as an application for licensure under this act.

**History:** (L. 1983, ch. 206, § 2; L. 1989, ch. 192, § 1; L. 1999, ch. 115, § 1; L. 2011, ch. 114, § 44; Jan.1, 2012.)

**65-1131. Advance practice registered nurse; licensure; fees; license with temporary permit; exempt license.**

(a) Licensure.

(1) Upon application to the board by any professional nurse in this state and upon satisfaction of the standards and requirements established by the board under K.S.A. 65-1130, and amendments thereto, the board may issue a license to such applicant authorizing the applicant to perform the duties of an advance practice registered nurse as defined by the board under K.S.A. 65-1130, and amendments thereto.

(2) The board may issue a license to practice nursing as an advance practice registered nurse to an applicant who has been duly licensed or certified as an advance practice registered nurse under the laws of another state or territory if, in the opinion of the board, the applicant meets the licensure qualifications required of an advance practice registered nurse in this state. Verification of the applicant’s licensure or certification status shall be required from the original state of licensure or certification.

(3) An application to the board for a license, a license with temporary permit, renewal of a license and reinstatement of a license shall be upon such form and contain such information as the board may require and shall be accompanied by a fee, to be established by rules and regulations adopted by the board, to assist in defraying the expenses in connection with the issuance of licenses as advance practice registered nurses, in an amount fixed by the board under K.S.A. 65-1118, and amendments thereto.

(4) An application for initial licensure or endorsement will be held awaiting completion of meeting qualifications for a time period specified in rules and regulations.

(5) The executive administrator of the board shall remit all moneys received pursuant to this section to the state treasurer as provided by K.S.A. 74-1108, and amendments thereto.

(b) The board may grant a one-time temporary permit to practice as an advance practice registered nurse for a period of not more than 180 days pending completion of the application for a license.

(c) Exempt license. The board may issue an exempt license to any advance practice registered nurse as defined in rules and regulations who makes written application for such license on a form provided by the board, who remits a fee as established pursuant to K.S.A. 65-1118, and amendments thereto, and who is not regularly engaged in advanced practice registered nursing practice in Kansas but volunteers advanced practice registered nursing services or is a charitable health care provider as defined by K.S.A. 75-6102, and amendments thereto. Each exempt advance practice registered nurse shall be subject to all provisions of the nurse practice act. Each exempt license may be renewed biennially subject to the provisions of this section. To convert an exempt license to an active license, the exempt advance practice registered nurse shall meet all the requirements of subsection (a) or K.S.A. 65-1132, and amendments thereto. The board shall have authority to write rules and regulations to carry out the provisions of this section.

**History:** (L. 1983, ch. 206, § 3; L. 1992, ch. 135, § 3, L. 1997, ch. 158, § 6; L. 1999, ch. 84, § 3; L. 2011, ch. 114, § 45; Jan. 1, 2012.)

**65-1132. Renewal of license for advance practice registered nurse; reinstatement of lapsed license.**

(a) All licenses issued under the provisions of this act, whether initial or renewal, shall expire every two years. The expiration date shall be established by rules and regulations of the board. The board shall send a notice for renewal of a license to every advance practice registered nurse at least 60 days prior to the expiration date of such person's license. Every person who desires to renew such license shall file with the board, on or before the date of expiration of such license:

(1) A renewal application together with the prescribed biennial renewal fee;

(2) evidence of completion of continuing education in the advanced practice registered nurse role, which has met the continuing education requirement for an advanced practice registered nurse as developed by the board or by a national organization whose certifying standards are approved by the board as equal to or greater than the corresponding standards established by the board. These continuing education credits approved by the board may be applied to satisfy the continuing education requirements established by the board for licensed professional nurses under K.S.A. 65-1117, and amendments thereto, if the board finds such continuing education credits are equivalent to those required by the board under K.S.A. 65-1117, and amendments thereto; and

(3) proof of evidence of current license as a professional nurse.

Upon receipt of such application and payment of any applicable fee, and upon being satisfied that the applicant for renewal of a license meets the requirements established by the board under K.S.A. 65-1130, and amendments thereto, in effect at the time of initial qualification of the applicant, the board shall verify the accuracy of the application and grant a renewal license.

(b) Any person who fails to secure a renewal license prior to the expiration of the license may secure a reinstatement of such lapsed license by making application therefor on a form provided by the board, upon furnishing proof that the applicant is competent and qualified to act as an advance practice registered nurse and upon satisfying all of the requirements for reinstatement including payment to the board of a reinstatement fee as established by the board.

**History:** (L. 1983, ch. 206, § 4; L. 1993, ch. 194, § 14; L. 2007, ch. 99, § 2; L. 2011, ch. 114, § 46; Jan. 1, 2012.)

**65-1133. Same; educational and training programs for advance practice registered nurses; approval; survey; nationally accredited programs.**

(a) An approved educational and training program for advance practice registered nurses is a program conducted in Kansas which has been approved by the board as meeting the standards and the rules and regulations of the board. An institution desiring to conduct an educational and training program for advance practice registered nurses shall apply to the board for approval and submit satisfactory proof that it is prepared to and will maintain the standards and the required curriculum for advance practice registered nurses as prescribed by this act and by the rules and regulations of the board. Applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board. The approval of an educational program for advance practice registered nurses shall not exceed 10 years after the granting of such approval by the board. An institution desiring to continue to conduct an approved educational program for advance practice registered nurses shall apply to the board for the renewal of approval and submit satisfactory proof that it will maintain the standards and the required curriculum for advance practice registered nurses as prescribed by this act and by the rules and regulations of the board. Applications for renewal of approval shall be made in writing on forms supplied by the board. Each program shall submit annually to the board an annual fee fixed by the board's rules and regulations to maintain the approved status.

(b) A program to qualify as an approved educational programs for advance practice registered nurses must be conducted in the state of Kansas, and the school conducting the program must apply to the board and submit evidence that:

(1) It is prepared to carry out the curriculum prescribed by rules and regulations of the board; and

(2) it is prepared to meet such other standards as shall be established by law and the rules and regulations of the board.

(c) The board shall prepare and maintain a list of programs which qualify as approved educational programs for advance practice registered nurses whose graduates, if they have the other necessary qualifications provided in this act, shall be eligible to apply for licensure as advance practice registered nurses. A survey of the institution or school applying for approval of an educational program for advance practice registered nurses shall be made by an authorized employee of the board or members of the board, who shall submit a written report of the survey to the board. If, in the opinion of the board, the requirements as prescribed by the board in its rules and regulations for approval are met, it shall so approve the program. The board shall resurvey approved programs on a periodic basis as determined by rules and regulations. If the board

determines that any approved program is not maintaining the standards required by this act and by rules and regulations prescribed by the board, notice thereof in writing, specifying the failures of such program, shall be given. A program which fails to correct such conditions to the satisfaction of the board within a reasonable time shall be removed from the list of approved programs until such time as the program shall comply with such standards. All approved programs shall maintain accurate and current records showing in full the theoretical and practical courses given to each student.

(d) The board may accept nationally accredited advanced practice registered nurse programs as defined by rules and regulations adopted by the board in accordance with K.S.A. 65-1130, and amendments thereto:

(1) Advanced practice registered nurse programs which have received accreditation from a board recognized national nursing accreditation agency shall file evidence of initial accreditation with the board, and thereafter shall file all reports from the accreditation agency and any notice of any change in school accreditation status.

(2) Advanced practice registered nurse programs holding approval based upon national accreditation are also responsible for complying with all other requirements as determined by rules and regulations of the board.

(3) The board may grant approval to an advanced practice registered nurse program with national accreditation for a continuing period not to exceed 10 years.

**History:** (L. 1983, ch. 206, § 5; L. 2000, ch. 113, § 2; L. 2001, ch. 161, § 6; L. 2011, ch. 114, § 47; Jan. 1, 2012.)

**65-1134. Citation of Kansas nurse practice act.** The acts contained in article 11 of chapter 65 of the Kansas Statutes Annotated and amendments thereto or made specifically supplemental thereto shall be construed together and may be cited as the Kansas nurse practice act.

**History:** (L. 1983, ch. 206, § 5; L. 1993, ch. 194, § 3; July 1.)

## APRN
## RULES & REGULATIONS

**60-11-101. Definition of expanded role; limitations; restrictions.**

(a) Each "advanced practice registered nurse" (APRN), as defined by K.S.A. 65-1113 and amendments thereto, shall function in an expanded role to provide primary, secondary, and tertiary health care in the APRN's role of advanced practice. Each APRN shall be authorized to make independent decisions about advanced practice nursing needs of families, patients, and clients and medical decisions based on the authorization for collaborative practice with one or more physicians. This regulation shall not be deemed to require the immediate and physical presence of the physician when care is given by an APRN. Each APRN shall be directly accountable and responsible to the consumer.

(b) "Authorization for collaborative practice" shall mean that an APRN is authorized to develop and manage the medical plan of care for patients or clients based upon an agreement developed jointly and signed by the APRN and one or more physicians. Each APRN and physician shall jointly review the authorization for collaborative practice annually. Each authorization for collaborative practice shall include a cover page containing the names and telephone numbers of the APRN and the physician, their signatures, and the date of review by the APRN and the physician. Each authorization for collaborative practice shall be maintained in either hard copy or electronic format at the APRN's principal place of practice.

(c) "Physician" shall mean a person licensed to practice medicine and surgery by the state board of healing arts.

(d) "Prescription" shall have the meaning specified in K.S.A. 65-1626, and amendments thereto.

(e) "Prescription order" shall have the meaning specified in K.S.A. 65-1626, and amendments thereto.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended March 31, 2000; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-102. Roles of advanced practice registered nurses.** The four roles of advanced practice registered nurses licensed by the board of nursing shall be the following:

(a) Clinical nurse specialist;

(b) nurse anesthetist;

(c) nurse-midwife; and

(d) nurse practitioner.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-103. Educational requirements for advanced practice registered nurses**.

(a) To be issued a license as an advanced practice registered nurse in any of the roles of advanced practice, as identified in K.A.R. 60-11-102, each applicant shall meet at least one of the following criteria:

(1) Complete a formal, post-basic nursing education program located or offered in Kansas that has been approved by the board and prepares the nurse to function in the advanced role for which application is made;

(2) complete a formal, post-basic nursing education program that is not located or offered in Kansas but is determined by the board to meet the standards for program approval established by K.A.R. 60-17-101 through 60-17-108;

(3) have completed a formal, post-basic nursing education program that could be no longer in existence but is determined by the board to meet standards at least as stringent as those required for program approval by the board at the time of graduation;

(4) hold a current license to practice as an advanced practice registered nurse in the role for which application is made and that meets the following criteria:

(A) Was issued by a nursing licensing authority of another jurisdiction; and

(B) required completion of a program meeting standards equal to or greater than those established by K.A.R. 60-17-101 through 60-17-108; or

(5) complete a formal educational program of post-basic study and clinical experience that can be demonstrated by the applicant to have sufficiently prepared the applicant for practice in the role of advanced practice for which application is made. The applicant shall show that the curriculum of the program is consistent with public health and safety policy and that it prepared individuals to perform acts generally recognized by the nursing profession as capable of being performed by persons with post-basic education in nursing.

(b) Each applicant for a license as an advanced practice registered nurse in a role other than anesthesia or midwifery shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (a) before July 1, 1994;

(2) if none of the requirements in subsection (a) have been met before July 1, 1994, meet one of the requirements of subsection (a) and hold a baccalaureate or higher degree in nursing; or

(3) if none of the requirements in subsection (a) have been met before July 1, 2002, meet one of the requirements of subsection (a) and hold a master's or higher degree in a clinical area of nursing.

(c) Each applicant for a license as an advanced practice registered nurse in the role of anesthesia shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (a) before July 1, 2002; or

(2) if none of the requirements in subsection (a) have been met before July 1, 2002, meet one of the requirements of subsection (a) and hold a master's degree or a higher degree in nurse anesthesia or a related field.

(d) Each applicant for a license as an advanced practice registered nurse in the role of midwifery shall meet one of the following requirements:

(1) Have met one of the requirements of subsection (a) before July 1, 2000;

(2) If none of the requirements in subsection (a) have been met before July 1, 2000, meet one of the requirements of subsection (a) and hold a baccalaureate degree in nursing; or

(3) if none of the requirements in subsection (a) have been met before January 1, 2010, meet one of the requirements of subsection (a) and hold a master's degree or a higher degree in nursing, midwifery, or a related field.

(e) A license may be granted if an individual has been certified by a national nursing organization whose certification standards have been approved by the board as equal to or greater than the corresponding standards established by the board for obtaining a license to practice as an advanced practice registered nurse. National nursing organizations with certification standards that meet this standard shall be identified by the board, and a current list of national nursing organizations with certification standards approved by the board shall be maintained by the board. Any licensee may request that a certification program be considered by the board for approval and, if approved, included by the board on its list of national nursing organizations with approved certification standards.

(f) Each applicant who completes an advanced practice registered nurse program after January 1, 1997 shall have completed three college hours in advanced pharmacology or the equivalent.

(g) Each applicant who completes an advanced practice registered nurse program after January 1, 2001 in a role other than anesthesia or midwifery shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.

(h) Each applicant who completes an advanced practice registered nurse program after July 1, 2009 shall have completed three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent.

(i) Notwithstanding the provisions of subsections (a) through (h), each applicant for a license as an advanced

practice registered nurse who has not gained 1,000 hours of advanced nursing practice during the five years preceding the date of application shall be required to successfully complete a refresher course as defined by the board.

**History:** (Authorized by and implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended, T-60-11-14-90, Nov. 14, 1990; amended, T-60-3-14-91, March 14, 1991; amended Sept. 2, 1991; amended March 9, 1992; amended Sept. 14, 1992; amended April 26, 1993; amended Sept. 6, 1994; amended Jan. 3, 1997; amended March 31, 2000; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-104. Functions of the advanced practice registered nurse in the role of nurse practitioner.** Each advanced practice registered nurse in the role of nurse practitioner shall function in an advanced role at a specialized level, through the application of advanced knowledge and skills and shall be authorized to perform the following:

(a) Provide health promotion and maintenance, disease prevention, and independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto, of acute and chronic diseases;

(b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;

(c) provide health care services for which the nurse practitioner is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;

(d) provide health care for individuals by managing health problems encountered by patients and clients; and

(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-104a. Protocol requirements; prescription orders**.

(a) Each written protocol that an advanced practice registered nurse is to follow when prescribing, administering, or supplying a prescription-only drug shall meet the following requirements:

(1) Specify for each classification of disease or injury the corresponding class of drugs that the advanced practice registered nurse is permitted to prescribe;

(2) be maintained in either a loose-leaf notebook or a book of published protocols. The notebook or book of published protocols shall include a cover page containing the following data:

(A) The names, telephone numbers, and signatures of the advanced practice registered nurse and a responsible physician who has authorized the protocol; and

(B) the date on which the protocol was adopted or last reviewed; and

(3) be kept at the advanced practice registered nurse's principal place of practice.

(b) Each advanced practice registered nurse shall ensure that each protocol is reviewed by the advanced practice registered nurse and physician at least annually.

(c) Each prescription order in written form shall meet the following requirements:

(1) Include the name, address, and telephone number of the practice location of the advanced practice registered nurse;

(2) include the name, address, and telephone number of the responsible physician;

(3) be signed by the advanced practice registered nurse with the letters A.P.R.N.;

(4) be from a class of drugs prescribed pursuant to protocol; and

(5) contain the D.E.A. registration number issued to the advanced practice registered nurse when a controlled substance, as defined in K.S.A. 65-4101(e) and amendments thereto, is prescribed.

(d) Nothing in this regulation shall be construed to prohibit any registered nurse or licensed practical nurse or advanced practice registered nurse from conveying a prescription order orally or administering a drug if acting under the lawful direction of a person licensed to practice either medicine and surgery or dentistry or licensed as an advanced practice registered nurse.

(e) When used in this regulation, terms shall be construed to have the meanings specified in K.S.A. 65-1626, and amendments thereto.

**History:** (Authorized by and implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective, T-60-9-12-88, Sept. 12, 1988; effective Feb. 13, 1989; amended May 7, 1990; amended Jan. 3, 1995; amended March 31, 2000; amended May 18, 2012.)

**60-11-105. Functions of the advanced practice registered nurse in the role of nurse-midwife.** Each advanced practice registered nurse in the role of nurse-midwife shall function in an advanced role through the application of

advanced skills and knowledge of women's health care through the life span and shall be authorized to perform the following:

(a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto;
(b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;
(c) provide health care services for which the nurse-midwife is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
(d) in a manner consistent with subsection (c), provide health care for women, focusing on gynecological needs, pregnancy, childbirth, the postpartum period, care of the newborn, and family planning, including indicated partner evaluation, treatment, and referral for infertility and sexually transmitted diseases; and
(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-106. Functions of the advanced practice registered nurse; nurse anesthetist.** The functions that may be performed by any advanced practice registered nurse functioning in the advanced role of registered nurse anesthetist shall be those functions defined in K.S.A. 65-1158, and amendments thereto.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch.114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended March 31, 2000; amended May 18, 2012.)

**60-11-107. Functions of the advanced practice registered nurse in the role of clinical nurse specialist.** Each advanced practice registered nurse in the role of clinical nurse specialist shall function in an advanced role to provide evidence-based nursing practice within a specialty area focused on specific patients or clients, populations, settings, and types of care. Each clinical nurse specialist shall be authorized to perform the following:

(a) Provide independent nursing diagnosis, as defined in K.S.A. 65-1113(b) and amendments thereto, and treatment, as defined in K.S.A. 65-1113(c) and amendments thereto;
(b) develop and manage the medical plan of care for patients or clients, based on the authorization for collaborative practice;
(c) provide health care services for which the clinical nurse specialist is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
(d) provide care for specific patients or clients or specific populations, or both, utilizing a broad base of advanced scientific knowledge, nursing theory, and skills in assessing, planning, implementing, and evaluating health and nursing care; and
(e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions.

**History:** (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012.)

**60-11-113. License renewal.**

(a) Advanced practice registered nurse licenses shall be renewed on the same biennial cycle as the cycle for the registered professional nurse licensure renewal, as specified in K.A.R. 60-3-108.
(b) On and after January 1, 2013, each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to the advanced practice registered nurse role during the most recent prior license period. Proof of completion of 30 contact hours of approved CNE in the advanced practice nurse role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.
(c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.
(d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of the advanced practice registered nursing role. Each separate offering shall be approved before the individual submits the license renewal application.

(e) Approval shall not be granted for identical offerings completed within the same license renewal period.
(f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.
(g) Fractions of contact hours may be accepted for offerings over 30 minutes.
(h) All CNE accumulated for APRN license renewal shall also be applicable to the renewal of the registered professional nurse license.

**History:** (Authorized by K.S.A. 2011 Supp. 65-1117 and K.S.A. 65-1129; implementing K.S.A. 2011 Supp. 65-1117 and K.S.A. 2011 Supp. 65-1132; effective Sept. 2, 1991; amended May 9, 1994; amended July 29, 2005; amended May 18, 2012.)

**60-11-116. Reinstatement of license.**

(a) Any nurse anesthetist whose Kansas APRN license has lapsed and who desires to obtain a reinstatement of APRN licensure shall meet the same requirements as those in K.A.R. 60-13-110.
(b) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license has lapsed may, within five years of its expiration date, reinstate the license by submitting proof that the applicant has met either of the following requirements:
  (1) Obtained 30 hours of continuing nursing education related to the advanced practice registered nurse role within the preceding two-year period; or
  (2) been licensed in another jurisdiction and, while licensed in that jurisdiction, has accumulated 1,000 hours of advanced practice registered nurse practice within the preceding five-year period.
(c) Any nurse practitioner, clinical nurse specialist, or nurse-midwife whose Kansas APRN license has lapsed for more than five years beyond its expiration date may reinstate the license by submitting evidence of having attained either of the following:
  (1) A total of 1,000 hours of advanced practice registered nurse practice in another jurisdiction within the preceding five-year period and 30 hours of continuing nursing education related to the advanced practice registered nurse role; or
  (2) completion of a refresher course approved by the board.

**History:** (Authorized by K.S.A. 2010 Supp. 65-1117, as amended by L. 2011, ch. 114, sec. 79, and K.S.A. 65-1129; implementing K.S.A. 2010 Supp. 65-1117, as amended by L. 2011, ch. 114, sec. 79, and K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 46; effective Sept. 2, 1991; amended March 22, 2002; amended May 18, 2012.)

**60-11-118. Temporary permit to practice.**

(a) A temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days to an applicant for licensure as an advanced practice registered nurse who meets the following requirements:
  (1) Was previously licensed in this state; and
  (2) is enrolled in a refresher course required by the board for reinstatement of a license that has lapsed for more than five years.
(b) A one-time temporary permit to practice as an advanced practice registered nurse may be issued by the board for a period of not more than 180 days pending completion of the application for a license.

**History:** (Authorized by K.S.A. 65-1129; implementing K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 45; effective Sept. 2, 1991; amended April 26, 1993; amended May 18, 2012.)

**60-11-119. Payment of fees.** Payment of fees for advanced practice registered nurses shall be as follows:

(a) Initial application for license ..... $50.00
(b) Biennial renewal of license ..... 55.00
(c) Application for reinstatement of license without temporary permit ..... 75.00
(d) Application for license with temporary permit ..... 100.00
(e) Application for exempt license ..... 50.00
(f) Renewal of exempt license ..... 50.00

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2013 Supp. 65-1131; implementing K.S.A. 2013 Supp. 65-1118 and 65-1131; effective Sept. 2, 1991; amended May 17, 1993; amended Feb. 6, 1995; amended April 3, 1998; amended July 1, 2001; amended April 20, 2007; amended May 18, 2012; amended July 1, 2014.)

**60-11-120. Expiration dates of licenses; applications.** The expiration dates of all licenses and applications shall be in accordance with K.A.R. 60-3-107 and 60-3-108.

**History:** (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45, and K.S.A. 2010 Supp. 65-1132, as amended by L. 2011, ch. 114, sec. 46; effective April 3, 1998; amended July 29, 2005; amended May 18, 2012.)

**60-11-121. Exempt license.**

(a) An exempt license shall be granted only to an advanced practice registered nurse who meets these requirements:
  (1) Is not regularly engaged as an advanced practice registered nurse in Kansas, but volunteers advanced practice registered nurse services or is a charitable health care provider, as defined by K.S.A. 75-6102 and amendments thereto; and
  (2) (A) Has been licensed in Kansas for the five years previous to applying for an exempt license; or
    (B) has been licensed, authorized, or certified in another jurisdiction for the five years previous to applying for an exempt license and meets all requirements for endorsement into Kansas.

(b) The expiration date of the exempt license shall be in accordance with K.A.R. 60-3-108.

(c) Each application for renewal of an exempt license shall be submitted upon a form furnished by the board and shall be accompanied by the fee in accordance with K.A.R. 60-11-119.

**History:** (Authorized by and implementing K.S.A. 65-1131, as amended by L. 2011, ch. 114, sec. 45; effective April 3, 1998; amended Oct. 25, 2002; amended July 29, 2005; amended May 18, 2012.)

## ADVANCED NURSING EDUCATION PROGRAM

**60-17-101. Definitions.**

(a) An "advanced nursing education program" may be housed within a part of any of the following organizational units within an academic institution:
  (1) A college;
  (2) a school;
  (3) a division;
  (4) a department; or
  (5) an academic unit.

(b) "Affiliating agency" means an agency that cooperates with the advanced nursing education program to provide clinical facilities and resources for selected student experiences.

(c) "Clinical learning" means an active process in which the student participates in advanced nursing activities while being guided by a member of the faculty.

(d) "Contractual agreement" means a written contract or letter signed by the legal representatives of the advanced nursing education program and the affiliating agency.

(e) "Preceptor" means an advanced practice registered nurse or a physician who provides clinical supervision for advanced practice registered nurse students as a part of nursing courses taken during the advanced nursing education program.

(f) "Satellite program" means an existing, accredited advanced nursing education program provided at a location geographically separate from the parent program. The students may spend a portion or all of their time at the satellite location. The curricula in all locations shall be the same, and each credential shall be conferred by the parent institution.

(g) "Transfer student" means an individual who is permitted to apply advanced nursing courses completed at another institution to a different advanced nursing education program.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended May 18, 2012.)

**60-17-102. Requirements for initial approval.**

(a) Each hospital and agency serving as an affiliating agency and providing facilities for clinical experience shall be licensed or accredited by the appropriate credentialing groups.

(b) (1) The advanced nursing education program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide the financial support for the advanced nursing education program.
  (2) Authority and responsibility for administering the advanced nursing education program shall be vested in the nurse administrator of the advanced nursing education program.

(c) Each new advanced nursing education program shall submit, at least 60 days before a scheduled board meeting, an initial application, which shall include all of the following:
  (1) The course of study and credential to be conferred;
  (2) the name and title of the nurse administrator of the advanced nursing education program;
  (3) the name of the controlling body;

(4) the name and title of the administrator for the controlling body;
(5) the organizational chart;
(6) all sources of financial support, including a three-year budget;
(7) a proposed curriculum, indicating the total number of hours of both theoretical and clinical instruction;
(8) the program objectives or outcomes;
(9) the number, qualifications, and assignments of faculty;
(10) the faculty policies;
(11) the admission requirements;
(12) a copy of the current school bulletin or catalog;
(13) a description of clinical facilities and client census data;
(14) contractual agreements by affiliating agencies for clinical facilities, signed at least three months before the first date on which students may enroll;
(15) the program evaluation plan; and
(16) a proposed date of initial admission of students to the program.

(d) Each advanced nursing education program shall be surveyed for approval by the board, with the exception of nurse anesthesia programs, as determined by K.A.R. 60-13-103.
(1) During a survey, the nurse administrator of the program shall make available all of the following:
(A) Administrators, prospective faculty and students, affiliating agencies, representatives, preceptors, and support services personnel to discuss the advanced nursing education program;
(B) minutes of faculty meetings;
(C) faculty and student handbooks;
(D) policies and procedures;
(E) curriculum materials;
(F) a copy of the advanced nursing education program's budget; and
(G) affiliating agency contractual agreements.
(2) The nurse administrator of the advanced nursing education program or designated personnel shall take the survey team to inspect the nursing educational facilities, including satellite program facilities and library facilities.
(3) Upon completion of the survey, the nurse administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting these comments to errors, unclear statements, or omissions.

(e) Each institution contemplating the establishment of an advanced nursing education program shall be surveyed and accredited by the board before the admission of students.

(f) If an advanced nursing education program fails to meet the requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny approval.

**History:** (Authorized by and implementing K.S.A. 2015 Supp. 65-1133; effective March 31, 2000; amended April 20, 2007; amended April 29, 2016.)

**60-17-103. Reapproval requirements.**

(a) Based on the annual report required by K.A.R. 60-17-109, each advanced nursing education program shall be reviewed for reapproval by the board every two years.

(b) Each advanced nursing education program shall be resurveyed every five to 10 years.
(1) A survey may be conducted if there is consistent evidence indicating deficiencies in meeting requirements.
(2) A survey of each nurse anesthesia program shall be conducted as required by K.A.R. 60-13-103 (d)(4).
(3) If the program is accredited by a national nursing accreditation agency, the resurvey visit may be made in coordination with a national nursing accreditation agency visit. Each program without national nursing accreditation shall be resurveyed every five years.

(c) The nurse administrator of each advanced nursing education program shall make available all of the following information during a survey:
(1) Data about the program, including the following:
(A) The number of students;
(B) the legal body responsible for establishing program policies and for support of the program;
(C) an organizational chart; and
(D) a description of the budgetary process;
(2) a description of the nurse administrator's responsibilities;
(3) information about the faculty and preceptors, including the following:
(A) A description of the responsibilities of each position;
(B) the selection policies;
(C) the orientation plan;
(D) faculty organization by-laws; and

(E) the number of full-time and part-time faculty and nonnursing faculty with academic credentials and assignments;

(4) the faculty degree plan;

(5) a copy of the current curriculum with the date of last revision;

(6) a description of education facilities, including classrooms, offices, library, and computers;

(7) a list of clinical facilities;

(8) the number of students enrolled; and

(9) policies for students as listed in K.A.R. 60-2-107.

(d) During a survey, the nurse administrator of the advanced nursing education program shall make available all of the following:

(1) Educational institution administrators, faculty, support services personnel, preceptors, and students;

(2) staff at selected clinical facilities;

(3) faculty minutes for at least the previous three years;

(4) faculty and student handbooks;

(5) student records;

(6) policies and procedures;

(7) curriculum materials;

(8) a copy of the advanced nursing education program's budget; and

(9) affiliating agency contractual agreements.

(e) The nurse administrator of the advanced nursing education program or designated personnel shall take the survey team to the nursing educational facilities, including satellite program facilities, library facilities, and affiliating or clinical facilities.

(f) Upon completion of the survey, the nurse administrator shall correct any inaccurate statements contained in the survey report, limiting these comments to errors, unclear statements, or omissions.

(g) If an advanced nursing education program fails to meet requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny reapproval. This notification shall be made pursuant to K.S.A. 77-512, and amendments thereto, and shall inform the program of its right to a hearing pursuant to the Kansas administrative procedures act.

**History:** (Authorized by and implementing K.S.A. 65-1133; effective March 31, 2000; amended April 20, 2007.)

**60-17-104. Faculty and preceptor qualifications.**

(a) Each nurse faculty member shall be licensed as a registered professional nurse in Kansas.

(b) Each preceptor shall be licensed in the state in which the preceptor is currently practicing. Each preceptor shall complete a preceptor orientation that includes information about the pedagogical aspects of the student-preceptor relationship.

(c) For advanced nursing education programs in the role of nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:

(1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree.

(2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree.

(3) Each nurse faculty member responsible for clinical instruction shall possess a license as an advanced practice registered nurse and a graduate degree.

(d) For advanced nursing education programs in any role other than nurse anesthesia, each nurse faculty member shall have the following academic preparation and experience:

(1) The nurse administrator who is responsible for the development and implementation of the advanced nursing education program shall have had experience in administration or teaching and shall have a graduate degree in nursing.

(2) Each nurse faculty member who is assigned the responsibility of a course shall hold a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.

(3) Each nurse faculty member responsible for coordinating clinical instruction shall possess a license as an advanced practice registered nurse in the role for which clinical instruction is provided and shall have a graduate degree. Each person who is hired as a nurse faculty member shall have a graduate degree in nursing, except for any person whose graduate degree was conferred before July 1, 2005.

(4) Each preceptor or adjunct faculty shall be licensed as an advanced practice registered nurse or shall be licensed as a physician in the state in which the individual is currently practicing. Each preceptor shall complete a preceptor orientation including information about the pedagogical aspects of the student-preceptor relationship.

(e) The nonnursing faculty of each advanced nursing education program shall have graduate degrees in the area of expertise.

(f) The nurse administrator of each advanced nursing education program shall submit to the board a faculty qualification report for each faculty member who is newly employed by the program.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

**60-17-105. Curriculum requirements.**

(a) The faculty in each advanced nursing education program shall fulfill these requirements:
  (1) Identify the competencies of the graduate for each role of advanced nursing practice for which the program provides instruction;
  (2) determine the approach and content for learning experiences;
  (3) direct clinical instruction as an integral part of the program; and
  (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or outcomes of advanced nursing courses.

(b) The curriculum in each advanced nursing education program shall include all of the following:
  (1) Role alignment related to the distinction between practice as a registered professional nurse and the advanced role of an advanced practice registered nurse as specified in K.A.R. 60-11-101;
  (2) theoretical instruction in the role or roles of advanced nursing practice for which the program provides instruction;
  (3) the health care delivery system;
  (4) the ethical and legal implications of advanced nursing practice;
  (5) three college hours in advanced pharmacology or the equivalent;
  (6) three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent for licensure as an advanced practice registered nurse in a role other than nurse anesthesia and nurse midwifery;
  (7) if completing an advanced practice registered nurse program after July 1, 2009, three college hours in advanced pathophysiology or its equivalent and three college hours in advanced health assessment or its equivalent; and
  (8) clinical instruction in the area of specialization, which shall include the following:
    (A) Performance of or ordering diagnostic procedures;
    (B) evaluation of diagnostic and assessment findings; and
    (C) the prescription of medications and other treatment modalities for client conditions.

(c) (1) Each program shall consist of at least 45 semester credit hours or the academic equivalent. As used in this regulation, “academic equivalent” shall mean the prorated proportionate credit for formal academic coursework if that coursework is completed on the basis of trimester or quarter hours rather than semester hours.
  (2) The clinical component shall consist of at least 260 hours of clinical learning. After January 1, 2003, the clinical component shall consist of at least 500 hours of clinical learning. After July 1, 2009, the clinical component shall consist of at least 500 hours of clinical learning in each clinical track, or the program shall provide documentation of the overlap if any clinical track consists of less than 500 clinical hours.

(d) Each nurse administrator shall meet the following requirements:
  (1) Develop and implement a written plan for program evaluation; and
  (2) submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a meeting of the board. The following shall be considered major revisions to the curriculum:
    (A) Any significant change in the plan of curriculum organization; and
    (B) any change in content.

(e) Each nurse administrator shall submit all revisions that are not major revisions, as defined in paragraph (d)(2), to the board or the board's designee for approval.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

**60-17-106. Clinical resources.**

(a) Each advanced nursing education program shall have appropriate written contractual agreements with each affiliating agency. Each signed contract shall be kept on file in the advanced nursing education program office.

(b) Clinical learning experiences and sites shall be selected to provide learning opportunities necessary to achieve the advanced nursing education program objectives or outcomes.

(c) Faculty shall facilitate and evaluate student learning experiences in the clinical area.

(d) Preceptors shall be responsible for assessing performance in the clinical setting.

(e) The advanced nursing education program shall provide verification that each agency used for clinical instruction has clinical facilities that are adequate for the number of students served in terms of space, equipment, and other necessary resources, including an adequate number of patients or clients necessary to meet the program objectives or outcomes.

(f) The advanced nursing education program shall contract with an adequate number of appropriate affiliating agencies so that there will be appropriate clinical experiences to meet curriculum objectives or outcomes. The advanced nursing education program faculty shall provide the affiliating agency staff with the organizing curriculum framework and either the objectives or outcomes for that clinical learning experience. A sufficient number and variety of patients representing appropriate age groups shall be available to provide learning experiences to meet curriculum objectives or outcomes. If more than one advanced nursing education program uses the same affiliating agency, each advanced nursing education program shall document the availability of appropriate learning experiences for all of its students.

**History:** (Authorized by and implementing K.S.A. 65-1133; effective March 31, 2000.)

**60-17-107. Educational facilities.**

(a) Classrooms, laboratories, and conference rooms shall be available at the time needed and shall be adequate in size, number, and type, according to the number of students and the educational purposes for which the rooms are to be used.

(b) The advanced nursing education program shall provide all of the following:

(1) A physical facility that is safe and conducive to learning;

(2) space that is available and adequate in size, amount, and type to provide faculty with privacy in counseling students;

(3) secured space for nursing student records; and

(4) student support services for distance learning if distance learning is provided.

(c) Library holdings, instructional media, and materials shall be of sufficient recency, pertinence, level of content, and quantity as indicated by the curriculum to meet the needs of nursing students and faculty and shall be available to distance learning students.

**History:** (Authorized by and implementing K.S.A. 65-1133; effective March 31, 2000; amended April 20, 2007.)

**60-17-108. Student policies.** Each advanced nursing education program shall have clearly defined written policies for all of the following:

(a) Admission, including a requirement that each student in the program must have a current license to practice as a registered professional nurse in the United States or any of its territories;

(b) transfer students;

(c) readmission;

(d) counseling and guidance;

(e) progression criteria;

(f) student representation in faculty governance; and

(g) graduation.

**History:** (Authorized by and implementing K.S.A. 65-1133; effective March 31, 2000; amended April 20, 2007.)

**60-17-109. Reports.**

(a) Each advanced nursing education program shall submit an annual report to the board on or before June 15 of each year, which shall include all of the following data:

(1) Any changes in program policies, the organizing framework for the curriculum, and program objectives or outcomes;

(2) a description of faculty responsibilities for required advanced nursing courses;

(3) the name, license number, academic credentials, employment date, and full- or part-time status of each member of the program faculty;

(4) the name, license number, academic credentials, professional experience, and place of practice for each preceptor;

(5) a description of the nurse administrator's teaching responsibilities;

(6) the name and address of each affiliating agency;

(7) student enrollment, retention, and graduation statistics;

(8) faculty hiring, retention, and separation statistics;

(9) the total number of library holdings and the number of holdings regarding nursing;

(10) for the most recent year, either a list of new library and audiovisual acquisitions or the budget spent on library and audiovisual acquisitions;

(11) a response to the recommendations and requirements identified by the board based on the program's last annual report or the last survey visit; and

(12) any proposed changes to the program.

(b) If the advanced nursing education program fails to meet requirements of the board or to submit required reports within a designated period of time, the program shall be removed from the list of accredited nursing education programs after it has received notice and has been given an opportunity to be heard. These proceedings shall be conducted in accordance with the provisions of K.S.A. 77-512 and amendments thereto.

**History:** (Authorized by and implementing K.S.A. 65-1133; effective March 31, 2000.)

**60-17-110. Discontinuing an advanced practice registered nurse program.** Each school terminating its program shall submit, for board approval, the school's plan for its currently enrolled students and for disposition of its records.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp.74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

**60-17-111. Requirements for advanced practice registered nurse refresher course.**

(a) (1) Each refresher course that prepares advanced practice registered nurses (APRNs) who have not been actively engaged in advanced nursing practice for more than five years shall be accredited by the board.

(2) If a formal refresher course is not available, an individualized course may be designed for a nurse. Each individualized course shall be accredited by the education specialist.

(b) Each refresher course student shall meet both of the following conditions:

(1) Be licensed currently as a Kansas registered professional nurse; and

(2) have been licensed as an advanced practice registered nurse in Kansas or another state or have completed the education required to be licensed as an advanced practice registered nurse in Kansas.

(c) Continuing nursing education contact hours may be awarded for completion of APRN refresher courses. A contact hour shall equal a 50-minute hour of instruction.

(d) The objectives and outcomes of the refresher course shall be stated in behavioral terms and shall describe the expected competencies of the applicant.

(e) Each instructor for an APRN refresher course shall be licensed as an APRN and shall show evidence of recent professional education and competency in teaching.

(f) Each provider that has been accredited by the board to offer an APRN refresher course shall provide the following classroom and clinical experiences, based on the length of time that the student has not been actively engaged in advanced nursing practice:

(1) For students who have not engaged in advanced nursing practice for more than five years, but less than or equal to 10 years, 150 didactic hours and 350 clinical hours; and

(2) for students who have not engaged in advanced nursing practice for more than 10 years, 200 didactic hours and 500 clinical hours.

(g) The content, methods of instruction, and learning experiences shall be consistent with the objectives and outcomes of the course.

(h) Each refresher course for the roles of nurse practitioner, clinical nurse specialist, and nurse-midwife shall contain the following content:

(1) Didactic:

(A) Role alignment related to recent changes in the area of advanced nursing practice;

(B) the ethical and legal implications of advanced nursing practice;

(C) the health care delivery system;

(D) diagnostic procedures for the area of specialization; and

(E) prescribing medications for the area of specialization; and

(2) clinical:

(A) Conducting diagnostic procedures for the area of specialization;

(B) prescribing medications for the area of specialization;

(C) evaluating the physical and psychosocial health status of a client;

(D) obtaining a comprehensive health history;

(E) conducting physical examinations using basic examination techniques, diagnostic instruments, and laboratory procedures;

(F) planning, implementing, and evaluating care;

(G) consulting with clients and members of the health care team;

(H) managing the medical plan of care prescribed based on protocols or guidelines;

(I) initiating and maintaining records, documents, and other reports;

(J) developing teaching plans; and

(K) counseling individuals, families, and groups on the following issues:

(i) Health;

(ii) illness; and

(iii) the promotion of health maintenance.

(i) Each student in nurse-midwife refresher training shall also have clinical hours in the management of the expanding family throughout pregnancy, labor, delivery, postdelivery care, and gynecological care.

(j) T he provider of each refresher course shall provide official evidence of completion to each individual who successfully completes the refresher course.

**History:** (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44, and K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended July 29, 2005; amended May 18, 2012.)

## REGISTERED NURSE ANESTHETIST STATUTES

**65-1151. Definitions.** As used in K.S.A. 65-1151 to 65-1164, inclusive and amendments thereto:

(a) "Registered nurse anesthetist" means a licensed professional nurse who is authorized to practice as a registered nurse anesthetist.

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

(c) "Local anesthetic" means infiltration anesthesia or anesthesia produced by direct infiltration of local anesthetic solution into the operative site.

(d) "Regional anesthesia" means the use of local anesthetic solutions to produce loss of sensation in circumscribed areas.

(e) "General anesthesia" means one that is complete and affecting the entire body with the loss of consciousness.

(f) "Active anesthesia practice" means clinical practice and anesthesia related administrative, educational, and research activities.

**History:** (L. 1986, ch. 183, § 1; L. 1996, ch. 179, § 1; July 1.)

**65-1152. Qualifications for authorization to practice as a registered nurse anesthetist; approval of schools of nurse anesthesia, criteria.**

(a) In order to obtain authorization from the board of nursing to practice as a registered nurse anesthetist an individual shall meet the following requirements:

(1) Be licensed to practice professional nursing under the Kansas nurse practice act;

(2) has successfully completed a course of study in nurse anesthesia in a school of nurse anesthesia approved by the board;

(3) has successfully completed an examination approved by the board or has been certified by a national organization whose certifying standards are approved by the board as equal to or greater than the corresponding standards established under this act for obtaining authorization to practice as a registered nurse anesthetist; and

(4) be required to successfully complete a refresher course as defined in rules and regulations of the board if the individual has not been in active anesthesia practice for five years preceding the application.

(b) Approval of schools of nurse anesthesia shall be based on approval standards specified in K.S.A. 65-1133 and amendments thereto.

(c) Schools of nurse anesthesia approved by the board under this section shall offer, a masters level degree program in nurse anesthesia.

(d) For the purposes of determining whether an individual meets the requirements of item (2) of subsection (a), the board by rules and regulations shall establish criteria for determining whether a particular school of nurse anesthesia maintains standards which are at least equal to schools of nurse anesthesia which are approved by the board.

**History:** (L. 1986, ch. 183, § 2; L. 1988, ch. 243, § 3; L. 1988, ch, 244, § 1; L. 1988, ch. 245, § 3; L. 1993, ch. 194, § 15; L. 1996, ch. 179, § 2, L. 1997, ch. 158, § 7; L. 2001, ch. 161, § 8; July 1.)

**65-1153.Temporary authorization to practice.** The Board may grant a temporary authorization to practice nurse anesthesia as a registered nurse anesthetist:

(a) For a period of not more than one year to graduates of a school of nurse anesthesia approved by the board pending results of the initial examination; or

(b) for the needed amount of time to complete the clinical portion of a refresher course; or

(c) for a period not to exceed 120 days.

**History:** (L. 1986, ch. 183, § 3; L. 1992, ch. 135, § 4; L. 1996, ch. 179, § 3; L. 2000, ch. 113, § 4; L 2001, ch. 161, § 9, July 1.)

**65-1154. Application; fees; deposit of moneys.** Upon application to the board by any licensed professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. 65-1130, and amendments thereto, the board shall grant an authorization to the applicant to perform the duties of a registered nurse anesthetist and be licensed as an advanced practice registered nurse. An application to the board for an authorization, for an authorization with temporary authorization, for biennial renewal of authorization, for reinstatement of authorization and for reinstatement of authorization with temporary authorization shall be upon such form and contain such information as the board may require and shall be accompanied by a fee to assist in defraying the expenses in connection with the administration of the provisions of this act. The fee shall be fixed by rules and regulations adopted by the board in an amount fixed by the board under K.S.A 65-1118, and amendments thereto. There shall be no fee assessed for the initial, renewal or reinstatement of the advanced practice registered nurse license as long as the registered nurse anesthetist maintains authorization. The executive administrator of the board shall remit all moneys received to the state treasurer as provided by K.S.A. 74-1108, and amendments thereto.
**History:** (L. 1986, ch. 183, § 4; L. 1992, ch. 135, § 5; L. 1996, ch. 179, § 4; L. 2011, ch. 114, § 48; Jan. 1, 2012.)

**65-1155. Expiration of authorizations to practice; system of biennial authorizations; renewal; lapsed authorization; reinstatement.**

(a) All authorizations to practice under this act, whether initial or renewal, shall expire every two years. The biennial authorizations to practice as a registered nurse anesthetist shall expire at the same time as the license to practice as a registered nurse. The board shall send a notice for renewal of the authorization to practice to every registered nurse anesthetist at least 60 days prior to the expiration date of such person's authorization to practice. To renew such authorization to practice the registered nurse anesthetist shall file with the board, before the date of expiration of such authorization to practice, a renewal application together with the prescribed biennial renewal fee. Upon satisfaction of the requirements of subsection (a) of K.S.A. 65-1159 and amendments thereto the board shall grant the renewal of an authorization to practice as a registered nurse anesthetist to the applicant.

(b) Any person who fails to secure the renewal of an authorization to practice prior to the expiration of the authorization may secure a reinstatement of such lapsed authorization by making application on a form provided by the board. Such reinstatement shall be granted upon receipt of proof that the applicant is competent and qualified to act as a registered nurse anesthetist, has satisfied all of the requirements and has paid the board a reinstatement fee as established by the board by rules and regulations in accordance with K.S.A. 65-1118 and amendments thereto.

**History:** (L. 1986, ch. 183, § 5; L. 1988, ch. 242, § 3; L. 1993, ch. 194, § 16; L. 2007, ch. 99 § 3; July 1.)

**65-1158. Duties of registered nurse anesthetists.**

(a) Upon the order of a physician or dentist requesting anesthesia or analgesia care, each registered nurse anesthetist shall be authorized to:
   (1) Conduct a pre- and post- anesthesia and pre- and post-analgesia visit and assessment with appropriate documentation;
   (2) develop a general plan of anesthesia care with the physician or dentist;
   (3) select the method for administration of anesthesia or analgesia;
   (4) select or administer appropriate medications and anesthetic agents during the peri-anesthetic or peri-analgesic period;
   (5) order necessary medications and tests in the peri-anesthetic or peri-analgesia period;
   (6) induce and maintain anesthesia or analgesia at the required levels;
   (7) support life functions during the peri-anesthetic or peri-analgesic period;
   (8) recognize and take appropriate action with respect to patient responses during the peri-anesthetic or peri-analgesic period;
   (9) manage the patient's emergence from anesthesia or analgesia; and
   (10) participate in the life support of the patient.

(b) Each registered nurse anesthetist may participate in periodic and joint evaluation of services rendered, including, but not limited to, chart reviews, case reviews, patient evaluation and outcome of case statistics.

(c) A registered nurse anesthetist shall perform duties and functions in an interdependent role as a member of a physician or dentist directed health care team.

**History:** (L. 1986, ch. 183, § 8; L. 1988, ch. 242, § 4; L. 1996, ch. 179, § 5; L. 2010, ch. 33, § 1; July 1.)

**65-1159. Qualifications of applicant for renewal of an authorization to practice; continuing education.**

(a) The applicant for renewal of an authorization to practice as a registered nurse anesthetist shall:
   (1) Have met the continuing education requirements for a registered nurse anesthetist as developed by the board or by a national organization whose certifying standards are approved by the board as equal to or greater than the corresponding standards established under this act;
   (2) be currently licensed as a professional nurse; and

(3) have paid all applicable fees provided for in this act as fixed by rules and regulations of the board.

(b) Continuing education credits approved by the board for purposes of this subsection may be applied to satisfy the continuing education requirements established by the board for licensed professional nurses under K.S.A. 65-1117 and amendments thereto if the board finds such continuing education credits are equivalent to those required by the board under K.S.A. 65-1117 and amendments thereto.

**History:** (L. 1986, ch. 183, § 9; L. 1996, ch. 179, § 6; July 1.)

**65-1162. Unlawful acts.**

(a) Except as otherwise provided in K.S.A. 65-1151 to 65-1163, inclusive, and amendments thereto any licensed professional nurse or licensed practical nurse who engages in the administration of general or regional anesthesia without being authorized by the board to practice as a registered nurse anesthetist is guilty of a class A misdemeanor.

(b) Any person, corporation, association or other entity, except as otherwise provided in K.S.A. 65-1151 to 65-1163, inclusive, and amendments thereto who engages in any of the following activities is guilty of a misdemeanor:

(1) Employing or offering to employ any person as a registered nurse anesthetist with knowledge that such person is not authorized by the board to practice as a registered nurse anesthetist;

(2) fraudulently seeking, obtaining or furnishing documents indicating that a person is authorized by the board to practice as a registered nurse anesthetist when such person is not so authorized, or aiding and abetting such activities;

(3) using in connection with one's name the title registered nurse anesthetist, the abbreviation R.N.A., or any other designation tending to imply that such person is authorized by the board to practice as a registered nurse anesthetist when such person is not authorized by the board to practice as a registered nurse anesthetist; or

(4) violation of the Kansas nurse practice act or rules and regulations adopted pursuant thereto.

(c) Any person who violates subsection (b) of this section is guilty of a class B misdemeanor except that upon conviction of a second or subsequent violation of this section, the person is guilty of a class A misdemeanor.

**History:** (L. 1986, ch. 183, § 12; L. 1993, ch. 194, § 4; July 1.)

**65-1163. Application of act.** Nothing in this act shall:

(a) Prohibit administration of a drug by a duly licensed professional nurse, licensed practical nurse or other duly authorized person for the alleviation of pain, including administration of local anesthetics;

(b) apply to the practice of anesthesia by a person licensed to practice medicine and surgery, a licensed dentist or a licensed podiatrist;

(c) prohibit the practice of nurse anesthesia by students enrolled in approved courses of study in the administration of anesthesia or analgesic as a part of such course of study;

(d) apply to the administration of a pudendal block by a person who holds a valid license as an advanced practice registered nurse in the role of nurse-midwife;

(e) apply to the administration by a licensed professional nurse of an anesthetic, other than general anesthesia, for a dental operation under the direct supervision of a licensed dentist or for a dental operation under the direct supervision of a person licensed to practice medicine and surgery;

(f) prohibit the practice by any registered nurse anesthetist who is employed by the United States government or in any bureau, division or agency thereof, while in the discharge of official duties; or

(g) prohibit a registered professional nurse from administering general anesthetic agents to a patient on ventilator maintenance in critical care units when under the direction of a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

**History:** (L. 1986, ch. 183, § 13; L. 1988, ch. 246, § 15; L. 1996, ch. 179 § 7; L. 2001, ch. 161, § 10; L. 2011, ch. 114, § 49; Jan. 1, 2012.)

**65-1164. Rules and regulations.** The board of nursing may adopt rules and regulations as necessary to administer the provisions of K.S.A. 65-1151 to 65-1163, inclusive, and amendments thereto.

**History:** (L. 1987, ch. 234, § 3; July 1.)

## RULES & REGULATIONS
## FEES; REGISTERED NURSE ANESTHETIST

**60-13-101. Payment of fees.** Payment of fees for registered nurse anesthetists shall be as follows:

(a) Initial application for authorization as a registered nurse anesthetist ..... $75.00

(b) Biennial renewal of authorization as a registered nurse anesthetist ..... 55.00

(c) Application for reinstatement of authorization as a registered nurse anesthetist without temporary permit ..... 60.00
(d) Application for reinstatement of authorization with temporary permit as a registered nurse anesthetist ..... 70.00
(e) Initial application with temporary authorization to practice as a registered nurse anesthetist ..... 110.00
(f) Certified copy of authorization to practice as a registered nurse anesthetist ..... 20.00

**History:** (Authorized by K.S.A. 65-1129 and 65-1164; implementing K.S.A. 2013 Supp. 65-1118, 65-1154, 65-1155; effective, T-87-38, Nov. 19, 1986; effective May 1, 1987; amended May 17, 1993; amended Feb. 6, 1995; amended July 1, 2001; amended July 1, 2014.)

**60-13-102. Approval procedure.**

(a) Each institution planning to offer a program in registered nurse anesthesia shall:
  (1) notify the board of nursing and supply such information as the board of nursing may request;
  (2) employ a qualified nurse anesthetist administrator. The name and qualifications of the administrator of the program shall be submitted to the board of nursing; and
  (3) employ a second faculty member.
(b) In addition to the requirements in paragraph (a), each program for registered nurse anesthetists established after July 1, 1988 within the state of Kansas, shall be at the masters level. Upon successful completion of the program requirements, the school shall award the student a masters degree.
(c) (1) Written notification of the board's decision to approve or disapprove the program shall be sent to the institution. The program shall be approved by the board of nursing prior to the admission of students.
  (2) Discontinuing a school of nurse anesthesia. Each school terminating its program shall submit a plan to the board for approval. The plan shall provide for students currently enrolled to complete their program and for the disposition of school records.
  (3) Out of state programs. Out of state programs preparing registered nurse anesthetists may be approved after board of nursing review.

**History:** (Authorized by K.S.A. 1986 Supp. 64-1160(b), L. 1987, Ch. 234, Sec. 3; implementing K.S.A. 1986 Supp. 65-1152 (b); effective, T-88-48, Dec. 46, 1987; effective May 1, 1988.)

**60-13-103. School approval requirements.**

(a) In order for a school of nurse anesthesia to be approved by the board of nursing, consideration shall be given as to whether the school meets the requirements in standards I, II, III, IV, and V and the appendix in the "standards for accreditation of nurse anesthesia educational programs," as revised by the council on accreditation of nurse anesthesia educational programs in January 2006 and effective March 1, 2006. These portions are hereby adopted by reference.
(b) An up-to-date list of approved programs shall be prepared and kept by the board.
(c) A program shall not be approved without the formal action of the board.
(d) (1) A program review shall be conducted by the board at least once every five years, or in conjunction with the council on accreditation review cycles.
  (2) The school shall submit to the board of nursing for review a copy of a self-study report documenting compliance with the established standards.
  (3) Additional information may be requested by the board of nursing to assess the school's compliance with standards.
  (4) An on-site visit to the school of nurse anesthesia may be conducted by the board of nursing if there is reason to believe that the program is in violation of the established standards or if the program is placed on public probation by the council on accreditation.

**History:** (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1152; effective, T-88-48, Dec. 16, 1987; effective May 1, 1988; amended March 22, 2002; amended March 6, 2009.)

**60-13-104. Exam approval.** The content outline of the examination administered by the council on certification of nurse anesthetists shall be reviewed and approved annually by the board of nursing.

**History:** (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1152; effective, T-88-48, Dec. 16, 1987; effective May 1, 1988; amended March 6, 2009.)

**60-13-110. Reinstatement of authorization.**

(a) Any applicant whose Kansas authorization has lapsed may, within five years of its expiration date, reinstate the authorization by submitting proof that the applicant has met either of the following requirements:
  (1) Obtained 30 hours of continuing nursing education related to nurse anesthesia within the preceding two-year period; or

(2) been authorized in another jurisdiction and, while authorized in that jurisdiction, has accumulated 1,000 hours of nurse anesthesia practice within the preceding five-year period.

(b) Any applicant whose Kansas authorization has been lapsed for more than five years beyond its expiration date may reinstate the authorization by submitting evidence of having attained either of the following:

(1) A total of 1,000 hours of nurse anesthesia practice in another jurisdiction within the preceding five-year period and 30 hours of continuing nursing education related to nurse anesthesia within the preceding two-year period; or

(2) satisfactory completion of a refresher course approved by the board.

**History:** (Authorized by K.S.A. 65-1164; implementing K.S.A. 2000 Supp. 65-1155, effective Sept. 2, 1991; amended May 9, 1994; amended March 22, 2002.)

**60-13-111. Continuing education definitions.** Continuing education terms shall have the meanings in K.A.R. 60-9-105.

**History:** (Authorized by K.S.A. 1990 Supp. 65-1164; implementing K.S.A. 1990 Supp. 65-1159; effective Sept. 2, 1991.)

**60-13-112. License renewal.**

(a) Each license to practice as a registered nurse anesthetist (RNA) in Kansas shall be subject to the same biennial expiration dates as those specified in K.A.R 60-3-108 for the registered professional nurse license in Kansas.

(b) Each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to nurse anesthesia during the most recent prior licensure period. Proof of completion of 30 contact hours of approved CNE in the nurse anesthesia role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.

(c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.

(d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of nurse anesthesia. Each separate offering shall be approved before the individual submits the license renewal application.

(e) Approval shall not be granted for identical offerings completed within the same license renewal period.

(f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.

(g) Fractions of contact hours may be accepted for offerings over 30 minutes.

(h) All CNE accumulated for RNA license renewal shall also be applicable to the renewal of the registered professional nurse license.

**History:** (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1159; effective Sept. 2, 1991; amended Feb. 16, 1996; amended Oct. 12, 2001; amended July 29, 2005; amended May 18, 2012.)

**60-13-113. Approval of registered nurse anesthetist continuing education.** Approval of registered nurse anesthetist continuing education shall follow the rules of K.A.R. 60-9-107.

**History:** (Authorized by K.S.A. 1989 Supp. 65-1164; implementing K.S.A. 1989 Supp. 65-1159; effective March 9, 1992.)

## LICENSED MENTAL HEALTH TECHNICIAN STATUTES

### EXAMINATION, LICENSURE AND REGULATION OF MENTAL HEALTH TECHNICIANS

**65-4201. Citation of act.** This act may be cited as the mental health technician's licensure act.

**History:** (L. 1973, ch. 308, § 1; July 1, 1974.)

**65-4202. Definitions.** As used in this act:

(a) "Board" means the state board of nursing.

(b) The "practice of mental health technology" means the performance, under the direction of a physician licensed to practice medicine and surgery or registered professional nurse, of services in caring for and treatment of the mentally ill, emotionally disturbed, or people with intellectual disability for compensation

or personal profit, which services:

(1) Involve responsible nursing and therapeutic procedures for patients with mental illness or intellectual disability requiring interpersonal and technical skills in the observations and recognition of symptoms and reactions of such patients, the accurate recording of such symptoms and reactions and the carrying out of treatments and medications as prescribed by a licensed physician or a mid-level practitioner as defined in subsection (ii) of K.S.A. 65-1626 and amendments thereto; and

(2) require an application of techniques and procedures that involve understanding of cause and effect and the safeguarding of life and health of the patient and others; and

(3) require the performance of duties that are necessary to facilitate rehabilitation of the patient or are necessary in the physical, therapeutic and psychiatric care of the patient and require close work with persons licensed to practice medicine and surgery, psychiatrists, psychologists, rehabilitation therapists, social workers, registered nurses, and other professional personnel.

(c) A "licensed mental health technician" means a person who lawfully practices mental health technology as defined in this act.

(d) An "approved course in mental health technology" means a program of training and study including a basic curriculum which shall be prescribed and approved by the board in accordance with the standards prescribed herein, the successful completion of which shall be required before licensure as a mental health technician, except as hereinafter provided.

**History:** (L. 1973, ch. 308, § 2; L. 1988, ch. 259, § 1; L. 1992, ch. 151, § 3; L. 1999, ch. 115, § 17; L. 2012, ch. 91, § 44; July 1.)

**65-4203. Licensure of mental health technicians; application; qualifications; examination; refresher course; temporary permits; exempt license; rules and regulations.**

(a) Qualification. An applicant for a license to practice as a mental health technician shall:

(1) Have graduated from a high school accredited by the appropriate legal accrediting agency or has obtained the equivalent of a high school education, as determined by the state department of education;

(2) have satisfactorily completed an approved course of mental health technology; and

(3) file with the board a written application for a license.

(b) The board may issue a license to an applicant to practice as a mental health technician who has:

(1) Met the qualifications set forth in subsection (a);

(2) passed a written examination in mental health technology as prescribed and conducted by the board; and

(3) no disqualifying factors under K.S.A. 65-4209 and amendments thereto.

(c) Licensure examination within 24 months of graduation.

(1) Persons who do not take the licensure examination within 24 months after graduation shall petition the board for permission prior to taking the licensure examination. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination.

(2) Persons who are unsuccessful in passing the licensure examination within 24 months after graduation shall petition the board for permission prior to subsequent attempts. The board may require the applicant to submit and complete a plan of study prior to taking the licensure examination a subsequent time. The study plan shall contain subjects related to deficiencies identified on the failed examination profiles.

(d) An application for initial licensure will be held awaiting completion of meeting qualifications for a time period specified in rules and regulations.

(e) Refresher course. Notwithstanding the provisions of subsection (a), an applicant for a license to practice as a mental health technician who has not been licensed to practice as a mental health technician for five years preceding application shall be required to successfully complete a refresher course as defined by the board in rules and regulations.

(f) The board may issue a one-time temporary permit to practice as a mental health technician for a period not to exceed 120 days when a reinstatement application has been made.

(g) Exempt license. The board may issue an exempt license to any licensee as defined in rules and regulations who makes written application for such license on a form provided by the board, who remits a fee as established pursuant to K.S.A. 65-4208 and amendments thereto and who is not regularly engaged in mental health technician practice in Kansas but volunteers mental health technician service or is a charitable health care provider as defined by K.S.A. 75-6102 and amendments thereto. Each exempt licensee shall be subject to all provisions of the mental health technician act, except as otherwise provided in this subsection (e). Each exempt license may be renewed biennially subject to the provisions of this section. The holder of the exempt license shall not be required to submit evidence of satisfactory completion of a program of continuing education for renewal. To convert an exempt license to an active license, the exempt licensee shall meet all the requirements of subsection (b) or K.S.A. 65-4205 and amendments thereto. The board shall have authority to write rules and regulations to carry out the

provisions of this section.

(h) The board may adopt rules and regulations as necessary to administer the mental health technician's licensure act.

**History:** (L. 1973, ch. 308, § 3; L. 1975, ch. 333, § 1; L. 1983, ch. 207, § 5; L. 1987, ch. 247, § 1; L. 1992, ch. 151, § 4; L. 1993, ch. 194, § 17; L. 1995, ch. 97, § 4; L. 1997, ch. 158, § 8; L. 1999, ch. 84, § 4; L. 2001, ch. 161, § 11; July 1.)

**65-4204. Title and abbreviations.** Any person so licensed as a mental health technician in this state shall have the right to use the title "licensed mental health technician" and the abbreviation "L.M.H.T.," and it shall be unlawful for any person not licensed as herein provided to assume or use such title or abbreviation.

**History:** (L. 1973, ch. 308, § 4; July 1, 1974.)

**65-4205. Renewal of license application; fees; continuing education; renewal of lapsed license; notification of change in name or address or criminal conviction.**

(a) The board shall send a notice for renewal of license to all licensed mental health technicians at least 60 days prior to the expiration date of December 31. Every mental health technician who desires to renew a license shall file with the board, on or before December 31 of even-numbered years, a renewal application together with the prescribed renewal fee. Every licensee who is no longer engaged in the active practice of mental health technology may so state by affidavit and submit such affidavit with the renewal application. An inactive license may be requested along with payment of a fee as determined by rules and regulations of the board.

Except for the first renewal for a license that expires within 30 months following licensure examination or for renewal of a license that expires within the first nine months following licensure by reinstatement or endorsement, every licensee with an active mental health technology license shall submit with the renewal application evidence of satisfactory completion of a program of continuing education required by the board. The board by duly adopted rules and regulations shall establish the requirements for such program of continuing education. Continuing education means learning experiences intended to build upon the educational and experiential bases of the licensed mental health technician for the enhancement of practice, education, administration, research or theory development to the end of improving the health of the public.

Upon receipt of such application and evidence of satisfactory completion of the required program of continuing education and upon being satisfied that the applicant meets the requirements set forth in K.S.A. 65-4203, and amendments thereto, in effect at the time of initial licensure of the applicant, the board shall verify the accuracy of the application and grant a renewal license.

(b) Any licensee who fails to secure a renewal license within the time specified may secure a reinstatement of such lapsed license by making verified application therefor on a form prescribed by the board together with the prescribed reinstatement fee and, satisfactory evidence as required by the board that the applicant is presently competent and qualified to perform the responsibilities of a mental health technician and of satisfying all the requirements for reinstatement. A reinstatement application for licensure will be held awaiting completion of such documentation as may be required, but such application shall not be held for a period of time in excess of that specified in rules and regulations.

(c) (1) Each licensee shall notify the board in writing of

(A) a change in name or address within 30 days of the change or

(B) a conviction of any felony or misdemeanor, that is specified in rules and regulations adopted by the board, within 30 days from the date the conviction becomes final.

(2) As used in this subsection, ''conviction'' means a final conviction without regard to whether the sentence was suspended or probation granted after such conviction. Also, for the purposes of this subsection, a forfeiture of bail, bond or collateral deposited to secure a defendant's appearance in court, which forfeiture has not been vacated, shall be equivalent to a conviction. Failure to so notify the board shall not constitute a defense in an action relating to failure to renew a license, nor shall it constitute a defense in any other proceeding.

**History:** (L. 1973, ch. 308, § 5; L. 1983, ch. 207, § 6; L. 1993, ch. 194, § 18; L. 1995, ch. 97, § 5; L. 1997, ch. 146, § 3; L. 2007, ch. 99 § 4; July 1.)

**65-4206. Approved courses of mental health technology; standards; qualification; providers of continuing education offerings.**

(a) An approved course of mental health technology is one which has been approved by the board as meeting the standards of this act and the rules and regulations of the board. The course, at a minimum, shall be of six months duration in which the institution shall provide for 18 weeks of schooling, one-half devoted to classroom instruction and one-half to clinical experience and shall include the study of:

(1) Basic nursing concepts;

(2) psychiatric therapeutic treatment; and
(3) human growth, development and behavioral sciences.

(b) An institution which intends to offer a course on mental health technology shall apply to the board for approval and submit evidence that the institution is prepared to and will maintain the standards and curriculum as prescribed by this act and the rules and regulations of the board. The application shall be made in writing upon a form prescribed by the board with the application fee fixed by the board by rules and regulations.

(c) The approval of a school of mental health technology shall expire five years after the granting of such approval by the board. An institution desiring to continue to conduct a course of mental health technology shall apply to the board for the renewal of approval and submit satisfactory proof that the institution will maintain the standards and the basic mental health technology curriculum as prescribed by this act and the rules and regulations of the board. Applications for renewal of approval shall be made in writing on forms supplied by the board. Each institution offering a course of mental health technology shall submit annually to the board an annual fee fixed by the board by rules and regulations to maintain approval status.

(d) Providers of continuing education.

(1) To qualify as an approved provider of continuing education offerings, persons, organizations or institutions proposing to provide such continuing education offerings shall apply to the board for approval and submit evidence that the applicant is prepared to meet the standards and requirements established by the rules and regulations of the board for such continuing education offerings. Initial applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board.

(2) A long-term provider means a person, organization or institution that is responsible for the development, administration and evaluation of continuing education programs and offerings. Qualification as a long-term approved provider of continuing education offerings shall expire five years after the granting of such approval by the board. An approved long-term provider of continuing education offerings shall submit annually to the board the annual fee established by rules and regulations, along with an annual report for the previous fiscal year. Applications for renewal as an approved long-term provider of continuing education offerings shall be made in writing on forms supplied by the board.

(3) Qualification as an approved provider of a single continuing education offering, which may be offered once or multiple times, shall expire two years after the granting of such approval by the board. Approved single continuing education providers shall not be subject to an annual fee or annual report.

(4) In accordance with the rules and regulations adopted by the board, the board may approve individual educational offerings for continuing education which are not subject to approval under other subsections of this section.

(5) The board shall accept offerings as approved continuing education presented by: Colleges that are approved by a state or the national department of education and providers approved by other state boards of nursing, the national league for nursing, the national federation of licensed practical nurses, the American nurses credentialing center or other such national organizations as listed in rule and regulation adopted by the board.

**History:** (L. 1973, ch. 308, § 6; L. 1992, ch. 151, § 5; L. 1997, ch. 146, § 4; May 8.)

**65-4207. List of approved courses; survey of proposed course and institution, resurvey; notice of deficient institution; removal from list; records.**

(a) The board shall prepare and maintain a master list of approved courses on mental health technology:

(1) Which qualify graduates thereof, if they have the other necessary qualifications provided for in this act, to be eligible to apply for a license as a mental health technician; and

(2) which meet the requirements of the board for qualification under a continuing education program for licensed mental health technicians.

(b) A survey of the proposed course and of the institution applying for accreditation of the course on mental health technology shall be made by an authorized employee of the board or members of the board who shall submit a written report concerning such study. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about such course and institution. In entering such contracts the authority to approve such courses shall remain solely with the board.

(c) If, in the opinion of the board, the requirements as prescribed in its rules and regulations for approved courses for mental health technology are met, it shall approve the application and course and post evidence of such approval under the master list. From time to time, as deemed necessary, the board shall cause to be made a resurvey of approved courses and shall have written reports of such resurvey submitted. If the board determines that any previously approved course is not maintaining the content required by this act and by the rules and regulations prescribed, a notice thereof shall be given immediately to the institution specifying the nature and extent of the deficiency. A failure to correct such condition or conditions to the

satisfaction of the board within one year following the notice shall cause the course to be removed from the master list of approved courses on mental health technology. Personnel conducting approved courses shall maintain accurate and current records showing in full the theoretical and practical instruction given to all students.

**History:** (L. 1973, ch. 308, § 7; L. 1983, ch. 207, § 9; L. 1988, ch. 243, § 11; July 1.)

**65-4208. Fees.**

(a) The board shall collect in advance the fees provided for in this act, the amount of which shall be fixed by the board by rules and regulations, but not to exceed:

(1) Mental health technician programs:

| | |
|---|---|
| Annual renewal of program approval | $110.00 |
| Survey of a new program | 220.00 |
| Application for approval of continuing education providers | 200.00 |
| Annual fee for continuing education providers | 75.00 |

(2) Mental health technicians:

| | |
|---|---|
| Application for license | $50.00 |
| Application for renewal of license | 60.00 |
| Application for reinstatement | 70.00 |
| Application for reinstatement of license with temporary permit | 75.00 |
| Certified copy of license | 12.00 |
| Duplicate of license | 12.00 |
| Inactive license | 20.00 |
| Examination | 40.00 |
| Reexamination | 40.00 |
| Verification of current Kansas license to other states | 11.00 |
| Application for exempt license | 50.00 |
| Application for biennial renewal of exempt license | 50.00 |

(b) The board shall accept for payment of fees under this section personal checks, certified checks, cashier's checks, money orders or credit cards. The board may designate other methods of payment, but shall not refuse payment in the form of a personal check. The board may impose additional fees and recover any costs incurred by reason of payments made by personal checks with insufficient funds and payments made by credit cards.

**History:** (L. 1973, ch. 308, § 8; L. 1980, ch. 188, § 3; L. 1983, ch. 207, § 7; L. 1988, ch. 260, § 1; L. 1992, ch. 135, § 6; L. 1997, ch. 158, § 9; L. 1999, ch. 84, § 6; Apr. 22.)

**65-4209. Grounds for disciplinary actions; proceedings; witnesses; costs; professional incompetency defined; criminal history record information.**

(a) The board may deny, revoke, limit or suspend any license to practice as a mental health technician issued or applied for in accordance with the provisions of this act, may publicly or privately censure a licensee or may otherwise discipline a licensee upon proof that the licensee:

(1) is guilty of fraud or deceit in procuring or attempting to procure a license to practice mental health technology;

(2) is unable to practice with reasonable skill and safety due to current abuse of drugs or alcohol;

(3) to be a person who has been adjudged in need of a guardian or conservator, or both, under the act for obtaining a guardian or conservator, or both, and who has not been restored to capacity under that act;

(4) is incompetent or grossly negligent in carrying out the functions of a mental health technician;

(5) has committed unprofessional conduct as defined by rules and regulations of the board;

(6) has been convicted of a felony or has been convicted of a misdemeanor involving an illegal drug offense, unless the applicant or licensee establishes sufficient rehabilitation to warrant the public trust, except that notwithstanding K.S.A. 74-120, and amendments thereto, no license, certificate of qualification or authorization to practice as a licensed mental health technician shall be granted to a person with a felony conviction for a crime against persons as specified in article 34 of chapter 21 of the Kansas Statutes Annotated, prior to their repeal, or article 54 of chapter 21 of the Kansas Statutes Annotated or K.S.A. 2012 Supp. 21-6104, 21-6325, 21-6326 or 21-6418, and amendments thereto;

(7) has committed an act of professional incompetency as defined in subsection (e);

(8) to have willfully or repeatedly violated the provisions of the mental health technician's licensure act or rules and regulations adopted under that act and amendments thereto; or

(9) to have a license to practice mental health technology denied, revoked, limited or suspended, or to be publicly or privately censured, by a licensing authority of another state, agency of the United States government, territory of the United States or country or to have other disciplinary action taken against the applicant or licensee by a licensing authority of another state, agency of the United States

government, territory of the United States or country. A certified copy of the record or order of public or private censure, denial, suspension, limitation, revocation or other disciplinary action of the licensing authority of another state, agency of the United States government, territory of the United States or country shall constitute prima facie evidence of such a fact for purposes of this paragraph (9).

(b) Upon filing of a sworn complaint with the board charging a person with having been guilty of any of the unlawful practices specified in subsection (a), two or more members of the board shall investigate the charges, or the board may designate and authorize an employee or employees of the board to conduct an investigation. After investigation, the board may institute charges. If an investigation, in the opinion of the board, reveals reasonable grounds to believe the applicant or licensee is guilty of the charges, the board shall fix a time and place for proceedings, which shall be conducted in accordance with the Kansas administrative procedure act.

(c) No person shall be excused from testifying in any proceedings before the board under the mental health technician's licensure act or in any civil proceedings under such act before a court of competent jurisdiction on the ground that the testimony may incriminate the person testifying, but such testimony shall not be used against the person for the prosecution of any crime under the laws of this state except the crime of perjury as defined in K.S.A. 2012 Supp. 21-5903, and amendments thereto.

(d) If final agency action of the board in a proceeding under this section is adverse to the applicant or licensee, the costs of the board's proceedings shall be charged to the applicant or licensee as in ordinary civil actions in the district court, but if the board is the unsuccessful party, the costs shall be paid by the board. Witness fees and costs may be taxed by the board according to the statutes relating to procedure in the district court. All costs accrued by the board, when it is the successful party, and which the attorney general certifies cannot be collected from the applicant or licensee shall be paid from the board of nursing fee fund. All moneys collected following board proceedings shall be credited in full to the board of nursing fee fund.

(e) As used in this section, "professional incompetency" means:
   (1) One or more instances involving failure to adhere to the applicable standard of care to a degree which constitutes gross negligence, as determined by the board;
   (2) repeated instances involving failure to adhere to the applicable standard of care to a degree which constitutes ordinary negligence, as determined by the board; or
   (3) a pattern of practice or other behavior which demonstrates a manifest incapacity or incompetence to practice mental health technology.

(f) The board upon request shall receive from the Kansas bureau of investigation such criminal history record information relating to criminal convictions as necessary for the purpose of determining initial and continuing qualifications of licensees of and applicants for licensure by the board.

(g) All proceedings under this section shall be conducted in accordance with the provisions of the Kansas administrative procedure act.

**History:** (L. 1973, ch. 308, § 9; L. 1983, ch. 207, § 8; L. 1984, ch. 313, § 129; L. 1987, ch. 247, § 2; L. 1993, ch. 194, § 5; L. 1995, ch. 97, § 6; L. 1997, ch. 158, § 10; L. 2011, ch. 30, § 245; July 1.)

**65-4210. Disciplinary proceedings; complaint; notice and hearing.**

(a) If a sworn complaint is filed with the board by any person charging a mental health technician with having been guilty of any of the actions specified as a ground for disciplinary action, the board shall fix a time and place for hearing and shall cause a copy of the charges, together with a notice of the time and place fixed for the hearing, to be personally served on the accused mental health technician, in the manner provided by the provisions of the Kansas administrative procedure act.

(b) The hearing shall be conducted in accordance with the provisions of the Kansas administrative procedure act. If the accused mental health technician is found guilty of the charges, or any of them, the board may withhold, revoke, or suspend an existing license, or otherwise discipline a licensee as provided in this act. A revoked or suspended license may be reissued thereafter by the board in its discretion.

(c) Any meeting of the board may be adjourned or continued by an affirmative vote of a majority of the board members present at the hearing or meeting.

**History:** (L. 1973, ch. 308, § 10; L. 1983, ch. 216, § 2; L. 1984, ch. 313, § 130; July 1, 1985.)

**65-4211. Judicial review.**

(a) Any person aggrieved by a decision of the board, and affected thereby, shall be entitled to judicial review in accordance with the provisions of the Kansas judicial review act.

(b) Any party may have review of the final judgment or decision of the district court by appeal to the supreme court pursuant to the Kansas judicial review act.

**History:**(L. 1973, ch. 308, § 11; L. 1984, ch. 313, § 131; L. 2010, ch. 17, § 159; July 1.)

**65-4212. Exclusions.** The provisions of this act shall not be construed as prohibiting:

(a) Gratuitous care of the mentally ill, emotionally disturbed or people with intellectual disability by friends or members of the family;
(b) The practice of mental health technology by students enrolled in approved courses of mental health technology;
(c) The practice of mental health technology by graduates of an approved course in mental health technology who are practicing as mental health technicians pending the results of the first licensing examination scheduled by the board following graduation;
(d) Practice by short-term trainees exploring the practice of mental health technology as a prospective vocation;
(e) Service conducted in accordance with the practice of the tenets of any religious denomination in which persons of good faith rely solely upon spiritual means or prayer in the exercise of their religion to prevent or cure disease;
(f) The practice of any legally qualified mental health technician of this state or another who is employed by the United States government of any bureau, division or agency thereof, while in the discharge of official duties;
(g) Temporary assistance in the therapeutic care of patients where adequate medical, nursing and/or other supervision is provided;
(h) Subsidiary workers in hospitals or related institutions from assisting in the nursing care of patients where adequate medical and nursing supervision is provided; and
(i) The employment of psychiatric aides who have received at least three months instruction in an approved basic aide training program and who work under the supervision of licensed personnel.

**History:** (L. 1973, ch, 308, § 12; L. 1976, ch. 281, § 1; L. 2012, ch. 91, § 45; July 1.)

**65-4213. Injunctions.** When it appears to the board that any person is violating any of the provisions of this act or that any person, firm, corporation, institution or association is employing one not licensed under this act, the board may bring an action in a court of competent jurisdiction for an injunction against such violation without regard to whether proceedings have been or may be instituted before the board or whether criminal proceedings have been or may be instituted.

**History:** (L. 1973, ch. 308, § 13; July 1, 1974.)

**65-4214. Violations; penalties.**

(a) It is a violation of law for any person, including any corporation, association, partnership to:
    (1) Fraudulently obtain, sell, transfer, or furnish any mental health technician diploma, license, renewal of license or record, or aid or abet another therein;
    (2) advertise, represent, or hold oneself out in any manner as a mental health technician or to practice as a mental health technician without having a license to so practice issued under the mental health technician's licensure act, except as provided in K.S.A. 65-4212 and amendments thereto;
    (3) use in connection with one's name any designation intending to imply that such person is a licensed mental health technician without having such license issued as herein provided;
    (4) practice as a mental health technician during the time such person's license is suspended or revoked;
    (5) otherwise violate any of the provision of the mental health technician's licensure act; or
    (6) represent that a provider of continuing education is approved for educating mental health technicians, unless the provider of continuing education has been approved by the board and the approval is in full force.
(b) Any person who violates this section is guilty of a class B misdemeanor, except that, upon conviction of a second or subsequent violation of this section, such person is guilty of a class A misdemeanor.

**History:** (L. 1973, ch. 308, § 14; L. 1993, ch. 194, § 6; July 1.)

**65-4215. Practice of medicine not authorized.** Nothing in this act shall be construed as authorizing a licensed mental health technician to practice medicine or surgery or to undertake the prevention, treatment or cure of disease, pain, injury, deformity or mental or physical condition.

**History:** (L. 1973, ch. 308, § 15; July 1, 1974.)

**65-4216. Report of certain actions of mental health technician; persons required to report; medical care facility which fails to report subject to civil fine; definitions.**

(a) Subject to the provisions of subsection (c) of K.S.A. 65-4923, and amendments thereto:
    (1) Every employer of a mental health technician shall report under oath to the board of nursing any information such employer has which appears to show that a mental health technician has committed an act which may be a ground for disciplinary action pursuant to K.S.A. 65-4209 and amendments thereto, or that the employer has taken disciplinary action against a mental health technician for

committing any such act or has accepted the resignation of a mental health technician in lieu of taking disciplinary action therefor.

(2) Every health care provider shall report under oath to the board of nursing any information such health care provider has which appears to show that a mental health technician has committed an act which may be a ground for disciplinary action pursuant to K.S.A. 65-4209 and amendments thereto.

(3) Any person, other than those persons specified in provisions (1) and (2), may report under oath to the board of nursing any information such person has which appears to show that a mental health technician has committed an act which may be a ground for disciplinary action pursuant to K.S.A. 65-4209, and amendments thereto.

(b) Any medical care facility which fails to report within 30 days after the receipt of information required to be reported by this section shall be reported by the board of nursing to the secretary of health and environment and shall be subject, after proper notice and an opportunity to be heard, to a civil fine assessed by the secretary of health and environment in an amount not exceeding $1,000 per day for each day thereafter that the incident is not reported. All fines assessed and collected under this section shall be remitted to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the state general fund.

(c) As used in this section:

(1) "Medical care facility" has the meaning provided by K.S.A. 1987 Supp. 65-4921 and amendments thereto.

(2) "Health care provider" has the meaning provided by K.S.A. 1987 Supp. 65-4921 and amendments thereto.

**History:** (L. 1983, ch. 216, § 1; L. 1988, ch. 236, § 6; L. 2001, ch. 5, § 255; July 1.)

**65-4217. Immunity from liability in civil actions for reporting, communicating or investigating certain information.**

(a) No person reporting to the board of nursing under oath and in good faith any information such person is required to report or is authorized to report under K.S.A. 65-4216 and amendments thereto shall be subject to a civil action for damages as a result of reporting such information.

(b) Any state, regional or local association of licensed mental health technicians, and the individual members of any committee thereof, which in good faith investigates or communicates information to the board of nursing or to any committee or agent thereof pertaining to the alleged commission by a mental health technician of an act which may be a ground for disciplinary action pursuant to K.S.A. 65-4209 and amendments thereto shall be immune from liability in any civil action that is based upon such information or transmittal of information if the investigation and communication were made in good faith and did not represent as true any matter not reasonably believed to be true.

**History:** (L. 1983, ch. 216, § 3; L. 1988, ch. 236, § 7; July l.)

## APPROVAL OF EDUCATIONAL PROGRAMS FOR MENTAL HEALTH TECHNICIANS

**60-5-102. Approval procedure.**

(a) An institution contemplating the establishment of a program for mental health technicians:

(1) Shall write a letter of intent to the Kansas state board of nursing.

(2) Shall submit the name and qualifications of the nurse administrator to the board of nursing for approval.

(3) Shall employ a qualified nurse administrator.

(4) Shall employ a second faculty member.

(5) Shall file with the board an application for an approved program two months prior to the anticipated opening date with the payment of any required fees.

(6) Shall receive in writing the decision of the board.

(7) Shall be approved prior to the admission of students.

**History:** (Authorized by K.S.A. 65-4201 et seq.; K.S.A. 1974 Supp. 74-1106 et seq.; modified, L. 1975, Ch. 302, Sec. 6, May 1, 1975.)

**60-5-103. Discontinuing a program for mental health technicians.** A program terminating its course shall submit for approval to the board the plan for students currently enrolled and the disposition of records.

**History:** (Authorized by K.S.A. 65-4201 et seq.; K.S.A. 1974 Supp. 74-1106 et seq.; effective May 1, 1975.)

## REQUIREMENTS FOR APPROVED PROGRAMS FOR MENTAL HEALTH TECHNICIANS

**60-6-101. Requirements.**

(a) Accreditation and approval.
  (1) Each educational institution shall be approved by the appropriate state agency.
  (2) Each hospital and agency providing facilities for clinical experience shall be licensed, accredited, or approved by the licensing or certifying body.

(b) Administration and organization.
  (1) The educational program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide for the financial support of the educational unit.
  (2) Authority and responsibility for administering the program shall be vested in the director of the educational unit.

(c) Faculty for mental health technician programs. Each faculty member shall have the necessary preparation, experience, and personal qualifications to meet the specifications of the position.
  (1) The director of the educational unit shall be licensed to practice as a registered professional nurse in Kansas and shall be responsible for the development and implementation of the educational program. The director shall have a baccalaureate degree, successful experience in administration or teaching, and at least two years of experience in psychiatric or developmental disability nursing.
  (2) Each instructor in a mental health technician program shall meet at least one of the following requirements:
    (A) Be licensed to practice as a registered professional nurse in Kansas and have at least two years of experience in psychiatric or developmental disability nursing; or
    (B) be licensed to practice as a licensed mental health technician and have at least five years of experience postlicensure. Two years of work experience shall be waived for those licensed mental health technicians possessing an associate degree.
  (3) Each instructor in the behavioral sciences shall have earned an academic degree with appropriate education relative to the area of instruction.

(d) Curriculum.
  (1) Before implementation of the program, the institution shall submit the proposed curriculum in writing to the board for approval. The institution shall submit, in writing, any proposed changes to an approved curriculum to the board for its approval before the changes may be implemented.
  (2) The curriculum shall be organized to cover both theoretical instruction and clinical instruction. The curriculum for mental health technician courses shall consist of a minimum of 300 hours of theoretical instruction and 300 hours of clinical instruction. By July 1, 1978, the curriculum shall consist of a minimum of 450 hours of theoretical instruction and 450 hours of clinical instruction. In academic institutions, one semester hour of credit shall be equal to 15 hours of theoretical instruction or 45 hours of clinical instruction.
  (3) The curriculum shall also include the following two courses, which shall be of a theoretical nature. Each course shall consist of 45 hours of instruction.
    (A) Human growth and development. This course shall include aspects of growth and development from the prenatal period through senescence.
    (B) Behavioral science. This course shall include human needs, group processes, family dynamics, and social, economic, and cultural factors of behavior.
  (4) The curriculum shall also include the following two courses, which shall include both theoretical and clinical instruction.
    (A) Basic nursing concepts. This course shall include bed making, personal hygiene, administration and effect of medications, feeding, asepsis, elimination, recognition of illness, vital signs, basic nutrition, special care of patients, first aid and emergency nursing, assisting with physical examinations, and admission and discharge of patients.
    (B) Psychiatric therapeutic treatment. This course shall include interpersonal relationships, psychopathology and classifications, coping mechanisms, communication skills, therapeutic modalities, and special reporting and recording techniques.

(e) Clinical facilities and resources.
  (1) All clinical facilities shall be approved by the board, and appropriate contractual agreements shall be renewed annually with all cooperating agencies.
  (2) Each clinical area used for student learning experiences shall be staffed by nursing service independent of student assignments.
  (3) Each clinical unit used for educational purposes shall be under the direct supervision of a registered nurse.

(f) Students.

(1) Admission. Each program shall have clearly defined policies for admission.
(2) Credit for previous study. Each program shall have clearly defined written policies concerning credit for previous study, transfer of credits, and readmission of students. These policies shall conform to the policies of the institution.
(3) Promotion and graduation policies shall be in writing.

(g) Evaluation. A written plan for continuing program evaluation shall be developed and implemented.

**History:** (Authorized by K.S.A. 1998 Supp 65-4206 and 74-1106; implementing K.S.A. 1998 Supp. 65-4206; modified, L. 1975, ch. 302; Sec. 7, May 1, 1975, amended March 31, 2000.)

## REQUIREMENTS FOR LICENSURE AND STANDARDS OF PRACTICE

**60-7-101. Licensure.**

(a) The applicant shall file with the board one month preceding the examination a completed application on an adopted form with payment of the application and examination fees prescribed by K.A.R. 60-8-101.

(b) Verification of current Kansas license shall be provided by request to other state boards upon payment of fee.

(c) Information regarding examinations.
(1) The examination for licensure shall be given at least twice a year.
(2) Each candidate shall present a validated admission card in order to be admitted to the examination center.
(3) Any applicant cheating or attempting to cheat during the examination shall be deemed not to have passed the examination.
(4) In the event that answer sheets are lost or destroyed through circumstances beyond the control of the board, the candidate shall be required to retake the examination in order to meet requirements for licensure, except that no additional charge shall be made.
(5) Individual examination results shall be released to the school from which the examinee graduated.
(6) Any candidate requesting modifications to the examination procedures or materials because of a learning disability shall provide written documentation from the appropriate medical professional confirming the learning disability, an evaluation completed within the last five years by a learning disabilities evaluation team, and a letter from the mental health technician program confirming the learning and testing modifications made during the course of study.

(d) Application for retest. An applicant who fails to make a passing score on the licensure examination may retake the examination and shall pay an examination fee for each retest as established by K.A.R. 60-8-101.

(e) If an individual fails to pass the licensure examination within 24 months from graduation, the individual shall petition the board in writing before being allowed to retake the licensure examination. The petition shall be on a form provided by the board and shall contain the following:
(1) The name of the school of graduation;
(2) the date of graduation;
(3) the number of months or years since graduation;
(4) the number of times taking the licensure examination;
(5) the dates of the licensure examinations;
(6) areas of deficiency identified on the diagnostic profile for each examination;
(7) copies of all diagnostic profiles;
(8) any study completed since the last attempt of taking the licensure examination;
(9) any work experience in the last two years; and
(10) a sworn statement by the petitioner that the facts contained in the petition are true to the best of the person's knowledge and belief.

(f) An individual shall be allowed by the board to retake the licensure examination after 24 months from graduation only upon demonstrating to the board's satisfaction that the individual has identified and addressed the reasons for prior failure and that there is a reasonable probability that the individual will pass the examination. A plan of study may be required by the board before the individual retakes the licensure examination.

(g) If the board requires a plan of study before retaking the licensure examination, the plan shall contain the following:
(1) A list of all the low performance competencies of the test plan identified by the diagnostic profile from each examination;
(2) a specific content outline for all the low performance competencies on the diagnostic profile;
(3) methods of study, including the following:
(A) Self-study;
(B) study groups;

(C) tutors; or
(D) any other methods as approved by the board;
(4) a schedule for study that meets the following requirements:
(A) 30 hours per each low performance competency;
(B) a start date; and
(C) completion in six months or the petition shall be considered abandoned;
(5) learning resources identified to be used in the study, meeting these requirements:
(A) a written bibliography in a standard documentation format, with resources no more than five years old; and
(B) four types for each low performance competency selected from the list as follows:
(i) Textbooks;
(ii) journals;
(iii) review books;
(iv) audiovisuals;
(v) computer-assisted instruction; or
(vi) computer review programs.

(h) A registered professional nurse shall provide written verification that the individual has completed a study plan.

(i) Academic mental health technician courses, clinical observations, or other learning activities to meet study requirements may also be prescribed by the board.

**History:** (Authorized by K.S.A. 1997 Supp. 65-4203 and 1997 Supp. 74-1106; implementing K.S.A. 1997 Supp. 65-4203; modified, L. 1975, Ch. 302, Sec. 8, May 1, 1975; amended Jan. 29, 1999.)

**60-7-102. Duplicate of initial license.** When an individual's initial license has been lost or destroyed, a duplicate may be issued by the board upon payment of the fee specified in K.S.A. 65-4208, and amendments thereto.

**History:** (Authorized by K.S.A. 65-4203; implementing K.S.A. 65-4208; modified, L. 1975, Ch. 302, Sec. 9, May 1, 1975; amended April 20, 2001; amended April 29, 2016.)

**60-7-103. Change of name.** Once an application for licensure has been filed, or a license has been issued, the applicant or licensee shall submit an affidavit indicating a change of name upon forms approved by the board.

**History:** (Authorized by K.S.A. 65-4201 *et seq.*, K.S.A. 1974 Supp. 74- 1106 *et seq.*; effective May 1, 1975.)

**60-7-104. Reinstatement of license.**

(a) Any applicant whose Kansas license has lapsed may reinstate the license by submitting satisfactory proof that the applicant within the preceding two-year period has obtained 30 hours of approved continuing education.
(b) Any applicant whose license has lapsed may request that a one-time, temporary permit to practice for 120 days be issued while the applicant completes the required continuing education hours.

**History:** (Authorized by K.S.A. 1994 Supp. 65-4203, as amended by L. 1995, Ch. 97, § 4; implementing K.S.A. 1994 Supp. 65-4205, as amended by L. 1995, Ch. 97, § 5; effective May 1, 1975; amended May 9, 1994; amended Feb. 16, 1996.)

**60-7-105. Standards of practice.**

(a) The licensed mental health technician shall:
(1) Be familiar with the mental health technician's licensure act.
(2) Function primarily in a psychiatric-mental retardation setting, and shall not substitute for registered nurses or licensed practical nurses in adult care facilities.

**History:** (Authorized by K.S.A. 65-4201 et seq., K.S.A. 1974 Supp. 74-1106 et seq.; modified, L. 1975, Ch. 302, Sec. 10, May 1, 1975.)

**60-7-106. Unprofessional conduct.** Any of the following shall constitute "unprofessional conduct":

(a) Performing acts beyond the authorized scope of mental health technician practice for which the individual is licensed;
(b) assuming duties and responsibilities within the practice of mental health technology without adequate preparation or without maintaining competency;
(c) failing to take appropriate action or to follow policies and procedures in the practice situation designed to safeguard the patient;
(d) inaccurately recording, falsifying, or altering any record of a patient, an agency, or the board;
(e) physical abuse, which shall be defined as any act or failure to act performed intentionally or carelessly that causes or is likely to cause harm to a patient. This term may include any of the following:

(1) The unreasonable use of any physical restraints, isolation, or medication that harms or is likely to harm a patient;
(2) the unreasonable use of any physical or chemical restraint, medication, or isolation as a punishment, for convenience, in conflict with a physician's order or a policy and procedure of the facility or a statute or regulation, or as a substitute for treatment, unless the use of the restraint, medication, or isolation is in furtherance of the health and safety of the patient;
(3) any threat, menacing conduct, or other nontherapeutic or inappropriate action that results in or might reasonably be expected to result in a patient's unnecessary fear or emotional or mental distress; or
(4) any failure or omission to provide any goods or services that are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm;

(f) the commission of any act of sexual abuse, sexual misconduct, or sexual exploitation related to the licensee's practice;
(g) verbal abuse, which shall be defined as any word or phrase spoken inappropriately to or in the presence of a patient that results in or might reasonably be expected to result in the patient's unnecessary fear, emotional distress, or mental distress;
(h) delegating any activity that requires the unique skill and substantial specialized knowledge derived from the biological, physical, and behavioral sciences and judgment of the mental health technician to an unlicensed individual in violation of the mental health technician's licensure act or to the detriment of patient safety;
(i) assigning the practice of mental health technology to a licensed individual in violation of the mental health technician's licensure act or to the detriment of patient safety;
(j) violating the confidentiality of information or knowledge concerning any patient;
(k) willfully or negligently failing to take appropriate action to safeguard a patient or the public from incompetent practice performed by a licensed mental health technician. "Appropriate action" may include reporting to the board of nursing;
(l) leaving an assignment that has been accepted, without notifying the appropriate authority and without allowing reasonable time for the licensee's replacement;
(m) engaging in conduct related to mental health technology practice that is likely to deceive, defraud, or harm the public;
(n) diverting drugs, supplies, or property of any patient or agency or violating any law or regulation relating to controlled substances;
(o) exploitation, which shall be defined as misappropriating a patient's property or taking unfair advantage of a patient's physical or financial resources for the licensee's or another individual's personal or financial advantage by the use of undue influence, coercion, harassment, duress, deception, false pretense, or false representation;
(p) solicitation of professional patronage through the use of fraudulent or false advertisements, or profiting by the acts of those representing themselves to be agents of the licensee;
(q) failing to comply with any disciplinary order of the board;
(r) if the licensee is participating in an impaired provider program approved by the board, failing to complete the requirements of the program;
(s) failing to submit to a mental or physical examination or an alcohol or drug screen, or any combination of these, when so ordered by the board pursuant to K.S.A. 65-4924 and amendments thereto, that the individual is unable to practice mental health technology with reasonable skill and safety by reason of a physical or mental disability or condition, loss of motor skills or the use of alcohol, drugs, or controlled substances, or any combination of these;
(t) failing to furnish the board of nursing, or its investigators or representatives, with any information legally requested by the board of nursing;
(u) engaging in mental health technology practice while using a false or assumed name or while impersonating another person licensed by the board;
(v) practicing without a license or while the individual's license has lapsed;
(w) allowing another person to use the licensee's license to practice mental health technology;
(x) knowingly aiding or abetting another in any act that is a violation of any health care licensing act;
(y) having a mental health technician license from a licensing authority of another state, agency of the United States government, territory of the United States, or country denied, revoked, limited, or suspended or being subject to any other disciplinary action. A certified copy of the record or order of denial, suspension, limitation, revocation, or any other disciplinary action issued by the licensing authority of another state, agency of the United States government, territory of the United States, or country shall constitute prima facie evidence of such a fact;
(z) failing to report to the board of nursing any adverse action taken against the licensee by another state or licensing jurisdiction, a peer review body, a health care facility, a professional association or society, a

governmental agency, a law enforcement agency, or a court for acts or conduct similar to acts or conduct that would constitute grounds for disciplinary action under this regulation; or

(aa) cheating on or attempting to subvert the validity of the examination for a license.

**History:** (Authorized by K.S.A. 65-4203 implementing K.S.A. 2015 Supp. 65-4209; effective, T-88-48, Dec. 16, 1987; effective Sept. 27, 1993; amended Sept. 6, 1994; amended April 20, 2007; amended April 29, 2016.)

**60-7-108. Inactive license.**

(a) Before expiration of an active license, a licensed mental health technician may request to be put on inactive status.
(b) The request shall be accompanied by the inactive license fee specified in K.A.R. 60-8-101.
(c) Continuing licensed mental health technician education shall not be required while on inactive status.
(d) The licensee shall remain on inactive status until filing an application and meeting all the requirements for reinstatement.

**History:** (Authorized by K.S.A. 1999 Supp. 65-4203; implementing K.S.A. 1999 Supp. 65-4205 and K.S.A. 1999 Supp. 65-4208; effective April 26, 1993; amended April 20, 2001.)

**60-7-109. Exempt license.**

(a) An exempt license shall be granted only to a mental health technician who meets these requirements:
  (1) Is not regularly engaged in mental health technician practice in Kansas, but is a charitable health care provider as defined by K.S.A. 75-6102 and amendments thereto; and
  (2) has been licensed in Kansas for the five years previous to applying for an exempt license.
(b) The expiration date of the exempt license shall be in accordance with K.A.R. 60-12-106.
(c) All applications for renewal of an exempt license shall be submitted upon forms furnished by the board and shall be accompanied by the fee in accordance with K.A.R. 60-8-101.

**History:** (Authorized by and implementing K.S.A. 1996 Supp. 65-4203, as amended by L. 1997, Ch. 158, Sec. 8; effective April 3, 1998.)

**60-7-110. Expiration dates of licenses; applications.**

(a) The expiration date of licenses for licensed mental health technicians shall be on the last day of December in each even- numbered year.
(b) Applications for initial licensure by examination and for reinstatement while awaiting documentation of qualifications shall be active for six months.
  (1) The expiration date of each application shall be based upon the date of receipt at the agency.
  (2) Once the application has expired, each individual seeking licensure shall file a new application along with the appropriate fee as prescribed by K.A.R. 60-8-101.

**History:** (Authorized by K.S.A. 1996 Supp. 65-4203, as amended by L. 1997, Ch. 158, Sec. 8 and K.S.A. 1996 Supp. 74-1106, as amended by L. 1997, Ch. 146, Sec. 5; implementing K.S.A. 1996 Supp. 65-4203, as amended by L. 1997, Ch. 158, Sec. 8 and K.S.A. 1996 Supp. 65-4205, as amended by L. 1997, Ch. 146, Sec. 3; effective April 3, 1998.)

**60-7-111. Reporting of certain misdemeanor convictions by the licensee.** Pursuant to K.S.A. 65-4205 and amendments thereto, each licensee shall report to the board any misdemeanor conviction for any of the following substances or types of conduct:

(a) Alcohol;
(b) any drugs;
(c) deceit;
(d) dishonesty;
(e) endangerment of a child or vulnerable adult;
(f) falsification;
(g) fraud;
(h) misrepresentation;
(i) physical, emotional, financial, or sexual exploitation of a child or vulnerable adult;
(j) physical or verbal abuse;
(k) theft;
(l) violation of a protection from abuse order or protection from stalking order; or
(m) any action arising out of a violation of any state or federal regulation.

**History:** (Authorized by K.S.A. 65-4203 and K.S.A. 2007 Supp. 65-4205; implementing K.S.A. 2007 Supp. 65-4205; effective Nov. 7, 2008.)

## FEES

**60-8-101. Payment of fees.** The following fees shall be charged by the board of nursing:

(a) Mental health technician programs.

(1) Annual renewal of program approval.....$100.00
(2) Survey of a new program.....200.00
(3) Application for approval of continuing education providers.....200.00
(4) Annual renewal for continuing education providers.....50.00

(b) Mental health technicians.

(1) Application for licensure .....50.00
(2) Examination..... 40.00
(3) Biennial renewal of license..... 55.00
(4) Application for reinstatement of license without temporary permit .....70.00
(5) Application for reinstatement of license with temporary permit .....75.00
(6) Certified copy of Kansas license .....12.00
(7) Inactive license .....10.00
(8) Verification of licensure .....10.00
(9) Duplicate license.....12.00
(10) Application for exempt license .....50.00
(11) Renewal of exempt license .....50.00

**History:** (Authorized by K.S.A. 65-4203; implementing K.S.A. 65-4208; effective May 1, 1980; amended May 1, 1983; amended, T-85-49, Dec. 19, 1984; amended May 1, 1985; amended June 3, 1991; amended May 17, 1993; amended May 9, 1994; amended Feb. 6, 1995; amended April 3, 1998; amended July 1, 2001; amended April 20, 2007; amended Oct. 18, 2013; amended July 1, 2014.)

## CONTINUING EDUCATION FOR MENTAL HEALTH TECHNICIANS

**60-12-104. Approval of continuing education offerings.** Approval of licensed mental health technician continuing education shall be in accordance with K.A.R. 60-9-107.

**History:** (Authorized by K.S.A. 65-4203, implementing K.S.A. 65-4207; effective, T-85-49, Dec. 19, 1984; effective May 1, 1985, amended Sept. 27, 1993.)

**60-12-105. Definitions.** Definitions within this article of terms associated with licensed mental health technician continuing education shall be in accordance with K.A.R. 60-9-105.

**History:** (Authorized by K.S.A. 65-4203, implementing K.S.A. 65-4205 and 65-4207; effective March 9, 1992, effective Sept. 27, 1993.)

**60-12-106. License renewal.**

(a) Each licensee shall submit a renewal application and the renewal fee specified in K.A.R. 60-8-101 no later than December 31 in each even-numbered year.

(b) Any licensed mental health technician may be required to submit proof of completion of 30 contact hours during the most recent prior licensing period. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next license renewal period. This proof of completion shall be documented as follows:

(1) (A) Name of the continuing mental health technician education (CMHTE) offering or college course;
(B) provider name or name of the accrediting organization;
(C) provider number or number of the accrediting organization, if applicable;
(D) offering date; and
(E) number of contact hours; or

(2) approved IOA.

(c) Any individual attending an offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates to be relevant to the licensee's practice of mental health technology. Each separate offering shall be approved before the licensee submits the license renewal application.

(d) Approval shall not be granted for identical offerings completed within a license renewal period.

(e) Any licensed mental health technician may acquire 30 contact hours of CMHTE from independent study, as defined in K.S.A. 65-4202 and amendments thereto.

(f) Any licensed mental health technician may accumulate 15 contact hours of the required CMHTE from instructor credit. Each presenter shall receive instructor credit only once for preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.

(g) Fractions of hours may be accepted for offerings over 30 minutes to be computed towards a contact hour.

**History:** (Authorized by K.S.A. 65-4203; implementing K.S.A. 2011 Supp. 65-4205; effective Sept. 2, 1991; amended Feb. 16, 1996; amended Oct. 12, 2001; amended May 10, 2013.)

## HELPFUL PHONE NUMBERS

**Kansas State Board of Nursing**

Renewals / RN Examinations ..... 1-785-296-2453
Verifications to another state / LPN Examinations ..... 1-785-296-2967
Endorsements and Advanced Practice..... .1-785-296-6573
Reinstatements..... 1-785-296-2926
Education..... 1-785-296-3782
Administration..... 1-785-296-5752
Discipline ..... 1-785-296-4325
Practice ..... 1-785-296-8401

**KSBN Website http://www.ksbn.org**

**Kansas Department for Children and Families**

Abuse and Neglect or Adult abuse, neglect or exploitation..... 1-800-922-5330
Alcohol and Drug Helpline ..... 1-866-645-8216
Fraud and Recovery ..... 1-800-432-3913

**Kansas Department of Health and Environment**

Adult Care Complaint Hotline..... 1-800-842-0078
Health Occupations Credentialing..... 1-785-296-0056
CNA's, CMA's HHA's ..... 1-785-296-1240

**Bureau of Health Facilities**
Hospital Licensing..... 1-785-296-1240
Kansas Department on Aging Adult Care Homes ..... 1-785-296-4986

**Attorney General's Office**

Medicaid Fraud & Abuse Unit ..... 1-785-368-6220

**Kansas Behavioral Sciences Regulatory Board** ..... 1-785-296-3240

**Kansas Board of Emergency Medical Services** ..... 1-785-296-7296

**Kansas Board of Healing Arts** ..... 1-785-296-7413

**Kansas Insurance Department** ..... 1-785-296-3071

**Kansas Pharmacy Board**..... 1-785-296-4056