

CHAPTER Nur 400 CONTINUED STATUS

PART Nur 401 RENEWAL AND REINSTATEMENT

Readopt with amendment Nur 401.01 through Nur 401.04, effective 9-27-23 (Document #13706), to read as follows:

Nur 401.01 Licensure Renewal for All Licensees.

(a) Each applicant seeking renewal of licensure shall ***submit the following:*** ~~pursuant to RSA 326-B:22 and Nur 403:~~

(1) A completed “Universal Application for License Renewal” required by Plc 308.05, to provide the information and documentation required by Plc 308.06 and Plc 308.07, and that is signed as required by Plc 308.08;

(2) The fee required by Plc 1002.33;

(3) Documentation of current certification in one of the following:

a. Basic life support (BLS); or

b. Cardiopulmonary resuscitation (CPR);

(4) Applicants holding a multi-state license shall submit a completed “Declaration of Primary State of Residency Form”, providing the following information:

a. Applicant’s name, date of birth, social security number, and phone number;

b. The license type being applied for:

i. Registered Nurse (RN);

ii. Licensed Practical Nurse (LPN); or

iii. Advanced Practical Register Nurse (APRN).

c. Indication of which of the following applies;

i. New Hampshire is my primary state of residence;

ii. New Hampshire is not my primary state of residence. My permanent residence is a state not participating in the nurse licensure compact. My license will be valid in New Hampshire only;

iii. Another state is my primary state of residence and the other state is a compact state; or

iv. I am employed exclusively in the U.S. military, active duty or with the U.S. federal government and request a NH single-state license.

d. The applicant’s current home address and mailing address.

(b) APRN applicants for license renewal shall complete as part of their renewal application, the New Hampshire APRN licensure survey or opt-out form provided by the office of rural health, department of health and human services;

(c) The opt out form on the NH department of health and human services, health professions data center website <https://www.dhhs.nh.gov/programs-services/health-care/rural-health-primary-care/health-professions-data-center>;

~~(1) By midnight on the applicant's date of birth in the renewal year submit a completed renewal application applicable to the type of license renewal sought, as follows:~~

~~a. An applicant for a license renewal to practice as a RN or LPN under RSA 326-B:22 shall complete and submit the "Application for License Renewal: Registered (RN) and Practical Nurse (LPN)", revised 6/2023;~~

~~b. An applicant for license renewal to practice as an Advanced Practice Registered Nurse under RSA 326-B:22 shall complete and submit the "Application for License Renewal: Advanced Practice Registered Nurse (A.P.R.N.)", revised 6-2023; and~~

~~c. An applicant for license renewal to practice as an LNA under RSA B: 22 shall complete and submit the "Application for License Renewal: Nursing Assistant (LNA)", revised 6-2023.~~

~~(2) Pay the applicable renewal fee as set forth in (b), below;~~

~~(3) Meet the applicable continuing competence requirements described in Nur 401;~~

~~(4) Report any pending criminal charges, criminal convictions, or plea arrangements in lieu of convictions;~~

~~(5) Have committed no acts or omissions constituting grounds for disciplinary actions as set forth in RSA 326-B or the rules adopted pursuant thereto, unless the board has found, after investigation that sufficient restitution has been made;~~

~~(6) Meet the continuing competence requirements for the specific type of license for which the applicant seeks renewal; and~~

~~(7) Have complied with all special requirements ordered by the board as part of disciplinary action against the applicant.~~

~~— (b) Pursuant to RSA 326-B 9, all applicants for renewal of license as an RN or LPN shall comply with the Nurse Licensure Compact (NLC) Model Rules and Regulations developed by the Nurse Licensure Compact Administrators (NLCA) as amended January 19, 2018 and as referenced in Appendix 2;~~

~~— (c) Applicants for renewal shall pay the fee for the type of license renewal sought as set forth in Ple 1002.33;~~

~~— (d) The license for which renewal is sought shall be renewed when the completed application has been reviewed and approved. The application shall be approved if it complies with the specific procedural and substantive provisions of this part and all applicable requirements of RSA 326-B.~~

~~— (e) Each license renewal shall be valid for the biennium commencing the day after the license being renewed expired, except that reinstatement of a license that has lapsed, was obtained after completion of a reentry program, or was the subject of discipline shall be effective as of the date that the renewal application was approved and shall expire at the end of the biennium.~~

~~— (f) Failure to renew the license shall result in forfeiture of the ability to practice nursing or engage in nursing activities in New Hampshire. Failure to receive and complete the license renewal application shall not relieve the licensee of the obligation to renew the license prior to midnight on the licensee's birthday of the renewal year.~~

~~— (g) Each person who practices as a nurse or as a nursing assistant after their license or certification has lapsed, after notice and opportunity for a hearing pursuant to Nur 402.04(a), shall be fined up to \$50.00 for every calendar month, or any part thereof, during which the individual so practices. The Board shall apply the factors described in Nur 402.04(g) when determining the amount of the fine to be imposed.~~

~~— (h) Each nurse or as a nursing assistant who fails to notify the board of a change of address shall, after notice and opportunity for a hearing pursuant to Nur 402.04(a), be fined \$10.00.~~

Nur 401.02 Re-entry Requirement and Process for Re-entry for RN and LPN.

(a) Each nurse who has not held an active RN or LPN license in any U.S. jurisdiction for 5 or more years prior to their application for renewal or reinstatement shall successfully complete a reentry program prior to being issued a license.

~~(b) An applicant for a license renewal to practice as a RN or LPN under RSA 326-B:23 shall complete and submit Form "Registered and Practical Nurse License Reinstatement", 3-2014.~~

~~(c) An applicant for a license renewal to practice as a registered and practical nurse under RSA 326-B:23 shall complete and submit the "Declaration of Primary State of Residency Form", revised 6/2023.~~

(bd) Each re-entry applicant shall also:

- ~~(1) Obtain temporary~~ ***Apply for a modified license*** licensure prior to the start of the re-entry program;
- (2) Be supervised by an RN; and
- (3) After completion of the reentry program, document successful completion of the program.

(ce) Each re-entry applicant shall select and complete one of the following within 120 days of application:

- (1) A structured refresher course as described in (g) below; and
- (2) An individualized program of study as described in (h) and (i) below.

~~(f) The board shall extend the time in (e) above for 90 days when the reentry applicant:~~

- ~~(1) Cannot meet the time requirement of (e) above; and~~
- ~~(2) Requests that the board extend the time in a letter setting forth the reason(s) for requesting extension.~~

(dg) Each applicant seeking re-entry through successful completion of a structured refresher course shall complete a course of at least 120 hours that includes theoretical and clinical experiences which:

- (1) Are pertinent to those activities set forth in RSA 326-B:12 for practical nurses or RSA 326-B:13 for registered nurses; and
- (2) Comply with Nur 605.03.

(eh) Each applicant seeking re-entry through successful completion of an individualized program of study shall submit the proposed program of study to the board for approval.

(if) The board shall approve the proposed individualized program of study if:

(1) It includes theoretical and clinical components which:

- a. Include content described in Nur 602.13; and
- b. Are consistent with RSA 326-B:12 for practical nursing and RSA 326-B:13 for registered nursing; and

(2) The clinical component of the individualized program shall be supervised by an RN.

Nur 401.03 Specific ~~Renewal~~-***Reinstatement*** Requirements for APRN.

(a) In addition to meeting the requirements of Nur 401.01, each applicant for ~~renewal~~ or reinstatement of an APRN license shall:

- (1) Document at least 30 educational contact hours to satisfy the requirements of RN continuing competence and an additional 30 hours, 5 of which shall be education in pharmacology within 2 years immediately prior to date of application;
- (2) Document current national certification if licensed after September 1984;
- (3) If holding lifetime certification, document continuing participation in the certification process; and
- (4) Verify current licensure as an RN in NH or another compact state.

(b) The national certification required by (a)(3) above may be counted as 30 of the 60 contact hours required by (a)(2) above.

~~— (c) Failure to provide all the requested information shall cause the application to be refused.~~

~~— (d) APRN applicants for license renewal unable to comply with (a)(1) above shall complete a board approved reentry program as described in Nur 401.05.~~

~~(e) Pursuant to RSA 126-A:5, XVIII a (a) and RSA 326-B:9 a, licensees may complete and submit, as part of their renewal application, the New Hampshire Division of Public Health Service's "New Hampshire APRN Licensure Survey" issued by the State Office of Rural Health and Primary Care, Department of Health and Human Services.~~

~~(f) The board shall provide licensees with the opportunity to opt out of the survey. Written notice of the opt out opportunity shall be provided with the renewal application. The opt out form shall be available on the NH State Office of Rural Health and Primary Care website, <https://www.dhhs.nh.gov/programs-services/health-care/rural-health-primary-care/health-professions-data-center>.~~

~~— (g) Licensees choosing to opt out of the survey shall submit a completed NH Department of Health and Human Services form, "New Hampshire Health Professions Survey Opt Out Form" pursuant to HB 322, Laws of 2017, Ch. 131, to the State Office of Rural Health and Primary Care, Department of Health and Human Services, via one of the following as specified on the form:~~

~~(1) Mail;~~

~~(2) Email; or~~

~~(3) Fax.~~

~~— (h) Information contained in the opt-out forms shall be kept confidential in the same accord with the survey form results, pursuant to RSA 126-A:5, XVIII a (e).~~

Nur 401.04 Re-entry Requirement and Process for Re-entry for APRN.

(a) Each APRN who has not held an active APRN license in any U.S. jurisdiction for 5 years or more prior to their application for renewal or reinstatement shall successfully complete a re-entry program prior to being issued a license.

~~(b) An applicant for license reinstatement to practice as an APRN under RSA 326-B:23 shall complete and submit Form “Application for Reinstatement: Advanced Practice Nurse (A.P.R.N.)”, revised 6/2023.~~

~~— (c) An applicant for license reinstatement to practice as an APRN under RSA 326-B:23 shall complete and submit the “Declaration of Primary State of Residency Form”, revised 6/2023.~~

~~(bd)~~ APRN re-entry applicants shall hold a current registered nurse license issued by the New Hampshire board of nursing or hold a multi-state registered nurse license issued by a state that is a member of the nurse licensure compact.

~~(ce)~~ Re-entry applicants shall, after completion of the re-entry program, document successful completion of the program.

~~(df)~~ Re-entry applicants shall complete one of the following:

(1) An established reentry program approved by the board pursuant to Nur 603 and designed and implemented by a New Hampshire, regional, or national nursing specialty professional organization; or

(2) A supervised re-entry program as described in (g) below and then comply with (h) below.

~~(eg)~~ Each applicant seeking re-entry through successful completion of a supervised reentry program shall complete the following under the supervision of an education program that prepares APRN’s:

(1) A minimum of 3 credit hours or minimum of 30 class hours in pharmacology at the advanced nurse practitioner level; and

(2) A minimum of 200 hours clinical practice supervised by an advanced registered nurse practitioner practicing in the applicant’s specialty practice area.

~~(fh)~~ After completion of the re-entry program pursuant to (g) above, each applicant shall provide documentation from the program director or designee that the applicant possesses competencies equal to or greater than current program graduates.

Repeal Nur 401.05 and Nur 401.06, effective 9-27-23 (Document #13706), as follows:

~~— Nur 401.05 Specific Renewal and Reinstatement Requirements for LNA.~~

~~(a) An applicant seeking licensure renewal as an LNA shall complete and submit Form “Nursing Assistant License Renewal”, as amended, 5-2016.~~

~~— (b) An applicant seeking licensure reinstatement as an LNA shall complete and submit the “Application for License Reinstatement: Nursing Assistant”, revised 6/2023.~~

~~(c) Each re-entry nursing assistant applicant shall complete and submit an application form for renewal or reinstatement, as applicable, and pay the appropriate application fee.~~

~~(d) In addition to meeting the requirements of Nur 401.01, each applicant for renewal or reinstatement of an LNA license shall either:~~

~~(1) Affirm use of nursing assistant knowledge, judgment, and skills within their practice category for a minimum of 200 hours within 2 years immediately prior to the date of application;~~

~~(2) Affirm completion of at least 24 contact hours of continuing education in the last 2 years immediately preceding the application; or~~

~~(3) Present evidence of completion of a board-approved nursing assistant education program pursuant to Nur 702 within 2 years immediately prior to the date of application.~~

~~— (e) Applicants shall have the option to fulfill the requirements of (d) (1) above through:~~

~~(1) Paid or unpaid work; or~~

~~(2) Providing care to a family member if:~~

~~a. Licensed expertise is required for such care;~~

~~b. A nursing plan of care is implemented; and~~

~~c. Care is provided under the supervision of a licensed nurse.~~

~~— Nur 401.06 Specific Renewal Requirements for Medication Nursing Assistant (MNA).~~

~~(a) In addition to meeting the requirements of Nur 401.01, each applicant for renewal or reinstatement of a Medication Nursing Assistant (MNA) certificate shall either:~~

~~(1) Affirm use of medication nursing assistant knowledge, judgment and skills within the applicant’s practice category for a minimum of 50 hours within 2 years immediately prior to the date of application;~~

~~(2) Affirm completion of at least 8 contact hours of continuing education in each of the last 2 years immediately preceding the application for a minimum total of 8 hours for the 2-year period; or~~

~~(3) Present evidence of completion of a board-approved medication nursing assistant education program pursuant to Nur 806.03 within 2 years immediately prior to the date of application.~~

~~— (b) An applicant for license renewal as a MNA shall complete and submit Form “MNA Renewal Application”, as amended, 5-2016.~~

~~— (c) Applicants for renewal or reinstatement who fail to meet the requirements of (a) shall have the option to take a board-approved medication nursing assistant competency evaluation to meet the active in practice, continuing education requirement, or both.~~

~~— (d) An applicant who fails the medication nursing assistant competency evaluation shall not retake the competency evaluation and may reestablish eligibility only by meeting the requirements for and receiving another initial certificate pursuant to Nur 801.01.~~

~~(e) A licensed nursing assistant whose medication administration certification has expired and has not been renewed within one year from the certification expiration date shall be:~~

~~(1) Ineligible to administer medication; and~~

~~(2) Able to reestablish eligibility only by meeting the requirements for and receiving another initial certificate pursuant to Nur 801.01.~~

~~— (f) An applicant seeking reinstatement of MNA Certification shall complete and submit Form “Medication Nursing Assistant Certification Reinstatement”, as amended, 5-2016.~~

Adopt Nur 401.05, previously Nur 401.07, effective 4-17-14 (Document #10571) and expired 4-17-24, to read as follows :

Nur 401.05 Retired Status Designation.

- (a) A retired RN may use the title, “R.N. (Ret.)”
- (b) A retired LPN may use the title, “L.P.N. (Ret.)”
- (c) A retired APRN may use the title, “ A.P.R.N. (Ret.)”
- (d) A retired LNA may use the title, “L.N.A. (Ret.)”

PART Nur 402 REVOCATION, SUSPENSION AND OTHER SANCTIONS

Readopt with amendment Nur 402.04, previously effective 4-17-14 (Document #10571), and partially expired 4-17-24, amended effective 10-22-15 (Document #10953) and partially expired 10-22-25, amended effective 4-26-16 (Document #11082), as Nur 402.01 to read as follows:

Nur 402.014 Disciplinary Sanctions.

(a) Other than immediate license suspensions authorized by RSA 541-A: 30, III, the board shall impose disciplinary sanctions only:

- (1) After prior notice and an opportunity for a hearing; or***
- (2) Pursuant to a mutually agreed upon settlement or consent decree.***

(b) In addition to the acts described in RSA 326-B: 37, II, the following shall also be considered acts of misconduct or dishonesty for any person licensed under RSA 326-B:

- (1) Accepting a nursing or nursing-related assignment when the licensee knows or has reason to know they are ~~he or she is~~ unqualified to perform the assignment;***
- (2) Leaving an assignment from the acute care, long term care, home care, or community setting, without notifying the appropriate authority, whereby such departure endangers the health, safety, and welfare of those individuals entrusted to the licensee's care;***
- (3) Violating care recipients' rights, confidentiality, privacy, or records;***

- (4) Practicing in a manner that discriminates on the basis of age, race, sex, handicap, national origin, sexual orientation, nature of illness or health status, physical or mental infirmity;*
 - (5) Misappropriating human or material resources;*
 - (6) Physical, mental ~~and/or~~ verbal abuse, battery, exploitation, harassment, or neglect of individuals;*
 - (7) Receiving, or agreeing to receive, fees or other considerations for influencing the care, activities, or records of individuals;*
 - (8) Failure to maintain standards of practice or education pursuant to RSA 326-B:2;*
 - (9) Claiming as their own another's license, or allowing others to use a license not their own;*
 - (10) Administering therapeutic agents, treatments, or activities, or recording of same, in an inaccurate or negligent manner;*
 - (11) Failure to record or report in an accurate manner without omission, falsification, or alteration of any patient care data, or health care, employment, or board records;*
 - (12) Failure to take appropriate action to safeguard individuals from incompetent health-care, nursing practices, nursing-providers, ancillary personnel or others involved with care-recipients;*
 - (13) Performing nursing activities or interventions, or providing nursing-related activities beyond the authorized scope of practice;*
 - (14) Practicing without a current license, or altering a license pocket-card by changing dates, numbers, or any information appearing on a license pocket-card;*
 - (15) Falsifying or not providing information requested by the board;*
 - (16) Being the subject of 3 different medical injury actions reported under RSA 326-B:37; and*
 - (17) Any pattern of behavior consisting of more than one incident of professional misconduct that is incompatible with the standards of practice.*
- (c) Acts of misconduct for APRNs, RNs and LPNs shall also include:*
- (1) Delegating or directing activities or tasks to individuals when the licensee knows or has reason to know that the individual(s) is not qualified to perform the activity or task;*
 - (2) Failure of licensee to supervise individuals or groups required to practice nursing or provide nursing-related activities under supervision;*
 - (3) Requiring a licensee to perform specific nursing interventions or nursing related activities when the licensee clearly and cogently states their inability, either through lack of education, practice or knowledge and skills, to perform the delegated activity; and*
 - (4) Permitting the use or disclosure of program information under control of the APRN's by a person not authorized to receive it in violation of RSA 318 or administrative rules of the board of pharmacy.*
- (d) When the board receives notice that a licensee has been disciplined for acts related to professional conduct by the licensing authority of another jurisdiction, the board shall issue an order providing the*

opportunity for a hearing and directing the licensee to demonstrate why reciprocal discipline should not be imposed in New Hampshire.

(e) In a disciplinary proceeding brought on the basis of discipline imposed in another jurisdiction, a licensee shall not be subject to disciplinary sanctions which exceed those imposed by the other jurisdiction unless the board first provides specific notice of an intention to consider other sanctions.

(f) In imposing sanctions in accordance with RSA 310-:12, the board shall apply the following factors in determining the level or kind of disciplinary sanction imposed:

- (1) The seriousness of the offense;***
- (2) The licensee's prior disciplinary record;***
- (3) The licensee's state of mind at the time of the offense;***
- (4) The licensee's acknowledgment of their ~~his or her~~ wrongdoing;***
- (5) The licensee's willingness to cooperate with the board;***
- (6) The purpose of the rule or statute violated;***
- (7) The potential harm to public health and safety; and***
- (8) The nature and extent of the enforcement activities required of the board as a result of the offense.***

(g) Discipline imposed upon a licensee under (b) above shall be intended to be the minimum sanction or sanctions, both in type and extent, that the board believes will, based upon the unique facts and circumstances of each act of misconduct:

- (1) Protect the public; and***
- (2) Deter both the licensee charged and any other licensee from engaging in such misconduct in the future.***

Adopt Nur 403 previously effective 4-17-14 (Document #10571) and expired 4-17-24, to read as follows :

PART Nur 403 CONTINUING EDUCATION

Nur 403.01 Continuing Education Requirements for LPN, RN, and -APRN.

(a) Each applicant for license renewal or reinstatement for an RN or LPN license shall complete at least 30 contact hours of workshops, conferences, lectures, or in-service educational offerings that are designed to enhance nursing knowledge, judgment, and skills. Current certification in BLS, ACLS, or CPR may be used to fulfill such continuing education requirement up to a maximum of 4 contact hours per certification.

(b) Educational courses offering content in the following shall fulfill the requirements of (a) above:

- (1) Nursing art and science;**
- (2) Nursing education, practice, or research;**
- (3) Research in health care;**
- (4) Biological, physical, or behavioral sciences;**

- (5) Management, administration or supervision of health-care delivery;
 - (6) Teaching or learning principles;
 - (7) Ethical or legal aspects of health-care;
 - (8) Content offered in basic nursing educational programs appropriate to the licensure category; or
 - (9) Health-care trends, issues or policies.
- (c) One or more of the following educational activities shall fulfill the requirements of (a) above:
- (1) Authorship of a published professional nursing article or book;
 - (2) Preparation and initial delivery of a professional nursing paper;
 - (3) Preparation and initial participation on a professional nursing panel;
 - (4) Participation in quality assessment or risk management studies;
 - (5) Nursing or nursing-related grant-writing or research; or
 - (6) Completion of 2 or more credits in a school, college, or university that enhances nursing knowledge, judgment and skills.

(d) Each APRN applicant for APRN license renewal or reinstatement shall complete at least 30 contact hours of continuing education in addition to the continuing education requirements to renew or reinstate a RN license within the 2 years immediately preceding date of application. At least 20 of the 30 hours shall be specific to the specialty practice area, and 5 hours shall be education in pharmacology appropriate to the specialty practice area. Current certification in BLS, ACLS, or CPR may be used to fulfill such continuing education requirement up to a maximum of 4 contact hours per certification.

Nur 403.02 Continuing Education Requirements for LNA. Each applicant for renewal *or* reinstatement of an LNA license shall complete at least 12 contact hours per year of workshops, conferences, lectures, or in-service educational offerings that are designed to enhance nursing assistant knowledge, judgment, and skills. Current certification in BLS, ACLS, or CPR may be used to fulfill such continuing education requirement up to a maximum of 4 contact hours per certification.

Nur 403.03 Continuing Education Requirements for MNA. Each applicant for renewal of an MNA license shall complete at least 4 contact hours per year of workshops, conferences, lectures, or in-service educational offerings that are designed to enhance nursing assistant knowledge, judgment, and skills related to medications and/or medication administration.

Nur 403.04 Method of Calculation of Contact Hours for Individualized Learning.

(a) Academic credit for courses shall be converted to contact hours, with one credit being the equivalent of 15 contact hours.

(b) Individualized learning activities shall count on an hour-for-hour basis towards fulfilling the requirements of continuing education.

Nur 403.05 Continuing Education for Licensees Serving on the NH Board of Nursing. Licensees serving on the NH Board of Nursing shall be awarded .5 contact hours per board meeting attended.

PART Nur 404 ~~ONGOING REQUIREMENTS~~ ***DELEGATION OF TASKS***

Readopt with amendment Nur 404.01 and Nur 404.02, 4-26-16 (Document #11082), to read as follows:

Nur 404.01 Purpose.

(a) The purpose of Nur 404.01 to Nur 404.07 is to regulate the delegation of tasks of client care by licensed nurses to licensed and unlicensed persons, pursuant to RSA 326-B:28 and RSA 326-B:29.

(b) The purpose of Nur 404.08 to Nur 404.11 is to regulate the delegation of tasks of administration of medication tasks by licensed nurses to MNA, pursuant to RSA 326-B:28 and RSA 326-B:29.

Nur 404.02 Scope. This part shall apply to the delegation of nursing tasks by all licensees except for those persons exempted by RSA 326-B:43.

Readopt with amendment Nur 404.03, effective 10-22-15 (Document #10953), and amended effective 4-26-16 (Document #11082), to read as follows:

Nur 404.03 Definitions

(a) *“Administration of medication” means an action taken by a licensee or authorized delegate whereby a single dose of the prescribed medication is instilled into or applied to the body of a person for immediate consumption or use.*

(b) *“Assistance with administration of medication” means an action taken by a licensee or authorized delegate whereby a client with stable medical condition(s) and who is fully able to recognize and accept prescribed medications is assisted with one or more of the following steps in the process of instilling or applying a single dose of prescribed medication:*

(1) Providing assistance, observation, and documentation to a client;

(2) Taking the medication to the client when the client is present to receive medication;

(3) Opening the medication container for the client when the client is present;

(4) Reminding or prompting the client to take the medication at the proper time;

(5) Reading a medication label to the client;

*(6) Physically assisting the client to self-administer medication utilizing hand or hand technique;
and*

(7) Providing food or liquids if the medication label instructs the client to take the medication with food or liquids.

(c) “Nursing task” means a procedure that requires nursing education and a license as a registered nurse or licensed practical nurse to perform.

Readopt with amendment Nur 404.04, effective 10-22-15 (Document #10953), and amended effective 4-26-16 (Document #11082), and further amended effective 12-22-17 (Document #12439), to read as follows:

Nur 404.04 Licensees with the Authority to Delegate Nursing Related Activities.

(a) The following licensees shall have the authority pursuant to RSA 326-B to delegate nursing related activities:

(1) Any currently licensed RN or APRN when practicing registered nursing; and

(2) Any currently licensed LPN when practicing practical nursing directed by a licensed APRN, RN, dentist or physician.

(b) For nursing related tasks involving assistance with or the administration of medication, the following persons shall be eligible to be delegates:

(1) Any currently licensed RN and APRN;

(2) Any currently licensed LPN, only when:

a. The method of medication administration is not intravenous; or

b. The method of medication administration is intravenous, and the LPN is in compliance with Nur 604.01 (b) and (c);

(3) Unlicensed assistive personnel who have competency to perform the specific task to be delegated; and

(4) Any currently licensed LNA only when:

a. The task is assistance with medication administration; or

b. The task is administration of medication in a setting that involves administration of medication to stable clients, as defined in Nur 101.21, and the LNA holds a certificate of medication administration issued in accordance with the provisions of Nur 801; or

c. The LNA that does not hold a certificate of medication administration is employed in the home care, residential care, adult day care, or hospice care setting, where the number of delegations is limited to the number of clients assigned to the LNA, and in accordance with Nur 404.07(h).

Readopt Nur 404.05, effective 4-17-14 (Document #10571), and amended effective 12-22-17 (Document #12439), as follows:

Nur 404.05 Eligibility to be a Delegatee.

(a) Any individual shall be eligible to receive the delegation of a task of client care not involving the administration of medication only if such individual has competency to perform the specific task.

(b) For nursing related activities involving the administration of medication, the following persons shall be eligible to be delegates:

(1) Any currently licensed RN and APRN;

(2) Any currently licensed LPN only when:

a. The method of medication administration is not intravenous; or

- b. The method of medication administration is intravenous and the LPN is in compliance with Nur 604.01 (b) and (c);
- (3) Unlicensed assistive personnel who have competency to perform the specific task to be delegated; and
- (4) Currently licensed LNA when:
 - a. The LNA holds a certificate of medication administration issued in accordance with the provisions of Nur 801 and in compliance with this part; or
 - b. The LNA is in compliance with Nur 404.07(h).

Readopt Nur 404.06, effective 4-26-16 (Document #11082), as follows:

Nur 404.06 Delegation of Nursing Tasks.

- (a) To delegate a nursing task, the delegating nurse shall:
 - (1) Assess the client to ensure the client's condition is stable and predictable pursuant to Nur 101.21;
 - (2) Ensure the task does not require nursing assessment and consider:
 - a. The nature of the task, the complexity, and the risks involved;
 - b. The delegate skills necessary to safely perform the task within the care setting and without the direct supervision of the delegating nurse; and
 - c. The willingness of the delegate to perform the task;
 - (3) Teach the task to the prospective delegate;
 - (4) Observe the prospective delegate performing the task to ensure that the task is performed safely and accurately;
 - (5) Upon finding the delegate competent at the task, delegate the task and instruct the delegate that the delegation is specific to the specified client only and not transferable to another client;
 - (6) Document the delegation and the delegation process and leave written instructions with the delegate, as appropriate;
 - (7) Supervise the delegate and provide ongoing evaluation at a frequency determined by consideration of the following:
 - a. The complexity of the delegated task of client care;
 - b. The condition of the client;
 - c. The skill level of the delegate; and
 - d. The familiarity of the delegate with the environment in which the task is to be performed; and
 - (8) Rescind the delegation if:

- a. The client's condition changes in a way that renders the delegation no longer safe or appropriate;
- b. The delegate proves unwilling or incompetent to perform the delegated task;
- c. The client objects to the delegation ; or
- d. The delegating nurse is no longer able to supervise the performance of the delegated task. The delegating nurse shall notify the delegate and the delegatee's supervisor of a rescission.

(b) A licensed nurse shall report to the board an attempt to coerce the delegation of a task of client care in violation of RSA 326-B: 29, II.

Readopt Nur 404.07, effective 4-126-16 (Document #11082), and amended effective 12-22-17 (Document #12439), as follows:

Nur 404.07 Delegation of Medication Administration.

(a) In addition to the requirements of Nur 404.05, when delegating medication administration, the delegating nurse shall specify:

- (1) The medication to be administered;
- (2) The dosage, route and time of the medication to be administered;
- (3) The proper method for administration;
- (4) Required documentation; and
- (5) The duty to report immediately to the delegating nurse any error in the administration.

(b) In addition to the requirements in paragraph (a), and when relevant to the care of the client by the delegate, the delegating nurse shall instruct the delegate on:

- (1) The reasons for the medication;
- (2) The potential side effects of the medication;
- (3) Observation of the client's response; and
- (4) Expected actions if side effects are observed.

(c) A nurse may delegate medication administration when medication is administered via the following routes:

- (1) Topical;
- (2) Oral;
- (3) Nasal;
- (4) Ocular;
- (5) Auricular;
- (6) Vaginal;
- (7) Rectal;

- (8) Enteral tube; and
 - (9) Injection of insulin or epinephrine in accordance with paragraph (f) and (g).
- (d) A nurse shall not delegate the following:
- (1) Medication administered via a parenteral route, if not listed in paragraph (c);
 - (2) Medication administered via a nasogastric tube;
 - (3) The initial dose of a new medication or a previously prescribed medication with a dosage change; or
 - (4) Medication administration requiring a dosage calculation by the LNA.
- (e) A nurse may delegate PRN medications subject to the following:
- (1) The delegating nurse provides written instructions; and
 - (2) The administration is authorized by the supervising nurse on duty or on call.
- (f) A nurse may delegate the administration of insulin from a labeled and pre-set or pre-drawn Insulin delivery device.
- (g) A nurse may delegate the administration of epinephrine from a labeled and pre-set or pre-drawn delivery device.
- (h) In addition to the requirements of this part, when delegating medication administration to a currently licensed LNA that does not hold a certificate of medication administration, the delegating nurse shall:
- (1) Ensure the administration of medication is to stable clients, as defined in Nur 101.21 and pursuant to Nur 404.06(a)(1);
 - (2) Identify a routine medication regime with a clear process for the LNA to follow, such as the use of:
 - a. A medication planner or box that is prefilled by a licensed nurse;
 - b. Clearly marked medication bottles or containers that provide direction for administration; or
 - c. Written instructions on administration provided by the delegating nurse;
 - (3) Ensure the LNA has, pursuant to Nur 404.06(a)(3), received instruction on requirements of the task delegated and understands a client medication administration record; and
 - (4) Ensure delegation of medication administration does not, pursuant to Nur 404.06(a)(2), require independent decision-making by the LNA and shall only be appropriate when the client is unable to safely self-administer.

~~PART Nur 405—ONGOING REQUIREMENTS~~

Repeal Nur 405.01, effective 4-26-16 (Document #11082), as follows:

~~Nur 405.01—Competence to Practice. All licensees shall, through education and experience, maintain the ability to practice nursing or nursing-related activities competently.~~

Text added to existing rule shown in ***bold-italic***
 Text removed from existing rule shown in ~~strike through~~

APPENDIX I

Rule	Specific State Statute the Rule Implements
Nur 401.01	RSA 326-B:9, XI; RSA 326-B:22; RSA 326-B:46
Nur 401.02	RSA 326-B:9, II; RSA 326-B:22; RSA 326-B:32
Nur 401.03 and Nur 401.04	RSA 326-B:22
Nur 401.05 and Nur 401.06	RSA 326-B:22
Nur 401.05 (formerly Nur 401.07)	RSA 326-B:9, X
Nur 402.01 (formerly Nur 402.04)	RSA 326-B:37, I – III
Nur 403.01 – Nur 403.05	RSA 326-B:31, II and III
Nur 404.01 - Nur 404.07	RSA 326-B:28; RSA 326-B:29
Nur 405.01 (repeal)	RSA 326-B:30

APPENDIX II

RULE	Title	Obtain at:
Nur 401.01	Nurse Licensure Compact Model Rules and Regulations (as amended November 13, 2013)	https://www.ncsbn.org/2539.htm
Nur 401.01(b)	Enhanced Nurse Licensure Compact (eNLC) Model Rules and Regulations (as amended January 19, 2018)	https://www.NCSBN.org/nlerules