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MEMORANDUM

TO: Jeffrey Prather, General Counsel, Board of Nursing

FROM: Emily Caudill, Regulations Compiler

RE: Proposed Amendment or New Regulation – 201 KAR 020:215

DATE: January 2, 2025

A copy of the administrative regulation listed above is enclosed for your files. This regulation is **tentatively** scheduled for review by the Administrative Regulation Review Subcommittee at its **APRIL 2025** meeting. We will notify you of the date and time of this meeting once it has been scheduled.

Pursuant to KRS 13A.280, **if** comments are received during the public comment period, a Statement of Consideration or a one-month extension request for this regulation is due **by noon on April 15, 2025**. Please reference KRS 13A.270 and 13A.280 for other requirements relating to the public hearing and public comment period and Statements of Consideration.

If you have questions, please contact us at RegsCompiler@LRC.ky.gov or (502) 564-8100.

Enclosures

GENERAL GOVERNMENT CABINET

Board of Nursing

(Amendment)

201 KAR 20:215. Continuing competency requirements.

RELATES TO: KRS 194A.540, 218A.205(3)(i), 314.011(12), 314.042(11), 314.073,
314.991(1)-(3), 620.020(8)

STATUTORY AUTHORITY: KRS 218A.205(3)(i), 314.073, 314.131(1), (2)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131(1), (2), and 314.073 require the
Board of Nursing to promulgate administrative regulations to establish continuing competency
requirements for nurses. This administrative regulation establishes the fees, procedures, and
requirements for continuing competency for nurses.

Section 1. Definitions. (1) "Contact hour" means fifty (50) minutes of an approved, organized
learning experience.

(2) "Earning period" means November 1 through October 31 of a current licensure period.

(3) "Preceptor" means a nurse with demonstrated competence in a specific clinical area who
serves as a role model and mentor to assist in the development and validation of the
competencies of a nursing student or new employee.

Section 2. (1) A licensee shall choose a method from Section 3 of this administrative
regulation to validate his or her continued competency in nursing for each earning period.

(2) A licensee shall maintain the documentation of the method chosen.

(3) A licensee shall provide the documentation if directed by the board.

Section 3. Methods for continued competency validation as established in subsection (1) through (4) of this section shall be:

(1) Fourteen (14) contact hours of continuing education, which shall:

(a) Be from a provider approved by the board pursuant to 201 KAR 20:220;

(b) Be completed during the earning period; and

(c) Include the continuing education required by Section 5 of this administrative regulation;

(2) Current national certification or recertification and the continuing education required by Section 5 of this administrative regulation. The certification shall be related to the nurse's practice role and shall:

(a) Have been initially attained during the earning period;

(b) If issued for a period of time as evidenced by an expiration date, have been in effect during the entire earning period; or

(c) Have been recertified during the earning period;

(3) The continuing education required by Section 5 of this administrative regulation and at least one (1) of the following during the earning period:

(a) Completion of a research project that is nursing-related:

1. As principal investigator, coinvestigator, or project director;

2. That is qualitative or quantitative in nature;

3. That utilizes a research methodology;

4. That increases knowledge, causes an improved outcome, or changes behavior; and

5. That is evidenced by an abstract of the project, which includes a summary of the findings;

1 (b) Publication of an article in a peer-reviewed health-related journal; or

2 (c) Participation as a preceptor for at least one (1) nursing student or new employee:

3 1. That has a preceptorship that shall be for at least 120 hours;

4 2. Requires a one (1) to one (1) relationship between the preceptor and the student or
5 employee;

6 3. Authorizes the preceptor to train more than one (1) student or employee and to combine
7 the hours to total 120 hours; and

8 4. Includes that the preceptorship shall be evidenced by submission of the Preceptor
9 Continuing Education Verification Form completed by the educational institution or preceptor's
10 supervisor; or

11 (4)(a) Seven (7) hours of continuing education from a provider approved by the board
12 pursuant to 201 KAR 20:220 and earned during the licensure period, which shall include the
13 continuing education required by Section 5 of this administrative regulation if applicable; and

14 (b) A nursing employment evaluation that is satisfactory for continued employment.

15 1. The nurse shall submit the Nursing Continuing Education Employment Evaluation Form,
16 completed and signed by the nurse's supervisor or employer, which shall cover a period of at
17 least six (6) months during the earning period; or

18 2. The board may accept from the employer a standard employee evaluation, which covers a
19 period of at least six (6) months during the earning period.

20 (5) Contact hours of continuing education earned for the methods of continued competency
21 validation as established in subsection (1) or (4) of this section may be earned by:

22 (a) 1. A nursing continuing education presentation that is:

- a. Designed and developed by the presenter;
- b. Presented to nurses or other health professionals;
- c. Evidenced by a program brochure, course syllabi, or a letter from the offering provider identifying the licensee's participation as the presenter of the offering; and
- d. Offered by a provider approved pursuant to 201 KAR 20:220.

2. The number of contact hours that may be earned shall be twice the number of contact hours offered to an attendee of the presentation; or

(b) Successful completion of a postlicensure academic course at a college, university, or postsecondary vocational institution if relevant to nursing practice as determined by this subsection.

1. Contact hours shall be calculated as follows:

a. One (1) semester or trimester hour of academic credit shall equal fifteen (15) contact hours; or

b. One (1) quarter hour of academic credit shall equal twelve (12) contact hours.

2. The following courses shall be relevant to nursing practice:

a. A nursing course, designated by a nursing course number, and beyond the prelicensure curriculum of the individual licensee; or

b. An academic course that is applicable to the nurse's role and beyond the prelicensure curriculum of the individual licensee.

3. A licensee may request course review for approval of applicable nursing content pursuant to Section 7 of this administrative regulation.

1 4. If it is an academic course in which grades are given, the licensee shall achieve a grade of
2 "C" or better, or a pass on a pass-fail grading system.

3 Section 4. (1) A licensee shall provide documentation of the method used to validate
4 continued competency if the licensee is the subject of a disciplinary complaint.

5 (2) A licensee shall provide documentation of the method used to validate continued
6 competency if requested by the board pursuant to a random audit of licensees.

7 Section 5. (1)(a) An Advanced Practice Registered Nurse (APRN) shall earn a minimum of five
8 (5) contact hours in pharmacology, as required by KRS 314.073(9).

9 (b) An APRN who is registered with the DEA and has a PDMP account, as defined by 201 KAR
10 20:057, Section 1(7), shall earn a minimum of five (5) contact hours in pharmacology, including
11 at least three (3) contact hours on either pain management or addiction disorders.

12 (c) To qualify as pharmacology pursuant to KRS 314.073, content shall include drug specific
13 information, safe prescribing practices, safe medication administration, prescribing
14 methodologies, new administrative regulations, or similar topics.

15 (d) Objectives for the contact hours related to pharmacology shall be identified. Casual
16 mention of medications or medical treatments shall not qualify.

17 (2) After June 27, 2023, and before the APRN's next scheduled DEA registration, an APRN
18 who has a DEA registration shall earn a minimum of eight (8) hours on the subject of treating
19 and managing patients with opioid or other substance use disorders, including the appropriate
20 clinical use of all drugs approved by the Food and Drug Administration for the treatment of a
21 substance use disorder.

(3) The following APRNs shall be deemed to have satisfied the earning requirement in subsection (2) of this section:

(a) 1. Those who graduated from an advanced practice nursing school within five (5) years prior to June 27, 2023, and have successfully completed a comprehensive curriculum that included at least eight (8) hours of training on the subject of treating and managing patients with opioid or other substance use disorders, including the appropriate clinical use of all drugs approved by the Food and Drug Administration for the treatment of a substance use disorder; or

2. a. Those who have satisfied this training by earning a minimum of eight (8) hours of training on treatment and management of patients with opioid or other substance use disorders.

b. Past trainings on the treatment and management of patients with opioid or other substance use disorders may count towards an APRN meeting this requirement, including past DATA-Waiver trainings.

(b) In addition to continuing education providers approved by the board pursuant to 201 KAR 20:220, groups approved by the DEA or the Substance Abuse and Mental Health Services Administration (SAMHSA) may provide trainings that satisfy the earning requirement of subsection (2) of this section.

(4) Sexual assault nurse examiners shall earn the continuing education required by 201 KAR 20:411, Section 8.

(5) Nurses shall earn, the following one (1) time continuing education requirements, subject to the applicable timeframes established in subsection (8) of this section;

(a) A minimum of one and one-half (1.5) contact hours in pediatric abusive head trauma as required by KRS 314.073(6);

(b) A minimum of three (3) contact hours on domestic violence and elder abuse, neglect, and exploitation as required by KRS 194A.540(9)(d);

(c) A minimum of one (1) contact hour on Alzheimer's disease and other forms of dementia as required by KRS 314.073(7); and

(d) A minimum of two (2) contact hours on the subject of suicide prevention, which shall consist of one (1) contact hour on suicide prevention generally, and one (1) contact hour that addresses:

1. Chronic toxic stress and secondary traumatic stress potentially increasing the incidence of suicide amongst nurses;

2. A confidential and standardized pathway to care for nurses that addresses screening, assessing, safety planning, referrals, and follow-up for nurses at risk for suicide;

3. Systems of care, evidence-informed approaches, and best practices to reduce suicide rates; and

4. Ethical legal considerations of caring for patients and nurses who are suicidal.

(6) Nurses who have satisfied each of the continuing education requirements in subsection (5) of this section on or before July 15, 2024, shall not be required to complete them again.

(7) Registered nurses, licensed practical nurses, and advanced practice registered nurses who hold an active nursing license on July 15, 2024, shall satisfy the continuing competency requirement in subsection (5)(c) of this section on or before October 31, 2027.

(8) The following licensees shall satisfy the continuing competency requirement in subsection (5) of this section within three (3) years of licensure:

(a) Registered nurses and licensed practical nurses who graduated from a Kentucky program of nursing that did not include the curriculum additions in 201 KAR 20:320, Section 6, and obtain licensure by examination or reinstatement after July 15, 2024;

(b) Advanced practice registered nurses who hold a privilege to practice as a registered nurse and obtain initial licensure after July 15, 2024; and

(c) Registered nurses and licensed practical nurses who have graduated from an out-of-state program of nursing and obtain licensure through examination, endorsement, or reinstatement after July 15, 2024.

(9) Medicinal cannabis practitioners and medicinal cannabis practitioner applicants shall earn the continuing education required by 201 KAR 20:067, Section 6.

Section 6. (1) (a) A licensee shall maintain records to substantiate methods used to validate competency.

(b) All records shall be retained for at least five (5) years following the current licensure period.

(2)(a) A licensee shall, upon request, furnish to the board or its staff, legible copies of the records required to be maintained by subsection (1) of this section, in electronic format to ~~(CE Broker,~~ the continuing education tracking system utilized by the board, via the nurse portal at https://[~~cebroker.com~~] kbn.ky.gov.

(b) Copies shall be furnished within twenty (20) days of the date a written request is sent to the last known email address of the licensee or applicant.

(c) Failure to furnish records as required by this administrative regulation shall be cause for the issuance of a complaint pursuant to 201 KAR 20:161 for failure to comply with KRS 314.073(2).

(3)(a) Except as provided by paragraph (b) of this subsection, if a licensee has failed to comply with the continuing competency requirements, the licensee shall be allowed to rectify the noncompliance if he or she:

1. Meets the continuing competency requirements within ten (10) business days of notification of noncompliance; and

2. Enters a consent decree with the board pursuant to 201 KAR 20:161, Section 2(5), within ten (10) days of notification by the board.

(b) The board shall issue a complaint pursuant to 201 KAR 20:161 if:

1. A licensee fails to furnish records as requested pursuant to subsection (2) of this section; or

2. There is evidence of fraud or deceit in procuring or attempting to procure a license to practice nursing.

(4) A licensee who attends continuing education activities, whether as a presenter, participant, or student, shall attend the entire offering to be eligible to receive the number of contact hours for which the activity has been approved.

(5) It shall be the responsibility of each licensee to select and participate in those continuing education activities that will meet the criteria for acceptable continuing education.

(6) A licensee shall not repeat the same continuing education offering within a licensure period. The board shall determine whether a continued education offering is the same offering

1 based upon the certificate of attendance from the offering that includes items such as the
2 activity number, date, topic, and presenter.

3 Section 7. (1) A licensee may request an individual review of a nonapproved continuing
4 education activity completed during the earning period if, within thirty (30) days after the
5 expiration of the immediate past licensure period, the licensee has:

6 (a) Requested the review by submitting an Application for Individual Review; and

7 (b) Paid a fee of ten (10) dollars.

8 (2) The review shall be based on generally accepted standards of adult education and shall
9 be applicable to the nurse's role.

10 (3) Approval of a nonapproved continuing education activity shall:

11 (a) Qualify it as having been obtained from an approved provider for the licensee requesting
12 the review; and

13 (b) Be limited to the particular offering upon which the request for individual review is based.

14 (4) The board may offer continuing education hours for programs sponsored by the board.
15 These continuing education hours shall be found to have been obtained from an approved
16 provider. The board shall comply with all applicable provider standards.

17 Section 8. Incorporation by Reference. (1) The following material is incorporated by
18 reference:

19 (a) "Application for Individual Review", 9/2023;

20 (b) "Nursing Continuing Education Employment Evaluation Form", 9/2023; and

21 (c) "Preceptor Continuing Education Verification Form", 9/2023.

1 (2) This material may be inspected, copied, or obtained, subject to applicable copyright law,
2 at the Kentucky Board of Nursing, 312 Whittington Parkway, Suite 300, Louisville, Kentucky
3 40222-5172, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the
4 board's Web site at <https://kbn.ky.gov/document-library/Pages/default.aspx>.

Amended Administrative Regulation

201 KAR 20:215. Continuing competency requirements.

Adopted: December 19, 2024

Audria Denker, DNP, RN, FAAN

Audria Denker, President
Kentucky Board of Nursing

December 19, 2024
Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held on March 24, 2025, at 10:00 AM at Kentucky Board of Nursing, 312 Whittington Parkway, Ste 300, Louisville, KY 40222. Individuals interested in being heard at this hearing shall notify this agency in writing by March 17, 2025, five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through March 31, 2025. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON:

Jeffrey R. Prather, General Counsel
Kentucky Board of Nursing
312 Whittington Parkway, Suite 300
Louisville, KY 40222
(502) 338-2851
Jeffrey.Prather@ky.gov

Or submit a comment at:

<https://secure.kentucky.gov/formservices/Nursing/PendReg>

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

201 KAR 20:215

Contact Person: Jeffrey Prather

Phone: (502) 338-2851

Email: Jeffrey.prather@ky.gov

(1) Provide a brief summary of:

(a) What this administrative regulation does: Establishes Continuing Education (CE) requirements for nurses, as required by KRS 314.073 and 314.131.

(b) The necessity of this administrative regulation: CEs are mandated by KRS 314.073 and 314.131.

(c) How this administrative regulation conforms to the content of the authorizing statutes:

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: By setting CEs for required training on subjects to maintain competency and the audit requirements.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: The amendment removes requirement that licensees who are audited use a private third-party entity to house certifications to provide proof of continuing education compliance.

(b) The necessity of the amendment to this administrative regulation: The board the capability to bring this storage function in-house in its licensee management system Optimal Regulatory Board System (ORBS), without relying upon an outside additional private vendor.

(c) How the amendment conforms to the content of the authorizing statutes: By clarifying CE audit requirements in accordance with KRS 314.073 and 314.131.

(d) How the amendment will assist in the effective administration of the statutes: By bringing the CE audit process in-house, which will facilitate the CE audit process management and streamline its administration.

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: All nurses licensed by the Board, approximately 100,000.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: If audited, nurses will need to provide evidence of meeting CE requirements via the board's nurse portal.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): There is no additional cost to the licensees. The service will be provided as part of existing fees.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3): Compliance with statutes and regulations and continued competency will be housed by the board, in one location, along with other licensee information.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially: There is no additional cost.

(b) On a continuing basis: There is no additional cost.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Agency funds.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment:

(8) State whether or not this administrative regulation established any fees or directly or indirectly increased any fees: It does not establish or increase fees.

(9) TIERING: Is tiering applied? Tiering is not applicable.

FISCAL IMPACT STATEMENT

201 KAR 20:215

Contact Person: Jeffrey Prather

Phone: (502) 338-2851

Email: Jeffrey.prather@ky.gov

(1) Identify each state statute, federal statute, or federal regulation that requires or authorizes the action taken by the administrative regulation. Kentucky Revised Statutes 314.073, 314.131(1), (2).

(2) Identify the promulgating agency and any other affected state units, parts, or divisions: The Kentucky Board of Nursing.

(a) Estimate the following for the first year:

Expenditures: No expenditures to estimate.

Revenues: No revenues to estimate.

Cost Savings: No cost savings.

(b) How will expenditures, revenues, or cost savings differ in subsequent years?

(3) Identify affected local entities (for example: cities, counties, fire departments, school districts):

(a) Estimate the following for the first year:

Expenditures: No expenditures to estimate.

Revenues: No revenues to estimate.

Cost Savings: No cost savings.

(b) How will expenditures, revenues, or cost savings differ in subsequent years?

(4) Identify additional regulated entities not listed in questions (2) or (3):

(a) Estimate the following for the first year:

Expenditures: N/A

Revenues: N/A

Cost Savings: N/A

(b) How will expenditures, revenues, or cost savings differ in subsequent years? There will be no difference to expenditures, revenues, or cost savings. N/A

(5) Provide a narrative to explain the:

(a) Fiscal impact of this administrative regulation: None.

(b) Methodology and resources used to determine the fiscal impact: None.

(6) Explain:

(a) Whether this administrative regulation will have an overall negative or adverse major economic impact to the entities identified in questions (2) - (4). (\$500,000 or more, in aggregate) This administrative regulation will not have a major economic impact.

(b) The methodology and resources used to reach this conclusion: None. There will be no additional cost to the licensee, or the entities identified in state units, local entities, or regulated entities discussed in (2) – (4).