

ARTICLE 20:48

NURSES

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CHAPTER 20:48:01

DEFINITIONS

Section

20:48:01:01 Definitions.

20:48:01:01. Definitions. Terms defined in SDCL chapter 36-9 have the same meaning when used in this article. In addition, terms used in this article mean:

- (1) "Adolescent," a person at least 12 years of age but not yet 18;
- (2) ~~"Applicant," a person applying to the board for any purpose relating to that person's licensure or certification by the board;~~
- (3) ~~"Client," a consumer of nursing care;~~
- (4) ~~(3)~~ "Clinical enrichment program," any program designed to provide supervised clinical experience based on the nursing process and offered by an employing institution or agency to nursing students outside a formal educational program;
- (5) ~~(4)~~ "Complex nursing situation," a situation in which the client's clinical and behavioral state is not predictable and rapid change in that state is reasonably anticipated;
- (6) ~~(5)~~ "Controlling institution," an educational institution or general hospital under whose auspices a school is organized and operated;
- (7) ~~"Cooperating agency," an institution or agency other than a controlling institution which provides learning resources to a school;~~
- (8) ~~(6)~~ "Delegation," transferring to a trained individual the authority to perform a specific nursing task in a specific situation;
- (9) ~~(7)~~ "Direct supervision," supervision given by a registered nurse or licensed physician who is physically present in the immediate area where the client is being provided nursing service;
- (10) ~~(8)~~ "Equivalent" or "equivalency," the completion, in a school that is not approved by the board or in a school of another kind, of a program that is substantially equal to the preparation received in ~~an approved school of practical nursing~~ a board-approved program;
- (11) ~~(9)~~ "Licensee," a person who holds a license issued by the board or privilege to practice as either a registered or licensed practical nurse, certified registered nurse anesthetist, or clinical nurse specialist;

~~(12)-(10)~~ "Minimal supervision," supervision given by a registered nurse, licensed physician, pharmacist, or dentist who is physically on the premises where the client is being cared for or readily available by ~~telephone~~ electronic communication;

(11) "Nursing assistant", a person trained to assist the licensed nurse and function in a supportive role, regardless of title, to whom a nursing task may be delegated;

(12) "Registrant," a person who is registered by the board as an unlicensed nursing assistant under chapter 20:48:16;

(13) "School," a school that conducts a course of study for the preparation of registered nurses, licensed practical nurses, certified registered nurse anesthetists, clinical nurse specialists, certified nurse midwives, or certified nurse practitioners;

(14) "Stable nursing situation," a situation in which the client's clinical and behavioral state is known and predictable and no rapid change in that state is reasonably anticipated;

~~(15) "Unlicensed assistive personnel," persons not licensed as a nurse under SDCL chapter 36-9 who are trained to assist a licensed nurse in the provision of nursing care to a client as delegated by the nurse and authorized by chapter 20:48:04.01;~~

~~(16) "Registrant," any person who meets the definition of unlicensed assistive personnel and who is registered by the board.~~

Source: SL 1975, ch 16, § 1; 3 SDR 35, effective November 11, 1976; 4 SDR 26, effective November 1, 1977; 6 SDR 88, effective March 3, 1980; 12 SDR 109, effective January 9, 1986; 12 SDR 151, 12 SDR 155, effective July 1, 1986; 13 SDR 175, effective May 28, 1987; 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 41 SDR 12, effective July 31, 2014; 44 SDR 81, effective November 6, 2017; 45 SDR 9, effective July 30, 2018.

General Authority: SDCL 36-9-21, 36-9A-41.

Law Implemented: SDCL 36-9-21, 36-9A-21.1.

CHAPTER 20:48:04.01

DELEGATION OF NURSING TASKS

Section

- 20:48:04.01:01 General criteria for delegation.
- 20:48:04.01:02 Supervision.
- 20:48:04.01:03 Repealed.
- 20:48:04.01:04 Repealed.
- 20:48:04.01:05 Repealed.
- 20:48:04.01:06 Repealed.
- 20:48:04.01:07 Nursing tasks that may not be delegated.
- 20:48:04.01:08 Repealed.
- 20:48:04.01:09 ~~Registration required~~ Requirements for delegated medication administration to a nursing assistant.
- 20:48:04.01:09.01 Delegation of medication administration tasks to a nursing assistant.
- 20:48:04.01:10. ~~Administration of medications~~ Delegation of additional medication administration tasks to a medical assistant.
- 20:48:04.01:11 Medication administration tasks that ~~may not be routinely delegated~~ and require a written protocol.
- 20:48:04.01:12 Medication administration tasks that may not be delegated.
- 20:48:04.01:13 Approval of training program required for delegated medication administration.
- 20:48:04.01:14 ~~Standards~~ Requirements for approval of medication administration training programs.
- 20:48:04.01:14.01 Standards for medication administration training programs.
- 20:48:04.01:15 Medication administration curriculum.
- 20:48:04.01:16. Written protocol required for the delegation of insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant.
- 20:48:04.01:17. Qualifications of the registered nurse for delegation of insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant.
- 20:48:04.01:18 Delegation of specific medication administration.
- 20:48:04.01:19. Training required for the delegation of specific medication administration.

20:48:04.01:01. General criteria for delegation. ~~The~~ A licensed registered nurse is responsible for the nature and quality of nursing care that a client receives under the nurse's direction. ~~To achieve full utilization of the services of a registered nurse or a licensed practical nurse, the~~ A licensed nurse may delegate selected nursing tasks to ~~unlicensed assistive personnel~~ a nursing assistant. ~~Unlicensed assistive personnel~~ A nursing assistant may ~~complement~~ not substitute for the licensed nurse in the performance of nursing functions ~~but may not substitute for the licensed nurse~~. ~~Unlicensed assistive personnel~~ A nursing assistant may not redelegate a delegated ~~act~~ task.

~~— A licensed nurse is accountable to practice in accordance with the scope of practice as defined in SDCL chapter 36-9. The delegating~~ A licensed nurse is ~~accountable for assessing~~ shall assess a situation and ~~making the final decision to delegate~~ determine whether delegating nursing tasks to a nursing assistant is appropriate. The delegation of nursing tasks to ~~unlicensed assistive personnel~~ a nursing assistant must comply with the following criteria:

(1) The nursing task is one that a reasonable and prudent licensed nurse would find within the scope of sound nursing judgment to delegate;

(2) The nursing task is one that, in the opinion of the delegating ~~licensed~~ nurse, can be properly and safely performed by ~~unlicensed assistive personnel~~ a nursing assistant without jeopardizing the client's welfare;

(3) The nursing task does not require ~~unlicensed assistive personnel~~ a nursing assistant to exercise nursing judgment;

(4) The licensed nurse evaluates the client's nursing care needs before delegating the nursing task;

(5) The licensed nurse verifies that the ~~unlicensed person~~ nursing assistant is competent to perform the nursing task; and

(6) The licensed nurse supervises the performance of the delegated nursing task in accordance with the requirements of § 20:48:04.01:02.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:02. Supervision. The licensed nurse shall ~~provide supervision of~~ supervise all nursing tasks delegated to ~~unlicensed assistive personnel~~ a nursing assistant in accordance with the following conditions:

- (1) The licensed nurse determines the degree of supervision required after considering ~~the following~~:
 - (a) The stability of the client's condition;
 - (b) The competency of the ~~unlicensed person~~ nursing assistant to whom the nursing task is delegated;
 - (c) The nature of the nursing task being delegated; and
 - (d) The proximity and availability of the licensed nurse to the ~~unlicensed person~~ nursing assistant when the nursing task ~~will be~~ is performed;
- (2) The delegating ~~licensed~~ nurse or another licensed nurse is readily available either in person or by ~~telecommunication~~ electronic communication; and
- (3) If the ~~unlicensed person~~ nursing assistant is providing care in the client's home, the time interval between supervisory visits and whether the visit is conducted in person or via ~~telecommunication~~ electronic communication is determined by the licensed nurse in accordance with § 20:48:04.01:01. The visit ~~shall~~ must occur no less than once every 60 days ~~to assure client safety~~.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:07. Nursing tasks that may not be delegated. ~~The following are nursing tasks that a~~ A licensed nurse may not delegate to ~~unlicensed assistive personnel~~ a nursing assistant:

- (1) Assessments ~~which that~~ require professional nursing judgment, intervention, referral, or follow-up;
- (2) Formulation of the plan ~~or of~~ nursing care and evaluation of the client's response to the care rendered;
- (3) ~~Specific tasks~~ Tasks involved in the implementation of the plan of care ~~which that~~ require nursing judgment or intervention, ~~such as sterile~~ including:

- (a) Sterile procedures involving a wound or anatomical site which that could potentially become infected; nasogastric, except urinary catheterization;
- (b) Nasogastric tube feeding; nasogastric
- (c) Nasogastric, jejunostomy, and gastrostomy tube insertion or removal; tracheostomy and
- (d) Tracheostomy care and suctioning and suprapubic catheter insertion and removal, with the exception of urinary foley catheterization;

(4) Administration of medications, except as permitted by §§ ~~20:48:04.01:10 and 20:48:04.01:09~~ to 20:48:04.01:11, inclusive, and § 20:48:04.01:18;

- (5) ~~Receiving telephone~~ Acceptance of medical orders; and
- (6) Health counseling and health teaching.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:09 Registration required Requirements for delegated medication administration to a nursing assistant. A licensed nurse may delegate the administration of medications authorized under §§ ~~20:48:04.01:10 20:48:04.01:09.01 and 20:48:04.01:11~~ only to unlicensed assistive personnel, inclusive, to a nursing assistant who have:

- (1) Has a minimum of a high school education or the equivalent and who are registered with the Board. Registry status expires two years from the date of initial registration
- (2) Completed a board-approved medication administration training program in accordance with § 20:48:04.01:13 or completed a program that the board determines is equivalent; and
- (3) If administering medications in a skilled nursing facility, assisted living center, or a hospital, licensed under SDCL chapter 34-12, are registered with the board in accordance with chapter 20:48:16.

Source: 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:09.01 Delegation of medication administration tasks to a nursing assistant. A licensed nurse may delegate the following medication administration tasks to a nursing assistant if the

delegation complies with the general criteria for delegation and supervision set forth in §§ 20:48:04.01:01 and 20:48:04.01:02, respectively:

(1) Administration of scheduled medications by oral, sublingual, eye, ear, nasal, rectal, topical, transdermal, vaginal, or inhalation route;

(2) Measurement of a prescribed amount of liquid medication or crushing a tablet for administration if a licensed nurse, physician, or pharmacist has calculated the dose; and

(3) Administration of schedule II controlled substances listed in SDCL 34-20B-16 and 34-20B-17 that are prescribed and labeled in a container for a specific client.

If the nursing assistant is administering medications in a hospital setting, a registered nurse must provide direct supervision as defined in § 20:48:01:01.

Source:

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:10. ~~Administration of medications~~ Delegation of additional medication administration tasks to a medical assistant. ~~The~~ In addition to the tasks listed in § 20:48:04.01:09.01, a licensed nurse may delegate the following medication administration tasks to ~~unlicensed assistive personnel that have successfully completed the curriculum identified in § 20:48:04.01:15~~ a medical assistant, who holds current certification with a national certification body approved by the board, in a stable nursing situation as defined in § 20:48:01:01:

(1) Administration of scheduled medications by ~~oral, rectal, topical, vaginal, or inhalation~~ intradermal, subcutaneous, or intramuscular route; and

(2) Measuring ~~Calculation of the dose of~~ a prescribed amount of liquid medication ~~or crushing a tablet for administration if the licensed nurse has calculated the dose;~~ and

(3) Administration of schedule II controlled substances listed in SDCL 34-20B-16 and 34-20B-17 which have been prescribed and labeled in a container for a specific client.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:11. Medication administration tasks that ~~may not be routinely delegated and~~ require a written protocol. ~~The following are medication administration tasks that may be delegated to unlicensed assistive personnel only in accordance with § 20:48:04.01:04.~~ A registered nurse must develop, and maintain on file, a written protocol that includes specific medication administration instructions and training requirements, before delegating the following medication administration tasks to a nursing assistant:

(1) Administration of the initial dose of a medication that has not been previously administered to the client;

(2) Administration of medications on an as-needed basis, including schedule II controlled substances listed in SDCL 34-20B-16 and 34-20B-17 ~~as provided in subdivision 20:48:04.01:10(3)~~ that are prescribed and labeled in a container for a specific client; and

(3) Administration of insulin by the subcutaneous route, when a licensed nurse is not available to administer the insulin, in accordance with §§ 20:48:04.01:16 and 20:48:04.01:17.

~~A registered nurse shall develop written protocol for the instruction and training of unlicensed assistive personnel and maintain the protocol on file.~~

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:12. Medication administration tasks that may not be delegated. ~~The~~ A licensed nurse may not delegate the following tasks of medication administration:

(1) Administration of schedule II controlled substances listed in SDCL 34-20B-16 and 34-20B-17 from a locked stock supply;

(2) Administration of medications by subcutaneous, intramuscular, intradermal, or intravenous route, except as authorized in ~~§ 20:48:04.01:11~~ §§ 20:48:04.01:10 and 20:48:04.01:16 to 20:48:04.01:18, inclusive;

(3) Administration of medications by way of a tube inserted in a cavity of the body, except as authorized in § 20:48:04.01:18;

(4) Administration of medications via inhalation route in a complex nursing situation as defined in § 20:48:01:01; and

(5) Calculation of any medication dose, except as authorized in § 20:48:04.01:10.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 28 SDR 36, effective September 18, 2001; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21(4).

Law Implemented: SDCL 13-33A-1, ~~36-9-3(2), 36-9-4(4), 36-9-4.1(2), 36-9-21(4)~~ 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:13. Approval of training program required for delegated medication

administration. Medication administration as outlined in ~~§ 20:48:04.01:10~~ §§ 20:48:04.01:09.01 to 20:48:04.01:11, inclusive, may be delegated ~~only to these~~ individuals who have successfully completed a training program approved by the board pursuant to §§ 20:48:04.01:14 to 20:48:04.01:15, inclusive. ~~Approval of the A training program must be renewed~~ apply for renewal every two years.

Source: 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:14. ~~Standards-Requirements~~ for approval of medication administration training

programs. An institution or individual ~~desiring to offer a training program for delegated medication administration for unlicensed assistive personnel~~ must submit an application for a training program for delegated medication administration for approval to the board. The board ~~may~~ shall grant approval to an applicant ~~training program~~ upon proof that the training program ~~meets the following requirements:~~

(1) ~~The training program is~~ Is based on the training curriculum ~~outlined in § 20:48:04.01:15 and~~ includes;

(2) Includes no less than 16 hours of ~~classroom-theoretical~~ instruction ~~and an additional 4 hours of~~ clinical or laboratory instruction;

(2) ~~The person teaching a training program is~~ taught by a registered nurse who is ~~currently~~ licensed as a registered nurse in South Dakota and has a minimum of two years of clinical nursing experience and who holds a registered nurse license from the board or privilege to practice;

~~(3) The faculty to student ratio does not exceed 1:8 in the clinical setting. A 1:1 ratio is required for skills performance evaluation;~~

~~—— (4) A skills performance evaluation must be conducted utilizing a Board approved competency checklist;~~

~~—— (5) Successful completion of a Board approved written examination. A passing score of 85 percent is required on the test with an opportunity to retake the test one time. If a student fails on retake, additional instruction is required before further testing is allowed;~~

~~—— (6) A completion certificate is awarded to a person who has successfully completed the training program. The certificate must include the name and location of the institution, the length of the program, the date of completion, the full name of the person who completed the program, the signature of the faculty member in charge of the course, and the date the certificate was awarded; and~~

~~—— (7) Records are maintained which include documentation of the following:~~

~~—— (a) Each person enrolled in the program, including documentation of performance and the date and reason the person withdrew or the date the person failed or completed the program;~~

~~—— (b) Each faculty member teaching the program, including qualifications and nursing experience;~~

~~—— (c) The curriculum plan and revisions;~~

~~—— (d) All tests administered; and~~

~~—— (e) A list of graduates of the program who were awarded certificates and the date of the award. Includes no less than four hours of clinical or laboratory instruction that is taught by a registered nurse or licensed practice nurse who has a minimum of two years of clinical nursing experience and who holds a registered nurse or licensed practical nurse license from the board or privilege to practice.~~

~~The training program must submit an evaluation of the curriculum and to the board every two years to demonstrate compliance with program standards for compliance with this section to the board every two years in order in § 20:48:04.01:14.1 to maintain approval.~~

Source: 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:14.01. Standards for medication administration training programs. An individual or institution approved by the board to offer a medication administration training program must ensure the training program meets the following standards:

(1) Maintains a faculty-to-student ratio that does not exceed 1:8 in the clinical setting and a faculty-to-student ratio that does not exceed 1:1 for skills performance evaluation;

(2) Requires the student to complete a skills performance evaluation administered by a registered nurse instructor utilizing a board-approved competency checklist;

(3) Requires the student to pass a written examination on the curriculum content in § 20:48:04.01:15. A passing score of 85 percent is required on the examination. If the student fails the examination, the student may retake the test one time. If the student fails the retake, additional instruction is required before further testing is allowed;

(4) Awards a completion certificate to a student who successfully completes the training program. The certificate must include the name and location of the institution, the length of the program, the date of completion, the full name of the student who completed the program, the signature of the faculty member in charge of the course, and the date the certificate was awarded; and

(5) Maintains documentation of:

(a) Each student enrolled in the program, including documentation of successful completion or the date and reason the student withdrew or failed;

(b) Each faculty member teaching the program, including the qualifications and nursing experience of each faculty; and

(c) All tests administered.

Source:

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:15. Medication administration curriculum. The training curriculum for delegated medication administration must include:

(1) General information relevant to the administration of medications, including:

(a) Governmental regulations related to the practice of nursing, the administration of medication, and the storage, administration, and recording of controlled substances;

(b) Ethical issues;

(c) Terminology, abbreviations, and symbols;

(d) Medication administration systems;

(e) Forms of medication;

(f) Procedures and routes of medication administration;

(g) Medication references available;

(h) The role of ~~unlicensed assistance~~ nursing assistive personnel in administering medications;

(i) The rights of medication administration: including the right patient, right medication, right dose, right time, right route, and right documentation; ~~and~~

(j) Infection control policies and procedures;

(k) Documentation;

(l) Medication errors;

(m) Safe medication storage and disposal; and

(n) Circumstances to consult with or report to the delegating nurse, including the administration of an as-needed medication, a deviation from the delegated instruction of the nurse, or a concerning observation;

(2) An overview of the major categories of medications related to the body systems, including:

(a) Cardiovascular;

(b) Endocrine;

(c) Gastrointestinal;

(d) Integumentary and mucous membranes;

(e) Musculoskeletal;

(f) Nervous;

(g) Reproductive;

(h) Respiratory;

(i) Sensory;

(j) Urinary and renal; and

(k) Immune;

(3) ~~Additional instruction shall include these~~ Instruction on categories of medications relevant to the health care setting where the ~~unlicensed person~~ nursing assistant will be ~~employed~~ administering medications; and

(4) Clinical or laboratory instruction ~~for the purpose of demonstration of~~ demonstrating medication administration and evaluation of individual competence.

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:16. Written protocol required for the delegation of insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant. ~~A written protocol for the delegation of~~ Before a registered nurse may delegate insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant ~~is required prior to delegation by the registered nurse~~ must develop a written protocol. ~~The registered nurse must ensure that the following requirements are included in the~~ written protocol and ~~are completed by the unlicensed assistive personnel~~ must include the following requirements:

(1) ~~Completion of~~ The nursing assistant shall complete a five hour ~~Board approved~~ board-approved training in the following areas:

- (a) Diabetes basics;
- (b) Hypoglycemia;
- (c) Hyperglycemia;
- (d) Blood glucose monitoring;
- (e) Glucagon administration;
- (f) Insulin types and methods of administration;
- (g) Nutrition and physical activity;
- (h) Documentation; and
- (i) ~~Universal Standard~~ precautions;

(2) ~~Successful completion of a Board approved~~ The nursing assistant shall pass a written examination on the areas listed in subdivision (1). A passing score of 85 percent is required on the test ~~with an opportunity to, if the nursing assistant fails the test, the nursing assistant may retake the test one time. If a student~~ the nursing assistant fails on the retake, additional instruction is required before further testing is allowed;

(3) ~~Completion of~~ The nursing assistant shall complete a minimum of five hours of clinical or laboratory instruction, including the demonstration of individual competence utilizing a ~~Board approved~~ board-approved competency checklist, in the following areas:

- (a) Blood glucose monitoring;
- (b) Insulin administration;
- (c) Glucagon administration;
- (d) Carbohydrate ~~counting/diet~~ counting and diet management; and
- (e) ~~Universal Standard~~ precautions;

(4) ~~Annual~~ The registered nurse shall meet in-person with the nursing assistant, after completion of the requirements in subdivisions (1), (2), and (3), during a client's mealtime at least two times per week in the first four weeks to consult with the nursing assistant and to evaluate competence;

(5) The registered nurse must be available by electronic communication at all mealtimes; and

(6) The registered nurse shall complete an annual review of individual ~~the nursing assistant's~~ competence as in each area identified in subdivision 20:48:04.01:16(3); and

~~(5) Current registration with the Board (3).~~

Source: 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, ~~36-9-4, 36-9-4.1,~~ 36-9-21.

20:48:04.01:17. Qualifications of the registered nurse for delegation of insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant. A registered nurse must meet the following ~~criteria in order~~ qualifications to delegate insulin administration by the subcutaneous route to ~~unlicensed assistive personnel~~ a nursing assistant in accordance with §§ 20:48:04.01:11 ~~and,~~ 20:48:04.01:16, and 20:48:04.01:18:

(1) Hold an active registered nurse license or privilege to practice in ~~the state of South Dakota~~ this state;

(2) Have two years of clinical nursing experience;

(3) Have written evidence ~~to support of~~ demonstrated competence in the area of diabetes management in the past five years, or completion of a diabetes ~~train the~~ trainer program approved by the ~~Board board~~; or

(4) ~~Hold~~ hold current specialty certification as a Certified Diabetes Educator (CDE).

Source: 41 SDR 12, effective July 31, 2014.

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, ~~36-9-4, 36-9-4.1~~, 36-9-21.

20:48:04.01:18. Delegation of specific medication administration. A registered nurse or licensed practical nurse may delegate the administration of one specific medication to be administered to one specific client by a specific nursing assistant, who has not met the requirements in § 20:48:04.01:09, if:

(1) A registered nurse has determined that the administration of that one medication by the nursing assistant will allow the client to remain in the client's usual place of residence;

(2) The client does not reside in a nursing facility or assisted living center licensed under SDCL chapter 34-12;

(3) A licensed nurse is not available to administer the medication;

(4) The delegation complies with the general criteria for delegation and supervision set forth in §§ 20:48:04.01:01 and 20:48:04.01:02, respectively;

(5) The licensed nurse fulfills with the nursing assistant the training requirements in § 20:48:04.01:19; and

(6) The delegation is not prohibited by any other state statute, rule, federal statute, rule, or guidance.

Source:

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

20:48:04.01:19. Training required for the delegation of specific medication administration. A

licensed nurse must meet the following requirements before delegating the administration of a specific medication as provided in § 20:48:04.01:18:

(1) Provide instruction to the nursing assistant on the specific medication to be administered, including:

- (a) The trade name and generic name;
- (b) The purpose of the medication;
- (c) Signs and symptoms of common side effects, warnings, and precautions;
- (d) Route of administration; and
- (e) When to contact the licensed nurse;

(2) Verify, through the administration of a test or observation, that the nursing assistant knows:

(a) The six rights of medication administration, including the right client, right medication, right dose, right route, right time, and right documentation;

- (b) The name of the medication and common dosage;
- (c) The signs and symptoms of side effects for the medication;
- (d) Circumstances when the licensed nurse should be contacted;
- (e) How to administer the medication to the client; and
- (f) How to document the medication administration;

(3) Observe the nursing assistant administering the medication to the client until the nursing assistant demonstrates competency;

(4) Document the training provided to the nursing assistant; and

(5) Evaluate the client when medication orders change to determine if further instruction of the nursing assistant is needed.

A licensed nurse who delegates the administration of insulin under this section shall follow the requirements of §§ 20:48:04.01:16 and 20:48:04.01:17.

Source:

General Authority: SDCL 13-33A-2, 36-9-21.

Law Implemented: SDCL 13-33A-1, 36-9-3, 36-9-4, 36-9-4.1, 36-9-21.

CHAPTER 20:48:16

REGISTRATION OF ~~UNLICENSED ASSISTIVE NURSING ASSISTANT~~ PERSONNEL

20:48:16:01. Operation of registry. The board ~~is accountable for the operation of the unlicensed~~ shall ~~operate the nursing~~ assistive personnel registry. The registry ~~contains~~ must contain the following information for each person who has gained registry status:

- (1) Full name of the registrant, including maiden name and any surnames used;
- (2) Last known home address;
- (3) Registration number;
- (4) Date the registry status expires;
- (5) Date of birth;
- (6) Most recent employment;
- (7) Date of successful completion of the ~~board approved~~ board-approved examination; and
- (8) Disciplinary proceedings against the registrant.

Source: 44 SDR 81, effective November 6, 2017.

General Authority: SDCL 36-9-21(5).

Law Implemented: SDCL 36-9-21(5).

20:48:16:02. Application for registration. A person seeking initial registration shall:

- (1) Apply on the form provided by the board;
- (2) Hold a high school diploma or equivalent;
- (3) Successfully complete a board-approved training program in accordance with § 20:48:04.01:13 ~~or~~ § 20:48:04.01:16. An ~~individual seeking registration~~ applicant who completed education that was not approved by the board shall make a request for an equivalency determination on a form provided by the board; and
- (4) Provide evidence of having passed a board-approved examination.

If the applicant does not meet the registration requirements, the board shall deny the application.

Source: 44 SDR 81, effective November 6, 2017; 49 SDR 1, effective July 6, 2022.

General Authority: SDCL 36-9-21(5).

Law Implemented: SDCL 36-9-21(5).

20:48:16:03. Renewal or reinstatement of registration. A registrant shall renew the registration biennially. ~~A~~ The board shall send a notice for renewal ~~must be sent by the board~~ to the last known address of each current registrant at least 90 days before the registrant's expiration date. Failure to receive the notice for renewal does not relieve the registrant of the responsibility for renewing within the prescribed time. Any renewal received by the board after the filing date indicated in the notice must be listed as lapsed on the registry.

The board shall renew or reinstate a registrant if the registrant:

- (1) Applies on the form provided by the board;
- (2) Submits an affidavit that the applicant has committed no act of misconduct as set forth in

§ 20:48:16:04; and

- (3) Provides a verified statement that indicates whether the applicant ~~has been~~ was employed to administer medications to clients in a nursing facility, assisted living center, or hospital for a minimum of 12 hours ~~of employment in the registrant's role as an unlicensed diabetes aide or medication aide~~ during the preceding 24 months.

~~Applicants who do not~~ An applicant who does not meet the employment requirement must repeat the training program and examination requirements listed in § 20:48:16:02.

Source: 44 SDR 81, effective November 6, 2017; 49 SDR 1, effective July 6, 2022.

General Authority: SDCL 36-9-21(5).

Law Implemented: SDCL 36-9-21(5).