PROPOSED RULEMAKING

LIQUOR CONTROL BOARD

[40 PA. CODE CH. 5] Responsible Alcohol Management

The Liquor Control Board (Board), under the authority of section 207(i) of the Liquor Code (47 P. S. § 2-207(i)), proposes to add Subchapter I (relating to responsible alcohol management) to read as set forth in Annex A.

Purpose

The additional sections are necessary to supplement legislative changes to the Liquor Code, specifically the addition of section 471.1 (47 P. S. § 4-471.1) by the act of December 20, 2000 (P. L. 992, No. 141) (Act 141), which addresses responsible alcohol management. The proposed rulemaking establishes guidelines for implementing a responsible alcohol management program as required by Act 141.

Summary of Proposed Rulemaking

The proposed rulemaking defines terms, outlines the procedure for certification of providers of alcohol server education, sets forth provider responsibilities, including recordkeeping and penalties for prohibited conduct by a provider or its instructors. The proposed rulemaking explains new employee orientation, acceptable types of signage and certification of licensees by the Board.

Affected Parties

This is a voluntary program for retail licensees including: restaurants, retail dispenser eating places (beer-only restaurants), clubs, catering clubs, public and private golf courses, distributors and importing distributors and their employees. The program would be mandatory for a licensee who is required to attend the Board's responsible alcohol management classes resulting from an adjudication by an administrative law judge.

Paperwork Requirements

The Board will be required to keep records of persons trained in manager/owner and server/seller training for the purpose of certifying licensees as being in compliance with the responsible alcohol management program. The Board will also keep records of providers and instructors certified for the program. Participating licensees will be required to keep records of employee orientation and server/seller training. There is also an application requirement for those licensees desiring to be certified as being in compliance with the responsible alcohol management program.

Fiscal Impact

The Board anticipates an annual interest that would require costs of about \$400,000 from the State Stores Fund. Actual costs will be determined by the extent of voluntary participation by licensees and to a lesser extent when mandatory participation is part of an adjudication in a citation proceeding. Greater participation could increase costs beyond \$400,000 and less participation would reduce costs below \$400,000. The \$500 license fees for providers and \$100 license fees for instructors will defray some of the Board's administrative costs but will have little or no impact on the cost of the program.

Effective Date/Sunset Date

This proposed rulemaking will become effective upon final-form publication in the *Pennsylvania Bulletin*. No sunset date has been assigned.

Public Comment/Contact Person

Written comments, suggestions or objections will be accepted for 30 days after publication of the proposed rulemaking in the *Pennsylvania Bulletin*. Comments should be addressed to Jerry Danyluk, Regulatory Coordinator, Liquor Control Board, Room 513, Northwest Office Building, Harrisburg, PA 17124-0001.

Regulatory Review

Under section 5(a) of the Regulatory Review Act (71 P. S. § 745.5(a)), on October 30, 2002, the Board submitted a copy of this proposed rulemaking to the Independent Regulatory Review Commission (IRRC) and the Chairpersons of the House Committee on Liquor Control and the Senate Committee on Law and Justice. In addition to submitting the proposed rulemaking, the Board has provided IRRC and the Committees with a copy of a detailed Regulatory Analysis Form prepared by the Board in compliance with Executive Order 1996-1, "Regulatory Review and Promulgation." A copy of this material is available to the public upon request.

Under section 5(g) of the Regulatory Review Act, if IRRC has objections to any portion of the proposed rulemaking, it will notify the Board within 10 days of the close of the Committees' review period. The notification shall specify the regulatory review criteria that have not been met by the portion of the proposed rulemaking to which an objection is made. The Regulatory Review Act specifies detailed procedures for review, prior to final publication of the rulemaking, by the Board, the General Assembly and the Governor of objections raised.

 $\begin{array}{c} {\rm JONATHAN~H.~NEWMAN,} \\ {\it Chairperson} \end{array}$

Fiscal Note: 54-57. (1) State Store Fund; (2) Implementing Year 2002-03 is \$200,000 (half year); (3) 1st Succeeding Year 2003-04 is \$400,000; 2nd Succeeding Year 2004-05 is \$400,000; 3rd Succeeding Year 2005-06 is \$400,000; 4th Succeeding Year 2006-07 is \$400,000; 5th Succeeding Year 2007-08 is \$400,000; (7) Executive Authorization; (8) recommends adoption.

Annex A

TITLE 40. LIQUOR

PART I. LIQUOR CONTROL BOARD

CHAPTER 5. DUTIES AND RIGHTS OF LICENSEES

Subchapter I. RESPONSIBLE ALCOHOL MANAGEMENT

GENERAL PROVISIONS

Sec.

5.201. Definitions.

PROVIDERS OF ALCOHOL SERVICE PERSONNEL TRAINING

5.211. Provider certification.5.212. Provider responsibilities.

5.213. Penalties for prohibited conduct.

NEW EMPLOYEE ORIENTATION, SIGNAGE, CERTIFICATION OF COMPLIANCE

5.221. 5.222. New employee orientation.

Signage.

5.223. Certification of compliance.

GENERAL PROVISIONS

§ 5.201. Definitions.

The following words and terms, when used in this subchapter, have the following meanings, unless the context clearly indicates otherwise:

Alcohol service education provider or provider—An individual or business entity certified by the Board who employs instructors to administer responsible alcohol management classes to alcohol service personnel.

Instructor/trainer—An individual employed by an alcohol service education provider who is certified by the Board to instruct alcohol service personnel in responsible alcohol management.

New employee orientation—The training of new employees on issues including, but not limited to, underage drinking and visibly intoxicated patrons, in the manner set forth in § 5.221 (relating to new employee orienta-

Responsible server practices—Methods utilized by alcohol service personnel to recognize and prevent attempted illegal activity on the licensed premises including, but not limited to, violations of sections 493-495 of the Liquor Code (47 P. S. §§ 4-493—4-495) and 18 Pa.C.S. §§ 6307— 6310.3.

PROVIDERS OF ALCOHOL SERVICE PERSONNEL TRAINING

§ 5.211. Provider certification.

- (a) A person or entity desiring to become an alcohol service education provider shall be Board certified. Certification shall be for a 2-year period. The Board may certify a provider if it complies with the following:
- (1) Files an application on forms to be provided by the Board, and submits a \$500 nonrefundable application evaluation fee.
- (2) Submits a curriculum to the Board that minimally includes the following:
- (i) Alcohol as a drug and its effects on the human body and behavior, especially driving ability.
- (ii) The effects of alcohol in combination with illegal drugs as well as in combination with commonly used legal prescription and over-the-counter drugs.
- (iii) Laws dealing with liquor liability, drunk driving, furnishing alcoholic beverages to minors, and visibly intoxicated persons as well as penalties associated with violations of these laws.
- (iv) Standards and operating procedures for recognizing and dealing with a customer who has had enough to drink or a problem customer, such as cessation of service and providing alternative means of transportation to get the customer home safely.
- (v) Techniques for determining the validity of age identification through legally acceptable forms of identifi-
- (vi) Policies regarding advertising, marketing and promotion of safe and responsible drinking patterns.
 - (3) Employs Board certified instructors.

- (b) Providers shall identify all program instructors on provider Staff Certification Forms issued by the Board, together with a \$100 fee for each instructor.
- (c) To qualify for Board certification as an instructor, an applicant shall have a minimum of 2 years experience as a full-time employee in any one or more of these fields: education, law, law enforcement, substance abuse prevention, the hospitality industry or alcohol service training.
- (d) Both provider or instructor certification shall be effective for 2 years from the date of issuance. Reapplication for provider and instructor certification, or both, may be made 30 days prior to expiration of the current certification.
- (e) Termination of employment with the provider will result in termination of instructor certification for that employee.

§ 5.212. Provider responsibilities.

A provider shall:

- (1) Be responsible for monitoring instructors, classes, students and examinations as prescribed by the Board.
- (2) Be responsible for maintaining instructor records regarding attendance and test results.
- (3) Keep, for 2 years, complete enrollment records, a record of all students it certifies as having successfully completed its course and the name and license number of the licensee who employs each student at the time of certification. A list consisting of the students each provider certifies and the licensee who employs them shall be submitted to the Board within 5 days of certification.
- (4) Keep and make available for review, all records referenced in this section in the same manner prescribed for the maintenance of business records by Board licensees under section 493(12) of the Liquor Code (47 P.S. § 4-493(12)).
- (5) Be responsible for reporting changes in ownership, management, the employment status of instructors or curriculum not later than 30 days after the change.

§ 5.213. Penalties for prohibited conduct.

- (a) The Board may decertify a provider and its instructors or an individual instructor for violating any of the provisions of this subchapter or engaging in the following conduct:
- (1) Discrimination or harassment based on age, race, sex, disability, national origin or religion.
 - (2) An act in violation of the Liquor Code or this title.
- (3) An act resulting in a misdemeanor or felony convic-
- (4) An act resulting in admittance into an Accelerated Rehabilitative Disposition Program if the underlying activity is related to alcoholic beverages, narcotics or controlled substances.
- (5) Being under the influence of alcoholic beverages, narcotics or controlled substances during course presentations, exams or breaks.
- (6) Knowingly permitting students to be under the influence of alcoholic beverages, narcotics or controlled substances during course presentations, exams or breaks.
- (7) Fraudulent activity relating to the conduct or requirements of the training.
- (b) Appeals from decertification shall be as set forth in 2 Pa.C.S. § 702 (relating to appeals). The Board will not

consider application for recertification until 1 year has passed from the date of decertification.

NEW EMPLOYEE ORIENTATION, SIGNAGE, CERTIFICATION OF COMPLIANCE

§ 5.221. New employee orientation.

- (a) Owners or managers who wish to or are ordered to be in compliance with section 471.1 of the Liquor Code (47 P. S. § 4-471.1) shall provide new employee orientation on or before the first day of the employee's employment as a member of the licensee's alcohol service personnel staff. It is the sole responsibility of the licensee to ensure that either the designated manager or owner conducts the training. Licensees shall maintain new employee orientation records consisting of the name of the employee, date of hire, date of orientation and the name of the individual who trained the employee. Records shall be maintained in the same manner as other business records under section 493(12) of the Liquor Code (47 P. S. § 4-493(12)).
- (b) The Board will provide licensees with a checklist and appropriate learning materials.

§ 5.222. Signage.

- (a) Signage will be provided by the Board. A licensee may use other signage provided that it is equivalent in size, number and content to the Board's signage. Signage shall minimally include the following information:
- (1) Acceptable forms of identification as described in section 495(a) of the Liquor Code (47 P.S. § 4-495(a)).
- (2) Refusal of service to minors and visibly intoxicated patrons under the Liquor Code.
- (b) Signage shall be prominently displayed in a conspicuous place that can be observed readily by patrons. The signage shall be continuously posted commencing with the date a licensee seeks to be certified as in compliance with the responsible alcohol service program. A licensee shall be responsible for the posting and maintenance of the signage at all times.

§ 5.223. Certification of compliance.

- (a) Licensees may be certified by the Board in compliance with section 471.1 of the Liquor Code (47 P. S. § 4-471.1). Licensees shall file an application for compliance certification to be provided by the Board. If the requirements of section 471.1 of the Liquor Code are met, a licensee will be issued a certificate of compliance. Issuance of the certificate shall raise a presumption of compliance from the application mailing date, unless rebutted, in any subsequent legal proceeding in which compliance with section 471.1 of the Liquor Code is at issue. Compliance certification shall be valid for 2 years. Licensees may apply for recertification of compliance at least 60 days prior to expiration of current certification.
- (b) If a licensee is found to be noncompliant with section 471.1 of the Liquor Code or this subchapter the Board may refuse or revoke certification. If certification is revoked, the Board will not consider application for recertification until 1 year has passed from the date of revocation. Appeals shall be as set forth in 2 Pa.C.S. § 702 (relating to appeals).

(c) The Office of Administrative Law Judge will take administrative notice of the Board's records with regard to questions of certification.

[Pa.B. Doc. No. 02-2057. Filed for public inspection November 15, 2002, 9:00 a.m.]

STATE BOARD OF NURSING

[49 PA. CODE CH. 21] Continuing Education

The State Board of Nursing (Board) proposes to add §§ 21.332—21.337 to read as set forth in Annex A. Sections 21.332—21.337 detail the requirements of continuing education for certified registered nurse practitioners (CRNPs) who are approved to prescribe and dispense drugs in accordance with § 21.283(3) (relating to prescribing and dispensing drugs)

Effective Date

The proposed rulemaking will be effective upon finalform publication in the *Pennsylvania Bulletin*.

Statutory Authority

The proposed rulemaking is authorized under section 2.1(k) of the Professional Nursing Law (63 P. S. § 212.1(k)).

Background and Need for the Proposed Rulemaking

On November 17, 2000, the Board and the State Board of Medicine jointly promulgated § 21.283 granting prescriptive authority to CRNPs. Section 21.283(3) provides that "[a] CRNP who has prescriptive authority shall complete at least 16 hours of State Board of Nursing approved continuing education in pharmacology in the 2 years prior to the biennial renewal date of the CRNP certification. The CRNP shall show proof that the CRNP completed the continuing education when submitting a biennial renewal."

Because the Board was designated to approve the continuing education, joint promulgation of the proposed rulemaking is not required. The Board proposes the rulemaking detailing the connection between certification of CRNPs and their completion of continuing education and explaining the processes for submission of proof of completion and approval of programs, courses and providers

Description of Proposed Rulemaking

Section 21.332 (relating to requirement of continuing education) sets forth the regulatory authority for the continuing education requirement and would provide that CRNPs who are on inactive status need not complete the continuing education requirements except for the biennial period immediately preceding a request for reactivation to active status. In addition, if a CRNP's prescriptive authority has been in inactive status for 3 years or longer, prescriptive authority would only be reactivated by completing the requirements of § 21.283(2) or by demonstrating that the person has been practicing with prescriptive authority in another jurisdiction for at least 1 of those 3 years. The other jurisdiction must have requirements for initial approval and continuing education at least equivalent to those in this Commonwealth and the continuing education must have been completed within the last year. The proposed rulemaking also provides that CRNPs who fail to meet the continuing education requirements may be subject to discipline. Finally, the proposed rulemaking provides that the Board may waive the requirements in cases of certified illness or undue hardship.

Section 21.333 (relating to continuing education subject matter) specifies the subject matter that will meet the requirement in the jointly promulgated regulation that CRNPs complete 16 hours in pharmacology. Section 21.333 provides that pharmacology courses must provide CRNPs with the knowledge and skills to understand the pharmacokinetics and pharmacodynamics of broad drug categories and to analyze the relationship between pharmacologic agents and physiologic/pathologic responses.

Section 21.334(a) (relating to sources of continuing education) contains a list of providers the Board has determined qualify for approval for all continuing education courses they offer. These providers will only be preapproved, however, if they agree to comply with § 21.334(c), which requires the provider to provide CRNPs who complete a course with a certificate of completion that complies with § 21.337(a) (relating to CRNP responsibilities) and agree to maintain records of course attendance for a minimum of 5 years. The section provides for credit for courses offered by other providers if the course is prepproved by the Board. In addition, CRNPs may apply on an individual basis, prior to attendance at a course, for approval for that course. Finally, the proposed rulemaking provides essential details regarding the continuing education requirement, such as granting up to 4 hours credit for serving in a teaching capacity, defining an hour as 50 clock minutes and providing that the Board will determine the number of hours approved for each course that is individually approved by the Board.

Section 21.335 (relating to requirements for courses) sets forth the standards that all courses must meet. Every course must have an established mechanism to measure the quality of the course, have established criteria for selecting and evaluating faculty, have established criteria for the evaluation of each participant who completes the course, provide adequate facilities and instructional materials and be offered by instructors who have suitable qualifications. The qualifications of instructors are further addressed in § 21.336(c) (relating to continuing education course approval).

Section 21.336 sets forth the procedure for approval of continuing education courses offered by providers who are not on the list of preapproved providers in § 21.334.

Section 21.337 lists the responsibilities of CRNPs in maintaining documentation of their completion of required continuing education, places the onus on CRNPs to document their completion of continuing education and provides that falsification of the documentation or prescribing or dispensing drugs without completing the requirements of § 21.332 may result in the withdrawal of prescriptive authority approval, the suspension or revocation of certification as a CRNP, the suspension or revocation of any nursing license and the imposition of a civil penalty.

The Board received four comments when it sent the proposed rulemaking to nursing organizations for predraft comment. The Pennsylvania Coalition of Nurse Practitioners (Coalition) commented that it found the draft proposed rulemaking "to be equitable and consistent with the current rules for prescribing CRNPs . . . [and]

consistent with those of other states." The Coalition noted that the Board might want to address its turnaround time for approving courses under § 21.334. The Board will not set a specific turnaround time in the proposed rulemaking. However, the Board notes that it will appoint a committee to meet monthly and review requests for course approval. The committee will then make a recommendation to the Board on whether to approve the course, reject the course or ask the provider for additional information. As the requests for approval will be reviewed on a monthly basis, the Board anticipates the approval process will proceed in a timely fashion.

The Albert Einstein Medical Center commented that the draft proposed rulemaking "[i]n general is very clear and complete." The Albert Einstein Medical Center suggested that the list of preapproved providers be expanded to include CRNP programs accredited by state boards of nursing in surrounding states. The list of preapproved providers already includes National associations and National credentialing organizations, which are likely to sponsor continuing education programs offered in multiple states. Therefore, the Board does not believe it is necessary to preapprove courses approved by other state boards.

The Pennsylvania State Nurses Association (Association) commented that, overall, it supported the draft proposed rulemaking. The Association made four specific comments. First, the Association noted that the American Nurses Credentialing Center (ANCC) did not "offer" courses because it merely credentialed courses, and suggested the language of § 21.334(a) reflect that some of the preapproved providers were actually providers and others were credentialing organizations. The Board adopted this suggestion. Second, the Association commented that the procedure for CRNPs to obtain approval for up to 4 hours for service as a teacher, speaker and the like, seemed "cumbersome for individuals and the State Board of Nursing" and suggested that the CRNPs simply submit documentation of the 4 hours at the same time they submitted their total of 16 hours at biennial renewal. The Board declines to adopt this suggestion. The proposed rulemaking requires that CRNPs who wish to receive up to 4 credits for this service apply to the Board for approval and that the Board may determine the number of credits it will grant for the service. To permit CRNPs to simply assume that their service would receive credit, and credit for 4 hours, would do a disservice to the CRNP who might find, after the biennial period had expired, that the Board would not accept 4 credits for the CRNP's teaching service. Third, the Association noted that the Board had failed to define an "hour." The Board addressed this issue in § 21.334 by defining an hour as 50 minutes. This is the time period used by the ANCC and most universities. Fourth, the Association asked whether CRNPs who had been on inactive status for 3 years or longer could reactivate their certification to prescribe by taking 45 hours of continuing education. The Board clarified the language in § 21.332(a)(2) to reference the 45-hour course required for initial certification in § 21.283(2), which requires the 45 hours to be taken in an approved CRNP education program or, if outside the program, in a program or programs approved by the Board and the State Board of Medicine. It is unlikely that a continuing education course would be approved for 45 hours; however, if a course met the requirements of the initial credentialing course, the Board and the State Board of Medicine could approve the course.

Finally, the Board received comments from an individual CRNP who raised four concerns. First, the CRNP

inquired why an individual who wished to reactivate a license had to complete 16 hours of continuing education within 1 year prior to the request to reactivate when CRNPs with active licenses have 2 years to complete the 16 hour biennial requirement. The Board purposefully made this distinction to reflect the fact that CRNPs in active practice are continuously learning and updating their knowledge while CRNPs on inactive or retired status do not have the educational benefit of being in active practice. Second, the CRNP noted a typographical error that has been corrected. Third, the CRNP commented that there should be additions made to the list of preapproved continuing education providers and credentialing organizations. The Board finds that its list already includes the major providers and organizations and believes other providers have been given a feasible method for obtaining Board approval. Fourth, the CRNP was concerned that the Board would not have time to approve individual courses submitted by a CRNP. The Board will appoint a committee to meet monthly and review requests for continuing education credit. The Board is confident that CRNPs can submit their requests in advance of the program being offered and the Board will have time to act on requests that are timely submit-

Compliance with Executive Order 1996-1, "Regulatory Review and Promulgation"

The Board sent this proposed rulemaking to numerous nursing associations and hospital systems as required under the directives of Executive Order 1996-1. These organizations were: American Association of Neuroscience Nurses, Emergency Nurses Association, GPC—Oncology Nursing Society, The Hospital and Healthsystem Association of Pennsylvania, Intravenous Nurse Society, Licensed Practical Nurses Association of Pennsylvania, Pennsylvania Association of Home Health Agencies, Pennsylvania Association of Private School Administrators, Pennsylvania Association of Non-Profit Homes for the Aging, Pennsylvania Association of Nurse Anesthetists, Pennsylvania Association of Practical Nursing Program Administrators, Pennsylvania Coalition of Nurse Practitioners, Pennsylvania College of Associate Degree Nursing, Pennsylvania Council of Operating Room Nurses, Pennsylvania Department of Health—Bureau of CH Systems, Pennsylvania Health Care Association, Pennsylvania Higher Education Nursing Schools Association, Pennsylvania League for Nursing, Inc., Pennsylvania Organization of Nurse Leaders, Pennsylvania Society of Gastroenterology Nurses and Associates, Pennsylvania State Nurses Association, School Nurse Section, Southwestern Pennsylvania Organization for Nurse Leaders, Pennsylvania Medical Society, Nurses of Pennsylvania, Pennsylvania Association of School Nurses and Practitioners, Pennsylvania Nurses Association and Professional Nursing Resources, Inc. In addition, the Board considered the impact the proposed rulemaking would have on the regulated community and on public safety and welfare. The Board finds that the proposed rulemaking addresses a compelling public interest as described in this Preamble and otherwise complies with Executive Order 1996-1.

Fiscal Impact and Paperwork Requirements

The proposed rulemaking will have no adverse fiscal impact on the Commonwealth or its political subdivisions. The proposed rulemaking will impose no additional paperwork requirements upon the Commonwealth, political subdivisions or the private sector.

Sunset Date

The Board continuously monitors the cost effectiveness of its regulations. Therefore, no sunset date has been assigned.

Regulatory Review

Under section 5(a) of the Regulatory Review Act (71 P. S. § 745.5(a)), on October 31, 2002, the Board submitted a copy of this proposed rulemaking to the Independent Regulatory Review Commission (IRRC) and the Chairpersons of the Senate Consumer Protection and Professional Licensure Committee and the House Professional Licensure Committee. In addition to submitting the proposed rulemaking, the Board has provided IRRC and the Committees with a copy of a detailed Regulatory Analysis Form prepared by the Board in compliance with Executive Order 1996-1. A copy of this material is available to the public upon request.

Under section 5(g) of the Regulatory Review Act, if IRRC has objections to any portion of the proposed rulemaking, it will notify the Board within 10 days of the close of the Committees' review period. The notification shall specify the regulatory review criteria that have not been met by the portion of the proposed rulemaking to which an objection is made. The Regulatory Review Act specifies detailed procedures for review, prior to final publication of the rulemaking, by the Board, the General Assembly and the Governor of objections raised.

Public Comment

Interested persons are invited to submit written comments, suggestions or objections regarding this proposed rulemaking to Ann Steffanic, Board Administrator, State Board of Nursing, P. O. Box 2649, Harrisburg, PA 17105-2649, www.dos.state.pa.us, within 30 days following publication of this proposed rulemaking in the *Pennsylvania Bulletin*.

K. STEPHEN ANDERSON, CRNA, Chairperson

Fiscal Note: 16A-5117. No fiscal impact; (8) recommends adoption.

Annex A

TITLE 49. PROFESSIONAL AND VOCATIONAL STANDARDS

PART I. DEPARTMENT OF STATE

Subpart A. PROFESSIONAL AND OCCUPATIONAL AFFAIRS

CHAPTER 21. STATE BOARD OF NURSING Subchapter C. CERTIFIED REGISTERED NURSE PRACTITIONERS

CONTINUING EDUCATION

§ 21.332. Requirement of continuing education.

- (a) A certified registered nurse practitioner approved to prescribe and dispense drugs under §§ 21.283—21.287 and §§ 18.53—18.57 shall comply with this section and §§ 21.333—21.337.
- (1) An individual who places his license and certification on inactive status, or who notifies the Board that all collaborative agreements have expired, is not required to meet the continuing education requirements as outlined in this section and §§ 21.333—21.337, except to the extent that, upon application for reactivation of the license and certification and authorization to prescribe and dispense, the individual shall be required to show proof of continuing education for the biennial period

immediately preceding the request for reactivation of the certification and authority to prescribe and dispense drugs.

- (2) An individual whose prescriptive authority approval has been in an inactive status for 3 years or longer may reactivate the prescriptive authority approval by meeting one of the following conditions:
- (i) Complete the requirement in § 21.283(2) (relating to prescribing and dispensing drugs) by taking at least 45 hours of course work in advanced pharmacology.
- (ii) Provide evidence to the Board that the applicant has practiced as a certified registered nurse practitioner with prescriptive authority in another jurisdiction which prescriptive authority is equivalent to that in this Commonwealth for at least 1 of the last 3 years, and, as a condition for continued practice in that jurisdiction, has completed continuing education that is substantially equivalent to the requirements of § 21.283(3), within 1 year prior to the request for reactivation of prescriptive authority.
- (b) Continuing education requirements shall be completed each biennial cycle.
- (1) An applicant for biennial renewal or reactivation of prescriptive authority approval is required to complete, during the 2 years preceding renewal or reactivation, a minimum of 16 hours of continuing education in pharmacology. Completion of a course described in § 21.283(2) shall satisfy the continuing education requirement for the biennial renewal period in which it is completed.
- (2) A person failing to meet the continuing education requirements for a biennial renewal period will have his prescriptive authority approval withdrawn and will be prohibited from prescribing and dispensing drugs until the educational criteria are met, prescriptive authority approval is renewed and any fees and penalties are properly paid.
- (3) The Board may waive the requirements of continuing education in cases of illness or undue hardship. It is the duty of each licensee who seeks a waiver to notify the Board in writing and request the waiver prior to the end of the renewal period. The Board will grant, deny, or grant in part the request for waiver. An individual who requests a waiver may not prescribe or dispense drugs after the expiration of his current prescriptive authority and until the Board grants the waiver request.

§ 21.333. Continuing education subject matter.

Pharmacology continuing education courses shall provide the knowledge and skills to understand the pharmacokinetics and pharmacodynamics of broad categories of drugs and to analyze the relationship between pharmacologic agents and physiologic/pathologic responses.

§ 21.334. Sources of continuing education.

- (a) As a condition of approval, providers and credentialing organizations are required to provide CRNPs who complete continuing education courses with a certificate of completion which contains the information in § 21.337(a) (relating to CRNP responsibilities). Providers and credentialing organizations shall maintain records of course attendance for at least 5 years.
- (b) The Board finds that the following providers of continuing education and credentialing organizations have currently met the standards for course approval for pharmacology continuing education.

- (1) Accordingly, provided that these providers agree to abide by subsection (a), the courses offered or approved by the following providers or credentialing organizations are approved:
 - (i) Board-approved CRNP programs.
- (ii) The American Nurses Credentialing Center's Commission on Accreditation (ANCC).
- (iii) The American Academy of Nurse Practitioners (AANP).
- (iv) The National Association of Pediatric Nurse Practitioners (NAPNP).
 - (v) The American Medical Association (AMA).
- (2) The approval given to the providers and credentialing organizations in paragraph (1) is subject to reevaluation. A rescission of provider or credentialing organization approval will be made only in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure) or by amendment of this section.
- (c) CRNPs may obtain credit for courses offered by providers not indicated in subsection (b)(1) if the provider receives approval of the course under $\S 21.336$ (relating to continuing education course approval) prior to its implementation.
- (d) CRNPs may obtain credit for continuing education hours on an individual basis if the CRNP, prior to attendance at the course, obtains Board approval by submitting a request for course approval and supporting documentation listed in § 21.336(a).
- (e) CRNPs may obtain credit for correspondence courses, taped study courses and other independent study courses if the course is Board approved.
- (f) Up to 4 hours will be credited for service as a teacher, preceptor, lecturer or speaker and for publication in a refereed journal or other scholarly publication relating to pharmacology. Application shall be made prior to the service or within 90 days of the publication to assure that the Board will approve the service or publication and to allow the Board to determine the number of contact hours that will be granted.
- (g) An hour for purposes of nurse practitioner continuing education is 50 minutes.

§ 21.335. Requirements for courses.

Each course shall have:

- (1) An established mechanism to measure its quality, established criteria for selecting and evaluating faculty and established criteria for the evaluation of each participant who completes the course.
- (2) Adequate facilities with appropriate instructional materials to carry out continuing education programs.
- (3) Instructors who have suitable qualifications as detailed in $\S 21.336(c)$ (relating to continuing education course approval).

§ 21.336. Continuing education course approval.

- (a) Providers referenced in § 21.334(c) (relating to sources of continuing education) or CRNPs applying for individual approval in § 21.334(d), when seeking Board approval of a continuing education course shall pay the required fee (see § 21.253 (relating to fees)) and complete and submit an application for course approval, which shall include the following information:
 - (1) Full name and address of the provider.
 - (2) Title of the program.

- (3) Dates and location of the program.
- (4) Faculty names, titles, affiliations, degrees and areas of expertise.
- (5) Schedule of program—title of subject, lecturer and time allocated.
 - (6) Total number of hours requested.
- (7) Method of certifying and assuring attendance, and draft of certificate of attendance to be provided to course participants.
 - (8) Course objectives.
 - (9) Target audience.
 - (10) Core subjects.
 - (11) Program coordinator.
 - (12) Instruction and evaluation methods.
 - (13) Other information requested by the Board.
- (b) Upon approval of a course, the Board will assign a course number and determine the number of hours awarded. The provider shall place the course number on the certificate of attendance and shall provide CRNPs who successfully complete a course with a certificate of attendance.
- (c) Courses will be approved only in the instructor's demonstrated areas of expertise. Expertise may be demonstrated by the instructor's certification in the specialty area to be presented.
- (d) A separate application shall be submitted whenever a change is made to any information submitted under subsection (a), except for information related to a change in date or location, or both, of the program submitted under subsection (a)(3).

§ 21.337. CRNP responsibilities.

(a) A CRNP with prescriptive authority is required to

maintain documentation of completion of continuing education, including:

- (1) CRNP name.
- (2) Dates attended.
- (3) Continuing education hours.
- (4) Title of course.
- (5) Course provider.
- (6) Location of course.
- (7) Course number.
- (b) Primary responsibility for documenting completion of the continuing education requirements rests with the CRNP. Documentation shall be submitted with the biennial renewal application by those CRNPs with prescriptive authority seeking to renew their prescriptive authority. The evidence to support fulfillment of those requirements shall be maintained for 5 years after the completion of educational courses. The certificate issued by the course provider under § 21.334(b), (c) or (e) (relating to sources of continuing education) shall be acceptable documentation. Acceptable documentation of hours obtained through § 21.334(d) or (f) shall be the Board approval letter sent to the applicant.
- (c) Falsification of information required under this section or failure to complete the requirements of § 21.332 (relating to requirement of continuing education) by those who continue to prescribe, may result in the withdrawal of prescriptive authority, the suspension or revocation of certification as a nurse practitioner, the suspension or revocation of any nursing license held by the licensee, and the imposition of a civil penalty.

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