

Nursing Board Policy

POLICY NUMBER:	10-03
Title:	Continued Competency Requirements for Practical and Professional Nurses
Date Issued:	August 23, 2006
Date(s) Reviewed:	January 2007 (revised); October 2007 (revised); July 2008 (revised); January 2009 (revised); October 2009
References:	§§12-38-108(b);and. 12-38-118.5; C.R.S. §§24-34-102(8)(d)(II)(A),(C) and (D),C.R.S.
Purpose:	To provide a procedure for applicants for reinstatement, reactivation or endorsement whose license has been expired for more than two years to demonstrate competency prior to reinstatement or issuance of an active license.

POLICY: An individual whose professional or practical nursing license has been inactive or expired for more than two years or who has not practiced nursing for the two year period preceding application for reinstatement or endorsement, must demonstrate competency. The Program Director or designee may accept proof of competency in one of the following ways, or may refer any case to an Inquiry Panel:

1. Demonstration of the active practice of nursing in another state, federal facility, or U.S. territory during the two years immediately preceding the filing of the reinstatement, reactivation or endorsement application. If the applicant has practiced nursing only for a portion of the two year period immediately preceding the filing of the application, the Board may determine on a case by case basis, in its discretion, whether the applicant has adequately demonstrated continued competency to practice professional or practical nursing; or

2. Successful completion of remedial or refresher courses under a restricted license as defined in A, B and C below. "Successfully complete" means achieving a grade of "C" or better or the equivalent in each course.

A. The refresher courses must have medical/surgical focus, must clearly differentiate knowledge and skill level for RNs and LPNs, and have the following minimum content:

1. **Physical Assessment**, including (a) Review of all systems, (b) Adult focus, and (c) History-taking;
2. **Medication Administration**, including (a) Procedures and (b) Dosage calculations;
3. **Nursing Process**, including (a) Assessment, (b) Diagnosis, (c) Planning, (d) Implementation, and (e) Evaluation;
4. **Nursing Skills Update**, including (a) Sterile technique review, (b) Universal precautions, and (3) Cardiopulmonary resuscitation;
5. **Pharmacology**, including (a) Major categories only, (b) Drug interactions, and (c) Patient responses;

6. **IV Therapy**, including (a) Fluids and electrolytes, (b) Acid base, (c) Equipment (peripheral, central lines, pumps, PCA, IVACs), (d) Medication, (e) Blood administration, and (f) Complications;

7. **Nursing Knowledge Update**, including (a) Anatomy, physiology, pathophysiology, (b) Pharmacology, (c) Medical/surgical intervention, (d) Nursing care, (e) Pain management, (f) Oncology, (g) Immunology (infections, including AIDS), and (h) Major systems: (i) Cardiac, (ii) Respiratory, (iii) Neurological, (iv) Endocrine (diabetes), (v) Gastro-intestinal, (vi) and Orthopedic;

8. **Legal, Ethical and Professional Issues**, including (a) Documentation, (b) Patient confidentiality, (c) Patient rights, (d) Nurses rights, (e) Liability and malpractice; and (f) Scope of practice (Colorado Nurse Practice Act).

B. The number of successfully completed contact hours required of each individual to demonstrate competency prior to reinstatement, reactivation or licensure by endorsement will be determined by the number of years that his or her license has been inactive or expired, as follows:

2-5 years expired/inactive	Contact Hours:	80 Theory (including lab) and 80 Clinical
5-10 years expired/inactive	Contact Hours:	120 Theory (including lab) and 120 Clinical
10 or more yrs. Expired/inactive	Contact Hours:	120 Theory (including lab) and 120 Clinical; and possible additional hours as determined by the Board on a case-by-case basis.

C. If an applicant for reinstatement, reactivation or endorsement enrolls in a remedial or refresher course that is nontraditional, i.e., a course that does not include a faculty-supervised teaching/learning component in clinical settings taught concurrently with theoretical content, the required clinical hours must be procured in a manner consistent with the requirements of section 3.4 C of the Chapter I, Board of Nursing Rules.

3. Upon a petition by the licensee, and with due consideration of the need to protect the public, the Board may accept an alternative method for establishing competency. It is anticipated that such alternative methods for establishing competency would be rarely used. The decision to accept an alternative method for establishing competency shall be at the sole discretion of the Board.