

GUAM BOARD OF NURSE EXAMINERS

ADMINISTRATIVE RULES AND REGULATIONS

25 GAR Ch. 6

HEALTH PROFESSIONAL LICENSING OFFICE
DEPARTMENT OF PUBLIC HEALTH & SOCIAL SERVICES
194 Hernan Cortez Avenue, Suite 213
Hagåtña, Guam 96910

Mailing Address:
123 Chalan Kareta
Mangilao, GU 96913

Tel: (671) 735-7405

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ARTICLE 1 – TITLE AND PURPOSE

§ 6101. Title.

The Nurse Practice Act *shall* be known and may be cited as the “Act” of the Guam Board of Nurse Examiners (GBNE) in accordance with Article 3 of Title 10 Guam Code Annotated (1983; 1997, 1998 and 2003 Updates). The Guam Board of Nurse Examiners (GBNE) may also be referred to as the “Board”.

§ 6102. Description of the Act.

The Act establishes the regulation of the practice of nursing. The Act also creates, authorizes and empowers the GBNE to regulate the practice of nursing and to enforce the provisions of the Act. P.L. 24-20 further authorizes the Board to regulate the practice of nurse assistants and P.L. 24-206 authorizes the Board to regulate the practice of advanced practice registered nurses.

§ 6103. Purpose.

The Legislature finds that the practice of nursing is directly related to the public welfare of the citizens of Guam and is subject to regulations and control in the public interest to assure that practitioners are qualified and competent. It is further declared that the practice of nursing, as defined in the Act, merits and deserves the confidence of the public and that only qualified persons be permitted to engage in the practice of nursing. The legislature recognizes that the practice of nursing is continually evolving and responding to changes within health care patterns and systems.

ARTICLE 2 – GUAM BOARD OF NURSE EXAMINERS

§ 6201. Establishment.

There is within the Department of Public Health & Social Services of the Government of Guam the Guam Board of Nurse Examiners.

§ 6202. Board Composition.

(a) The Board *shall* be composed of seven (7) members appointed by the Governor. The term of office *shall* be three (3) years. No member *shall* serve more than two (2) consecutive terms. All members *shall* serve, in addition to their regular term, until their successors are appointed.

(b) The term of office of each member *shall* commence on July 1 following the appointment and the terms of the members *shall* be rotated so that no more than three (3) members’ term *shall* expire each year. The present members of the Board *shall* serve as members of this Board until their successors are qualified, appointed and sworn.

(c) Any vacancy in the membership of the Board *shall* be filled for the period of the unexpired term in the same manner as was the original appointment.

§ 6203. Qualifications of Members.

(a) The Board members *shall* include five (5) Registered Nurses (RNs), one (1) Licensed Practical Nurse (LPN) and one (1) public member. Of the six (6) licensed nurses (5 RNs and 1 LPN), there will always be at least one representation from:

- (1) a nursing education program
- (2) community health nursing
- (3) hospital nursing
- (4) advanced practice registered nursing (APRN)

(b) The Board *shall* solicit nominees of qualified candidates from nursing agencies and nursing organizations and submit such listing to the Governor for his selection, appointment and swearing in.

(c) Each member *shall* be a citizen or permanent resident of the United States and be a resident of the Territory of Guam for at least two (2) years immediately preceding appointment.

(d) Each licensed nurse member *shall* be a current holder of a valid Guam license to practice as a Registered Nurse (RN), Licensed Practical Nurse (LPN) and/or Advanced Practice Registered Nurse (APRN) and have been actively engaged in the practice of nursing for five (5) years immediately preceding appointment. Four members *shall* have a minimum of a baccalaureate degree in nursing.

(e) Each RN member *shall* be a member of the island's professional nursing organization.

(f) The public member *shall* be a person who is not licensed as a health care provider; is not a parent, spouse, sibling, or child of any living person licensed as a health care provider, and is not a student in a health educational program; does not have a direct or indirect financial interest in health care services; is not a member of any public or private health care organization board of control; and has at least a high school diploma or equivalency.

(g) Membership *shall* represent both genders.

§ 6204. Powers and Duties of the Board.

The Board *shall*:

(a) Meet annually in the month of January and elect a Chairperson, a Vice Chairperson, and a Secretary. The Board may hold other meetings as necessary to conduct its business. Four (4) members, including one officer, *shall* constitute a quorum.

(b) Interpret and enforce the provisions of the Act. The Board *shall* have all of the duties, powers, and authority specifically granted by and necessary to the enforcement of the Act, as well as other duties, powers and authority as it may be granted by appropriate status.

(c) Make, adopt, amend, repeal, and enforce such administrative rules and regulations in compliance with the Administrative Adjudication Law (Chapter 9, Title 5 of the Guam Code Annotated) and with the approval of the Commission on Licensure as it deems necessary for the proper administration and enforcement of the Act and to protect the public health, safety and welfare.

(d) Conduct the following ~~in accordance with Article 2.4(c)~~:

- (1) Develop standards for and periodically evaluate basic nursing and nurse assistant educational programs to ensure adherence to established standards.

- (2) Enforce educational standards and rules set forth in these administrative rules and regulations.
- (3) Require criminal background checks on all applicants.
- (4) License qualified applicants for registered nurses, licensed practical nurses and certified nurse assistants by examination, endorsement, renewal and reinstatement.
- (5) Regulate the practice of Advanced Practice Registered Nurses (APRNs).
- (6) Maintain a record of all persons regulated by the Board.
- (7) Develop and enforce standards for nursing practice.
- (8) Develop rules to govern delegation by and to nurses.
- (9) Develop standards for maintaining competence of licensees continuing or returning to practice, including the use of continuing education units.
- (10) Require agencies employing nurses, nurse assistants and APRNs to appoint a Chief Administrative Nurse.
- (11) Collect and analyze data regarding nursing education, nursing practice, and nursing resources.
- (12) Issue subpoenas in connection with investigations, inspections and hearings.
- (13) Have reasonable access to records to assist the Board in its investigations. The Board *shall* maintain any records obtained pursuant to this paragraph.
- (14) Order licensees to submit to physical, mental health or chemical dependency evaluations for cause.
- (15) Cause prosecution of allegations of violation of the Act.
- (16) Conduct hearings, compel attendance of witnesses and administer oaths to persons giving testimony at hearings.
- (17) Close discipline sessions and hearings to the public.
- (18) Discipline licensees as needed.
- (19) Maintain membership in national organizations that develop and regulate national licensure examinations and exclusively promote the improvement of the legal standards of the practice of nursing for the protection of the public health, safety and welfare.
- (20) Facilitate the National Council of Licensure Examination (NCLEX) according to the rules of the National Council of State Boards of Nursing or its designated testing services and the Board.
- (21) Establish alternative programs for monitoring nurses who voluntarily seek treatment for chemical dependency, mental health, or physical health conditions that can lead to disciplinary actions by the Board.
- (22) Regulate the manner in which nurses announce their practice to the public.
- (23) Issue a modified license to practice nursing to an individual to practice within a limited scope of practice or with accommodations or both, as specified by the Board.
- (24) Inform licensees about changes in the law and rules and regulations regarding the practice of nursing.
- (25) Maintain records of proceedings as required by the laws of Guam.
- (26) Provide consultation, conduct conferences, forums, studies and research on nursing education and practice.

(27) Ensure that a qualified registered nurse is employed to serve as the Executive Officer and approve such additional staff positions as may be necessary, in the opinion of the Board, to administer and enforce the provision of the Act.

(28) Delegate to the Executive Officer those activities that expedite the functions of the Board.

(29) Employ or have access to professional and support staff, investigators, legal counsel, and other personnel necessary for the Board to carry out its functions.

(30) Determine and collect reasonable fees.

(31) Receive and expend funds, in addition to appropriations from the Government of Guam, provided such funds are received and expended for the pursuit of the authorized objectives of the Board; such funds are maintained in a separate account; and periodic reports of the receipt and expenditures of funds are submitted to the Governor.

(32) Adopt a seal that *shall* be in the care of the Executive Officer and *shall* be affixed only in such a manner as prescribed by the Board.

(33) Submit an Annual Report to the Governor and the Legislature in January of each year on the activities of the Board over the past fiscal year.

(34) Appoint advisory committees to assist the Board in the implementation of the Act. Members of the advisory committees *shall* not be compensated.

(35) Have immunity from individual civil liability for damages for any act done or omitted in good faith in performing the functions of the Board (P.L. 18-48:9; P.L. 20-26:1; and, P.L. 20-177:30).

(e) Comply with the requirements of the Open Government Law (P.L. 13-35, as amended) but when the Board is preparing examinations, grading examinations discussing the eligibility of a person to be licensed or reviewing evidence obtained at a hearing or disciplinary action, the Board *shall* meet in executive session and may exclude the press and members of the public.

(f) These rules *shall* not be construed to require the Board of Nursing to report violations of the provisions of the Act whenever, in the opinion of the Board, the public interest will be served adequately by a suitably written notice of warning.

§ 6205. Removal of a Board Member.

The Governor may remove any member from the Board for cause including, but not limited to, neglect of any duty required by law, incompetence, unprofessional or dishonorable conduct. A member subject to disciplinary proceedings *shall* disqualify himself or herself from Board business until such charge(s) are adjudicated.

§ 6206. Compensation.

Each member of the Board *shall* be compensated in the same manner as are other members of board and commissions of the Government of Guam.

§ 6207. Executive Officer.

(a) The Board *shall* ensure the employment of the Executive Officer with the following qualifications:

(1) Master's degree or higher from an accredited college or university with at least three (3) years' experience in nursing practice, including administration, teaching, or supervision in nursing educational programs, supervision in health agencies or nursing regulations; or

(2) Bachelor's degree in nursing and at least five (5) years' experience in nursing practice, including administration, teaching or supervision in nursing educational programs, supervision in health agencies or nursing regulations.

(b) The Executive Officer *shall* be responsible for:

(1) Performing the administrative responsibilities of the Board.

(2) Employment of personnel needed to carry out the functions of the Board.

(3) Maintaining and securing the Seal of the Board.

ARTICLE 3 – PROFESSIONAL CONDUCT, SCOPE OF PRACTICE, PRONOUNCEMENT OF DEATH AND DEFINITIONS

§ 6301. Professional Conduct.

(a) The Registered Nurse (RN), including all Advanced Practice Registered Nurses (APRNs) *shall*:

(1) Practice in accordance with the Act and the GBNE Administrative Rules and Regulations;

(2) Uphold federal and state regulations regarding controlled substances and alcohol;

(3) Practice nursing only when in functional, physical and mental health;

(4) Be accountable for own nursing actions and competencies;

(5) Practice or offer to practice only within the scope permitted by law and within registrant's own educational preparation and competencies;

(6) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;

(7) Delegate professional responsibilities only to individuals whom the registrant knows or believes to be qualified by education, experience or licensure to perform and supervise those persons to whom nursing activities have been delegated;

(8) Be accountable for the quality of nursing care delegated to others;

(9) Report unsafe, unethical, illegal health care or conditions to appropriate authorities;

(10) Maintain a functional level of practice consistent with education and experience background and in accordance with professional responsibilities;

(11) Assume responsibility for continued professional and personal growth and education to reflect knowledge and understanding of current nursing care practice.

(b) The Licensed Practical Nurse (LPN) *shall*:

(1) Practice in accordance with the Act and the GBNE Administrative Rules and Regulations;

(2) Uphold federal and state regulations regarding controlled substances and alcohol;

- (3) Practice nursing only when in functional, physical and mental health;
 - (4) Be accountable for own nursing actions and competencies;
- Perform only those nursing activities within the scope permitted by law and for which educationally prepared;
- (5) Perform nursing actions only under direction except as stated in the Act in the event of an emergency in which an individual's life or health are in imminent danger;
 - (6) Seek instruction and supervision from qualified individuals when implementing new or unfamiliar nursing activities;
 - (7) Report unsafe, unethical, illegal health care or conditions to appropriate authorities;
 - (8) Assume responsibility for continued growth and education to reflect knowledge and understanding of current nursing care practice.

§ 6302. Scope of Practice.

(a) **Registered Nurse (RN).** The scope of practice for a Registered Nurse means that full scope of professional nursing, with or without compensation or personal profit that incorporates caring for all clients in all settings and, it includes, but is not limited to:

- (1) Providing comprehensive assessment of the health status of clients, families, groups and communities;
- (2) Developing a comprehensive nursing plan that establishes nursing diagnoses, goals to meet the identified health care needs and nursing interventions to resolve the identified nursing diagnoses;
- (3) Implementing nursing care through the execution of independent nursing strategies and prescribed medical regimen;
- (4) Managing nursing care through cohesive, coordinated care management within and across care settings;
- (5) Delegating and assigning nursing interventions to implement the plan of care;
- (6) Providing for the maintenance of safe and effective nursing care rendered directly or indirectly;
- (7) Promoting a safe and therapeutic environment;
- (8) Providing health teaching and counseling to promote, attain and maintain the optimum health care of clients, families, groups and communities;
- (9) Advocating for clients, families, groups and communities by attaining and maintaining what is in the best interest of the clients, families, groups and or communities;
- (10) Evaluating responses to interventions and the effectiveness of the plan of care;
- (11) Communicating and collaborating with other health care professionals in the management of health care and the implementation of the total health care regimen;
- (12) Acquiring and applying critical new knowledge and technologies to practice domain;
- (13) Managing, supervising and evaluating the practice of nursing;
- (14) Teaching the theory and practice of nursing;
- (15) Participating in development of policies, procedures and systems to support the client;

(16) Other acts that require education and training as prescribed by the Board;

(17) Additional nursing services *shall* commensurate with the Registered Nurse' experience, continuing education and demonstrated competencies.

Each Registered Nurse is accountable to clients, the nursing profession and the Board for complying with the requirements of the Act and the quality of nursing care rendered; and, for recognizing limits of knowledge and experience and planning for management of situations beyond the RN's expertise.

(b) **Licensed Practical Nurse (LPN)**. The scope of practice for the Licensed Practical Nurse (LPN) means a directed scope of nursing practice, with or without compensation or personal profit, under the supervision of the Registered Nurse, Advanced Practice Registered Nurse (APRN), licensed physician or licensed dentist who are authorized by statute to delegate health care activities and functions; and, includes but is not limited to:

(1) Collecting data and conducting focused assessments of the health status of clients;

(2) Planning nursing care during care episode for clients with stable conditions;

(3) Participating in the development and modification of the comprehensive plan of care for all types of clients;

(4) Implementing the appropriate aspects of the strategy of care within the LPN scope of practice;

(5) Participating in nursing care management through delegating, assigning and directing nursing interventions that may be performed by others, including other licensed practical nurses that do not conflict with the Act;

(6) Maintaining safe and effective nursing care rendered directly or indirectly; Promoting a safe and therapeutic environment;

(7) Participating in health teaching and counseling to promote, attain and maintain the optimum health level of client;

(8) Serving as an advocate for the client by communicating and collaborating with other health service personnel;

(9) Participating in the evaluation of client responses to interventions; Communicating and collaborating with other health care professionals in the nursing practice management;

(10) Providing input into the development of policies and procedures;

(11) Other acts that require education and training as prescribed by the Board;

(12) Additional nursing services *shall* commensurate with the licensed practical nurse' experience, continuing education and demonstrated competencies.

Each nurse is accountable to clients, the nursing profession and the Board for complying with the requirements of the Act and the quality of nursing care rendered; and, for recognizing limits of knowledge, experience and planning for management of situations beyond the LPN's experience.

(c) **Advanced Practice Registered Nurse (APRN)**. The scope of practice for the Advanced Practice Registered Nurse (APRN) by Certified Registered Nurse Practitioners (CRNPs), Certified Registered Nurse Anesthetists (CRNAs), Certified Nurse Midwives (CNMs) and Clinical Nurse Specialists (CNSs) is based on knowledge and skills acquired in basic nursing

education, licensure as a Registered Nurse, graduation from or completion of a graduate level APRN program accredited by a national accrediting body and, current certification by a national certifying body in the appropriate APRN specialty. Practice as an APRN means an expanded scope of nursing practice, with or without compensation or personal profit, and includes but is not limited to:

- (1) Assessing clients, synthesizing and analyzing data; and understanding and applying nursing principles at an advanced level of nursing practice;
- (2) Analyzing multiple sources of data, identifying alternative possibilities as to the nature of a health care problem and selecting appropriate treatment;
- (3) Making independent decisions in solving complex client care problems;
- (4) Developing a plan that establishes diagnoses, goals to meet the identified health care needs and prescribing a regimen of health care treatment;
- (5) Performing acts of diagnosing, prescribing, administering and dispensing therapeutic measures, including legend drugs and controlled substances within the APRN's focus of practice;
- (6) Managing clients' physical and psychosocial health-illness status;
- (7) Providing for the maintenance of a safe and effective nursing care rendered directly or indirectly;
- (8) Promoting a safe and therapeutic environment;
- (9) Providing expert guidance and teaching;
- (10) Participating in client and health systems management;
- (11) Advocating for clients, groups and communities by attaining and maintaining what is in the best interest of the client or group;
- (12) Evaluating responses to interventions and the effectiveness of the plan of care and the health regimen;
- (13) Communicating and working effectively with clients, families and other members of the health care team;
- (14) Utilizing research skills, acquiring and applying critical new knowledge and technologies to practice domain;
- (15) Teaching the theory and practice of advance practice nursing;

Each APRN is accountable to clients, the nursing profession and the Board for complying with the requirements of the Act and the quality of nursing care rendered; for recognizing limits of knowledge and experience; planning for management of situations beyond the APRN's expertise; and, for consulting with or referring clients to other health care providers as appropriate.

(d) **Certified Nurse Assistant (CNA)**. The scope of practice for the Certified Nurse Assistant (CNA) requires the individual to complete a prescribed Nurse Assistant (NA) program approved by the Board and *shall* pass the National Council of State Boards of Nursing (NCSBN) certification examination for Nurse Assistants and be issued a certification to practice on Guam. The scope of practice, with or without compensation or personal profit, *shall* be limited to the supervision of a Registered Nurse, Licensed Practical Nurse or Advanced Practice Registered Nurse. The delegated activities include but are not limited to:

- (1) Conducting assigned assessments of the health status of clients, i.e. taking, recording and, as indicated, reporting client's blood pressure readings, pulse rates, respiration rates, body temperature readings and fluid intake and output measurements;
- (2) Providing personal and oral hygiene care, basic and routine treatment procedures and range of motion exercises as directed;
- (3) Promoting a safe, clean and therapeutic environment conducive to patient's safety, comfort and privacy when providing care;
- (4) Reporting events that pose an actual or potential safety risk to patients, staff and others;
- (5) Documenting clearly, concisely and accurately nursing assistant procedures done and observations made using proper notation and abbreviation requirements;
- (6) Serving as an advocate for the client by communicating expressed or observed needs to the Registered Nurse;
- (7) Participating in the development and modification of the client's plan of care;
- (8) Completing ongoing certification and regular assessment of skills and training needs;
- (9) Performing other Nursing Assistant acts that require education and training as prescribed by the Board.

Each Certified Nurse Assistant (CNA) is accountable to the clients, the nursing profession and the Board for complying with the requirements of the Act and the quality of care rendered; and, for recognizing limits of knowledge and experience beyond the expertise of the CNA.

§ 6303. Pronouncement of Death (P.L. 27-15:2)

A Registered Nurse may pronounce death in compliance with the following:

- (a) The health care facility, agency or licensed home health care provider has adopted written policies and procedures that provide for the determination and pronouncement of death by an RN;
- (b) Person/Patient/Client is certified "anticipated death" by the attending physician;
- (c) Person/Patient/Client is in a health care facility, a private home served by a licensed home health care provider, or in a government/private health care agency;
- (d) After diagnosing the absence of human responses, the RN *shall*:
 - (1) Document the clinical criteria for the determination and pronouncement in the person's/patient's medical or clinical record;
 - (2) Notify the certifying physician;
 - (3) Complete the Death Certificate by entering the name of the deceased, presence of contagious disease if known, date and time of death and signature;
 - (4) Contact the funeral home identified by the family who *shall* be responsible for transporting the corpse to the funeral home;
 - (5) Notify the Guam Police Department and the Chief Medical Examiner immediately if there is any suspicious nature that may be different from the anticipated death.

§ 6304. Definitions

Abuse means physical injury caused by other than accidental means; neglect which leads to physical harm; failure to provide direct care for resident or client; verbal abuse; theft or misuse of resident funds or property; wrongful touching; or any other deprivation of patient or resident's rights, which may be the result of intentional or negligent behavior.

Absolute discharge from sentence means completion of any court imposed sentence including imprisonment, probation, parole, community supervision or any form of court supervision.

Accredited Program for Advanced Practice Nurse Practitioner means an educational program accredited by the American Association of Nurse Anesthetists, American College of Nurse Midwives, American Nurses Association, National League for Nursing or State Board of Nursing.

Accredited School of Professional Nursing means a school conducted for the purpose of giving professional nursing education that complies with the standards prescribed by these Rules and Regulations; included are schools of nursing of states, countries, islands or territories which are accredited by the boards of nurse examiners of such states and have standards equivalent to those of Guam.

Accountability means a state of being responsible and answerable or legally liable for action, including supervision.

Action Taken means collective decision made by a majority of the members of a public agency; a collective commitment or promise by a majority of the members of a public agency to make a positive or a negative decision; or, an actual vote by a majority of the members of a public agency when sitting as a body or entity, upon a motion, proposal, resolution or order (GCA Section 3228 A).

Adjunct Faculty means temporary nursing faculty, in addition to regular program faculty, used to enrich student experiences.

Advanced Assessment means assessment by an APRN based on additional knowledge and skill developed, a graduate level nursing education program in APRN category, and the APRN's experience working in the APRN role.

Advanced Nursing Education means an additional approved program of study in nursing which results in a certificate or degree beyond the basic nursing education.

Alford Plea means plea agreements where the defendant may plead guilty yet not admit all the facts that comprise the crime.

Approval means the process by which the Board evaluates and grants official recognition to a nursing education or nurse assistant program which meets established uniform and reasonable standards. There are four (4) categories of approval:

(1) *Initial Approval* means an authorization granted by the Board for new nursing programs to admit students and to enter into contractual agreements with clinical facilities. No student shall be admitted until the institution has received the written notification of Initial Approval from the Board subsequent to the application review and site visit.

(2) *Full Approval* means status granted by the Board to programs that meet the requirements of the law and the Administrative Rules and Regulations of the Board.

(3) *Continuation of Full Approval* means status granted annually by the Board to programs that meet the standards set forth herein. A Certificate of Continuing Full Approval is contingent upon an annual review of the program by the Board.

(4) *Conditional/Probational Approval* means status designated to a program which is determined to be deficient in a specified area. The Board *shall* notify the program of the specific deficient area(s) and the time limitation to correct the stated deficiencies.

Anticipated Death means a death caused by a life-limiting illness, infirmity or disease as certified by the attending physician and that the prognosis was discussed with the patient and the patient's family; and, that the patient consented to a "No Resuscitation" order or has executed an Advanced Directive indicating the same.

Assignment means designating nursing activities to be performed by another nurse, nurse assistant or assistive personnel that are consistent with his/her scope of practice and role description.

Authorized Person means professional nurse, physician or dentist currently licensed on Guam.

Board means Guam Board of Nurse Examiners.

Board of Nursing means other nursing boards.

Certification by Endorsement means the process by which a nurse assistant, currently certified by any of the United States or its Territories, can practice as a nurse assistant on Guam, upon meeting the requirements set forth by the Board.

Chief Administrative Nurse means the registered nurse who *shall* be employed to oversee the provision of nursing care and services by registered nurses, licensed practical nurses and certified nurse assistants in an organization, regardless of title.

Client means any recipient of nursing care be it an individual, family, group or community.

Client-Centered Health Care Plan means identification of desired goals, strategies for meeting goals and processes for promoting, attaining and maintaining optimal client health outcomes. The multidisciplinary health care team partners with the client to develop the plan of care. Team members identify, respect and care about client differences, values, preferences and expressed needs.

Clinical Facilities means those institutions which are established in a community for the delivery of health care services, such as hospitals, extended care facilities, nursing homes, etcetera.

Clinical Judgment means the application of the nurse's knowledge and experience in making decisions about the care of the client.

Content Validity means the degree to which an examination is representative of a defined body of knowledge.

Commission on Graduates of Foreign Nursing Schools (CGFNS) Qualifying Examination means an examination administered by the CGFNS that must be taken and passed by all graduates of schools of nursing in foreign countries prior to applying for a nursing licensure by examination with Guam as the original RN licensure.

Community Health Nursing means a specialty of nursing practice that focuses on the health needs of communities and aggregates and in particularly vulnerable populations; a synthesis of nursing practice and public health practice applied to promoting and preserving the health of populations and communities.

Compact means an agreement between two or more states established for the purpose of remedying a particular problem of interstate concern.

Competence means the application of knowledge and the interpersonal, decision-making and psychomotor skills expected for the practice role within the context of nursing, health care, public safety and welfare.

Competence Assessment means evaluation of the practitioner's knowledge, skills and abilities. Assessment mechanisms may include examination, peer review, professional portfolio and professional certification.

Competence Conduct means the health and behavior expectations that may be evaluated through reports from the individual practitioner, employer reports and discipline checks. Part of competence conduct is assurance that licensees possess the functional abilities to perform the essential functions of the nursing role.

Competence Development means the method by which a practitioner gains, maintains or refines practice knowledge, skills and abilities. This development can occur through a formal education program, continuing education or clinical practice and, is expected to continue throughout the practitioner's career.

Competency means the ability to perform skillfully and proficiently the role of the license/certificate holder. The role encompasses essential knowledge, judgment, attitudes, values, skills and abilities which are varied in range and complexity. Competency is a dynamic concept, changing as the licensee achieves a higher stage of development within the role. It is based on educational training, preparation, expertise and standards of practice.

Comprehensive Assessment by an RN means an extensive data collection, initially and ongoing, for clients, families, groups and communities addressing anticipated changes in client conditions as well as emergent changes in a client's health status; recognizing alterations to previous client conditions; synthesizing the biological, psychological and social aspects of the client's condition; evaluating the impact of nursing care; and, using this broad and complete analysis to make independent decisions and nursing diagnoses; plan nursing interventions; evaluate need for different interventions; and, the need to communicate and consult with other health care members.

Cooperating Agency means an independent health care facility used by a program to provide its students with practical clinical experience and training.

Cooperation means a joint effort of cooperating, assisting and working together for a common benefit.

Course means a series of sessions devoted to one specific area of a subject. It may include a number of related topics.

Cultural Bias means non-nursing elements of examination items that may influence the performance of culturally distinct groups of examinees.

Curriculum means the systematic arrangement of learning experiences that include courses, clinical experience and other activities needed to meet the requirements of the basic nursing or the nurse assistant program and of the degree or certificate conferred by the program provider/parent institution.

Date of Application means the actual date on which the completed application form/packet was received by GBNE.

Delegation means entrusting the performance of selected nursing duties to qualified and competent as well as legally able individuals to perform selected nursing tasks in a selected situation while retaining the accountability and responsibility for the completion of such tasks.

Denial means the Board's decision to refuse issuance of a current license for cause upon application.

Direction means monitoring and guiding the practice of another through written or verbal communication.

Direct Supervision means being in close physical proximity within the facility to provide direct observation, direction, procedural guidance and evaluation of nursing care rendered.

Director means a registered professional nurse who *shall* be employed by the controlling authority to administer the (1) nursing educational program or the nurse assistant educational program of a learning institution; or, (2) nursing services of a health facility or school health.

Distance Education means teaching/learning strategies used to meet the learning needs of students when students and faculty are separate from each other.

Emergency means a sudden state of danger, conflict or crisis requiring immediate intervention.

Episodic Care means nursing care that occurs at non-specific intervals, focused on the individual and situation at hand.

Faculty-Directed Clinical Practice means the role of nursing program faculty in overseeing student clinical learning including those programs utilizing preceptors.

Federal Requirement means requirements imposed by the Omnibus Budget Reconciliation Act (OBRA) of 1987 and the regulations adopted pursuant thereto.

Focused Assessment by the LPN means an appraisal of the client's status and situation at hand, contributing to ongoing data collection and comprehensive assessment by the registered nurse, deciding who needs to be informed of the information and when to inform.

Governing Institution means refers to an institution of higher learning which administers a nursing education program.

Graduate Nurse means refers to an individual who has successfully completed a basic nursing educational program but has not been licensed through the national (NCLEX-RN) examination.

Graduate Practical Nurse means refers to an individual who has successfully completed a practical nurse educational program but has not been licensed through the national (NCLEX-PN) examination.

Graduate Nurse Assistant means refers to an individual who has successfully completed a nurse assistant educational program but has not been certified through the national (NNAAP) certification examination.

Grandfathering means the provision in the local law exempting those individuals who are already in or a part of the existing system that is being regulated. It is an exception to a restriction that allows all those who are already practicing to continue practicing even if they would be denied licensure or certification by the newly established restriction.

Health Care Provider means an individual authorized by licensure or certification to prescribe and or administer various aspects of health care services.

Health Care Facility means a private, municipal, state, federal or military hospital, mental health and substance abuse hospital, public health, skilled nursing facility, kidney disease, cancer treatment center (excluding freestanding units), intermediate care facility, long-term care facility, nursing home, hospice facility or home health agency.

Inactive means status of the licensed nurse who voluntarily chooses not to engage in nursing during the succeeding year and chooses not to renew his/her license at the time of renewal *shall* not be required to pay the renewal fee as long as he/she remains inactive. Should the nurse wish to resume his/her nursing practice at some future time, he/she *shall* notify the Board and become reinstated by meeting such requirements as the Board may prescribe.

Independent Nursing Strategy means nursing activities based on nursing assessment within the nurse's scope of practice and standards and not subject to control by others.

Informatics means information technology that can be used to communicate, manage knowledge and data, mitigate error and support decision making processes and options.

Interdisciplinary Faculty means faculty from other professions who, in addition to regular program faculty, add diversity and enrich student learning experiences.

Interdisciplinary Team means all individuals involved in providing a client's care, who cooperate, collaborate, communicate and integrate care to ensure that care is continuous and reliable.

Internationally Educated Nurse means a nurse educated outside of the U.S. who applies for state licensure or seeks temporary authorization to practice as a graduate nursing student to complete program objectives.

Interpretive Statement means a statement developed by a board of nursing to provide guidance, clarification and direction regarding nursing practice, procedures or policies to ensure compliance with acceptable standards of nursing practice as defined in the Act and the GBNE Administrative Rules and Regulations.

Lapsed Certificate means the termination of an individual's certificate to practice due to the certificate holder's failure to renew one's certificate within the specified time and is therefore unauthorized to practice.

Lapsed License means the termination of an individual's nursing license to practice due to the license holder's failure to renew his/her license within a specified period of time and is therefore unauthorized to practice.

License means a current document permitting/authorizing an individual to practice as a registered nurse, licensed practical nurse or as an advanced practice registered nurse.

Licensure by Endorsement means the granting of authority to practice nursing based on an individual's licensure in another jurisdiction with comparable requirements.

Licensure by Examination means the granting of authority to practice nursing based on successfully passing the national licensure (NCLEX) RN or LPN examination.

Licensure Reinstatement means the granting of authority to restore or reestablish a nursing licensure that has lapsed, suspended, revoked or voluntarily surrendered.

Licensure Renewal means the process in which legal authority to practice is renewed periodically.

Limited License means the granting of authority to practice nursing within a specified legal scope of practice or in a restricted capacity.

Medicaid means the federal government program of medical care designed for those who are unable to afford the cost of regular medical services which is financed by the state and federal governments.

Medicare means the federal government program of medical care specifically designed for the elderly.

Modified License means a license to practice nursing within a scope of practice, with or without limitations, accommodations or both as specified by the Board through a non-disciplinary process.

Moral Turpitude means conduct that involves one or more of the following:

(1) Intentional, knowing or reckless conduct that causes injury or places another in fear of imminent harm;

(2) Conduct done knowingly contrary to justice or honesty;

(3) Conduct that is contrary to the accepted and customary rule of right and duty that a person owes to fellow human beings and society in general; and,

(4) Conduct that is wrong in itself even if no statute were to prohibit the conduct.

National Certifying Body means an organization that has as one of its purposes the issuance of certification of registered nurses, nurse anesthetists, nurse midwives, nurse practitioners, or clinical nurse specialists referred to in these regulations as professional certification, and whose certification of such persons by examination is accepted by the Board.

NCLEX-PN means the National Council Licensure Examinations for Practical Nurses is used in the U.S. and its territories to assess licensure applicant's knowledge, skills and abilities.

NCLEX-RN means the National Council Licensure Examinations for Registered Nurses is used in the U.S. and its territories to assess licensure applicant's knowledge, skills and abilities.

Nolo Contendere means a "no contest" plea in a criminal case that result in a similar effect as pleading guilty.

Nurse Assistant Educational Program means a program designed to prepare nurse assistants which is offered by a school, college, nursing facility or other institutions that have been granted Initial Approval, Full Approval or Continuation of Full Approval by the Board to provide such a program.

Nurse Licensure Compact (NLC) means compact between participating states to facilitate the regulation of nurses. The compact is adopted by each state legislature, and allows a nurse licensed in a compact state to practice under a multi-state privilege in all other compact states.

Nurse Licensure Compact Administrators (NLCA) means nurse administrators of each compact state responsible for implementing and coordinating the NLC.

Nursing means both an art and a scientific process founded on a professional body of knowledge. It is a learned profession based on an understanding of the human condition across the lifespan and the relationship of a client with others and within the environment. It is a dynamic discipline that is continually evolving to include more sophisticated knowledge, technologies and client care activities.

Nursing Program Faculty means individuals employed full or part time by academic institutions responsible for developing, implementing, evaluating and updating curricula.

Nursing Services means the professional practice and auxiliary functions that support the client's meeting of the client's desired health goals and processes for promoting, attaining and maintaining optimal health outcomes.

Nursing Student means a person who is studying nursing in an approved educational program.

Omnibus Budget Reconciliation Act (OBRA) means a mandate (P.L. 100-203 of 1987) that created federal statutory requirements for nurse assistants' education and certification, and requiring the establishment of a registry of nurse assistants employed in long-term care facilities, home care agencies and home health aides.

Person means an individual, corporation, partnership, association, unit of government or other legal entity.

Practice means the performance of services by a licensed or certified person that requires specific education, training and skills as specified in these rules and regulations.

Practice of Nursing means the assisting of clients or groups to attain or maintain optimal health, implementing a strategy of care to accomplish defined goals and evaluating responses to nursing care and treatment. It incorporates:

- (1) basic health care that helps both clients and groups of people cope with difficulties in daily living associated with their actual or potential health or illness;
- (2) those nursing activities that require a substantial amount of scientific knowledge or technical skills.

Prescribed Devices means an instrument or an apparatus intended for use in diagnosis or treatment and in the prevention of disease or restoration of health.

Prescribing means the act of determining which legend drugs and controlled substances shall be used by or administered to a client in compliance with applicable state and federal law.

Prescriptive Authority means the power granted to the APRN to assess the need for drugs, immunizing agents, or devices, selecting the remedy and writing a prescription to be filled by a licensed pharmacist.

Primary Instructor - refers to the registered nurse who is responsible for teaching and evaluating the students enrolled in a nurse assistant educational program and is currently licensed to practice on Guam.

Professional Boundaries means the space between the nurse' power and the client's vulnerability. The power of the nurse comes from the professional position and access to private knowledge to control this power differential and allows a safe relationship to meet the client's needs.

Professional Certification means a credential issued by a national certifying body meeting specified requirements acceptable to the Board that is used as a requirement for APRN licensure.

Program means a course of instruction designed to enable its students to practice as an RN, APRN, LPN or CNA.

Program Provider - refers to a school, college, nursing facility or other institutions that conducts a nursing assistant program.

Quality Improvement Processes means to identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process and outcomes in

relation to client and community needs; and design and test interventions to change processes and system of care with the objective of improving quality.

Registry means the listing of all individuals who have been issued a license or certificate by the Board.

Re-issuance means the process of replacing a license or certificate by issuing a duplicate copy.

Revocation means the withdrawal of a nurse' license or a nurse assistant's certificate for cause or an order of annulment or cancellation of a license or certificate.

Reinstatement means the process of restoring a license or certificate to practice on Guam that has expired, lapsed, been suspended or revoked.

Site Visit means a visit to the program site by an agent of the Board to review the nursing or the nurse assistant educational program sponsored by the program provider.

Standards of Nursing Practice means those standards adopted by the Board that define and interpret legal definition of practice.

Strategy of Nursing Care means goal-oriented nursing activities developed within the client-centered health care plan to assist clients achieve optimal health potential.

Supervision means the provision of guidance by a qualified registered nurse for the accomplishment of a nursing task, function or activity. The guidance consists of direct, indirect or periodic observation and monitoring as well as establishing the initial direction, delegating, setting expectations, directing activities and courses of action, critical watching, overseeing, evaluating and changing a course of action.

Suspension means an order of withdrawal of a nurse' or a nurse assistant's right to practice for a definite or indefinite period of time due to cause.

These Standards refers to the standards for accreditation and licensing as established in these rules and regulations.

Unauthorized Practice means the practice of nursing, such as a nurse assistant, licensed practical nurse, registered nurse or advanced practice registered nurse by any person who has not been authorized or licensed to practice under the provisions of the Act.

Unlicensed Assistive Personnel means any personnel who is unlicensed to whom nursing tasks are delegated, regardless of title.

Violation means failure of an employer of a licensed nurse or certified nurse assistant or any person acting as an agent for the nurse or nurse assistant in obtaining employment to verify the current status of the licensee's authorization to practice nursing or nurse assistant on Guam. As used in the Act, the term "agent" includes, but not limited to, nurse recruiters and nurse registries.

ARTICLE 4 – LICENSURE FOR APRNS, RNS AND LPNS

§ 6401. Requirements.

(a) In order to practice nursing in Guam, it is mandatory to obtain a license from the Guam Board of Nurse Examiners. Obtaining a Guam license to practice nursing is the responsibility of the individual nurse pursuant to P.L. 16-123, Nurse Practice Act of Title 10 Guam Code Annotated, Article 3 (1983; 1997, 1998 and 2003 Updates).

(b) Any person who holds a license to practice nursing in Guam *shall* use the legal title or the abbreviation as set forth in the Guam Nurse Practice Act of Title 10 Guam Code Annotated and Article 3, (1983; 1997, 1998 and 2003 Updates). No other person *shall* assume any other name, title or abbreviation or any words, letters, signs, or devices that would cause a reasonable person to believe the user is licensed/certified to practice as a registered nurse (RN), an advanced practice registered nurse (APRN) or licensed practical nurse (LPN).

(c) Any person licensed to practice nursing *shall* wear an insignia to identify himself or herself by his/her name and appropriate legal title or abbreviation during times when such person is providing health care to the public for compensation.

(d) The insignia *shall* be prominently displayed and clearly legible such that the person receiving care may readily identify the type of nursing personnel providing the care.

§ 6402. Responsibility of the Applicant.

It *shall* be the responsibility of the applicant to:

(a) Correspond or communicate directly with the Board.

(b) Follow through with the submission of all required documents until his/her application is completed.

(c) Periodically contact the Board concerning the status of the application.

(d) Inform the Board of his/her intention to withdraw an application in writing prior to the remittance of the applicable fee. Fees remitted to the Board are non-refundable.

(e) Inform the Board of any change in name and/or address. A licensee who has a change in name *shall* submit a notarized copy of a marriage certificate, or court order evidencing the change to the Board. A duplicate license with the change *shall* be issued by the Board upon receipt of such evidence and the required fee. All license renewals will be sent to the most current known address on file.

(f) Notify the Board, in writing, of the loss of a current license. A duplicate license for the current renewal period *shall* be issued by the Board upon receipt of the required form(s) and fee.

(g) Keep in his/her possession a signed current Guam nursing license while on duty status.

§ 6403. Responsibility of the Employer.

(a) Nursing Administrators, agency heads or other employers, who hire individuals without a license or who allow nurses to practice after the expiration of the licenses or temporary licenses, may be cited for aiding and abetting the unlicensed practice of nursing which is in violation of Section 12327 of Title 10 of the Guam Code Annotated.

(b) Agency Heads, other employers or physicians who allow APRNs, RNs or LPNs to perform duties and activities beyond the legal Scope and Standards of Nursing Practice may be cited for aiding and abetting the illegal practice of nursing which is in violation of the Act.

§ 6404. Licensure by Examination for RNs and LPNs.

In order to be licensed in Guam, all registered nurse or practical nurse applicants *shall* take and pass the National Council Licensure Examination for Registered Nurses (NCLEX-RN) or Licensed Practical Nurses (NCLEX-PN). The results will be reported to the applicant as pass or fail.

(a) Requirements.

(1) The applicant *shall* submit a completed and notarized application for licensure by examination which *shall* include:

(A) Verification of graduation or completion and eligibility for graduation from a state-approved registered or practical nursing program as evidenced by an official Certificate of Nursing Education document received directly from the state-approved nursing education program for the level of licensure being sought. The document *shall* verify the date of graduation, credential conferred and evidence of meeting the standards of nursing education comparable to the U.S. and Guam. An official transcript directly from the School of Nursing is required prior to the issuance of a permanent license.

(B) Two (2) current (within 3 months) passport-size photographs signed by applicant.

(C) Payment of the required application fees for the examination which *shall* be made payable to the Treasurer of Guam. The NCLEX-RN and NCLEX-PN application fees are paid separately for each examination and are NOT refundable.

(D) Payment for the NCLEX Data Center registration fee which *shall* be paid directly to NCSBN.

(2) If the applicant is a graduate of a registered nursing program who applies to take the NCLEX-PN examination, the Board may require additional coursework addressing the limitations of the LPN scope of practice and the rules that govern the practice of practical nursing.

(3) If the Board allows a graduate of a registered nursing program to take the NCLEX-PN examination, the Board may require the RN educational program to identify a Practical Nurse exit point.

(4) In addition to the above requirements, the applicant seeking licensure by examination *shall* provide the following as applicable to the applicant's status:

(A) Identification of any state, territory or country in which the applicant holds a license/certification/credential to practice in a health profession other than nursing. Identification *shall* include the number and status of the license/certification/credential and the original state or country of licensure/certification/credentialing.

(B) Information about current or previous employer if employed in health care, to include address, telephone number, position and dates of employment.

(C) Information related to the applicant's background such as pending disciplinary action or investigation; any pending criminal charges (national or international); criminal conviction; nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction; any chemical, physical or mental impairment and/or disability that impacts the applicant's ability to practice nursing safely and a description of accommodations and/or practice limitations needed, if any; and, any current substance abuse.

(5) Official record of local, state and federal criminal background checks (police and court clearances) completed within the last two (2) months.

(b) Application for Licensure by Examination for Internationally Educated Applicants. An internationally educated applicant for RN or LPN licensure by examination *shall* submit to the Board, in addition to the above (a)(1-5) Licensure by Examination requirements, the following:

(1) Verification of graduation or completion of an international nursing program comparable to an approved nursing education program in the United States or Guam, as documented in an official Certificate of Nursing Education and an official transcript sent directly from the international nursing education program to GBNE. The transcript must be verified by a credentials evaluation organization approved/authorized by the Board.

(2) Acceptable documentation *shall* verify the date of enrollment, date of graduation and credentials conferred. An official transcript and, if not in English, a certified translation is required prior to the approval to take NCLEX.

(3) Credentials *shall* be reviewed internally or by an external agency specializing in international academic credentials review to verify the comparability of the international nursing education program to nursing education program(s) in Guam and/or in the U.S.

(4) The Commission on Graduates of Foreign Nursing Schools (CGFNS) certificate program for internationally educated and licensed nurses is the Board approved and recognized authority to review and certify educational credentials of internationally educated nurse applicants.

(5) International PN graduates, in addition to the above, *shall* submit a notarized copy of the Commission on Graduates of Foreign Nursing Schools (CGFNS) credentials and education verification and may be requested to demonstrate proficiency in the English language by means of an approved test such as TOEFL if the Board designee has reason to believe that the applicant lacks sufficient verbal or reading skills.

(c) Licensure by Examination as LPN for applicants/candidates from the Medical Corp of the U.S. Armed Forces. Individuals who served on active duty in the Medical Corp of the U.S. Armed Forces as a member of the nursing service may apply to the Board for evaluation of records for eligibility for LPN licensure examination. Applicant must submit, in addition to the above (a) (1-5) Licensure by Examination requirements, the following:

(1) Proof of having had at least twelve (12) months service on active duty in the Medical Corp of any of the Armed Forces rendering bedside (direct patient) care. Operating room and other non-bedside nursing experience is NOT acceptable.

(2) Proof of having completed a basic course of instruction in nursing while in the Armed Forces which *shall* be equivalent to the course requirement set by these rules. The minimum nursing course requirements *shall* include:

<u>Core Nursing Subjects/Content</u>	<u>Theory Hrs</u>	<u>Clinical Hrs</u>
Health Assessment	30 hours	60 hours Nursing
Fundamentals & Med Surg Nursing	100 hours	300 hours
Pediatric Nursing	30 hours	90 hours
Obstetric Nursing	30 hours	90 hours

Pharmacology	30 hours	60 hours
<u>Mental Health/Psychiatric Nursing</u>	<u>30 hours</u>	<u>90 hours</u>
Total Nursing Subjects/Content:	250 hours	690 hours

Support Courses

Anatomy & Physiology	4 Qtr hrs/3 semester credits
Microbiology	4 Qtr hrs/3 semester credits
Nutrition	3 Qtr hrs/3 semester credits
Human Growth & Development	4 Qtr hrs/3 semester credits
Psychology	3 Qtr hrs/3 semester credits

(3) Proof that claimed service was honorable. These documents *shall* be certified and submitted directly to the Board by the Officer in Charge of Education Services no later than the deadline set by the Board.

(d) Other Requirements.

(1) Applications that are not complete and/or inactive will become null and void after one (1) year. The Board will dispose of the application as governed by the Government of Guam statute.

(2) Applicants for examination *shall* be required to pass the national licensing examination within two (2) years after graduation from a Board-approved school of nursing. Applicants applying after the two (2) year limitation period *shall* be considered by the Board on an individual basis. The applicant may be required to satisfactorily complete an *approved* program or course of study, including theory and practice, or follow specific remedial measures, as prescribed by the Board, prior to being approved to take each examination.

(3) Transcripts *shall* include information on nursing education programs which were completed in less than the usual length of time, through advanced standing or transfer of credits from one institution to another.

(4) Any change of name, after filing the original application, must be supported by an affidavit or marriage certificate.

(5) Any applicant who cannot demonstrate fulfillment of the education requirements *shall* be notified in writing and must satisfy the deficiency before being *approved* to take the examination. Deficiencies in nursing theory and/or clinical practice may be removed by taking the required course(s) in an approved nursing education program.

§ 6405. Temporary Work Permits/Licenses/Certifications.

(a) The Board may issue a *temporary work permit* to graduate of an accredited U.S., foreign or Guam professional nursing education program, upon application, payment of the required fee, and after verifying the applicant's official transcript and certificate of education; provided, however, that such applicant has received the Board's authorization to sit for the licensing examination immediately following such applicant's graduation.

(b) New graduates of U.S. Board-approved nursing education programs may be given a *temporary work permit* to practice nursing on Guam while waiting to take the first National Council Licensing Examination. This temporary work permit option is only available for a six-month period from the date of graduation. The graduate nurse must submit an application, an official transcript sent directly to the GBNE office and certification of nursing education to take the national examination within six (6) months from the date of graduation in order to qualify for the six-month GN Temporary Work Permit. Such candidates with temporary work permits:

(1) *Shall* be identified as and authorized to use the title ‘Graduate Registered Nurses (GN’S) or ‘Graduate Practical Nurses’ (GPN’S); and,

(2) May practice nursing only under the direct supervision of a licensed registered nurse and *shall* not assume charge responsibilities.

(c) The Board may issue a *temporary work permit* to applicants enrolled in refresher courses, to provide direct client nursing care as part of a nursing refresher course. The applicant *shall* have been previously licensed to practice. The refresher course may be for completing continued competence requirements, for seeking reinstatement of license or application for licensure by endorsement at the applied level of licensure.

(d) The Board may issue a *temporary work permit* to applicants for licensure as advanced practice registered nurse (APRN) to work under the supervision of another APRN or physician.

(e) A three (3) month temporary license/certification may be issued to an APRN, RN, LPN, or CNA applicant for endorsement upon submission:

(1) A completed and notarized application for endorsement;

(2) A current/valid license from a State or its territories as a registered nurse or practical/vocational nurse; or

(3) A current/valid National or State Board Certification as an APRN; or

(4) A current/valid State Board Certification as a nursing assistant; and,

(5) An official record of local, state and federal criminal background checks completed within the last two (2) months; and,

(6) Payment of appropriate fee.

(f) The temporary permit/license/certification is valid for a period of three months upon issuance for those seeking licensure by endorsement and six months for new graduates of accredited U.S., foreign or Guam professional nursing schools seeking licensure by examination for the first time.

(g) The board may use its discretion to extend the temporary work permit with the exception of APRNs [**Article 5, Section 5.6 f. (4) and (5)**] and *shall* not exceed six (6) months.

(h) The temporary work permit becomes null and void upon issuance of a current license, upon expiration, or upon withdrawal by Board action.

(i) It is the responsibility of the applicant to assure that the Endorsement Verification form is received by the Guam Board of Nurse Examiners from the jurisdiction of the original licensure prior to the expiration date of the temporary license.

(j) Internationally educated applicants for licensure by examination or endorsement are not eligible for a temporary work permit on Guam unless such applicant has been licensed by examination in another state or territory of the United States.

§ 6406. Retakes.

(a) All applicants wishing to retake the National Council Licensing Examination (NCLEX) exam *shall* submit a Retake Application for examination to the Board with a 2x2 passport-size photo taken within the past 3 months and payment of the retake examination fee.

(b) Applicants retaking the examination for the second or third time *shall* be responsible for self-study or available refresher course tutorial program.

(c) Applicants rewriting the examination for the fourth time *shall* be considered individually by the Board and *shall* be required to follow specific remedial measures, as prescribed by the Board.

(d) Applicants failing the NCLEX four or more times *shall* be considered individually by the Board and *shall* be required to satisfactorily complete a course of study in nursing approved by the Board. The course of study *shall* include theory and practice or follow equivalent remedial measures, as prescribed by the Board.

§ 6407. Arrival of Results.

(a) Candidates who pass *shall* receive:

(1) A "PASS" result

(2) The initial license

(3) An employment data information sheet

(4) A Certificate of Licensure

(5) A letter of transmittal which *shall* instruct the licensee that his/her score *shall* not be requested from this Board for purposes other than licensure.

(b) Candidates who fail *shall* receive:

(1) A "FAIL" result

(2) A diagnostic profile from testing center

(c) On -island school(s) of nursing *shall* receive:

(1) General information on graduates of respective schools:

(2) Copy of summary information for candidates from the program who were examined in this jurisdiction-PROGRAM NAME.

(3) Copy of percent of first-time candidates educated in member board jurisdiction that have met or exceeded scale scores.

(4) Copy of ranked means and score ranges for first-time candidates educated in member board jurisdictions.

(5) Copy of jurisdiction program summary of first-time candidates.

(6) Letter of transmittal to include scores of graduates who have signed authorization to release their scores with names to their respective school of nursing.

(d) The Board may release examination scores only upon the written authorization from the applicant or licensee.

(e) A copy of the examination scores *shall* be filed in each candidate's permanent record in the Board office.

§ 6408. Licensure by Endorsement.

(a) An RN or LPN applicant for licensure by endorsement in Guam *shall* submit to the Board the required fee for licensure by endorsement and a completed application for licensure by endorsement. Verification of current licensure in another jurisdiction, whether electronically or by paper copy, is required for licensure by endorsement.

(b) The Board *shall* verify licensure by examination by the state of original licensure and receive from that board information regarding graduation or successful program completion from a nursing education program for the level of license, date of original licensure and current licensure status in the jurisdiction.

(c) The Board *shall* also verify date of the applicant's licensure and licensure status with the state of most recent employment, if different from the state of original licensure.

(d) The applicant is required to provide evidence of having passed the licensure examination required by this jurisdiction at the time the applicant was initially licensed in another jurisdiction. Applicants must also provide evidence of continued competency requirements as prescribed in these rules.

(e) Other Requirements. In addition to these requirements, the applicant seeking licensure by endorsement must provide:

(1) Identification of any state, territory or country in which the applicant has held a health profession license or credentials other than nursing. Identification *shall* include the number and status of the license or credential and the original state or country of licensure or credentialing.

(2) Information about current employer if employed in health care, to include address, telephone number, position and date of employment.

(3) Information regarding previous employer in health care, if any, if current employment is less than 12 months.

(4) Information related to the applicant's background in the following areas:

(A) Disciplinary action or investigation regarding any professional license or credential.

(B) Any pending criminal charges - national or international.

(C) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction.

(D) Any chemical, physical or mental impairment and/or disability that impacts the nurse's ability to practice nursing safely, and a description of accommodations and/or practice limitations needed, if any.

(E) Any current substance abuse.

(5) Official record of local, state and federal criminal background checks completed within the last 2 months.

(f) The Board *shall* review applications only after all the above requirements have been submitted.

§ 6409. Special Licensure Situations.

(a) Nurses transporting patients in and out of Guam *shall* be currently licensed in the jurisdiction in which they are employed.

(b) Nurses from other U.S. jurisdictions or its territories attending or providing short (90 days or less) continuing education courses or participating in clinical preceptorship experiences *shall* hold a current license to practice in at least one U.S. jurisdiction or its territories.

(c) Licensed nurses from other U.S. jurisdictions or its territories that provide care during an official declared emergency or disaster situation *shall* not be required to obtain a Guam license to practice nursing.

§ 6410. Continuing Education Requirements.

(a) All licensed nurses *shall* submit evidence of thirty (30) hours of Continuing Education (CE) activities/seminars within the renewal period.

(b) Exemptions for first-time renewals. If a licensed nurse obtained his/her initial RN or LPN license by passing the NCLEX within the past six (6) months and this is the first renewal, the RN/LPN may be exempted from the CE requirement.

(c) Licensed nurses who have been practicing but do not meet the thirty (30) hours of CE requirements at the time of renewal, may be issued a “conditional license” to last no more than three (3) months to fulfill the CE requirements.

§ 6411. Application for Renewal of License as a Registered Nurse or Licensed Practical Nurse.

(a) Registered, Practical and APRN nurse licenses *shall* be renewed biennially by September 30 of odd numbered years.

(b) The licensee *shall* submit to the Board a completed renewal application form, verification of continuing education requirements, renewal fee and other required documents, on or before the expiration date of the license.

(c) Information pertaining to the applicant’s background in the following areas *shall* also be required of the licensee to submit to the Board:

(1) Pending disciplinary action or investigation regarding any professional license or credential;

(2) Any pending criminal charges - national or international **conviction**;

(3) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction since the last renewal;

(4) Any chemical, physical or mental impairment and/or disability that impacts the nurse’s ability to practice nursing safely, and a description of accommodations and/or practice limitations needed, if any;

(5) Any current substance abuse;

(6) A detailed explanation and supporting documentation for any of the above information.

(7) Official record of local, state and federal criminal background checks completed within the last two (2) months.

(d) A license *shall* be issued upon submission and verification of all documents.

(e) Applications for renewal *shall* be mailed to the last known address of the licensee. Failure to receive the application for renewal *shall* not relieve the licensee of the responsibility for renewing the license by the renewal date.

(f) Failure to renew the license *shall* result in forfeiture of the right to practice nursing in Guam.

(g) 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 Section 12328 Nurse Practice Act.

§ 6412. Reinstatement of Lapsed or Inactive License.

(a) A nurse who has allowed his or her license to lapse or become inactive may apply for reinstatement upon:

(1) Submission of completed application for reinstatement.

(2) Verification of at least thirty (30) hours of approved continuing education (CE) activities/seminars is required at the time of application for reinstatement.

(3) Payment of appropriate fee.

(b) Other requirements. In addition to these requirements, the applicant seeking licensure by reinstatement must provide:

(1) Identification of any state, territory or country in which the applicant holds a health profession license or credentials other than nursing. Identification *shall* include the number and status of the license or credential and the original state or country of licensure or credentialing.

(2) Information about current employer if employed in health care, to include address, telephone number, position and date of employment.

(3) Information regarding previous employer in health care, if any, if current employment is less than 12 months.

(4) Information related to the applicant's background in the following areas:

(A) Pending disciplinary action or investigation regarding any professional license or credential.

(B) Any pending criminal charges - national or international.

(C) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction.

(D) Any chemical, physical or mental impairment and/or disability that impacts the nurse's ability to practice nursing safely, and a description of accommodations and/or practice limitations needed, if any.

(E) Any current substance abuse.

Official record of local, state and federal criminal background checks completed within the last 2 months.

(c) The Board *shall* review applications only after all the above requirements have been submitted.

(d) At any time after a license has lapsed or been inactive, the Board may require evidence of the licensee's current nursing knowledge and skill before reinstating the license to the status of active license.

(e) An individual who applies for licensure reinstatement who has been out of practice for three (3) years or longer *shall* provide evidence of passing a nursing refresher course approved by the Board.

§ 6413. Reinstatement Following Disciplinary Action.

Individuals applying for reinstatement following disciplinary action must meet compliance with all Board licensure requirements as well as any specific requirements set forth in the Board's discipline proceedings.

§ 6414. Verification of License to Another Jurisdiction

(a) Nurses requesting verification of license to another jurisdiction *shall* submit a signed release of information.

(b) The request *shall* be accompanied by the fee for license verification.

§ 6415. Licensure/Certification Issued in Error.

The Board reserves the right to revoke licenses/certifications issued in error by the previous or current Board.

ARTICLE 5 – ADVANCED PRACTICE REGISTERED NURSE (APRN)*

§ 6501. Purpose.

To assure the health, safety, and welfare of the people of Guam by regulating the practice of the Advanced Practice Registered Nurse (APRN).

(a) The APRN *shall* comply with the standards for RNs as specified in Title 25, Chapter 6, Article 3, Guam Administrative Rules and Regulations, 10 GCA Chapter 12, Article 3, and to the standards of the national professional nursing associations recognized by the Guam Board of Nurse Examiners (GBNE). Standards for a specific role and population focus of APRN supersede standards for RNs where conflict between the standards, if any, exists.

(b) APRNs *shall* practice within standards established by the Board in rule and assure patient care is provided according to relevant patient care standards recognized by the Board, including standards of national professional nursing associations.

§ 6502. Definitions.

(a) Act means the Nurse Practice Act, 10 GCA, Chapter 12, Article 3.

(b) Advanced Nursing Practice means the delivery of nursing care at an advanced level of independent nursing practice that maximizes the use of graduate educational preparation, and in-depth nursing knowledge and expertise in such roles as autonomous clinical practitioner; professional and clinical leader, expert practitioner, and researcher.

(c) Advanced Practice Registered Nurse (APRN) means a registered nurse who has obtained formal graduate education and national specialty certification through a commission-approved, certifying body and is authorized by the Board to perform advanced nursing practice in

* Article 5 amended in its entirety by P.L. 34-78 (Feb. 9, 2018).

one (1) or more of the designations, and who is licensed as an APRN. The designations include the following:

- (1) Nurse Practitioner (NP);
- (2) Certified Registered Nurse Anesthetist (CRNA);
- (3) Certified Nurse Midwife (CNM); and
- (4) Clinical Nurse Specialist (CNS).

(d) Board means the Guam Board of Nurse Examiners.

(e) Certification means recognition by examination acceptable as an element of eligibility for APRN licensure, the applicant's advanced knowledge, skills and abilities attained through a defined program of study preparing the graduate in one (1) of the four (4) recognized APRN roles (NP, CRNA, CNM, CNS) by a national organization recognized by the Board. The certification process measures the theoretical and clinical content denoted in the advanced scope of practice, and is developed in accordance with generally accepted standards of validation and reliability. These national organizations include:

(1) For NP designation:

- (A) the American Academy of Nurse Practitioners;
- (B) the American Nurses Credentialing Center;
- (C) the National Certification Corporation;
- (D) the Pediatric Nursing Certification Board;
- (E) the American Association of Critical Care Nurses; or
- (F) the Oncology Nursing Certification Corporation.

(2) For CNM designation: the American Midwifery Certification Board.

(3) For CRNA designation: the National Board of Certification and Recertification for Nurse Anesthetists.

(4) For CNS designation:

- (A) the American Nurses Credentialing Center;
- (B) the American Association of Critical Care Nurses; or
- (C) the Oncology Nursing Certification Corporation.

(f) Certified Registered Nurse Anesthetist (CRNA) means a registered professional nurse who has successfully completed graduate educational preparation from a nurse anesthetist program, is currently certified by the National Board of Certification and Recertification for Nurse Anesthetists, and is licensed by the Board.

(g) Nurse Practitioner (NP) means a registered professional nurse who has successfully completed graduate educational preparation from a nurse practitioner program, is licensed to practice by the Board, and is currently certified by a nationally recognized certifying agent of the appropriate advanced nursing practice organization. For example, the certifying agent of:

- (1) the American Academy of Nurse Practitioners;
- (2) the American Nurses Credentialing Center;
- (3) the National Certification Corporation;
- (4) the Pediatric Nursing Certification Board;
- (5) the American Association of Critical Care Nurses; or
- (6) the Oncology Nursing Certification Corporation.

(h) Certified Nurse-Midwife (CNM) means a registered professional nurse who has successfully completed graduate educational preparation from a nurse-midwifery program and is currently certified by a nationally recognized certifying agent of the appropriate advanced nursing practice organization. For example, the certifying agent of the American Midwifery Certification Board, and is licensed to practice by the Board.

(i) Clinical Nurse Specialist (CNS) means a registered nurse who has graduated from a program of graduate study with supervised clinical practice in an area of specialty, is licensed to practice by the Board, and is certified by the nationally recognized certifying agent in the appropriate specialty. For example; the certifying agent of

- (1) the American Nurses Credentialing Center;
- (2) the American Association of Critical Care Nurses; or
- (3) the Oncology Nursing Certification Corporation.

(j) Consultation means conferring with another health care provider for the purpose of obtaining information or advice.

(k) Diagnosis means identification of actual or potential health problems and the need for intervention based on analysis of data collected. Diagnosis depends upon the synthesis of information obtained during the interview, physical exam and/or diagnostic tests.

(l) Intervention means measures to promote health, protect against disease, treat illness in its earliest stages, manage acute and chronic illness, and treat disability. Interventions may include, but are not limited to, ordering diagnostic studies, performing direct nursing care, prescribing pharmacologic, non-pharmacologic, or other therapies and consultation with or referral to other health care providers.

(m) Inactive status means the status of the licensed APRN who voluntarily chooses not to engage in APRN practice during the succeeding year and chooses not to renew his/her license at the time of renewal. The APRN *shall* not be required to pay the renewal fee as long as he/she remains inactive. This status must be officially requested in writing by the licensee prior to the expiration of his/her license. Should the APRN wish to résumé his/her APRN practice at some future time, he/she *shall* notify the Board and become reinstated by meeting such requirements as the Board may prescribe.

(n) Lapsed license means the termination of an individual's APRN license to practice due to the license holder's failure to renew his/her license within a specified period of time, and is therefore unauthorized to practice.

(o) License means a current document permitting the practice of nursing as an APRN.

(p) Practitioner means an APRN, as defined in 10 GCA, Chapter 12, Article 3, who is authorized to prescribe, order or administer drugs in connection with medical treatment to the extent provided by the rules and regulations of the practitioner's respective Board.

(q) Prescription means an order for drugs, treatment, diagnostic studies or devices written, signed, or transmitted by word of mouth or telephone by those licensed to prescribe or a practitioner of the healing arts.

(r) Prescriptive and Dispensing Authority means the legal permission to prescribe deliver, distribute and dispense pharmacologic and non-pharmacologic agents in compliance with Board rules and applicable federal and Guam laws. Pharmacologic agents include legend and schedule II through V controlled substances.

§ 6503. Titles and Abbreviations.

(a) Individuals are licensed or granted privilege to practice as APRNs in the roles of nurse practitioner (NP), certified registered nurse anesthetist (CRNA), certified nurse-midwife (CNM), and clinical nurse specialist (CNS) in the population focus of family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related or psychiatric/mental health, and others regulated by national certification.

(b) Each APRN *shall* use the designation "APRN" followed by role title, as a minimum, for purposes of identification and documentation. The APRN may only identify as a doctor, or use the abbreviation "Dr." in a healthcare context, upon earning a doctorate degree from an accredited institution of higher education in a relevant discipline, such as Doctor of Nursing Practice (DNP); Doctor of Nurse Anesthesia Practice (DNAP); Doctor of Philosophy in Nursing (PhD); or another related doctorate degree in a healthcare discipline.

(c) When providing nursing care, the APRN *shall* provide clear identification that indicates his or her APRN designation.

§ 6504. Scope of Practice for the Advanced Practice Registered Nurse.

The scope of practice of a licensed APRN is as provided in this Section.

(a) The APRN is prepared and qualified to assume primary responsibility and accountability for the care of patients.

(b) APRN practice is grounded in nursing process and incorporates the use of independent judgment. Practice includes interdisciplinary consultation with other health care professionals in the assessment and management of wellness and health conditions.

(c) The APRN functions within a scope of practice following the standards of care defined by the applicable national certifying body. An APRN may choose to limit the area of practice within the approved national certification.

(d) An APRN *shall* obtain instruction, supervision, and consultation as necessary before implementing new or unfamiliar techniques or practices within the scope of national certification.

(e) Performing within the scope of the APRN's knowledge, experience and practice, the licensed APRN may perform the following:

- (1) examine patients and establish diagnoses by patient history, physical examination, and other methods of assessment;
- (2) admit, manage, and discharge patients to and from health care facilities;
- (3) order, collect, perform, and interpret diagnostic tests;
- (4) manage health care by identifying, developing, implementing, and evaluating a plan of care and treatment for patients;
- (5) prescribe therapies and medical equipment;
- (6) prescribe medications when granted prescriptive authority under this Chapter;
- (7) refer patients to other health care practitioners, services, or facilities; and
- (8) perform procedures, provide care services, or provide duties that are within the APRN's scope of practice according to their national certification.

(f) Supervision of Support Staff. The APRN may delegate to employees or support staff activities relating to advanced practice registered nursing carried out by custom and usage when

the activities are under the control and direct supervision of the APRN. The APRN is legally liable for properly delegated activities, and the employee or support staff to which the APRN has delegated activities is considered the APRN's agent when performing such activities.

(g) Global Signature Authority of an Advanced Practice Registered Nurse (APRN). When a provision of law or administrative rule requires a signature, certification, stamp, verification, affidavit or endorsement by a physician, that requirement may be fulfilled by an advanced practice registered nurse. This Section may not be construed to expand the scope of practice of an advanced practice registered nurse.

§ 6505. Licensure.

(a) Application for Initial Licensure.

(1) An applicant for licensure as an APRN in Guam *shall* submit to the Board the required nonrefundable fees, verification of licensure or eligibility for licensure as an RN in this jurisdiction, and a completed notarized application that provides the following information:

(A) Graduation from an APRN graduate or post-graduate program as evidenced by official transcript (including electronic versions) received directly from an APRN program accredited by the Accreditation Commission for Education in Nursing (ACNE), the Commission on Collegiate Nursing Education (CCNE), or the National League for Nursing Commission for Nursing Education Accreditation (CNEA), or its successor organization, as acceptable by the Board.

(B) The official transcript *shall* verify the date of graduation; credential conferred; number of clinical hours completed; completion of three (3) separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education.

(2) In order to be licensed in Guam, all APRN applicants must be currently licensed as an RN or hold a privilege to practice as an RN in Guam.

(3) In order to be licensed in Guam, all APRN applicants must take and pass the appropriate APRN national certification examination in the APRN role and population focus congruent with educational preparation.

(4) The Board *shall* determine whether a certification program can be used as a requirement for licensure of APRNs based upon the following standards:

(A) the program IS national In the scope of its credentialing;

(B) educational requirements are consistent with the requirements of the advanced practice role and population focus; and

(C) certification programs are accredited by CCNE or its successor organization, as acceptable by the Board.

(b) Application for Licensure by Endorsement.

An applicant for licensure by endorsement as an APRN in Guam *shall* submit to the Board the required nonrefundable fees, verification of eligibility for a license or privilege to practice as

an RN in this jurisdiction, and a completed, notarized application that provides the following information:

(1) Graduation from an APRN graduate or post-graduate program, as evidenced by an official transcript (including electronic versions) received directly from an APRN program accredited by the Accreditation Commission for Education in Nursing (ACNE), the Commission on Collegiate Nursing Education (CCNE), or the National League for Nursing Commission for Nursing Education Accreditation (CNEA), or its successor organization, as acceptable by the Board.

(2) The official transcript *shall* verify the date of graduation; credential conferred; number of clinical hours completed; completion of three (3) separate graduate level courses in advanced physiology and pathophysiology, advanced health assessment, advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents; role and population focus of the education program; and evidence of meeting the standards of nursing education.

(3) Current certification by a national certifying body in the APRN role and population focus appropriate to educational preparation. Primary source of verification of certification is required.

(4) If the applicant has not been in clinical practice for more than the past two (2) years, and is not a recent graduate within two (2) years, the applicant *shall* provide evidence of satisfactory completion of sixty (60) contact hours, forty-five (45) in pharmacotherapeutics and fifteen (15) in the clinical management of patients, within the two (2) years prior to applying for approval to practice.

(5) If the applicant has not been in clinical practice for more than the past five (5) years; the applicant *shall* provide evidence of satisfactory completion of, at minimum, forty-five (45) contact hours of advanced pharmacology and forty-five (45) contact hours in a subject or subjects related to the role and population focus of certification. Upon completion of the coursework, the APRN *shall* engage in a supervised clinical component by a qualified preceptor in the appropriate advanced practice role and population focus. The APRN *shall* complete hours according to the following schedule:

(A) three hundred (300) hours if the applicant has practiced less than nine hundred sixty (960) hours in the last five (5) years;

(B) six hundred (600) hours if the applicant has practiced less than nine hundred sixty (960) hours in the last five (5) years, but has practiced at least nine hundred sixty (960) hours in the last six (6) years.

(C) one thousand (1000) hours if the applicant has not practiced at least nine hundred sixty (960) hours in the last six (6) years, but has practiced nine hundred sixty (960) hours in the last seven (7) to ten (10) years; or

(6) If the nurse has not practiced in the advanced practice nursing role and population focus for ten (10) or more years he or she will be ineligible for renewal in Guam.

(7) Qualified preceptor must meet the following requirements:

(A) holds an active license or privilege to practice as an APRN or physician that is not encumbered and practices in a comparable practice focus; and

(B) functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting.

(8) At the end of the supervised period, the supervisor *shall* provide a written evaluation of the applicant on a company letterhead. The evaluation will verify whether or not the applicant has successfully completed the required hours. If the supervision period was successful, the letter must state that the applicant's knowledge and skills are at a safe and appropriate level to practice as an APRN.

(c) Application for License Renewal.

An applicant for license renewal as an APRN *shall* submit to the Board the proof of payment of required fee for license renewal, and a completed, notarized license renewal application including:

(1) detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background; and

(2) evidence of current certification(s), or recertification as applicable, by a national professional certification organization that meets the requirements of § 5.2(e) of this Article.

(3) Renewal of licensure is subject to the following:

(A) License as an APRN *shall* be renewed biennially at the same time the license to practice as a registered nurse in Guam is renewed.

(B) Failure to receive renewal notice does not relieve anyone of the responsibility of renewing his/her own APRN license.

(C) At any point that such national certification expires it is the responsibility of the APRN to submit a renewed certification to the board.

(4) If the applicant has not been in clinical practice for more than the past two (2) years, the applicant *shall* provide evidence of satisfactory completion of sixty (60) contact hours, forty-five (45) in pharmacotherapeutics and fifteen (15) in the clinical management of patients, within the two (2) years prior to applying for approval to practice.

(5) If the applicant has not been in clinical practice for more than the past five (5) years, the applicant *shall* provide evidence of satisfactory completion of, at minimum, forty-five (45) contact hours of advanced pharmacology and forty-five (45) contact hours in a subject or subjects related to the role and population focus of certification. Upon completion of the coursework, the APRN *shall* engage in a supervised clinical component by a qualified preceptor in the appropriate advanced practice role and population focus. The APRN *shall* complete hours according to the following schedule:

(A) three hundred (300) hours if the applicant has practiced less than nine hundred sixty (960) hours in the last five (5) years;

(B) six hundred (600) hours if the applicant has practiced less than nine hundred sixty (960) hours in the last five (5) years, but has practiced at least nine hundred sixty (960) hours in the last six (6) years; or

(C) one thousand (1000) hours if the applicant has not practiced at least nine hundred sixty (960) hours in the last six (6) years, but has practiced nine hundred sixty (960) hours in the last seven (7) to ten (10) years.

(6) If the nurse has not practiced in the advanced practice nursing role and population focus for ten (10) or more years he or she will be ineligible for renewal in Guam.

(7) Qualified preceptor must meet the following requirements:

(A) holds an active license or privilege to practice as an APRN or physician that is not encumbered and practices in a comparable practice focus; and

(B) functions as a supervisor and teacher and evaluates the individual's performance in the clinical setting.

(8) At the end of the supervised period, the supervisor *shall* provide a written evaluation of the applicant on a company letterhead. The evaluation will verify whether or not the applicant has successfully completed the required hours. If the supervision period was successful, the letter must state that the applicant's knowledge and skills are at a safe and appropriate level to practice as an APRN.

(d) Quality Assurance/Documentation and Audit. The Board may conduct a random audit of nurses to verify current APRN certification or continuing education. Upon request of the Board, licensees *shall* submit documentation of compliance.

(e) Lapsed License.

(1) A license is lapsed if it was not renewed or placed in an inactive status by the expiration date.

(2) Any licensee whose license has lapsed may apply for reinstatement.

(3) Any person engaged in advanced practice during the time his or her license has lapsed *shall* be considered an illegal APRN and *shall* be subject to applicable penalties for violation of the Nurse Practice Act.

(f) Reinstatement of License. When seeking reinstatement of APRN licensure, a licensee is subject to the licensing requirements provided by 10 GCA §§ 12311, 112313, 12315, in addition to the following:

(1) A licensee applying for reinstatement of an APRN license following disciplinary action *shall* be in compliance with all Board licensure requirements, as well as any specified requirements set forth in the Board's discipline order.

(2) A licensee applying for reinstatement of an APRN license following suspension or revocation *shall*:

(A) petition the Board for a hearing;

(B) present evidence that she/he is currently licensed to practice nursing in Guam; and

(C) present evidence, as required by the Board, that she/he is competent to practice as a practitioner in Guam.

(3) A licensee applying for reinstatement of a lapsed APRN license *shall*:

(A) submit the required application and reinstatement fee;

(B) be currently licensed as a registered nurse in Guam; and

(C) meet the requirements for renewal of license.

(4) Reinstatement of Inactive License. The APRN may request in writing to be placed on inactive status. In this status, the licensee may not function in an APRN capacity until such license is reactivated. To be placed on inactive status, the APRN, prior to the

expiration date or his/her license, *shall* submit a written request to be placed on inactive status. A licensee applying for reinstatement of an inactive license *shall*:

- (A) submit the required application for reinstatement and the fee;
- (B) be currently licensed as a registered nurse in Guam;
- (C) be currently certified as an APRN by a nationally recognized certifying agent of the appropriate advanced practice organization; and
- (D) meet the requirements for renewal of license.

(g) Temporary APRN License.

(1) A temporary APRN license may be issued by the Board to the APRN who holds a current national certification to practice as an Advanced Practice Registered Nurse upon submission of the following:

- (A) an application to meet the temporary license requirement to practice as a registered professional nurse;
- (B) documentation as required by these rules and regulations for license as an APRN; and
- (C) the non-refundable initial licensure fee and the temporary APRN licensure fee.

(2) The temporary APRN license is valid for a period of three (3) months upon issuance. The temporary APRN license becomes null and void upon issuance of a current license, upon expiration, or upon withdrawal by board action. The temporary license is not renewable.

(3) An APRN's license *shall* be automatically suspended upon the occurrence of any of the following:

- (A) failure of the APRN to attain recertification from the national certifying body. The APRN may not practice as or use the title of certified or licensed APRN until she/he has submitted to the Board a copy of current national certification. The license must be returned immediately to the Board; or
- (B) the revocation of the APRN's national certification for any reason. The APRN *shall* notify the Board immediately in writing and *shall* not practice as or use the title of certified or licensed APRN until she/he has submitted to the Board a copy of a current national certification. The license must be returned immediately to the Board.

(4) It is the responsibility of the APRN to maintain and submit a current national certification to the Board.

§ 6506. APRN Education.

(a) Required Criteria for APRN Education Programs.

The Guam Board of Nurse Examiners *shall* determine whether an APRN education program meets the qualifications for the establishment of a program based upon the following standards:

(1) An APRN program *shall* appoint the following personnel:

- (A) An APRN program administrator, whose IO qualifications *shall* include:

- (i) a current, active APRN license or privilege to practice that is not encumbered in the state where the program is approved and/or accredited;
- (ii) a doctoral degree in a health-related field;
- (iii) at least two (2) years of clinical experience as an APRN; and
- (iv) a current national APRN certification.

(B) A lead faculty member, educated and nationally certified in the same role and population foci and licensed as an APRN, who *shall* coordinate the educational component, including curriculum development, for the role and population foci in the APRN program.

(C) Nursing faculty, to teach any APRN nursing course that includes a clinical learning experience, whose qualifications *shall* include:

- (i) a current, active APRN license or privilege to practice that is not encumbered in the state where the program is approved and/or accredited;
- (ii) a minimum of a master's degree in nursing or health-related field in the clinical specialty;
- (iii) two (2) years of APRN clinical experience; and
- (iv) current knowledge, competence and certification as an APRN in the role and population foci consistent with teaching responsibilities.

(D) Adjunct clinical faculty, employed solely to supervise clinical nursing experiences of students, who *shall* meet all the faculty qualifications for the program level they are teaching.

(E) Interdisciplinary faculty, to teach non-clinical nursing courses, who *shall* have advanced preparation appropriate to these areas of content.

(F) Clinical preceptors, who *shall* have demonstrated competencies related to the area of assigned clinical teaching responsibilities, will serve as a role model and educator to the student. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences but not to replace them.

Clinical preceptors will be approved by faculty and *shall* meet the following requirements:

- (i) hold an active license or privilege to practice that is not encumbered as an APRN or physician and practices in a comparable practice focus; and
- (ii) function as a supervisor and teacher and evaluate the individual's performance in the clinical setting.

(2) The curriculum of the APRN nursing education program must prepare the graduate to practice in one (1) of the four (4) identified APRN roles (NP, CRNA, CNM, CNS), and at least one (1) of the six (6) population foci provided by 10 GCA § 12313(a)(2).

The curriculum *shall* include:

(A) Three (3) separate graduate level courses (the APRN core) in:

- (i) advanced physiology and pathophysiology, including general principles that apply across the lifespan;
- (ii) advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and
- (iii) advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.

(B) Diagnosis and management of diseases across practice settings, including diseases representative of all systems.

(C) Preparation that provides a basic understanding of the principles for decision making in the identified role.

(D) Preparation in the core competencies for the identified APRN role.

(E) Role preparation in one (1) of the six (6) population foci of practice.

(3) Additional required components of graduate or post-graduate education programs preparing APRNs *shall* include the following:

(A) Each student enrolled in an APRN program *shall* have an RN license or privilege to practice that is not encumbered in the state of clinical practice, unless exempted from this licensure requirement by any law, rule, or regulation.

(B) Education programs offered by an accredited college or university that offers a graduate degree with a concentration in the advanced nursing practice role and at least one (1) population focus; or post-masters certificate programs offered by an accredited college or university which *shall* include the following components:

(i) clinical supervision congruent with current national professional organizations and nursing accrediting body standards applicable to the APRN role and population focus; and

(ii) curriculum that is congruent with national standards for graduate level and advanced practice nursing education and is consistent with nationally recognized APRN roles and population foci, and includes, but is not limited to:

(aa) graduate APRN program core courses; and

(bb) an advanced practice nursing core, including legal, ethical, and professional responsibilities of the APRN.

(C) The curriculum *shall* be consistent with competencies of the specific areas of practice.

(D) APRN programs preparing for two (2) population foci or combined nurse practitioner/clinical nurse specialist *shall* include content and clinical experience in both functional roles and population foci.

(E) Each instructional track/major *shall* have a minimum of five hundred (500) supervised clinical hours as defined by the Board. The supervised experience is directly related to the role and population foci, including 1pharmacotherapeutic management of patients.

(F) There *shall* be provisions for the recognition of prior learning and advanced placements in the curriculum for individuals who hold a master's in nursing and are seeking preparation in a different role and population focus. Post-master's nursing students *shall* complete the requirements of the master's APRN program through a formal graduate level certificate in the desired role and population focus. Post-master's students must meet the same APRN outcome competencies as the master's level students.

(b) Determining Compliance with Standards. The Board *shall* determine compliance with the APRN education standards as set forth in this Section, and consistent with procedures for determining approved schools of nursing under 10 GCA § 12321.

(c) Establishment of a New APRN Education Program. Before establishing a new nursing education program, the APRN program *shall* complete the process outlined below:

(1) Application to the professional accrediting body: the Accreditation Commission for Education in Nursing (ACNE), the Commission on Collegiate Nursing Education (CCNE), or the National League for Nursing Commission for Nursing Education Accreditation (CNEA).

(2) The proposed program *shall* provide the following information to the Board:

(A) results of a needs assessment, including identification of potential students and employment opportunities for program graduates;

(B) identification of sufficient financial and other resources;

(C) governing institution approval and support;

(D) community support;

(E) type of educational program proposed;

(F) clinical opportunities and availability of resources;

(G) availability of qualified faculty;

(H) a pool of available students; and

(I) a proposed timeline for initiating and expanding the program.

§ 6507. Prescriptive Authority.

(a) Requirements for Prescribing, Ordering, Dispensing and Furnishing Authority.

(1) An APRN licensed by the Board may prescribe, order, procure, administer, dispense and furnish over the counter, legend and controlled substances pursuant to applicable state and federal laws, and within the APRN's role and population focus.

(2) Written, verbal or electronic prescriptions and orders *shall* comply with all applicable state and federal laws.

(3) All prescriptions *shall* include, but not be limited to, the following information:

(A) name, title, address, and phone number of the APRN who is prescribing;

(B) name of patient;

(C) date of prescription;

(D) full name of the drug, dosage, route, amount to be dispensed, and directions for its use;

(E) number of refills;

(F) signature of prescriber on written prescription; and

(G) DEA number of the prescriber on all scheduled 1 drugs.

(i) The APRN *shall* comply with Federal Drug Enforcement Administration (DEA) requirements related to controlled substances.

(ii) The APRN *shall* immediately file any and all of the nurse's DEA registrations and numbers with the Board.

(4) The Board *shall* maintain current records of all APRNs with DEA registration and numbers.

(b) Continuing Education Requirements for APRN Prescriptive Authority and License Renewal. The APRN must complete five (5) hours of pharmacotherapeutic continuing education (for prescriptive authority) of the required thirty (30) contact hours of continuing education

required for the two (2)-year renewal of APRN licensure. The continuing education required for licensure must:

- (1) relate to the APRN's scope of certification and scope of practice;
- (2) be obtained from continuing education courses in which the contact hour time is not less than fifty (50) minutes; and
- (3) not include the same course taken more than once during the renewal cycle.

Precepting an APRN student at an accredited university, at the advanced health care professional level is an option that may be used at a conversion rate of the maximum one hundred twenty (120) preceptor hours, not-to-exceed twenty-five (25) non-pharmacology credits.

(c) Distribution of Samples.

- (1) APRNs may receive, sign for, record, and distribute samples to patients.
- (2) Distribution of drug samples *shall* be in accordance with state law and DEA laws, regulations and guidelines.

(d) Discipline.

- (1) APRN discipline and proceedings is the same as stated in § 5.10 of this Article.
- (2) The Board may limit, restrict, deny, suspend, or revoke APRN licensure, or prescriptive or dispensing authority.
- (3) Additional grounds for discipline related to prescriptive or dispensing authority include, but are not limited to:

(A) prescribing, dispensing, administering, or distributing drugs in an unsafe manner or without adequate instructions to patients according to acceptable and prevailing standards;

(B) selling, purchasing, trading, or offering to sell, purchase or trade drug samples;

(C) prescribing, dispensing, administering, or distributing drugs for other than therapeutic or prophylactic purposes; or

(D) prescribing or distributing drugs to individuals who are not patients of the APRN, or who are not within that nurse's role and population focus.

(e) Termination of Prescriptive Authority.

(1) Prescriptive authority may be terminated by the Board when the prescriber:

(A) fails to maintain current active licensure as an RN and or as an APRN;

(B) violates provisions of the Nurse Practice Act, 10 GCA, Chapter 12, Article 3; 25 GAR, Chapter 6; or the Guam Pharmacy Practice Act, 10 GCA, Chapter 12, Article 6; 25 GAR, Chapter 13; or

(C) violates Guam or federal laws, rules, or regulations applicable to prescriptions.

(2) Lapsed Prescriptive Authority.

(A) The authority to prescribe is automatically terminated if the APRN's license is not renewed or placed in an inactive status by the expiration date.

(B) Any licensee whose prescriptive authority has lapsed or been inactive over a twenty-four (24)-month period must submit to the Board:

(i) a new application for prescriptive authority and a current license as an APRN; and

(ii) pay the non-refundable reinstatement fee.

(3) Any person engaged in practicing within the scope of his or her certificate of prescriptive authority during the time his or her APRN license has lapsed *shall* be considered an illegal practitioner and is subject to the penalties provided for violation of the Nurse Practice Act.

(4) Inactive Status.

(A) A prescriptive authority will automatically be considered lapsed and subject to the requirements of these rules when a licensee places his or her APRN license in inactive status.

(B) While the prescriptive authority or APRN license is inactive, the licensee *shall* not engage in any practice within the scope of an APRN with prescriptive authority.

(C) If the APRN desires to resume practice in Guam, he or she *shall* request a reinstatement/renewal application, which *shall* be completed and submitted with a renewal fee or reinstatement fee. Fees are nonrefundable.

(D) All licensure requirements for reinstatement/renewal *shall* apply.

(E) If disciplinary proceedings on an inactive license has been initiated, the license *shall* not be reinstated/renewed until the proceedings have been completed.

§ 6508. Implementation.

(a) All new graduates applying for APRN licensure must meet the stipulated licensure requirements.

(b) An APRN applying for licensure by endorsement in another state may be eligible for licensure if the applicant demonstrates that the following criteria have been met:

(1) current, active practice in the advanced role and population focus area;

(2) current active national certification or recertification, as applicable, in the advanced role and population focus area;

(3) compliance with the APRN educational requirements of the state in which the APRN is applying for licensure that were in effect at the time the APRN completed his or her APRN education program; and

(4) compliance with all other criteria set forth by the GBNE in Guam, e.g. continuing education.

§ 6509. Name or Address Change.

(a) A licensee whose name is legally changed *shall* be issued a replacement license following submission of the current license, along with an affidavit, copy of marriage license or court action, and the required reissuance fee.

(b) A licensee whose address changes from the address appearing on the current license *shall* immediately notify the Board of the change. The Board *shall* not issue a new license, but *shall* make such changes in current license files.

§ 6510. Disciplinary Provisions.

(a) The Board may deny licensure or re-licensure, revoke or suspend licensure, place on probation and censure or reprimand an APRN upon proof that the license holder:

(1) has a license to practice nursing revoked or suspended or has been otherwise disciplined;

(2) uses the title APRN, or any similar title, or acts as an APRN without having obtained a license pursuant to these rules and regulations;

(3) exceeds her/his authority as an APRN;

(4) represents herself/himself to the public as a physician;

(5) violates or cooperates in the violation of the laws or regulations governing the practice of medicine, nursing, or APRNs;

(6) becomes unable to practice with reasonable skill and safety as the result of physical or mental illness or the excessive use of alcohol, drugs, narcotics, chemicals, or any other substance; or

(7) violates or attempts to violate or cooperates with others in violating or attempting to violate any law, rule or regulation, territorial, state, or federal, relating to the possession, use, dispensing, administration, or distribution of drugs.

(b) Hearing.

(1) The provisions of the Administrative Adjudication Law, 5 GCA Chapter 9, *shall* govern proceedings on questions of violation of these regulations.

(2) The Commission on Licensure to practice the Healing Arts in Guam, as well as the APRN's employer, *shall* be notified promptly of any complaint filed with the Board against an APRN. The Commission on Licensure to practice the Health Arts in Guam and the APRN's employer *shall* be informed of any action taken by the Board.

(3) The Board *shall* conduct all hearings prescribed herein and *shall* take appropriate action."

ARTICLE 6 – NURSING EDUCATION

§ 6601. Legal Authorization.

Title 10 Guam Code Annotated, Sections 12307 and 12321, authorizes the Board of Nurse Examiners to adopt administrative rules and regulations which establishes standards concerning approval of practical nursing, basic and advanced nursing education/training programs on Guam.

§ 6602. Purpose of Nursing Education Standards.

(a) To ensure that graduates of nursing education programs are prepared for safe and effective nursing practice.

(b) To establish criteria for the development, evaluation and improvement of new and existing nursing education programs.

(c) To assure candidates are educationally prepared for licensure and recognition at the appropriate level and to facilitate their licensure by endorsement in other jurisdictions.

§ 6603. Nursing Education Standards.

All nursing education programs *shall* meet these standards:

(a) The purpose and outcomes of the nursing program *shall* be consistent with the Nurse Practice Act and Board-promulgated administrative rules, regulations and other relevant state statutes.

(b) The purpose and outcomes of the nursing program *shall* be consistent with generally accepted standards of nursing practice appropriate for graduates of the type of nursing program offered.

(c) The input of consumers *shall* be considered in developing and evaluating the purpose and outcomes of the program.

(d) The nursing program *shall* implement a comprehensive, systematic plan for ongoing evaluation that is based on program outcomes and incorporates continuous improvement.

(e) The curriculum *shall* provide diverse didactic and clinical learning experiences consistent with program outcomes.

(f) Faculty and students *shall* participate in program planning, implementation, evaluation, and continuous improvement.

(g) The nursing program administrator *shall* be a professionally and academically qualified registered nurse with institutional authority and administrative responsibility for the program.

(hi) Professionally, academically and clinically qualified nurse faculty *shall* be sufficient in number and expertise to accomplish program outcomes and quality improvement.

(i) The fiscal, human, physical, clinical and technical learning resources *shall* be adequate to support program processes, security and outcomes.

(k) Program information communicated by the nursing program *shall* be accurate, complete, consistent and readily available.

§ 6604. Required Criteria For Nursing Education Programs.

The organization and administration of the nursing education program *shall* be consistent with the laws governing the practice of nursing. The nursing education program *shall* be an integral part of a governing academic institution that is accredited by a body recognized by the U. S. Secretary of Education, or other accrediting organization acceptable to the Board.

The following minimal criteria serve to support implementation of the nursing education standards:

(a) Evaluation: A comprehensive nursing education program self-evaluation *shall* be performed and submitted to the Board annually for quality improvement and *shall* include but not be limited to:

(1) Students' achievement of program outcomes.

(2) Evidence of adequate program resources including fiscal, physical, human, clinical and technical learning resources; and the availability of clinical sites and the viability of those sites to meet the objectives of the program.

(3) Multiple measures of program outcomes for graduates. Examples of measures include NCLEX pass rates, student and/or employer survey, and successful completion of national certification programs.

(4) Evidence that accurate program information for consumers is readily available. Examples of information include fees and admission criteria, which can be made available by oral, written and electronic means.

(5) Evidence of support for the program outcomes from the head of the academic institution and its administration.

(6) Program administrator and program faculty who meet Board qualifications and are sufficient in number to achieve program outcomes.

(7) Recruitment.

(8) Faculty changes.

(9) Curriculum changes.

(10) Changes in use of clinical facilities.

(11) Evidence that the academic institution assures security and confidentiality of student information.

(12) Any other information that may be required by the Board.

(b) Curriculum:

(1) The curriculum of the nursing education program *shall* enable the student to develop nursing knowledge, skills and competencies necessary for the level, scope and standards of nursing practice consistent with the level of licensure.

(2) The curriculum *shall* reflect the philosophy of the organization, conceptual framework, purpose and objectives of the nursing education program.

(3) Faculty members *shall* be responsible for the development, implementation, and evaluation of the curriculum. Part-time and non-nursing faculty members may be utilized as desired within their area of expertise.

(4) There *shall* be measurable objectives for each nursing course that reflect the philosophy and objectives of the educational program.

(5) Related clinical experiences *shall* be provided concurrently with theory.

(6) The ratio between nursing and non-nursing credit *shall* be based on a rationale to ensure sufficient preparation for the safe and effective practice of nursing.

(7) There *shall* be a general plan of the total curriculum, showing the sequence of courses and clinical experiences, as well as the number of hours allotted to class and clinical experiences.

(8) When credit for courses is shown in terms of credit hours, the school *shall* provide the Board the means to interpret the credit hours used.

(9) Current course outlines *shall* be on file at the school and Board office. They *shall* include: requirements of the course, expected outcomes, content, suggested learning experiences, methods of teaching, method of evaluation, reference list of texts utilized.

(10) The minimum length of an educational program preparing professional nurses *shall* be two years for an Associate Degree program and four years for a Baccalaureate of Science in Nursing Program.

(11) The minimum length of an educational program preparing practical nurses *shall* be one academic year in a Practical Nurse program or two academic years in an Associate Degree Program.

(12) The minimum curriculum *shall* include:

(A) Content regarding legal and ethical issues, history and trends in nursing and health care, fundamentals of nursing and professional responsibilities;

(B) Experiences that promote the development of clinical judgment, leadership and management skills, and professional socialization consistent with the scope of practice and level of licensure/certification. This includes demonstration of the ability to supervise others and provide leadership of the profession.

(C) Learning experiences and methods of instruction, including distance education methods, consistent with the written curriculum plan; and Coursework in the following areas of study:

(i) Scientific understanding: Subject matter in this area *shall* include anatomy and physiology, chemistry, microbiology, pharmacology and nutrition. This area *shall* serve as a foundation for nursing practice. The principles learned *shall* be applied throughout the program.

(ii) Social Sciences: Subject matter in this area *shall* include content drawn from psychology, sociology, growth and development, and mental health.

(iii) Didactic content and supervised clinical experience in the prevention of illness and the promotion, restoration, and maintenance of health in clients across the lifespan and in a variety of clinical settings to include:

(aa) Using informatics to communicate, manage knowledge, mitigate error and support decision making

(bb) Employing evidence-based practice to integrate best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing care.

(cc) Providing client-centered, culturally competent care.

(dd) Working in interdisciplinary teams to cooperate, collaborate, communicate and integrate client care and health promotion.

(ee) Participating in quality improvement processes to measure client outcomes, identify hazards and errors, and develop changes in processes of client care.

(ff) Subject matter that include medical-surgical nursing, community health, nursing leadership, maternal and newborn nursing, nursing of children, and psychiatric-mental health nursing.

(13) Supervised clinical practice *shall* include development of skill in making clinical judgments, management and care of groups of clients, and delegation to and supervision of other health care providers.

(A) Clinical experience *shall* be comprised of sufficient hours to meet these standards, be supervised by qualified faculty and ensure students' ability to practice at an entry level.

(B) All student clinical experiences, including those with preceptors, *shall* be directed by nursing faculty.

(C) All experiences of students in the clinical setting *shall* be under the direct supervision of a faculty member who *shall* have no other responsibilities during the period of such supervision.

(D) There *shall* be no more than ten (10) students for every faculty member in the clinical area.

(14) Delivery of instruction by distance education methods must be consistent with the program curriculum plan including supervised clinical practice pursuant to **Rule 6.4-B #13 above the preceding subsection**, and enable students to meet the goals, competencies, and objectives of the educational program and standards of the Board.

(c) Student Policies will include:

(1) Students *shall* be admitted without discrimination as to age, creed, ethnic origin, marital status, race, or sex.

(2) Students *shall* be provided the opportunity to acquire and demonstrate the knowledge, skills, and abilities for safe and effective nursing practice, in theory and clinical experience with faculty oversight.

(3) All policies relevant to applicants and students *shall* be available in writing.

(4) Students *shall* be required to meet health standards.

(5) Students *shall* be required to submit recent criminal background checks.

(6) Students *shall* receive faculty instruction, advisement and oversight.

(7) Students *shall* be held accountable for the integrity of their work.

(8) Students *shall* have the opportunity to participate in the development, conduct, and evaluation of the nursing education program.

(9) The number of students to be admitted to the program is determined by the size of the faculty, and the availability of clinical and other educational resources.

(10) Students *shall* be required to maintain a level of personal health that does not jeopardize the welfare of clients.

(11) Counseling and guidance *shall* be made available to all students in the nursing program.

(d) Administrative and Instructional Personnel:

(1) Every program must employ a sufficient amount of full-time faculty members to plan, implement, and evaluate the instructional program. The number of faculty *shall* be determined by the number of students enrolled, classes admitted per year, programs, clinical facilities used and activities for which faculty are responsible.

(2) There *shall* be at least one qualified nursing administrator (an associate or assistant administrator as needed), for each nursing education program. In institutions that offer nursing education programs for more than one level of preparation and where the scope of administrative responsibility so requires, there *shall* be an individual administrator for each nursing education program.

(3) Every nursing education program *shall* maintain and file with the Board the following items:

(A) A statement regarding the qualifications, rights, and responsibilities of faculty members.

(B) Faculty personnel policies concerning evaluation of performance, promotion, and tenure.

(C) Job description and terms of employment for all faculty members and administrators.

(D) A statement regarding the percentage of time to be allowed the nursing education administrator to carry out administrative responsibilities.

(E) A statement assuring that instructional assignments of the administrator are consistent with the governing policies of the parent institution.

(F) A statement regarding faculty workload that *shall* provide for equitable distribution of workload among faculty members and adequate time for class and laboratory preparation, teaching, curriculum revision, improvement of teaching methods, guidance of students, participation in faculty organization and committees, attendance at professional meetings, participation in continuing education activities, research, and community service.

(4) There *shall* be sufficient secretarial and clerical staff, and supporting services to maintain records, file correspondence and do support work for faculty and administrative personnel. Persons who provide supporting services *shall* be responsible to the Director of the nursing education program.

(e) Administrator Qualifications:

(1) The qualifications for the Director of Nursing in a program preparing for practical nurse licensure *shall* include:

(A) A current, active and unencumbered registered nurse license on Guam.

(B) Must possess both a Bachelor's degree in nursing and a Master's degree in nursing.

(C) Educational preparation and at least two years of experience in teaching and learning principles for adult education, including curriculum development and administration, and at least four years of clinical experience; and

(D) Current knowledge of nursing practice.

(2) The qualifications for the Director of Nursing in a program preparing for registered nurse licensure *shall* include:

(A) A current, active and unencumbered registered nurse license on Guam.

(B) A Bachelor's degree in nursing and a Master's degree in nursing and an earned doctoral degree in nursing or a related field;

(C) Have additional professional qualifications in nursing administration, leadership, curriculum development, research, teaching and evaluation. These qualifications *shall* have been attained in a baccalaureate and/or higher degree nursing program;

(D) Have at least four years' experience in professional nursing practice and

(E) Have current knowledge of registered nursing practice.

(f) Faculty:

(1) There *shall* be sufficient number of qualified faculty to meet the objectives and purposes of the nursing education program.

(2) The nursing faculty *shall* hold a current, active, and unencumbered registered nurse license on Guam.

(3) Evidence that the faculty has maintained competence through such activities as continuing education programs, conferences, workshops, seminars, academic courses, research projects, and professional writings.

(4) Qualifications for nursing faculty who teach in a program leading to licensure for Practical Nurse (PN):

(A) Have a minimum of a baccalaureate degree with a major in nursing and preferably a Master's degree with a major in nursing or a nursing Doctorate degree;

(B) Have at least four years of professional nursing practice of which two years must have been within the previous five years;

(C) Current evidence of preparation in teaching and learning principles for adult education.

(D) Experience in curriculum development and implementation is preferred.

(E) Have current knowledge of licensed practical nursing practice.

(5) Qualifications for nursing faculty who teach in a program leading to licensure for Registered Nurse (RN):

(A) Have a minimum of a Master's degree with a major in nursing or a nursing Doctorate and preferably an earned doctorate related to nursing education and/or the specific content area that the individual teaches.

(B) Have at least four years of professional nursing practice of which two years must have been within the previous five years;

(C) Current evidence of preparation in teaching and learning principles for adult education.

(D) Experience in curriculum development and implementation is preferred.

(E) Have current knowledge of registered nursing practice.

(6) Adjunct clinical faculty employed solely to supervise clinical nursing experiences of students *shall* have at least five years of professional nursing practice of which two years must have been within the previous five years.

(7) Clinical preceptors *shall* have demonstrated competencies related to the area of assigned clinical teaching responsibilities and will serve as a role model and educator to the student. Clinical preceptors may be used to enhance faculty-driven clinical learning experiences. Clinical preceptors *shall* be licensed as a nurse at or above the level for which the student is preparing.

(8) Faculty members who do not meet qualifications: A nursing education program may appoint a faculty member who does not meet all of the above qualifications if it submits to the Board, within four weeks after the appointment, a plan agreed upon by the nursing program and the faculty member for meeting the above requirements. This plan

must be approved by the Board and *shall* indicate how the faculty member intends to meet the requirements and the time frame in which he/she will do so. In its annual report to the Board, the nursing program *shall* present evidence concerning the faculty member's attainment of the qualifications.

(g) Responsibilities of Administrative and Instructional Personnel

(1) The Director of each program *shall* be responsible to the governing institution and *shall*:

(A) Prepare and administer the program's budget.

(B) Screen and recommend candidates for faculty appointments, retention, tenure, and promotion.

(C) Develop and supervise the program.

(D) Develop and maintain satisfactory relationships with the governing institution, other programs, cooperating agencies, and community groups.

(E) Organize and administer the program by having:

(i) The relationship between the faculty and the Director clearly defined.

(ii) Appropriate distribution of the workload.

(iii) Provision for regularly scheduled meetings available for reference

(iv) Create and maintain an environment conducive to teaching, learning, scholarly pursuits and the sharing of faculty expertise through involvement in professional and community activities.

(v) Facilitate and coordinate activities related to academic policies, personnel policies, curriculum, resource facilities and services, and program evaluation.

(2) The faculty of each nursing education program *shall* assist and advise the Director in all matters regarding:

(A) Development, implementation, and evaluation of the philosophy and objectives of the program.

(B) Development, implementation, and evaluation of the curriculum.

(C) Budget preparation and administration.

(D) Development of criteria for student admission, progression, and graduation.

(E) Selection, assignment, and supervision of clinical learning experiences.

(F) Evaluation of student achievement on the basis of curriculum objectives as related to both nursing knowledge and practice.

(G) Academic guidance and counseling of students.

(H) The activities of the total faculty of the parent institution in ways that benefit the institution, the program of nursing, and the faculty.

(I) Maintenance and improvement of their nursing competence in areas outside of teaching.

(J) Development of effective working relationships between students and clinical facilities.

(K) Professional and community activities for the purpose of bringing education, service, and research findings together for the improvement of health care.

(L) Screening and recommending candidates for faculty appointments, retention, tenure, and promotion.

(3) Part-time faculty members, guest lecturers, and others who contribute to the education of students on a part-time basis *shall* be utilized in accordance with the policies of the parent institution.

(h) Admission Requirements:

(1) Applicants to an approved nursing education program *shall* meet the admission requirements of the governing institution.

(2) The program's faculty *shall* be responsible for developing admission policies in keeping with the admission requirements of the governing institution.

(3) The Admission requirements *shall* be printed in at least one school document in accordance with institutional policies.

(i) Special Admissions:

Every nursing program *shall* maintain specific written policies for advanced standing challenge examinations, transfer of courses and readmission of students, which *shall* provide that:

(1) A student requesting admission to a program from another approved nursing program, or requesting readmission to the program, *shall* meet the program's current standards for the regularly enrolled students;

(2) The programs faculty *shall* determine the amount of course credit to be allowed a transfer student;

(3) A program may permit student to shorten the time period for fulfillment of academic requirements only according to a written plan which has been mutually agreed upon by the student and approved by the Board;

(4) A minimum of one school year *shall* be spent in the school of professional nursing granting the diploma or degree. A minimum of four months *shall* be spent in the school of practical nursing granting the diploma or degree. The student during this period *shall* gain an understanding of the philosophy, objectives, and conceptual framework of the nursing program; and

(5) The transfer student's official record *shall* indicate which courses he/she was given advanced or transfer credit for, the nursing courses it is equivalent to, and the amount of credit(s) given.

(j) Promotion, Continuation and Graduation. Each program *shall* maintain written policies regarding:

(1) The level of achievement required for a student to remain in the school or to progress from one level to another;

(2) Absence from class;

(3) The requirements of each course; and,

(4) The requirements for graduation.

(k) Termination. Every program *shall* maintain written policies on resignation, suspension, and dismissal of students as well as a written grievance policy, which protects the rights of both the student and the school.

§ 6605. Approval of Nursing Education Programs.

Programs recognized by the Board *shall* have the status of either Initial Approval, Full Approval, Continuation of Full Approval, or Conditional (Probational) Approval.

(a) Initial Approval:

(1) Initial Approval constitutes an authority for a new program to admit students and to enter into written agreements with clinical sites. Initial Approval must be given before the new program admits students and *shall* continue unless revoked by the Board or until the Board grants Full Approval. Initial Approval is subject to the following:

(2) An institution desiring to establish a program of nursing education *shall* send a Letter of Intent to the Board prior to submitting a completed proposal.

(3) The proposal *shall* include:

(A) Results of a needs assessment, including identification of potential students and employment opportunities for program graduates;

(B) Evidence that the program will meet professional nursing needs and has community support;

(C) Philosophy and objectives of the program. Descriptions *shall* include terminal objectives which identify behaviors expected of the graduates at completion of the program;

(D) Copies of the governing institution's charter or articles of incorporation authorizing the institution to conduct the nursing program;

(E) A description and organization chart of the governing institution and the nursing program;

(F) Corporate balance sheets, financial statements, documents describing funding sources, and all other documents describing the institution's finances;

(G) Positions, qualifications, and duties of the nursing faculty;

(H) Availability of qualified faculty;

(I) A description of the clinical facilities to be used by the students and evidence of availability of resources;

(J) Proposed curriculum to include:

(i) Content

(ii) Schedule (course sequence)

(iii) Course descriptions

(iv) Program evaluation plan

(v) Course syllabi

(K) Proposed number of students and faculty;

(L) Scholastic standards to be met by the students;

(M) Student policies for admission, progression, retention and graduation.

(N) A description of the program's provisions for health and welfare of the students;

(O) A proposed timeline for initiating and expanding the program, and

(P) Any other information requested by the Board.

(4) Before establishment of a new nursing education program, the institution *shall* employ a Registered Nurse (RN) Director for the proposed program for at least one (1) year.

(5) A Board member and/or representative of the Board *shall* make a general survey/site visit to the proposed new program and submit in writing to the Board the following:

(A) Justification for the establishment of the nursing education program.

Accreditation status/licensing of the institution and the proposed clinical facilities.

(B) Evaluation of the clinical resources and the program's physical facility and availability of qualified instructional personnel.

(6) Upon submission of the evaluative report and prior to implementation of the program. The Board, at a scheduled meeting, *shall* consider the proposal, the report of the survey, and such other information as may be presented to the Board. The Board *shall* determine if all components and processes are completed and in place. The Board *shall* determine if the program is granted Initial Approval. Within fifteen days of the Board's determination, the Board will notify the program of its decision in writing.

(7) After initial approval is granted, the Director of the program *shall* submit 12 copies of an Annual Report to the Board by June 30 of each year regardless of the program's status. Refer to **Article 6.4-A #1-12**, for Evaluation requirements.

(8) The nursing program *shall* be evaluated by the Board after the first class of students has graduated and the scores for the licensing examination have been reviewed. The Board *shall* determine if the program continues to meet Board standards, and is therefore eligible to apply for Full Approval.

(9) Initial Approval *shall* NOT exceed beyond the second (2nd) class of graduates.

(b) Full Approval:

(1) The Board may grant Full Approval and an annual Continuation of Full Approval status to a nursing program.

(2) The program *shall* apply within six (6) months after eligibility for Full Approval has been determined by the Board.

(3) Application for Full Approval *shall* include the following:

(A) Submission of the program's annual reports;

(B) Submission of the Self-Evaluation report which addresses compliance with these standards and regulations, success rate of the graduates on the national licensure examination, and the ongoing evaluation plan and data;

(C) Evidence that the authorities responsible for the administration of the school allocate funds to enable the school to achieve its stated objectives and to comply with the requirements of the Board;

(D) Evidence that the Director of the program and faculty participate in the preparation of the budget for the school and that the Director administers the budget; and,

(E) A site visit assessment made by a Board member(s) or its representatives.

(4) Failure to apply for Full Approval may result in the Board initiating the revocation process.

(5) The Board *shall* determine adherence of the criteria and may grant Full Approval status within 60 days of the institution's application for Full Approval.

(6) The Board *shall* notify the institution, in writing, within 15 days of its decision to grant Full Approval.

(7) The Board may request periodic reports from the new program regarding initial program operations before granting approval.

(c) Continuation of Full Approval:

(1) The Board *shall* periodically hire a qualified consultant, not associated with the Board or local nursing programs, to evaluate and report to the Board in writing on the continued compliance of the established criteria by the approved programs.

(2) The Board *shall* forward a notice of a survey site visit to the nursing programs at least thirty (30) days prior to the scheduled site visit.

(3) The consultant *shall* assess each program on dates mutually acceptable to the Board and the Director of the program:

(A) At least once every four years for professional nursing programs.

(B) At least once every two years for practical nursing and nurse assistant programs.

(4) The Director of the program *shall* provide a copy of the self-evaluation report and a copy of the nursing program's catalog to the Board for each of the site visitors. An interim summary report may be requested between survey site visits as the Board deems necessary.

(5) The Board *shall* retain a copy of the consultant's report in the office of the Board.

(6) The Board *shall* issue an annual Certificate of Continuation of Full Approval to nursing programs that meet the standards set forth herein based on the following criteria:

(A) Submission of the program's annual report;

(B) Information obtained by the Board's professional staff and/or representatives through consultation and site visits;

(C) A minimum success rate of 75% on the national licensing examination achieved by the program's first-write graduates of the PN and RN programs and 80% for the Nurse Assistant programs.

(D) Evidence that the authorities responsible for the administration of the school allocate funds to enable the school to achieve its stated objectives and to comply with the requirements of the Board;

(E) Evidence that the Director of the program and faculty participate in the preparation of the budget for the school and that the Director administers the budget; and,

(F) Accreditation visits and reports such as the National League of Nursing (NLN) and Western Association of Schools and Colleges (WASC).

(d) Conditional (Probational) Approval:

Conditional Approval will be subject to the following:

(1) Nursing education programs having Initial or Full Approval that fail to meet the standards established by the Board may be placed on Conditional (Probational) Approval status. The Board may establish such conditions and requirements as it sees fit to ensure compliance within a reasonable time frame not to exceed two years.

(2) The Board *shall* inform the program in writing of its Conditional (Probational) Approval status and the rationale for such action. One or more of the following reasons *shall* warrant a determination of Conditional (Probational) Approval:

(A) Failure to submit the required Annual Reports to the Board.

(B) Failure to adhere to the program's stated philosophy and curriculum objectives, and repeated violations of stated academic and/or admission policies.

(C) Failure to employ and retain an administrator and faculty of adequate size and qualification.

(D) Failure to admit and retain students.

(E) Utilization of nursing students for nursing service or other purposes whose objective is not primarily educational.

(F) Failure to provide adequate learning resources for cognitive and classroom learning and clinical practice.

(G) Discrimination against faculty, students, or prospective students on the basis of race, sex, creed, national origin or handicaps irrelevant to the practice of nursing.

(H) Two consecutive letters of warning issued by the Board to the school because 25% or more of its graduates failed to pass the national licensing examination.

(I) Any other deficiency that, in the opinion of the Board, detrimentally affects the educational process.

(3) The Board may require that the program submit special progress and/or consultant reports as a condition to acquiring Full Approval status or take other reasonable steps to monitor the program status and determine if the deficiencies are being corrected.

(4) Conditional Approval *shall* not exceed two consecutive years.

§ 6606. Revocation of Approval.

(a) The Board may initiate a revocation process for due cause in accordance with the Administrative Adjudication Law.

(b) Grounds for withdrawal/revocation of a Full Approval status may include but are not limited to the following:

(1) Substantial noncompliance with the standards set forth in these administrative rules and regulations;

(2) Failure to resolve/clear the Conditional (Probational) Approval status beyond the acceptable two (2) consecutive years;

(3) Failure to comply with the standards and requirements imposed by the Board within the time period established.

(c) The nursing program will have ten (10) days to submit to the Board a written request for a hearing. The written request *shall* include supporting documents and other the materials to be presented in the hearing. Failure to submit the written request *shall* be cause for denial for a hearing.

(d) Admission of new students to the program during this period is prohibited.

(e) Nursing programs without Full Approval or Continuation of Full Approval status *shall* be removed from the official Board approved listing.

(f) Upon notice of revocation from the Board, the governing institution *shall* provide:

(1) Assistance to students desiring to transfer to another nursing program; and,

(2) The Board a list of the names of students who have transferred to other approved programs within six months after the revocation.

§ 6607. Reinstatement of Approval.

The Board *shall* reinstate Full Approval for a program on conditional approval if the program submits evidence that the program has met the standards set forth herein and has complied with the requirements the Board has imposed on it. The procedure for reinstatement is the same as for Full Approval.

§ 6608. Voluntary Discontinuance of an Approved Nursing Education Program.

(a) The governing institution that desires to voluntarily close its nursing education program *shall*:

(1) Notify the Board in writing, stating the reasons for closure, the intended date of closure, and the plan for closure.

(2) Maintain the records of the students and graduates and *shall* advise the Board in writing of the arrangements for safeguarding and maintaining the records. The plan adopted by the governing institution for closing its program *shall* ensure that:

(b) The plan for closure *shall* ensure that the standards for Approval *shall* continue to be met until all of the students have graduated or been transferred.

(c) The effective closing date of the program *shall* be the date of the degree, diploma or certificate of the last class of graduates or, the date on which the last student was transferred.

(d) The governing institution *shall* provide:

(1) Assistance to students desiring to transfer to another program.

(2) The Board a list of students who transferred to other approved nursing programs within thirty (30) days of the last transfer.

§ 6609. Reopening Programs of Professional Nursing.

The procedure for reopening a program of professional nursing is the same as for Initial Approval.

§ 6610. Program Changes Requiring Board Notification and/or Approval.

(a) Any of the following major program changes requires Board approval and *shall* be submitted along with the description of the change(s) to the Board in writing at least six months prior to the proposed change:

- (1) Curriculum changes or course content and description;
- (2) Integration of courses;
- (3) The length of the program;
- (4) Governing institution;
- (5) Educational or clinical facilities;
- (6) Projected increase in the ratio of students to faculty which exceeds the ratio approved by the Board; or,
- (7) Closing of the program.

(b) Any of the following program changes requires Board notification and *shall* be submitted to the Board in writing:

- (1) The program's or institution's name;
- (2) Proposal for pilot project(s);
- (3) Faculty membership; or,
- (4) Any other item of information required of programs seeking accreditation.

§ 6611. List of Approved Schools of Nursing.

The Board *shall* maintain a current list of ALL Board approved schools of nursing and nurse assistant educational programs in Guam.

§ 6612. Records.

(a) The nursing education program *shall* maintain an accurate and complete system of records which *shall*:

- (1) Be safely stored to prevent loss, destruction or unauthorized use; and,
- (2) Be available to the faculty.

(b) Records *shall* include:

- (1) Course outlines
- (2) Minutes of faculty and committee meetings
- (3) Pertinent correspondence
- (4) Reports of standardized tests
- (5) Reports of the program
- (6) Reports from territorial, regional and national accrediting bodies
- (7) Fiscal accounting records
- (8) Program bulletins
- (9) Be available to the Board during evaluation visits.

§ 6613. Student Records.

(a) Each nursing education program *shall* maintain a file on each student which must include:

- (1) The student's application, health record, high school transcript or a copy of high school equivalency or achievement and performance evaluations.
 - (2) A final or current record/transcript.
 - (3) Student evaluations.
- (b) Student files *shall* be made available to the Board during evaluation visits.

§ 6614. Faculty File Records.

Records *shall* be kept current and *shall* include:

- (a) Curriculum vitae (filed with the Board upon employment and upon revision).
- (b) Job descriptions and terms of employment.
- (c) Evidence of appropriate educational degree for the level of the nursing program.
- (d) Evidence of continuing education activities.
- (e) Evidence of membership and participation in relevant professional and community activities.
- (f) Evidence of a current Guam RN license.
- (g) Evidence of current and completed faculty evaluations.

§ 6615. Evaluations.

(a) Written evaluations of students, which *shall* include academic achievement and clinical performance, *shall* be made by the faculty following the conclusion of each course. Students *shall* be allowed to participate in their evaluations.

(b) Written evaluations of each course *shall* be made by the students and the faculty following the conclusion of each course.

(c) Written performance evaluations of the faculty *shall* be made annually by the Director and the students of the program.

(d) A systematic program evaluation of the total nursing program *shall* be made by the faculty biannually to appraise the following:

- (1) Evidence of implementation of the stated philosophy, objectives, and conceptual framework of the program;
- (2) Achievement of graduates on National Council Licensing/Certification Examination; and,
- (3) Professional performance of graduates.

(e) Written evaluations of the current Program Director

§ 6616. School Bulletins or Catalogues.

The nursing education program *shall* maintain written bulletins or catalogues which *shall* include information pertaining to:

- (a) Policies regarding admission, attendance, progression, and graduation of students;

(b) The nature, philosophy, and objectives of the governing institution and the nursing program; curriculum plan; course description; list of courses to be taken and proposed schedule; and faculty staff roster;

(c) School's grievance policy;

(d) Policy statement that addressing discrimination of students or employees on the basis of age, creed, ethnic origin, marital status or gender;

(e) Fees, expenses and financial aid;

(f) Educational facilities;

(g) Living accommodations;

(h) Student activities and services.

§ 6617. Continuing Education.

Continuing education courses offered *shall* meet the criteria and guidelines developed by a National Continuing Education approving organizations.

§ 6618. Advisory Committee.

All nursing programs approved by the Board *shall* have an advisory committee which meets at least two (2) times during the school year whose major function *shall* be advisory and supportive. There *shall* be written rules describing its purpose, objectives, function, structure, and membership. Minutes of all its meetings *shall* be on file in the administrative records of the governing facility.

§ 6619. School Offices.

The Director of a program *shall* have an office which will provide privacy for work and individual conferences. Faculty members *shall* be provided with offices which *shall* be accessible to students and convenient to classrooms.

§ 6620. Nurse Assistant Educational Program.

The nurse assistant educational program *shall* prepare students to function in the role of nurse assistants under the supervision of a registered nurse. The nurse assistant *shall* be able to perform basic, non-invasive nursing procedures in a variety of settings.

§ 6621. Requirements for Establishing a Nurse Assistant Educational Program.

To establish a Nurse Assistant educational program, the institution *shall* have employed a Registered Nurse (RN) Director for the proposed program for at least one (I) year.

(a) Application to the Board. The program provider *shall* submit an application with a *Letter of Intent* to the Board at least Ninety (90) days in advance of the expected opening date. The Application and Letter of Intent *shall* include, but not be limited to:

(1) Results of a needs assessment, including identification of potential students and employment opportunities for program graduates;

(2) Identification of sufficient financial and other resources;

(3) Governing institution approval and support;

- (4) Description and organizational chart of the governing institution and nurse assistant program;
- (5) Community support;
- (6) Type of Nurse Assistant educational program proposed;
- (7) Student policies for admission, progression, retention and graduation;
- (8) Philosophy, conceptual framework and objectives of the program. Description *shall* include terminal objectives which identify behaviors expected of the graduates at the completion of the program;
- (9) Content of educational program to be offered;
- (10) Total number of hours of theoretical, laboratory and clinical instructions;
- (11) The behavioral objectives of each module of instruction;
- (12) The methods of instruction to be used to teach each module;
- (13) The methods to be used to evaluate the achievement of behavioral objectives;
- (14) A description of the facilities to be used for theoretical, laboratory and clinical instructions;
- (15) Clinical opportunities and availability of qualified faculty;
- (16) Proposed timeline for initiating and expanding the program; and,
- (17) Any other information requested by the Board;
- (18) The application *shall* be accompanied by all applicable fees.

(b) When the Board evaluates the application and determines that all components are complete and in place, the Board *shall* notify the institution of its decision of *Initial Approval* in writing for the institution to establish the proposed Nurse Assistant educational program and admit students into the program.

(c) If the application to establish a Nurse Assistant program is disapproved, the program provider may request for a hearing before the Board, pursuant to the provisions of the Administrative Adjudication Law.

§ 6622. Approval Process for the Nurse Assistant Educational Program.

The institution of the proposed Nurse Assistant educational program *shall* provide verification to the Board that the following program components and processes have been completed in order for the Board to approve/authorize the program provider/institution to admit students to the Nurse Assistant program.

(a) Phase I. Initial Approval - Admission of Students

- (1) Nursing faculty employed to develop the program
- (2) Overview of the total Nurse Assistant curriculum.
- (3) Course sequence
- (4) Course descriptions and syllabi
- (5) Contracts for clinical sites
- (6) Program evaluation plan
- (7) Program must provide at least one hundred (100) hours of instruction which must include forty (40) hours classroom instruction, twenty (20) hours laboratory instruction and forty (40) hours in clinical practice.
- (8) Curriculum *shall* include:

- (A) The roles and responsibilities of a nurse assistant; and
- (B) Basic nursing care.

(9) At least forty (40) hours of instruction in the classroom must be completed, before a student is directly involved with a client, in the areas of:

- (A) Communication and interpersonal skills;
- (B) The control of infections;
- (C) Safety and emergency procedures;
- (D) Confidentiality of information;
- (E) Observation skills; and
- (F) Promoting the independence of clients and respecting their rights.

(10) The instructor, student-ratio *shall* be one (1) instructor to twelve (12) students in laboratory and clinical; and one (1) instructor to twenty (20) students in the classroom setting.

(11) Instructional personnel must be on site solely to supervise the students, when they are giving direct patient care to clients. The nurse assistant program *shall* be responsible for ensuring the facilities meet the learning needs of the students.

(12) A Board member and/or representative of the Board may make a general survey/site visit to the Nurse Assistant program facility.

(b) Phase II. Full Approval. The Board may grant Full Approval of the Nurse Assistant program upon:

- (1) Graduation of the first class;
- (2) Completion of Board program survey visit concurrent with graduation of the first class or eligibility for the national certification examination;
- (3) Submission of program's ongoing evaluation plan and data;
- (4) Satisfactory survey report that verifies that the program is in compliance with the Board's Nursing Education Standards in Article 6.

(5) The Board may request periodic reports from the program/institution regarding initial program operations before granting full approval.

(c) A program is valid for three (3) years from the date of Full Approval by the Board. An annual report *shall* be submitted to the Board by July 31st of each year. The Board has the discretion to re-evaluate the program in the interim.

(d) Phase III. Continuation of Full Approval.

(1) The Board *shall* periodically hire a qualified consultant, not associated with the Board or local nursing programs, to evaluate and report to the Board in writing on the continued compliance of the established criteria by the approved programs.

(2) The Board *shall* forward a notice of a survey site visit to the nursing programs at least thirty (30) days prior to the scheduled site visit.

(3) The consultant *shall* assess each program on dates mutually acceptable to the Board and the Director of the program at least once every two years for nurse assistant programs.

(4) The Director of the program *shall* provide a copy of the self-evaluation report and a copy of the nursing program's catalog to the Board for each of the site visitors. An

interim summary report may be requested between survey site visits as the Board deems necessary.

(A) The Board *shall* retain a copy of the consultant's report in the office of the Board.

(B) The Board *shall* issue an annual Certificate of Continuation of Full Approval to nurse assistant educational programs that meet the standards set forth herein based on the following criteria:

(i) Submission of the program's annual report;

(ii) Information obtained by the Board's professional staff and/or representatives through consultation and site visits;

(iii) A minimum success rate of 80% on the national certification examination achieved by the program's first- write graduates of the Nurse Assistant programs.

(iv) Evidence that the authorities responsible for the administration of the school allocate funds to enable the school to achieve its stated objectives and to comply with the requirements of the Board;

(v) Evidence that the Director of the program and faculty participate in the preparation of the budget for the school and that the Director administers the budget; and,

(vi) Accreditation visits and reports such as the National League of Nursing (NLN), Western Association of Schools and Colleges (WASC) or other nationally recognized accrediting organization.

§ 6623. Conditional Approval of the Program.

(a) The program *shall* be placed on *conditional approval* if:

(1) The program fails to comply with the requirements of the statute of these rules and regulations;

(2) Less than eighty percent (80%) of the students in the program pass the nurse assistant national certification examination.

(3) The program has not admitted any students within the previous twelve (12) months; or

(4) The Board finds three (3) or more instances in which one (1) or more students of the program has engaged in unsafe or abusive conduct during the year.

(b) The executive director of the Board *shall* send a written notice of the conditional approval by certified mail to the administrative body and Program Director of the approved program.

(c) The Board *shall* provide the program with the list of deficiencies and a time frame of at least one (1) year to correct the deficiencies.

(d) The program *shall* submit to the Board a plan of correcting the deficiencies.

§ 6624. Personnel Requirements for Nurse Assistant Program.

(a) Program Director. The program director *shall* be a Registered Nurse (RN) who *shall* be administratively responsible and accountable for the nurse assistant educational program and has been employed for at least one (1) year prior to the start of the Nurse Assistant program.

(b) The primary instructor may be the program Director of the nurse assistant educational program.

(c) Duties of the program director *shall* be to:

(1) Assist with the development of the budget for the program.

(2) Assist with the development of procedures for admission to the Program

(3) Select and supervise such number of qualified instructors as is necessary to carry out the program.

(4) Obtain adequate educational facilities for training, including areas to practice nursing skills.

(5) Obtain adequate clinical facilities for training.

(6) Provide each student with the necessary instructional materials.

(7) Plan an orientation program for students at each clinical facility used for instruction. The time spent for orientation is not included in the one hundred (100) hours required for the program.

(8) Ensure that each student is clearly identified as a student in a manner which is easily recognizable to each patient, member of a patient's family, visitor or member of the medical staff with whom the students works.

(9) Develop a system of maintaining permanent records essential to the operations of the program which includes the current and final records of each student including a list of the duties to be performed and the skills to be learned in the program, with notation of satisfactory or unsatisfactory performances, the date of the performance and the name of the supervising instructor.

(d) The primary instructor *shall* have a current Guam license as a registered nurse.

(e) The responsibilities of the primary instructor *shall* include:

(1) Participation in the planning of each learning experience;

(2) Ensuring that course objectives are accomplished;

(3) Ensuring that students perform direct services only in the areas they have received instructions.

(4) Ensuring that these regulations are maintained;

(5) Maintenance of records as required;

(6) Performance of other activities necessary to comply with these regulations; and

(f) Other instructional personnel *shall* be required to:

(1) Hold a current Guam license as a registered nurse; and

(2) Have had at least one (1) year of direct patient care experience as a registered nurse, within the preceding five (5) years.

(g) The program may utilize resource personnel who have had at least one (1) year of experience in their specialty field, within the past two (2) years.

§ 6625. Instruction Requirements for Nurse Assistant Programs.

Instructions in the classroom, laboratory and clinical practice *shall* include:

- (a) Basic nursing care;
- (b) Personal care;
- (c) Basic rehabilitation;
- (d) Mental health and social needs;
- (e) Care of the cognitively impaired patient/client;
- (f) Patient/clients' rights;
- (g) Legal and ethical concepts in relation to self, health team members, patients, and families.

§ 6626. Unit Objectives for Nurse Assistant Program.

(a) Objectives for each unit of instruction *shall* be stated in behavioral terms which are measurable.

(b) Objectives *shall* be reviewed with the students at the beginning of each unit.

§ 6627. Characteristics of Nurse Assistant Graduates.

The graduate of the Nurse Assistant educational program *shall* be prepared to:

(a) Communicate and interact competently, effectively and respectfully on a one-to-one basis with clients, co-workers and supervisors;

(b) Demonstrate sensitivity to clients' emotional, social and mental health needs through skillful directed interactions;

(c) Assists clients in attaining and maintaining functional independence;

(d) Exhibit attitude and behaviors that supports and promotes the rights of clients;

Demonstrate professional, ethical and legal behavior consistent with the application of the standards of practice for nurse assistants, local and federal laws and regulations and agency policies;

(e) Demonstrate skills in observation, monitoring and documentation of the assessment of client's health, physical condition and well-being as delegated by the licensed nurse or physician;

(f) Demonstrate attitude and behaviors or responsibility and flexibility in personal and workplace environments;

(g) Demonstrate competency and compliance in the application of health and safety policies, procedures and regulations, including equipment and hazardous material handling; and,

(h) Demonstrate the ability to perform duties and responsibilities as a nurse assistant under stress especially when confronted with emergency or critical situations with clients.

§ 6628. Records of Nurse Assistant Approved Programs.

The Program Director of an approved nurse assistant program *shall* maintain the permanent records and reports of the program. The records *shall* include:

(a) The name, address, birth date, and social security number of each student who enters, withdraws and completes the program.

(b) A transcript of each student.

- (c) A copy of the certificate of completion given to each student.
- (d) The date on which each training cycle begins and ends.
- (e) The name, address, and license number of each registered nurse instructor.

§ 6629. Faculty File Records.

Records *shall* be kept current and *shall* include:

- (a) Curriculum vitae (filed with the Board upon employment and upon revision).
- (b) Job descriptions and terms of employment.
- (c) Evidence of appropriate educational degree for the level of the nursing program.
- (d) Evidence of continuing education activities.
- (e) Evidence of membership and participation irrelevant professional and community activities.
- (f) Evidence of a current Guam RN license.
- (g) Evidence of current and completed faculty evaluations.

§ 6630. Evaluations.

(a) Written evaluations of students, which *shall* include academic achievement and clinical performance, *shall* be made by the faculty following the conclusion of each course. Students *shall* be allowed to participate in their evaluations.

(b) Written evaluations of each course *shall* be made by the students and the faculty following the conclusion of each course.

(c) Written performance evaluations of the faculty *shall* be made annually by the Director and the students of the program.

(d) A systematic program evaluation of the total nursing program *shall* be made by the faculty biannually to appraise the following:

- (1) Evidence of implementation of the stated philosophy, objectives, and conceptual framework of the program;
 - (2) Achievement of graduates on National Council Licensing Examination; and,
 - (3) Professional performance of graduates.
- (e) Written evaluations of the current Program Director

§ 6631. Revisions of Approved Programs.

(a) The following major program revisions require Board approval and must be submitted along with the description of the change(s) to the Board in writing prior to implementation.

- (1) Curriculum changes or course content and description;
- (2) Integration of courses;
- (3) The length of program;
- (4) Governing institution;
- (5) Educational or clinical facilities;
- (6) Projected increase in the ratio of students to faculty which exceeds or is less than the ratio approved by the Board; and
- (7) Closing of the program.

(b) The following program changes require Board notification and *shall* be included in the program's annual report to the Board.

- (1) The program's or institution's name;
- (2) Proposal for pilot project(s);
- (3) Faculty membership; and

Any other item of information required of programs seeking accreditation.

§ 6632. Revocation of Approval of a Nurse Assistant Program.

(a) The Board may revoke its approval of a nurse assistant program if the program fails to correct the deficiencies within the required time frame.

(b) The executive director of the Board *shall* send a written notice by certified mail to the administrative body and the Program Director of an approved program of the Board's intent to revoke its approval of that program. The notice must specify the reasons for the revocation. The Program Director of the administrative body may request for an appeals hearing to provide evidence within fifteen (15) days after the date the notice is received. The executive director will send a written notice of the final determination of the Board of the administrative body and the program director, in compliance with the Administrative Adjudication Law, Chapter 9 of Title 5, Guam Code Annotated.

(c) If the Board revokes its approval, the Program Director and the Administrative body *shall* take such action as is necessary to retain safely the record of each student in the program and *shall* assist in the placement of students in other programs to complete their education.

§ 6633. Voluntary Discontinuance of an Approved Nursing Education Program.

(a) The governing institution that desires to voluntarily close its nursing education program *shall*:

(1) Notify the Board in writing, stating the reasons for closure, the intended date of closure, and the plan for closure.

(2) Maintain the records of the students and graduates and *shall* advise the Board in writing of the arrangements for safeguarding and maintaining the records. The plan adopted by the governing institution for closing its program *shall* ensure that:

(b) The plan for closure *shall* ensure that the standards for Approval *shall* continue to be met until all of the students have graduated or been transferred.

(c) The effective closing date of the program *shall* be the date of the degree, diploma or certificate of the last class of graduates or, the date on which the last student was transferred.

(d) The governing institution *shall* provide:

(1) Assistance to students desiring to transfer to another program.

(2) The Board a list of students who transferred to other approved nursing programs within thirty (30) days of the last transfer.

§ 6634. Reinstatement of Approval.

The Board *shall* reinstate Full Approval for a program on conditional approval if the program submits evidence that the program has met the standards set forth herein and has complied with the requirements the Board has imposed on it. The procedure for reinstatement is the same as for Full Approval.

§ 6635. Reopening of Nursing Programs.

The procedure for reopening a nursing program begins with the same process as the Initial Approval.

ARTICLE 7 – CERTIFICATION OF NURSE ASSISTANTS

§ 6701. Purpose.

(a) The purpose of these rules and regulations is to ensure that persons functioning as Nurse Assistants on Guam have met minimum standards of competency as prescribed in these rules; and

(b) To ensure that Nurse Assistants meet minimum standards of proficiency and competency as set forth by the Guam Board of Nurse Examiners (GBNE); and

(c) To ensure programs that qualify Nurse Assistants meet the educational requirements as set forth by the Board; and

(d) To regulate the scope of practice for Nurse Assistants in the interest of the consumer protection in Guam.

§ 6702. Legal Authority.

(a) P.L. 24-20 and § 12316.1 of Title 10, Guam Code Annotated empowers the Guam Board of Nurse Examiners to establish minimum qualifications through rules and regulations and to set standards for Certified Nurse Assistant educational programs. Section §12316.1 of Title 10, Guam Code Annotated, provides “Minimum Requirements for and Certification of Nurse Assistants and the Education Programs”.

(b) The Board *shall* establish by regulation minimum requirements for Nurse Assistants and criteria for evaluating such requirements. The Board may also establish and administer such procedures as may be necessary to certify that an applicant meets duly established minimum requirements. Such procedures *shall* include a provisional period for remedial training of Nurse Assistants who are employed as of the effective date of such regulations and do not meet minimum requirements. Disciplinary procedures for decertification of incompetent nurse assistants may be established by the Board. The Board *shall* maintain a registry of Certified Nurse Assistants. The Board may approve and re-approve nurse assistants educational and continuing education programs.

§ 6703. Powers and Duties.

The Board *shall* enforce the provisions of §12316.1 of Title 10, Guam Code Annotated, as well as other duties, powers and authority as granted by appropriate statutes to include the following:

(a) Adopt, and from time to time, revise such rules and regulations as may be necessary to carry out the provisions of §12316.1 of Title 10, Guam Code Annotated, in compliance with the Administrative Adjudication Law, Chapter 9 of Title 5, Guam Code Annotated;

(b) Develop and maintain a Nurse Assistant registry;

(c) Develop and enforce standards and periodically evaluate the basic Nurse Assistant educational program and approve the programs that meet the requirements as set forth in these rules;

(d) Deny or withdraw approval of Nurse Assistant educational programs that do not meet the prescribed standards in accordance with Chapter 2 of the Administrative Adjudication Law and Chapter 9 of Title 5, Guam Code Annotated;

(e) Develop and enforce standards and criteria for certification of Nurse Assistants;

(f) Implement a disciplinary process consistent with the Administrative Adjudication Law, Chapter 9 of Title 5, Guam Code Annotated;

(g) Issue certification documentation to the nurse assistants who have successfully met the requirements for inclusion on the Nurse Assistants registry;

(h) Notify all nurse assistants listed on the Nurse Assistants registry of changes in laws, rules and regulations pertaining to nurse assistants;

(i) Determine and collect reasonable fees;

(j) Act as an evaluating and approving body for the nurse assistants educational programs in the American Pacific region. The request must come from the appropriate governing body, and all expenses for the evaluation *shall* be paid by the requesting jurisdiction;

(k) Give the Nurse Assistants' examination according to the rules and regulations formulated by the National Council of State Boards of Nursing, its designated testing service and the Board;

(l) Deny certification to unqualified applicants;

(m) Issue certificate to qualified applicants who have successfully met the requirements of a Nurse Assistant;

(n) Have the power to issue subpoenas, require the attendance of witnesses, administer oaths to persons giving testimony and enforce compliance upon application to the Superior Court of Guam;

(o) Maintain records as required by Guam law; and

(p) Conduct public hearings, investigations, and studies of nurse assistants' practice, nurse assistants' education and related matters; and to prepare and issue such publications as will allow the nurse assistants' profession to provide safe and effective nurse assistants' services to the public.

§ 6704. Definitions.

For purposes of these Rules and Regulations, the following terms are defined to mean:

(a) *Abuse* includes, but is not limited to physical injury caused by other than accidental means; neglect which leads to physical harm; failure to provide direct care for resident or patient;

verbal abuse; theft or misuse of resident funds or property; wrongful touching; or any other deprivation of patient or resident's rights, which may be the result of intentional or negligent behavior.

(b) *Accountability* means the state of being responsible, answerable or legally liable for actions done by a nurse assistant.

(c) *Approval* – the process by which the Board evaluates and grants official recognition to a nursing education or nurse assistant program which meets established uniform and reasonable standards. There are four (4) categories of approval:

(1) *Initial Approval* – an authorization granted by the Board for new nursing programs to admit students and to enter into contractual agreements with clinical facilities. No student *shall* be admitted until the institution has received the written notification of Initial Approval from the Board subsequent to the application review and site visit.

(2) *Full Approval* – status granted by the Board to programs that meet the requirements of the law and the Administrative Rules and Regulations of the Board.

(3) *Continuation of Full Approval* – status granted annually by the Board to programs that meet the standards set forth herein. A Certificate of Continuing Full Approval is contingent upon an annual review of the program by the Board.

(4) *Conditional/Probational Approval* – status designated to a program which is determined to be deficient in a specified area. The Board *shall* notify the program of the specific deficient area(s) and the time limitation to correct the stated deficiencies.

(d) *Approved program* means a course of training conducted by an educational or health care institution which implements the basic nurse assistant curriculum as prescribed and approved by the Board.

(e) *Basic emergency procedures* mean the care of individuals of all ages with perceived physical or emotional alterations which are undiagnosed and may require prompt intervention.

(f) *Certificate of endorsement* means the process by which individuals holding a current certification, within the United States or its territories, upon meeting all requirements set forth by the Board, can practice as a nurse assistant on Guam.

(g) *Clinical facilities* means those institutions which are established in a community for the delivery of health care services such as hospitals, extended care facilities, nursing homes or other sites.

(h) *Competency* means the ability to perform skillfully and proficiently the role of the certificate holder. The role encompasses essential knowledge, judgment, attitudes, values, skills and abilities which are varied in range and complexity. Competency is a dynamic concept, changing as a Certified Nurse Assistant achieves a higher stage of development within the role. Competency is based on educational training, preparation and expertise.

(i) *Date of application* means the date stamped on the application form as received by the Health Professional Licensing Office staff.

(j) *Denial* means refusal to issue certification.

(k) *Director* means a professional Registered Nurse (RN) of a health agency who has been designated by the controlling authority or program provider to administer the nurse assistants' educational program.

(l) *Graduate Nurse Assistant* means an individual who has successfully completed a basic nurse assistants' educational program but has not received certification through examination.

(m) *Inactive status* means the status of a nurse assistant who is not currently certified on Guam.

(n) *Lapsed certificate* means an individual's certificate to practice as a nurse assistant has expired.

(o) *Licensed nurse* means a Registered Nurse (RN) or a Licensed Practical Nurse (LPN) currently licensed in Guam.

(p) *Nurse Assistant (N.A.)* means a nurse aide or home health aide who has been certified by successfully completing the educational requirements for the Nurse Assistant and passing a Board approved examination after the enactment of these rules. Only a certified nurse assistant *shall* use the title N.A. and provide nursing support services as supervised by the Registered Nurse licensed to practice in Guam. Nurse assistants prior to the enactment of these rules and regulations are waived from the examination requirements.

(q) *Nurse Assistant (N.A.) certification examination* means the nationally board approved examination required for certification to practice as a Nurse Assistant.

(r) *Nurse Assistant (N.A.) educational program* means a program designed to prepare nurse assistants, which is offered by a school, college, nursing facility or other institution that has received prior authorization by the Board to conduct such a program.

(s) *Nurse Assistant (N.A.) registry* means a listing of all individuals who have been certified by the Board.

(t) "OBRA" means the "Omnibus Budget Reconciliation Act" of 1987 or "OBRA '87" (P.L. 100-203) that created Federal statutory requirements for nurse assistants' education and certification and requiring the establishment of a registry of nurse assistants employed in long-term care facilities. The Federal guidelines now include home care agencies and home health aides.

(u) *Standards* means an authoritative statement by which the Board can judge the quality of the Nurse Assistants' education or practice.

(v) *Supervision* means provision of guidance of a nurse assistant's task or activity with specific direction of the task or activities by a licensed registered nurse.

(w) *Suspension* means an order of withdrawal of a nurse assistant's right to practice for a definite or indefinite period of time.

§ 6705. Certification Requirements.

Certification with the Guam Board of Nurse Examiners is mandatory and is the responsibility of the individual Nurse Assistant who provides services for compensation on Guam. The certification *shall* be obtained prior to employment.

(a) In order to practice as a nurse assistant in Guam, it is mandatory to obtain a certificate from the Guam Board of Nurse Examiners. Obtaining a Guam certificate to practice as a nurse assistant is the responsibility of the individual nurse assistant pursuant to P.L. 24-20, "An Act to Establish Rules and Regulations for Certification of Nurse Assistants for the Guam Board of Nurse Examiners" of Title 10 Guam Code Annotated (Effective Date: May 12, 1997).

(b) Any person who holds a license or certificate to practice nursing or nurse assistant in Guam *shall* use the legal title or the abbreviation as set forth in the Guam Nurse Practice Act of

Title 10 Guam Code Annotated, Article 3, (1983; 1997; 1998; and, 2003 Updates) and P.L. 24-20. No other person *shall* assume any other name, title or abbreviation or any words, letters, signs, or devices that would cause a reasonable person to believe the user is licensed/certified to practice as a registered nurse (RN), an advanced practice registered nurse (APRN), licensed practical nurse (LPN) or certified nurse assistant (CNA).

(c) Any person licensed or certified to practice nursing or as a nurse assistant *shall* wear an insignia to identify himself or herself by his/her name and appropriate legal title or abbreviation during times when such person is providing health care to the public for compensation.

(d) The insignia *shall* be prominently displayed and clearly legible such that the person receiving care may readily identify the type of nursing personnel providing the care.

§ 6706. Scope of Practice.

The Nurse Assistant, under the supervision of a Registered Nurse *shall*:

(a) Demonstrate competence in providing patient personal care, basic treatment procedures and exercise plan as directed;

(b) Facilitate the maintenance of a safe, clean, healthful environment that demonstrates awareness of the patient's safety, comfort and privacy when providing care and report all events that pose an actual or potential safety risk to patients or staff;

(c) Demonstrate the ability to follow patient care plans, directions, assignments and designated responsibilities;

(d) Demonstrate the ability to perform general nursing care following established procedures;

(e) Document clearly and concisely, using proper notations and abbreviations all patient care and procedures;

(f) Maintain open communication and positive working relationships with patients, peers, other employees, supervisors and managers;

(g) Maintain certification and regularly assess own skills and training needs.

§ 6707. Responsibilities of the Nurse Assistant Applicant.

It *shall* be the responsibility of the applicant to:

(a) Correspond or communicate directly with the Board.

(b) Follow through with the submission of all required documents until application is completed.

(c) Periodically contact the Board concerning the status of the application.

(d) Inform the Board in writing to withdraw an application.

(e) Inform the Board of any change in name or address. A nurse assistant who has a change in name *shall* submit a notarized copy of a marriage certificate, or court order showing the change to the Board. A duplicate certificate with the change *shall* be issued by the Board upon receipt of such evidence and payment of the required fee. All certificate renewals will be mailed to the most current known address on file.

(f) Give written notification to the Board office prior to an examination date, if unable to take the scheduled examination. A specific reason must be indicated. If the reason is acceptable to the Board, for example, candidate is ill, death in immediate family, accident, etcetera, the

applicant's examination date may be extended to the next examination date. An examination fee will be charged to all applicants who are rescheduled to take the examination.

(g) Notify the Board, in writing, of the loss of a certificate. A duplicate certificate for the current renewal period *shall* be issued by the Board upon receipt of the required documents and payment of fees.

(h) Maintain a current Guam Nurse Assistant certification.

§ 6708. Responsibilities of the Employer.

Nursing administrators, agency heads or other employers, who employ Nurse Assistants without current certification, are in violation of the Guam Nurse Practice Act, Article 3, Chapter 12 of Title 10, Guam Code Annotated and these rules and regulations.

§ 6709. Certification by Examination.

The following certification by examination *shall* apply to those applicants who wish to be certified as a Nurse Assistant:

(a) The Nurse Assistant certification examination of the National Council of State Boards of Nursing is the Board's examination for Nurse Assistant certification.

(b) The minimum passing score on the examination for nurse assistants will be the passing score as established by the National Council of State Boards of Nursing.

(c) The Board *shall* administer examination for nurse assistant certification in accordance with the regulations as set forth by the National Council of State Boards of Nursing.

(d) Student nurses and graduates of a board approved nursing program who meets Guam's minimum educational nurse assistants' requirements may be allowed to take the examination.

(e) If a candidate does not write the examination when scheduled, the application may be retained on file for one (1) year.

§ 6710. Examination Requirements.

Individuals seeking to write the Nurse Assistant examination must meet the following requirements:

(a) Be a graduate of an approved high school or the equivalent General Education Courses (GED) certificate. High School students who complete a nurse assistant program may be allowed to take the National Certification Examination and will be issued the certification upon completion of graduation from high school.

(b) Complete a Board-approved program for the preparation of Nurse Assistants or a program or course of study that meets the requirements as set by these rules and regulations.

(c) Complete and submit a notarized Board application form within the deadlines and policies of the Board.

(d) Request the school providing the nursing program or nurse assistants' program to submit an official Certificate of Nursing Education and transcript directly to the Board.

(e) Submit a two inch by two inch (2"x2") signed photograph taken within the past year.

(f) Submit the required examination fee.

(g) In addition to these requirements, the applicant seeking certification by examination must provide:

(1) Identification of any state, territory or country in which the applicant holds a health-related licensure/certification or credentials other than as a nurse assistant. Identification *shall* include the number and status of the license/certification or credential and the original state or country of licensure or credentialing.

(2) Information about current employer if employed in health care, to include address, telephone number, position and date of employment.

(3) Information regarding previous employer in health care, if any, if current employment is less than 12 months.

(4) Information related to the applicant's background in the following areas:

(A) Pending disciplinary action or investigation regarding any professional license or credential.

(B) Any pending criminal charges - national or international.

(C) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction.

(D) Any chemical, physical or mental impairment and/or disability that impacts the applicant's ability to practice safely, and a description of accommodations and/or practice limitations needed, if any.

(E) Any current substance abuse.

(5) Official record of local, state and federal criminal background checks completed within the last 2 months.

(h) Persons who served on active duty in a health related field of the U. S. Armed Forces may apply to the Board for evaluation of records. Applicant must:

(1) Submit proof of having had at least twelve (12) months service on active duty in a health related field of any of the U.S. Armed Forces rendering bedside direct patient care.

(2) Submit proof of having completed a basic course of instruction which *shall* be equivalent to the course requirements set by these rules and regulations while in the Armed Forces.

(3) Submit proof that the claimed service was honorable. These documents *shall* be certified by the Armed Forces and submitted directly to the Board.

§ 6711. Policies for Examination.

The following policies *shall* apply for nurse assistant examinations.

(a) Applications and fees for the certifying examination *shall* be submitted to the Board office by the Board's examination deadline.

(b) Applications containing fraudulent or misrepresented information *shall* be cause for denial of certification.

(c) Applications that are not completed and/or inactive will become null and void after one (1) year. The Board will dispose of the application as governed by the Government of Guam statute.

(d) Candidates *shall* take the first certifying examination offered after approval of application by the Board.

(e) Applicants for examination *shall* be required to pass the National Council of State Boards of Nursing Nurse Assistants' certifying examination within two (2) years after graduation from a Board approved nursing program or nurse assistants' training program. Applicants applying after two (2) year limitation period *shall* be considered by the Board on a case by case basis. The applicant may be required to satisfactorily complete an approved program or course of study, including basic skills in nurse assistants' practice or follow specific remedial measures as prescribed by the Board prior to being scheduled to take an examination.

(f) Transcripts *shall* include information on the nursing education program(s), including programs which were completed in less than the usual length of time, through advance standing or transfer of credits from one institution to another.

(g) Credentials of education and certification, if not in English, *shall* be accompanied by a certified translation.

(h) Any change of name, after filing the original application, must be supported by an affidavit satisfactory to the Board.

(i) Any applicant who cannot demonstrate fulfillment of the education requirements *shall* be notified in writing and must satisfy the deficiency before being admitted to the examination.

(j) Candidates with disabilities *shall* be requested to submit a completed application at least one hundred twenty-five (125) days in advance of the scheduled exam date to facilitate necessary modification of testing service.

(k) Applicant(s) giving and/or receiving unauthorized access or assistance on the national certifying examination *shall*:

- (1) Not be allowed to continue writing the examination and will be removed from the examination site;
- (2) Forfeit the examination results;
- (3) Be reported in writing to the Board;
- (4) Be allowed an appeals hearing if requested.

(l) Candidates *shall* be required to rewrite lost or destroyed test(s) at no cost to the applicant.

§ 6712. Examination Retakes.

All applicants wishing to retake the National Council of State Boards of Nursing certification examination for Nurse Assistants *shall* submit to the Board an examination application form, applicable fees and any updates as necessary.

(a) Applicants retaking the examination for the second or third time *shall* be responsible for self-study remedial measures.

(b) Applicants retaking the examination four or more times *shall* be required to follow specific remedial measures that include basic nurse assistant skills as prescribed by the Board.

§ 6713. Prioritization of Examination Candidates.

Admission to the Nurse Assistants' national certification examination *shall* be based on the following priority of graduates from:

- (a) A Board approved Nurse Assistants' program on Guam;
- (b) A Nurse Assistants' program of the United States or its territories;

- (c) A nursing or nurse assistants' program, approved for proctoring, by a Board of Nursing of the United States or its territories or an equivalent training/experience in the U.S. Armed Forces;
- (d) An approved foreign nursing program that meets the Board's requirements.

§ 6714. Certification by Endorsement.

An applicant for endorsement to practice as a nurse assistant on Guam *shall* submit and remit:

(a) A current registration or certification as a nurse assistant from a certifying U.S. state or territory that meets Guam's requirements; and

(b) An official transcript and certification of training from an approved nurse assistant educational program or an approved program that meets the requirements set by these rules and regulations; and

(c) A completed, notarized application, provided by the Board; and

(d) A two inch by two inch (2" x 2") signed photograph taken within the past year; and,

(e) A verification of passing the National Council of State Boards of Nursing nurse assistant certification examination; and,

(f) Verification of original certification and evidence that the certification has not been suspended, revoked or restricted for any reason other than failure to renew or obtain the required continuing education credits to be completed by the certifying U.S. state or territory; and,

(g) Verification of last employment;

(h) In addition to the above requirements, the applicant seeking a Guam certification by endorsement *shall* provide the following as applicable to the applicant's status:

(1) Identification of any state, territory or country in which the applicant holds a license/certification/credential to practice in a health profession other than as a nurse assistant. Identification *shall* include the number and status of the license/certification/credential and the original state or country of licensure/certification/credential.

(2) Information about current or previous employer if employed in health care, to include address, telephone number, position title and dates of employment.

(3) Information related to the applicant's background such as pending disciplinary action or investigation; any pending criminal charges - national or international; criminal conviction; nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction; any chemical, physical or mental impairment and/or disability that impacts the applicant's ability to practice safely and a description of accommodations and/or practice limitations needed, if any; and any current substance abuse.

(4) Official record of local, state or federal criminal background checks completed within the last two (2) months; and,

(i) Payment of the required fee.

§ 6715. Renewal of Certification.

(a) Nurse assistant certifications *shall* be renewed biennially by September 30th of

even numbered years. Failure to renew certification *shall* result in forfeiture of the right to work as a nurse assistant on Guam, until such time the certification has been renewed.

(b) Applications for renewal will be mailed to the last known address. Failure to receive the application for renewal *shall* not relieve the certificate holder from the responsibility of renewing his or her certificate.

(c) The certified nurse assistants *shall* return to the Board a completed renewal application form with the required fee.

(d) Information pertaining to the applicant's background in the following areas *shall* also be required of the licensee to submit to the Board:

(1) Pending disciplinary action or investigation regarding any professional license or credential;

(2) Pending criminal conviction;

(3) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction since the last renewal;

(4) Any chemical, physical or mental impairment and/or disability that impacts the nurse's ability to practice nursing safely, and a description of accommodations and/or practice limitations needed, if any;

(5) Any current substance abuse;

(6) A detailed explanation and supporting documentation for any of the above information.

(7) Official record of local, state and federal criminal background checks completed within the last two (2) months.

(e) Any person employed as a nurse assistant after a certificate has lapsed or been revoked *shall* be considered as working illegally and *shall* be subjected to prosecution under the provisions of the Nurse Practice Act, Article 3, Chapter 12 of Title 10, Guam Code Annotated.

§ 6716. Continuing Education Requirements.

(a) Nurse assistants *shall* submit to the Board evidence of fifteen (15) Continuing Education hours or such other amount as the Board may determine:

(1) In a health related education/training program as accepted by the Board;

(2) Within the renewal period to be eligible for certification renewal or endorsement.

(b) Nurse assistants, who have been practicing, but do not meet (a) of this Section, at time of renewal may be issued a conditional certification to last no more than three (3) months for the applicant to meet the requirements.

§ 6717. Reinstatement of Lapsed Certification.

(a) An person whose certification has lapsed due to failure to renew by September 30th of the renewal year may apply to the Board for reinstatement upon submission of:

(1) A completed application for reinstatement;

(2) Verification of continuing education units as required by the Board;

(3) A written explanation why the certification has lapsed; and

(4) Payment of the reinstatement fee.

(b) Other requirements. In addition to these requirements, the applicant seeking certification by reinstatement must provide:

(1) Identification of any state, territory or country in which the applicant holds a health profession license or credentials other than nursing. Identification *shall* include the number and status of the license or credential and the original state or country of licensure or credentialing.

(2) Information about current employer if employed in health care, to include address, telephone number, position and date of employment.

(3) Information regarding previous employer in health care, if any, if current employment is less than 12 months.

(4) Information related to the applicant's background in the following areas:

(A) Pending disciplinary action or investigation regarding any professional license or credential.

(B) Any pending criminal charges - national or international.

(C) Criminal conviction, nolo contendere plea, Alford plea or other plea arrangement in lieu of conviction.

(D) Any chemical, physical or mental impairment and/or disability that impacts the nurse's ability to practice nursing safely, and a description of accommodations and/or practice limitations needed, if any.

(E) Any current substance abuse.

(5) Official record of local, state and federal criminal background checks completed within the last 2 months.

(c) The Board *shall* review applications only after all the above requirements have been submitted.

(d) At any time after a certification has lapsed or been inactive, the Board may require evidence of the applicant's current nursing knowledge and skill before reinstating the certification to active status.

(e) An individual who applies for reinstatement of certification who has been out of practice for three (3) years or longer *shall* provide evidence of passing a refresher course approved by the Board.

(f) The Board may request a nurse assistant seeking reinstatement to appear before the Board.

(g) The holder of a lapsed certificate is subject to all laws in effect at the time of the application.

§ 6718. Characteristics of Nurse Assistants.

The graduate of the Nurse Assistant educational program *shall* be prepared to:

(a) Communicate and interact competently, effectively and respectfully on a one-to-one basis with clients, co-workers and supervisors;

(b) Demonstrate sensitivity to clients' emotional, social and mental health needs through skillful directed interactions;

(c) Assists clients in attaining and maintaining functional independence;

(d) Exhibit attitude and behaviors that supports and promotes the rights of clients;

(e) Demonstrate professional, ethical and legal behavior consistent with the application of the standards of practice for nurse assistants, local and federal laws and regulations and agency policies;

(f) Demonstrate skills in observation, monitoring and documentation of the assessment of client's health, physical condition and well-being as delegated by the licensed nurse or physician;

(g) Demonstrate attitude and behaviors or responsibility and flexibility in personal and workplace environments;

(h) Demonstrate competency and compliance in the application of health and safety policies, procedures and regulations, including equipment and hazardous material handling; and,

(i) Demonstrate the ability to perform duties and responsibilities as a nurse assistant under stress especially when confronted with emergency or critical situations with clients.

§ 6719. Grounds for Disciplinary Action.

The Board may deny, suspend, or revoke a nurse assistant certificate in accordance with the Administrative Adjudication Law or issue a reprimand to a certified nurse assistant for the following causes:

(a) Conviction of a crime where such crime bears a demonstrable relationship to the duties of a nurse assistant as determined by the Board;

(b) Any willful fraud or misrepresentation in applying for or procuring a certificate or renewal thereof;

(c) Physical or mental condition that makes the certificate holder unable to perform the duties of a nurse assistant;

(d) Conduct unbecoming a nurse assistants in the performance of duties.

(1) Leaving a nurse assistant assignment without properly notifying appropriate personnel;

(2) Failure to report to proper authorities, facts known regarding incompetent, unethical, or illegal practice of any health care provider;

(3) Failure to respect clients rights and dignity, regardless of social or economic status, personal attributes, or nature of health problems;

(4) Failure to report actual or suspected incidents of client abuse;

(5) Aiding, abetting, or assisting an individual in violating or circumventing any law, rule or regulation intended to guide the conduct of other health care providers;

(6) Violating the rights of privacy, confidentiality of information, or knowledge concerning the client, unless required by law to disclose such information;

(7) Discriminating against a client on the basis of age, race, religion, sex, sexual preference, national origin, handicap or socioeconomic status;

(8) Engaging in sexual misconduct or sexual offenses as described in § 25.10 through 25.45 of Title 9; Guam Code Annotated;

(9) Providing, selling, applying form, or attempting to procure a certificate through willful fraud or misrepresentation;

(10) Suspicious use of intoxicants, prescription, over the counter, or controlled drugs to an extent or in a manner injurious to the nurse assistants or others, or to the extent

that such use impairs the ability to conduct safely the duties of a nurse assistant. A positive drug screen result for which there is no lawful prescription;

(11) Unlawful use or possession, or obtaining, selling or furnishing controlled substances;

(12) Neglecting or abusing a client physically, verbally, emotionally or financially;

(13) Failure to competently perform duties of a nurse assistants;

(14) Soliciting, borrowing, or removing a client's property or money without prior approval of the client;

(15) Taking drugs, supplies, property, or money, not belonging to the nurse assistant, without prior authorization; and,

(16) Threatening or violent behavior in the workplace.

§ 6720. Fees.

In addition to the application fee, the applicant *shall* remit payment for the fee of the exam and the applicant *shall* remit payment for the examination fee directly to the examining center. Fees *shall* be assessed for the approval of nurse assistant educational programs and certification and recertification of nurse assistants, as well as for other actions to be taken by the Board. All fees are payable at the time of application and are NOT refundable.

ARTICLE 8 – Violations and Penalties

§ 6801. Violations.

It is unlawful for any person to:

(a) Engage in the practice of nursing or use any designation by which a person represents to the public that he/she is a licensed nurse, an APRN or a nurse assistant as defined in these Administrative Rules and Regulations without a valid, current license or certification, except as otherwise permitted under the Act;

(b) Practice nursing under the cover of any diploma, license/certification or record illegally or fraudulently obtained, signed or issued unlawfully or under fraudulent representation;

(c) Practice nursing during the time a license or certification is suspended, revoked, surrendered, inactive or lapsed;

(d) Use any words, abbreviations, figures, letters, title, sign, card or device tending to imply that he or she is a registered nurse, licensed practical nurse, advanced practice registered nurse or nurse assistant unless such person is duly licensed or certified to practice under the provisions of the Act;

(e) Sell or fraudulently obtain or furnish any nursing diploma, license or certification or renewal of a license, certification or record, or aid or abet therein;

(f) Knowingly employ unlicensed or uncertified persons in the practice of nursing;

(g) Fail to report information in relation to the violations of the Act;

(h) Conduct a program for the preparation for licensure under the Act unless the Board has approved the program;

(i) Conduct courses or provide consultation that conflicts with the scope and standards of practice set forth in the Act;

(j) Otherwise violate, or aid or abet another person to violate any provision of the Act; or

(k) Engage in irregular behavior in connection with the licensure or certification examination, including, but not limited to, the giving or receiving of aid in the examination or the unauthorized possession, reproduction or disclosure of examination questions or answers.

§ 6802. Penalties.

(a) Any person who violates the provisions of § 6801 is guilty of a misdemeanor upon conviction of the first such offense. Unless otherwise provided in this Article or any other law, any person who violates the provisions of § 6801 except subsection (f) *shall* be guilty of a felony upon conviction of the second or subsequent offense.

(2) Any person who violates the provisions of Subsection (f) of § 6801 *shall* be guilty of a second degree felony.

§ 6803. Criminal Prosecution.

Nothing in this Article *shall* be construed as a bar to criminal prosecution for violation of the provisions of these Administrative Rules and Regulations.

ARTICLE 9 – Discipline and Proceedings

§ 6901. Authority.

The Board may exercise its disciplinary authority in accordance with the Act. This authority includes, but is not limited to, the power to:

(a) Deny the application for a license;

(b) Refuse to renew a license;

(c) Revoke a license;

(d) Suspend a license;

(e) Limit or restrict a license

(f) Impose fines of up to \$1,000.00

(g) Take any other action justified by the facts in the case; or

(h) Otherwise discipline or place on probation a licensee

§ 6902. Grounds for Denial of a License.

Any of the following will be deemed to be grounds for denial of a license:

(a) Failure to meet any requirement or standard pertaining to nursing practice or licensure established by law or by rules and regulations adopted by the Board.

(b) Failure to pass the licensing exam.

§ 6903. Grounds for Discipline.

(a) The Board may discipline a licensee or applicant for any one or a combination of the following grounds:

(1) False, fraudulent or forged statement or misrepresentation in procuring a license to practice nursing. This *shall* mean, but *shall* not be limited to:

(2) Procuring or attempting to procure a license to practice nursing by filing forged or altered documents or credentials, falsifying or misrepresenting facts on any application for licensure, examination, re-licensure, or reinstatement;

(3) Impersonating any applicant or acting as proxy for any applicant in any examination for licensure; or

(4) Practicing nursing under a false or assumed name or carrying out licensed nursing functions while using other than legal name.

(b) Licensing Exam Violations-conduct that violates the security of the examination, including but not limited to:

(1) Copying, disseminating, or receiving of any portion of an examination.

(2) Having unauthorized possession of any portion of a future, current, or previously administered examination.

(3) Violating the standard of test administration.

(4) Permitting an impersonator to take the examination on one's behalf or impersonating an examinee.

(c) Criminal Convictions-convictions by a court or entry of an Alford plea or a nolo contendere plea to a crime in any jurisdiction that relates adversely to the practice of nursing or to the ability to practice nursing; conviction of a felony, or crime involving moral turpitude.

(d) Fraud and/or Deceit- employing fraud or deceit in representation of self to Board or public, in filing any reports or completing client records, in authenticating any report or records in the nurse's capacity as a registered nurse, licensed practical nurse or advanced practice registered nurse or nurse assistant in submitting any information to the Board.

(e) Unethical Conduct- including but not limited to conduct likely to deceive, defraud or harm the public; or demonstrating a willful or careless disregard for the health and safety of a client. Actual injury need not be established. Unethical conduct may include behavior that demeans the nursing profession at large.

(f) Action in Another Jurisdiction- a nurse's license to practice nursing or a multi- state practice privilege or another professional license or other credential has been denied, revoked, suspended, restricted or otherwise disciplined in this or any other state or territory.

(g) Unsafe Practice/Unprofessional Practice- actions or conduct including, but not limited to:

(1) Failure or inability to perform registered nursing, practical nursing, advanced practice nursing or nurse assisting as defined and established in these rules and regulations, with reasonable skill and safety.

(2) Unprofessional conduct, including but not limited to:

(A) A departure from or failure to conform to nursing standards and current rules and regulations. Performance of acts which are beyond the limits of the practice of professional or practical nursing or nurse assistant, as the case may be;

(B) Improper management of client records;

(C) Delegating or accepting the delegation of a nursing function or a prescribed health function in a manner contrary to the Nurse Practice Act and/or

when the delegation or acceptance could reasonably be expected to result in unsafe or ineffective client care;

(D) Failure to supervise the performance of acts by any individual working at the nurse's delegation or assignment

(E) Failure to take appropriate action in safeguarding the patient from incompetent health care practice;

(F) Failure of a clinical nursing instructor to supervise student experiences;

(G) Failure to prepare and submit incident reports.

(3) Administration of medications and treatments in a negligent manner;

(4) Employment or assignment of unqualified persons to perform functions that require a license or a certification to engage in the practice of nursing;

(5) Assumption of duties and responsibilities in the practice of nursing without adequate education and training or when competency has not been maintained;

(6) Practicing nursing without a current Guam license, with a lapsed license or beyond the period of a valid temporary work permit;

(7) Leaving a nursing assignment without properly notifying personnel;

(8) Violating the confidentiality of information or knowledge concerning a patient;

(9) Discriminating in the rendering of nursing services as it relates to human rights and the dignity of the individual;

(10) Failure of a chief administrative nurse to follow appropriate and recognized standards and guidelines in providing oversight of the nursing organization and nursing services of a health care delivery system;

(11) Conduct or any nursing practice that may create unnecessary danger to a client's life, health or safety.

(12) Failure to practice within a modified scope of practice or with the required accommodations, as specified by the Board in granting a modified license as defined in these rules and regulations or any stipulated agreement with the Board.

(13) Inability to Practice Safely – demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as a result of any mental or physical conditions, or by court order adjudging that a licensee is mentally incompetent, or an evaluation by a qualified person indicating that the licensee is mentally or physically incapable of engaging in professional or practical nursing in a manner consistent with sound patient care.

(h) Misconduct-actions or conduct that include, but are not limited to:

(1) Falsifying reports, client documentation, agency records or other essential health documents;

(2) Inaccurate recording or other alteration of patient or employee records;

(3) Misappropriating drugs, money, supplies or equipment;

(4) Failure to cooperate with a lawful investigation conducted by the Board;

(5) Failure to maintain professional boundaries with clients and/or family members;

(6) Use of excessive force upon or mistreatment or abuse of any client;

(7) Engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors of language or behavior suggestive of the same;

(8) Threatening or violent behavior in the workplace.

(i) Failure to meet any requirement or standard pertaining to nursing practice or licensure established by law or by rules and regulations adopted by the Board.

(j) Gross negligence or recklessness in performing nursing functions, which *shall* include, but *shall* not be limited to:

(1) Any act which deviates from standard of care, which under similar circumstances, would have been exercised by a licensed peer; or,

(2) Any act or omission, where there was a legal duty to act or to refrain from acting, that a reasonable and prudent practitioner of nursing under same or similar facts and circumstances would have done, would have refrained from doing or would have done in a different manner, and which did or could have resulted in harm or injury to a patient/client; or,

(3) A substantial departure from the accepted standard of care *shall* be the exercise of so slight a degree of care as to justify the belief that there was a conscious or overt disregard or indifference for the health, safety, well- being, or welfare of the public.

(k) Drug Diversion-diversion or attempts to divert drugs or controlled substances.

(l) Failure to Comply with Alternative Program Requirements - failure of a participant of an alternative (to discipline) program to comply with terms of her/her alternative program agreement. This regulation provides a specific ground for failure to comply with terms of program agreement with the Alternatives to Discipline Program. This addresses the Board to investigate if a nurse or nurse assistant who has been in a program for some time were to relapse and is referred to the Board for possible disciplinary action.

(m) Other Drug Related- actions or conduct that include, but are not limited to:

(1) Use or solicitation of any controlled substance or any drug or device or alcoholic beverages, to an extent or in a manner dangerous or injurious to himself or herself, any other person, or the public or to the extent that such use may impair his or her ability to conduct with safety to the public the practice authorized by his or her license;

(2) Falsification of or making incorrect, inconsistent or unintelligible entries in any agency, client or other record pertaining to drugs or controlled substances;

(3) A positive drug screen for which there is no lawful prescription.

(n) Unlawful Practice-actions or conduct that include, but are not limited to:

(1) Knowingly aiding, assisting, advising or allowing an unlicensed person to engage in the unlawful practice of registered or practical nursing or nursing assistant;

(2) Violating a rule adopted by the Board, an order of the Board, or a Guam or Federal law relating to the practice of registered or practical nursing, or a Guam or Federal narcotics or controlled substance law;

(3) Practicing beyond the scope of practice as stated in the Nurse Practice Act;

(4) Failing to report violations of the Act.

§ 6904. Procedures.

(a) Complaint Investigation:

(1) When a complaint is filed with the Board that charges any persons with an act or omission in violation of the Nurse Practice Act and/or these rules and regulations, the Board *shall* provide for an investigation to determine whether there are sufficient grounds stated in the complaint to warrant further action.

(2) The written complaint *shall* include the name and address of the person against whom the complaint is made, a concise statement of the complaint, and the names and addresses of the persons having knowledge of the incident and signed by the complainant.

(b) Complaint Resolution:

(1) Complaints may be settled through informal negotiations with the subject nurse and/or subject nurse's attorney

(2) Negotiated settlements *shall* be reviewed to determine that any proposed remedy is appropriate for the facts as admitted or stipulated.

(3) If a complaint cannot be resolved through informal negotiations, the case may be referred for formal administrative hearings.

(4) The Board *shall* review the evidence and record produced at administrative hearings, and recommendations of the administrative law judge to determine whether the burden of proof has been met showing that the licensee has violated one or more grounds for disciplinary action. The Board is responsible for making complain resolution decisions.

(c) Hearings. If, after an investigation is conducted, the Board determines that there are sufficient grounds to believe that a violation of the Nurse Practice Act and/or these rules and regulations may have been committed, the Chairman of the Board *shall* schedule a hearing pursuant to the provisions and procedures of the Administrative Adjudication Law. The Board *shall* have the power to issue subpoenas in accordance with the Administrative Adjudication, Law.

(d) Disciplinary Action in another State. When the Board receives information that a person applying for a license or who is currently licensed in Guam has had a license to practice nursing revoked or suspended in another state, the Board *shall*:

(1) Obtain the findings of fact and conclusions of law from the board of the state or territory that took the disciplinary action; and

(2) Determine if the findings warrant suspension or revocation of the person's Guam license or denial of his application for licensure on Guam, and if so, *shall* take appropriate action.

(e) Costs Resulting From Disciplinary Action. Any licensed nurse whose license has been suspended, restricted or revoked, may have his/her license reinstated when, in the discretion of the Board, the action is warranted; provided, that such nurse may be required by the Board to pay up to 50 percent of the costs of the proceedings resulting in the suspension, revocation, or reinstatement of his/her license or registration certificate, and, in addition thereto, pay the fee for the current year's registration/renewal fee.

§ 6905. Immunity.

Any member of the Board or staff, or any person reporting to the Board of Nursing in good faith information relating to alleged incidents of negligence or malpractice or the qualifications,

fitness or character of a person licensed or applying for a license to practice nursing *shall* not be subject to a civil action of damages as a result of reporting such information. The immunity provided by this section *shall* extend to the members of any professional review committee and witnesses appearing before the committee authorized by the Board to act pursuant to this section.

§ 6906. Notification.

The Board *shall* provide information as required by federal law to federal databanks, to the National Council of State Boards of Nursing centralized licensing and discipline databank (Nursys) and may develop procedures for communicating with others in board policy.

ARTICLE 10 – Emergency Relief

§ 61001. Summary Suspension.

(a) Authority. The Board is authorized to temporarily suspend the license of an RN, LPN, APRN or the certification of a Nurse Assistant without a hearing if:

- (1) The Board finds that there is probable cause to believe that the nurse or nurse assistant has violated a statute or rule that the Board is empowered to enforce; and
- (2) Continued practice by the nurse or nurse assistant would create imminent and/or serious risk of harm to others.

(b) Duration. The suspension *shall* remain in effect until the Board issues a stay of suspension or a final order in the matter after a hearing or upon agreement between the Board and licensee.

(c) Hearing. The Board *shall* schedule a disciplinary hearing to be held under the Administrative Procedures act, to begin no later than thirty (30) days' notice of the hearing.

§ 61002. Automatic Suspension

(a) Unless the Board orders otherwise, a license to practice nursing is automatically suspended if:

- (1) A guardian of a nurse or nurse assistant is appointed by order of a court of competent jurisdiction;
- (2) The nurse or nurse assistant is committed by order of a court of competent jurisdiction;
- (3) The nurse or nurse assistant is determined to be mentally incompetent, mentally ill, chemically dependent or a person dangerous to the public by a court of competent jurisdiction within or outside of Guam.

(b) The license/certification remains suspended until the nurse or nurse assistant is restored to capacity by a court of competent jurisdiction. The nurse or nurse assistant *shall* petition the Board for reinstatement. The Board may terminate the suspension after a hearing or upon agreement between the Board and the nurse or nurse assistant.

§ 61003. Injunctive Relief

(a) Authority. The Board or any prosecuting officer upon a proper showing of the facts is authorized to petition a court of competent jurisdiction for an order of injunctive relief – to enjoin the individual from practicing professional or practical nursing, as the case may be.

(1) Any person who is engaging in the practice of nursing within the meaning of this Act from practicing without a valid license, unless exempted under Article 12.

(2) Any person, firm, corporation, institution or association from employing any person who is not licensed or certified to practice as a nurse or nurse assistant under this act or exempted under Article 12.

(3) Any person, firm, corporation, institution or association from operating a school of nursing without approval.

(4) Any person whose license or certification has been suspended or revoked for practicing as an RN, LPN, APRN or NA.

(5) Any person to use the title “nurse,” “registered nurse,” “advanced practice registered nurse,” “licensed practical nurse,” or “certified nurse assistant” or other authorized abbreviations unless licensed or certified to engage in the practice of nursing in Guam.

(b) The court may without notice or bond, enjoin such acts and practice. A copy of the complaint *shall* be served on the defendant and the proceedings thereafter *shall* be conducted as in other civil cases. In case of violation of an injunction issued under this section, the court, or any judge thereof, may summarily try and punish the offender for contempt of court.

§ 61004. Preservation of Other Remedies.

The emergency proceedings herein described *shall* be in addition to, not in lieu of, all penalties and other remedies provided by law.

ARTICLE 11 – Reporting Requirements

§ 61101. Duty to Report by Licensed Nurses or Certified Nurse Assistants.

A licensed nurse or a certified nurse assistant *shall* report names of subject individuals to the Board if the licensed nurse or certified nurse assistant has reasonable cause to suspect that an individual/practitioner has violated any of the grounds for discipline found in Article 9, except for minor incidents as described in this rule.

§ 61102. Duty to Report by Other Individuals.

(a) Hospitals, nursing homes, temporary staffing agencies, and other employers of registered nurses, licensed practical nurses, advanced practice registered nurses or certified nursing assistants *shall* report to the Board the names of any licensee, certificate holder or applicant for nursing licensure or certification whose employment has been terminated or who has resigned in order to avoid termination for any reasons stipulated in Article 9.

(b) Hospitals, nursing homes, temporary staffing agencies, and other employers of registered nurses, licensed practical nurses, advanced practice registered nurses or certified nursing assistants *shall* report to the Board the names of any licensees, certificate holders or applicants who participated in medical/surgical procedures, interventions or activities that resulted in a malpractice claim or lawsuit. The licensee or certificate holder or applicant may not necessarily be identified or named in the malpractice claim or lawsuit but was involved in the performance of the acts.

(c) A state/territory agency that licenses registers or certifies a hospital, nursing home, home health agency or other types of health care facilities or agency sections, or surveys one of these agencies *shall* report to the Board when that agency has evidence that the licensed nurse or certified nurse assistant has violated the Act.

(d) Each insurer that provides professional liability insurance that covers claims arising from providing or failing to provide nursing care *shall* report any payment made on behalf of a licensed nurse or certified nurse assistant in a claim or lawsuit.

(e) A person who is required to report a licensed nurse or certified nurse assistant under this Article because the licensed nurse or certified nurse assistant is impaired or suspected of being impaired by chemical dependency or mental illness may report to the alternate appropriate authorities.

(f) The Board *shall* inform, in the manner the Board determines appropriate, nurses, facilities, agencies and other persons of their duty to report under this Article.

(g) The Board *shall* develop procedures to identify criminal convictions of licensed nurses or certified nurse assistants involving:

- (1) Moral turpitude.
- (2) Violation of a state or federal narcotics or controlled substances law.
- (3) Fraud or abuse under the Medicare or Medicaid programs.
- (4) Court determination that a nurse or nurse assistant is mentally ill or mentally incompetent.

(h) The Board *shall* access the National Databank concerning any licensed nurse or certified nurse assistant against whom a malpractice award has been made or who has been a party to a settlement. The Board *shall* request a report with the following information:

- (1) Total number of settlement(s) or award(s);
- (2) Date(s) settlement(s) or award(s) were made;
- (3) Allegations contained in the claim(s) or complaint(s) leading to the settlement(s) or award(s);
- (4) The dollar amount of each malpractice settlement or award and whether that amount was paid off as a result of a settlement or of an award; and,
- (5) The name and address of the licensed nurse or certified nurse assistant against whom an award was made or with whom a settlement was made.

§ 61103. Immunity of Persons Making Reports.

Any member of the Board or professional review committee authorized by the Board and any witness appearing before the Board, a hearing office, or such a professional review committee

shall be immune from suit in any civil action taken by a licensee or certificate holder who is a subject of a professional review proceedings.

§ 61104. Board Surveillance.

(a) The Board may query the National Practitioner Data Bank any information pertaining to nurses licensed or nurse assistant certified in Guam.

(b) The Board will request information from the Superior Court of Guam four (4) times a year, by the first of February, May, August and November, about any judgments pertaining to nurses licensed and nurse assistants certified in Guam.

§ 61105. Minor Incidents.

(a) The chief administrative nurse or designee responsible for reviewing incidents of practice breakdown may determine that an incident need not be reported to the Board if all of the following factors exist:

(1) The potential risk of physical, emotional, or financial harm to the client due to the incident is minimal;

(2) The nurse or nurse assistant exhibits a conscientious approach to and accountability for his or her practice;

(3) The nurse or nurse assistant has demonstrated the knowledge and skill to practice safely.

(b) The review of the incident *shall* include evaluation of the significance of the event in the practice setting, the context of the event, and the presence of contributing or mitigating circumstances in the nursing care system.

(c) If an event is determined to be a minor incident:

(1) An incident/variance report *shall* be completed according to the employing facility's policy, including a complete description of the incident, client record number, names of witnesses, identification of subject nurse or nurse assistant and actions taken to correct or remediate the problem.

(2) The chief administrative nurse or designee *shall* maintain a record of each minor incident involving nurses and nurse assistants under his/her supervision.

ARTICLE 12 – Exemptions

§ 61201. Exemptions from Rules.

No provisions of this Act Nothing in these rules *shall* be construed to prohibit:

(a) The practice of nursing that is an integral part of a program by nursing students enrolled in Board-approved nursing education programs leading to initial licensure/ certification;

(b) The clinical practice needed to fulfill program requirements by a graduate nursing student currently licensed in another jurisdiction who meets criteria set forth in these rules and regulations;

(c) The practice of professional nursing or the practice of practical nursing in an emergency;

(d) The rendering of assistance by any nurse or nurse assistant who is currently licensed/certified in another jurisdiction while assisting in a state of an emergency or disaster as a volunteer of any recognized organization;

(e) The incidental and gratuitous care of the sick by members of the family, friends or companions, or household aides at the direction of a person needing such care who resides independently outside any hospital, nursing or health care facility, or other similar institutional setting;

(f) Caring for the sick in accordance with tenets or practices of any church or religious denomination that teaches reliance upon spiritual means for healing;

(g) The practice of any professional nursing by a registered nurse or the practice of practical nursing by a licensed practical nurse who is currently licensed in another state, jurisdiction or territory while in the discharge of his or her official governmental duties as an employee of any bureau, division or agency of the United States government;

(h) The practice of any professional nursing by a registered nurse or the practice of practical nursing by a licensed practical nurse who is currently licensed in another jurisdiction and employed by an individual, agency or corporation located in such other jurisdiction and whose employment responsibilities include the transporting of patients to health care facilities within Guam. Such exemptions *shall* be limited to a period no longer than necessary to transfer the care of persons qualified under this Act and *shall* not exceed five (5) days.

(i) The practice of professional nursing by a registered nurse who is currently licensed in another state or territory who is in this state/territory on a non-routine basis for a period not to exceed ninety (90) days to:

- (1) provide professional nursing consulting services; or,
- (2) attend or present a continuing nursing education program; or,
- (3) provide other short-term clinical or non-clinical nursing services.

(j) Any person permitted by these exemptions to practice professional nursing or practical nursing without a license issued by the Guam Board *shall* be held to the same standard of care as any practitioner licensed by the Guam Board. A person permitted by these exemptions to practice without a license *shall* register his/her name and practice location with the Board before commencing practice, unless such registration is not possible because of the time or emergency involved.

ARTICLE 13 – FEES/RECORD OF PAYMENT