

Commonwealth of Virginia



REGULATIONS

GOVERNING THE PRACTICE OF NURSING

VIRGINIA BOARD OF NURSING

Title of Regulations: 18 VAC 90-20-10 et seq.

**Statutory Authority: §§ 54.1-2400 and Chapter 30 of Title 54.1
of the *Code of Virginia***

Revised Date: December 2, 2015

9960 Mayland Drive, Suite 300
Henrico, VA 23233-1463

(804) 367-4515 (TEL)
(804) 527-4455 (FAX)
email: nursebd@dhp.virginia.gov

TABLE OF CONTENTS

TABLE OF CONTENTS.....	2
PREAMBLE.....	5
Part I. General Provisions.....	5
18VAC90-20-10. Definitions.....	5
18VAC90-20-20. Delegation of authority.	7
18VAC90-20-30. Fees.	7
18VAC90-20-34. Duplicate license.	8
18VAC90-20-35. Identification; accuracy of records.....	8
18VAC90-20-36. Data collection of nursing workforce information.....	8
18VAC90-20-37. Supervision of licensed practical nurses.	8
Part II. Nursing Education Programs.	9
Article 1. Initial Approval of a Nursing Education Program.	9
18VAC90-20-40. Application for initial approval.....	9
18VAC90-20-50. (Repealed.)	10
18VAC90-20-60. (Repealed.)	10
18VAC90-20-65. (Repealed.)	10
18VAC90-20-70. Organization and administration.	10
18VAC90-20-80. Philosophy and objectives.....	11
18VAC90-20-90. Faculty.....	11
18VAC90-20-95. (Repealed.)	12
18VAC90-20-96. (Repealed.)	12
18VAC90-20-100. Admission of students.....	12
18VAC90-20-110. Resources, facilities, publications, and services.	13
18VAC90-20-120. Curriculum.	14
18VAC90-20-121. Curriculum for direct client care.....	16
18VAC90-20-122. Clinical practice of students.	16
18VAC90-20-130. Granting of initial program approval.	17
18VAC90-20-131. Denying or withdrawing initial program approval.....	18
18VAC90-20-132. Causes for denial or withdrawal of nursing education program approval.....	19
Article 2. Full Approval for a Nursing Education Program.....	19
18VAC90-20-133. Granting full program approval.	19
18VAC90-20-134. Denying full program approval.....	20
18VAC90-20-135. Requests for exceptions or requirements for faculty.....	20
18VAC90-20-136. Records and provision of information.....	21
18VAC90-20-137. Evaluation of resources; written agreements with cooperating agencies.	22

18VAC90-20-140. Program changes.	22
Article 3. Continued Approval of Nursing Education Programs.	22
18VAC90-20-150. (Repealed.)	22
18VAC90-20-151. Passage rate on national examination.	23
18VAC90-20-160. Maintaining an approved nursing education program.	23
18VAC90-20-161. Continuing and withdrawing full approval.	23
18VAC90-20-170. Closing of an approved nursing education program; custody of records.	24
18VAC90-20-180. (Repealed.)	25
Part III. Licensure and Practice.	25
18VAC90-20-181. Issuance of a license with a multistate licensure privilege.....	25
18VAC90-20-182. Limitations of a multistate licensure privilege.	25
18VAC90-20-183. Access to information in the coordinated licensure information system.	26
18VAC90-20-190. Licensure by examination.	26
18VAC90-20-200. Licensure by endorsement.....	27
18VAC90-20-210. Licensure of applicants from other countries.	28
18VAC90-20-215. Provisional licensure of applicants for licensure as registered nurses.....	28
18VAC90-20-220. Renewal of licenses.	30
18VAC90-20-221. Continued competency requirements for renewal of an active license.....	30
18VAC90-20-222. Documenting compliance with continued competency requirements.	31
18VAC90-20-225. Inactive licensure.....	32
18VAC90-20-230. Reinstatement of lapsed licenses or license suspended or revoked. ..	33
18VAC90-20-240. through 18VAC90-20-270. (Repealed.).....	33
18VAC90-20-271. Registration for voluntary practice by out-of-state licensees.....	33
Part IV. Clinical Nurse Specialists.	34
18VAC90-20-275. Clinical nurse specialist education programs.	34
18VAC90-20-280. Clinical nurse specialist registration.	34
18VAC90-20-290. Clinical nurse specialist practice.	34
Part V. Disciplinary Provisions.	35
18VAC90-20-300. Disciplinary provisions.	35
18VAC90-20-310 through 18VAC90-20-364. (Repealed.).....	36
Part VI. Medication Administration Training Program. (Repealed).....	36
18VAC90-20-370. through 18VAC90-20-400. (Repealed.).....	36
Part VII. Protocol for Adult Immunization. (Repealed).....	36

18VAC90-20-410. (Repealed.)	36
Part VIII. Delegation of Nursing Tasks and Procedures.	36
18VAC90-20-420. Definitions.....	36
18VAC90-20-430. Criteria for delegation.	36
18VAC90-20-440. Assessment required prior to delegation.	37
18VAC90-20-450. Supervision of delegated tasks.	38
18VAC90-20-460. Nursing tasks that shall not be delegated.	38

PREAMBLE

These regulations state the requirements for approval of nursing and nurse aide education programs, the licensing of registered nurses and practical nurses, the registration of clinical nurse specialists and the certification of nurse aides in the Commonwealth of Virginia. Regulations also provide standards for a medication administration training program, a protocol for adult immunizations, and criteria for delegation of nursing tasks. The regulations have been adopted by the Virginia State Board of Nursing under the authority of § 54.1-2400 and § 54.1-3000 et seq. of the Code of Virginia.

The Board believes that each practitioner of nursing is accountable to the Commonwealth and to the public to maintain high professional standards of practice in keeping with the ethics of the profession of nursing.

- The registered nurse is responsible and accountable for making decisions that are based upon educational preparation and experience in nursing. The registered nurse shall be held accountable for the quality and quantity of nursing care given patients by himself or others who are under his supervision. The registered nurse who is a clinical nurse specialist is authorized to provide advanced nursing services consistent with the requirements of law and regulations.
- The licensed practical nurse shall be held accountable for the quality and quantity of nursing care given to patients by himself based upon educational preparation and experience.

Part I. General Provisions.

18VAC90-20-10. Definitions.

In addition to words and terms defined in § 54.1-3030 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Accreditation" means having been accredited by the Accreditation Commission for Education in Nursing, the Commission on Collegiate Nursing Education (CCNE), or a national nursing accrediting organization recognized by the board.

"Active practice" means activities performed, whether or not for compensation, for which an active license to practice nursing is required.

"Advisory committee" means a group of persons from a nursing education program and the health care community who meets regularly to advise the nursing education program on the quality of its graduates and the needs of the community.

"Approval" means the process by which the board or a governmental agency in another state or foreign country evaluates and grants official recognition to nursing education programs that meet established standards not inconsistent with Virginia law.

"Associate degree nursing program" means a nursing education program preparing for registered nurse licensure, offered by a Virginia college or other institution and designed to lead to an associate degree in nursing, provided that the institution is authorized to confer such degree by the State Council of Higher Education for Virginia.

"Baccalaureate degree nursing program" or "prelicensure graduate degree program" means a nursing education program preparing for registered nurse licensure, offered by a Virginia college or

university and designed to lead to a baccalaureate or a graduate degree with a major in nursing, provided that the institution is authorized to confer such degree by the State Council of Higher Education for Virginia.

"Board" means the Board of Nursing.

"CGFNS" means the Commission on Graduates of Foreign Nursing Schools.

"Clinical setting" means any location in which the clinical practice of nursing occurs as specified in an agreement between the cooperating agency and the school of nursing.

"Conditional approval" means a time-limited status that results when an approved nursing education program has failed to maintain requirements as set forth in this chapter.

"Contact hour" means 50 minutes of continuing education coursework or activity.

"Cooperating agency" means an agency or institution that enters into a written agreement to provide clinical or observational experiences for a nursing education program.

"Diploma nursing program" means a nursing education program preparing for registered nurse licensure, offered by a hospital and designed to lead to a diploma in nursing, provided the hospital is licensed in this state.

"FERPA" means the Family Educational Rights and Privacy Act (20 USC § 1232g).

"Initial approval" means the status granted to a nursing education program that allows the admission of students.

"NCLEX" means the National Council Licensure Examination.

"NCSBN" means the National Council of State Boards of Nursing.

"National certifying organization" means an organization that has as one of its purposes the certification of a specialty in nursing based on an examination attesting to the knowledge of the nurse for practice in the specialty area.

"Nursing education program" means an entity offering a basic course of study preparing persons for licensure as registered nurses or as licensed practical nurses. A basic course of study shall include all courses required for the degree, diploma or certificate.

"Nursing faculty" means registered nurses who teach the practice of nursing in nursing education programs.

"Practical nursing program" means a nursing education program preparing for practical nurse licensure that leads to a diploma or certificate in practical nursing, provided the school is authorized by the Virginia Department of Education or by an accrediting agency recognized by the U.S. Department of Education.

"Preceptor" means a licensed nurse who is employed in the clinical setting, serves as a resource person and role model, and is present with the nursing student in that setting providing clinical supervision.

"Primary state of residence" means the state of a person's declared fixed permanent and principal home or domicile for legal purposes.

"Program director" means a registered nurse who holds a current, unrestricted license in Virginia or a multistate licensure privilege and who has been designated by the controlling authority to administer the nursing education program.

"Recommendation" means a guide to actions that will assist an institution to improve and develop its nursing education program.

"Requirement" means a mandatory condition that a nursing education program must meet to be approved or maintain approval.

"Site visit" means a focused on-site review of the nursing program by board staff, usually completed within one day for the purpose of evaluating program components such as the physical location (skills lab, classrooms, learning resources) for obtaining initial program approval, in response to a complaint, compliance with NCLEX plan of correction, change of location, or verification of noncompliance with this chapter.

"Survey visit" means a comprehensive on-site review of the nursing program by board staff, usually completed within two days (depending on the number of programs or campuses being reviewed) for the purpose of obtaining and maintaining full program approval. The survey visit includes the program's completion of a self-evaluation report prior to the visit, as well as a board staff review of all program resources (including skills lab, classrooms, learning resources, and clinical facilities) and other components to ensure compliance with this chapter. Meetings with faculty, administration, students, and clinical facility staff will occur.

18VAC90-20-20. Delegation of authority.

The executive director shall be delegated the authority to issue licenses and certificates and execute all notices, orders and official documents of the board unless the board directs otherwise.

18VAC90-20-30. Fees.

Fees required by the board are:

1. Application for licensure by examination - RN	\$190
2. Application for licensure by endorsement - RN	\$190
3. Application for licensure by examination - LPN	\$170
4. Application for licensure by endorsement - LPN	\$170
5. Reapplication for licensure by examination	\$50
6. Biennial licensure renewal - RN	\$140
7. Biennial inactive licensure renewal - RN	\$70
8. Biennial licensure renewal - LPN	\$120
9. Biennial inactive licensure renewal - LPN	\$60
10. Late renewal - RN	\$50
11. Late renewal - LPN	\$40
12. Reinstatement of lapsed license - RN	\$225
13. Reinstatement of lapsed license - LPN	\$200
14. Reinstatement of suspended or revoked license	\$300
15. Duplicate license	\$15
16. Replacement wall certificate	\$25
17. Verification of license	\$35
18. Transcript of all or part of applicant/licensee records	\$35
19. Returned check charge	\$35
20. Application for CNS registration	\$130
21. Biennial renewal of CNS registration	\$80
22. Reinstatement of lapsed CNS registration	\$125
23. Verification of CNS registration to another jurisdiction	\$35
24. Late renewal of CNS registration	\$35
25. Application for approval of a nursing education program	\$1,650
26. Survey visit for nursing education program	\$2,200

27. Site visit for NCLEX passage rate for nursing education program \$1,500

18VAC90-20-34. Duplicate license.

A duplicate license for the current renewal period shall be issued by the board upon receipt of the required information and fee.

18VAC90-20-35. Identification; accuracy of records.

A. Any person regulated by this chapter who provides direct client care shall, while on duty, wear identification that is clearly visible and indicates the person's first and last name and the appropriate title for the license, registration, or student status under which he is practicing in that setting. Any person practicing in hospital emergency departments, psychiatric and mental health units and programs, or in health care facilities units offering treatment for clients in custody of state or local law-enforcement agencies may use identification badges of first name and first letter only of last name and appropriate title.

B. A licensee who has changed his name shall submit as legal proof to the board a copy of the marriage certificate, a certificate of naturalization, or court order evidencing the change. A duplicate license shall be issued by the board upon receipt of such evidence and the required fee.

C. Each licensee shall maintain an address of record with the board. Any change in the address of record or in the public address, if different from the address of record, shall be submitted by a licensee electronically or in writing to the board within 30 days of such change. All notices required by law and by this chapter to be mailed by the board to any licensee shall be validly given when mailed to the latest address of record on file with the board.

18VAC90-20-36. Data collection of nursing workforce information.

A. With such funds as are appropriated for the purpose of data collection and consistent with the provisions of § 54.1-2506.1 of the Code of Virginia, the board shall collect workforce information biennially from a representative sample of registered nurses, licensed practical nurses, and certified nurse aides and shall make such information available to the public. Data collected shall be compiled, stored and released in compliance with § 54.1-3012.1 of the Code of Virginia.

B. The information to be collected on nurses shall include, but not be limited to: (i) demographic data to include age, sex and ethnicity; (ii) level of education; (iii) employment status; (iv) employment setting or settings such as in a hospital, physician's office, or nursing home; (v) geographic location of employment; (vi) type of nursing position or area of specialty; and (vii) number of hours worked per week in each setting. In addition, the board may determine other data to be collected as necessary.

18VAC90-20-37. Supervision of licensed practical nurses.

Licensed practical nursing is performed under the direction or supervision of a licensed medical practitioner, a registered nurse or a licensed dentist.

Part II. Nursing Education Programs.
Article 1. Initial Approval of a Nursing Education Program.

18VAC90-20-40. Application for initial approval.

An institution wishing to establish a nursing education program shall:

1. Provide documentation of attendance by the program director at a board orientation on establishment of a nursing education program prior to submission of an application and fee.
2. Submit to the board an application to establish a nursing education program along with a nonrefundable application fee as prescribed in 18VAC90-20-30.
 - a. The application shall be effective for 12 months from the date the application was received by the board.
 - b. If the program does not meet the board's requirements for approval within 12 months, it shall file a new application and fee.
3. Submit the following information on the organization and operation of a nursing education program:
 - a. A copy of a business license and zoning permit to operate a school in a Virginia location, a certificate of operation from the State Corporation Commission, evidence of approval from the Virginia Department of Education, and documentation of accreditation, if applicable;
 - b. The organizational structure of the institution and its relationship to the nursing education program therein;
 - c. The type of nursing program, as defined in 18VAC90-20-10;
 - d. An enrollment plan specifying the beginning dates and number of students for each class for a two-year period from the date of initial approval including (i) the planned number of students in the first class and in all subsequent classes and (ii) the planned frequency of admissions. Any increase in admissions that is not stated in the enrollment plan must be approved by the board. Also, transfer students are not authorized until full approval has been granted to the nursing education program; and
 - e. A tentative time schedule for planning and initiating the program through graduation of the first class and the program's receipt of results of the NCLEX examination.
4. Submit to the board evidence documenting adequate resources for the projected number of students and the ability to provide a program that can meet the requirements of this part to include the following information:
 - a. The results of a community assessment or market analysis that demonstrates the need for the nursing education program in the geographic area for the proposed school. The assessment or analysis shall include employment opportunities of nurses in the community, the number of clinical facilities or employers available for the size of the community to support the number of graduates, and the number and types of other nursing education programs in the area;
 - b. A projection of the availability of qualified faculty sufficient to provide classroom instruction and clinical supervision for the number of students specified by the program;
 - c. Budgeted faculty positions sufficient in number to provide classroom instruction and clinical supervision;
 - d. Availability of clinical training facilities for the program as evidenced by copies of contracts or letters of agreement specifying the responsibilities of the respective parties and indicating

sufficient availability of clinical experiences for the number of students in the program, the number of students, and clinical hours permitted at each clinical site and on each nursing unit;

e. Documentation that at least 80% of all clinical experiences are to be conducted in Virginia, unless an exception is granted by the board. There shall be documentation of written approval for any clinical experience conducted outside of Virginia by the agency that has authority to approve clinical placement of students in that state. The use of any clinical site in Virginia located 50 miles or more from the school shall require board approval;

f. A diagram or blueprint showing the availability of academic facilities for the program, including classrooms, skills laboratory, and learning resource center. This information shall include the number of restrooms for the student and faculty population, classroom and skills laboratory space large enough to accommodate the number of the student body, and sufficient faculty office space that meets FERPA requirements; and

g. Evidence of financial resources for the planning, implementation, and continuation of the program with line-item budget projections for the first three years; of operations beginning with the admission of students.

5. Respond to the board's request for additional information within a time frame established by the board.

18VAC90-20-50. (Repealed.)

18VAC90-20-60. (Repealed.)

18VAC90-20-65. (Repealed.)

18VAC90-20-70. Organization and administration.

A. The governing or parent institution offering Virginia nursing education programs shall be approved by the Virginia Department of Education or accredited by an accrediting agency recognized by the U.S. Department of Education.

B. Any agency or institution used for clinical experience by a nursing education program shall be in good standing with its licensing body.

C. The program director of the nursing education program shall:

1. Hold a current license or multistate licensure privilege to practice as a registered nurse in the Commonwealth without any disciplinary action that currently restricts practice;
2. Have additional education and experience necessary to administer, plan, implement, and evaluate the nursing education program;
3. Ensure that faculty are qualified by education and experience to teach in the program or to supervise the clinical practice of students in the program;
4. Maintain a current faculty roster, a current clinical agency form, and current clinical contracts available for board review and subject to an audit; and
5. Only serve as program director at one location or campus.

D. The program shall provide evidence that the director has authority to:

1. Implement the program and curriculum;
2. Oversee the admission, academic progression and graduation of students;
3. Hire and evaluate faculty; and

4. Recommend and administer the program budget, consistent with established policies of the controlling agency.

E. An organizational plan shall indicate the lines of authority and communication of the nursing education program to the controlling body; to other departments within the controlling institution; to the cooperating agencies; and to the advisory committee for the nursing education program.

F. There shall be evidence of financial support and resources sufficient to meet the goals of the nursing education program as evidenced by a copy of the current annual budget or a signed statement from administration specifically detailing its financial support and resources.

18VAC90-20-80. Philosophy and objectives.

Written statements of philosophy and objectives shall be the foundation of the curriculum and shall be:

1. Formulated and accepted by the faculty and the program director;
2. Descriptive of the practitioner to be prepared; and
3. The basis for planning, implementing, and evaluating the total program through the implementation of a systematic plan of evaluation that is documented in faculty or committee meeting minutes.

18VAC90-20-90. Faculty.

A. Qualifications for all faculty.

1. Every member of the nursing faculty, including the program director, shall hold a current license or a multistate licensure privilege to practice nursing in Virginia as a registered nurse without any disciplinary action that currently restricts practice and have had at least two years of direct client care experience as a registered nurse prior to employment by the program. Persons providing instruction in topics other than nursing shall not be required to hold a license as a registered nurse.

2. Every member of a nursing faculty supervising the clinical practice of students shall meet the licensure requirements of the jurisdiction in which that practice occurs. Faculty shall provide evidence of education or experience in the specialty area in which they supervise students' clinical experience for quality and safety. Prior to supervision of students, the faculty providing supervision shall have completed a clinical orientation to the site in which supervision is being provided.

3. The program director and each member of the nursing faculty shall maintain documentation of professional competence through such activities as nursing practice, continuing education programs, conferences, workshops, seminars, academic courses, research projects and professional writing. Documentation of annual professional development shall be maintained in employee files for the director and each faculty member until the next survey visit and shall be available for board review.

4. For baccalaureate degree and prelicensure graduate degree programs:

a. The program director shall hold a doctoral degree with a graduate degree in nursing.

b. Every member of the nursing faculty shall hold a graduate degree; the majority of the faculty shall have a graduate degree in nursing. Faculty members with a graduate degree with a major other than in nursing shall have a baccalaureate degree with a major in nursing.

5. For associate degree and diploma programs:

- a. The program director shall hold a graduate degree with a major in nursing.
 - b. The majority of the members of the nursing faculty shall hold a graduate degree, preferably with a major in nursing.
 - c. All members of the nursing faculty shall hold a baccalaureate or graduate degree with a major in nursing.
6. For practical nursing programs:
- a. The program director shall hold a baccalaureate degree with a major in nursing.
 - b. The majority of the members of the nursing faculty shall hold a baccalaureate degree, preferably with a major in nursing.
- B. Number of faculty.
- 1. The number of faculty shall be sufficient to prepare the students to achieve the objectives of the educational program and to ensure safety for clients to whom students provide care.
 - 2. When students are giving direct care to clients, the ratio of students to faculty shall not exceed 10 students to one faculty member, and the faculty shall be on site solely to supervise students.
 - 3. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students.
- C. Functions. The principal functions of the faculty shall be to:
- 1. Develop, implement and evaluate the philosophy and objectives of the nursing education program;
 - 2. Design, implement, teach, evaluate and revise the curriculum. Faculty shall provide evidence of education and experience necessary to indicate that they are competent to teach a given course;
 - 3. Develop and evaluate student admission, progression, retention and graduation policies within the framework of the controlling institution;
 - 4. Participate in academic advisement and counseling of students in accordance with FERPA requirements;
 - 5. Provide opportunities for and evidence of student and graduate evaluation of curriculum and teaching and program effectiveness; and
 - 6. Document actions taken in faculty and committee meetings using a systematic plan of evaluation for total program review.

18VAC90-20-95. (Repealed.)

18VAC90-20-96. (Repealed.)

18VAC90-20-100. Admission of students.

A. Requirements for admission to a registered nursing education program shall not be less than the requirements of § 54.1-3017 A 1 of the Code of Virginia that will permit the graduate to be admitted to the appropriate licensing examination. The equivalent of a four-year high school course of study as required pursuant to § 54.1-3017 shall be considered to be:

- 1. A General Educational Development (GED) certificate for high school equivalence; or
- 2. Satisfactory completion of the college courses required by the nursing education program.

B. Requirements for admission to a practical nursing education program shall not be less than the requirements of § 54.1-3020 A 1 of the Code of Virginia that will permit the graduate to be admitted to the appropriate licensing examination.

C. Requirements for admission, readmission, advanced standing, progression, retention, dismissal and graduation shall be available to the students in written form.

D. A criminal background check shall be required for admission to a nursing education program with the exception of high school students.

E. Transfer students may not be admitted until a nursing education program has received full approval from the board.

18VAC90-20-110. Resources, facilities, publications, and services.

A. Classrooms, conference rooms, laboratories, clinical facilities, and offices shall be sufficient to meet the objectives of the nursing education program and the needs of the students, faculty, administration, and staff and shall include private areas for faculty-student conferences. The nursing education program shall provide facilities that meet federal and state requirements including:

1. Comfortable temperatures;
2. Clean and safe conditions;
3. Adequate lighting;
4. Adequate space to accommodate all students; and
5. Instructional technology and equipment needed for simulating client care.

B. The program shall have learning resources and technology that are current, pertinent, and accessible to students and faculty, and sufficient to meet the needs of the students and faculty.

C. Current information about the nursing education program shall be published and distributed to applicants for admission and shall be made available to the board. Such information shall include:

1. Description of the program to include whether the program is accredited by a nursing education accrediting body;
2. Philosophy and objectives of the controlling institution and of the nursing program;
3. Admission and graduation requirements, including the policy on the use of a final comprehensive exam;
4. Fees and expenses;
5. Availability of financial aid;
6. Tuition refund policy;
7. Education facilities;
8. Availability of student activities and services;
9. Curriculum plan to include course progression from admission to graduation, the name of each course, theory hours, skills lab hours, simulation hours (if used in lieu of direct client care hours), and clinical hours;
10. Course descriptions to include a complete overview of what is taught in each course;
11. Faculty-staff roster;
12. School calendar;
13. Student grievance policy; and
14. Information about implication of criminal convictions.

D. Administrative support services shall be provided.

E. There shall be written agreements with cooperating agencies that:

1. Ensure full control of student education by the faculty of the nursing education program, including the selection and supervision of learning experiences to include the dismissal of students from the clinical site if client safety is or may be compromised by the acts of the student;
2. Provide that faculty members or preceptors are present in the clinical setting when students are providing direct client care;
3. Provide for cooperative planning with designated agency personnel to ensure safe client care;
4. Provide that faculty be readily available to students and preceptors while students are involved in preceptorship experiences; and
5. State the number of students allowed on each nursing unit from the nursing education program.

F. Cooperating agencies shall be approved by the appropriate accreditation, evaluation, or licensing bodies, if such exist.

18VAC90-20-120. Curriculum.

A. Both classroom and online curricula shall reflect the philosophy and objectives of the nursing education program and shall be consistent with the law governing the practice of nursing.

B. Nursing education programs preparing for licensure as a registered or practical nurse shall include:

1. Evidence-based didactic content and supervised clinical experience in nursing encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life cycle and in a variety of acute, nonacute, community-based, and long-term care clinical settings and experiences to include adult medical/surgical nursing, geriatric nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, nursing fundamentals, and pediatric nursing;
2. Concepts of the nursing process that include conducting a focused nursing assessment of the client status that includes decision making about who and when to inform, identifying client needs, planning for episodic nursing care, implementing appropriate aspects of client care, contributing to data collection and the evaluation of client outcomes, and the appropriate reporting and documentation of collected data and care rendered;
3. Concepts of anatomy, physiology, chemistry, microbiology, and the behavioral sciences;
4. Concepts of communication, growth and development, nurse-client interpersonal relations, and client education, including:
 - a. Development of professional socialization that includes working in interdisciplinary teams; and
 - b. Conflict resolution;
5. Concepts of ethics and the vocational and legal aspects of nursing, including:
 - a. Regulations and sections of the Code of Virginia related to nursing;
 - b. Client rights, privacy, and confidentiality;
 - c. Prevention of client abuse, neglect, and abandonment throughout the life cycle, including instruction in the recognition, intervention, and reporting by the nurse of evidence of child or elder abuse;
 - d. Professional responsibility to include the role of the practical and professional nurse;

- e. Professional boundaries to include appropriate use of social media and electronic technology; and
 - f. History and trends in nursing and health care;
6. Concepts of pharmacology, dosage calculation, medication administration, nutrition, and diet therapy;
7. Concepts of client-centered care, including:
- a. Respect for cultural differences, values, and preferences;
 - b. Promotion of healthy life styles for clients and populations;
 - c. Promotion of a safe client environment;
 - d. Prevention and appropriate response to situations of bioterrorism, natural and man-made disasters, and intimate partner and family violence;
 - e. Use of critical thinking and clinical judgment in the implementation of safe client care; and
 - f. Care of clients with multiple, chronic conditions; and
8. Development of management and supervisory skills, including:
- a. The use of technology in medication administration and documentation of client care;
 - b. Participation in quality improvement processes and systems to measure client outcomes and identify hazards and errors; and
 - c. Supervision of certified nurse aides, registered medication aides and unlicensed assistive personnel.
- C. In addition to meeting curriculum requirements set forth in subsection B of this section, registered nursing education programs preparing for registered nurse licensure shall also include:
1. Evidence-based didactic content and supervised clinical experiences in conducting a comprehensive nursing assessment that includes:
- a. Extensive data collection, both initial and ongoing, for individuals, families, groups, and communities addressing anticipated changes in client conditions as well as emerging changes in a client's health status;
 - b. Recognition of alterations to previous client conditions;
 - c. Synthesizing the biological, psychological and social aspects of the client's condition;
 - d. Evaluation of the effectiveness and impact of nursing care;
 - e. Planning for nursing interventions and evaluating the need for different interventions for individuals, groups and communities;
 - f. Evaluation and implementation of the need to communicate and consult with other health team members; and
 - g. Use of a broad and complete analysis to make independent decisions and nursing diagnoses;
2. Evidence-based didactic content and supervised experiences in:
- a. Development of clinical judgment;
 - b. Development of leadership skills and unit management;
 - c. Knowledge of the rules and principles for delegation of nursing tasks to unlicensed persons;
 - d. Supervision of licensed practical nurses;
 - e. Involvement of clients in decision making and a plan of care; and
 - f. Concepts of pathophysiology.

18VAC90-20-121. Curriculum for direct client care.

A. A nursing education program preparing a student for licensure as a registered nurse shall provide a minimum of 500 hours of direct client care supervised by qualified faculty. A nursing education program preparing a student for licensure as a practical nurse shall provide a minimum of 400 hours of direct client care supervised by qualified faculty. Direct client care hours shall include experiences and settings as set forth in 18VAC90-20-120 B 1.

B. Licensed practical nurses transitioning into prelicensure registered nursing programs may be awarded no more than 150 clinical hours of the 400 clinical hours received in a practical nursing program. In a practical nursing to registered nursing transitional program, the remainder of the clinical hours shall include registered nursing clinical experience across the life cycle in adult medical/surgical nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, and pediatric nursing.

C. Any observational experiences shall be planned in cooperation with the agency involved to meet stated course objectives. Observational experiences shall not be accepted toward the 400 or 500 minimum clinical hours required. Observational objectives shall be available to students, the clinical unit, and the board.

D. Simulation for direct client clinical hours.

1. No more than 25% of direct client contact hours may be simulation. For prelicensure registered nursing programs, the total of simulated client care hours cannot exceed 125 hours (25% of the required 500 hours). For prelicensure practical nursing programs, the total of simulated client care hours cannot exceed 100 hours (25% of the required 400 hours).

2. No more than 50% of the total clinical hours for any course may be used as simulation.

3. Skills acquisition and task training alone, as in the traditional use of a skills laboratory, do not qualify as simulated client care and therefore do not meet the requirements for direct client care hours.

4. Clinical simulation must be led by faculty who meet the qualifications specified in 18VAC90-20-90.

5. Documentation of the following shall be available for all simulated experiences:

- a. Course description and objectives;
- b. Type of simulation and location of simulated experience;
- c. Number of simulated hours;
- d. Faculty qualifications; and
- e. Methods of debriefing.

18VAC90-20-122. Clinical practice of students.

A. In accordance with § 54.1-3001 of the Code of Virginia, a nursing student, while enrolled in an approved nursing program, may perform tasks that would constitute the practice of nursing. The student shall be responsible and accountable for the safe performance of those direct client care tasks to which he has been assigned.

B. Faculty shall be responsible for ensuring that students perform only skills or services in direct client care for which they have received instruction and have been found proficient by the instructor. Skills checklists shall be maintained for each student.

C. Faculty members or preceptors providing on-site supervision in the clinical care of clients shall be responsible and accountable for the assignment of clients and tasks based on their assessment and evaluation of the student's clinical knowledge and skills. Supervisors shall also monitor clinical performance and intervene if necessary for the safety and protection of the clients.

D. Clinical preceptors may be used to augment the faculty and enhance the clinical learning experience. Faculty shall be responsible for the designation of a preceptor for each student and shall communicate such assignment with the preceptor. A preceptor may not further delegate the duties of the preceptorship.

E. Preceptors shall provide to the nursing education program evidence of competence to supervise students' clinical experience for quality and safety in each specialty area where they supervise students. The clinical preceptor shall be licensed as a nurse at or above the level for which the student is preparing.

F. Supervision of students.

1. When faculty are supervising direct client care by students, the ratio of students to faculty shall not exceed 10 students to one faculty member. The faculty member shall be on site in the clinical setting solely to supervise students.

2. When preceptors are utilized for specified learning experiences in clinical settings, the faculty member may supervise up to 15 students. In utilizing preceptors to supervise students in the clinical setting, the ratio shall not exceed two students to one preceptor at any given time. During the period in which students are in the clinical setting with a preceptor, the faculty member shall be available for communication and consultation with the preceptor.

G. Prior to beginning any preceptorship, the following shall be required:

1. Written objectives, methodology, and evaluation procedures for a specified period of time to include the dates of each experience;

2. An orientation program for faculty, preceptors, and students;

3. A skills checklist detailing the performance of skills for which the student has had faculty-supervised clinical and didactic preparation; and

4. The overall coordination by faculty who assume ultimate responsibility for implementation, periodic monitoring, and evaluation.

18VAC90-20-130. Granting of initial program approval.

A. Initial approval may be granted when all documentation required in 18VAC90-20-40 has been submitted and is deemed satisfactory to the board and when the following conditions are met:

1. There is evidence that the requirements for organization and administration and the philosophy and objectives of the program, as set forth in 18VAC90-20-70 and 18VAC90-20-80, have been met;

2. A program director who meets board requirements has been appointed, and there are sufficient faculty to initiate the program as required in 18VAC90-20-90;

3. A written curriculum plan developed in accordance with 18VAC90-20-120 has been submitted and approved by the board;

4. A written systematic plan of evaluation has been developed and approved by the board; and

5. The program is in compliance with requirements of 18VAC90-20-110 for resources, facilities, publications, and services as verified by a satisfactory site visit conducted by a representative of the board.

B. If initial approval is granted:

1. The advertisement of the nursing program is authorized.
2. The admission of students is authorized, except that transfer students are not authorized to be admitted until the program has received full program approval.
3. The program director shall submit quarterly progress reports to the board that shall include evidence of progress toward full program approval and other information as required by the board.

18VAC90-20-131. Denying or withdrawing initial program approval.

A. Denial of initial program approval.

1. Initial approval may be denied for causes enumerated in 18VAC90-20-132.
2. If the initial approval is denied:
 - a. The program shall be given an option of correcting the deficiencies cited by the board during the time remaining in its initial 12-month period following receipt of the application.
 - b. No further action regarding the application shall be required of the board unless the program requests, within 30 days of the mailing of the decision, an informal conference pursuant to §§ 2.2-4019 and 54.1-109 of the Code of Virginia.
3. If denial is recommended following the informal conference, the recommendation shall be presented to the board or a panel thereof for review and action.
4. If the recommendation of the informal conference committee to deny initial approval is accepted by the board or a panel thereof, the decision shall be reflected in a board order and no further action by the board is required. The program may request a formal hearing within 30 days from entry of the order, in accordance with § 2.2-4020 of the Code of Virginia.
5. If the decision of the board or a panel thereof, following a formal hearing, is to deny initial approval, the program shall be advised of the right to appeal the decision to the appropriate circuit court in accordance with § 2.2-4026 of the Code of Virginia and Part 2A of the Rules of the Supreme Court of Virginia.

B. Withdrawal of initial program approval.

1. Initial approval shall be withdrawn and the program closed if:
 - a. The program has not admitted students within six months of approval of its application;
 - b. The program fails to submit evidence of progression toward full program approval; or
 - c. For any of the causes enumerated in 18VAC90-20-132.
2. If a decision is made to withdraw initial approval, no further action shall be required by the board unless the program, within 30 days of the mailing of the decision, requests an informal conference pursuant to §§ 2.2-4019 and 54.1-109 of the Code of Virginia.
3. If withdrawal of initial approval is recommended following the informal conference, the recommendation shall be presented to the board or a panel thereof for review and action.
4. If the recommendation of the informal conference committee to withdraw initial approval is accepted by the board or a panel thereof, the decision shall be reflected in a board order and no further action by the board is required unless the program requests a formal hearing within 30 days from entry of the order, in accordance with § 2.2-4020 of the Code of Virginia.
5. If the decision of the board or a panel thereof following a formal hearing is to withdraw initial approval, the program shall be advised of the right to appeal the decision to the appropriate circuit

court in accordance with § 2.2-4026 of the Code of Virginia and Part 2A of the Rules of the Supreme Court of Virginia.

18VAC90-20-132. Causes for denial or withdrawal of nursing education program approval.

A. Denial or withdrawal of program approval may be based upon the following:

1. Failing to demonstrate compliance with program requirements in Article 1 (18VAC90-20-40 et seq.), Article 2 (18VAC90-20-133 et seq.), or Article 3 (18VAC90-20-151 et seq.) of this part.
2. Failing to comply with terms and conditions placed on a program by the board.
3. Advertising for or admitting students without authority, board approval, or contrary to a board restriction.
4. Failing to progress students through the program in accordance with an approved time frame.
5. Failing to provide evidence of progression toward initial program approval within a time frame established by the board.
6. Failing to provide evidence of progression toward full program approval within a time frame established by the board.
7. Failing to respond to requests for information required from board representatives.
8. Fraudulent submission of documents or statements to the board or its representatives.
9. Having had past actions taken by the board, other states, or accrediting entities regarding the same nursing education program operating in another jurisdiction.
10. Failing to maintain a pass rate of 80% on the NCLEX for graduates of the program as required by 18VAC90-20-151.
11. Failing to comply with an order of the board or with any terms and conditions placed upon it by the board for continued approval.
12. Having the program director, owner, or operator of the program convicted of a felony or a misdemeanor involving moral turpitude or his professional license disciplined by a licensing body or regulatory authority.
13. Failing to pay the required fee for a survey or site visit.

B. Withdrawal of nursing education program approval may occur at any stage in the application or approval process pursuant to procedures enumerated in 18VAC90-20-131, 18VAC90-20-134, and 18VAC90-20-161.

C. Programs with approval denied or withdrawn may not accept or admit additional students into the program effective upon the date of entry of the board's final order to deny or withdraw approval. Further, the program shall submit quarterly reports until the program is closed, and the program shall comply with board requirements regarding closure of a program as stated in 18VAC90-20-170.

Article 2.
Full Approval for a Nursing Education Program.

18VAC90-20-133. Granting full program approval.

A. Full approval may be granted when:

1. A self-evaluation report of compliance with Articles 1 (18VAC90-20-40 et seq.) and 2 (18VAC90-20-133 et seq.) of this part and a survey visit fee as specified in 18VAC90-20-30 have been submitted and received by the board;
2. The program has achieved a passage rate of not less than 80% for the program's first-time test takers taking the NCLEX based on at least 20 graduates within a two-year period; and
3. A satisfactory survey visit and report have been made by a representative of the board verifying that the program is in compliance with all requirements for program approval.

B. If full approval is granted, the program shall continue to comply with all requirements in Articles 1, 2, and 3 (18VAC90-20-151 et seq.) of this part, and admission of transfer students is authorized.

18VAC90-20-134. Denying full program approval.

A. Denial of full program approval may occur for causes enumerated in 18VAC90-20-132.

B. If full program approval is denied, the board shall also be authorized to do one of the following:

1. The board may continue the program on initial program approval with terms and conditions to be met within the time frame specified by the board; or
2. The board may withdraw initial program approval.

C. If the board takes one of the actions specified in subsection B of this section, the following shall apply:

1. No further action will be required of the board unless the program, within 30 days of the mailing of the decision, requests an informal conference pursuant to §§ 2.2-4019 and 54.1-109 of the Code of Virginia.
2. If continued initial program approval with terms and conditions or withdrawal of initial approval is recommended following the informal conference, the recommendation shall be presented to the board or a panel thereof for review and action.
3. If the recommendation of the informal conference committee is accepted by the board or a panel thereof, the decision shall be reflected in a board order and no further action by the board regarding the application is required. The program may request a formal hearing within 30 days from entry of the order, in accordance with § 2.2-4020 and subdivision 11 of § 54.1-2400 of the Code of Virginia.
4. If the decision of the board or a panel thereof following a formal hearing is to deny full and/or withdraw or continue on initial approval with terms or conditions, the program shall be advised of the right to appeal the decision to the appropriate circuit court in accordance with § 2.2-4026 of the Code of Virginia and Part 2A of the Rules of the Supreme Court of Virginia.

D. If a program is denied full approval and initial approval withdrawn, no additional students may be accepted into the program, effective upon the date of entry of the board's final order to deny or withdraw approval. Further, the program shall submit quarterly reports until the program is closed, and the program shall comply with board requirements regarding closure of a program as stated in 18VAC90-20-170.

18VAC90-20-135. Requests for exceptions or requirements for faculty.

After full approval has been granted, a program may request board approval for exceptions to requirements of 18VAC90-20-90 for faculty as follows:

1. Initial request for exception.

- a. The program director shall submit a request for initial exception in writing to the board for consideration prior to the academic year during which the nursing faculty member is scheduled to teach or whenever an unexpected vacancy has occurred.
- b. A description of teaching assignment, a curriculum vitae, and a statement of intent from the prospective faculty member to pursue the required degree shall accompany each request.
- c. The executive director of the board shall be authorized to make the initial decision on requests for exceptions. Any appeal of that decision shall be in accordance with the provisions of the Administrative Process Act (§ 2.2-4000 et seq. of the Code of Virginia).

2. Request for continuing exception.

- a. Continuing exception will be based on the progress of the nursing faculty member toward meeting the degree required by this chapter during each year for which the exception is requested.
- b. The program director shall submit the request for continuing exception in writing prior to the next academic year during which the nursing faculty member is scheduled to teach.
- c. A list of courses required for the degree being pursued and college transcripts showing successful completion of a minimum of two of the courses during the past academic year shall accompany each request.
- d. Any request for continuing exception shall be considered by the committee, which shall make a recommendation to the board.

18VAC90-20-136. Records and provision of information.

A. Requirements for admission, readmission, advanced standing, progression, retention, dismissal, and graduation shall be readily available to the students in written form.

B. A system of records shall be maintained and be made available to the board representative and shall include:

1. Data relating to accreditation by any agency or body.
2. Course outlines.
3. Minutes of faculty and committee meetings including documentation of the use of a systematic plan of evaluation for total program review and including those faculty members in attendance.
4. Record of and disposition of complaints.

C. A file shall be maintained for each student. Provision shall be made for the protection of student and graduate files against loss, destruction, and unauthorized use. Each file shall be available to the board representative and shall include the student's:

1. Application, including the date of its submission and the date of admission into the program;
2. High school transcript or copy of high school equivalence certificate, and if the student is a foreign graduate, a transcript translated into English;
3. Current record of achievement to include classroom grades, skills checklists, and clinical hours for each course; and
4. A final transcript retained in the permanent file of the institution to include dates of admission and completion of coursework, graduation date, name and address of graduate, the dates of each semester or term, number of clinical hours for each clinical course, course grades, and authorized signature.

D. Current information about the nursing education program shall be published and distributed to students and applicants for admission and shall be made available to the board. In addition to information specified in 18VAC90-20-110 C, the following information shall be included:

1. Annual passage rates on NCLEX for the past five years; and
2. Accreditation status.

18VAC90-20-137. Evaluation of resources; written agreements with cooperating agencies.

A. Periodic evaluations of resources, facilities, and services shall be conducted by the administration, faculty, students, and graduates of the nursing education program including an employer evaluation for graduates of the nursing education program. Such evaluation shall include assurance that at least 80% of all clinical experiences are conducted in Virginia unless an exception has been granted by the board.

B. Current written agreements with cooperating agencies shall be maintained and reviewed annually and shall be in accordance with of 18VAC90-20-110 E.

C. Upon request, a program shall provide a clinical agency summary on a form provided by the board.

D. Upon request and if applicable, the program shall provide (i) documentation of board approval for use of clinical sites located 50 or more miles from the school; and (ii) for use of clinical experiences conducted outside of Virginia, documented approval from the agency that has authority to approve clinical placement of students in that state.

18VAC90-20-140. Program changes.

A. The following shall be reported to the board within 10 days of the change or receipt of a report from an accrediting body:

1. Change in the program director, governing body, or parent institution;
2. Adverse action taken by a licensing authority against the program director, governing body, or parent institution;
3. Conviction of a felony or misdemeanor involving moral turpitude against the program director, owner, or operator of the program;
4. Change in the physical location of the program;
5. Change in the availability of clinical sites;
6. Change in financial resources that could substantively affect the nursing education program;
7. Change in content of curriculum, faculty, or method of delivery that affects 25% or more of the total hours of didactic and clinical instruction;
8. Change in accreditation status; and
9. A final report with findings and recommendations from the accrediting body.

B. Other curriculum or faculty changes shall be reported to the board with the annual report required in 18VAC90-20-160 A.

**Article 3.
Continued Approval of Nursing Education Programs.**

18VAC90-20-150. (Repealed.)

18VAC90-20-151. Passage rate on national examination.

A. For the purpose of continued approval by the board, a nursing education program shall maintain a passage rate for first-time test takers on the NCLEX that is not less than 80%, calculated on the cumulative results of the past four quarters of all graduates in each calendar year regardless of where the graduate is seeking licensure.

B. If an approved program falls below 80% for one year, it shall submit a plan of correction to the board. If an approved program falls below 80% for two consecutive years, the board shall place the program on conditional approval with terms and conditions, require the program to submit a plan of correction, and conduct a site visit. Prior to the conduct of such a visit, the program shall submit the fee for a site visit pursuant to the NCLEX passage rate as required by 18VAC90-20-30. If a program falls below 80% for three consecutive years, the board may withdraw program approval.

C. For the purpose of program evaluation, the board may provide to the program the NCLEX examination results of its graduates. However, further release of such information by the program shall not be authorized without written authorization from the candidate.

18VAC90-20-160. Maintaining an approved nursing education program.

A. The program director of each nursing education program shall submit an annual report to the board.

B. Each nursing education program shall be reevaluated as follows:

1. Every nursing education program that has not achieved accreditation as defined in 18VAC90-20-10 shall be reevaluated at least every five years by submission of a comprehensive self-evaluation report based on Articles 1 (18VAC90-20-40 et seq.) and 2 (18VAC90-20-133 et seq.) of this part, and a survey visit by a representative or representatives of the board on dates mutually acceptable to the institution and the board.

2. A program that has maintained accreditation as defined in 18VAC90-20-10 shall be reevaluated at least every 10 years by submission of a comprehensive self-evaluation report as provided by the board. As evidence of compliance with specific requirements of this chapter, the board may accept the most recent study report, site visit report, and final decision letter from the accrediting body. The board may require additional information or a site visit to ensure compliance with requirements of this chapter. If accreditation has been withdrawn or a program has been placed on probation by the accrediting body, the board may require a survey visit. If a program fails to submit the documentation required in this subdivision, the requirements of subdivision 1 of this subsection shall apply.

C. Interim site or survey visits shall be made to the institution by board representatives at any time within the initial approval period or full approval period as deemed necessary by the board. Prior to the conduct of such a visit, the program shall submit the fee for a survey visit as required by 18VAC90-20-30.

D. Failure to submit the required fee for a survey or site visit may subject an education program to board action or withdrawal of board approval.

18VAC90-20-161. Continuing and withdrawing full approval.

A. The board shall receive and review the self-evaluation and survey reports pursuant to 18VAC90-20-160 B or complaints relating to program compliance. Following review, the board

may continue the program on full approval so long as it remains in compliance with all requirements in Articles 1 (18VAC90-20-40 et seq.), 2 (18VAC90-20-133 et seq.) and 3 (18VAC90-20-151 et seq.) of this part.

B. If the board determines that a program is not maintaining the requirements of Articles 1, 2, and 3, or for causes enumerated in 18VAC90-20-132, it may:

1. Place the program on conditional approval with terms and conditions to be met within the time frame specified by the board; or
2. Withdraw program approval.

C. If the board either places a program on conditional approval with terms and conditions to be met within a time frame specified by the board or withdraws approval, the following shall apply:

1. No further action will be required of the board unless the program requests an informal conference pursuant to §§ 2.2-4019 and 54.1-109 of the Code of Virginia.
2. If withdrawal or continued program approval with terms and conditions is recommended following the informal conference, the recommendation shall be presented to the board or a panel thereof for review and action.
3. If the recommendation of the informal conference committee is accepted by the board or a panel thereof, the decision shall be reflected in a board order and no further action by the board is required unless the program requests a formal hearing within 30 days from entry of the order in accordance with § 2.2-4020 of the Code of Virginia.
4. If the decision of the board or a panel thereof following a formal hearing is to withdraw approval or continue on conditional approval with terms or conditions, the program shall be advised of the right to appeal the decision to the appropriate circuit court in accordance with § 2.2-4026 of the Code of Virginia and Part 2A of the Rules of the Supreme Court of Virginia.

D. If a program approval is withdrawn, no additional students may be admitted into the program effective upon the date of entry of the board's final order to withdraw approval. Further, the program shall submit quarterly reports until the program is closed, and the program must comply with board requirements regarding closure of a program as stated in 18VAC90-20-170.

18VAC90-20-170. Closing of an approved nursing education program; custody of records.

A. When the governing institution anticipates the closing of a nursing education program, it shall notify the board in writing, stating the reason, plan, and date of intended closing.

The governing institution shall assist in the transfer of students to other approved programs with the following conditions:

1. The program shall continue to meet the standards required for approval until all students are transferred and shall submit a quarterly report to the board regarding progress toward closure.
2. The program shall provide to the board a list of the names of students who have been transferred to approved programs, and the date on which the last student was transferred.
3. The date on which the last student was transferred shall be the closing date of the program.

B. When the board denies or withdraws approval of a program, the governing institution shall comply with the following procedures:

1. The program shall be closed according to a time frame established by the board.
2. The program shall provide to the board a list of the names of students who have transferred to approved programs and the date on which the last student was transferred shall be submitted to the board by the governing institution.

3. The program shall provide quarterly reports to the board regarding progress toward closure.

C. Provision shall be made for custody of records as follows:

1. If the governing institution continues to function, it shall assume responsibility for the records of the students and the graduates. The institution shall inform the board of the arrangements made to safeguard the records.

2. If the governing institution ceases to exist, the academic transcript of each student and graduate shall be transferred by the institution to the board for safekeeping.

18VAC90-20-180. (Repealed.)

Part III. Licensure and Practice.

18VAC90-20-181. Issuance of a license with a multistate licensure privilege.

A. In order to be issued a license with a multistate licensure privilege by the board, a nurse currently licensed in Virginia or a person applying for licensure in Virginia shall submit a declaration stating that his primary residence is in Virginia. Evidence of a primary state of residence may be required to include but not be limited to:

1. A driver's license with a home address;
2. A voter registration card displaying a home address;
3. A federal or state tax return declaring the primary state of residence;
4. A Military Form No. 2058 – state of legal residence; or
5. A W-2 from the United States government or any bureau, division, or agency thereof indicating the declared state of residence.

B. A nurse on a visa from another country applying for licensure in Virginia may declare either the country of origin or Virginia as the primary state of residence. If the foreign country is declared as the primary state of residence, a single state license shall be issued by Virginia.

C. A nurse changing the primary state of residence from another party state to Virginia may continue to practice under the former party state license and multistate licensure privilege during the processing of the nurse's licensure application by the board for a period not to exceed 90 days.

1. If a nurse is under a pending investigation by a former home state, the licensure application in Virginia shall be held in abeyance and the 90-day authorization to practice stayed until resolution of the pending investigation.
2. A license issued by a former party state shall no longer be valid upon issuance of a license by the board.
3. If the board denies licensure to an applicant from another party state, it shall notify the former home state within 10 business days, and the former home state may take action in accordance with the laws and regulations of that state.

D. A license issued by a party state is valid for practice in all other party states, unless clearly designated as valid only in the state that issued the license. When a party state issues a license authorizing practice only in that state and not authorizing practice in other party states, the license shall be clearly marked with words indicating that it is valid only in the state of issuance.

18VAC90-20-182. Limitations of a multistate licensure privilege.

A. The board shall include in all disciplinary orders that limit practice or require monitoring the requirement that the licensee subject to the order shall agree to limit practice to Virginia during the period in which the order is in effect. A nurse may be allowed to practice in other party states while an order is in effect with prior written authorization from both the board and boards of other party states.

B. An individual who had a license which was surrendered, revoked, suspended, or an application denied for cause in a prior state of primary residence, may be issued a single state license in a new primary state of residence until such time as the individual would be eligible for an unrestricted license by the prior state(s) of adverse action. Once eligible for licensure in the prior state(s), a multistate license may be issued.

18VAC90-20-183. Access to information in the coordinated licensure information system.

A licensee may submit a request in writing to the board to review the public data relating to the licensee maintained in the coordinated licensure information system. In the event a licensee asserts that any related data is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The board shall verify and correct inaccurate data in the information system within 10 business days.

18VAC90-20-190. Licensure by examination.

A. The board shall authorize the administration of examinations for registered nurse licensure and examinations for practical nurse licensure.

B. A candidate shall be eligible to take the NCLEX examination (i) upon receipt by the board of the completed application, fee and an official transcript from the nursing education program; and (ii) when a determination has been made that no grounds exist upon which the board may deny licensure pursuant to §54.1-3007 of the Code of Virginia.

C. To establish eligibility for licensure by examination, an applicant for the licensing examination shall:

1. File the required application, any necessary documentation and fee, including a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.
2. Arrange for the board to receive an official transcript from the nursing education program which shows either:
 - a. That the degree or diploma has been awarded and the date of graduation or conferral; or
 - b. That all requirements for awarding the degree or diploma have been met and specifies the date of conferral.
3. File a new application and reapplication fee if:
 - a. The examination is not taken within 12 months of the date that the board determines the applicant to be eligible; or
 - b. Eligibility is not established within 12 months of the original filing date.

D. The minimum passing standard on the examination for registered nurse licensure and practical nurse licensure shall be determined by the board.

E. Any applicant suspected of giving or receiving unauthorized assistance during the examination may be noticed for a hearing pursuant to the provisions of the Administrative Process Act (§2.2-4000 et seq. of the Code of Virginia) to determine eligibility for licensure or reexamination.

F. Practice of nursing pending receipt of examination results.

1. A graduate who has filed a completed application for licensure in Virginia and has received an authorization letter issued by the board may practice nursing in Virginia from the date of the authorization letter. The period of practice shall not exceed 90 days between the date of successful completion of the nursing education program, as documented on the applicant's transcript, and the publication of the results of the candidate's first licensing examination.
2. Candidates who practice nursing as provided in subdivision 1 of this subsection shall use the designation "R.N. Applicant" or "L.P.N. Applicant" on a nametag or when signing official records.
3. The designations "R.N. Applicant" and "L.P.N. Applicant" shall not be used by applicants who either do not take the examination within 90 days following receipt of the authorization letter from the board or who have failed the examination.

G. Applicants who fail the examination.

1. An applicant who fails the licensing examination shall not be licensed or be authorized to practice nursing in Virginia.
2. An applicant for licensure by reexamination shall file the required board application and reapplication fee in order to establish eligibility for reexamination.
3. Applicants who have failed the examination for licensure in another U.S. jurisdiction but satisfy the qualifications for licensure in this jurisdiction may apply for licensure by examination in Virginia. Such applicants shall submit the required application and fee. Such applicants shall not, however, be permitted to practice nursing in Virginia until the requisite license has been issued.

18VAC90-20-200. Licensure by endorsement.

A. A graduate of an approved nursing education program who has been licensed by examination in another U.S. jurisdiction and whose license is in good standing, or is eligible for reinstatement, if lapsed, shall be eligible for licensure by endorsement in Virginia, provided the applicant satisfies the same requirements for registered nurse or practical nurse licensure as those seeking initial licensure in Virginia. Applicants who have graduated from approved nursing education programs that did not require a sufficient number of clinical hours, as specified in 18VAC90-20-120, may qualify for licensure if they can provide evidence of at least 960 hours of clinical practice with an active, unencumbered license in another U.S. jurisdiction.

1. A graduate of a nursing school in Canada where English was the primary language shall be eligible for licensure by endorsement provided the applicant has passed the Canadian Registered Nurses Examination (CRNE) and holds an unrestricted license in Canada.
2. An applicant for licensure by endorsement who has passed a licensing examination other than NCLEX may only be issued a single state license to practice in Virginia.

B. An applicant for licensure by endorsement who has submitted a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia and the required application and fee and submitted the required form to the appropriate credentialing agency for verification of licensure may practice for 30 days upon receipt of an authorization letter from the board. If an applicant has not received a Virginia license within 30 days and wishes to continue practice, he shall seek an extension of authorization to practice by submitting a request and evidence that he has requested verification of licensure.

C. If the application is not completed within one year of the initial filing date, the applicant shall submit a new application and fee.

18VAC90-20-210. Licensure of applicants from other countries.

A. With the exception of applicants from Canada who are eligible to be licensed by endorsement, applicants whose basic nursing education was received in another country shall be scheduled to take the licensing examination provided they meet the statutory qualifications for licensure. Verification of qualification shall be based on documents submitted as required in subsection B or C of this section.

B. Such applicants for registered nurse licensure shall:

1. Submit evidence from the CGFNS that the secondary education and nursing education are comparable to those required for registered nurses in the Commonwealth;
2. Submit evidence of passage of an English language proficiency examination approved by the CGFNS, unless the applicant meets the CGFNS criteria for an exemption from the requirement; and
3. Submit the required application and fee for licensure by examination.

C. Such applicants for practical nurse licensure shall:

1. Submit evidence from the CGFNS that the secondary education and nursing education are comparable to those required for practical nurses in the Commonwealth;
2. Submit evidence of passage of an English language proficiency examination approved by the CGFNS, unless the applicant meets the CGFNS criteria for an exemption from the requirement; and
3. Submit the required application and fee for licensure by examination.

D. An applicant for licensure as a registered nurse who has met the requirements of subsections A and B of this section may practice for a period not to exceed 90 days from the date of approval of an application submitted to the board when he is working as a nonsupervisory staff nurse in a licensed nursing home or certified nursing facility.

1. Applicants who practice nursing as provided in this subsection shall use the designation "foreign nurse graduate" on nametags or when signing official records.
2. During the 90-day period, the applicant shall take and pass the licensing examination in order to remain eligible to practice nursing in Virginia.
3. Any person practicing nursing under this exemption who fails to pass the licensure examination within the 90-day period may not thereafter practice nursing until he passes the licensing examination.

E. In addition to CGFNS, the board may accept credentials from other recognized agencies that review credentials of foreign-educated nurses if such agencies have been approved by the board.

18VAC90-20-215. Provisional licensure of applicants for licensure as registered nurses.

A. Pursuant to § 54.1-3017.1 of the Code of Virginia, the board may issue a provisional license to an applicant for the purpose of meeting the 500 hours of supervised, direct (hands-on) client care required of an approved registered nurse education program.

B. Such applicants for provisional licensure shall submit:

1. A completed application for licensure by examination and fee, including a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia;
2. Documentation that the applicant has successfully completed a nursing education program; and
3. Documentation of passage of NCLEX in accordance with 18VAC90-20-190.

C. Requirements for hours of supervised clinical experience in direct client care with a provisional license.

1. To qualify for licensure as a registered nurse, direct, hands-on hours of supervised clinical experience shall include the areas of adult medical/surgical nursing, geriatric nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, nursing fundamentals, and pediatric nursing. Supervised clinical hours may be obtained in employment in the role of a registered nurse or without compensation for the purpose of meeting these requirements.
2. Hours of direct, hands-on clinical experience obtained as part of the applicant's nursing education program and noted on the official transcript shall be counted towards the minimum of 500 hours and in the applicable areas of clinical practice.
3. For applicants with a current, active license as an LPN, 150 hours of credit shall be counted towards the 500-hour requirement.
4. 100 hours of credit may be applied towards the 500-hour requirement for applicants who have successfully completed a nursing education program that:
 - a. Requires students to pass competency-based assessments of nursing knowledge as well as a summative performance assessment of clinical competency that has been evaluated by the American Council on Education or any other board-approved organization; and
 - b. Has a passage rate for first-time test takers on the NCLEX that is not less than 80%, calculated on the cumulative results of the past four quarters of all graduates in each calendar year regardless of where the graduate is seeking licensure.
5. An applicant for licensure shall submit verification from a supervisor of the number of hours of direct client care and the areas in which clinical experiences in the role of a registered nurse were obtained.

D. Requirements for supervision of a provisional licensee.

1. The supervisor shall be on site and physically present in the unit where the provisional licensee is providing clinical care of clients.
2. In the supervision of provisional licensees in the clinical setting, the ratio shall not exceed two provisional licensees to one supervisor at any given time.
3. Licensed registered nurses providing supervision for a provisional licensee shall:
 - a. Notify the board of the intent to provide supervision for a provisional licensee on a form provided by the board;
 - b. Hold an active, unrestricted license or multistate licensure privilege and have at least two years of active clinical practice as a registered nurse prior to acting as a supervisor;
 - c. Be responsible and accountable for the assignment of clients and tasks based on their assessment and evaluation of the supervisee's clinical knowledge and skills;
 - d. Be required to monitor clinical performance and intervene if necessary for the safety and protection of the clients; and
 - e. Document on a form provided by the board the frequency and nature of the supervision of provisional licensees to verify completion of hours of clinical experience.
- E. The provisional status of the licensee shall be disclosed to the client prior to treatment and shall be indicated on identification worn by the provisional licensee.
- F. All provisional licenses shall expire six months from the date of issuance and may be renewed for an additional six months. Renewal of a provisional license beyond the limit of 12 months shall

be for good cause shown and shall be approved by the board. A request for extension of a provisional license beyond 12 months shall be made at least 30 days prior to its expiration.

18VAC90-20-220. Renewal of licenses.

A. Licensees born in even-numbered years shall renew their licenses by the last day of the birth month in even-numbered years. Licensees born in odd-numbered years shall renew their licenses by the last day of the birth month in odd-numbered years.

B. After August 1, 2015, a nurse shall be required to meet the requirements for continued competency set forth in 18VAC90-20-221 in order to renew an active license.

C. A notice for renewal of license shall be sent by the board to the last known address of the licensee. The licensee shall complete the renewal form and submit it with the required fee.

D. Failure to receive the renewal form shall not relieve the licensee of the responsibility for renewing the license by the expiration date.

E. The license shall automatically lapse if the licensee fails to renew by the expiration date.

F. Any person practicing nursing during the time a license has lapsed shall be considered an illegal practitioner and shall be subject to prosecution under the provisions of §54.1-3008 of the Code of Virginia.

G. Upon renewal, all licensees shall declare their primary state of residence. If the declared state of residence is another compact state, the licensee is not eligible for renewal.

18VAC90-20-221. Continued competency requirements for renewal of an active license.

A. In order to renew an active nursing license, a licensee shall complete at least one of the following learning activities or courses:

1. Current specialty certification by a national certifying organization, as defined in 18VAC90-20-10;

2. Completion of a minimum of three credit hours of post-licensure academic education relevant to nursing practice, offered by a regionally accredited college or university;

3. A board-approved refresher course in nursing;

4. Completion of nursing-related, evidence-based practice project or research study;

5. Completion of publication as the author or co-author during a renewal cycle;

6. Teaching or developing a nursing-related course resulting in no less than three semester hours of college credit, a 15-week course, or specialty certification;

7. Teaching or developing nursing-related continuing education courses for up to 30 contact hours;

8. Fifteen contact hours of workshops, seminars, conferences, or courses relevant to the practice of nursing and 640 hours of active practice as a nurse; or

9. Thirty contact hours of workshops, seminars, conferences, or courses relevant to the practice of nursing.

B. To meet requirements of subdivision A 8 or 9 of this section, workshops, seminars, conferences, or courses shall be offered by a provider recognized or approved by one of the following:

1. American Nurses Credentialing Center (ANCC)/American Nurses Association (ANA);

2. National Council of State Boards of Nursing (NCSBN);

3. Area Health Education Centers (AHEC) in any state in which the AHEC is a member of the National AHEC Organization;

4. Any state nurses association;
5. National League for Nursing (NLN);
6. National Association for Practical Nurse Education and Service (NAPNES);
7. National Federation of Licensed Practical Nurses (NFLPN);
8. A licensed health care facility, agency, or hospital;
9. A health care provider association;
10. Regionally or nationally accredited colleges or universities;
11. A state or federal government agency;
12. The American Heart Association, the American Health and Safety Institute, or the American Red Cross for courses in advanced resuscitation; or
13. Virginia Board of Nursing or any state board of nursing.

C. Dual licensed persons.

1. Those persons dually licensed by this board as a registered nurse and a licensed practical nurse shall only meet one of the continued competency requirements as set forth in subsection A of this section.

2. Registered nurses who also hold an active license as a nurse practitioner shall only meet the requirements of 18VAC90-30-105 and, for those with prescriptive authority, 18VAC90-40-55.

D. A licensee is exempt from the continued competency requirement for the first renewal following initial licensure by examination or endorsement.

E. The board may grant an extension for good cause of up to one year for the completion of continuing competency requirements upon written request from the licensee 60 days prior to the renewal date. Such extension shall not relieve the licensee of the continuing competency requirement.

F. The board may grant an exemption for all or part of the continuing competency requirements due to circumstances beyond the control of the licensee such as temporary disability, mandatory military service, or officially declared disasters.

G. Continued competency activities or courses required by board order in a disciplinary proceeding shall not be counted as meeting the requirements for licensure renewal.

18VAC90-20-222. Documenting compliance with continued competency requirements.

A. All licensees are required to maintain original documentation of completion for a period of two years following renewal and to provide such documentation within 30 days of a request from the board for proof of compliance.

B. Documentation of compliance shall be as follows:

1. Evidence of national certification shall include a copy of a certificate that includes name of licensee, name of certifying body, date of certification, and date of certification expiration. Certification shall be initially attained during the licensure period, have been in effect during the entire licensure period, or have been recertified during the licensure period.

2. Evidence of post-licensure academic education shall include a copy of transcript with the name of the licensee, name of educational institution, date of attendance, name of course with grade, and number of credit hours received.

3. Evidence of completion of a board-approved refresher course shall include written correspondence from the provider with the name of the licensee, name of the provider, and verification of successful completion of the course.

4. Evidence of completion of a nursing research or project shall include an abstract or summary, the name of the licensee, role of the licensee as principal or coprincipal investigator, date of completion, statement of the problem, research or project objectives, methods used, and summary of findings.

5. Evidence of authoring or co-authoring a published nursing-related article, paper, book, or book chapter, which shall include a copy of the publication to include the name of the licensee and publication date.

6. Evidence of teaching a course for college credit shall include documentation of the course offering, indicating instructor, course title, course syllabus, and the number of credit hours. Teaching a particular course may only be used once to satisfy the continued competency requirement unless the course offering and syllabus has changed.

7. Evidence of teaching a course for continuing education credit shall include a written attestation from the director of the program or authorizing entity including the date or dates of the course or courses and the number of contact hours awarded. If the total number of contact hours totals less than 30, the licensee shall obtain additional hours in continuing learning activities or courses.

8. Evidence of contact hours of continuing learning activities or courses shall include the name of the licensee, title of educational activity, name of the provider, number of contact hours, and date of activity.

9. Evidence of 640 hours of active practice in nursing shall include documentation satisfactory to the board of the name of the licensee, number of hours worked in calendar or fiscal year, name and address of employer, and signature of supervisor. If self-employed, hours worked may be validated through other methods such as tax records or other business records. If active practice is of a volunteer or gratuitous nature, hours worked may be validated by the recipient agency.

18VAC90-20-225. Inactive licensure.

A. A registered nurse or licensed practical nurse who holds a current, unrestricted license in Virginia may, upon a request on the renewal application and submission of the required fee, be issued an inactive license. The holder of an inactive license shall not be entitled to practice nursing in Virginia or practice on a multistate licensure privilege but may use the title “registered nurse” or “licensed practical nurse”.

B. Reactivation of an inactive license.

1. A nurse whose license is inactive may reactivate within one renewal period by payment of the difference between the inactive renewal and the active renewal fee.

2. A nurse whose license has been inactive for more than one renewal period may reactivate by:

a. Submission of an application;

b. Payment of the difference between the inactive renewal and the active renewal fee; and

c. Providing evidence of completion of at least one of the learning activities or courses specified in 18VAC90-20-221 during the two years immediately preceding application for reactivation.

3. The board may waive all or part of the continuing education requirement for a nurse who holds a current, unrestricted license in another state and who has engaged in active practice during the period the Virginia license was inactive.

4. The board may request additional evidence that the nurse is prepared to resume practice in a competent manner.

5. The board reserves the right to deny a request for reactivation to any licensee who has been determined to have committed an act in violation of §54.1-3007 of the Code of Virginia or any provision of this chapter.

18VAC90-20-230. Reinstatement of lapsed licenses or license suspended or revoked.

A. A nurse whose license has lapsed may be reinstated within one renewal period by payment of the current renewal fee and the late renewal fee.

B. A nurse whose license has lapsed for more than one renewal period shall:

1. File a reinstatement application and pay the reinstatement fee;
2. Provide evidence of completing at least one of the learning activities or courses specified in 18VAC90-20-221 during the two years immediately preceding application for reinstatement; and
3. Submit a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.

C. The board may waive all or part of the continuing education requirement for a nurse who holds a current, unrestricted license in another state and who has engaged in active practice during the period the Virginia license was lapsed.

D. A nurse whose license has been suspended or revoked by the board may apply for reinstatement by filing a reinstatement application, fulfilling requirements for continuing competency as required in subsection B of this section and paying the fee for reinstatement after suspension or revocation. A nurse whose license has been revoked may not apply for reinstatement sooner than three years from entry of the order of revocation.

E. The board may request additional evidence that the nurse is prepared to resume practice in a competent manner.

18VAC90-20-240. through 18VAC90-20-270. (Repealed.)

18VAC90-20-271. Restricted volunteer license and registration for voluntary practice by out-of-state licensees.

A. A registered or practical nurse may be issued a restricted volunteer license and may practice in accordance with provisions of § 54.1-3011.01 of the Code of Virginia.

B. Any licensed nurse who does not hold a license to practice in Virginia and who seeks registration to practice on a voluntary basis under the auspices of a publicly supported, all volunteer, nonprofit organization that sponsors the provision of health care to populations of underserved people shall:

1. File a complete application for registration on a form provided by the board at least five business days prior to engaging in such practice. An incomplete application will not be considered;
2. Provide evidence of current, unrestricted licensure in a U.S. jurisdiction;
3. Provide the name of the nonprofit organization, the dates and location of the voluntary provision of services;
4. Pay a registration fee of \$10; and
5. Provide an attestation from a representative of the nonprofit organization attesting to its compliance with provisions of subdivision 11 of §54.1-3001 of the Code of Virginia.

Part IV. Clinical Nurse Specialists.

18VAC90-20-275. Clinical nurse specialist education programs.

A. An approved program shall be in a school of nursing that holds accreditation as defined in 18VAC90-20-10 that is within a regionally accredited college or university that offers a graduate degree in nursing designed to prepare a registered nurse for advanced practice in a clinical specialty in nursing.

B. A program that is in the process of obtaining and has not been denied accreditation may be considered by the board as an approved program for the purpose of registering a person who graduated during the accrediting process.

18VAC90-20-280. Clinical nurse specialist registration.

A. Initial registration. An applicant for initial registration as a clinical nurse specialist shall:

1. Be currently licensed as a registered nurse in Virginia or hold a current multistate licensure privilege as a registered nurse;
2. Submit evidence of a graduate degree in nursing from an approved program as defined in 18VAC90-20-275;
3. Submit evidence of current specialty certification as a clinical nurse specialist from a national certifying organization acceptable to the board or has an exception available from March 1, 1990, to July 1, 1990; and
4. Submit the required application and fee.

B. Renewal of registration.

1. Registration as a clinical nurse specialist shall be renewed biennially at the same time the registered nurse license is renewed. If registered as a clinical nurse specialist with a multistate licensure privilege to practice in Virginia as a registered nurse, a licensee born in even-numbered years shall renew his license by the last day of the birth month in even-numbered years and a licensee born in odd-numbered years shall renew his license by the last day of the birth month in odd-numbered years.
2. The clinical nurse specialist shall complete the renewal form and submit it with the required fee. An attestation of current specialty certification is required unless registered in accordance with an exception.
3. Registration as a clinical nurse specialist shall lapse if the registered nurse license is not renewed or the multistate licensure privilege is lapsed and may be reinstated upon:
 - a. Reinstatement of R.N. license or multistate licensure privilege;
 - b. Payment of reinstatement and current renewal fees; and
 - c. Submission of evidence of continued specialty certification unless registered in accordance with an exception.

18VAC90-20-290. Clinical nurse specialist practice.

A. The practice of clinical nurse specialists shall be consistent with the:

1. Education required in 18VAC90-20-275; and
 2. Experience required for specialist certification.
- B. The clinical nurse specialist shall provide those advanced nursing services that are consistent with the standards of specialist practice as established by a national certifying organization for the designated specialty and in accordance with the provisions of Title 54.1 of the Code of Virginia.
- C. Advanced practice as a clinical nurse specialist shall include but shall not be limited to performance as an expert clinician to:
1. Provide direct care and counsel to individuals and groups;
 2. Plan, evaluate and direct care given by others; and
 3. Improve care by consultation, collaboration, teaching and the conduct of research.

Part V. Disciplinary Provisions.

18VAC90-20-300. Disciplinary provisions.

A. The board has the authority to deny, revoke or suspend a license or multistate licensure privilege issued, or to otherwise discipline a licensee or holder of a multistate licensure privilege upon proof that the licensee or holder of a multistate licensure privilege has violated any of the provisions of §54.1-3007 of the Code of Virginia. For the purpose of establishing allegations to be included in the notice of hearing, the board has adopted the following definitions:

1. Fraud or deceit in procuring or maintaining a license means, but shall not be limited to:
 - a. Filing false credentials;
 - b. Falsely representing facts on an application for initial license, reinstatement or renewal of a license; or
 - c. Giving or receiving assistance in the taking of the licensing examination.
2. Unprofessional conduct means, but shall not be limited to:
 - a. Performing acts beyond the limits of the practice of professional or practical nursing as defined in Chapter 30 (§54.1-3000 et seq.) of Title 54.1 of the Code of Virginia, or as provided by §§54.1-2901 and 54.1-2957 of the Code of Virginia;
 - b. Assuming duties and responsibilities within the practice of nursing without adequate training or when competency has not been maintained;
 - c. Obtaining supplies, equipment or drugs for personal or other unauthorized use;
 - d. Employing or assigning unqualified persons to perform functions that require a licensed practitioner of nursing;
 - e. Falsifying or otherwise altering patient, employer, student, or educational program records, including falsely representing facts on a job application or other employment-related documents;
 - f. Abusing, neglecting or abandoning patients or clients;
 - g. Practice of a clinical nurse specialist beyond that defined in 18VAC90-20-290;
 - h. Representing oneself as or performing acts constituting the practice of a clinical nurse specialist unless so registered by the board;
 - i. Delegating nursing tasks to an unlicensed person in violation of the provisions of Part VIII (18VAC90-20-420 et seq.) of this chapter;

- j. Giving to or accepting from a patient or client property or money for any reason other than fee for service or a nominal token of appreciation;
- k. Obtaining money or property of a patient or client by fraud, misrepresentation or duress;
- l. Entering into a relationship with a patient or client that constitutes a professional boundary violation in which the nurse uses his professional position to take advantage of the vulnerability of a patient, a client or his family, to include but not limited to actions that result in personal gain at the expense of the patient or client, a nontherapeutic personal involvement or sexual conduct with a patient or client;
- m. Violating state laws relating to the privacy of patient information, including but not limited to §32.1-127.1:03 of the Code of Virginia;
- n. Providing false information to staff or board members in the course of an investigation or proceeding;
- o. Failing to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia or elder abuse or neglect as required in § 63.2-1606 of the Code of Virginia; or
- p. Violating any provision of this chapter.

B. Any sanction imposed on the registered nurse license of a clinical nurse specialist shall have the same effect on the clinical nurse specialist registration.

18VAC90-20-310 through 18VAC90-20-364. (Repealed.)

Part VI. Medication Administration Training Program. (Repealed)

18VAC90-20-370. through 18VAC90-20-400. (Repealed.)

Part VII. Protocol for Adult Immunization. (Repealed)

18VAC90-20-410. (Repealed.)

Part VIII. Delegation of Nursing Tasks and Procedures.

18VAC90-20-420. Definitions.

"Delegation" means the authorization by a registered nurse to an unlicensed person to perform selected nursing tasks and procedures in accordance with this part.

"Supervision" means guidance or direction of a delegated nursing task or procedure by a qualified, registered nurse who provides periodic observation and evaluation of the performance of the task and who is accessible to the unlicensed person.

"Unlicensed person" means an appropriately trained individual, regardless of title, who receives compensation, who functions in a complementary or assistive role to the registered nurse in providing direct patient care or carrying out common nursing tasks and procedures, and who is responsible and accountable for the performance of such tasks and procedures. With the exception of certified nurse aides, this shall not include anyone licensed or certified by a health regulatory board who is practicing within his recognized scope of practice.

18VAC90-20-430. Criteria for delegation.

A. Delegation of nursing tasks and procedures shall only occur in accordance with the plan for delegation adopted by the entity responsible for client care. The delegation plan shall comply with provisions of this chapter and shall provide:

1. An assessment of the client population to be served;
2. Analysis and identification of nursing care needs and priorities;
3. Establishment of organizational standards to provide for sufficient supervision which assures safe nursing care to meet the needs of the clients in their specific settings;
4. Communication of the delegation plan to the staff;
5. Identification of the educational and training requirements for unlicensed persons and documentation of their competencies; and
6. Provision of resources for appropriate delegation in accordance with this part.

B. Delegation shall be made only if all of the following criteria are met:

1. In the judgment of the delegating nurse, the task or procedure can be properly and safely performed by the unlicensed person and the delegation does not jeopardize the health, safety and welfare of the client.
2. The delegating nurse retains responsibility and accountability for nursing care of the client, including nursing assessment, planning, evaluation, documentation and supervision.
3. Delegated tasks and procedures are within the knowledge, area of responsibility and skills of the delegating nurse.
4. Delegated tasks and procedures are communicated on a client-specific basis to an unlicensed person with clear, specific instructions for performance of activities, potential complications, and expected results.
5. The person to whom a nursing task has been delegated is clearly identified to the client as an unlicensed person by a name tag worn while giving client care and by personal communication by the delegating nurse when necessary.

C. Delegated tasks and procedures shall not be reassigned by unlicensed personnel.

D. Nursing tasks shall only be delegated after an assessment is performed according to the provisions of 18VAC90-20-440.

18VAC90-20-440. Assessment required prior to delegation.

Prior to delegation of nursing tasks and procedures, the delegating nurse shall make an assessment of the client and unlicensed person as follows:

1. The delegating nurse shall assess the clinical status and stability of the client's condition, shall determine the type, complexity and frequency of the nursing care needed and shall delegate only those tasks which:
 - a. Do not require the exercise of independent nursing judgment;
 - b. Do not require complex observations or critical decisions with respect to the nursing task or procedure;
 - c. Frequently recur in the routine care of the client or group of clients;
 - d. Do not require repeated performance of nursing assessments;
 - e. Utilize a standard procedure in which the tasks or procedures can be performed according to exact, unchanging directions; and

f. Have predictable results and for which the consequences of performing the task or procedures improperly are minimal and not life threatening.

2. The delegating nurse shall also assess the training, skills and experience of the unlicensed person and shall verify the competency of the unlicensed person in order to determine which tasks are appropriate for that unlicensed person and the method of supervision required.

18VAC90-20-450. Supervision of delegated tasks.

A. The delegating nurse shall determine the method and frequency of supervision based on factors which include, but are not limited to:

1. The stability and condition of the client;
2. The experience and competency of the unlicensed person;
3. The nature of the tasks or procedures being delegated; and
4. The proximity and availability of the registered nurse to the unlicensed person when the nursing tasks will be performed.

B. In the event that the delegating nurse is not available, the delegation shall either be terminated or delegation authority shall be transferred by the delegating nurse to another registered nurse who shall supervise all nursing tasks delegated to the unlicensed person, provided the registered nurse meets the requirements of 18VAC90-20-430 B 3.

C. Supervision shall include but not be limited to:

1. Monitoring the performance of delegated tasks;
2. Evaluating the outcome for the client;
3. Ensuring appropriate documentation; and
4. Being accessible for consultation and intervention.

D. Based on an ongoing assessment as described in 18VAC90-20-440, the delegating nurse may determine that delegation of some or all of the tasks and procedures is no longer appropriate.

18VAC90-20-460. Nursing tasks that shall not be delegated.

A. Nursing tasks that shall not be delegated are those which are inappropriate for a specific, unlicensed person to perform on a specific patient after an assessment is conducted as provided in 18VAC90-20-440.

B. Nursing tasks that shall not be delegated to any unlicensed person are:

1. Activities involving nursing assessment, problem identification, and outcome evaluation which require independent nursing judgment;
2. Counseling or teaching except for activities related to promoting independence in personal care and daily living;
3. Coordination and management of care involving collaboration, consultation and referral;
4. Emergency and nonemergency triage;
5. Administration of medications except as specifically permitted by the Virginia Drug Control Act (§54.1-3400 et seq. of the Code of Virginia); and
6. Circulating duties in an operating room.