

**VIRGINIA BOARD OF NURSING**  
**Regulatory Review Committee Meeting**  
**Final Agenda**

Department of Health Professions – Perimeter Center  
9960 Mayland Drive, Conference Center 201 – **Board Room 2**  
Henrico, Virginia 23233

***DHP Mission** – the mission of the Department of Health Professions is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.*

**Tuesday, January 24, 2023 – at 3:00 P.M. in Board Room 2**

**Committee Members:**

Cynthia Swineford, RN, MSN, CNE- **Chair**  
Laurie Buchwald, MSN, WHNP, FNP  
Margaret Friedenber, Citizen Member  
Felisa Smith, PhD, MSA, RN, CNE

**Staff Members:**

Jay Douglas, RN, MSM, CSAC; Executive Director  
Robin Hills, RN, DNP, WHNP; Deputy Executive Director for Advanced Practice  
Jacquelyn Wilmoth, RN, MSN; Deputy Executive Director for Education  
Stephanie Willinger; Deputy Executive Director for Licensing and CBC Unit  
Erin Barrett; DHP Policy Analyst

1. Introductions – **Ms. Swineford**
2. Public Comment
3. Review of Regulatory Process – **Ms. Barrett**
4. \*\*Review of Proposed Changes to **Chapter 19** – *Regulations Governing the Practice of Nursing* - All
5. \*\*Review of Proposed Changes to **Chapter 21** – *Regulations for Training Programs for Medication Administration by Unlicensed Persons and Immunization Protocol* - All
6. Next Steps

(\* mailed 1/5) (\*\* mailed 1/11) (\*\*\*)mailed 1/18)

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*Commonwealth of Virginia*



**REGULATIONS**  
**GOVERNING THE PRACTICE OF NURSING**  
**VIRGINIA BOARD OF NURSING**

**Title of Regulations: 18 VAC 90-19-10 et seq.**

**Statutory Authority: §§ 54.1-2400 and Chapter 30 of Title 54.1  
of the *Code of Virginia***

**Revised Date: February 2, 2022**

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**CHAPTER 19  
REGULATIONS GOVERNING THE PRACTICE OF NURSING**

**Part I  
General Provisions**

**18VAC90-19-10. Definitions.**

In addition to words and terms defined in §§ 54.1-3000 and 54.1-3030 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Active practice" means activities performed, whether or not for compensation, for which an active license to practice nursing is required.

"Authorization letter" means a letter issued by the Board that demonstrates that the applicant has been approved by the Board to take the NCLEX or to practice provisionally, or both.

"Board" means the Board of Nursing.

"CGFNS" means the Commission on Graduates of Foreign Nursing Schools.

"Contact hour" means 50 minutes of continuing education coursework or activity.

~~"Conversion therapy" means any practice or treatment as defined in § 54.1-2409.5 A of the Code of Virginia.~~

"National certifying organization" means an organization that has as one of its purposes the certification of a specialty in nursing based on an examination attesting to the knowledge of the nurse for practice in the specialty area.

"NCLEX" means the National Council Licensure Examination.

"NCSBN" means the National Council of State Boards of Nursing.

"Primary state of residence" means the state of a person's declared fixed, permanent, and principal home or domicile for legal purposes.

**18VAC90-19-20. Delegation of authority.**

The executive director shall be delegated the authority to issue licenses and certificates and execute all notices, orders, and official documents of the board unless the board directs otherwise.

**18VAC90-19-30. Fees.**

~~A.~~ Fees required by the board are:

1. Application for licensure by examination - RN	\$190
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2. Application for licensure by endorsement - RN	\$190
3. Application for licensure by examination - LPN	\$170
4. Application for licensure by endorsement - LPN	\$170
5. Reapplication for licensure by examination	\$50
6. Biennial licensure renewal - RN	\$140
7. Biennial inactive licensure renewal - RN	\$70
8. Biennial licensure renewal - LPN	\$120
9. Biennial inactive licensure renewal - LPN	\$60
10. Late renewal - RN	\$50
11. Late renewal - RN inactive	\$25
12. Late renewal - LPN	\$40
13. Late renewal - LPN inactive	\$20
14. Reinstatement of lapsed license - RN	\$225
15. Reinstatement of lapsed license - LPN	\$200
16. Reinstatement of suspended or revoked license <del>or registration</del>	\$300
17. Duplicate license	\$15
18. Replacement wall certificate	\$25
19. Verification of license	\$35
20. Transcript of all or part of applicant or licensee records	\$35
21. Handling fee for returned check or dishonored credit card or debit card	\$50
<del>22. Application for CNS registration</del>	<del>\$130</del>
<del>23. Biennial renewal of CNS registration</del>	<del>\$80</del>
<del>24. Reinstatement of lapsed CNS registration</del>	<del>\$125</del>
<del>25. Verification of CNS registration to another jurisdiction</del>	<del>\$35</del>

~~26. Late renewal of CNS registration~~

~~\$35~~

~~B. For renewal of licensure or registration from July 1, 2017, through June 30, 2019, the following fees shall be in effect:~~

<del>1. Biennial licensure renewal—RN</del>	<del>\$105</del>
<del>2. Biennial inactive licensure renewal—RN</del>	<del>\$52</del>
<del>3. Biennial licensure renewal—LPN</del>	<del>\$90</del>
<del>4. Biennial inactive licensure renewal—LPN</del>	<del>\$45</del>
<del>5. Biennial renewal of CNS registration</del>	<del>\$60</del>

**18VAC90-19-40. Duplicate license.**

A duplicate license for the current renewal period shall be issued by the board upon receipt of the ~~required information request~~ and fee.

**18VAC90-19-50. Identification; accuracy of licensure records.**

A. Any person regulated by this chapter who provides direct client care shall, while on duty, wear identification that is clearly visible and indicates the appropriate title for the license, registration, or student status under which he is practicing in that setting. Name identification on a badge for identification of health care practitioners shall follow the policy of the health care setting in which the nurse is employed. Any person practicing in hospital emergency departments, psychiatric and mental health units and programs, or in health care ~~facility~~<sup>ies</sup> units offering treatment for clients in custody of state or local law-enforcement agencies may use identification badges with first name and first letter only of last name and appropriate title.

B. A licensee who has changed his name shall submit as legal proof to the board a copy of the marriage certificate, a certificate of naturalization, or court order evidencing the change. A duplicate license shall be issued by the board upon receipt of such evidence and the required fee.

C. Each licensee shall maintain an address of record with the board. Any change in the address of record or in the public address, if different from the address of record, shall be submitted by a licensee electronically or in writing to the board within 30 days of such change. All notices required by law and by this chapter to be mailed by the board to any licensee shall be validly given when mailed to the latest address of record on file with the board.

**18VAC90-19-60. Data collection of nursing workforce information.**

A. With such funds as are appropriated for the purpose of data collection and consistent with the provisions of § 54.1-2506.1 of the Code of Virginia, the board shall collect workforce information biennially from a representative sample of registered nurses, licensed practical nurses, and certified

nurse aides and shall make such information available to the public. Data collected shall be compiled, stored, and released in compliance with § 54.1-3012.1 of the Code of Virginia.

B. The information to be collected on nurses shall include (i) demographic data to include age, sex, and ethnicity; (ii) level of education; (iii) employment status; (iv) employment setting or settings such as in a hospital, physician's office, or nursing home; (v) geographic location of employment; (vi) type of nursing position or area of specialty; and (vii) number of hours worked per week in each setting. In addition, the board may determine other data to be collected as necessary.

~~**18VAC90-19-70. Supervision of licensed practical nurses.**~~ ~~Repeal.~~

~~Licensed practical nursing shall be performed under the direction or supervision of a licensed medical practitioner, a registered nurse, or a licensed dentist.~~

**Part II  
Multistate Licensure Privilege**

**18VAC90-19-80. Issuance of a license with a multistate licensure privilege.**

To be issued a license with a multistate licensure privilege by the board or to change the primary state of residency, a nurse shall comply with the regulations adopted by the Interstate Commission of Nurse Licensure Compact Administrators (~~<https://www.ncsbn.org/en/lerules.htm>~~) and provisions of Article 6.1 (§ 54.1-3040.1 et seq.) of Chapter 30 of Title 54.1 of the Code of Virginia in effect at the time of the application.

**18VAC90-19-90. (Repealed.)**

**18VAC90-19-100. (Repealed.)**

**Part III  
Licensure and Renewal; Reinstatement**

**18VAC90-19-110. Licensure by examination.**

A. The board shall authorize the administration of the NCLEX for registered nurse licensure and practical nurse licensure.

B. A candidate shall be eligible to take the NCLEX examination (i) upon receipt by the board of the completed application, the fee, and an official transcript or attestation of graduation from the nursing education program and (ii) when a determination has been made that no grounds exist upon which the board may deny licensure pursuant to § 54.1-3007 of the Code of Virginia.

C. To establish eligibility for licensure by examination, an applicant for the licensing examination shall:

1. File the required application, any necessary documentation and fee, including a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.



2. Arrange for the board to receive an official transcript from the nursing education program or attestation of graduation from an approved Virginia program that shows either:

- a. That the degree or diploma has been awarded and the date of graduation or conferral; or
- b. That all requirements for awarding the degree or diploma have been met and that specifies the date of conferral.

~~3. File a new application and reapplication fee if:~~

~~a. The examination is not taken within 12 months of the date that the board determines the applicant to be eligible; or~~

~~b. Eligibility is not established within 12 months of the original filing date.~~

~~D. The minimum passing standard on the examination for registered nurse licensure and practical nurse licensure shall be determined by the board.~~

~~E. Any applicant suspected of giving or receiving unauthorized assistance during the examination may be noticed for a hearing pursuant to the provisions of the Administrative Process Act (§ 2.2-4000 et seq. of the Code of Virginia) to determine eligibility for licensure or reexamination.~~

F. Practice of nursing pending receipt of examination results.

1. A graduate who has filed a completed application for licensure in Virginia and has received an authorization letter issued by the board may practice nursing in Virginia from the date of the authorization letter. The period of practice shall not exceed 90/120 days between the date of issuance of the authorization lettersuccessful completion of the nursing education program, as documented on the applicant's transcript, and the publication of the results of the candidate's first licensing examination.

2. Candidates who practice nursing as provided in subdivision 1 of this subsection shall use the designation "R.N. Applicant" or "L.P.N. Applicant" on a nametag or when signing official records.

3. The designations "R.N. Applicant" and "L.P.N. Applicant" shall not be used by applicants beyond the 90/120-day period of authorized practice or by applicants who have failed the examination.

G. Applicants who fail the examination.

1. An applicant who fails the licensing examination shall not be licensed or be authorized to practice nursing in Virginia.

2. An applicant for licensure by reexamination shall file the required board application and reapplication fee in order to establish eligibility for reexamination.

3. Applicants who have failed the examination for licensure in another United States jurisdiction but satisfy the qualifications for licensure in this jurisdiction may apply for licensure by examination in

Virginia. Such applicants shall submit the required application and fee. Such applicants shall not, however, be permitted to practice nursing in Virginia until the requisite license has been issued.

~~H. If the application is not completed within one year of the initial filing date, the applicant shall submit a new application and fee.~~

#### **18VAC90-19-120. Licensure by endorsement.**

A. A graduate of an approved nursing education program who has been licensed by examination in another United States jurisdiction and whose license is in good standing, or is eligible for reinstatement if lapsed, shall be eligible for licensure by endorsement in Virginia provided the applicant satisfies the same requirements for registered nurse or practical nurse licensure as those seeking initial licensure in Virginia.

~~1. Applicants who have graduated from approved nursing education programs that did not require a sufficient number of clinical hours as specified in 18VAC90-27-100 may qualify for licensure if they can provide evidence of at least 960 hours of clinical practice with an active, unencumbered license in another United States jurisdiction.~~

2. Applicants whose basic nursing education was received in another country shall meet the requirements of 18VAC90-19-130 for a ~~CGFNS~~-credentials review and examination of English proficiency, to include reading, speaking, writing, and listening. However, those requirements may be satisfied if the applicant can provide evidence from another United States jurisdiction of:

a. A CGFNS credentials evaluation for educational comparability; and

b. Passage of an English language proficiency examination ~~approved by the CGFNS~~, unless the applicant meets the ~~CGFNS~~-criteria for an exemption from the requirement.

3. A graduate of a nursing school in Canada where English was the primary language shall be eligible for licensure by endorsement provided the applicant has passed the Canadian Registered Nurses Examination and holds an unrestricted license in Canada.

B. An applicant for licensure by endorsement who has submitted a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia and the required application and fee and has submitted the required form to the appropriate credentialing agency for verification of licensure may practice for ~~30-90~~ days upon receipt of an authorization letter from the board. ~~If an applicant has not received a Virginia license within 30 days and wishes to continue practice, he shall seek an extension of authorization to practice by submitting a request and evidence that he has requested verification of licensure.~~

~~C. If the application is not completed within one year of the initial filing date, the applicant shall submit a new application and fee.~~

#### **18VAC90-19-130. Licensure of applicants from other countries.**

A. With the exception of applicants from Canada who are eligible to be licensed by endorsement, applicants whose basic nursing education was received in another country shall be scheduled to take

the licensing examination provided they meet the statutory qualifications for licensure. Verification of qualification shall be based on documents submitted as required in subsection B or C of this section.

B. Such applicants for registered nurse licensure shall:

1. Submit evidence from the CGFNS that the secondary education and nursing education are comparable to those required for registered nurses in the Commonwealth;
2. Submit evidence of passage of an English language proficiency examination approved by the CGFNS, unless the applicant meets the CGFNS criteria for an exemption from the requirement; and
3. Submit the required application and fee for licensure by examination.

C. Such applicants for practical nurse licensure shall:

1. Submit evidence from the CGFNS that the secondary education and nursing education are comparable to those required for practical nurses in the Commonwealth;
2. Submit evidence of passage of an English language proficiency examination approved by the CGFNS, unless the applicant meets the CGFNS criteria for an exemption from the requirement; and
3. Submit the required application and fee for licensure by examination.

D. An applicant for licensure as a registered nurse who has met the requirements of subsections A and B of this section may practice for a period not to exceed 90 days from the date of approval of an application submitted to the board when he is working as a nonsupervisory staff nurse in a licensed nursing home or certified nursing facility.

1. Applicants who practice nursing as provided in this subsection shall use the designation "RN applicant" on nametags or when signing official records.
2. During the 90-day period, the applicant shall take and pass the licensing examination in order to remain eligible to practice nursing in Virginia.
3. Any person practicing nursing under this exemption who fails to pass the licensure examination within the 90-day period may not thereafter practice nursing until he passes the licensing examination.

E. In addition to CGFNS, the board may accept credentials from other recognized agencies that review credentials of foreign-educated nurses if such agencies have been approved by the board.

**18VAC90-19-140. Provisional licensure of applicants for licensure as registered nurses.**

A. Pursuant to § 54.1-3017.1 of the Code of Virginia, the board may issue a provisional license to an applicant for the purpose of meeting the 500 hours of supervised, direct, hands-on client care required of an approved registered nurse education program.

B. Such applicants for provisional licensure shall submit:

1. A completed application for licensure by examination and fee, including a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia;
2. Documentation that the applicant has successfully completed a nursing education program; and
3. Documentation of passage of the NCLEX in accordance with 18VAC90-19-110.

C. Requirements for hours of supervised clinical experience in direct client care with a provisional license.

1. To qualify for licensure as a registered nurse, direct, hands-on hours of supervised clinical experience shall include the areas of adult medical/surgical nursing, geriatric nursing, maternal/infant (obstetrics, gynecology, neonatal) nursing, mental health/psychiatric nursing, nursing fundamentals, and pediatric nursing. Supervised clinical hours may be obtained in employment in the role of a registered nurse or without compensation for the purpose of meeting these requirements.
2. Hours of direct, hands-on clinical experience obtained as part of the applicant's nursing education program and noted on the official transcript shall be counted towards the minimum of 500 hours and in the applicable areas of clinical practice.
3. For applicants with a current, active license as an LPN, 150 hours of credit shall be counted towards the 500-hour requirement.
4. 100 hours of credit may be applied towards the 500-hour requirement for applicants who have successfully completed a nursing education program that:
  - a. Requires students to pass competency-based assessments of nursing knowledge as well as a summative performance assessment of clinical competency that has been evaluated by the American Council on Education or any other board-approved organization; and
  - b. Has a passage rate for first-time test takers on the NCLEX that is not less than 80%, calculated on the cumulative results of the past four quarters of all graduates in each calendar year regardless of where the graduate is seeking licensure.
5. An applicant for licensure shall submit verification from a supervisor of the number of hours of direct client care and the areas in which clinical experiences in the role of a registered nurse were obtained.

D. Requirements for supervision of a provisional licensee.

1. The supervisor shall be on site and physically present in the unit where the provisional licensee is providing clinical care of clients.
2. In the supervision of provisional licensees in the clinical setting, the ratio shall not exceed two provisional licensees to one supervisor at any given time.

3. Licensed registered nurses providing supervision for a provisional licensee shall:

a. Notify the board of the intent to provide supervision for a provisional licensee on a form provided by the board;

b. Hold an active, unrestricted license or multistate licensure privilege and have at least two years of active clinical practice as a registered nurse prior to acting as a supervisor;

c. Be responsible and accountable for the assignment of clients and tasks based on their assessment and evaluation of the supervisee's clinical knowledge and skills;

d. Be required to monitor clinical performance and intervene if necessary for the safety and protection of the clients; and

e. Document on a form provided by the board the frequency and nature of the supervision of provisional licensees to verify completion of hours of clinical experience.

E. The provisional status of the licensee shall be disclosed to the client prior to treatment and shall be indicated on identification worn by the provisional licensee.

F. All provisional licenses shall expire six months from the date of issuance and may be renewed for an additional six months. Renewal of a provisional license beyond the limit of 12 months may be granted and shall be for good cause shown. A request for extension of a provisional license beyond 12 months shall be made at least 30 days prior to its expiration.

**18VAC90-19-150. Renewal of licenses.**

A. Licensees born in even-numbered years shall renew their licenses by the last day of the birth month in even-numbered years. Licensees born in odd-numbered years shall renew their licenses by the last day of the birth month in odd-numbered years.

B. A nurse shall be required to meet the requirements for continued competency set forth in 18VAC90-19-160 to renew an active license.

C. A notice for renewal of license shall be sent by the board to the last known address of the licensee. The licensee shall complete the renewal form and submit it with the required fee.

D. Failure to receive the renewal form shall not relieve the licensee of the responsibility for renewing the license by the expiration date.

E. The license shall automatically lapse if the licensee fails to renew by the expiration date.

F. Any person practicing nursing during the time a license has lapsed shall be considered an ~~illegal~~ unlicensed practitioner and shall be subject to prosecution under the provisions of § 54.1-3008 of the Code of Virginia.

G. Upon renewal, all licensees shall declare their primary state of residence. If the declared state of residence is another compact state, the licensee is not eligible for renewal.

**18VAC90-19-160. Continued competency requirements for renewal of an active license.**

A. To renew an active nursing license, a licensee shall complete at least one of the following learning activities or courses:

1. Current specialty certification by a national certifying organization, as defined in 18VAC90-19-10;
2. Completion of a minimum of three credit hours of post-licensure academic education relevant to nursing practice, offered by a regionally accredited college or university;
3. A board-approved refresher course in nursing;
4. Completion of nursing-related, evidence-based practice project or research study;
5. Completion of publication as the author or co-author during a renewal cycle;
6. Teaching or developing a nursing-related course resulting in no less than three semester hours of college credit, a 15-week course, or specialty certification;
7. Teaching or developing nursing-related continuing education courses for up to 30 contact hours;
8. Fifteen contact hours of workshops, seminars, conferences, or courses relevant to the practice of nursing and 640 hours of active practice as a nurse; or
9. Thirty contact hours of workshops, seminars, conferences, or courses relevant to the practice of nursing.

B. To meet requirements of subdivision A 8 or A 9 of this section, workshops, seminars, conferences, or courses shall be offered by a provider recognized or approved by one of the following:

1. American Nurses Credentialing Center American Nurses Association;
2. National Council of State Boards of Nursing;
3. Area Health Education Centers (AHEC) in any state in which the AHEC is a member of the National AHEC Organization;
4. Any state nurses association;
5. National League for Nursing;
6. National Association for Practical Nurse Education and Service;
7. National Federation of Licensed Practical Nurses;
8. A licensed health care facility, agency, or hospital;

9. A health care provider association;
10. Regionally or nationally accredited colleges or universities;
11. A state or federal government agency;
12. The American Heart Association, the American Health and Safety Institute, or the American Red Cross for courses in advanced resuscitation; or
13. The Virginia Board of Nursing or any state board of nursing.

C. Dual licensed persons.

1. Those persons dually licensed by this board as a registered nurse and a licensed practical nurse shall only meet one of the continued competency requirements as set forth in subsection A of this section.
2. Registered nurses who also hold an active license as a nurse practitioner shall only meet the requirements of 18VAC90-30-105 and, for those with prescriptive authority, 18VAC90-40-55.

D. A licensee is exempt from the continued competency requirement for the first renewal following initial licensure by examination or endorsement.

E. The board may grant an extension for good cause of up to one year for the completion of continuing competency requirements upon written request from the licensee 60 days prior to the renewal date. Such extension shall not relieve the licensee of the continuing competency requirement.

F. The board may grant an exemption for all or part of the continuing competency requirements due to circumstances beyond the control of the licensee such as temporary disability, mandatory military service, or officially declared disasters.

G. Continued competency activities or courses required by board order in a disciplinary proceeding shall not be counted as meeting the requirements for licensure renewal.

**18VAC90-19-170. Documenting compliance with continued competency requirements.**

A. All licensees are required to maintain original documentation of completion for a period of two years following renewal and to provide such documentation within 30 days of a request from the board for proof of compliance.

B. Documentation of compliance shall be as follows:

1. Evidence of national certification shall include a copy of a certificate that includes name of licensee, name of certifying body, date of certification, and date of certification expiration. Certification shall be initially attained during the licensure period, have been in effect during the entire licensure period, or have been recertified during the licensure period.

2. Evidence of post-licensure academic education shall include a copy of transcript with the name of the licensee, name of educational institution, date of attendance, name of course with grade, and number of credit hours received.
3. Evidence of completion of a board-approved refresher course shall include written correspondence from the provider with the name of the licensee, name of the provider, and verification of successful completion of the course.
4. Evidence of completion of a nursing research study or project shall include an abstract or summary, the name of the licensee, role of the licensee as principal or coprincipal investigator, date of completion, statement of the problem, research or project objectives, methods used, and summary of findings.
5. Evidence of authoring or co-authoring a published nursing-related article, paper, book, or book chapter shall include a copy of the publication that includes the name of the licensee and publication date.
6. Evidence of teaching a course for college credit shall include documentation of the course offering, indicating instructor, course title, course syllabus, and the number of credit hours. Teaching a particular course may only be used once to satisfy the continued competency requirement unless the course offering and syllabus has changed.
7. Evidence of teaching a course for continuing education credit shall include a written attestation from the director of the program or authorizing entity including the date or dates of the course or courses and the number of contact hours awarded. If the total number of contact hours totals less than 30, the licensee shall obtain additional hours in continuing learning activities or courses.
8. Evidence of contact hours of continuing learning activities or courses shall include the name of the licensee, title of educational activity, name of the provider, number of contact hours, and date of activity.
9. Evidence of 640 hours of active practice in nursing shall include documentation satisfactory to the board of the name of the licensee, number of hours worked in calendar or fiscal year, name and address of employer, and signature of supervisor. If self-employed, hours worked may be validated through other methods such as tax records or other business records. If active practice is of a volunteer or gratuitous nature, hours worked may be validated by the recipient agency.

**18VAC90-19-180. ~~Inactive licensure.~~(Repealed.)**

~~A. A registered nurse or licensed practical nurse who holds a current, unrestricted license in Virginia may, upon a request on the renewal application and submission of the required fee, be issued an inactive license. The holder of an inactive license shall not be entitled to practice nursing in Virginia or practice on a multistate licensure privilege but may use the title "registered nurse" or "licensed practical nurse."~~

~~B. Reactivation of an inactive license.~~

~~1. A nurse whose license is inactive may reactivate within one renewal period by:~~



- ~~a. Payment of the difference between the inactive renewal and the active renewal fee; and~~
- ~~b. Providing attestation of completion of at least one of the learning activities or courses specified in 18VAC90-19-160 during the two years immediately preceding reactivation.~~
- ~~2. A nurse whose license has been inactive for more than one renewal period may reactivate by:~~
  - ~~a. Submitting an application;~~
  - ~~b. Paying the difference between the inactive renewal and the active renewal fee; and~~
  - ~~c. Providing evidence of completion of at least one of the learning activities or courses specified in 18VAC90-19-160 during the two years immediately preceding application for reactivation.~~
- ~~3. The board may waive all or part of the continuing education requirement for a nurse who holds a current, unrestricted license in another state and who has engaged in active practice during the period the Virginia license was inactive.~~
- ~~4. The board may request additional evidence that the nurse is prepared to resume practice in a competent manner.~~
- ~~5. The board may deny a request for reactivation to any licensee who has been determined to have committed an act in violation of § 54.1-3007 of the Code of Virginia or any provision of this chapter.~~

**18VAC90-19-190. Inactive licensure; Reinstatement of licenses that are inactive, lapsed, licenses or license suspended, or revoked.**

A. A registered nurse or licensed practical nurse who holds a current, unrestricted license in Virginia may, upon a request on the renewal application and submission of the required fee, be issued an inactive license. The holder of an inactive license shall not be entitled to practice nursing in Virginia or practice on a multistate licensure privilege but may use the title "registered nurse" or "licensed practical nurse."

B. A nurse whose license is inactive or has lapsed may be reinstated within one renewal period by:

- 1. Payment of the current renewal fee and the late renewal fee; and
- 2. Providing attestation of completion of at least one of the learning activities or courses specified in 18VAC90-19-160 during the two years immediately preceding reactivation or reinstatement.

B. A nurse whose license has been inactive or lapsed for more than one renewal period shall:

- 1. File a reactivation or reinstatement application and pay the ~~reinstatement appropriate~~ fee;
- 2. Provide evidence of completing at least one of the learning activities or courses specified in 18VAC90-19-160 during the two years immediately preceding the application ~~for reinstatement;~~ and

3. Submit a criminal history background check as required by § 54.1-3005.1 of the Code of Virginia.

C. The board may waive all or part of the continuing education requirement for a nurse who holds a current, unrestricted license in another state and who has engaged in active practice during the period the Virginia license was inactive or lapsed.

D. A nurse whose license has been suspended or revoked by the board may apply for reinstatement by filing a reinstatement application, fulfilling requirements for continuing competency as required in subsection B of this section, and paying the fee for reinstatement after suspension or revocation. A nurse whose license has been revoked may not apply for reinstatement sooner than three years from entry of the order of revocation.

E. The board may request additional evidence that the nurse is prepared to resume practice in a competent manner when applying for reactivation or reinstatement.

**18VAC90-19-200. Restricted volunteer license and registration for voluntary practice by out-of-state licensees.**

A. A registered or practical nurse may be issued a restricted volunteer license and may practice in accordance with provisions of § 54.1-3011.01 of the Code of Virginia.

B. Any licensed nurse who does not hold a license to practice in Virginia and who seeks registration to practice on a voluntary basis under the auspices of a publicly supported, all volunteer nonprofit organization that sponsors the provision of health care to populations of underserved people shall:

1. File a complete application for registration on a form provided by the board at least five business days prior to engaging in such practice. An incomplete application will not be considered;
2. Provide evidence of current, unrestricted licensure in a United States jurisdiction;
3. Provide the name of the nonprofit organization and the dates and location of the voluntary provision of services;
4. Pay a registration fee of \$10; and
5. Provide an attestation from a representative of the nonprofit organization attesting to its compliance with provisions of subdivision 11 of § 54.1-3001 of the Code of Virginia.

**18VAC90-19-210. (Repealed.)**

**18VAC90-19-220. (Repealed.)**

**Part IV  
Disciplinary Provisions**

**18VAC90-19-230. Disciplinary provisions.**

The board has the authority to deny, revoke, or suspend a license or multistate licensure privilege issued, or to otherwise discipline a licensee or holder of a multistate licensure privilege upon proof that the licensee or holder of a multistate licensure privilege has violated any of the provisions of § 54.1-3007 of the Code of Virginia. For the purpose of establishing allegations to be included in the notice of hearing, the board has adopted the following definitions:

1. Fraud or deceit in procuring or maintaining a license means, but shall not be limited to:
  - a. Filing false credentials;
  - b. Falsely representing facts on an application for initial license, reinstatement, or renewal of a license; or
  - c. Giving or receiving assistance in the taking of the licensing examination.
2. Unprofessional conduct means, but shall not be limited to:
  - a. Performing acts beyond the limits of the practice of professional or practical nursing as defined in Chapter 30 (§ 54.1-3000 et seq.) of Title 54.1 of the Code of Virginia, or as provided by §§ 54.1-2901 and 54.1-2957 of the Code of Virginia;
  - b. Assuming duties and responsibilities within the practice of nursing without adequate training or when competency has not been maintained;
  - c. Obtaining supplies, equipment, or drugs for personal or other unauthorized use;
  - d. Employing or assigning unqualified persons to perform functions that require a licensed practitioner of nursing;
  - e. Falsifying or otherwise altering patient, employer, student, or educational program records, including falsely representing facts on a job application or other employment-related documents;
  - f. Abusing, neglecting, or abandoning patients or clients;
  - g. Delegating nursing tasks to an unlicensed person in violation of the provisions of this part;
  - h. Giving to or accepting from a patient or client property or money for any reason other than fee for service or a nominal token of appreciation;
  - i. Obtaining money or property of a patient or client by fraud, misrepresentation, or duress;
  - j. Entering into a relationship with a patient or client that constitutes a professional boundary violation in which the nurse uses his professional position to take advantage of the vulnerability of a patient, a client, or his family, to include actions that result in personal gain at the expense of the patient or client, or a nontherapeutic personal involvement or sexual conduct with a patient or client;
  - k. Violating state laws relating to the privacy of patient information, including § 32.1-127.1:03 the Code of Virginia;
  - l. Providing false information to staff or board members in the course of an investigation or proceeding;
  - m. Failing to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia or elder abuse or neglect as required in § 63.2-1606 of the Code of Virginia; or
  - n. ~~Engaging in conversion therapy with a person younger than 18 years of age; or~~
  - ~~o. Violating any provision of this chapter.~~

**Part V**  
**Delegation of Nursing Tasks and Procedures**

**18VAC90-19-240. Definitions for delegation of nursing tasks and procedures.**

The following words and terms when used in this part shall have the following meanings unless the content clearly indicates otherwise:

"Delegation" means the authorization by a registered nurse to an unlicensed person to perform selected nursing tasks and procedures in accordance with this part.

"Supervision" means guidance or direction of a delegated nursing task or procedure by a qualified, registered nurse who provides periodic observation and evaluation of the performance of the task and who is accessible to the unlicensed person.

"Unlicensed person" means an appropriately trained individual, regardless of title, who receives compensation, who functions in a complementary or assistive role to the registered nurse in providing direct patient care or carrying out common nursing tasks and procedures, and who is responsible and accountable for the performance of such tasks and procedures. With the exception of certified nurse aides, this shall not include anyone licensed or certified by a health regulatory board who is practicing within his recognized scope of practice.

**18VAC90-19-250. Criteria for delegation.**

A. Delegation of nursing tasks and procedures shall only occur in accordance with the plan for delegation adopted by the entity responsible for client care. The delegation plan shall comply with provisions of this chapter and shall provide:

1. An assessment of the client population to be served;
2. Analysis and identification of nursing care needs and priorities;
3. Establishment of organizational standards to provide for sufficient supervision that assures safe nursing care to meet the needs of the clients in their specific settings;
4. Communication of the delegation plan to the staff;
5. Identification of the educational and training requirements for unlicensed persons and documentation of their competencies; and
6. Provision of resources for appropriate delegation in accordance with this part.

B. Delegation shall be made only if all of the following criteria are met:

1. In the judgment of the delegating nurse, the task or procedure can be properly and safely performed by the unlicensed person and the delegation does not jeopardize the health, safety, and welfare of the client.
2. The delegating nurse retains responsibility and accountability for nursing care of the client, including nursing assessment, planning, evaluation, documentation, and supervision.
3. Delegated tasks and procedures are within the knowledge, area of responsibility, and skills of the delegating nurse.

4. Delegated tasks and procedures are communicated on a client-specific basis to an unlicensed person with clear, specific instructions for performance of activities, potential complications, and expected results.

5. The person to whom a nursing task has been delegated is clearly identified to the client as an unlicensed person by a name tag worn while giving client care and by personal communication by the delegating nurse when necessary.

C. Delegated tasks and procedures shall not be reassigned by unlicensed personnel.

D. Nursing tasks shall only be delegated after an assessment is performed according to the provisions of 18VAC90-19-260.

**18VAC90-19-260. Assessment required prior to delegation.**

Prior to delegation of nursing tasks and procedures, the delegating nurse shall make an assessment of the client and unlicensed person as follows:

1. The delegating nurse shall assess the clinical status and stability of the client's condition; determine the type, complexity, and frequency of the nursing care needed; and delegate only those tasks that:

a. Do not require the exercise of independent nursing judgment;

b. Do not require complex observations or critical decisions with respect to the nursing task or procedure;

c. Frequently recur in the routine care of the client or group of clients;

d. Do not require repeated performance of nursing assessments;

e. Utilize a standard procedure in which the tasks or procedures can be performed according to exact, unchanging directions; and

f. Have predictable results and for which the consequences of performing the task or procedures improperly are minimal and not life threatening.

2. The delegating nurse shall also assess the training, skills, and experience of the unlicensed person and shall verify the competency of the unlicensed person to determine which tasks are appropriate for that unlicensed person and the method of supervision required.

**18VAC90-19-270. Supervision of delegated tasks.**

A. The delegating nurse shall determine the method and frequency of supervision based on factors that include:

1. The stability and condition of the client;

2. The experience and competency of the unlicensed person;
3. The nature of the tasks or procedures being delegated; and
4. The proximity and availability of the registered nurse to the unlicensed person when the nursing tasks will be performed.

B. In the event that the delegating nurse is not available, the delegation shall either be terminated or delegation authority shall be transferred by the delegating nurse to another registered nurse who shall supervise all nursing tasks delegated to the unlicensed person, provided the registered nurse meets the requirements of 18VAC90-19-250 B 3.

C. Supervision shall include:

1. Monitoring the performance of delegated tasks;
2. Evaluating the outcome for the client;
3. Ensuring appropriate documentation; and
4. Being accessible for consultation and intervention.

D. Based on an ongoing assessment as described in 18VAC90-19-260, the delegating nurse may determine that delegation of some or all of the tasks and procedures is no longer appropriate.

**18VAC90-19-280. Nursing tasks that shall not be delegated.**

A. Nursing tasks ~~that shall not be delegated are those~~ that are inappropriate for a specific, unlicensed person to perform on a specific patient after an assessment is conducted as provided in 18VAC90-19-260 shall not be delegated.

B. Nursing tasks that shall not be delegated to any unlicensed person are:

1. Activities involving nursing assessment, problem identification, and outcome evaluation that require independent nursing judgment;
2. Counseling or teaching except for activities related to promoting independence in personal care and daily living;
3. Coordination and management of care involving collaboration, consultation, and referral;
4. Emergency and nonemergency triage;
5. Administration of medications except as specifically permitted by the Virginia Drug Control Act (§ 54.1-3400 et seq. of the Code of Virginia); and
6. Circulating duties in an operating room.



*Commonwealth of Virginia*



# **REGULATIONS**

**FOR**

## **Training Programs for Medication Administration by Unlicensed Persons and Immunization Protocol**

**VIRGINIA BOARD OF NURSING**

**Title of Regulations: 18 VAC 90-21-10 et seq.**

**Statutory Authority: §§ 54.1-2400 and Chapter 30 of Title 54.1  
of the *Code of Virginia***

**Date: February 21, 2019**

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## Part I. Medication Administration Training Program.

### 18VAC90-21-10. Establishing a medication administration training program.

A. A program provider wishing to establish a medication administration training program pursuant to subsection L or subsection O of §54.1-3408 of the Code of Virginia shall submit ~~an application~~application curriculum to the board at least 90 days in advance of the expected beginning date.

B. ~~The application shall be considered at a meeting of the board.~~ The board shall, after review and consideration, either grant or deny approval.

C. ~~If approval is denied, the program provider may request a hearing before the board, and the provisions of the Administrative Process Act shall apply (§2.2-4000 et seq. of the Code of Virginia).~~

### 18VAC90-21-20. Qualifications of instructional personnel.

Instructors shall be licensed health care professionals who, consistent with provisions of the Drug Control Act (§54.1-3400 et seq. of the Code of Virginia), are authorized to administer, prescribe or dispense drugs and who have completed a program designed to prepare the instructor to teach the course as it applies to the clients in the specific setting in which those completing the course will administer medications.

### 18VAC90-21-30. Content of medication administration training.

A. The curriculum shall ~~include a minimum of 32 hours~~specify of classroom instruction and practice in the following:

1. Preparing for safe administration of medications to clients in specific settings by:
  - a. Demonstrating an understanding of the client's rights regarding medications, treatment decisions and confidentiality.
  - b. Recognizing emergencies and other health-threatening conditions and responding accordingly.
  - c. Identifying medication terminology and abbreviations.
2. Maintaining aseptic conditions by:
  - a. Implementing universal precautions.
  - b. Insuring cleanliness and disinfection.
  - c. Disposing of infectious or hazardous waste.
3. Facilitating client self-administration or assisting with medication administration by:
  - a. Reviewing administration records and prescriber's orders.
  - b. Facilitating client's awareness of the purpose and effects of medication.
  - c. Assisting the client to interpret prescription labels.
  - d. Observing the ~~five~~ rights of medication administration and security requirements appropriate to the setting.
  - e. Following proper procedure for preparing medications.
  - f. Measuring and recording vital signs to assist the client in making medication administration decisions.

- g. Assisting the client to administer oral medications.
- h. Assisting the client with administration of prepared instillations and treatments of:
  - (1) Eye drops and ointments.
  - (2) Ear drops.
  - (3) Nasal drops and sprays.
  - (4) Topical preparations.
  - (5) Compresses and dressings.
  - (6) Vaginal and rectal products.
  - (7) Soaks and sitz baths.
  - (8) Inhalation therapy.
  - (9) Oral hygiene products.
- i. Reporting and recording the client's refusal to take medication.
- j. Documenting medication administration.
- k. Documenting and reporting medication errors.
- l. Maintaining client records according to facility policy.
- m. Sharing information with other staff orally and by using documents.
- n. Storing and securing medications.
- o. Maintaining an inventory of medications.
- p. Disposing of medications.

4. Facilitating client self-administration or assisting with the administration of ~~insulin medication~~ for diabetes treatment. Instruction and practice in the administration of insulin ~~shall be included only in those settings where required by client needs and~~ shall include:

- a. Cause and treatment of diabetes.
- b. The side effects, preparation, and administration of diabetic medications, including of insulin.
- ~~c. Preparation and administration of insulin.~~

B. Pursuant to subsection L of § 54.1-3408 of the Code of Virginia, the board requires successful completion of the curriculum approved by the Department of Behavioral Health and Developmental Services (DBHDS) for unlicensed persons to administer medication via a gastrostomy tube to a person receiving services from a program licensed by the DBHDS.

C. The program provider shall require that each student shall pass a written and practical examination at the conclusion of the training which measures minimum competency in medication administration.

**~~18VAC90-21-40. Post-course examination.~~**

~~The program provider shall require that each student shall pass a written and practical examination at the conclusion of the training which measures minimum competency in medication administration.~~

**Part II. Protocol for Adult Immunization.**

**18VAC90-21-50. Requirements for protocol for administration of adult immunization.**

Pursuant to ~~provisions subsection I~~ of §54.1-3408 of the Code of Virginia, a protocol compliant with the Virginia Department of Health protocol shall be submitted to and approved by the board prior to the administration of an adult immunization program, ~~that includes the following:~~

- ~~1. Purpose and objectives of immunization program.~~
- ~~2. Target population.~~
- ~~3. Name and address of medical director.~~
- ~~4. A signed and dated medical directive.~~
- ~~5. Screening criteria for inclusion and exclusion.~~
- ~~6. Informed consent form.~~
- ~~7. Immunization procedures.~~
  - ~~a. Dosage.~~
  - ~~b. Single or multiple dose administration.~~
  - ~~c. Injection site.~~
  - ~~d. Vaccine storage.~~
  - ~~e. Biohazardous waste disposal.~~
  - ~~f. Standard precautions.~~
- ~~8. Post-immunization instructions.~~
- ~~9. Emergency guidelines, including a signed medical directive for emergency treatment.~~
- ~~10. Qualification of immunization providers.~~
  - ~~a. Virginia licensure as a registered nurse, licensed practical nurse, or pharmacist.~~
  - ~~b. Supervision of LPN provider.~~
  - ~~c. Current cardiopulmonary resuscitation training.~~
- ~~11. Resource personnel and supervision.~~
- ~~12. Sample of patient record with date, vaccine, dose, site, expiration date, lot number, and administering person's signature.~~

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