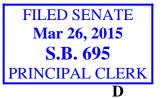
GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2015



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SENATE DRS45331-MGfqq-87B (03/11)

Short Title:	Modernize Nursing Practice Act.	(Public)
Sponsors:	Senators Hise and Pate (Primary Sponsors).	
Referred to:		

1		A BILL TO BE ENTITLED
2	AN ACT UPDAT	FING AND MODERNIZING THE NURSING PRACTICE ACT.
3	The General Asse	embly of North Carolina enacts:
4	SECT	TON 1. G.S. 90-171.20 reads as rewritten:
5	"§ 90-171.20. De	efinitions.
6	As used in thi	is Article, unless the context requires otherwise:
7	(1)	Advanced assessment The taking by an advanced practice registered nurse
8		of the history, physical, and psychological assessment of a patient's signs,
9		symptoms, pathophysiologic status, and psychosocial variations in the
10		determination of differential diagnoses and treatment.
11	<u>(1a)</u>	Advanced practice registered nurse or APRN An individual licensed by
12		the Board as an advanced practice registered nurse within one of the
13		following three roles:
14		<u>a.</u> <u>Nurse practitioner or NP.</u>
15		b. <u>Certified nurse midwife or CNM.</u>
16		<u>c.</u> <u>Clinical nurse specialist or CNS.</u>
17	<u>(1b)</u>	<u>"Board" means the Board. – The</u> North Carolina Board of Nursing.
18	(2)	"Health care provider" means any Health care provider Any licensed
19		health care professional and any agent or employee of any health care
20		institution, health care insurer, health care professional school, or a member
21		of any allied health profession. For purposes of this Article, a person
22		enrolled in a program that prepares the person to be a licensed health care
23		professional or an allied health professional shall be deemed a health care
24		provider.
25	(3)	"License" means aLicense A permit issued by the Board to practice
26		nursing as an advanced practice registered nurse, as a registered nurse,
27		or as a licensed practical nurse, including a renewal or reinstatement thereof.
28	(4)	"Nursing" is a Nursing. $-A$ dynamic discipline which includes the assessing,
29		caring, counseling, teaching, referring and implementing of prescribed
30		treatment in the maintenance of health, prevention and management of
31		illness, injury, disability or the achievement of a dignified death. It is
32		ministering to; assisting; and sustained, vigilant, and continuous care of
33		those acutely or chronically ill; supervising patients during convalescence
34		and rehabilitation; the supportive and restorative care given to maintain the
35		optimum health level of individuals, groups, and communities; the
36		supervision, teaching, and evaluation of those who perform or are preparing



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	to perform these functions; and the administration of nur nursing services. For purposes of this Article, the admini lethal substances or any assistance whatsoever rendered	stration of required
	under Article 19 of Chapter 15 of the General Statutes nursing.	does not constitute
(5)	•	ducational program
(3)	in North Carolina offering to prepare persons to me	et the educational
	requirements for licensure under this Article. Article as a <u>a licensed practical nurse.</u>	•
(6)	"Person" means an Person. – An individual, corpor association, unit of government, or other legal entity.	ation, partnership
(6a		includes all of the
<u>(00</u>	following areas of focus:	nerudes un or un
	<u>c.</u> <u>Neonatar.</u>	
	c.Neonatal.d.Pediatrics.e.Women's health or gender-related issues.f.Psychiatric or mental health.	
	e. <u>Women's health or gender-related issues.</u>	
(61		
<u>(6b</u>		
	addition to the RN scope of practice and within the	
	population foci, also consists of the following six compon	<u>ents:</u>
	<u>a.</u> <u>Conducting an advanced assessment.</u>	
	b. Delegating and assigning therapeutic measures to a	
	c. Performing other acts that require education and	training consisten
	with professional standards and commensurate	with the APRN'
	education, certification, demonstrated competencie	es, and experience.
	d. Complying with the requirements of this Arti	cle and rendering
	quality advanced nursing care.	
	e. Recognizing limits of knowledge and experience.	
	f. Planning for the management of situations be	yond the APRN'
	expertise.	4
(60		L – Consists of the
<u>(00</u>	following four components:	
	<u>a.</u> <u>The management, diagnosis, and treatment of</u>	women's primary
	health care, including pregnancy, childbirth, post	
	of the newborn, family planning, partner care man	
	sexual health, and gynecological care of women ac	
		_
	b. Ordering, performing, supervising, and inter	preting diagnosti
	studies.	41
	<u>c.</u> <u>Prescribing pharmacologic and nonpharmacologic</u>	
	d. Consulting with or referring to other health	care providers a
	warranted by the needs of the patient.	
<u>(60</u>		<u>. – Consists of the</u>
	following eight components:	
	<u>a.</u> <u>The diagnosis and treatment of health and illness s</u>	tates.
	b. Disease management.	
	c. <u>Prescribing nonpharmacologic therapies.</u>	
	<u>d.</u> <u>Ordering, performing, supervising, and inter</u>	preting diagnostic
	<u>d.</u> <u>Ordering, performing, supervising, and inter</u> studies.	preting diagnosti

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1		<u>f.</u> <u>Nursing care for individuals, families, and commun</u>	ities.
2		g. Consulting with or referring to other health c	
3		warranted by the needs of the patient.	<u> </u>
4		h. Integrating care across the continuum to improve pa	atient outcomes.
5	<u>(6e)</u>	Practice of nursing as a nurse practitioner or NP. – Consist	
6	<u>(00)</u>	six components:	<u>s of the following</u>
7		<u>a.</u> <u>Health promotion, disease prevention, health</u>	education, and
8		<u>counseling</u> .	<u>cududation</u> , and
9			c
10		b.Providing health assessment and screening activitiesc.Diagnosing, treating, and facilitating patients' man	
10		<u>acute and chronic illnesses and diseases.</u>	hagement of them
12			rating diagnostic
12			reting utagnostic
15 14		studies.	hananiaa
		e. <u>Prescribing pharmacologic and nonpharmacologic t</u> f. Consulting with or referring to other health c	
15			are providers as
16		warranted by the needs of the patient.	1
17	(7)	The "practice of nursing by a registered nurse" consists <u>Prac</u>	
18		<u>a registered nurse or RN. – Consists</u> of the following 10 con	-
19		a. Assessing the patient's physical and mental heat	
20		patient's reaction to illnesses and treatment regimen	
21		b. Recording and reporting the results of the nursing a	
22		c. Planning, initiating, delivering, and evaluating ap	propriate nursing
23		acts.	
24		d. Teaching, assigning, delegating to or supervising of	other personnel in
25		implementing the treatment regimen.	
26		e. Collaborating with other health care providers in	1 determining the
27		appropriate health care for a patient but, subject to	the provisions of
28		G.S. 90-18.2, not prescribing a medical treatment reatment reatmen	egimen or making
29		a medical diagnosis, except under supervision	n of a licensed
30		physician.patient.	
31		f. Implementing the treatment and pharmaceutical re	gimen prescribed
32		by any person authorized by State law to prescribe t	the regimen.
33		g. Providing teaching and counseling about the patient	
34		h. Reporting and recording the plan for care, nursing c	are given, and the
35		patient's response to that care.	C ·
36		i. Supervising, teaching, and evaluating those who	o perform or are
37		preparing to perform nursing functions and adm	-
38		programs and nursing services.	0 0
39		j. Providing for the maintenance of safe and effect	tive nursing care.
40		whether rendered directly or indirectly.	
41	(8)	The "practice of nursing by a licensed practical nurse" c	onsists Practice of
42		nursing by a licensed practical nurse. – Consists of the	
43		components:	ronowing seven
44		a. Participating in the assessment of the patient's ph	vsical and mental
45		health, including the patient's reaction to illness	•
46		regimens.	to and treatment
40		b. Recording and reporting the results of the nursing a	ccacement
47			
		c. Participating in implementing the health care plan	
49 50		registered nurse and/or prescribed by any person at	•
50		law to prescribe such a plan, by performing t	-
51		delegated by and performed under the supervision	or under orders or

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	directions of a registered nurse, medicine, dentist, or other person au	
	the supervision.	
c1.	Assigning or delegating nursing in	-
_	personnel under the supervision of th	0
d.	Participating in the teaching and co	• • •
	by a registered nurse, physician,	
	licensed to practice in North Carolina	
e.	Reporting and recording the nursing	g care rendered and the patient's
C	response to that care.	
f.	Maintaining safe and effective m	ursing care, whether rendered
(FOTION A	directly or indirectly."	
	(a) G.S. 90-171.21 reads as rewritten:	
	Nursing; composition; selection; vac	cancies; qualifications; term of
office; comp		
	hall consist of 14 members. Eight mer	-
	licensed practical nurses. Three men	nbers shall be representatives of
the public.		1 11 1 / 1 / 1
	The North Carolina Board of Nursing	
•	nurse members of the Board schedule	. .
	tes for election of registered nurse me	
	less than 10 registered nurses eli	-
	tes for election of licensed practical n	•
1 0	by not less than 10 licensed practica	0
	ed nurse holding an active advanced practice	
-	n the election of the advanced practice I nurse holding an active license shall I	-
	d members. Every licensed practical	-
	in the election of licensed practical m	
e	ad with the Board after January 1 of the	
	an midnight of the first day of April	
	notify each person who has been of	
	permission to enter the person's name	•
1	for reelection and who does not withd	
	participate in conducting the election. E	
	1 of the year following their election.	-
•	sons to serve as public members of	
-	Assembly by any citizen or group with	•
	ber to the Board, and the General As	
	Of the public members appointed by t	• • • •
	eral Assembly upon the recommendation	•
	hall be appointed by the General Asse	-
of the Speaker of the Ho	· · ·	v 1
-	be commissioned by the Governor up	on their election or appointment.
	All unexpired terms of Board mem	
	l within 45 days after the term is vaca	•••••
	n the Board within 30 days after the te	
	used practical nurse members, the Bo	
-	est number of votes in the election v	• •
•		-
elected in order to fulf	<i>ill the remainder of the unexpired t</i>	erm. If the replacement Board

1 notify the person receiving the next highest number of votes in the election when the vacating 2 member was elected. Governor shall appoint the person who received the next highest number 3 of votes to those elected members at the most recent election for board members. Appointees 4 shall serve the remainder of the unexpired term and until their successors have been duly 5 elected or appointed and qualified. 6 Qualifications. – Of the eight registered nurse members on the Board, one shall be a (d) 7 nurse administrator employed by a hospital or a hospital system, who shall be accountable for 8 the administration of nursing services and not directly involved in patient care; one shall be an 9 individual who meets the requirements to practice as a certified registered nurse anesthetist, a 10 certified nurse midwife, a clinical nurse specialist, or a nurse practitioner; an APRN; two shall

11 be staff nurses, defined as individuals who are primarily involved in direct patient care 12 regardless of practice setting; one shall be an at-large registered nurse who meets the 13 requirements of sub-subdivisions (1) a., a1., and b.b., e., f., and g. of this subsection, but is not 14 currently an educator in a program leading to licensure or any other degree-granting program; 15 and three shall be nurse educators. Minimum ongoing employment requirements for every 16 registered nurse and licensed practical nurse shall include continuous employment equal to or 17 greater than fifty percent (50%) of a full-time position that meets the criteria for the specified 18 Board member position. Of the three nurse educators, one shall be a practical nurse educator, 19 one shall be an associate degree or diploma nurse educator, and one shall be a baccalaureate or 20 higher degree nurse educator. All nurse educators shall meet the minimum education 21 requirement as established by the Board's education program standards for nurse faculty. 22 Candidates eligible for election to the Board as nurse educators are not eligible for election as 23 the at-large member.

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- (1) Except for the at-large member, every registered nurse member shall meet the following criteria:
 - a. Hold a current, an active, unencumbered license to practice as a registered nurse in North Carolina.
 - a1. Be a resident of North Carolina.
 - b. Have a minimum of five years of experience as a registered nurse.
 - c. Have been engaged continuously in a position that meets the criteria for the specified Board position for at least three years immediately preceding election.
 - d. Show evidence that the employer of the registered nurse is aware that the nurse intends to serve on the Board.
 - e. Have no disciplinary history with the Board or any other licensing board in this State or another state within the 10 years preceding the nurse's appointment to the Board.
 - f. Have no history of felony convictions of any kind.
 - g. <u>Have no misdemeanor convictions related to the practice of nursing.</u>
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- Every licensed practical nurse member shall meet the following criteria:
 - a. Hold <u>a currentan active</u>, unencumbered license to practice as a licensed practical nurse in North Carolina.
 - a1. Be a resident of North Carolina.
 - c. Have a minimum of five years of experience as a licensed practical nurse.
- 46d.Have been engaged continuously in the position of a licensed47practical nurse for at least three years immediately preceding48election.
 - e. Show evidence that the employer of the licensed practical nurse is aware that the nurse intends to serve on the Board.

(2)

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	<u>f.</u>	Have no disciplinary history with the Board or board in this State or another state within the 10	• •
		nurse's appointment to the Board.	• • •
	<u>g.</u>	Have no history of felony convictions of any kind	<u>I.</u>
	<u>h.</u>	Have no misdemeanor convictions related to the	practice of nursing.
(3)	Арі	iblic member appointed by the Governor shall not	ot be a provider of
	healt	h serviceslicensed nurse or a licensed health c	are professional or
	empl	oyed in the health services field.by a health care ins	stitution, health care
		er, or health care professional school. No-Add	
	mem	ber appointed by the Governor or person in the	e public member's
	imm	ediate family as defined by G.S. 90-405(8) shall be	currently employed
	as a l	icensed nurse or been previously employed as a lice	nsed nurse.
(4)	The	nurse practitioner, nurse anesthetist, nurse midwil	e, or clinical nurse
		alist advanced practice registered nurse member	
	licen	sed by the Board as a registered nurse an advanced	1 practice registered
	nurse	who meets the following criteria:	
	a.	Has graduated from or completed a graduate level	
		nursing education program accredited by a nation	
	b.	Maintains current certification or recertification	
		credentialing body approved by the Board	
		requirements established by rules adopted by the	
	c.	Practices in a manner consistent with rules adopt	ed by the Board and
		other applicable law.	
	<u>d.</u>	Holds an active, unencumbered license to pract	tice as an advanced
		practice registered nurse in North Carolina.	
	<u>e.</u> <u>f.</u>	Is a resident of North Carolina.	
	<u>f.</u>	Has a minimum of five years of experience as a	n advanced practice
		registered nurse.	
	<u>g.</u>	Has been engaged continuously in the position	
		practice registered nurse for at least three	years immediately
		preceding election.	
	<u>h.</u>	Provides evidence that the employer of the	·
		registered nurse is aware that the nurse intends to	
	<u>i.</u>	Has no disciplinary history with the Board or	
		board in this State or another state within the 10	years preceding the
		nurse's appointment to the Board.	
	<u>j.</u>	Has no history of felony convictions of any kind.	· · · ·
	<u>k.</u>	Has no misdemeanor convictions related to the pr	
		mbers of the Board shall serve four-year staggered	
	than t	wo consecutive four-year terms or eight consecutive	years after January
1, 2005. years.	1	The Decord many namena and of its members f	an nealest of duty
		The Board may remove any of its members for	
-	-	ofessional conduct. A member subject to disciplinat	ry proceedings shall
_		ard business until the charges are resolved.	companyation and
		ent. – Board members are entitled to receive rized by $G S = 93R 5$ "	compensation and
		rized by G.S. 93B-5." 2 (b) $G = 0.171(21(a))$ as amonded by this act	opplies to members
		2.(b) G.S. 90-171.21(a), as amended by this act,	applies to members
• • •		Board of Nursing after the effective date of this act. B $G = 00, 171, 23$ (b) reads as rewritten:	
		3. G.S. 90-171.23(b) reads as rewritten:	
	-	ers. The Board is empowered to:	
(1)	Aum	inister this Article.	

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1	(2)	Issue its interpretations of this Article.
2	(3)	Adopt, amend or repeal rules and regulations as may be necessary to carry
3		out the provisions of this Article.
4	(4)	Establish qualifications of, employ, and set the compensation of an executive
5		officer who shall be a registered nurse and who holds an active North
6		Carolina license and who shall not be a member of the Board.
7	(5)	Employ and fix the compensation of other personnel that the Board
8		determines are necessary to carry into effect this Article and incur other
9		expenses necessary to effectuate this Article.
0	(6)	Examine, license, and renew the licenses of duly qualified applicants for
1		licensure.
2	(7)	Cause the prosecution of all persons violating this Article.
3	(8)	Establish standards to be met by the students, and to pertain to faculty,
4		curricula, facilities, resources, and administration for any nursing program
5		leading to initial licensure as a registered nurse or a licensed practical nurse
6		as provided in G.S. 90-171.38.
7	(9)	Review all nursing programs leading to initial licensure as a registered nurse
8		or a licensed practical nurse at least every eight years or more often as
9		considered necessary by the Board or program director.
20	(10)	Grant or deny approval for nursing programs as provided in G.S. 90-171.39.
21	(11)	Upon request, grant Grant or deny approval of continuing education
22		programs for nurses as provided in G.S. 90-171.42.
23	(12)	Keep a record of all proceedings and make an annual summary of all actions
24		available.
25	(13)	Appoint, as necessary, advisory committees which may include persons
26		other than Board members to deal with any issue under study.
27	(14)	Appoint and maintain a subcommittee of the Board to work jointly with the
28		subcommittee of the North Carolina Medical Board to develop rules and
29		regulations to govern the performance of medical acts by registered nurses
80		and to determine reasonable fees to accompany an application for approval
81		or renewal of such approval as provided in G.S. 90-8.2. The fees and rules
32		developed by this subcommittee shall govern the performance of medical
33		acts by registered nurses and shall become effective when they have been
34		adopted by both Boards. Grant prescribing, ordering, dispensing, and
85		furnishing authority to holders of the advanced practice registered nurse
6		license pursuant to G.S. 90-171.20.
37	(15)	Recommend-Establish and collect such fees for licensure, license renewal,
38		examinations and reexaminations as it deems necessary for fulfilling the
9		purposes of this Article. Article, provided that the fees are consistent with
0		<u>G.S. 90-171.27.</u>
1	(16)	Adopt a seal containing the name of the Board for use on all certificates,
2		licenses, and official reports issued by it.
3	(17)	Enter into interstate compacts to facilitate the practice and regulation of-nur
4		sing. <u>APRNs, RNs, and LPNs.</u>
5	(18)	Establish programs for aiding in the recovery and rehabilitation of nurses
6		who experience chemical addiction or abuse or mental or physical
7		disabilities and programs for monitoring such nurses for safe
8		practice.monitoring the treatment, recovery, and safe practice of nurses
9		experiencing substance use disorders, mental health disorders, or physical
50		conditions impacting the ability to deliver safe care.

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1	(18a)	Establish programs for aiding in the remediation of nurses who experience
2 3	(19)	practice deficiencies. Request that the Department of Public Safety conduct criminal history
4 5	(20)	record checks of applicants for licensure pursuant to G.S. 143B-940. Adopt rules requiring an applicant to submit to the Board evidence of the
6 7		applicant's continuing competence in the practice of nursing at the time of license renewal or reinstatement.
8 9	(21)	Proceed in accordance with G.S. 90-171.37A, notwithstanding G.S. 150B-40(b), when conducting a contested case hearing in accordance
10		with Article 3A of Chapter 150B of the General Statutes.
11	(22)	Designate one or more of its employees to serve papers or subpoenas issued
12 13		by the Board. Service under this subdivision is permitted in addition to any other methods of service permitted by law.
13 14	(23)	Acquire, hold, rent, encumber, alienate, and otherwise deal with real
15	()	property in the same manner as a private person or corporation, subject only
16		to approval of the Governor and the Council of State. Collateral pledged by
17		the Board for an encumbrance is limited to the assets, income, and revenues
18		of the Board.
19	(24)	Order the production of any records concerning the practice of nursing
20		relevant to a complaint received by the Board or an inquiry or investigation
21		conducted by or on behalf of the BoardOrder or subpoena the production of
22 23		any patient records, documents, or other material concerning any matter to
23 24		be heard before or inquired into by the Board, notwithstanding any other provision of law providing for the application of any physician-patient
25		privilege with respect to such records, documents, or other material. All
26		records, documents, or other material compiled by the Board are subject to
27		the provisions of G.S. 90-171.37B. Notwithstanding the provisions of
28		G.S. 90-171.37B, in any proceeding before the Board, in any record of any
29		hearing before the Board, and in the notice of charges against any licensee,
30		the Board shall withhold from public disclosure the identity of a patient,
31		including information relating to dates and places of treatment, or any other
32 33		information that would tend to identify the patient, unless the patient or the
33 34		representative of the patient expressly consents to the disclosure. Upon written request, the Board shall revoke a subpoena if, upon a hearing, it finds
35		that the evidence the production of which is required does not relate to a
36		matter in issue, or if the subpoena does not describe with sufficient
37		particularity the evidence the production of which is required, or if for any
38		other reason in law the subpoena is invalid."
39		TON 4. G.S. 90-171.24 reads as rewritten:
40	0	xecutive director.
41		e director shall perform the duties prescribed by the Board and serve as
42 43	•	r to the Board. Additionally, the executive director shall hold an active North
43 44	-	ed nurse license and shall meet the criteria set forth in G.S. 90-171.21(d)(1)a., g. The executive director shall also serve as the Administrator of the Nurse
45	Licensure Compa	
46		TON 5. G.S. 90-171.27(b) reads as rewritten:
47		apenses payable from fees collected by Board.
48	"(b) The sc	chedule of fees shall not exceed the following rates:
49		on for license as advanced practice registered nurse\$100.00
50		of license to practice as advanced practice registered nurse
51	<u>(two</u>	-year period)

Reinstatement of lapsed license to practice as advanced practice
registered nurse and renewal fee
Application for examination leading to certificate and license as
registered nurse\$75.00
Application for certificate and license as registered nurse by
endorsement150.00
Application for each re-examination leading to certificate and license
as registered nurse75.00
Renewal of license to practice as registered nurse (two-year period)
Reinstatement of lapsed license to practice as a registered nurse and
renewal fee
Application for examination leading to certificate and license as
licensed practical nurse by examination75.00
Application for certificate and license as licensed practical nurse by
endorsement
Application for each re-examination leading to certificate and license
as licensed practical nurse75.00
Renewal of license to practice as a licensed practical nurse (two-year
period)100.00
Reinstatement of lapsed license to practice as a licensed practical nurse
and renewal fee
Application fee for retired registered nurse status or retired licensed
practical nurse status
Reinstatement of retired registered nurse to practice as a registered
nurse or a retired licensed practical nurse to practice as a licensed
practical nurse (two-year period)
Reasonable charge for duplication services and materials.
A fee for an item listed in this schedule shall not increase from one year to the next by more
than twenty percent (20%)."
SECTION 6. G.S. 90-171.29 reads as rewritten:
"§ 90-171.29. Qualifications of applicants for examination.
In order to be eligible for licensure as a registered nurse or a licensed practical nurse by
examination, the applicant shall make a written application to the Board on forms furnished by
the Board submit an application in the manner prescribed by the Board and shall submit to the
Board an application fee and written evidence, verified by oath, sufficient to satisfy the Board
that the applicant has graduated from a course of study approved by the Board and is mentally
and physically competent to practice nursing."
SECTION 7. Article 9A of Chapter 90 of the General Statutes is amended by
adding a new section to read:
" <u>§ 90-171.29A. Mental or physical exam to establish competence.</u>
In considering whether an applicant or licensee is mentally or physically capable of
practicing nursing with reasonable skill and safety, the Board may require an applicant or
licensee to submit to a mental examination by a licensed mental health professional designated
by the Board and to a physical examination by a physician or other licensed health professional designated by the Board. The Board may order an applicant or licensee to be examined before
or after charges are presented against the applicant or licensee. The results of the examination
shall be reported directly to the Board and shall be admissible in evidence in a hearing before
the Board."
SECTION 8. G.S. 90-171.30 reads as rewritten:
SRUTION X (+ S YOL) / 1 30 reade as rewritten.

1 At least twice each year the The Board shall give an examination, at the time and place it 2 determines, to applicants for licensure to practice as a registered nurse or licensed practical 3 nurse. The Board shall adopt rules, not inconsistent with this Article, governing qualifications of applicants, the conduct of applicants during the examination, and the conduct of the 4 5 examination. The applicants shall be required to pass the examination required by the Board. 6 The Board shall adopt rules which identify the criteria which must be met by an applicant in 7 order to be issued a license. When the Board determines that an applicant has met those criteria, 8 passed the required examination, submitted the required fee, and has demonstrated to the 9 Board's satisfaction that he or she is mentally and physically competent to practice nursing, the 10 Board shall issue a license to the applicant."

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SECTION 9. G.S. 90-171.33 reads as rewritten:

12 "§ 90-171.33. Temporary license.

(a) Until the implementation of the computer-adaptive licensure examination, the Board may issue a nonrenewable temporary license to persons who are applying for licensure under G.S. 90-171.30, and who are scheduled for the licensure examination at the first opportunity after graduation, for a period not to exceed the lesser of nine months or the date of applicant's notification of the results of the licensure examination. The Board shall revoke the temporary license of any person who does not take the examination as scheduled, or who has failed the examination for licensure as provided by this act.

20 (b) Upon implementation of the computer adaptive licensure examination, no
 21 temporary licenses will be issued to persons who are applying for licensure under
 22 G.S. 90-171.30.

(c) The Board may issue a nonrenewable temporary license to persons applying for
 licensure under G.S. 90-171.32 for a period not to exceed the lesser of six months or until the
 Board determines whether the applicant is qualified to practice nursing in North Carolina.
 Temporary licensees may perform patient-care services within limits defined by the Board. In
 defining these limits, the Board shall consider the ability of the temporary licensee to safely and
 properly carry out patient-care services. Temporary licensees shall be held to the standard of
 care of a fully licensed nurse."

30

SECTION 10. G.S. 90-171.34 reads as rewritten:

31 "§ 90-171.34. Licensure renewal.

Every unencumbered <u>registered nurse and licensed practical nurse</u> license, except <u>for a</u> temporary license, issued under this Article shall be renewed for two years. On or before the date the current license expires, every person who desires to continue to practice nursing shall apply for licensure renewal to the Board on forms furnished by the Board <u>in the manner</u> <u>prescribed by the Board</u> and shall also file the required fee. Failure to renew the license before the expiration date shall result in automatic forfeiture of the right to practice nursing in North Carolina until such time that the license has been reinstated."

39

SECTION 11. G.S. 90-171.35 reads as rewritten:

40 "§ 90-171.35. Reinstatement.

41 A registered nurse or licensed practical nurse licensee who has allowed his or her license to 42 lapse by failure to renew as herein provided may apply for reinstatement on a form provided in 43 a manner prescribed by the Board. The Board shall require the applicant to return the 44 completed application with the required fee and to furnish a statement of the reason for failure 45 to apply for renewal prior to the deadline. If the license has lapsed for at least five years, the 46 Board shall require the applicant to complete satisfactorily complete a refresher course approved by the Board, or provide proof of active licensure within the past five years in another 47 jurisdiction. The Board may require any applicant for reinstatement to satisfy the Board that the 48 49 license should be reinstated. If, in the opinion of the Board, the applicant has so satisfied the 50 Board, it shall issue a renewal of license to practice nursing, or it shall issue a license to 51 practice nursing for a limited time."

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:	SECTI	ON 12. G.S. 90-171.36 reads as rewritten:	
"§ 90-171.3	36. Ina	ctive list.<u>status.</u>	
(a) ¹	When a	a licensee submits a request for inactive status, the	he Board shall issue to the
licensee a s	statemer	nt of inactive status and shall place designate the l	icensee's name on thestatus
<u>as</u> inactive	<u>list.ina</u>	ctive. While on the inactive list, inactive, the perso	on shall not be subjected to
renewal req	quireme	nts and shall not practice nursing in North Carolin	a.
(b) -	When]	f, within five years of being placed on inactive sta	atus, such person desires to
be removed	d from	the inactive list and returned to the active list	within five years of being
placed on in	nactive	status, change their status from inactive to active,	that person shall submit an
application	shall b	e submitted to the Board on a form furnished by	the Board and the fee shall
be paid for	: license	e renewal.Board, along with payment of the lice	ense reinstatement fee. The
Board shall	l requir	e evidence of competency to resume the practice	of nursing before returning
the applicar	nt to act	tive status. If the person has been on the i nactive li	ist for more than five years,
the applicat	nt must	satisfactorily complete a refresher course approve	ed by the Board or provide
proof of act	tive lice	ensure within the past five years in another jurisdic	ction."
:	SECTI	ON 13. G.S. 90-171.36A reads as rewritten:	
"§ 90-171.3	36A. R	etired nurse status; reinstatement.	
(a) .	After a	registered nurse or a licensed practical nurse ha	s retired, upon payment of
the one-tim	ne fee i	required by G.S. 90-171.27(b), the Board may is	ssue a special license to a
registered 1	nurse o	r licensed practical nurse in recognition of the	nurse's retired status.shall
designate th	he nurse	e's status as retired.	
(b) 1	If a re	tired registered nurse or licensed practical nurs	se wishes to return to the
practice of	nursin	g, the retired nurse shall apply for reinstatement	t on a form provided <u>in a</u>
manner pre	escribed	by the Board and satisfy any requirements the	Board deems necessary to
reinstate the	e licens	e."	
		ON 14. Article 9A of Chapter 90 of the Gener	ral Statutes is amended by
adding new			
		dvanced Practice Registered Nurse licensure.	
		ve January 1, 2016, no advanced practice registere	-
		registered nurse unless the nurse is licensed by the	
		licant for a license to practice as an APRN sha	
-		by the Board and pay a fee in an amount determine	
		ligible for licensure, an applicant shall meet all of	
		Must hold a current North Carolina registered nu	
		eligibility for licensure as a registered nurse in this	
	<u>(2)</u>	Must not hold an encumbered license as a reg	sistered nurse or advanced
		practice registered nurse in any state or territory.	
1	<u>(3)</u>	Must have completed a graduate level APRN	
		nursing or nursing-related accrediting body that i	
		States Secretary of Education or the Counc	-
		Accreditation as acceptable to the Board. The ec	
		the four APRN roles and at least one population for	
<u>.</u>	<u>(4)</u>	Must be currently certified by a national certifying	
		Board in the APRN role and population focus	appropriate to educational
		preparation.	
1	(5)	Must report any criminal conviction, nolo conten	ndere plea, Alford plea, or
		other plea arrangement in lieu of conviction.	
1	<u>(6)</u>	Must not have committed any acts or omissio	
		disciplinary action in another jurisdiction or,	
		committed and would be grounds for disciplination	ry action in this State, the

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1	Board has found, after investigation, that sufficient restitution has been
2	made.
3	" <u>§ 90-171.36C. Advanced Practice Registered Nurse licensure; grandfathering</u>
4 5	(a) <u>exceptions.</u> (a) The Board shall issue an APRN license to an applicant who does not meet the
5 6	(a) <u>The Board shall issue an APRN license to an applicant who does not meet the</u> education requirements of G.S. 91-171.36B(c)(3) if the applicant:
7	(1) Is recognized by the Board or approved to practice as an APRN in this State
8	on December 31, 2015.
9	(2) <u>Submits an application to the Board in a format prescribed by the Board and</u>
)	the applicable fee as determined under section G.S. 90-171.27 by January 1,
l	<u>2016.</u>
2	$(3) \qquad \underbrace{\text{Otherwise meets the requirements of G.S. 90-171.36B(c)(1), (2), (4), (5),} $
	$\frac{\text{and } (6)}{1}$
	(b) The Board shall issue a license to an applicant who meets the education requirements of $C = 00.171.26 P(x)(2)$ but who is unable to meet the contification requirements
	requirements of G.S. 90-171.36B(c)(3) but who is unable to meet the certification requirements of G.S. 90-171.36B(c)(4) if the applicant's education and certification are substantially similar
	to the requirements set forth in G.S. 90-171.36B.
	(c) Applicants for advanced practice registered nurse licensure by endorsement who do
	not meet the education requirements of G.S. $90-171.36B(c)(3)$ after December 31, 2015, shall
	be deemed to have met the education requirements that were in place in North Carolina at the
	time of their initial licensure as an advanced practice registered nurse in another jurisdiction.
	(d) An advanced practice registered nurse licensed under this section shall maintain all
	practice privileges provided to licensed advanced practice registered nurses under this Chapter.
	"§ 90-171.36D. Advanced Practice Registered Nurse licensure renewal; reinstatement.
	(a) <u>APRN licenses issued under this Chapter shall be renewed according to the</u>
	frequency and schedule established by the Board. An applicant for APRN license renewal shall:
	(1) Submit a renewal application in the manner prescribed by the Board and remit the required fee
	 <u>remit the required fee.</u> <u>Maintain national certification in the appropriate APRN role and at least one</u>
	population focus, authorized by licensure, through an ongoing certification
	maintenance program of a nationally recognized by the Board unless subject
	to the grandfather provision in G.S. 90-171.36C.
	(3) Meet all other requirements as set forth in statute and rule.
	Failure to renew the APRN license before the expiration date shall result in automatic
	forfeiture of the right to practice nursing as an APRN in North Carolina until such time as the
	license has been reinstated.
	(b) <u>An APRN licensee who has allowed his or her license to lapse by failure to renew as</u>
	herein provided may apply for reinstatement in a manner prescribed by the Board. The Board shall require the applicant to return the completed application along with the required fee and a
	statement of the reason for failure to apply for renewal prior to the deadline."
	SECTION 15. G.S. 90-171.37 reads as rewritten:
	"§ 90-171.37. Revocation, discipline, suspension, probation, or denial of licensure.
	Disciplinary authority.
	(a) The Board may initiate an investigation upon receipt of information about any
	practice that might violate any provision of this Article or any rule or regulation promulgated
	by the Board. In accordance with the provisions of Chapter 150B of the General Statutes, the
	Board shall have the power and authority to: (i) refuse to issue a license to practice nursing; (ii)
	refuse to issue a certificate of renewal of a license to practice nursing; (iii) revoke or suspend a
	license to practice nursing; and (iv) invoke other such disciplinary measures, censure, or
	probative terms against a licensee as it deems fit and proper; in any instance or instances in which the Board is satisfied that the applicant or licensee: to place on probation with or without
	which the Board is satisfied that the applicant of ficensee. to place on probation with of without

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1	conditions, imp	ose limitations and conditions on, accept voluntary surrender, publicl	y
2	reprimand, issue	e public letters of concern, require satisfactory completion of treatmer	<u>it</u>
3	programs or rem	edial or educational training, refuse to issue a certificate of renewal, fine, deny	У,
4	suspend, or revol	ke a license or privilege to practice nursing in this State, issued by the Board t	0
5	any person who	has been found by the Board to have committed any of the following acts of)r
6	conduct, or for a	ny of the following reasons:	
7	(1)	Has given false information or has withheld material information from th	ie
3		Board in procuring or attempting to procure a license to practice nursing.	
)	(2)	Has been convicted of or pleaded pled, guilty or nolo contendere or guilty i	n
		accordance with State v. Alford of a crime involving moral turpitude, or the	
		violation of a law involving the practice of medicine, or a conviction of	
		felony; provided that a felony conviction shall be treated as provided i	
		subsection (c) of this section.to any crime which indicates that the nurse i	
		unfit or incompetent to practice nursing or that the nurse has deceived of)r
		defrauded the public.	
	(3)	Being unable to practice nursing with reasonable skill and safety to patient	
		by reason of illness, excessive use of alcohol, drugs, chemicals, or any other	
		type of material, or by reason of any physical or mental abnormality. The	
)		Board is empowered and authorized to require a nurse licensed by it t	
		submit to mental or physical examination by physicians designated by th	
		Board before or after charges may be presented against the nurse, and the	
r		results of the examination shall be admissible in evidence in a hearing befor	
		the Board. Has a mental or physical disability or uses any drug to a degre	æ
 ;	(A)	that interferes with his or her fitness to practice nursing.	
	(4) (5)	Engages in conduct that endangers the public health. Is unfit or incompetent to practice nursing by reason of deliberate of	.
	(3)	negligent acts or omissions regardless of whether actual injury to the patier	
		is established.	π
	(6)	Engages in conduct that deceives, defrauds, or harms the public in the cours	P
	(0)	of professional activities or services.	C
	<u>(6a)</u>	Immoral or dishonorable conduct or acts involving moral turpitude.	
	<u>(6b)</u>	<u>Unprofessional conduct, including, but not limited to, departure from, or th</u>	ie
	<u>(00)</u>	failure to conform to, the standards of acceptable and prevailing nursin	
		practice, or the ethics of the nursing profession, irrespective of whether of	-
		not a patient is injured thereby, or the committing of any act contrary t	
		honesty, justice, or good morals, whether the same is committed in th	
		course of the licensee's practice or otherwise, and whether committed withi	
		or without North Carolina.	
	<u>(6c)</u>	Having a license to practice nursing or a privilege to practice nursin	g
		revoked, suspended, restricted, or acted against or having a license t	-
		practice nursing denied by the licensing authority of any jurisdiction. For	or
2		purposes of this subdivision, the licensing authority's acceptance of a licens	<u>se</u>
		to practice nursing voluntarily relinquished by a nurse or relinquished b	y
		stipulation, consent order, or other settlement in response to or i	n
i		anticipation of the filing of administrative charges against the nurse's license	
		is an action against a license to practice nursing.	
	<u>(6d)</u>	The failure to respond, within a reasonable period of time and in	<u>a</u>
		reasonable manner as determined by the Board, to inquiries from the Board	d
		concerning any matter affecting the license to practice nursing.	
	(7)	Has violated any provision of this Article or rule promulgated by the Board.	-
	(8)	Has willfully violated any rules enacted by the Board.	

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1	The Board may take any of the actions specified above in this section when a registered				
2	nurse approved to perform medical acts has violated rules governing the performance of				
3	medical acts by a registered nurse; provided this shall not interfere with the authority of the				
4	North Carolina Medical Board to enforce rules and regulations governing the performance of				
5	medical acts by a registered nurse.				
6	(b) In addition to the disciplinary powers listed above, the Board may limit, restrict,				
7	deny, suspend, or revoke prescriptive or dispensing authority of any advanced practice				
3	registered nurse who holds prescriptive authority who has been found by the Board to have				
)	committed any of the following acts or conduct, or for any of the following reasons:				
)	(1) Prescribing, dispensing, administering, or distributing drugs in an unsafe				
	manner or without adequate instructions to patients according to acceptable				
	and prevailing standards.				
	(2) <u>Selling, purchasing, trading, or offering to sell, purchase, or trade drug</u>				
	samples.				
	(3) Prescribing, dispensing, administering, or distributing drugs for other than				
	therapeutic or prophylactic purposes.				
	(4) Prescribing or distributing drugs to individuals who are not patients of the				
	advanced practice registered nurse or who are not within that nurse's role and				
	population focus.				
	(c) The Board may reinstate a revoked license, revoke censure or probative, terms,				
	probation, or remove other licensure restrictions when it finds that the reasons for revocation,				
	censure or probative terms, or other licensure restrictions no longer exist and that the nurse or				
	applicant can reasonably be expected to safely and properly practice nursing.				
	(d) <u>A felony conviction shall result in the automatic revocation of a license issued by</u>				
	the Board, unless the Board orders otherwise or receives a request for a hearing from the person				
	within 60 days of receiving notice from the Board, after the conviction, of the provisions of this				
	subsection. If the Board receives a timely request for a hearing in such a case, the provisions of				
	G.S. 90-14.2 shall be followed.				
	(e) The Board and its members and staff shall not be held liable in any civil or criminal				
	proceeding for exercising, in good faith, the powers and duties authorized by law.				
	The Board may reinstate a revoked license, revoke censure or probative terms, or remove				
	other licensure restrictions when it finds that the reasons for revocation, censure or probative				
	terms, or other licensure restrictions no longer exist and that the nurse or applicant can				
	reasonably be expected to safely and properly practice nursing."				
	SECTION 16. G.S. 90-171.37A(a) reads as rewritten:				
	"§ 90-171.37A. Use of hearing committee and depositions.				
	(a) The Board, in its discretion, may designate in writing three or more of its members				
	to conduct hearings as a hearing committee to take receive evidence. A majority of the hearing				
	committee shall be licensed nurses."				
	SECTION 17. Article 9A of Chapter 90 of the General Statutes is amended by				
	adding new sections to read:				
	"§ 90-171.37B. Board to keep public records.				
	(a) All records, papers, investigative files, investigative reports, other investigative				
	information, and other documents containing information in the possession of or received or				
	gathered by the Board, or its members or employees or consultants as a result of investigations,				
	inquiries, assessments, or interviews conducted in connection with a licensing, complaint,				
	assessment, potential impairment matter, or disciplinary matter, shall not be considered public				
	records within the meaning of Chapter 132 of the General Statutes and are privileged,				
	confidential, and not subject to discovery, subpoena, or other means of legal compulsion for				
	release to any person other than the Board, its employees, or consultants involved in the				
	application for license, impairment assessment, or discipline of a license holder, except as				

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1	provided in subsection (b) of this section. For purposes of this subsection, investigative				
2	information includes information relating to the identity of, and a report made by, a physician				
3	or other person performing an expert review for the Board and transcripts of any deposition				
4	taken by Board counsel in preparation for or anticipation of a hearing held pursuant to this				
5	Article but not admitted into evidence at the hearing.				
6	(b) The Board shall provide the licensee or applicant with access to all information in				
7	its possession that the Board intends to offer into evidence in presenting its case in chief at the				
8	contested hearing on the matter, subject to any privilege or restriction set forth by rule, statute,				
9	or legal precedent, upon written request from a licensee or applicant who is the subject of a				
10	complaint or investigation, or from the licensee's or applicant's counsel, unless good cause is				
11	shown for delay. The Board shall not be required to provide any of the following:				
12	(1) A Board investigative report.				
13	(2) The identity of a nontestifying complainant.				
14	(3) Attorney-client communications, attorney work product, or other materials				
15	covered by a privilege recognized by the Rules of Civil Procedure or the				
16	Rules of Evidence.				
17	(c) Any notice or statement of charges against any licensee, or any notice to any				
18	licensee of a hearing in any proceeding, shall be a public record within the meaning of Chapter				
19	132 of the General Statutes, notwithstanding that it may contain information collected and				
20	compiled as a result of any such investigation, inquiry, or interview; and provided, further, that				
21	if any such record, paper, or other document containing information theretofore collected and				
22	compiled by the Board, as hereinbefore provided, is received and admitted in evidence in any				
23 24	hearing before the Board, it shall thereupon be a public record within the meaning of Chapter				
24 25	<u>132 of the General Statutes.</u>				
25	(d) If investigative information in the possession of the Board, its employees, or agents				
26 27	indicates that a crime may have been committed, the Board may report the information to the appropriate law enforcement agency or district attorney of the district in which the offense was				
28	committed. Such information shall be confidential under G.S. 132-1.4.				
28 29	(e) The Board shall cooperate with and assist a law enforcement agency or district				
30	attorney conducting a criminal investigation or prosecution of a licensee by providing				
31	information that is relevant to the criminal investigation or prosecution to the investigating				
32	agency or district attorney. Information disclosed by the Board to an investigative agency or				
33	district attorney remains confidential and may not be disclosed by the investigating agency				
34	except as necessary to further the investigation.				
35	(f) All persons licensed under this Article shall self-report to the Board within 30 days				
36	of arrest or indictment any of the following:				
37	(1) <u>Any felony arrest or indictment.</u>				
38	(2) <u>Any arrest for driving while impaired or driving under the influence.</u>				
39	(3) Any arrest or indictment for the possession, use, or sale of any controlled				
40	substance.				
41	(g) The Board, its members, and staff may release confidential or nonpublic				
42	information to any health care licensure board in this State or another state or authorized				
43	Department of Health and Human Services personnel with enforcement or investigative				
44 45	responsibilities about the issuance, denial, annulment, suspension, or revocation of a license, or				
45 46	the voluntary surrender of a license by a licensee of the Board, including the reasons for the				
46 47	action, or an investigative report made by the Board. The Board shall notify the licensee within 60 days after the information is transmitted. A summary of the information that is being				
47 48	transmitted shall be furnished to the licensee. If the licensee requests in writing within 30 days				
49	after being notified that the information has been transmitted, the licensee shall be furnished a				
5 0	copy of all information so transmitted. The notice or copies of the information shall not be				
51	provided if the information relates to an ongoing criminal investigation by any law enforcement				

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agency or authorized Department of Health and Human Services personnel with enforcement or
investigative responsibilities.
" <u>§ 90-171.37C. Service of notices.</u>
Any notice required by this Chapter may be served either personally by an employee of the
Board or by an officer authorized by law to serve process, or by registered or certified mail,
return receipt requested, directed to the licensee or applicant at his last known address as shown
by the records of the Board. If notice is served personally, it shall be deemed to have been
served at the time when the officer or employee of the Board delivers the notice to the person
addressed or delivers the notice at the licensee's or applicant's last known address as shown by
records of the Board with a person of suitable age and discretion then residing therein. Where
notice is served in a manner authorized by Rule 4(j) of the N.C. Rules of Civil Procedure, it
shall be deemed to have been served on the date borne by the return receipt showing delivery of
the notice to the licensee's or applicant's last known address as shown by the records of the
Board, regardless of whether the notice was actually received or whether the notice was
unclaimed or undeliverable for any reason."
SECTION 18. G.S. 90-171.39 reads as rewritten:
"§ 90-171.39. Approval.
The Board shall designate persons to survey review proposed nursing programs, including
the clinical facilities.programs. The persons designated by the Board shall submit a written
report of the survey review to the Board. Board in the manner prescribed by the Board. If in the
opinion of the Board the standards for approved nursing education are met, the program shall
be given approval."
SECTION 19. G.S. 90-171.40 reads as rewritten:
"§ 90-171.40. Ongoing approval.
The Board shall review all nursing programs in the State at least every eight 10 years or
more often as considered necessary. If the Board determines that any approved nursing
program does not meet or maintain the standards required by the Board, the Board shall give
written notice specifying the deficiencies to the institution responsible for the program. The
Board shall evaluate and take appropriate action, up to and including withdraw approval from a
program that fails to correct deficiencies within a reasonable time. The Board shall publish
annually a list of nursing programs in this State showing their approval status."
SECTION 20. G.S. 90-171.42(a) reads as rewritten:
"§ 90-171.42. Continuing education programs.
(a) Upon request, the <u>The</u> Board shall grant approval to continuing education programs
upon a finding that the program offers an educational experience designed to enhance the
practice of nursing."
SECTION 21. G.S. 90-171.43 reads as rewritten:
"§ 90-171.43. License required.
(a) No person shall practice or offer to practice as a an advanced practice registered
<u>nurse</u> , registered <u>nurse</u> or licensed practical nurse, or use the word "nurse" as a title for <u>harself</u> or <u>himself</u> or <u>use</u> an abbraviation to indicate that the person is a an advanced practice
herself or himself, or use an abbreviation to indicate that the person is a <u>an advanced practice</u>
registered nurse, registered nurse, or licensed practical nurse, unless the person is
currently licensed as a <u>an advanced practice registered nurse</u> , registered <u>nurse</u> , or licensed
practical nurse as provided by this Article. If the word "nurse" is part of a longer title, such as "nurse's aide", a person who is entitled to use that title shall use the entire title and may not
abbreviate the title to "nurse". This Article shall not, however, be construed to prohibit or limit
the following:

48 49

The performance by any person of any act for which that person holds a license issued pursuant to North Carolina law; (1)

 (2) The clinical practice by students enrolled in approved nursing programs, continuing education programs, or refresher courses under the supervision of qualified faculty; (3) The performance of nursing performed by persons who hold a temporary license issued pursuant to G.S. 90-171.33; (4) The delegation to any person, including a member of the patient's family, by a physician licensed to practice medicine in North Carolina, a licensed dentist or registered nurse of those patient-care services which are routine, repetitive, limited in scope that do not require the professional judgment of a registered nurse or licensed practical nurse; (5) Assistance by any person in the case of emergency. Any person permitted to practice nursing without a license as provided in subdivision (2) or (3) of this section shall be held to the same standard of care as any licensed nurse. (b) The abbreviations for the APRN designation of a certified nurse midwife, a clinical nurse specialist, and a nurse practitioner shall be APRN, plus the role title, i.e. CNM, CNS, and NP. (c) It shall be unlawful for any person to use the fitle "APRN" or "APRN" plus their respective role titles, the role title alone, authorized abbreviations, or any other title that would lead a person to believe the individual is an APRN, unless permitted by this act. (d) The Board shall have the authority to promulgate rules to enforce the provisions of this section." SECTION 22, G.S. 90-171.43A reads as rewritten: "\$90-171.43A, Mandatory employer verification of licensure status. (a) Before hiring an advanced practice registered nurse, a registered nurse- or a licensed practical nurse in North Carolina, a health care facility shall verify that the applicant has a current, valid license to practice enursing pursuant to G.S. 90-171.43. (b) For purposes of this section, "health care facility" mean	General Assen	nbly of North Carolina	Session 2015
 (3) The performance of nursing performed by persons who hold a temporary license issued pursuant to G.S. 90-171.33; (4) The delegation to any person, including a member of the patient's family, by a physician licensed to practice medicine in North Carolina, a licensed dentist or registered nurse of those patient-care services which are routine, repetitive, limited in scope that do not require the professional judgment of a registered nurse or licensed practical nurse; (5) Assistance by any person in the case of emergency. Any person permitted to practice nursing without a license as provided in subdivision (2) or (3) of this section shall be held to the same standard of care as any licensed nurse. (b) The abbreviations for the APRN designation of a certified nurse midwife, a clinical nurse specialist, and a nurse practitioner shall be APRN, plus the role title, i.e. CNM, CNS, and NP. (c) It shall be unlawful for any person to use the title "APRN" or "APRN" plus their respective role titles, the role title alone, authorized abbreviations, or any other title that would lead a person to believe the individual is an APRN, unless permitted by this act. (d) The Board shall have the authority to promulgate rules to enforce the provisions of this section." SECTION 22. G.S. 90-171.43A reads as rewritten: "§ 90-171.43A. Mandatory employer verification of licensure status. (a) Before hiring an advanced practice registered nurse, a registered nurse_norse_or a licensed practical nurse in North Carolina, a health care facility" means: (1) Facilities described in G.S. 131E-256(b). (2) Public health departments, physicians' offices, ambulatory care facilities, and rural health clinics." SECTION 23. G.S. 90-171.434 reads as rewritten: *§ 0.171.44. Prohibited acts. It shall be a violation of this Article, and subject to action under G.S. 90-171.37, for any person to: (1) Sell, fraudulent	(2)	continuing education programs, or refresher courses under	
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that is not approved by the Board.			
(5) Employ unlicensed persons to practice nursing."			
SECTION 24. G.S. 90-171.47 reads as rewritten:			
"§ 90-171.47. Reports: immunity from suit.	9 90-1/1.4/.	keports: immunity from suit.	

Any person who has reasonable cause to suspect misconduct or incapacity of a licensee or 1 2 who has reasonable cause to suspect that any person is in violation of this Article, including 3 those actions specified in G.S. 90-171.37(1) through (8), G.S. 90-171.43, and G.S. 90-171.44, 4 shall report the relevant facts to the Board Board in a timely manner. Upon receipt of such 5 charge-information or upon its own initiative, the Board may give notice of an administrative 6 hearing or may, after diligent investigation, dismiss unfounded charges.shall conduct an 7 investigation and prosecute all persons violating this Article pursuant to G.S. 90-171.23(b)(7). 8 Any person making a report pursuant to this section shall be immune from any criminal 9 prosecution or civil liability resulting therefrom unless such person knew the report was false or 10 acted in bad faith or reckless disregard of whether the report was false." 11 SECTION 25. G.S. 90-171.48 reads as rewritten: 12 "§ 90-171.48. Criminal history record checks of applicants for licensure. 13 Definitions. – The following definitions shall apply in this section: (a) 14 Applicant. – A person applying for initial-licensure as a an advanced practice (1)15 registered nurse, registered nurse nurse, or licensed practical nurse either by examination pursuant to G.S. 90-171.29 or G.S. 90-171.30 or without 16 17 examination pursuant to G.S. 90-171.32. The term "applicant" shall also 18 include a person applying for renewal of licensure pursuant to 19 G.S. 90-171.34, reinstatement of licensure pursuant to G.S. 90-171.35 or 20 returning to active status pursuant to G.S. 90-171.36 as a registered nurse or 21 licensed practical nurse. Additionally, the term "applicant" shall also apply 22 to a person applying for licensure pursuant to G.S. 90-171.36B, renewal for 23 licensure, or reinstatement for licensure pursuant to G.S. 90-171.36C as an 24 advanced practice registered nurse. 25 Criminal history. - A history of conviction of a State crime, whether a (2)26 misdemeanor or felony, that bears on an applicant's fitness for licensure to 27 practice nursing. The crimes include the criminal offenses set forth in any of 28 the following Articles of Chapter 14 of the General Statutes: Article 5, 29 Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering 30 Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape 31 and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and 32 Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or 33 Incendiary Device or Material; Article 14, Burglary and Other 34 Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; 35 Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses 36 and Cheats; Article 19A, Obtaining Property or Services by False or 37 Fraudulent Use of Credit Device or Other Means; Article 19B, Financial 38 Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 39 26, Offenses Against Public Morality and Decency; Article 26A, Adult 40 Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, 41 Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses 42 Against the Public Peace; Article 36A, Riots, Civil Disorders, and 43 Emergencies; Article 39, Protection of Minors; Article 40, Protection of the 44 Family; Article 59, Public Intoxication; and Article 60, Computer-Related 45 Crime. The crimes also include possession or sale of drugs in violation of the 46 North Carolina Controlled Substances Act in Article 5 of Chapter 90 of the 47 General Statutes and alcohol-related offenses including sale to underage 48 persons in violation of G.S. 18B-302 or driving while impaired in violation 49 of G.S. 20-138.1 through G.S. 20-138.5.

50 (b) All applicants for licensure <u>shallshall</u>, if requested by the Board, consent to a 51 criminal history record check. Refusal to consent to a criminal history record check may

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constitute grounds for the Board to deny licensure to an applicant. The Board shall ensure that 1 2 the State and national criminal history of an applicant applying for initial licensure as a 3 registered nurse or licensed practical nurse either by examination pursuant to G.S. 90-171.29 or 4 G.S. 90-171.30 or without examination pursuant to G.S. 90-171.32 is checked. The Board may 5 request a criminal history record check for applicants applying for reinstatement of licensure 6 pursuant to G.S. 90-171.35 or returning to active status pursuant to G.S. 90-171.36 as a 7 registered nurse or licensed practical nurse. 8 The Board shall be responsible for providing to the North Carolina Department of Public 9 Safety the fingerprints of the applicant to be checked, a form signed by the applicant consenting 10 to the criminal record check and the use of fingerprints and other identifying information 11 required by the State or National Repositories, and any additional information required by the 12 Department of Public Safety. The Board shall keep all information obtained pursuant to this 13 section confidential. 14 (c) If an applicant's criminal history record check reveals one or more convictions listed 15 under subsection (a)(2) of this section, the conviction shall not automatically bar licensure. The 16 Board shall consider all of the following factors regarding the conviction: 17 The level of seriousness of the crime. (1)18 (2) The date of the crime. The age of the person at the time of the conviction. 19 (3) 20 (4) The circumstances surrounding the commission of the crime, if known. 21 (5) The nexus between the criminal conduct of the person and the job duties of 22 the position to be filled. 23 The person's prison, jail, probation, parole, rehabilitation, and employment (6)24 records since the date the crime was committed. 25 The subsequent commission by the person of a crime listed in subsection (a) (7)26 of this section. 27 If, after reviewing the factors, the Board determines that the grounds set forth in subsections 28 (1), (2), (3), (4), (5), or (6) of G.S. 90-171.37 exist, the Board may deny licensure of the 29 applicant. The Board may disclose to the applicant information contained in the criminal 30 history record check that is relevant to the denial. The Board shall not provide a copy of the 31 criminal history record check to the applicant. The applicant shall have the right to appear 32 before the Board to appeal the Board's decision. However, an appearance before the full Board 33 shall constitute an exhaustion of administrative remedies in accordance with Chapter 150B of 34 the General Statutes. 35 (d) Limited immunity. – The Board, its officers and employees, acting in good faith and 36 in compliance with this section, shall be immune from civil liability for denying licensure to an 37 applicant based on information provided in the applicant's criminal history record check." 38 SECTION 26. Article 9A of Chapter 90 of the General Statutes is amended by 39 adding a new section to read: 40 "§ 90-171.49. Disasters and emergencies. 41 In the event of an occurrence which the Governor of the State of North Carolina has 42 declared a state of emergency, or in the event of an occurrence for which a county or 43 municipality has enacted an ordinance to deal with states of emergency under G.S. 166A-19.31, or to protect the public health, safety, or welfare of its citizens under Article 22 of Chapter 44 45 130A of the General Statutes, G.S. 160A-174(a) or G.S. 153A-121(a), as applicable, the Board may waive the requirements of this Article in order to permit the provision of emergency health 46 47 services to the public." 48 SECTION 27. G.S. 90-171.28 is repealed. 49 **SECTION 28.** This act becomes effective January 1, 2016.