

(b) Any balance of federally obligated grant funds remaining unobligated by the grantee at the end of a budget period may be carried forward provided specific approval is granted by the Secretary. If at any time during a budget period it becomes apparent to the Secretary that the amount of Federal funds awarded and available to the grantee for that period, including any unobligated balance carried forward from prior periods, exceeds the grantee's needs for the period, the Secretary may adjust the amounts awarded by withdrawing the excess. A budget period is an interval of time (usually 12 months) into which the project period is divided for funding and reporting purposes.

[43 FR 43416, Sept. 25, 1978, as amended at 52 FR 27343, July 21, 1987; 57 FR 45741, Oct. 5, 1992]

§ 57.2409 What additional Department regulations apply to grantees?

Several other regulations apply to grants under this subpart. These include, but are not limited to:

- 42 CFR part 50, subpart D—Public Health Service Grant Appeals Procedure.
- 45 CFR part 16—Procedures of the Departmental Grant Appeals Board.
- 45 CFR part 46—Protection of Human Subjects.
- 45 CFR part 74—Administration of Grants.
- 45 CFR part 75—Informal Grant Appeals Procedures.
- 45 CFR part 76—Governmentwide Debarment and Suspension (nonprocurement) and Governmentwide Requirements for Drug-Free Workplace (Grants)
- 45 CFR part 80—Nondiscrimination Under Programs Receiving Federal Assistance Through the Department of Health and Human Services Effectuation of title VI of the Civil Rights Act of 1964.
- 45 CFR part 81—Practice and Procedure for Hearings Under part 80 of this title.
- 45 CFR part 83—Regulation for the Administration and Enforcement of sections 794 and 855 of the Public Health Service Act.
- 45 CFR part 84—Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting From Federal Financial Assistance.
- 45 CFR part 86—Nondiscrimination on the Basis of Sex in Education Programs and Activities Receiving or Benefiting From Federal Financial Assistance.
- 45 CFR part 91—Nondiscrimination on the Basis of Age in HHS Programs Activities Receiving Federal Financial Assistance.

45 CFR part 93—New restrictions on lobbying.

[52 FR 27344, July 21, 1987, as amended at 57 FR 45741, Oct. 5, 1992; 61 FR 6126, Feb. 16, 1996]

§ 57.2410 Additional conditions.

The Secretary may with respect to any grant award impose additional conditions prior to or at the time of any award when in his judgment such conditions are necessary to assure or protect advancement of the approved project, the interests of the public health, or the conservation of grant funds.

[43 FR 43416, Sept. 25, 1978. Redesignated at 52 FR 27344, July 21, 1987]

APPENDIX TO SUBPART Y—GUIDELINES FOR NURSE PRACTITIONER AND NURSE MIDWIFERY PROGRAMS

The guidelines set forth below have been prescribed by the Secretary after consultation with appropriate educational organizations and professional nursing and medical organizations, as required by section 822(a)(2)(B) of the Public Health Service Act.

A. *Definitions.* 1. "Programs for the education of nurse practitioners or nurse midwives" means a full-time educational program for registered nurses (irrespective of the type of school of nursing in which the nurses received their training) which meets the guidelines prescribed herein and which has as its objective the education of nurses (including pediatric and geriatric nurses) who will, upon completion of their studies in such program be qualified to effectively provide primary health care, including primary health care in homes and in ambulatory care facilities, long-term care facilities, where appropriate, and other health care institutions.

2. "Nurse practitioner" means a registered nurse who has successfully completed a formal program of study designed to prepare registered nurses to perform in an expanded role in the delivery of primary health care including the ability to:

- a. Assess the health status of individuals and families through health and medical history taking, physical examination, and defining of health and developmental problems;
- b. Institute and provide continuity of health care to clients (patients), work with the client to insure understanding of and compliance with the therapeutic regimen within established protocols, and recognize when to refer the client to a physician or other health care provider;
- c. Provide instruction and counseling to individuals, families and groups in the areas

of health promotion and maintenance, including involving such persons in planning for their health care; and

d. Work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families.

3. "Nurse-midwife" means a registered nurse who has completed a formal program of study designed to prepare registered nurses to perform in an expanded role in the delivery of primary health care to women and babies including the management of normal antepartum, intrapartum, and postpartum care as well as family planning and gynecology.

4. "Primary health care" means care which may be initiated by the client or provider in a variety of settings and which consists of a broad range of personal health care services including:

- a. Promotion and maintenance of health;
- b. Prevention of illness and disability;
- c. Basic care during acute and chronic phases of illness;
- d. Guidance and counseling of individuals and families; and
- e. Referral to other health care providers and community resources when appropriate; and
- f. Nurse midwifery services (where appropriate).

In providing such services (i) the physical, emotional, social, and economic status, as well as the cultural and environmental backgrounds of individuals, families, and communities (where applicable) are considered; (ii) the client is provided access to the health care system; and (iii) a single provider or team of providers, along with the client, is responsible for the continuing coordination and management of all aspects of basic health services needed for individual and family care.

B. *Organization and administration.* 1. A nurse practitioner or nurse-midwifery education program shall have active collaboration with nurses and physicians who have expertise relevant to the nurse practitioner or nurse midwife role and primary health care, to assist in the planning, development, and operation of such a program. In addition, where the institution or organization conducting the program is other than a school of nursing, medicine, or public health, such collaboration shall be with nurses and physicians who are affiliated with either a collegiate school of nursing, school of medicine, or school of public health.

2. Co-program directors from nursing and medicine are recommended.

C. *Student enrollment.* 1. A nurse practitioner or nurse midwifery education program shall have an enrollment of not less than six full-time equivalent students in each class.

2. All students enrolled in a nurse practitioner or nurse midwifery education program

must be licensed to practice nursing (a) at the time of enrollment, or (b) in the case of a program leading to a graduate degree in nursing, at or prior to the time of completion of a program.

3. The policies for the recruitment and selection of students shall be consistent with the requirements of the sponsoring institution and developed in cooperation with the faculty responsible for conducting the education. Admission criteria shall take into consideration the educational background and work experience of applicants.

D. *Length of program.* A nurse practitioner or nurse midwifery education program shall be a minimum of 1 academic year (or 9 months) in length and shall include at least 4 months (in the aggregate) of classroom instruction.

E. *Curriculum.* 1. A nurse practitioner or nurse midwifery education program shall be a discrete program consisting of classroom instruction and faculty-supervised clinical practice designed to teach registered nurses the knowledge and skills needed to perform the functions of a nurse practitioner or nurse midwife specified in the definition of that term as set forth in these guidelines. The curriculum shall be developed and implemented cooperatively by nurse educators, physicians, and appropriate representatives of other health disciplines. The following are examples of broad areas of program content which should be included: Communications and interviewing (history taking); basic physical examination including basic pathophysiology; positive health maintenance; care during acute and chronic phases of illness; management of chronic illness; health teaching and counseling; role realignment and establishment of collaborative roles with physicians and other health care providers; and community resources. The program content, both classroom instruction and clinical practice, should be developed so that the nurse practitioner or nurse midwife is prepared to provide primary health care as defined in these guidelines.

2. The curriculum may include a preceptorship, in which the student is assigned to a designated preceptor (a nurse practitioner, nurse midwife, or physician) who is responsible for teaching, supervising, and evaluating the student and for providing the student with an environment which permits observation and active participation in the delivery of primary health care. If a preceptorship is included, it shall be under the direction and supervision of the faculty.

F. *Faculty qualifications.* A nurse practitioner or nurse midwifery education program shall have a sufficient number of qualified nursing and medical (and other related professional) faculty with academic preparation and clinical expertise relevant to their areas

of teaching responsibility and with demonstrated ability in the development and implementation of educational programs.

G. *Resources.* 1. A nurse practitioner or nurse midwifery education program shall have available sufficient educational and clinical resources including a variety of practice settings, particularly in ambulatory care.

2. Clinical practice facilities shall be adequate in terms of space and equipment, number of clients, diversity of client age, and need for care, number of students enrolled in the program, and other students using the facility for education purposes.

3. Where the institution or organization conducting the program does not provide the clinical practice settings itself, it shall provide for such settings through written agreements with other appropriate institutions or organizations.

4. Where the institution or organization conducting the program is other than a school of nursing, medicine, or public health, it shall provide for sufficient educational expertise through written agreements with a collegiate school of nursing, school of medicine, or school of public health.

[42 FR 60883, Nov. 29, 1977, as amended at 43 FR 27837, June 27, 1978; 52 FR 27344, July 21, 1987; 57 FR 45741, Oct. 5, 1992]

Subpart Z—Grants for Advanced Nurse Education Programs

AUTHORITY: Sec. 215 of the Public Health Service Act, 58 Stat. 690, as amended by 63 Stat. 35 (42 U.S.C. 216); sec. 821 of the Public Health Service Act, 89 Stat. 361; as amended by 95 Stat. 930, 99 Stat. 394 and 548, and Pub. L. 102-408, 106 Stat. 2072 (42 U.S.C. 2961).

§ 57.2501 Applicability.

The regulations of this subpart apply to the award of grants to public and private nonprofit collegiate schools of nursing under section 821 of the Public Health Service Act (42 U.S.C. 2961) to meet the costs of projects to:

(a) Plan, develop, and operate new programs; or

(b) Significantly expand existing programs leading to advanced degrees that prepare nurses to serve as nurse educators or public health nurses, or in other clinical nurse specialties determined by the Secretary to require advanced education.

[61 FR 6127, Feb. 16, 1996]

§ 57.2502 Definitions.

As used in this subpart:

Act means the Public Health Service Act, as amended.

Advanced nurse education program means a program of study in a collegiate school of nursing which leads to masters' and doctoral degrees and which prepares nurses to serve as nurse educators, administrators, or researchers or to serve in clinical nurse specialties determined by the Secretary to require advanced education.

Budget period means the interval of time into which the approved activity is divided for budgetary purposes, as specified in the grant award document.

Collegiate school of nursing means a department, division, or other administrative unit in a college or university which provides primarily or exclusively a program of education in professional nursing and allied subjects leading to the degree of bachelor of arts, bachelor of science, bachelor of nursing, or to an equivalent degree, or to masters' and doctoral degrees in nursing, and including advanced education related to this type of educational program provided by the school, but only if the program, or unit, college or university is accredited.

Construction means (1) the construction of new buildings and the acquisition, expansion, remodeling, replacement, and alteration of existing buildings including architects' fees but not including the cost of acquisition of land (except in the case of acquisition of an existing building), offsite improvements, living quarters, or patient-care facilities, and (2) equipping new buildings and existing buildings, whether or not acquired, expanded, remodeled, or altered.

Council means the National Advisory Council on Nurse Education and Practice established by section 851(a) of the Act.

Nonprofit refers to the status of an entity which is a corporation or association, or is owned and operated by one or more corporations or associations no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual.

Professional nurse means a registered nurse who has received initial nursing preparation from a diploma, associate