DISTRICT OF COLUMBIA MUNICIPAL REGULATIONS for REGISTERED NURSING

CHAPTER 54 REGISTERED NURSING

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5400 GENERAL

- This chapter shall apply to applicants for and holders of a license to practice registered nursing.
- Chapters 40 (General Rules) and 41 (Administrative Procedures) of this title shall supplement this chapter.

5401 TERM OF LICENSE

- Subject to § 5401.2, a license issued pursuant to this chapter shall expire at 12:00 midnight of June 30 of each even-numbered year.
- If the Director changes the renewal system pursuant to § 4006.3 of chapter 40 of this title, a license issued pursuant to this chapter shall expire at 12:00 midnight of the last day of the month of the birth date of the holder of the license, or other date established by the Director.

5402 EDUCATIONAL REQUIREMENTS

- Except as otherwise provided in this chapter, an applicant for a license shall furnish proof satisfactory to the Board in accordance with § 504(n) of the Act, D.C. Official Code § 3-1205.04(n) of the following:
 - (a) That the applicant has successfully completed a nursing education program leading to licensure as a registered nurse which was approved by the Board or by a nursing board in the United States or U.S. territory with standards

- determined by the Board to be substantially equivalent to the standards in the District; or
- (b) That the applicant has successfully completed a basic nursing education program in Canada leading to licensure as a registered nurse which was approved by a Canadian Provincial nursing board with standards determined by the Board to be substantially equivalent to the standards in the District. The applicant shall:
 - (1) Furnish proof satisfactory to the Board in accordance with § 504(n) of the Act, D.C. Official Code § 3-1205.04(n), that the applicant's education and training are substantially equivalent to the requirements of this chapter and the Act; and
 - (2) If a document required by this chapter is in a language other than English, an applicant shall arrange for its translation into English by a translation service acceptable to the Board and shall submit the translation signed by the translator attesting to its accuracy.

5403 EDUCATIONAL REQUIREMENTS FOR APPLICANTS EDUCATED IN FOREIGN COUNTRIES

- An applicant for a license who completed an educational program in a foreign country, which program was not approved in accordance with § 5402.1, shall furnish proof satisfactory to the Board in accordance with § 504(n) of the Act, D.C. Official Code § 3-1205.04(n) of the following:
 - (a) That the applicant's education and training are substantially equivalent to the requirements of this chapter and the Act;
 - (b) That the applicant successfully completed the Commission on Graduates of Foreign Nursing Schools (CGFNS) examination by submitting a certificate from CGFNS; and
 - (c) That the applicant has spoken and written competency in English by documenting one of the following:
 - (1) Graduation from a nursing program where English was the only language of instruction through the applicant's inclusive dates of attendance;
 - (2) Successful completion of the Test of Spoken English (TSE) examination with a passing score of fifty (50);
 - (3) Successful completion of the International English Language Testing System (IELTS) examination with a passing score of six and one half (6.5) overall with a spoken band score of seven (7.0); or
 - (4) Provide proof that the applicant has completed a total of twelve (12) months of full-time employment in the United States during the two (2)

years immediately preceding the date of application.

If a document required by this chapter is in a language other than English, an applicant shall arrange for its translation into English by a translation service acceptable to the Board and shall submit the translation signed by the translator attesting to its accuracy.

5404 LICENSURE BY EXAMINATION

- To qualify for a license by examination, an applicant shall:
 - (a) Receive a passing score on the National Council Licensure Examination for Registered Nurses (NCLEX-RN) developed by the National Council of State Boards of Nursing, Inc. (NCSBN). The passing score on the NCLEX-RN shall be the passing score established by the NCSBN;
 - (b) Meet the educational requirements of this chapter; and
 - (c) Meet any other requirements as set forth by the Board.
- To apply for a license by examination, an applicant shall:
 - (a) Submit a completed application to the Board on the required forms and include:
 - (1) The applicant's social security number on the application. If the applicant does not have a social security number, the applicant shall submit with the application a sworn affidavit, under penalty of perjury, stating that he or she does not have a social security number; and
 - (2) Two (2) recent passport-type photographs of the applicant's face measuring two inches by two inches (2" x 2") which clearly exposes the area from the top of the forehead to the bottom of the chin.
 - (b) Arrange for a certified transcript of the applicant's academic record and a letter of recommendation from the nurse administrator of the school or college to be sent directly from the educational institution to the Board;
 - (c) Sit for the NCLEX-RN examination not later than ninety (90) days following submission of the application. The Board may, in its discretion, grant an extension of the time requirement if the applicant's failure to sit for the examination was for good cause. As used in this section "good cause" includes the following:
 - (1) Serious and protracted illness of the applicant; or
 - (2) The death or serious and protracted illness of a member of the applicant's immediate family.
 - (d) Submit any other required documents; and

- (e) Pay all required fees.
- An application that remains incomplete for ninety (90) days or more from the date of submission shall be considered abandoned, and closed by the Board. The applicant shall thereafter be required to reapply, comply with the current requirements for licensure, and pay the required fees.
- If an applicant has not yet taken or passed the NCLEX-RN examination six (6) months after the date the applicant became eligible to sit for the exam, the applicant shall complete a review course approved by the Board and provide proof of having completed the course in order to be eligible to sit for the next available NCLEX-RN examination. For purposes of this section:
 - (a) Graduates of an educational program in registered nursing approved in accordance with § 5402.1 are eligible to apply to sit for the exam upon graduation.
 - (b) Graduates of an educational program in registered nursing in a foreign country not approved in accordance with § 5402.1 are eligible to sit for the exam upon completion of the requirements set forth in § 5403.1.
- If an applicant has not yet taken or passed the NCLEX-RN examination two (2) years after the date the applicant became eligible to sit for the exam, the applicant shall complete a remedial course approved by the Board and provide proof of having completed the course in order to be eligible to sit for the next available NCLEX-RN examination.
- If an applicant has not yet taken or passed the NCLEX-RN examination three (3) years after the date the applicant became eligible to sit for the exam, the applicant shall complete an additional education program leading to a degree in registered nursing approved by the Board and provide proof of having completed the program in order to be eligible to sit for the next available NCLEX-RN examination.

5405 LICENSURE BY ENDORSEMENT

- An applicant is eligible for licensure by endorsement if the applicant is currently licensed as a registered nurse under the laws of a state or territory of the United States; and if the applicant's original licensure in a state or territory was based upon:
 - (a) A passing score on a state constructed examination taken prior to 1949;
 - (b) A passing score on the State Board Test Pool Examination for nurses taken between January 1949 and February 1982; or
 - (c) A passing score on the NCLEX-RN.
- To apply for a license by endorsement, an applicant shall:

- (a) Submit a completed application to the Board on the required forms and include:
 - (1) The applicant's social security number on the application. If the applicant does not have a social security number, the applicant shall submit a sworn affidavit, under penalty of perjury, with the application stating that he or she does not have a social security number; and
 - (2) Two (2) recent passport-type photographs of the applicant's face measuring two inches by two inches (2" x 2") which clearly exposes the area from the top of the forehead to the bottom of the chin.
- (b) Submit a copy of his or her current license with the application;
- (c) Obtain licensure verification from the original state or territory of licensure that the license is current and in good standing:
 - (1) If the license from the original state or territory is not current, an applicant shall obtain verification from a state or territory that the applicant holds a current license in good standing; and
 - (2) The licensure verification form must be sent directly to the Board, by the verifying Board;
- (d) Meet any other requirements as set forth by the Board; and
- (e) Pay all required fees.
- If the applicant completed an educational program for registered nursing in a foreign country, which program was not approved in accordance with the requirements set forth in § 5402.1, the applicant shall also demonstrate spoken and written competency in English by providing documentation of one of the following:
 - (a) Graduation from a nursing program where English was the only language of instruction throughout the applicant's inclusive dates of attendance;
 - (b) Successful completion of the Test of Spoken English (TSE) examination;
 - (c) Successful completion of the International English Language Testing System (IELTS) examination with a passing score of six and one half (6.5) overall with a spoken band score of seven (7.0); or
 - (d) Provide proof that the applicant has completed a total of twelve (12) months of full-time employment at a health care facility in a state or territory of the United States during the two (2) years immediately preceding the date of application.
- An application that remains incomplete for ninety (90) days or more from the date of submission shall be considered abandoned, and closed by the Board. The applicant

shall thereafter be required to reapply, submit the required documents and completed forms, and pay the required fees.

Nothing is this section shall be construed to prohibit the Board from utilizing other authorized databases to verify an applicant's current licensure standing in other jurisdictions of the U.S. or to review disciplinary records.

5406 LICENSURE BY RE-ENTRY PROGRAM

- A health professional who fails to apply for reinstatement of a District of Columbia registered nursing license within five (5) years after the license expires, and who is not currently licensed to practice registered nursing under the laws of a state or territory of the United States, may apply for licensure to practice registered nursing in the District of Columbia under licensure by re-entry program.
- To apply for licensure by re-entry program, an applicant shall:
 - (a) Submit a completed application to the Board on the required forms and include:
 - (1) The applicant's social security number on the application; and
 - (2) Two (2) recent passport-type photographs of the applicant's face measuring two inches by two inches (2" x 2") which clearly exposes the area from the top of the forehead to the bottom of the chin.
 - (b) Submit proof of completion of a re-entry program approved by the Board;
 - (c) Submit any other required documents; and
 - (d) Pay all required fees.
- An application that remains incomplete for ninety (90) days or more from the date of submission shall be considered abandoned, and closed by the Board. The applicant shall thereafter be required to reapply, comply with the current requirements for licensure, and pay the required fees.

5407 REACTIVATION OF AN INACTIVE LICENSE

- A licensee in an inactive status, pursuant to § 511 of the Act, D.C. Official Code § 3-1205.11, shall apply for reactivation of the license by submitting a completed application on the forms required by the Board and paying the required fees.
- A licensee in an inactive status, pursuant to § 511 of the Act, D.C. Official Code § 3-1205.11, for twelve (12) months or more, who submits an application to reactivate a license shall:

- (a) Submit proof as set forth in § 5409 of having completed twelve (12) hours of continuing education in the licensee's current area of practice for each year, or any portion thereof, the license was in inactive status up to a maximum of twenty-four (24) hours of continuing education. Only continuing education taken in the two (2) years immediately preceding the application date will be accepted; or
- (b) Submit proof of a current license in good standing to practice registered nursing in a state or territory of the United States. Verification of good standing must be sent directly to the Board by the verifying Board.
- A licensee in an inactive status, pursuant to § 511 of the Act, D.C. Official Code § 3-1205.11, for two (2) years or more, who submits an application to reactivate a license shall:
 - (a) Submit proof as set forth in § 5409 of having completed twelve (12) hours of continuing education in the licensee's current area of practice for each year, or any portion thereof, the license was in inactive status up to a maximum of twenty-four (24) hours of continuing education. Only continuing education taken in the two (2) years immediately preceding the application date will be accepted;
 - (b) Submit proof of completing a re-entry program approved by the Board; or
 - (c) Submit proof of a current license in good standing to practice registered nursing in a state or territory of the United States. Verification of good standing must be sent directly to the Board by the verifying Board.

5408 REINSTATEMENT OF AN EXPIRED LICENSE

- 5408.1 An applicant for reinstatement of a license shall:
 - (a) Submit proof as set forth in § 5410 of having completed twenty-four (24) hours of continuing education in the applicant's current area of practice in the two (2) years immediately preceding the application date; and
 - (b) Meet any other requirements that the Board may set forth to determine whether the license should be reinstated
- An applicant for reinstatement of a license shall submit the completed application and documents required by the Board and pay the required fees.
- The Board shall not reinstate the license of an applicant who fails to apply for reinstatement of the license within five (5) years after the license expires. The applicant shall apply, and meet the requirements in existence at the time, for licensure by examination or endorsement.

5409 RENEWAL OF A LICENSE

- A licensee shall renew his or her license by submitting a completed application on the forms required by the Board and paying the required fees prior to the expiration of the license.
- The Board's staff shall mail out applications for renewal at least sixty (60) days prior to the date the license expires.
- A licensee shall have the burden of notifying the Board if a renewal notice is not received.
- A licensee shall notify the Board in writing of a change of home or business address within thirty (30) days after the change.
- A licensee applying for renewal shall submit proof as set forth in § 5410 of completion of twenty-four (24) contact hours of continuing education in the licensee's current area of practice commencing with the renewal period of 2006. Only continuing education hours obtained in the two (2) years immediately preceding the application date will be accepted.
- A licensee applying for renewal of a license who fails to submit proof of having completed the continuing education requirements by the date the license expires may renew the license within sixty (60) days after the expiration by submitting proof pursuant to § 5410 and by paying the required late fees.
- 5409.7 Upon submitting proof and paying the required late fees, the licensee shall be deemed to have possessed a valid license during the period between the expiration of the license and the submission of the required documents and fees.
- If a licensee applying for renewal of a license fails to submit proof of completion of the continuing education requirements, or pay the late fee within sixty (60) days after the expiration of the applicant's license, the license shall be considered to have lapsed on the date of expiration and the health care professional shall thereafter be required to apply for reinstatement of an expired license and meet all requirements and fees for reinstatement.
- The Board may, in its discretion, grant an extension of the sixty (60) day period to renew the license after expiration, if the licensee's failure to submit proof of completion of the continuing education requirements or pay the late fee was for good cause. As used in this section "good cause" includes the following:
 - (a) Serious and protracted illness of the licensee; and
 - (b) The death or serious and protracted illness of a member of the licensee's immediate family.
- The Board may, in its discretion, waive continuing education requirements for a licensee who submits proof of:

- (a) Serving as a speaker at an approved continuing education program. The presentation shall have been completed during the period for which credit is claimed; or
- (b) Being the author or editor of a published periodical, if the periodical has been published or accepted for publication during the period for which credit is claimed.
- If a licensee has previously received credit in connection with a particular presentation, the Board shall not grant credit for a subsequent presentation unless the presentation involved either a different subject or substantial additional research concerning the same subject.

5410 CONTINUING EDUCATION

- The Board, in its discretion, may approve continuing education programs and activities that contribute to the growth of an applicant in professional and competence in the practice of registered nursing and which meet the other requirements of this section.
- Continuing education credit may be granted only for programs or activities approved by the Board.
- 5410.3 The Board shall maintain a list of approved continuing education programs which shall be available to the public during regular business hours and posted on the Department's internet website.
- A licensee shall have the burden of verifying whether a program is approved by the Board pursuant to this section prior to enrolling in a program.
- At the request of a licensee, or the sponsor of a continuing education program, the Board may approve the following types of continuing education programs if the program meets the requirements of this section:
 - (a) An undergraduate course or graduate course given at an accredited college or university;
 - (b) A conference, course, seminar, or workshop;
 - (c) An educational course offered through the internet; or
 - (d) Other programs approved by the Board which meet the requirements of this section.
- To qualify for approval by the Board, a continuing education program shall meet the following requirements:
 - (a) Be current in its subject matter;

- (b) Be developed and taught by qualified individuals; and
- (c) Meet one of the following requirements:
 - (1) Be administered and approved by a registered nurse, nursing organization, or health services organization that is recognized by the Board; or
 - (2) Be administered and approved by a health care facility, institution, organization, college, school, or university that is accredited by the Secretary of the United States Department of Education, the Council on Post Secondary Accreditation, or the American Nurses Credentialing Center (ANCC).
- A licensee shall submit the following information with respect to each program for which continuing education is claimed, on a form required by the Board:
 - (a) The name and address of the sponsor of the program;
 - (b) The name of the program, its location, a description of the subject matter covered, and the name(s) of the instructor(s);
 - (c) The date(s) on which the licensee attended the program;
 - (d) The hours of credit claimed; and
 - (e) Attach a verification form signed and stamped by the program sponsor.
- The Board shall grant continuing education credit for whole hours only, with a minimum of fifty (50) minutes constituting one (1) credit hour.
- For approved undergraduate or graduate courses, each semester hour of credit shall constitute fifteen (15) hours of continuing education credit, and each quarter hour of credit shall constitute ten (10) hours of continuing education credit.

5411 SUPERVISED PRACTICE OF STUDENTS

- A student may practice registered nursing only in accordance with the Act and this chapter.
- A student who is fulfilling educational requirements under § 103(c) of the Act, D.C. Official Code § 3-1201.03(c), may be authorized to engage in the supervised practice of registered nursing without a District of Columbia license.
- Only a registered nurse licensed under the Act, who is an appointed faculty member of the accredited school, college, or university, or a preceptor meeting the qualifications set forth in chapter 56 of this title, shall be authorized to supervise the practice of registered nursing by a student.

- A student who practices pursuant to this section shall only practice at a hospital, long-term care facility, a health facility operated by the District or federal government, a health education center, or other health care facility considered appropriate by the school, college, or university.
- All supervised practice of a student shall take place under general or immediate supervision of a registered nurse.
- A person who has been denied a license, disciplined, convicted of an offense that bears directly upon his or her fitness to be licensed, or who has such an action pending in the District of Columbia or another jurisdiction shall not practice pursuant to this section unless first authorized by the Board in writing.
- A student practicing under this section shall not assume administrative or technical responsibility for the operation of a nursing program, unit, service, or institution.
- A student shall identify himself or herself as such before engaging in the supervised practice of registered nursing. A student shall wear a picture identification badge with lettering clearly visible to the client bearing the name of the student and the position title.
- A student shall not receive compensation of any nature, directly or indirectly, from a client or client's family member.
- 5411.10 The appointed supervising faculty member shall be fully responsible for the practice by a student during the period of supervision and may be subject to disciplinary action for violations of the Act or this chapter by the student.
- The Board may deny an application for licensure by, or take other disciplinary action against, a student who is found to have violated the Act or this chapter. The Board may, in addition to any other disciplinary actions permitted by the Act, revoke, suspend, or restrict the privilege of the student to practice.

5412 SUPERVISED PRACTICE OF GRADUATE NURSES

- A graduate nurse may practice registered nursing only in accordance with the Act and this chapter.
- An individual may be authorized to engage in the supervised practice of registered nursing, as a graduate nurse, without a District of Columbia license if the individual:
 - (a) Graduated from a nursing program pursuant to § 5402.1, or has met the requirements set forth in § 5403;
 - (b) Has never taken the NCLEX-RN exam; and
 - (c) Has an initial application pending for licensure by examination in the District of

Columbia.

- A person who has been denied a license, disciplined, convicted of an offense that bears directly upon his or her fitness to be licensed, or who has such an action pending in the District of Columbia or another jurisdiction shall not practice pursuant to this section unless first authorized by the Board in writing.
- Within five (5) business days after the application for licensure by exam has been received by the Board's staff, the Board's staff shall, at the request of the applicant, issue a supervised practice letter to the applicant to document that his or her application is pending and that he or she is authorized to practice under the Act and this chapter. The practice letter is not renewable and shall expire:
 - (a) Ninety (90) days from the date of issuance; or
 - (b) Upon receipt of written notice from the Board that the application for licensure has been denied, whichever date is the earliest.
- Upon receipt of the practice letter, the graduate nurse shall inform employers of the date of expiration of the letter and shall immediately cease professional nursing practice on that date or upon receipt of written notice from the Board that the application for licensure has been denied, whichever date is the earliest. The graduate nurse thereafter may practice in a non-professional healthcare occupation, until receipt of a license or issuance of a license number.
- Only a registered nurse licensed under the Act, who is a supervisor, shall be authorized to supervise the practice of registered nursing by a graduate nurse.
- All supervised practice of a graduate nurse shall take place under general or immediate supervision.
- A graduate nurse who practices pursuant to this section shall only practice at a hospital, long-term care facility, a health facility operated by the District or federal government, academic institution, or other health care facility considered appropriate and approved by the Board.
- A graduate nurse shall not be eligible to practice registered nursing in any of the following settings:
 - (a) Correctional Facility;
 - (b) Dialysis Center;
 - (c) Home Health Agency;
 - (d) Community Residential Facility;
 - (e) Nursing Staffing Agency;

- (f) Medical Group Practice;
- (g) School, (as a school nurse); and
- (h) Any other setting that does not meet the requirements of § 5412.8.
- A graduate nurse practicing under this section shall not assume administrative or technical responsibility for the operation of a nursing program, unit, service, or institution
- A graduate nurse shall identify himself or herself as such before engaging in the supervised practice of registered nursing. A graduate nurse shall wear a picture identification badge with lettering clearly visible to the client bearing the name of the graduate nurse student and the position title.
- A graduate nurse shall not receive compensation of any nature, directly or indirectly, from a client or client's family member, except for a salary based on hours worked under supervision.
- The supervisor shall be fully responsible for the practice by a graduate nurse during the period of supervision and may be subject to disciplinary action for violations of the Act or this chapter by the graduate nurse.
- The Board may deny an application for licensure by, or take other disciplinary action against, a graduate nurse who is found to have violated the Act or this chapter. The Board may, in addition to any other disciplinary actions permitted by the Act, revoke, suspend, or restrict the privilege of the graduate nurse to practice.

5413 SUPERVISED PRACTICE OF APPLICANTS FOR LICENSURE BY ENDORSEMENT

- An applicant may practice registered nursing only in accordance with the Act and this chapter.
- An applicant for licensure by endorsement may be authorized to engage in the supervised practice of registered nursing in the District of Columbia without a District of Columbia license if the applicant:
 - (a) Is currently licensed as a registered nurse under the laws of a state or territory of the United States;
 - (b) Is a graduate of a program approved in accordance with § 5402.1, or can demonstrate competency in English pursuant to § 5405.3; and
 - (c) Has an initial application pending for licensure by endorsement in the District of Columbia.

- A person who has been denied a license, disciplined, convicted of an offense that bears directly upon his or her fitness to be licensed, or who has such an action pending in the District of Columbia or another jurisdiction shall not practice pursuant to this section unless first authorized by the Board in writing.
- Within five (5) business days after the application for licensure by endorsement has been received by the Board's staff, the Board's staff shall issue a practice letter to the applicant to document that his or her application is pending and that he or she is eligible to practice under the Act and this chapter. The practice letter is not renewable and shall expire:
 - (a) Ninety (90) days from the date of issuance; or
 - (b) Upon receipt of written notice from the Board that the application for licensure has been denied, whichever date is the earliest.
- Upon receipt of the practice letter, the applicant shall inform employers of the date of expiration of the letter and shall immediately cease professional nursing practice in the District on that date or upon receipt of written notice from the Board that the application for licensure has been denied, whichever date is the earliest. The applicant thereafter may practice in a non-professional healthcare occupation, until receipt of a District of Columbia license to practice registered nursing.
- Only a registered nurse licensed under the Act, who is a supervisor, may be authorized to supervise the practice of registered nursing by an applicant.
- All supervised practice of an applicant shall take place under general or immediate supervision.
- An applicant who practices pursuant to this section shall only practice at a hospital, long-term care facility, a health facility operated by the District or federal government, academic institutions; or other health care facility considered appropriate and approved by the Board.
- An applicant shall not be eligible to practice registered nursing in any of the following settings:
 - (a) Correctional Facility;
 - (b) Dialysis Center;
 - (c) Home Health Agency;
 - (d) Community Residential Facility;
 - (e) Nursing Staffing Agency;
 - (f) Medical Group Practice;

- (g) School, (as a school nurse); and
- (h) Any other settings that does not meet the requirements of § 5413.8.
- An applicant practicing under this section shall not assume administrative or technical responsibility for the operation of a nursing program, unit, service, or institution.
- An applicant shall not receive compensation of any nature, directly or indirectly, from a client or client's family member, except for a salary based on hours worked under supervision.
- The supervisor shall be fully responsible for the practice by an applicant during the period of supervision and may be subject to disciplinary action for violations of the Act or this chapter by the applicant.
- The Board may deny an application for licensure by, or take other disciplinary action against, an applicant who is found to have violated the Act or this chapter. The Board may, in addition to any other disciplinary actions permitted by the Act, revoke, suspend, or restrict the privilege of the applicant to practice.

5414 SCOPE OF PRACTICE

- The practice of registered nursing means the performance of acts requiring substantial specialized knowledge, judgment, and skill based upon the principles of the biological, physical, behavioral, and social sciences in the following:
 - (a) The observation, comprehensive assessment, evaluation and recording of physiological and behavioral signs and symptoms of health, disease, and injury, including the performance of examinations and testing and their evaluation for the purpose of identifying the needs of the client and family;
 - (b) The development of a comprehensive nursing plan that establishes nursing diagnoses, sets goals to meet identified health care needs, and prescribes and implements nursing interventions of a therapeutic, preventive, and restorative nature in response to an assessment of the client's requirements;
 - (c) The performance of services, counseling, advocating, and education for the safety, comfort, personal hygiene, and protection of clients, the prevention of disease and injury, and the promotion of health in individuals, families, and communities, which may include psychotherapeutic intervention, referral, and consultation;
 - (d) The administration of medications and treatment as prescribed by a legally authorized healthcare professional licensed in the District of Columbia;
 - (e) The administration of nursing services including:

- (1) Delegating and assigning nursing interventions to implement the plan of care;
- (2) Managing, supervising, and evaluating the practice of nursing;
- (3) Developing organization-wide client care programs, policies, and procedures that identify the processes to be utilized by nursing personnel to assess, identify, evaluate, and meet the needs of the clients or population served;
- (4) Developing and implementing an organizational plan for providing nursing services;
- (5) Implementing an ongoing program to assess, measure, evaluate and improve the quality of nursing care being offered or provided; and
- (6) Providing an environment for the maintenance of safe and effective nursing care.
- (f) Evaluating responses and outcomes to interventions and the effectiveness of the plan of care;
- (g) Promoting a safe and therapeutic environment;
- (h) The education and training of person(s) in the direct and indirect nursing care of the client;
- (i) Communicating and collaborating with other health care team members and professionals in the development of the plan of care, management of the client's health care, and the implementation of the total health care regimen;
- (j) Teaching the theory and practice of nursing;
- (k) Acquiring and applying critical new knowledge and technologies to the practice setting; and
- (1) The pursuit of nursing research to advance and enhance the practice of nursing.
- A registered nurse may provide nursing services, which are beyond the basic nursing preparation for a registered nurse, if the registered nurse has the appropriate education, knowledge, competency, and training to safely perform the services.
- A registered nurse shall wear a pictured identification badge with lettering clearly visible to a client bearing the name of the registered nurse and the title "Registered Nurse" or "R.N.".

5415 DELEGATION OF NURSING INTERVENTIONS

- Nothing in this section shall be applicable to, restrict, or limit the gratuitous provision of care by self, family, or friends.
- Only a registered nurse as set forth in the Act and this chapter shall delegate nursing interventions to be performed by Unlicensed Assistive Personnel on behalf of the delegating registered nurse. Such delegation shall be in a manner that does not conflict with the Act, this chapter, or with other District and federal laws and regulations which affect the practice of nursing in the District of Columbia. Nothing in this chapter shall be construed as permitting or authorizing an unlicensed person to perform duties beyond the scope permitted, or which are prohibited, by any other District or federal laws or regulations.
- A supervisor may delegate to a registered nurse the responsibility of directing and assigning nursing interventions to Unlicensed Assistive Personnel, once the registered nurse has developed the plan of care and identified those services that can be safely performed by the unlicensed personnel.
- The delegating registered nurse shall be responsible for the adequacy of care provided and shall retain accountability for the nursing task.
- 5415.5 The Administrator for Nursing Services, or supervisor, shall be responsible for establishing policies and procedures for nursing practice. The policies and procedures shall include a mechanism for:
 - (a) Identifying those individuals, by position title and job description, to whom nursing interventions may be delegated based on education, training, and competency measurements; and
 - (b) Assisting the delegating registered nurse in verifying the competency of the trained unlicensed personnel prior to assigning nursing interventions.
- 5415.6 If the delegating registered nurse determines that the trained unlicensed personnel cannot safely perform the nursing intervention, the delegating registered nurse shall not delegate the nursing intervention.
- The delegating registered nurse shall assign and delegate in a manner that protects the health, safety, and welfare of the client and others. The nursing tasks delegated shall:
 - (a) Be within the area of responsibility of the nurse delegating the act;
 - (b) Be such that, in the judgment of the nurse, it can be properly and safely performed by the unlicensed personnel without jeopardizing the client welfare; and
 - (c) Be a task that a reasonable and prudent nurse would find is within the scope of sound nursing judgment.

- 5415.8 When delegating a nursing intervention the nurse shall:
 - (a) Assess and evaluate the client's condition, identify the client's specific goals, nursing care needs, and required nursing interventions;
 - (b) Select and identify nursing interventions which do not require unlicensed trained personnel to exercise critical thinking and independent nursing judgment and which do not require either complex or multi-dimensional application of the nursing process; and
 - (c) Select nursing interventions, which frequently recur in the daily care of the client or group of clients, whose results are predictable, whose potential for risk is minimal, and which utilize a standard and unchanging procedure.
- 5415.9 Unlicensed Assistive Personnel shall practice under general or immediate supervision of a registered nurse.
- The delegating registered nurse shall be fully responsible for providing supervision to the Unlicensed Assistive Personnel. The supervision shall include:
 - (a) Instructing the unlicensed personnel in the delegated nursing intervention(s);
 - (b) Monitoring the performance of the delegated nursing intervention(s);
 - (c) Verifying that the delegated nursing intervention(s) has been implemented; and
 - (d) Evaluating the client's response and the outcome of the delegated nursing intervention(s).
- 5415.11 The delegating registered nurse shall determine the required degree of supervision after an evaluation of appropriate factors including:
 - (a) The stability of the client's condition;
 - (b) The willingness and ability of the client to be involved in the management of his or her care;
 - (c) The training, experience, and competency of the Unlicensed Assistive Personnel implementing the nursing intervention; and
 - (d) The nature of the nursing intervention.

- Except as provided in § 5415.13, the delegating nurse responsible for nursing care in the client's residence shall make a supervisory visit to the residence at least every two (2) weeks to:
 - (a) Evaluate the client's health status;
 - (b) Evaluate the performance of the delegated nursing acts;
 - (c) Determine whether goals are being met; and
 - (d) Evaluate the continued competence of the trained unlicensed individual to perform the delegated nursing task.
- If the trained unlicensed person is providing care limited to activities of daily living in the client's residence, then the delegating nurse shall make supervisory visits to the client's home as the nurse determines necessary for safe, effective nursing care of the client
- 5415.14 The following nursing interventions shall not be delegated to trained unlicensed personnel:
 - (a) The initial nursing assessment;
 - (b) The ongoing comprehensive nursing assessment of the client in any setting;
 - (c) Development of the nursing diagnosis;
 - (d) Establishment of the nursing care goal;
 - (e) Evaluation of the client's progress, or lack of progress toward goal achievement;
 - (f) Client counseling and family education, except as it relates to promoting independence in personal care and activities of daily living (ADL's);
 - (g) Coordination and management of care including triage, collaborating, consulting, and referring;
 - (h) Providing advice to a client or family member; or
 - (i) Any nursing task which requires nursing knowledge, judgment, and skill.
- 5415.15 The delegating registered nurse shall retain full responsibility for medication administration as set forth by the Act.
- A delegating registered nurse may delegate the intervention of administering medication to Unlicensed Assistive Personnel in programs for individuals with mental retardation or other developmental disabilities; public schools; and assisted living

residential facilities as authorized under D.C. Official Code § 21-1203; D.C. Official Code § 38-632; and D.C. Official Code § 44-109.05.

- 5415.17 Unless otherwise authorized under this title, a delegating registered nurse shall not delegate to Unlicensed Assistive Personnel any nursing acts or interventions relating to medication administration, including:
 - (a) Calculation of a medication dose;
 - (b) Administration of the initial dose of a medication;
 - (c) Administration of a medication by injection route, except for epipen or ejection system as set forth in 17 DCMR § 6111;
 - (d) Administration of medication by intravenous route;
 - (e) Administration of medication used for intermittent positive pressure breathing or other methods involving a mechanical device or equipment for medication inhalation treatment;
 - (f) Administration of medication by way of tube insertion in a cavity of the body; and
 - (g) Administration of investigational drug treatment and blood or blood products.
- Unlicensed Assistive Personnel shall identify himself or herself as such at all times when participating in client care. The individual shall wear a pictured identification badge with lettering clearly visible to the client, bearing the name of the individual and his or her position title. The position title shall not in anyway imply that the individual is licensed or a nurse.
- The delegating registered nurse shall be responsible at all times for all nursing interventions provided by the Unlicensed Assistive Personnel to whom it was delegated, and is subject to disciplinary action for any violation of the Act or this chapter in connection with the nursing intervention by the trained unlicensed personnel.

5416 STANDARDS OF CONDUCT

- A registered nurse shall adhere to the standards set forth in the "Code of Ethics for Nurses" as published by the American Nurses Association, as they may be amended or republished from time to time.
- A registered nurse shall respect the client's right to privacy by protecting confidential information unless obligated or allowed by law to disclose the information.
- A registered nurse shall not accept or perform professional responsibilities

which the nurse is not competent to perform.

- A registered nurse shall not, after accepting an assignment or responsibility for a client's care, and without giving adequate notice to the supervisor so that arrangements can be made for continuation of nursing care by others:
 - (a) Unilaterally sever the established nurse-client relationship;
 - (b) Leave a client for a length of time, or in a manner, that exposes the client unnecessarily to risk of harm; or
 - (c) Leave a nursing assignment.
- A registered nurse shall know, recognize, and maintain professional boundaries of the nurse-client relationship.
- A registered nurse shall report unsafe nursing practice by a nurse that he or she has reasonable cause to suspect has exposed or is likely to expose a client unnecessarily to risk of harm as a result of failing to provide client care that conforms to the minimum standards of acceptable and prevailing professional practice. The registered nurse shall report such conduct to the appropriate authority within the facility, or to the Board.
- A registered nurse shall provide nursing services, without discrimination, regardless of the age, disability, economic status, gender, national origin, race, religion, or health problems of the client served.

5499 **DEFINITIONS**

As used in this chapter, the following terms have the meanings ascribed:

Act -- Health Occupation Revision Act of 1985 ("Act"), effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code §§ 3-1201.01 et seq.).

Administrator for Nursing Services – the licensed registered nurse responsible for planning, directing and controlling the operation of nursing service within an agency, health care facility, or setting in which nursing care is being offered or provided.

Activities of Daily Living (ADL) – the basic tasks of everyday life, such as getting in and out of bed, bathing, dressing, eating, walking, toileting, transferring to and from one's wheelchair, and taking medications prescribed for self-administration.

Agency – any person, firm, corporation, partnership, or other business entity engaged in the business of referring nursing personnel, as employees or independent contractors, to a health care facility for the purpose of rendering temporary nursing services.

Applicant – person applying for a license to practice registered nursing under this chapter.

Board – the Board of Nursing, established by §204 of the Act, D.C. Official Code § 3-1202.04.

Complex Interventions – those interventions that require nursing judgment to safely alter standard procedures in accordance with the needs of the client; require nursing judgment to determine how to proceed from one step to the next, or require implementation of the nursing process.

Delegation – the transference from the registered nurse to another individual within the scope of his or her practice, the authority to act on behalf of the registered nurse in the performance of a nursing intervention, while the registered nurse retains the accountability and responsibility for the delegated act

Educational Program – a program accredited by a recognized nursing body approved by the Board that leads to a diploma, associate degree, or baccalaureate degree in nursing.

General Supervision -- supervision in which the supervisor is available on the premises or within vocal communication either directly or by a communication device at the time the unlicensed personnel, student, graduate nurse, or other licensed nurse is practicing.

Graduate Nurse -- an individual who has graduated from a nursing program for registered nursing, who has never taken the NCLEX-RN exam, and whose application for a license by examination in the District of Columbia is pending.

Health Professional – a person who holds a license, certificate, or registration issued under the authority of this title or the Act.

Immediate Supervision-- supervision in which the supervisor is with the unlicensed personnel, student, graduate nurse, or other licensed nurse and either discussing or observing the person's practice.

NCLEX-RN-- National Council Licensure Examination for Registered Nurses.

Nursing Intervention - the initiation and completion of a client focused action necessary to accomplish the goal(s) defined in the client-centered plan of care.

Practical Nurse – a person licensed to practice practical nursing under the Act and chapter 55 of this title.

Re-entry program— a formal program of study with both didactic and clinical components, designed to prepare a nurse who has been out of practice to re-enter into nursing practice at the registered nurse level.

Registered Nurse – a person licensed to practice registered nursing under the Act and this chapter.

Remedial Course- an organized and planned program of study which provides a review of basic preparation and current developments in the practice of registered nursing.

Review Course -- a course of study providing review of basic preparation for the NCLEX-RN examination.

Supervisor-- a registered nurse licensed under the Act who is responsible and accountable for assigning, directing, evaluating and managing a unit, service, or program that offers or provides nursing care or who is responsible for the supervision of Unlicensed Assistive Personnel, students, graduate nurses, or other licensed nurses.

Trained Unlicensed Personnel- an individual, other than a licensed nurse, who has received appropriate training or instruction to function in a complementary or assistant role to a licensed nurse in providing direct patient care or in carrying out common nursing tasks. The term includes, but is not limited to, nurses' aides, orderlies, assistant technicians, attendants, home health aides, personal care aides, trained medication employees, geriatric aides, or other health aides.

The definitions in § 4099 of Chapter 40 of this title are in incorporated by reference into and are applicable to this chapter.

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