

1 STATE OF OKLAHOMA

2 1st Session of the 56th Legislature (2017)

3 HOUSE BILL 1886

By: Ownbey

4  
5  
6 AS INTRODUCED

7 An Act relating to professions and occupations;  
8 amending 59 O.S. 2011, Sections 567.3a, 567.4a,  
9 567.8, as last amended by Section 2, Chapter 190,  
10 O.S.L. 2016, Section 567.17, as amended by Section 4,  
11 Chapter 190, O.S.L. 2016, and Section 9, Chapter 190,  
12 O.S.L. 2016 (59 O.S. Supp. 2016, Sections 567.8,  
13 567.17 and 567.25), which relate to the Oklahoma  
14 Nursing Practice Act; modifying certain definitions;  
15 updating statutory reference; granting Oklahoma Board  
16 of Nursing authority to impose disciplinary action  
17 for an individual guilty of deceit or material  
18 misrepresentation a license with or without certain  
19 recognition; granting Board authority to impose  
20 disciplinary action for an individual who has been  
21 terminated from the peer assistance program;  
22 authorizing summary suspension of license if certain  
23 finding is made by majority of Board officers;  
24 requiring licensee to be notified by letter within  
certain number of days; requiring letter to include  
certain notice; adding certain definition regarding  
peer assistance program; prohibiting certain  
information to be shared with a state not a party of  
the Nurse Licensure Compact; and providing an  
effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 59 O.S. 2011, Section 567.3a, is  
amended to read as follows:

1 Section 576.3a As used in the Oklahoma Nursing Practice Act:

2 1. "Board" means the Oklahoma Board of Nursing;

3 2. "The practice of nursing" means the performance of services  
4 provided for purposes of nursing diagnosis and treatment of human  
5 responses to actual or potential health problems consistent with  
6 educational preparation. Knowledge and skill are the basis for  
7 assessment, analysis, planning, intervention, and evaluation used in  
8 the promotion and maintenance of health and nursing management of  
9 illness, injury, infirmity, restoration or optimal function, or  
10 death with dignity. Practice is based on understanding the human  
11 condition across the human lifespan and understanding the  
12 relationship of the individual within the environment. This  
13 practice includes execution of the medical regime including the  
14 administration of medications and treatments prescribed by any  
15 person authorized by state law to so prescribe;

16 3. "Registered nursing" means the practice of the full scope of  
17 nursing which includes, but is not limited to:

- 18 a. assessing the health status of individuals, families  
19 and groups,
- 20 b. analyzing assessment data to determine nursing care  
21 needs,
- 22 c. establishing goals to meet identified health care  
23 needs,
- 24 d. planning a strategy of care,

- e. establishing priorities of nursing intervention to implement the strategy of care,
- f. implementing the strategy of care,
- g. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Oklahoma Nursing Practice Act,
- h. providing safe and effective nursing care rendered directly or indirectly,
- i. evaluating responses to interventions,
- j. teaching the principles and practice of nursing,
- k. managing and supervising the practice of nursing,
- l. collaborating with other health professionals in the management of health care,
- m. performing additional nursing functions in accordance with knowledge and skills acquired beyond basic nursing preparation, and
- n. delegating those nursing tasks as defined in the rules of the Board that may be performed by an advanced unlicensed assistive person;

4. "Licensed practical nursing" means the practice of nursing under the supervision or direction of a registered nurse, licensed physician or dentist. This directed scope of nursing practice includes, but is not limited to:

- a. contributing to the assessment of the health status of individuals and groups,
- b. participating in the development and modification of the plan of care,
- c. implementing the appropriate aspects of the plan of care,
- d. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the Oklahoma Nursing Practice Act,
- e. providing safe and effective nursing care rendered directly or indirectly,
- f. participating in the evaluation of responses to interventions,
- g. teaching basic nursing skills and related principles,
- h. performing additional nursing procedures in accordance with knowledge and skills acquired through education beyond nursing preparation, and
- i. delegating those nursing tasks as defined in the rules of the Board that may be performed by an advanced unlicensed assistive person;

5. "Advanced Practice Registered Nurse" means a licensed

Registered Nurse:

- 1 a. who has completed an advanced practice registered  
2 nursing education program in preparation for one of  
3 four recognized advanced practice registered nurse  
4 roles,
- 5 b. who has passed a national certification examination  
6 recognized by the Board that measures the advanced  
7 practice registered nurse role and specialty  
8 competencies and who maintains recertification in the  
9 role and specialty through a national certification  
10 program,
- 11 c. who has acquired advanced clinical knowledge and  
12 skills in preparation for providing both direct and  
13 indirect care to patients; however, the defining  
14 factor for all Advanced Practice Registered Nurses is  
15 that a significant component of the education and  
16 practice focuses on direct care of individuals,
- 17 d. whose practice builds on the competencies of  
18 Registered Nurses by demonstrating a greater depth and  
19 breadth of knowledge, a greater synthesis of data, and  
20 increased complexity of skills and interventions, and
- 21 e. who has obtained a license as an Advanced Practice  
22 Registered Nurse in one of the following roles:  
23 Certified Registered Nurse Anesthetist, Certified  
24

1 Nurse-Midwife, Clinical Nurse Specialist, or Certified  
2 Nurse Practitioner.

3 Only those persons who hold a license to practice advanced  
4 practice registered nursing in this state shall have the right to  
5 use the title "Advanced Practice Registered Nurse" and to use the  
6 abbreviation "APRN". Only those persons who have obtained a license  
7 in the following disciplines shall have the right to fulfill the  
8 roles and use the applicable titles: Certified Registered Nurse  
9 Anesthetist and the abbreviation "CRNA", Certified Nurse-Midwife and  
10 the abbreviation "CNM", Clinical Nurse Specialist and the  
11 abbreviation "CNS", and Certified Nurse Practitioner and the  
12 abbreviation "CNP".

13 It shall be unlawful for any person to assume the role or use  
14 the title Advanced Practice Registered Nurse or use the abbreviation  
15 "APRN" or use the respective specialty role titles and abbreviations  
16 or to use any other titles or abbreviations that would reasonably  
17 lead a person to believe the user is an Advanced Practice Registered  
18 Nurse, unless permitted by this act. Any individual doing so shall  
19 be guilty of a misdemeanor, which shall be punishable, upon  
20 conviction, by imprisonment in the county jail for not more than one  
21 (1) year or by a fine of not less than One Hundred Dollars (\$100.00)  
22 nor more than One Thousand Dollars (\$1,000.00), or by both such  
23 imprisonment and fine for each offense;

1           6. "Certified Nurse Practitioner" is an Advanced Practice  
2 Registered Nurse who performs in an expanded role in the delivery of  
3 health care:

- 4           a. consistent with advanced educational preparation as a  
5           Certified Nurse Practitioner in an area of specialty,
- 6           b. functions within the Certified Nurse Practitioner  
7           scope of practice for the selected area of  
8           specialization, and
- 9           c. is in accord with the standards for Certified Nurse  
10           Practitioners as identified by the certifying body and  
11           approved by the Board.

12           A Certified Nurse Practitioner shall be eligible, in accordance  
13 with the scope of practice of the Certified Nurse Practitioner, to  
14 obtain recognition as authorized by the Board to prescribe, as  
15 defined by the rules promulgated by the Board pursuant to this  
16 section and subject to the medical direction of a supervising  
17 physician. This authorization shall not include dispensing drugs,  
18 but shall not preclude, subject to federal regulations, the receipt  
19 of, the signing for, or the dispensing of professional samples to  
20 patients.

21           The Certified Nurse Practitioner accepts responsibility,  
22 accountability, and obligation to practice in accordance with usual  
23 and customary advanced practice registered nursing standards and  
24

1 functions as defined by the scope of practice/role definition  
2 statements for the Certified Nurse Practitioner;

3 7. a. "Clinical Nurse Specialist" is an Advanced Practice  
4 Registered Nurse who holds:

5 (1) a master's degree or higher in nursing with  
6 clinical specialization preparation to function  
7 in an expanded role,

8 (2) specialty certification from a national  
9 certifying organization recognized by the Board,

10 (3) ~~a certificate of recognition~~ an Advanced Practice  
11 Registered Nurse license from the Board, and

12 (4) any nurse holding a specialty certification as a  
13 Clinical Nurse Specialist valid on January 1,  
14 1994, granted by a national certifying  
15 organization recognized by the Board, shall be  
16 deemed to be a Clinical Nurse Specialist under  
17 the provisions of the Oklahoma Nursing Practice  
18 Act.

19 b. In the expanded role, the Clinical Nurse Specialist  
20 performs at an advanced practice level which shall  
21 include, but not be limited to:

22 (1) practicing as an expert clinician in the  
23 provision of direct nursing care to a selected  
24



1 population of patients or clients in any setting,  
2 including private practice,

3 (2) managing the care of patients or clients with  
4 complex nursing problems,

5 (3) enhancing patient or client care by integrating  
6 the competencies of clinical practice, education,  
7 consultation, and research, and

8 (4) referring patients or clients to other services.

9 c. A Clinical Nurse Specialist in accordance with the  
10 scope of practice of such Clinical Nurse Specialist  
11 shall be eligible to obtain recognition as authorized  
12 by the Board to prescribe, as defined by the rules  
13 promulgated by the Board pursuant to this section, and  
14 subject to the medical direction of a supervising  
15 physician. This authorization shall not include  
16 dispensing drugs, but shall not preclude, subject to  
17 federal regulations, the receipt of, the signing for,  
18 or the dispensing of professional samples to patients.

19 d. The Clinical Nurse Specialist accepts responsibility,  
20 accountability, and obligation to practice in  
21 accordance with usual and customary advanced practice  
22 nursing standards and functions as defined by the  
23 scope of practice/role definition statements for the  
24 Clinical Nurse Specialist;

1 8. "Nurse-Midwife" is a ~~qualified registered~~ nurse who has  
2 received a ~~certificate of recognition~~ an Advanced Practice  
3 Registered Nurse license from the Oklahoma Board of Nursing who  
4 possesses evidence of certification according to the requirements of  
5 the American College of Nurse-Midwives.

6 A Certified Nurse-Midwife in accordance with the scope of  
7 practice of such Certified Nurse-Midwife shall be eligible to obtain  
8 recognition as authorized by the Board to prescribe, as defined by  
9 the rules promulgated by the Board pursuant to this section and  
10 subject to the medical direction of a supervising physician. This  
11 authorization shall not include the dispensing of drugs, but shall  
12 not preclude, subject to federal regulations, the receipt of, the  
13 signing for, or the dispensing of professional samples to patients.

14 The Certified Nurse-Midwife accepts responsibility,  
15 accountability, and obligation to practice in accordance with usual  
16 and customary advanced practice registered nursing standards and  
17 functions as defined by the scope of practice/role definition  
18 statements for the Certified Nurse-Midwife;

19 9. "Nurse-midwifery practice" means providing management of  
20 care of normal newborns and women, antepartally, intrapartally,  
21 postpartally and gynecologically, occurring within a health care  
22 system which provides for medical consultation, medical management  
23 or referral, and is in accord with the standards for nurse-midwifery  
24 practice as defined by the American College of Nurse-Midwives;

1 10. a. "Certified Registered Nurse Anesthetist" is an  
2 Advanced Practice Registered Nurse who:

3 (1) is certified by the ~~Council on Certification of~~  
4 National Board of Certification and  
5 Recertification for Nurse Anesthetists as a  
6 Certified Registered Nurse Anesthetist within one  
7 (1) year following completion of an approved  
8 certified registered nurse anesthetist education  
9 program, and continues to maintain such  
10 recertification by the ~~Council on~~ National Board  
11 of Certification and Recertification of ~~of~~ for Nurse  
12 Anesthetists, and

13 (2) administers anesthesia under the supervision of a  
14 medical doctor, an osteopathic physician, a  
15 podiatric physician or a dentist licensed in this  
16 state and under conditions in which timely onsite  
17 consultation by such doctor, osteopath, podiatric  
18 physician or dentist is available.

19 b. A Certified Registered Nurse Anesthetist, under the  
20 supervision of a medical doctor, osteopathic  
21 physician, podiatric physician or dentist licensed in  
22 this state, and under conditions in which timely, on-  
23 site consultation by such medical doctor, osteopathic  
24 physician, podiatric physician or dentist is

1 available, shall be authorized, pursuant to rules  
2 adopted by the Oklahoma Board of Nursing, to order,  
3 select, obtain and administer legend drugs, Schedules  
4 II through V controlled substances, devices, and  
5 medical gases only when engaged in the preanesthetic  
6 preparation and evaluation; anesthesia induction,  
7 maintenance and emergence; and postanesthesia care. A  
8 Certified Registered Nurse Anesthetist may order,  
9 select, obtain and administer drugs only during the  
10 perioperative or periobstetrical period.

11 c. A Certified Registered Nurse Anesthetist who applies  
12 for authorization to order, select, obtain and  
13 administer drugs shall:

- 14 (1) be currently recognized as a Certified Registered  
15 Nurse Anesthetist in this state,
- 16 (2) provide evidence of completion, within the two-  
17 year period immediately preceding the date of  
18 application, of a minimum of fifteen (15) units  
19 of continuing education in advanced pharmacology  
20 related to the administration of anesthesia as  
21 recognized by the ~~Council on~~ National Board of  
22 Certification and Recertification of ~~for~~ for Nurse  
23 Anesthetists ~~or the Council on Certification of~~  
24 ~~Nurse Anesthetists~~, and

1 (3) complete and submit a notarized application, on a  
2 form prescribed by the Board, accompanied by the  
3 application fee established pursuant to this  
4 section.

5 d. The authority to order, select, obtain and administer  
6 drugs shall be terminated if a Certified Registered  
7 Nurse Anesthetist has:

8 (1) ordered, selected, obtained or administered drugs  
9 outside of the Certified Registered Nurse  
10 Anesthetist scope of practice or ordered,  
11 selected, obtained or administered drugs for  
12 other than therapeutic purposes, or

13 (2) violated any provision of state laws or rules or  
14 federal laws or regulations pertaining to the  
15 practice of nursing or the authority to order,  
16 select, obtain and administer drugs.

17 e. The Oklahoma Board of Nursing shall notify the Board  
18 of Pharmacy after termination of or a change in the  
19 authority to order, select, obtain and administer  
20 drugs for a Certified Registered Nurse Anesthetist.

21 f. The Board shall provide by rule for biennial  
22 application renewal and reauthorization of authority  
23 to order, select, obtain and administer drugs for  
24 Certified Registered Nurse Anesthetists. At the time

1 of application renewal, a Certified Registered Nurse  
2 Anesthetist shall submit documentation of a minimum of  
3 eight (8) units of continuing education, completed  
4 during the previous two (2) years, in advanced  
5 pharmacology relating to the administration of  
6 anesthesia, as recognized by the Council on  
7 Recertification of Nurse Anesthetists or the Council  
8 on Certification of Nurse Anesthetists.

9 g. This paragraph shall not prohibit the administration  
10 of local or topical anesthetics as now permitted by  
11 law. Provided further, nothing in this paragraph  
12 shall limit the authority of the Board of Dentistry to  
13 establish the qualifications for dentists who direct  
14 the administration of anesthesia;

15 11. "Supervising physician" means an individual holding a  
16 current license to practice as a physician from the State Board of  
17 Medical Licensure and Supervision or the State Board of Osteopathic  
18 Examiners, who supervises a Certified Nurse Practitioner, a Clinical  
19 Nurse Specialist, or a Certified Nurse-Midwife, and who is not in  
20 training as an intern, resident, or fellow. To be eligible to  
21 supervise such Advanced Practice Registered Nurse, such physician  
22 shall remain in compliance with the rules promulgated by the State  
23 Board of Medical Licensure and Supervision or the State Board of  
24 Osteopathic Examiners;

1           12. "Supervision of an Advanced Practice Registered Nurse with  
2 prescriptive authority" means overseeing and accepting  
3 responsibility for the ordering and transmission by a Certified  
4 Nurse Practitioner, a Clinical Nurse Specialist, or a Certified  
5 Nurse-Midwife of written, telephonic, electronic or oral  
6 prescriptions for drugs and other medical supplies, subject to a  
7 defined formulary; and

8           13. "Advanced Unlicensed Assistant" means any person who has  
9 successfully completed a certified training program approved by the  
10 Board that trains the Advanced Unlicensed Assistant to perform  
11 specified technical skills identified by the Board in acute care  
12 settings under the direction and supervision of the Registered Nurse  
13 or Licensed Practical Nurse.

14           SECTION 2.        AMENDATORY        59 O.S. 2011, Section 567.4a, is  
15 amended to read as follows:

16           Section 576.4a The rules regarding prescriptive authority  
17 recognition promulgated by the Oklahoma Board of Nursing pursuant to  
18 paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title  
19 shall:

20           1. Define the procedure for documenting supervision by a  
21 physician licensed in Oklahoma to practice by the State Board of  
22 Medical Licensure and Supervision or the State Board of Osteopathic  
23 Examiners. Such procedure shall include a written statement that  
24 defines appropriate referral, consultation, and collaboration

1 between the ~~advanced practice nurse~~ Advanced Practice Registered  
2 Nurse, recognized to prescribe as defined in paragraphs 6 through 9,  
3 11 and 12 of Section 567.3a of this title, and the supervising  
4 physician. The written statement shall include a method of assuring  
5 availability of the supervising physician through direct contact,  
6 telecommunications or other appropriate electronic means for  
7 consultation, assistance with medical emergencies, or patient  
8 referral. The written statement shall be part of the initial  
9 application and the renewal application submitted to the Board for  
10 recognition for prescriptive authority for the ~~advanced practice~~  
11 ~~nurse~~ Advanced Practice Registered Nurse. Changes to the written  
12 statement shall be filed with the Board within thirty (30) days of  
13 the change and shall be effective on filing;

14 2. Define minimal requirements for initial application for  
15 prescriptive authority which shall include, but not be limited to,  
16 evidence of completion of a minimum of forty-five (45) contact hours  
17 or three (3) academic credit hours of education in  
18 pharmacotherapeutics, clinical application, and use of  
19 pharmacological agents in the prevention of illness, and in the  
20 restoration and maintenance of health in a program beyond basic  
21 registered nurse preparation, approved by the Board. Such contact  
22 hours or academic credits shall be obtained within a time period of  
23 three (3) years immediately preceding the date of application for  
24 prescriptive authority;



1 3. Define minimal requirements for application for renewal of  
2 prescriptive authority which shall include, but not be limited to,  
3 documentation of a minimum of fifteen (15) contact hours or one (1)  
4 academic credit hour of education in pharmacotherapeutics, clinical  
5 application, and use of pharmacological agents in the prevention of  
6 illness, and in the restoration and maintenance of health in a  
7 program beyond basic registered nurse preparation, approved by the  
8 Board, within the two-year period immediately preceding the  
9 effective date of application for renewal of prescriptive authority;

10 4. Require that beginning July 1, 2002, an ~~advanced practice~~  
11 ~~nurse~~ Advanced Practice Registered Nurse shall demonstrate  
12 successful completion of a master's degree in a clinical nurse  
13 specialty in order to be eligible for initial application for  
14 prescriptive authority under the provisions of this act;

15 5. Define the method for communicating authority to prescribe  
16 or termination of same, and the formulary to the Board of Pharmacy,  
17 all pharmacies, and all registered pharmacists;

18 6. Define terminology used in such rules;

19 7. Define the parameters for the prescribing practices of the  
20 ~~advanced practice nurse~~ Advanced Practice Registered Nurse;

21 8. Define the methods for termination of prescriptive authority  
22 for ~~advanced practice nurses~~ the Advanced Practice Registered Nurse;  
23 and  
24

1           9.    a.    Establish a Formulary Advisory Council that shall  
2                    develop and submit to the Board recommendations for an  
3                    exclusionary formulary that shall list drugs or  
4                    categories of drugs that shall not be prescribed by  
5                    ~~advanced practice nurses~~ Advanced Practice Registered  
6                    Nurse recognized to prescribe by the Oklahoma Board of  
7                    Nursing. The Formulary Advisory Council shall also  
8                    develop and submit to the Board recommendations for  
9                    practice-specific prescriptive standards for each  
10                   category of ~~advanced practice nurse~~ Advanced Practice  
11                   Registered Nurse recognized to prescribe by the  
12                   Oklahoma Board of Nursing pursuant to the provisions  
13                   of the Oklahoma Nursing Practice Act. The Board shall  
14                   either accept or reject the recommendations made by  
15                   the Council. No amendments to the recommended  
16                   exclusionary formulary may be made by the Board  
17                   without the approval of the Formulary Advisory  
18                   Council.

19            b.    The Formulary Advisory Council shall be composed of  
20                    twelve (12) members as follows:

21                   (1) four members, to include a pediatrician, an  
22                            obstetrician-gynecological physician, a general  
23                            internist, and a family practice physician;  
24                            provided that three of such members shall be

1 appointed by the Oklahoma State Medical  
2 Association, and one shall be appointed by the  
3 Oklahoma Osteopathic Association,

4 (2) four members who are registered pharmacists,  
5 appointed by the Oklahoma Pharmaceutical  
6 Association, and

7 (3) four members, one of whom shall be ~~an advanced~~  
8 ~~registered nurse practitioner~~ Certified Nurse  
9 Practitioner, one of whom shall be a ~~clinical~~  
10 ~~nurse specialist~~ Clinical Nurse Specialist, one  
11 of whom shall be a ~~certified nurse midwife~~  
12 Certified Nurse-Midwife, and one of whom shall be  
13 a current member of the Oklahoma Board of  
14 Nursing, all of whom shall be appointed by the  
15 Oklahoma Board of Nursing.

16 c. All professional members of the Formulary Advisory  
17 Council shall be in active clinical practice, at least  
18 fifty percent (50%) of the time, within their defined  
19 area of specialty. The members of the Formulary  
20 Advisory Council shall serve at the pleasure of the  
21 appointing authority for a term of three (3) years.  
22 The terms of the members shall be staggered. Members  
23 of the Council may serve beyond the expiration of  
24 their term of office until a successor is appointed by

1 the original appointing authority. A vacancy on the  
2 Council shall be filled for the balance of the  
3 unexpired term by the original appointing authority.

4 d. Members of the Council shall elect a chair and a vice-  
5 chair from among the membership of the Council. For  
6 the transaction of business, at least seven members,  
7 with a minimum of two members present from each of the  
8 identified categories of physicians, pharmacists and  
9 advanced practice registered nurses, shall constitute  
10 a quorum. The Council shall recommend and the Board  
11 shall approve and implement an initial exclusionary  
12 formulary on or before January 1, 1997. The Council  
13 and the Board shall annually review the approved  
14 exclusionary formulary and shall make any necessary  
15 revisions utilizing the same procedures used to  
16 develop the initial exclusionary formulary.

17 SECTION 3. AMENDATORY 59 O.S. 2011, Section 567.8, as  
18 last amended by Section 2, Chapter 190, O.S.L. 2016 (59 O.S. Supp.  
19 2016, Section 567.8), is amended to read as follows:

20 Section 576.8 A. The Oklahoma Board of Nursing shall have the  
21 power to take any or all of the following actions:

22 1. To deny, revoke or suspend any:

23 a. licensure to practice as a Licensed Practical Nurse,  
24 single-state or multistate,

- b. licensure to practice as a Registered Nurse, single-state or multistate,
- c. multistate privilege to practice in Oklahoma,
- d. licensure to practice as an Advanced Practice Registered Nurse,
- e. certification to practice as an Advanced Unlicensed Assistant,
- f. authorization for prescriptive authority, or
- g. authority to order, select, obtain and administer drugs;

2. To assess administrative penalties; and

3. To otherwise discipline applicants, licensees or Advanced Unlicensed Assistants.

B. The Board shall impose a disciplinary action against the person pursuant to the provisions of subsection A of this section upon proof that the person:

1. Is guilty of deceit or material misrepresentation in procuring or attempting to procure:

- a. a license to practice registered nursing, licensed practical nursing, and/or recognition a license to practice advanced practice registered nursing with or without either prescriptive authority recognition or authorization to order, select, obtain and administer drugs, or

1           b.     certification as an Advanced Unlicensed Assistant;

2           2.     Is guilty of a felony, or any offense reasonably related to  
3 the qualifications, functions or duties of any licensee or Advanced  
4 Unlicensed Assistant, or any offense an essential element of which  
5 is fraud, dishonesty, or an act of violence, or for any offense  
6 involving moral turpitude, whether or not sentence is imposed, or  
7 any conduct resulting in the revocation of a deferred or suspended  
8 sentence or probation imposed pursuant to such conviction;

9           3.     Fails to adequately care for patients or to conform to the  
10 minimum standards of acceptable nursing or Advanced Unlicensed  
11 Assistant practice that, in the opinion of the Board, unnecessarily  
12 exposes a patient or other person to risk of harm;

13           4.     Is intemperate in the use of alcohol or drugs, which use the  
14 Board determines endangers or could endanger patients;

15           5.     Exhibits through a pattern of practice or other behavior  
16 actual or potential inability to practice nursing with sufficient  
17 knowledge or reasonable skills and safety due to impairment caused  
18 by illness, use of alcohol, drugs, chemicals or any other substance,  
19 or as a result of any mental or physical condition, including  
20 deterioration through the aging process or loss of motor skills,  
21 mental illness, or disability that results in inability to practice  
22 with reasonable judgment, skill or safety; provided, however, the  
23 provisions of this paragraph shall not be utilized in a manner that  
24

1 conflicts with the provisions of the Americans with Disabilities  
2 Act;

3 6. Has been adjudicated as mentally incompetent, mentally ill,  
4 chemically dependent or dangerous to the public or has been  
5 committed by a court of competent jurisdiction, within or without  
6 this state;

7 7. Is guilty of unprofessional conduct as defined in the rules  
8 of the Board;

9 8. Is guilty of any act that jeopardizes a patient's life,  
10 health or safety as defined in the rules of the Board;

11 9. Violated a rule promulgated by the Board, an order of the  
12 Board, or a state or federal law relating to the practice of  
13 registered, practical or advanced practice registered nursing or  
14 advanced unlicensed assisting, or a state or federal narcotics or  
15 controlled dangerous substance law;

16 10. Has had disciplinary actions taken against the individual's  
17 registered or practical nursing license, advanced unlicensed  
18 assistive certification, or any professional or occupational  
19 license, registration or certification in this or any state,  
20 territory or country;

21 11. Has defaulted and/or been terminated from the peer  
22 assistance program for any reason;

23 12. Fails to maintain professional boundaries with patients, as  
24 defined in the Board rules; and/or

1 13. Engages in sexual misconduct, as defined in Board rules,  
2 with a current or former patient or key party, inside or outside the  
3 health care setting.

4 C. Any person who supplies the Board information in good faith  
5 shall not be liable in any way for damages with respect to giving  
6 such information.

7 D. The Board may cause to be investigated all reported  
8 violations of the Oklahoma Nursing Practice Act.

9 E. The Board may authorize the ~~executive director~~ Executive  
10 Director to issue a confidential letter of concern to a licensee  
11 when evidence does not warrant formal proceedings, but the Executive  
12 Director has noted indications of possible errant conduct that could  
13 lead to serious consequences and formal action.

14 F. All individual proceedings before the Board shall be  
15 conducted in accordance with the Administrative Procedures Act.

16 G. At a hearing the accused shall have the right to appear  
17 either personally or by counsel, or both, to produce witnesses and  
18 evidence on behalf of the accused, to cross-examine witnesses and to  
19 have subpoenas issued by the designated Board staff. If the accused  
20 is found guilty of the charges the Board may refuse to issue a  
21 renewal of license to the applicant, revoke or suspend a license, or  
22 otherwise discipline a licensee.



1 H. A person whose license is revoked may not apply for  
2 reinstatement during the time period set by the Board. The Board on  
3 its own motion may at any time reconsider its action.

4 I. Any person whose license is revoked or who applies for  
5 renewal of registration and who is rejected by the Board shall have  
6 the right to appeal from such action pursuant to the Administrative  
7 Procedures Act.

8 J. 1. Any person who has been determined by the Board to have  
9 violated any provisions of the Oklahoma Nursing Practice Act or any  
10 rule or order issued pursuant thereto shall be liable for an  
11 administrative penalty not to exceed Five Hundred Dollars (\$500.00)  
12 for each count for which any holder of a certificate or license has  
13 been determined to be in violation of the Oklahoma Nursing Practice  
14 Act or any rule promulgated or order issued pursuant thereto.

15 2. The amount of the penalty shall be assessed by the Board  
16 pursuant to the provisions of this section, after notice and an  
17 opportunity for hearing is given to the accused. In determining the  
18 amount of the penalty, the Board shall include, but not be limited  
19 to, consideration of the nature, circumstances, and gravity of the  
20 violation and, with respect to the person found to have committed  
21 the violation, the degree of culpability, the effect on ability of  
22 the person to continue to practice, and any show of good faith in  
23 attempting to achieve compliance with the provisions of the Oklahoma  
24 Nursing Practice Act.

1 K. The Board shall retain jurisdiction over any person issued a  
2 license, certificate or temporary license pursuant to this act,  
3 regardless of whether the license, certificate or temporary license  
4 has expired, lapsed or been relinquished during or after the alleged  
5 occurrence or conduct prescribed by this act.

6 L. In the event disciplinary action is imposed, any person so  
7 disciplined shall be responsible for any and all costs associated  
8 with satisfaction of the discipline imposed.

9 M. In the event disciplinary action is imposed in an  
10 administrative proceeding, the Board shall have the authority to  
11 recover the monies expended by the Board in pursuing any  
12 disciplinary action, including but not limited to costs of  
13 investigation, probation or monitoring fees, administrative costs,  
14 witness fees, attorney fees and court costs. This authority shall  
15 be in addition to the Board's authority to impose discipline as set  
16 out in subsection A of this section.

17 N. The Executive Director shall immediately suspend the license  
18 of any person upon proof that the person has been sentenced to a  
19 period of continuous incarceration serving a penal sentence for  
20 commission of a misdemeanor or felony. The suspension shall remain  
21 in effect until the Board acts upon the licensee's written  
22 application for reinstatement of the license.

23 O. When a majority of the officers of the Board, which  
24 constitutes the President, Vice-President and Secretary/Treasurer,

1 find that preservation of the public health, safety or welfare  
2 requires immediate action, summary suspension of licensure or  
3 certification may be ordered before the filing of a sworn complaint  
4 or at any other time before the outcome of an individual proceeding.  
5 Within seven (7) days after the summary suspension, the licensee  
6 shall be notified by letter that summary suspension has occurred.  
7 The summary suspension letter shall include notice of the date of  
8 the proposed hearing to be held in accordance with Oklahoma  
9 Administrative Code 485:10-11-2 and the Administrative Procedures  
10 Act, and shall be signed by one of the Board officers.

11 SECTION 4. AMENDATORY 59 O.S. 2011, Section 567.17, as  
12 amended by Section 4, Chapter 190, O.S.L. 2016 (59 O.S. Supp. 2016,  
13 Section 567.17), is amended to read as follows:

14 Section 576.17 A. There is hereby established a peer  
15 assistance program to rehabilitate nurses whose competency may be  
16 compromised because of the abuse of drugs or alcohol, so that such  
17 nurses can be treated and can return to or continue the practice of  
18 nursing in a manner which will benefit the public. The program  
19 shall be under the supervision and control of the Oklahoma Board of  
20 Nursing.

21 B. The Board shall appoint one or more peer assistance  
22 evaluation advisory committees hereinafter called the "peer  
23 assistance committees". Each of these committees shall be composed  
24 of members, the majority of which shall be licensed nurses with

1 expertise in chemical dependency. The peer assistance committees  
2 shall function under the authority of the Oklahoma Board of Nursing  
3 in accordance with the rules of the Board. The committee members  
4 shall serve without pay, but may be reimbursed for the expenses  
5 incurred in the discharge of their official duties in accordance  
6 with the State Travel Reimbursement Act.

7 C. The Board shall appoint and employ a qualified person, who  
8 shall be a registered nurse, to serve as program coordinator and  
9 shall fix such person's compensation. The Board shall define the  
10 duties of the program coordinator who shall report directly to the  
11 Executive Director of the Board and be subject to the Executive  
12 Director's direction and control.

13 D. The Board is authorized to adopt and revise rules, not  
14 inconsistent with the Oklahoma Nursing Practice Act, as may be  
15 necessary to enable it to carry into effect the provisions of this  
16 section.

17 E. A portion of licensing fees for each nurse not to exceed Ten  
18 Dollars (\$10.00) may be used to implement and maintain the peer  
19 assistance program.

20 F. Records of the nurse enrolled in the peer assistance program  
21 shall be maintained in the program office in a place separate and  
22 apart from the Board's records. The records shall be made public  
23 only by subpoena and court order; provided, however, confidential  
24

1 treatment shall be canceled upon default by the nurse in complying  
2 with the requirements of the program.

3 G. Any person making a report to the Board or to a peer  
4 assistance committee regarding a nurse suspected of practicing  
5 nursing while habitually intemperate or addicted to the use of  
6 habit-forming drugs, or a nurse's progress or lack of progress in  
7 rehabilitation, shall be immune from any civil or criminal action  
8 resulting from such reports, provided such reports are made in good  
9 faith.

10 H. A nurse's participation in the peer assistance program in no  
11 way precludes additional proceedings by the Board for acts or  
12 omissions of acts not specifically related to the circumstances  
13 resulting in the nurse's entry into the program. However, in the  
14 event the nurse defaults from the program, the Board may discipline  
15 the nurse for those acts which led to the nurse entering the  
16 program.

17 I. The Executive Director of the Board shall suspend the  
18 license of a licensee who applied and entered the peer assistance  
19 program by choice without any order by the Board immediately upon  
20 notification that the licensee has defaulted from the peer  
21 assistance program, and shall assign a hearing date for the matter  
22 to be presented to the Board. A licensee who was directed to apply  
23 and enter the peer assistance program by an order of the Board and  
24 who does not enter or who defaults from the peer assistance program

1 for any reason shall be disciplined as set forth in the order of the  
2 Board that directed the nurse to apply and enter the peer assistance  
3 program.

4 J. Any person who enters the peer assistance program  
5 voluntarily or otherwise shall be responsible for any and all costs  
6 associated with participation in the peer assistance program.

7 K. A nurse may apply to participate in the peer assistance  
8 program by choice or may be directed to apply to the program by an  
9 order of the Board. In either case, conditions shall be placed on  
10 the nurse's license to practice nursing during the period of  
11 participation in the peer assistance program.

12 L. ~~As used in this section~~ With regards to the peer assistance  
13 program, unless the context otherwise requires:

14 1. "Board" means the Oklahoma Board of Nursing; ~~and~~

15 2. "Peer assistance committee" means the peer assistance  
16 evaluation advisory committee created in this section, which is  
17 appointed by the Oklahoma Board of Nursing to carry out specified  
18 duties; and

19 3. "Default" means the licensee has failed to comply with the  
20 contract and/or amended contracts and/or treatment plans, as  
21 determined by the peer assistance committee, and/or has been  
22 terminated from the peer assistance program as defined in Board  
23 rules.

24

1 SECTION 5. AMENDATORY Section 9, Chapter 190, O.S.L.  
2 2016 (59 O.S. Supp. 2016, Section 567.25), is amended to read as  
3 follows:

4 Section 567.25 A. In reporting information to the coordinated  
5 licensure information system under Article 6 of the Nurse Licensure  
6 Compact, the Oklahoma Board of Nursing may disclose information that  
7 identifies a person, including Social Security number and date of  
8 birth.

9 B. The coordinated licensure information system may not share  
10 ~~information that identifies a person~~ Social Security numbers and  
11 dates of birth with a state not a party to the Compact ~~unless the~~  
12 ~~state agrees not to disclose that information to other persons.~~

13 SECTION 6. This act shall become effective November 1, 2017.

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