1	21 NCAC 36 .0	121 is adopted with changes as published in NCR 35:02 page 113 as follows:
2	21 NCAC 36 .0	121 PETITIONING FOR RULEMAKING
4	(a) Any person	wishing to submit a petition to the Board requesting the adoption, amendment, or repeal of a rule shall
5	file the petition	with the Board's chief executive officer. Petitions shall be mailed to the Board at Post Office Box
6	2129, Raleigh, I	NC 27602-2129.
7	(b) The petition	shall contain the following information:
8	(1)	a proposed draft of the rule to be adopted, [or] amended, or a citation to the rule to be repealed;
9	(2)	a statement of the reason for the proposal including statutory authority;
10	(3)	effect of the proposed rule change on the practice of nursing;
11	<u>(4)</u>	any data supporting the proposal including cost factors; and
12	<u>(5)</u>	name, address, and telephone number of each petitioner.
13	(c) The Board	[will] shall determine whether the public interest would be served by the adoption, amendment, or
14	repeal of the rec	quested rule. Prior to making this determination, the Board may:
15	<u>(1)</u>	request additional information from the petitioner;
16	(2)	contact interested persons or those likely to be affected by the proposed rule and request comments;
17		<u>and</u>
18	(3)	[it may] use any other [appropriate] method for obtaining information on which to base its
19		determination. It [will] shall consider all the contents of the petition submitted plus any other
20		information obtained by the means described herein.
21	(d) The Board s	shall act on a petition within the timeframe outlined in G.S. 150B-20.
22		
23	History Note:	Authority G.S. 150B-20; 90-171.23(b)(3);
24		Eff. November, 1, 2020.

Last Printed: October 7, 2020

1	21 NCAC 36 .0122 is adopted with changes as published in NCR 35:02 page 113 as follows		
2	21 NCAC 36 .0122 PETITIONS FOR DECLARATORY RULINGS		
4	(a) All requests for declaratory rulings shall be written and mailed to the Board at Post Office Box 2129, Raleigh, NO		
5	27602-2129. The envelope containing the request shall bear the notation: "REQUEST FOR DECLARATORY		
6	RULING."		
7	(b) Each Request for Declaratory Ruling shall include the following information:		
8	(1) the name and address of the person requesting the ruling:		
9	(2) the statute or rule to which the request relates;		
10	(3) a [concise] statement of the manner in which the requesting person is affected by the statute or rule		
11	or its potential application to that person; and		
12	(4) a statement whether an oral hearing is desired and, if so, the reason.		
13	(c) Upon receipt of a Request for Declaratory Ruling, the Board shall determine whether a ruling is appropriate under		
14	the facts stated.		
15	(d) When the Board determines that the issuance of a declaratory ruling is inappropriate, the Board shall notify, in		
16	writing, the person requesting the ruling, stating the reasons for the denial of the request.		
17	(e) The Board shall decline to issue a declaratory ruling where:		
18	(1) there has been a similar controlling factual determination made by the Board in a contested case;		
19	(2) the [rule-making] rulemaking record shows that the factual issues raised by the request were		
20	specifically considered prior to adoption of the rule;		
21	(3) the subject-matter of the request is involved in pending litigation in any state or federal court in		
22	North Carolina; or		
23	(4) the petitioner fails to show that the circumstances are so changed since the adoption of the statute		
24	or rule that a ruling is warranted.		
25			
26	History Note: Authority G.S. 150B-4; 90-171.23(b)(3);		
7	Fff November 1, 2020		

2 East Printed: October 7, 2020 21 NCAC 36 .0228 is amended as published in NCR 35:02 page 115 as follows:

## 21 NCAC 36 .0228 CLINICAL NURSE SPECIALIST PRACTICE

- (a) Effective July 1, 2015, only Only a registered nurse who meets the qualifications outlined in Paragraph (b) of this Rule shall be recognized approved by the Board as a clinical nurse specialist to perform advanced practice registered nursing activities listed in Paragraph (f) of this Rule.
- (b) The Board shall recognize approve an applicant who:
  - (1) has an active, unencumbered license to practice as a registered nurse in North Carolina or a state that has adopted the Nurse Licensure Compact;
    - (2) has an unrestricted previous approval, registration, or license as a clinical nurse specialist if previously approved, registered, or licensed as a clinical nurse specialist in another state, territory, or possession of the United States;
    - (3) has successfully completed a master's or higher level degree program that is accredited by a nursing accrediting body approved by the United States Secretary of Education or the Council for Higher Education Accreditation and meets the qualifications for clinical nurse specialist certification by an approved national credentialing body under Part (b)(4)(A) of this Rule; and
    - (4) either:
      - (A) has current certification as a clinical nurse specialist from a national credentialing body approved by the Board, as defined in Paragraph (h) of this Rule and 21 NCAC 36 .0120(26); or
      - (B) meets requirements that are equivalent to national certification if no clinical nurse specialist certification is available in the specialty, meets requirements that are equivalent to national certification. specialty. The Board shall determine equivalence based on consideration of an official transcript and course descriptions validating Subparagraph (b)(3) of this Rule, a current curriculum vitae, work history, professional recommendations indicating evidence of at least 1,000 hours of clinical nurse specialist practice, and documentation of certificates indicating 75 contact hours of continuing education applicable to clinical nurse specialist practice during the previous five years.
  - (c) An applicant certified as a clinical nurse specialist by a national credentialing body prior to January 1, 2007, and who has maintained that certification and active clinical nurse specialist practice and holds a master's or higher degree in nursing or a related field shall be recognized approved by the Board as a clinical nurse specialist.
  - (d) New graduates seeking first-time clinical nurse specialist recognition approval in North Carolina shall hold a master's or doctoral degree or a post-master's certificate from a clinical nurse specialist program accredited by a nursing accrediting body approved by the U.S. Secretary of Education or the Council for Higher Education
- Accreditation and shall meet all requirements in Subparagraph (b)(1) and Part (g)(3)(A) of this Rule.
- 36 (e) A clinical nurse specialist seeking Board recognition approval who has not never practiced as a clinical nurse specialist or has not practiced in more than two years shall complete a clinical nurse specialist refresher course

1	approved by the	e Board in accordance with 21 NCAC 56 .0220(6) and (p), consisting of common conditions and their	
2	management related to the clinical nurse specialist's area of education and certification. A clinical nurse specialist		
3	refresher cours	e participant shall be granted <u>limited</u> clinical nurse specialist recognition that is <u>limited</u> <u>specific</u> to	
4	clinical activities taught in the refresher course.		
5	(f) The scope of	of practice of a clinical nurse specialist shall incorporate the basic components of nursing practice as	
6	defined in Rule	.0224 of this Section as well as the understanding and application of nursing principles at an advanced	
7	practice registe	red nurse level in the area of clinical nursing specialization in which the clinical nurse specialist is	
8	educationally p	repared and for which competency is maintained, including:	
9	(1)	assessing clients' health status, synthesizing and analyzing multiple sources of data, and identifying	
10		alternative possibilities as to the nature of a healthcare problem;	
11	(2)	diagnosing and managing clients' acute and chronic health problems within an advanced practice	
12		nursing framework;	
13	(3)	assessing for and monitoring the usage and effect of pharmacologic agents within an advanced	
14		practice nursing framework;	
15	(4)	formulating strategies to promote wellness and prevent illness;	
16	(5)	prescribing and implementing therapeutic and corrective non-pharmacologic nursing interventions;	
17	(6)	planning for situations beyond the clinical nurse specialist's expertise and consulting with or	
18		referring clients to other health care providers as appropriate;	
19	(7)	promoting and practicing in collegial and collaborative relationships with clients, families, other	
20		health care professionals, and individuals whose decisions influence the health of individual clients,	
21		families, and communities;	
22	(8)	initiating, establishing, and using measures to evaluate health care outcomes and modify nursing	
23		practice decisions;	
24	(9)	assuming leadership for the application of research findings for the improvement of health care	
25		outcomes; and	
26	(10)	integrating education, consultation, management, leadership, and research into the clinical nurse	
27		specialist role.	
28	(g) A registered nurse seeking recognition approval by the Board as a clinical nurse specialist shall:		
29	(1)	complete the appropriate application that includes the following:	
30		(A) evidence of a master's or doctoral degree or a post-master's certificate, as set out in	
31		Subparagraph (b)(3) or Paragraph (d) of this Rule; and either	
32		(B) evidence of current certification in a clinical nursing specialty from a national credentialing	
33		body, set out in Part (b)(4)(A) of this Rule; or	
34		(C) meet requirements set out in Part (b)(4)(B) of this Rule;	
35	(2)	renew the recognition approval every two years at the time of registered nurse renewal; and	
36	(3)	either:	

1		(A) submit evidence of initial certification and re-certification by a national credentialing body
2		at the time such occurs in order to maintain Board recognition, consistent with Paragraphs
3		(b) and (h) of this Rule; or
4		(B) if subject to Part (b)(4)(B) of this Rule, submit evidence of at least 1,000 hours of practice
5		and 75 contact hours of continuing education every five years.
6	(h) The Board	shall approve those national credentialing bodies offering certification and recertification in a clinical
7	nursing specialt	y that have established the following minimum requirements:
8	(1)	unrestricted active unencumbered licensure as a registered nurse; and
9	(2)	certification as a clinical nurse specialist that is limited to applicant prepared with a master's or
10		doctoral degree or a post-master's certificate.
11		
12	History Note:	Authority G.S. 90-171.20(4); 90-171.20(7); 90-171.21(d)(4); 90-171.23(b); 90-171.27(b); 90-
13		171.42(b);
14		Eff. April 1, 1996;
15		Amended Eff. January 1, 2015; April 1, 2008; January 1, 2007; November 1, 2005; August 1, 2005;
16		April 1, 2003;
17		Readopted Eff. January 1, <del>2019.</del> <u>2019:</u>
18		Amended Eff. November 1, 2020.

21 NCAC 36 .0323 is amended as published in NCR 35:02 page 116 as follows:

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## 21 NCAC 36.0323 RECORDS AND REPORTS

- 4 (a) The controlling institution's publications describing the nursing program shall be current and accurate.
- 5 (b) The controlling institution shall maintain a system for maintaining official records. Current and permanent student
- 6 records shall be stored in a secure manner that prevents physical damage and unauthorized access.
- 7 (c) Both permanent and current records shall be available for review by Board staff.
- 8 (d) The official permanent record for each graduate shall include documentation of graduation from the program and
- 9 a transcript of the individual's achievement in the program.
- 10 (e) The record for each currently enrolled student shall contain up-to-date and complete information, including the following:
  - (1) documentation of admission criteria met by the student;
    - (2) documentation of high school graduation, high school equivalent, or earned credits from post-secondary institution approved pursuant to G.S. 90-171.38(a); and
      - (3) a transcript of credit hours achieved in the classroom, laboratory, and clinical instruction for each course that reflects progression consistent with program policies.
  - (f) The nursing program shall file with the Board records, data, and reports in order to furnish information concerning operation of the program as prescribed in the rules in this Section, including:
    - (1) an annual report to be filed with the Board by November 1 of each year;
- 20 (2) a program description report for non-accredited programs filed with the Board at least 30 days prior 21 to a scheduled review by the Board; and
  - (3) notification by institution administration of any change of the nursing program director. This notification shall include a curriculum vitae for the new director and shall be submitted no later than 10 business days before the effective date of the change.
- 25 (g) All communications relevant to accreditation shall be submitted to the Board at the same time that the communications are submitted to the accrediting body.
- (h) The Board may require additional records and reports for review at any time to provide evidence and substantiate compliance with the rules in this Section by a program and its controlling institutions.
- (i) The part of the application for licensure by examination to be submitted to the Board by the nursing program shall include a statement verifying satisfactory completion of all requirements for graduation program completion and the date of completion. The nursing program director shall verify completion of requirements to the Board no later than
- one month following completion of the Board-approved nursing program.

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- 34 *History Note:* Authority G.S. 90-171.23(b)(8); 90-171.38;
- 35 Eff. February 1, 1976;
- 36 Amended Eff. December 1, 2016; January 1, 2015; December 1, 2005; January 1, 2004; June 1,
- 37 1992; January 1, 1989; January 1, 1984;

- Readopted Eff. January 1, <del>2019.</del> <u>2019;</u>
- 2 <u>Amended Eff. November 1, 2020.</u>

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