RELATING TO HEALTH; AMENDING SECTIONS OF THE NURSING PRACTICE ACT TO CLARIFY THE SCOPE OF PRACTICE FOR DIFFERENT CATEGORIES OF LICENSED NURSES REGARDING THE ADMINISTRATION OF GENERAL ANESTHESIA, ANESTHETICS AND SEDATIVES; MAKING CHANGES TO THE LICENSING PROCESS; EXPANDING THE POWERS AND DUTIES OF THE BOARD OF NURSING; MODIFYING THE ADMINISTRATION OF CERTAIN DISCIPLINARY PROCESSES; REQUIRING THE CONFIDENTIALITY OF COMMUNICATIONS RELATING TO POTENTIAL DISCIPLINARY ACTIONS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 61-3-3 NMSA 1978 (being Laws 1991, Chapter 190, Section 2, as amended) is amended to read:

"61-3-3. DEFINITIONS.--As used in the Nursing Practice Act:

- A. "advanced practice" means the practice of professional registered nursing by a registered nurse who has been prepared through additional formal education as provided in Sections 61-3-23.2 through 61-3-23.4 NMSA 1978 to function beyond the scope of practice of professional registered nursing, including certified nurse practitioners, certified registered nurse anesthetists and certified clinical nurse specialists;
- B. "advanced practice registered nurse" means a certified nurse practitioner, certified registered nurse

anesthetist or certified clinical nurse specialist licensed pursuant to the Nursing Practice Act;

- C. "anesthetics" means a substance that causes the entire or partial loss of the feeling of pain, temperature or other sensations, with or without the loss of consciousness, including topical, local or intravenous anesthetics but excluding general anesthesia;
- D. "artificial intelligence" means a broad category of existing, emerging and future digital technologies that involves using algorithms to drive the behavior of agents such as software programs, machines and robotics;
 - E. "board" means the board of nursing;
- F. "certified hemodialysis technician" means a person who is certified by the board to assist in the direct care of a patient undergoing hemodialysis, under the supervision and at the direction of a registered nurse or a licensed practical nurse, according to the rules adopted by the board;
- G. "certified medication aide" means a person who is certified by the board to administer medications under the supervision and at the direction of a registered nurse or a licensed practical nurse, according to the rules adopted by the board;
 - H. "certified nurse practitioner" means a

registered nurse who is licensed by the board for advanced practice as a certified nurse practitioner and whose name and pertinent information are entered on the list of certified nurse practitioners maintained by the board;

- I. "certified registered nurse anesthetist" means a registered nurse who is licensed by the board for advanced practice as a certified registered nurse anesthetist and whose name and pertinent information are entered on the list of certified registered nurse anesthetists maintained by the board;
- J. "certified clinical nurse specialist" means a registered nurse who is licensed by the board for advanced practice as a certified clinical nurse specialist and whose name and pertinent information are entered on the list of certified clinical nurse specialists maintained by the board;
- K. "collaboration" means the cooperative working relationship with another health care provider in the provision of patient care, and such collaborative practice includes the discussion of patient diagnosis and cooperation in the management and delivery of health care;
- L. "general anesthesia" means a drug-induced loss of consciousness where:
- (1) patients are not arousable, even by painful stimulation;
 - (2) the ability to maintain an adequate

1	airway and respiratory function is affected; and
2	(3) the cardiovascular function may be
3	impaired;
4	M. "licensed practical nurse" means a nurse who
5	practices licensed practical nursing and whose name and
6	pertinent information are entered in the register of licensed
7	practical nurses maintained by the board or a nurse who
8	practices licensed practical nursing pursuant to a multistate
9	licensure privilege as provided in the Nurse Licensure
10	Compact;
11	N. "licensed practical nursing" means the practice
12	of a directed scope of nursing requiring basic knowledge of
13	the biological, physical, social and behavioral sciences and
14	nursing procedures, which practice is at the direction of a
15	registered nurse, physician or dentist licensed to practice
16	in this state. This practice includes but is not limited to:
17	(l) contributing to the assessment of the
18	health status of individuals, families and communities;
19	(2) participating in the development and
20	modification of the plan of care;
21	(3) implementing appropriate aspects of the
22	plan of care commensurate with education and verified
23	competence;
24	(4) collaborating with other health care
25	professionals in the management of health care; and

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measures;

- (5) participating in the evaluation of responses to interventions;
- O. "Nurse Licensure Compact" means the agreement entered into between New Mexico and other jurisdictions permitting the practice of professional registered nursing or licensed practical nursing pursuant to a multistate licensure privilege;
- P. "nursing diagnosis" means a clinical judgment about individual, family or community responses to actual or potential health problems or life processes, which judgment provides a basis for the selection of nursing interventions to achieve outcomes for which the person making the judgment is accountable;
- Q. "practice of nursing" means assisting individuals, families or communities in maintaining or attaining optimal health, assessing and implementing a plan of care to accomplish defined goals and evaluating responses to care and treatment. This practice is based on specialized knowledge, judgment and nursing skills acquired through educational preparation in nursing and in the biological, physical, social and behavioral sciences and includes but is not limited to:
 - (1) initiating and maintaining comfort
 - (2) promoting and supporting optimal human

1	functions and responses;
2	(3) establishing an environment conducive to
3	well-being or to the support of a dignified death;
4	(4) collaborating on the health care
5	regimen;
6	(5) administering medications and performing
7	treatments prescribed by a person authorized in this state or
8	in any other state in the United States to prescribe them;
9	(6) recording and reporting nursing
10	observations, assessments, interventions and responses to
11	health care;
12	(7) providing counseling and health
13	teaching;
14	(8) delegating and supervising nursing
15	interventions that may be performed safely by others and are
16	not in conflict with the Nursing Practice Act; and
17	(9) maintaining accountability for safe and
18	effective nursing care;
19	R. "professional registered nursing" means the
20	practice of the full scope of nursing requiring substantial
21	knowledge of the biological, physical, social and behavioral
22	sciences and of nursing theory and may include advanced
23	practice pursuant to the Nursing Practice Act. This practice
24	includes but is not limited to:
25	(1) assessing the health status of

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1	individuals, families and communities;
2	(2) establishing a nursing diagnosis;
3	(3) establishing goals to meet identified
4	health care needs;
5	(4) developing a plan of care;
6	(5) determining nursing intervention to
7	implement the plan of care;
8	(6) implementing the plan of care
9	commensurate with education and verified competence;
10	(7) evaluating responses to interventions;
11	(8) teaching based on the theory and
12	practice of nursing;
13	(9) managing and supervising the practice of
14	nursing;
15	(10) collaborating with other health care
16	professionals in the management of health care; and
17	(11) conducting nursing research;
18	S. "registered nurse" means a nurse who practices
19	professional registered nursing and whose name and pertinent
20	information are entered in the register of licensed
21	registered nurses maintained by the board or a nurse who
22	practices professional registered nursing pursuant to a
23	multistate licensure privilege as provided in the Nurse
24	Licensure Compact;
25	T. "scope of practice" means the parameters within HB 178/a

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- U. "sedation" means the administration of medication to produce various levels of calmness, relaxation or sleep, including:
- (1) minimum sedation, during which a patient responds normally to verbal commands and may have impaired cognitive function or coordination, and respiratory and cardiovascular functions remain stable;
- (2) moderate sedation, during which a patient responds purposefully to verbal commands, either alone or accompanied by light tactile stimulation; respiratory functions remain stable; and cardiovascular functions are usually maintained;
- (3) deep sedation, during which a patient cannot be easily aroused but responds purposefully, following repeated or painful stimulation; respiratory functions may be impaired, requiring assistance in maintaining the airway, including intubation and mechanical ventilation; and cardiovascular functions are usually maintained; or
- (4) palliative sedation, an end-of-life intervention used to provide a patient with relief of symptoms that cannot be controlled in a tolerable time frame despite the use of therapies and that are unlikely to be controlled by further therapies without excessive,

1	intolerable, acute or chronic side effects or complications,
2	but not to intentionally hasten death; and
3	V. "training program" means an educational program
4	approved by the board."
5	SECTION 2. Section 61-3-6 NMSA 1978 (being Laws 1973,
6	Chapter 149, Section 2, as amended) is amended to read:
7	"61-3-6. ADMINISTRATION OF ANESTHETICS, SEDATIVES AND
8	GENERAL ANESTHESIA
9	A. A currently licensed certified registered nurse
10	anesthetist may administer general anesthesia to any person.
11	B. A registered nurse currently licensed pursuant
12	to the Nursing Practice Act may, upon the successful
13	completion of required training programs, administer
14	anesthetics, as ordered by a licensed physician or
15	independent provider or per employing organization protocol,
16	up to and including moderate sedation to any person."
17	SECTION 3. Section 61-3-9 NMSA 1978 (being Laws 1968,
18	Chapter 44, Section 6, as amended) is amended to read:
19	"61-3-9. BOARD MEETINGSQUORUMOFFICERS
20	A. The board shall annually elect a chair, vice
21	chair and secretary from its entire membership.
22	B. The board shall meet at least once every three
23	months. Special meetings may be called by the chair and
24	shall be called upon the written request of three or more
25	members of the board. Notification of special meetings shall HB 178/a Page 9

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- C. A majority of the board, including at least one officer, constitutes a quorum."
- SECTION 4. Section 61-3-10 NMSA 1978 (being Laws 1968, Chapter 44, Section 7, as amended) is amended to read:
 - "61-3-10. POWERS--DUTIES.--The board:
- A. shall promulgate rules in accordance with the State Rules Act as necessary to enable it to carry into effect the provisions of the Nursing Practice Act and to maintain high standards of practice;
- B. shall prescribe standards and approve curricula for educational programs preparing persons for licensure under the Nursing Practice Act;
- C. shall provide for surveys of educational programs preparing persons for licensure under the Nursing Practice Act;
- D. shall grant, deny or withdraw approval from educational programs for failure to meet prescribed standards, if a majority of the board concurs in the decision;

- E. shall provide for the examination, licensing and renewal of licenses of applicants;
- F. shall conduct hearings upon charges relating to discipline of a licensee or nurse not licensed to practice in New Mexico who is permitted to practice professional registered nursing or licensed practical nursing in New Mexico pursuant to a multistate licensure privilege as provided in the Nurse Licensure Compact;
- G. shall conduct hearings upon charges related to an applicant or discipline of a licensee or the denial, suspension or revocation of a license in accordance with the procedures of the Uniform Licensing Act;
- H. shall cause the prosecution of persons violating the Nursing Practice Act and have the power to incur such expense as is necessary for the prosecution;
 - I. shall keep a record of all proceedings;
 - J. shall make an annual report to the governor;
- K. shall appoint and employ a qualified registered nurse, who shall not be a member of the board, to serve as executive officer to the board, and the board shall define the duties and responsibilities of the executive officer; except that the power to grant, deny or withdraw approval for schools of nursing or to revoke, suspend or withhold a license authorized by the Nursing Practice Act shall not be delegated by the board;

Practice Act. Such employees shall be paid a salary commensurate with their duties;

M. shall, for the purpose of protecting the health

may be necessary to carry out the provisions of the Nursing

shall provide for such qualified assistants as

M. shall, for the purpose of protecting the health and well-being of residents of New Mexico and promoting current nursing knowledge and practice, promulgate rules establishing continuing education requirements as a condition of license renewal and shall study methods of monitoring continuing competence;

N. may appoint advisory committees consisting of at least one member who is a board member and at least two members who are expert in the pertinent field of health care to assist it in the performance of its duties. Committee members may be reimbursed as provided in the Per Diem and Mileage Act;

- O. may promulgate rules designed to maintain an inactive status listing for registered nurses and licensed practical nurses, including designating an inactive reserve category for registered nurses and licensed practical nurses for activation during an emergency for limited functions at no cost to the nurse;
- P. may promulgate rules to regulate the advanced practice of professional registered nursing and expanded practice of licensed practical nursing;

Q. shall license qualified certified nurse practitioners, certified registered nurse anesthetists and certified clinical nurse specialists;

- R. shall register nurses not licensed to practice in New Mexico who are permitted to practice professional registered nursing or licensed practical nursing in New Mexico pursuant to a multistate licensure privilege as provided in the Nurse Licensure Compact;
- S. shall promulgate rules establishing standards for authorizing prescriptive authority to certified nurse practitioners, certified clinical nurse specialists and certified registered nurse anesthetists;
- T. shall determine by rule the states and territories of the United States or the District of Columbia from which it will not accept an applicant for expedited licensure and shall determine any foreign countries from which it will accept an applicant for expedited licensure. The board shall post the lists of unapproved and approved licensing jurisdictions on the board's website. The list of disapproved licensing jurisdictions shall include the specific reasons for disapproval. The lists shall be reviewed annually to determine if amendments to the rule are warranted;
- U. shall promulgate a rule creating a retired registered nurse license category without a licensing fee for $$\,^{\circ}$HB 178/a$$ Page 13

practice professional registered nursing without an

examination to an applicant who has been duly licensed in

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another licensing jurisdiction and holds a valid,
unrestricted license and is in good standing with the
licensing board in that licensing jurisdiction. The board
shall expedite the issuance of a license in accordance with
Section 61-1-31.1 NMSA 1978 within thirty days. If the board
issues an expedited license to a person whose prior licensing
jurisdiction did not require examination, the board may
require that person to pass an examination before applying
for license renewal.

- C. An applicant licensed under the laws of a territory or foreign country shall demonstrate proficiency in English."
- SECTION 6. Section 61-3-16 NMSA 1978 (being Laws 1968, Chapter 44, Section 13, as amended) is amended to read:
- "61-3-16. FEES FOR LICENSURE AS A REGISTERED NURSE.-Except as provided in Section 61-1-34 NMSA 1978, an applicant
 for licensure as a registered nurse shall pay the following
 nonrefundable fees:
- A. for licensure without examination, a fee not to exceed two hundred dollars (\$200);
- B. for licensure by examination when the examination is the first for the applicant in this state, a fee not to exceed one hundred fifty dollars (\$150);
- C. for licensure by examination when the examination is other than the first examination, a fee not to $$\rm HB\ 178/a\ Page\ 15\ IR\ Page\ 15\$

exceed sixty dollars (\$60.00);

- D. for initial licensure as a certified nurse practitioner, certified registered nurse anesthetist or certified clinical nurse specialist, a fee not to exceed two hundred dollars (\$200). This fee shall be in addition to the fee paid for registered nurse licensure; and
- E. the board may waive the fee for an initial license for a registered nurse who has graduated from a New Mexico public school of nursing."
- SECTION 7. Section 61-3-19 NMSA 1978 (being Laws 1968, Chapter 44, Section 16, as amended) is amended to read:
- "61-3-19. LICENSURE OF LICENSED PRACTICAL NURSES--BY EXAMINATION--BY EXPEDITED LICENSURE.--
- A. Applicants for licensure by examination shall be required to pass the national licensing examination for licensed practical nurses. An applicant who passes the examination and submits a completed application may be issued a license by the board to practice as a licensed practical nurse.
- B. The board shall issue an expedited license as a licensed practical nurse without an examination to an applicant who has been duly licensed in another licensing jurisdiction and holds a valid, unrestricted license and is in good standing with the licensing board in that licensing jurisdiction. The board shall expedite the issuance of a

1	license in accordance with Section 61-1-31.1 NMSA 1978 within	
2	thirty days. If the board issues an expedited license to a	
3	person whose prior licensing jurisdiction did not require	
4	examination, the board may require that person to pass an	
5	examination before applying for license renewal.	
6	C. An applicant licensed under the laws of a	
7	territory or foreign country shall demonstrate proficiency in	
8	English.	
9	D. The board may waive the fee for an initial	
10	license for an applicant who has graduated from a New Mexico	
11	public school of nursing."	
12	SECTION 8. Section 61-3-23.2 NMSA 1978 (being Laws	
13	1991, Chapter 190, Section 14, as amended) is amended to	
14	read:	
15	"61-3-23.2. CERTIFIED NURSE PRACTITIONER	
16	QUALIFICATIONSPRACTICEEXAMINATIONENDORSEMENTEXPEDITED	
17	LICENSURE	
18	A. The board may license for advanced practice as	
19	a certified nurse practitioner an applicant who furnishes	
20	evidence satisfactory to the board that the applicant:	
21	(l) is a registered nurse;	
22	(2) has successfully completed a program for	
23	the education and preparation of nurse practitioners;	
24	provided that, if the applicant is initially licensed by the	
25	board or a board in another jurisdiction after January 1,	HB 178/a Page 17

distribute to their patients dangerous drugs and controlled

substances included in Schedules II through V of the Controlled Substances Act that have been prepared, packaged or fabricated by a registered pharmacist or doses of drugs that have been prepackaged by a pharmaceutical manufacturer in accordance with the Pharmacy Act and the New Mexico Drug, Device and Cosmetic Act.

- E. Certified nurse practitioners licensed by the board on and after December 2, 1985 shall successfully complete a national certifying examination and shall maintain national professional certification in their specialty area. Certified nurse practitioners licensed by a board prior to December 2, 1985 are not required to sit for a national certification examination or be certified by a national organization.
- an applicant without an examination if the person has been duly licensed as a certified nurse practitioner in another licensing jurisdiction and is in good standing with the licensing board in that licensing jurisdiction. The board shall expedite the issuance of the license in accordance with Section 61-1-31.1 NMSA 1978 within thirty days. If the board issues an expedited license to a person whose prior licensing jurisdiction did not require examination, the board may require that person to pass an examination before applying for license renewal. An applicant licensed under the laws of

1	a territory or foreign country shall demonstrate proficiency	
2	in English."	
3	SECTION 9. Section 61-3-23.4 NMSA 1978 (being Laws	
4	1991, Chapter 190, Section 16, as amended) is amended to	
5	read:	
6	"61-3-23.4. CERTIFIED CLINICAL NURSE SPECIALIST	
7	QUALIFICATIONSENDORSEMENTEXPEDITED LICENSURE	
8	A. The board may license for advanced practice as	
9	a certified clinical nurse specialist an applicant who	
10	furnishes evidence satisfactory to the board that the	
11	applicant:	
12	(l) is a registered nurse;	
13	(2) has a master's degree or doctoral degree	
14	in a defined clinical nursing specialty;	
15	(3) has successfully completed a national	
16	certifying examination in the applicant's area of specialty;	
17	and	
18	(4) is certified by a national nursing	
19	organization.	
20	B. Certified clinical nurse specialists may:	
21	(1) perform an advanced practice that is	
22	beyond the scope of practice of professional registered	
23	nursing;	
24	(2) make independent decisions in a	
25	specialized area of nursing practice using expert knowledge HB 1	.78/a e 20

regarding the health care needs of the individual, family and community, collaborating as necessary with other members of the health care team when the health care need is beyond the scope of practice of the certified clinical nurse specialist; and

- (3) carry out therapeutic regimens in the area of specialty practice, including the prescription and distribution of dangerous drugs.
- C. A certified clinical nurse specialist who has fulfilled the requirements for prescriptive authority in the area of specialty practice is authorized to prescribe, administer and distribute therapeutic measures, including dangerous drugs and controlled substances included in Schedules II through V of the Controlled Substances Act within the scope of specialty practice, including controlled substances pursuant to the Controlled Substances Act that have been prepared, packaged or fabricated by a registered pharmacist or doses of drugs that have been prepackaged by a pharmaceutical manufacturer in accordance with the Pharmacy Act and the New Mexico Drug, Device and Cosmetic Act.
- D. Certified clinical nurse specialists who have fulfilled the requirements for prescriptive authority in the area of specialty practice may prescribe in accordance with rules promulgated by the board.
 - E. Certified clinical nurse specialists licensed

by the board shall maintain certification in their specialty area.

F. The board shall issue an expedited license to an applicant without an examination if the person has been duly licensed as a certified clinical nurse specialist in another licensing jurisdiction and is in good standing with the licensing board in that licensing jurisdiction. The board shall expedite the issuance of the license in accordance with Section 61-1-31.1 NMSA 1978 within thirty days. If the board issues an expedited license to a person whose prior licensing jurisdiction did not require examination, the board may require that person to pass an examination before applying for license renewal. An applicant licensed under the laws of a territory or foreign country shall demonstrate proficiency in English."

SECTION 10. Section 61-3-24 NMSA 1978 (being Laws 1968, Chapter 44, Section 20, as amended) is amended to read:

"61-3-24. RENEWAL OF LICENSES.--

A. Any person licensed pursuant to the provisions of the Nursing Practice Act who intends to continue practice shall renew the license every two years by the end of the applicant's renewal month and shall show proof of continuing education as required by the board, except when on active military duty during a military action.

B. Upon receipt of the application and, except as HB 178/a Page 22

- C. Upon receipt of the application and any required fee, the board shall verify the licensee's eligibility for continued licensure and issue to the applicant a renewal license for two years.
- D. A person who allows a license to lapse shall be reinstated by the board on payment of any required fee for the current two years plus a reinstatement fee not to exceed two hundred dollars (\$200); provided that all other requirements are met."
- SECTION 11. Section 61-3-28 NMSA 1978 (being Laws 1968, Chapter 44, Section 24, as amended) is amended to read:
- "61-3-28. DISCIPLINARY PROCEEDINGS--JUDICIAL REVIEW-APPLICATION OF UNIFORM LICENSING ACT--LIMITATION.--
- A. In accordance with the procedures contained in the Uniform Licensing Act, the board may deny, revoke or suspend any license held or applied for under the Nursing Practice Act, reprimand or place a licensee on probation or deny, limit or revoke the multistate licensure privilege of a nurse desiring to practice or practicing professional

1	registered nursing or licensed practical nursing as provided
2	in the Nurse Licensure Compact upon grounds that the
3	licensee, applicant or nurse:
4	(l) is guilty of fraud or deceit in
5	procuring or attempting to procure a license or certificate
6	of registration;
7	(2) is convicted of a felony;
8	(3) is unfit or incompetent;
9	(4) is addicted to the use of habit-forming
10	substances;
11	(5) is mentally incompetent;
12	(6) is guilty of unprofessional conduct as
13	defined by the rules adopted by the board pursuant to the
14	Nursing Practice Act;
15	(7) has willfully or repeatedly violated any
16	provisions of the Nursing Practice Act, including any rule
17	adopted by the board pursuant to that act;
18	(8) was licensed to practice nursing in any
19	jurisdiction, territory or possession of the United States or
20	another country and was the subject of disciplinary action as
21	a licensee for acts similar to acts described in this
22	subsection. A certified copy of the record of the
23	jurisdiction, territory or possession of the United States or
24	another country taking the disciplinary action is conclusive

evidence of the action; or

(9) uses conversion therapy on a minor.

B. Disciplinary proceedings may be instituted by any person, shall be by complaint and shall conform with the provisions of the Uniform Licensing Act. Any party to the hearing may obtain a copy of the hearing record upon payment of costs for the copy.

C. The board shall not initiate a disciplinary action more than two years after the date that it receives a complaint.

D. The time limitation contained in Subsection C of this section shall not be tolled by any civil or criminal litigation in which the licensee or applicant is a party, arising substantially from the same facts, conduct, transactions or occurrences that would be the basis for the board's disciplinary action.

E. The board may recover the costs associated with the investigation and disposition of a disciplinary proceeding from the nurse who is the subject of the proceeding if the nurse is practicing professional registered nursing or licensed practical nursing pursuant to a multistate licensure privilege as provided in the Nurse Licensure Compact.

F. As used in this section:

(1) "conversion therapy" means any practice or treatment that seeks to change a person's sexual

1	orientation or gender identity, including any effort to
2	change behaviors or gender expressions or to eliminate or
3	reduce sexual or romantic attractions or feelings toward
4	persons of the same sex. "Conversion therapy" does not mean:
5	(a) counseling or mental health
6	services that provide acceptance, support and understanding
7	of a person without seeking to change gender identity or
8	sexual orientation; or
9	(b) mental health services that
10	facilitate a person's coping, social support, sexual
11	orientation or gender identity exploration and development,
12	including an intervention to prevent or address unlawful
13	conduct or unsafe sexual practices, without seeking to change
14	gender identity or sexual orientation;
15	(2) "gender identity" means a person's self-
16	perception, based on the person's appearance, behavior or
17	physical characteristics, that the person exhibits more
18	masculinity or femininity whether or not it matches the
19	person's gender or sex assigned at birth;
20	(3) "minor" means a person under eighteen
21	years of age; and
22	(4) "sexual orientation" means a person's
23	physical, romantic or emotional attraction to persons of the

same or different gender or the absence of any such

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attraction."

SECTION 12. Section 61-3-29.1 NMSA 1978 (being Laws 1987, Chapter 285, Section 1, as amended) is amended to read:

"61-3-29.1. ALTERNATIVE TO DISCIPLINE PROGRAM

CREATED--ADVISORY COMMITTEE--RENEWAL FEE--REQUIREMENTS-
IMMUNITY FROM CIVIL ACTIONS.--

A. The board shall establish an alternative to discipline program to rehabilitate nurses whose competencies may be impaired because of the use of habit-forming substances so that nurses can be treated and returned to or continue the practice of nursing in a manner that will benefit the public. The intent of the alternative to discipline program is to develop a voluntary alternative to traditional disciplinary actions and an alternative to lengthy and costly investigations and administrative proceedings against such nurses, at the same time providing adequate safeguards for the public.

B. The board shall appoint one or more evaluation committees, hereinafter called "regional advisory committees", each of which shall be composed of members with expertise in chemical dependency. At least one member shall be a registered nurse. No current member of the board shall be appointed to a regional advisory committee. The executive officer of the board or the executive officer's designee shall be the liaison between each regional advisory committee and the board.

2	under the direction of the board and in accordance with rules	
3	of the board. The rules shall include directions to a	
4	regional advisory committee to:	
5	(1) establish criteria for continuance in	
6	the program;	
7	(2) develop a written alternative to	
8	discipline program contract to be approved by the board that	
9	sets forth the requirements that shall be met by the nurse	
10	and the conditions under which the alternative to discipline	
11	program may be successfully completed or terminated;	
12	(3) recommend to the board in favor of or	
13	against each nurse's discharge from the alternative to	
14	discipline program;	
15	(4) evaluate each nurse's progress in	
16	recovery and compliance with the nurse's alternative to	
17	discipline program contract;	
18	(5) report violations to the board;	
19	(6) submit an annual report to the board;	
20	and	
21	(7) coordinate educational programs and	
22	research related to nurses addicted to the use of habit-	
23	forming substances.	
24	D. The board may increase the renewal fee for each	
25	nurse in the state not to exceed twenty dollars (\$20.00) for	HB 178/a Page 28

C. Each regional advisory committee shall function

- discipline program shall be maintained in the board office and shall be confidential except as required to be disclosed pursuant to the Nurse Licensure Compact, when used to make a report to the board concerning a nurse who is not cooperating and complying with the alternative to discipline program contract or, with written consent of a nurse, when used for research purposes as long as the nurse is not specifically identified. However, the files shall be subject to discovery or subpoena. The confidential provisions of this subsection are of no effect if the nurse admitted to the alternative to discipline program leaves the state prior to the completion of the program.
- F. A person making a report to the board or to a regional advisory committee regarding a nurse suspected of practicing nursing while addicted to the use of habit-forming substances or making a report of a nurse's progress or lack of progress in rehabilitation shall be immune from civil action for defamation or other cause of action resulting from such reports if the reports are made in good faith and with some reasonable basis in fact.
- G. A person admitted to the alternative to discipline program for chemically dependent nurses who fails

1	to comply with the provisions of this section or with the
2	rules adopted by the board pursuant to this section or with
3	the written alternative to discipline program contract or with
4	any amendments to the written alternative to discipline
5	program contract may be subject to disciplinary action in
6	accordance with Section 61-3-28 NMSA 1978."
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