NURSE PRACTICE ACT AMENDMENTS
2016 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Evan J. Vickers
House Sponsor: Sophia M. DiCaro
LONG TITLE
General Description:
This bill amends the Nurse Practice Act.
Highlighted Provisions:
This bill:
 amends definitions;
 requires a nursing education program to be accredited in order to qualify students to
practice nursing in the state; and
 provides students of certain non-accredited nursing education programs time to
graduate from the non-accredited program and qualify to practice nursing in the
state.
Money Appropriated in this Bill:
None
Other Special Clauses:
None
Utah Code Sections Affected:
AMENDS:
58-31b-102, as last amended by Laws of Utah 2011, Chapter 366
58-31b-601, as last amended by Laws of Utah 2015, Chapter 29

27 Be it enacted by the Legislature of the state of Utah:

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28	Section 1. Section 58-31b-102 is amended to read:
20 29	58-31b-102. Definitions.
29 30	In addition to the definitions in Section 58-1-102, as used in this chapter:
31	(1) "Administrative penalty" means a monetary fine or citation imposed by the division
32	for acts or omissions determined to constitute unprofessional or unlawful conduct in
33	accordance with a fine schedule established by rule and as a result of an adjudicative
34	proceeding conducted in accordance with Title 63G, Chapter 4, Administrative Procedures Act.
35	(2) "Applicant" means a person who applies for licensure or certification under this
36	chapter by submitting a completed application for licensure or certification and the required
37	fees to the department.
38	(3) "Approved education program" means a nursing education program that [meets the
39	minimum standards for educational programs established under this chapter and by division
40	rule in collaboration with the board] is accredited by an accrediting body for nursing education
41	that is approved by the United States Department of Education.
42	(4) "Board" means the Board of Nursing created in Section 58-31b-201.
43	(5) "Consultation and referral plan" means a written plan jointly developed by an
44	advanced practice registered nurse and a consulting physician that permits the advanced
45	practice registered nurse to prescribe schedule II-III controlled substances in consultation with
46	the consulting physician.
47	(6) "Consulting physician" means a physician and surgeon or osteopathic physician and
48	surgeon licensed in accordance with this title who has agreed to consult with an advanced
49	practice registered nurse with a controlled substance license, a DEA registration number, and
50	who will be prescribing schedule II-III controlled substances.
51	(7) "Diagnosis" means the identification of and discrimination between physical and
52	psychosocial signs and symptoms essential to the effective execution and management of
53	health care.
54	(8) "Examinee" means a person who applies to take or does take any examination
55	required under this chapter for licensure.
56	(9) "Licensee" means a person who is licensed or certified under this chapter.
57	(10) "Long-term care facility" means any of the following facilities licensed by the
58	Department of Health pursuant to Title 26, Chapter 21, Health Care Facility Licensing and

59	Inspection Act:
60	(a) a nursing care facility;
61	(b) a small health care facility;
62	(c) an intermediate care facility for people with an intellectual disability;
63	(d) an assisted living facility Type I or II; or
64	(e) a designated swing bed unit in a general hospital.
65	(11) "Medication aide certified" means a certified nurse aide who:
66	(a) has a minimum of 2,000 hours experience working as a certified nurse aide;
67	(b) has received a minimum of 60 hours of classroom and 40 hours of practical training
68	that is approved by the division in collaboration with the board, in administering routine
69	medications to patients or residents of long-term care facilities; and
70	(c) is certified by the division as a medication aide certified.
71	(12) (a) "Practice as a medication aide certified" means the limited practice of nursing
72	under the supervision, as defined by the division by administrative rule, of a licensed nurse,
73	involving routine patient care that requires minimal or limited specialized or general
74	knowledge, judgment, and skill, to an individual who:
75	(i) is ill, injured, infirm, has a physical, mental, developmental, or intellectual
76	disability; and
77	(ii) is in a regulated long-term care facility.
78	(b) "Practice as a medication aide certified":
79	(i) includes:
80	(A) providing direct personal assistance or care; and
81	(B) administering routine medications to patients in accordance with a formulary and
82	protocols to be defined by the division by rule; and
83	(ii) does not include assisting a resident of an assisted living facility, a long term care
84	facility, or an intermediate care facility for people with an intellectual disability to self
85	administer a medication, as regulated by the Department of Health by administrative rule.
86	(13) "Practice of advanced practice registered nursing" means the practice of nursing
87	within the generally recognized scope and standards of advanced practice registered nursing as
88	defined by rule and consistent with professionally recognized preparation and education
89	standards of an advanced practice registered nurse by a person licensed under this chapter as an

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90	advanced practice registered nurse. Advanced practice registered nursing includes:
91	(a) maintenance and promotion of health and prevention of disease;
92	(b) diagnosis, treatment, correction, consultation, and referral for common health
93	problems;
94	(c) prescription or administration of prescription drugs or devices including:
95	(i) local anesthesia;
96	(ii) schedule IV-V controlled substances; and
97	(iii) schedule II-III controlled substances in accordance with a consultation and referral
98	plan; or
99	(d) the provision of preoperative, intraoperative, and postoperative anesthesia care and
100	related services upon the request of a licensed health care professional by an advanced practice
101	registered nurse specializing as a certified registered nurse anesthetist, including:
102	(i) preanesthesia preparation and evaluation including:
103	(A) performing a preanesthetic assessment of the patient;
104	(B) ordering and evaluating appropriate lab and other studies to determine the health of
105	the patient; and
106	(C) selecting, ordering, or administering appropriate medications;
107	(ii) anesthesia induction, maintenance, and emergence, including:
108	(A) selecting and initiating the planned anesthetic technique;
109	(B) selecting and administering anesthetics and adjunct drugs and fluids; and
110	(C) administering general, regional, and local anesthesia;
111	(iii) postanesthesia follow-up care, including:
112	(A) evaluating the patient's response to anesthesia and implementing corrective
113	actions; and
114	(B) selecting, ordering, or administering the medications and studies listed in
115	Subsection (13)(d); and
116	(iv) other related services within the scope of practice of a certified registered nurse
117	anesthetist, including:
118	(A) emergency airway management;
119	(B) advanced cardiac life support; and
120	(C) the establishment of peripheral, central, and arterial invasive lines; and

121 (v) for purposes of Subsection (13)(d), "upon the request of a licensed health care professional": 122 123 (A) means a health care professional practicing within the scope of the health care 124 professional's license, requests anesthesia services for a specific patient; and 125 (B) does not require an advanced practice registered nurse specializing as a certified 126 registered nurse anesthetist to enter into a consultation and referral plan or obtain additional 127 authority to select, administer, or provide preoperative, intraoperative, or postoperative 128 anesthesia care and services. 129 (14) "Practice of nursing" means assisting individuals or groups to maintain or attain optimal health, implementing a strategy of care to accomplish defined goals and evaluating 130 131 responses to care and treatment. The practice of nursing requires substantial specialized or 132 general knowledge, judgment, and skill based upon principles of the biological, physical, 133 behavioral, and social sciences, and includes: 134 (a) initiating and maintaining comfort measures; 135 (b) promoting and supporting human functions and responses; 136 (c) establishing an environment conducive to well-being; 137 (d) providing health counseling and teaching; 138 (e) collaborating with health care professionals on aspects of the health care regimen; 139 (f) performing delegated procedures only within the education, knowledge, judgment, 140 and skill of the licensee; and 141 (g) delegating nurse interventions that may be performed by others and are not in 142 conflict with this chapter. 143 (15) "Practice of practical nursing" means the performance of nursing acts in the 144 generally recognized scope of practice of licensed practical nurses as defined by rule and as 145 provided in this Subsection (15) by a person licensed under this chapter as a licensed practical 146 nurse and under the direction of a registered nurse, licensed physician, or other specified health 147 care professional as defined by rule. Practical nursing acts include: 148 (a) contributing to the assessment of the health status of individuals and groups; 149 (b) participating in the development and modification of the strategy of care; 150 (c) implementing appropriate aspects of the strategy of care; 151 (d) maintaining safe and effective nursing care rendered to a patient directly or

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152	indirectly; and
153	(e) participating in the evaluation of responses to interventions.
154	(16) "Practice of registered nursing" means performing acts of nursing as provided in
155	this Subsection (16) by a person licensed under this chapter as a registered nurse within the
156	generally recognized scope of practice of registered nurses as defined by rule. Registered
157	nursing acts include:
158	(a) assessing the health status of individuals and groups;
159	(b) identifying health care needs;
160	(c) establishing goals to meet identified health care needs;
161	(d) planning a strategy of care;
162	(e) prescribing nursing interventions to implement the strategy of care;
163	(f) implementing the strategy of care;
164	(g) maintaining safe and effective nursing care that is rendered to a patient directly or
165	indirectly;
166	(h) evaluating responses to interventions;
167	(i) teaching the theory and practice of nursing; and
168	(j) managing and supervising the practice of nursing.
169	(17) "Routine medications":
170	(a) means established medications administered to a medically stable individual as
171	determined by a licensed health care practitioner or in consultation with a licensed medical
172	practitioner; and
173	(b) is limited to medications that are administered by the following routes:
174	(i) oral;
175	(ii) sublingual;
176	(iii) buccal;
177	(iv) eye;
178	(v) ear;
179	(vi) nasal;
180	(vii) rectal;
181	(viii) vaginal;
182	(ix) skin ointments, topical including patches and transdermal;

183	(x) premeasured medication delivered by aerosol/nebulizer; and
184	(xi) medications delivered by metered hand-held inhalers.
185	(18) "Unlawful conduct" is as defined in Sections 58-1-501 and 58-31b-501.
186	(19) "Unlicensed assistive personnel" means any unlicensed person, regardless of title,
187	to whom tasks are delegated by a licensed nurse as permitted by rule and in accordance with
188	the standards of the profession.
189	(20) "Unprofessional conduct" is as defined in Sections 58-1-501 and 58-31b-502 and
190	as may be further defined by rule.
191	Section 2. Section 58-31b-601 is amended to read:
192	58-31b-601. Minimum standards for nursing programs Medication aide
193	training.
194	(1) Except as provided in Subsection (2), to qualify as an approved education program
195	for the purpose of qualifying graduates for licensure under this chapter, a nursing education
196	program shall be accredited by an accrediting body for nursing education that is approved by
197	the United States Department of Education.
198	(2) (a) In accordance with Subsection (2)(b) and Title 63G, Chapter 3, Utah
199	Administrative Rulemaking Act, the division, in consultation with the board, may make rules
200	establishing requirements for a nursing education program to qualify for a limited time as an
201	approved education program for the purpose of qualifying graduates for licensure under this
202	chapter, if the program:
203	[(a)] (i) (A) is in the process of obtaining the accreditation described in Subsection (1);
204	[(b)] (B) has recently been denied accreditation after seeking to obtain the accreditation
205	described in Subsection (1); or
206	[(c)] (C) has recently lost the accreditation described in Subsection (1)[-]; and
207	(ii) is approved under Subsection (2)(a) on or before May 15, 2016.
208	(b) A program approved under Subsection (2)(a) may qualify graduates for licensure
209	under Subsection (2)(a) until $\hat{S} \rightarrow [May 31, 2017.]$ December 31, 2020. $\leftarrow \hat{S}$ On or after $\hat{S} \rightarrow [June 1, S]$
209a	$\frac{2017}{3}$ January 1, 2021 $\leftarrow \hat{S}$, a nursing education
210	program that is not an approved education program under Subsection (1) may not qualify
211	graduates for licensure under this chapter.
212	(3) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, and
213	the provisions of this chapter, the division shall make rules defining the minimum standards for

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- a medication aide certified training program to qualify a person for certification under this
- 215 chapter as a medication aide certified.

Legislative Review Note Office of Legislative Research and General Counsel