**02-380**

**MAINE STATE BOARD OF NURSING**

2019 - 2020 Regulatory Agenda

September 26 2019

AGENCY UMBRELLA-UNIT NUMBER: **02-380**

AGENCY NAME: **Maine State Board of Nursing**

**RULEMAKING LIASION**:Virginia deLorimier, MSN, RN, Assistant Executive Director, 158 State House Station, Augusta, ME 04333-0137. Telephone: (207) 287-1147. Email: Virginia.E.deLorimier@Maine.gov

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**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:** None

**EXPECTED 2019-2020 RULE-MAKING ACTIVITY:**

**CHAPTER 1:** Collaborative Drug Therapy Management

STATUTORY BASIS: 32 M.R.S. §

PURPOSE: This is a joint rule of the Maine State Board of Nursing and the Board of Pharmacy for purposes of establishing safe and effective collaborative practice agreements, treatment protocols, and documentation and reporting requirements between a pharmacist and a nurse practitioner.

SCHEDULE FOR ADOPTION: 2020

AFFECTED PARTIES: Advanced Practice Registered Nurses with prescriptive authority and patients

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

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**CHAPTER 3:** Rules Relating to General Requirements Relating to Licensure

STATUTORY AUTHORITY: 32 M.R.S. §2153-A(1)

PURPOSE:This chapter explains the procedure for change of name and/or address; policy and procedure in regard to a lost license; and verification of Maine licensure to another state or country. Proposed revisions to this chapter may include updating any changes in statutory language.

SCHEDULE FOR ADOPTION: Anticipated completion 2020

AFFECTED PARTIES: Licensees

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

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**CHAPTER 4:** Rules Relating to Disciplinary Action and Violations of Law

STATUTORY AUTHORITY: 32 M.R.S. §§ 2105-A, 2153-A(1)

PURPOSE: This chapter lists the legal grounds for action against a license; explains the procedure for initiating disciplinary action; describes disciplinary proceedings and sanctions; states the authority of the Administrative Court, following a formal hearing, to revoke or suspend a licensee; lists the violations of law over which the District Court and the Superior Court shall have jurisdiction for prosecution; and defines unprofessional conduct. Proposed revisions to this chapter include amending disciplinary process by further defining Fraud and Deceit and addressing multi-state licensure.

SCHEDULE FOR ADOPTION: Anticipated completion 2020

AFFECTED PARTIES: Licensed Nurses

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

CONTACT PERSON FOR THIS CHAPTER: Kim Esquibel, Executive Director, 158 State House Station, Augusta, ME 04333-0158; (207) 287-1148; email: Kim.Esquibel@Maine.gov

**CHAPTER 5:** Regulations Relating to Training Programs and Delegation by Registered Professional Nurses of Selected Nursing Tasks to Certified Nursing Assistants

STATUTORY AUTHORITY: 32 M.R.S. §§ 2102, 2104 and 2153-A(1)

PURPOSE: This chapter defines delegation; states the responsibilities of a registered professional nurse in delegating selected nursing tasks to certified nursing assistants; sets forth the requirements relating to training programs; and states the criteria for listing on the MAINE REGISTRY OF CERTIFIED NURSING ASSISTANTS. Proposed changes to this chapter include updating regulations relating to training programs and delegation of selected nursing tasks. Specifically, it reduces the number of hours of the Certified Nursing Assistant (CNA) Prescribed Curriculum to coincide with changes in the CNA curriculum, provides for more flexibility with additional CNA skills training, quantifies the meaning of the ability to read and write English, and clarifies what recently graduated means in the section for certified nursing assistants from out of state. Provides the individual with a shorter nurse’s aide generalist course and allows for more flexibility for the facility in training the individual with additional skills as needed.

SCHEDULE FOR ADOPTION: In process, anticipated completion 2019

AFFECTED PARTIES: Licensed Nurses, Certified Nursing Assistants

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

CONTACT PERSON FOR THIS CHAPTER: Virginia deLorimier, Assistant Executive Director, 158 State House Station, Augusta, ME 04333-0158; (207) 287-1147; Virginia.E.deLorimier@Maine.gov

**CHAPTER 6:** Regulations Relating to Coordination and Oversight of Patient Care Services by Unlicensed Health Care Assistive Personnel

STATUTORY AUTHORITY: 32 M.R.S. §§ 2102(2)(H), 2153-A(1)

PURPOSE: This chapter sets forth regulations governing coordination and oversight by registered professional nurses of patient care services provided by unlicensed health care assistive personnel. Proposed changes to this chapter include clarifying coordination and oversight.

SCHEDULE FOR ADOPTION: Anticipated completion 2020

AFFECTED PARTIES: Licensed Nurses, Unlicensed Assistive Personnel

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

CONTACT PERSON FOR THIS CHAPTER: Virginia deLorimier, Assistant Executive Director, 158 State House Station, Augusta, ME 04333-0158; (207) 287-1147; Virginia.E.deLorimier@Maine.gov

**CHAPTER 7:** Standards for Educational Programs in Nursing

STATUTORY AUTHORITY: 32 M.R.S. §§ 2104(1)(B), 2153-A(1)

PURPOSE: This chapter serves as a basic guide to the minimum legal requirements for approval of educational programs in nursing by the Board of Nursing; provides information and guidance for administrators and faculty, and for all persons concerned with the establishment, development and implementation of educational programs in nursing; and provides criteria for self-appraisal by faculty and serves as a basis for continued program improvement. The Board may propose revisions to the rule to create exemptions for applicability of certain portions of the rule related to preceptor - student ratios.

SCHEDULE FOR ADOPTION: Anticipated completion 2020

AFFECTED PARTIES: Nursing Education Programs

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

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**CHAPTER 8:** Rules Relating to Advanced Practice Registered Nursing

STATUTORY AUTHORITY: 32 M.R.S. §§ 2102(2-A), 2153-A(1), 2210, 2211(4)

PURPOSE: This chapter identifies the role of a registered professional nurse in advanced practice registered nursing; implements the Board's authority to approve the credentials for practice as a certified nurse practitioner, certified nurse-midwife, certified registered nurse anesthetist, and certified clinical nurse specialist; delineates the scope of practice; and implements the Board's authority to grant prescriptive authority. Proposed revisions to this chapter will address the changes in statute (LD116, SP187), clarify the 24 months supervision requirement for new nurse practitioners, reduce the continuing education requirement for advanced practice registered nurses, and clarify the treatment and prescribing of medications to family members.

SCHEDULE FOR ADOPTION: Anticipated completion 2019

AFFECTED PARTIES: Advanced Practice Registered Nurses

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

CONTACT PERSON FOR THIS CHAPTER: Virginia deLorimier, Assistant Executive Director, 158 State House Station, Augusta, ME 04333-0158; (207) 287-1147; Virginia.E.deLorimier@Maine.gov

**CHAPTER 10:** Regulations Relating to Administration of Intravenous Therapy by Licensed Nurses

STATUTORY AUTHORITY: 32 M.R.S. §2153-A(1); 32 M.R.S. §2102(2)(C)

PURPOSE: This chapter identifies the roles of licensed nurses in the administration of intravenous therapy. It also includes the approved course outlines for the administration of intravenous therapy by the licensed practical nurse, who works with the adult and/or pediatric patient. Proposed changes to this chapter include clarifying and updating standards of current practice in intravenous therapy and clarifying requirements for course approval. These changes will reduce the barriers for facilities to utilize licensed practical nurses to provide intravenous therapy by allowing facilities to train licensed practical nurses in intravenous therapy skills specifically related to the needs of the facility. Presently they must wait to utilize out of state and in-state licensed practical nurses until the licensed practical nurses complete the entire certification process (which includes skills that may never be used in the specific facility).

SCHEDULE FOR ADOPTION: Anticipated completion 2019

AFFECTED PARTIES: Licensed Nurses; Facilities hiring licensed practical nurses

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

CONTACT PERSON FOR THIS CHAPTER: Virginia deLorimier, Assistant Executive Director, 158 State House Station, Augusta, ME 04333-0158; (207) 287-1147; Virginia.E.deLorimier@Maine.gov

**CHAPTER 12:** Joint Rule Regarding Office Based Medication-Assisted Treatment of Opioid Addiction with Buprenorphine

STATUTORY BASIS: 32 M.R.S. §3269(3)(7)

PURPOSE: The proposed joint rule with the Board of Osteopathic Licensure and the Board of Licensure in Medicine will establish standards to ensure safe and adequate medication-assisted treatment of opioid addiction with buprenorphine in an office based setting.

SCHEDULE FOR ADOPTION: Anticipated completion 2019

AFFECTED PARTIES: Advanced Practice Registered Nurses with prescriptive authority and patients

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

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**CHAPTER 21**: Use of Controlled Substances for Treatment of Pain

STATUTORY BASIS: 32 M.R.S. §§ 2102(2-A), 2153-A(1), 2210

PURPOSE: This chapter is a joint rule with the Board of Osteopathic Licensure, the Board of Licensure in Medicine and the Board of Nursing to insure adequate relief of pain to the citizens of Maine. The Board may propose revisions to the rule to add the Board of Podiatric Medicine; add a table of contents to make the rule easier to use; create exemptions for applicability of certain portions of the rule for inpatients of medical facilities or custodial care facilities where controlled substances are dispensed or administered to the patient; provide clarification by moving the existing exemptions to dosage limits to a different section of the rule with the exemption to days’ supply; create exemptions for applicability of certain portions of the rule for patients who are terminally ill and who are receiving hospice services as defined in the rule; and modify/clarify the use of CDC guidelines.

SCHEDULE FOR ADOPTION: 2019

AFFECTED PARTIES: Advanced Practice Registered Nurses with prescriptive authority and patients

CONSENSUS-BASED RULE DEVELOPMENT: Not contemplated

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