

BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES 10-45

SUITE 309, EMBLETON BUILDING

922 QUARRIER STREET

STATE OF WEST VIRGINIA  
SECRETARY OF STATE



Garnette Thorne, B.S.N., M.S., R.N.  
Executive Secretary

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CHARLESTON, WEST VIRGINIA 25301

NOTICE OF AGENCY APPROVAL

Legislative Rules Title:

SERIES I: Policies Requirements and Recommendations for Accredited Programs of Professional Nursing in West Virginia.

SERIES II: Criteria For The Evaluation and Accreditation of Professional Nursing Programs in West Virginia.

SERIES III: Requirements For Registration and Licensure As A Registered Professional Nurse in West Virginia.

✓ SERIES IV: Legal Standards of Nursing Practice for The Registered Professional Nurse in West Virginia.

The attached legislative rules constitutes the official rules approved by the West Virginia Board of Examiners for Registered Professional Nurses on the ninth day of August, 1985, and filed pursuant to law with the West Virginia Secretary of State and the Legislative Rule-Making Review Committee.

*Garnette Thorne, M.S.N., R.N.*  
Miss Garnette Thorne, M.S., R.N.  
Executive Secretary

1985 AUG 29 AM 10:45  
OFFICE OF THE SECRETARY OF STATE

FILED

FISCAL NOTE FOR PROPOSED RULES

Rule Title: Legal Standards of Nursing Practice for the Registered Professional Nurse in West Virginia

Type of Rule:  Legislative  Interpretive  Procedural

Agency: WV BOARD OF EXAMINERS FOR REGISTERED PROFESSIONAL NURSES Address: Suite 309, Embleton Bldg. 922 Quarrier Street Charleston, WV 25301

1. Effect of Proposed Rule	ANNUAL		FISCAL YEAR		
	Increase	Decrease	Current	Next	Thereafter
Estimated Total Cost	\$	\$	\$	\$	\$
Personal Services	-0-	-0-	-0-	-0-	-0-
Current Expense	-0-	-0-	-0-	-0-	-0-
Repairs and Alterations	-0-	-0-	-0-	-0-	-0-
Equipment	-0-	-0-	-0-	-0-	-0-
Other	-0-	-0-	-0-	-0-	-0-

2. Explanation of above estimates.

These rules have no cost as they establish legal standards of professional nursing.

3. Objectives of these rules:

1. To improve nursing care to safeguard life and health in the state of West Virginia through setting minimum legal standards of nursing practice.

2. To inform registered professional nurses of the minimal level of acceptable nursing practice.

4. Explanation of Overall Economic Impact of Proposed Rule

A. Economic Impact on State Government

None

B. Economic Impact on Political Subdivisions; Specific Industries:

None

C. Economic Impact on Citizens/Public at Large.

None

Date: May 28, 1985

Signature of Agency Head or Authorized Representative

Garnette Thorne, MSN., R.N.  
Miss Garnette Thorne, R.N., M.S.  
EXecutive Secretary

WEST VIRGINIA LEGISLATIVE RULES  
WEST VIRGINIA BOARD OF EXAMINERS FOR  
REGISTERED PROFESSIONAL NURSES  
CHAPTER 30 - 7  
SERIES IV

Title: Legal Standards of Nursing Practice for the Registered  
Professional Nurse in West Virginia

- Section
1. General
  2. Purpose of Standards
  3. Standards related to the responsibility of the registered professional nurse to apply the nursing process
  4. Standards relating to the responsibilities of the registered professional nurse as a member of the nursing profession

SECRETARY OF STATE

1985 AUG 28 AM 10:47

FILED

WEST VIRGINIA LEGISLATIVE RULES  
WEST VIRGINIA BOARD OF EXAMINERS FOR  
REGISTERED PROFESSIONAL NURSES  
CHAPTER 30 - 7  
SERIES IV

TITLE: Legal Standards Of Nursing Practice For The Registered  
Professional Nurse In West Virginia

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Section 1. General

1.1 Scope - These Legislative Rules establishes the administrative rules and regulations for registered professional nurses education, licensure and practice in the State of West Virginia.

1.2 Authority - W.Va. Code 30-7-4 (a)(b)

1.3 Filing Date -

1.4 Effective Date - July 1, 1992

Section 2. Purpose of Standards

2.1 To establish minimal acceptable levels of safe practice for the registered professional nurse.

2.2 To serve as a guide for the Board to evaluate safe and effective nursing care.

Section 3. Standards Related to the Responsibility of the Registered Professional Nurse to Apply the Nursing Process

3.1 The registered professional nurse shall conduct and document nursing assessments of human responses to actual or potential health problems of individuals and groups by:

3.1.1 Collecting objective and subjective data from observations, examinations, interviews, and written records in an accurate and timely manner. The data includes but is not limited to:

3.1.1.1 Client knowledge and perception about health status;

3.1.1.2 Consideration of client's health goals;

3.1.1.3 Biophysical and emotional status;

3.1.1.4 Growth and development;

3.1.1.5 Cultural, religious and socio-economic background;

3.1.1.6 Ability to perform activities of daily living;

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3.1.1.7 Patterns of coping and interacting;

3.1.1.8 Environmental factors (e.g., physical, social, emotional and ecological);

3.1.1.9 Available and accessible human and material resources;

3.1.1.10 Family health history; and

3.1.1.11 Information collected by other health team members.

3.1.2 Sorting, selecting, reporting and recording the data.

3.1.3 Continuously validating, refining and modifying the data by utilizing all available resources, including interaction with the client, the family, significant others, and health team members.

3.2 The registered professional nurse shall establish and document nursing diagnoses which serve as the basis for the strategy of care.

3.3 The registered professional nurse shall develop and modify the strategy of care based on assessment and nursing diagnosis. This includes:

3.3.1 Identifying priorities in the strategy of care.

3.3.2 Setting realistic and measurable goals to implement the strategy of care.

3.3.3 Prescribing nursing intervention(s) based on the nursing diagnosis.

3.3.4 Identifying measures to maintain comfort, to support human functions and responses, to maintain an environment conducive to well being, and to provide health teaching and counseling.

3.4 The registered professional nurse shall implement the strategy of care by:

3.4.1 Initiating nursing interventions through:

3.4.1.1. Giving direct care.

3.4.1.2 Assisting with care.

3.4.1.3 Delegating care to appropriate person.

3.4.2 Providing an environment conducive to safety and health.

3.4.3 Documenting nursing interventions and responses to care.

3.4.4 Communicating nursing interventions and responses to care to other members of the health team.

3.5 The registered professional nurse shall evaluate the responses of individuals and groups to nursing interventions. Evaluation shall involve the client, family, significant others and health team members.

3.5.1 Evaluation data shall be documented and communicated to appropriate members of the health care team.

3.5.2 Evaluation data shall be used as a basis for reassessing client health status, modifying nursing diagnoses, revising strategies of care, and prescribing changes in nursing interventions.

Section 4. Standards Relating to the Responsibilities of the Registered Professional Nurse as a Member of the Nursing Profession

4.1. The registered professional nurse shall have knowledge of the statutes and regulations governing nursing, and function within the legal boundaries of nursing practice.

4.2 The registered professional nurse shall accept responsibility for individual nursing actions and competence.

4.3 The registered professional nurse shall recognize the need for and seek assistance as necessary when implementing nursing techniques or practices.

4.4 The registered professional nurse shall function as a member of the health team.

4.5 The registered professional nurse shall collaborate with other members of the health team to provide optimum patient care.

4.6 The registered professional nurse shall consult with nurses and other health team members and make referrals as necessary.

4.7 The registered professional nurse shall contribute to the formulation, interpretation, implementation, and evaluations of the objectives and policies related to nursing practice within the employment setting.

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4.8 The registered professional nurse shall participate in the evaluation of nursing practice through peer review.

4.9 The registered professional nurse shall report unsafe nursing practice to the Board and unsafe practice conditions to recommended legal authorities.

4.10 The registered professional nurse shall delegate to another only those nursing measures which that person is prepared or qualified to perform.

4.11 The registered professional nurse shall supervise others to whom nursing interventions are delegated.

4.12 The registered professional nurse shall retain professional accountability for nursing care when delegating nursing interventions.

4.13 The registered professional nurse shall conduct practice without discrimination on the basis of age, race, religion, sex, sexual preference, national origin or disability.

4.14 The registered professional nurse shall respect the dignity and rights of clients regardless of social or economic status, personal attributes, or nature of health problems.

4.15 The registered professional nurse shall respect the rights of clients to privacy by protecting confidential information unless obligated by law to disclose the information.

4.16 The registered professional nurse shall respect the property of clients, family, significant others, and the employer.

4.17 The registered professional nurse teaching the practice of nursing shall be qualified to do so through education and experience.

4.18 The registered professional nurse conducting research in nursing practice shall be qualified to do so through education and experience.

4.19 The registered professional nurse assuming a leadership role in nursing shall be qualified to do so through education and experience.

4.20 The registered professional nurse assuming independent practice shall be qualified to do so through education and experience.

ANALYSIS OF PROPOSED LEGISLATIVE RULES

Agency: Board of Examiners for Registered Professional Nurses

The proposed legislative rule consists of four separate series which are to be considered as one rule. The fiscal impact, pertinent dates and authority stated below are relevant to the proposed legislative rule as a whole. While each series is separately abstracted, only one analysis has been done for the proposed legislative rule.

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PERTINENT DATES

Filed for public comment: May 29, 1985  
Public comment period ended: July 9, 1985  
Filed following public comment period: August 28, 1985  
Filed LRMRC: August 28, 1985  
Filed as emergency:

Fiscal Impact: \$1,068,020.00

AUTHORITY

Statutory authority: W.Va. Code, §30-7-4(a) and (b) which reads as follows:

... The board is hereby authorized and empowered to:

(a) Adopt and, from time to time, amend such rules and regulations, not inconsistent with this article, as may be necessary to enable it to carry into effect the provisions of this article;

(b) Prescribe standards for educational programs preparing persons for licensure to practice registered professional nursing under this article; ....

(c) Examine, license and renew the licenses of duly qualified applicants.

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Subject: Proposed rules and regulations governing the policies, requirements and recommendation for accredited programs of professional nursing in West Virginia (Series I)

## ABSTRACT

Section 1 is a general section setting forth the scope of the rules, the authority for the rules, the filing and effective date of the rules and the repeal of the former rules. The proposed legislative rules are to go into effect on July 1, 1992 and repeal the Board's rules which were filed December 17, 1982.

Section 2 defines terms. The terms "professional nursing program" and "professional nursing program or school" are defined to require a minimum of a baccalaureate degree in nursing.

Section 3 states that, as provided by law, only those persons holding a current West Virginia license may practice registered professional nursing in West Virginia.

Section 4 delineates the powers of the Board. It merely quotes the law word for word. Among the powers delegated to the Board is the power to prescribe standards for educational programs preparing persons for licensure to practice registered professional nursing.

Section 5 sets forth the purposes of accreditation which include the improvement in the quality of nursing care through the improvement of nursing education.

Section 6 specifies the policies for accreditation of professional nursing programs. This section outlines the guidelines which the Board will be using in evaluating a program's philosophy, purpose and objectives; curriculum; administration; faculty; students and resources, facilities and services.

Section 7 outlines the procedures necessary for an institution to acquire accreditation. An institution must file an application with the Board along with a fee of fifty dollars. Instruction and practice may be split among several approved institutions. After a survey of the institution or institutions by the Executive Secretary of the Board, the Board is to approve it or them if all requirements have been met.

Section 8 relates to accreditation of nursing programs. The Board is to establish dates for the Executive Secretary to survey all nursing programs. The Executive Secretary is to submit to the Board a written report for each visit. An accredited program which is not maintaining required standards is to receive written notice of the deficiencies. When there is a change in ownership or control of a program, ninety days notice of the intended change must be given to the Board and application for accreditation must be made immediately.

Section 9 provides three ways in which an institution may lose its accreditation. They are (1) failure to correct deficiencies to the Board's satisfaction within a reasonable time, (2) change of ownership or control or (3) graduation of the last student for a program which is closing.

Section 10 requires written notification to the Board of the intent to close a program. A plan is also to be submitted to the Board for its approval which would safeguard the quality of instruction and practice during the closing period and provide for the transfer of students and custody of records.

Section 11 lists those reports which must be submitted to the Board from nursing programs.

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Subject: Proposed rules and regulations setting forth  
criteria for the evaluation and accreditation  
of professional nursing programs in West Virginia.  
(Series II)

#### ABSTRACT

Section 1 is a general section setting forth the scope of the rules, the authority for the rules, the filing and effective date of the rules and the repeal of the former rules. The proposed legislative rules are to go into effect on July 1, 1992 and repeal the Board's rules which were filed December 17, 1982.

Section 2 requires each nursing program to have a stated philosophy and purpose and to carry out its purposes.

Section 3 requires that a nursing program be administered by a registered professional nurse with a BSN, a MSN and a doctorate in nursing or education, who has five years of professional experience including two years as a nurse administrator or an instructor in a nursing program. This section also requires a written agreement between an institution and an agency providing clinical practice, which agency must be accredited by the appropriate accrediting body.

Section 4 relates to faculty. All faculty members must have, as a minimum, an MSN degree and two years professional nursing experience.

Section 5 concerns students in the nursing program. Criteria is to be established regarding the selection and

admission of students. Completion of high school or an equivalent is required for admission to a nursing program.

Section 6 outlines general concepts which should be included in the curriculum of a professional nursing program. Areas from which courses must be offered include nursing, physical and biological science, behavioral sciences, humanities and supportive courses.

Section 7 requires that programs have access to adequate resources, facilities and services. Agreements with facilities providing clinical practice are to ensure that faculty members have control of the students and freedom to select the area of practice.

Section 8 requires that accurate and suitable records be kept, including records on every student.

Section 9 states that graduation signifies that the candidate has satisfied all requirements of the college or university granting the degree.

Section 10 requires the faculty to recommend the eligible graduates to the Board for admission to the state licensure examination.

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Subject: Proposed rules and regulations outlining requirements for registration and licensure as a registered professional nurse in West Virginia. (Series III)

#### ABSTRACT

Section 1 is a general section setting forth the scope of the rules, the authority for the rules, the filing and effective date of the rules and the repeal of the former rules. The proposed legislative rules are to go into effect on July 1, 1992 and repeal the Board's rules which were filed December 17, 1982.

Section 2 relates to the procedure for applying for the licensure examinations and the qualifications which an applicant must possess. An applicant must have a high school degree or its equivalent, and must have a diploma from an accredited school as well as a recommendation by the faculty. Applicants who are graduates of foreign nursing schools must submit evidence of certification by the Commission on Graduates of Foreign Nursing Schools that the applicant passed the CGFNS examination. Qualifications for veterans are also listed.

Application forms are to be completed and returned to the Board at least forty-five days in advance of the examination. The school is to submit a transcript of the student's record at least thirty days in advance of the examination date.

Section 3 concerns examination dates and admission to an examination. The Board is to specify dates for the examinations and is required to mail a notice of the time and place to the directors of schools of nursing, ninety days prior to the examination. Candidates will receive an admission card with an attached photograph. The candidate must present the card in order to be admitted to the examination.

Section 4 allows the Board to determine that score which is necessary to pass the licensure examination. Those who pass the examination will receive an official report along with a certificate and license for the current year. Those who do not pass the examination will receive an official report and a request to return the temporary permit.

Section 5 allows the examination to be repeated.

Section 6 requires the Board to issue a temporary permit to candidates taking the licensure examination, upon receipt of a completed application and an official transcript. The temporary permit is not renewable.

Section 7 requires RNs wishing to endorse into the state to meet the qualifications required of RNs in West Virginia at the time of graduation.

Section 8 requires a nurse to renew her license annually.

Section 9 allows a nurse to replace a lost or destroyed certificate of licensure or certificate of annual re-registration.

Section 10 merely refers to the section of the code relating to licensure of nurse-midwives.

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Subject: Proposed rules and regulations outlining the legal standards of nursing practice for the registered professional nurse in West Virginia. (Series IV)

## ABSTRACT

Section 1 outlines the scope of the proposed rules, the authority under which they are promulgated, their filing date and their effective date. The proposed rules are to go into effect on July 1, 1992.

Section 2 states that the purpose of the standards is to establish minimal acceptable levels of safe practice for the registered professional nurse.

Section 3 outlines standards to be used by the registered professional nurse in applying the nursing process.

Section 4 sets forth standards relating to the responsibilities of the registered professional nurse as a member of the nursing profession.

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## ANALYSIS

### I. HAS THE AGENCY EXCEEDED THE SCOPE OF ITS STATUTORY AUTHORITY IN APPROVING THE PROPOSED LEGISLATIVE RULE?

No. Under the above-cited code provision, the Board has the authority to promulgate rules and regulations, to prescribe standards for nursing programs, and to accredit nursing programs.

### II. IS THE PROPOSED LEGISLATIVE RULE IN CONFORMITY WITH THE INTENT OF THE STATUTE WHICH THE RULE IS INTENDED TO IMPLEMENT, EXTEND, APPLY, INTERPRET OR MAKE SPECIFIC?

Yes. The Legislature clearly intended that the Board set the standards for the registration and licensing of registered professional nurses in this State and that the Board set standards for nursing programs and accredit those programs meeting the standards.

### III. DOES THE PROPOSED LEGISLATIVE RULE CONFLICT WITH OTHER CODE PROVISIONS OR WITH ANY OTHER RULE ADOPTED BY THE SAME OR A DIFFERENT AGENCY?

There is no actual conflict between the proposed legislative rule and other code provisions or any other rule. However, there are two issues, which relate to other rules, of which the Committee should be aware. First, the proposed legislative rule would repeal the Board's current rules, which repeal would occur on the effective date of the legislation.

But, the proposed legislative rule does not become operational until 1992. In effect, the Board would be without rules in the interim. Since it is doubtful that this is the Board's intent, this language needs to be rewritten.

Second, there may be a need to coordinate the legislative rules of this Board and the Board of Licensed Practical Nurses. The Board in proposing these rules is only implementing one half of the national plan which envisions not one, but two levels of nursing. The national plan contemplates professional nurses (BSNs) and technical nurses (ADNs), whereas the proposed legislative rules only speak to the professional nurse. The LPN would in effect be the technical nurse, but what of the requirement that the technical nurse have an associate degree as a minimum? Should half of the national plan be implemented; should the LPN Board revise its educational and licensing standards; or has the need for both boards been eliminated if the national plan is implemented? These questions need to be answered before the proposed legislative rules are promulgated.

IV. IS THE PROPOSED LEGISLATIVE RULE NECESSARY TO FULLY ACCOMPLISH THE OBJECTIVES OF THE STATUTE UNDER WHICH THE PROPOSED RULE WAS PROMULGATED?

The necessity of this rule to fully accomplish the objectives of the statute depends on whether or not the Legislature agrees with the concept of requiring all RNs to have a baccalaureate degree. If the Legislature does not agree with this concept, the rules are not necessary because the Board currently has rules implementing the statute.

V. IS THE PROPOSED LEGISLATIVE RULE REASONABLE, ESPECIALLY AS IT AFFECTS THE CONVENIENCE OF THE GENERAL PUBLIC OR OF PERSONS AFFECTED BY IT?

This question is very debatable, as evidenced by the testimony presented at a public hearing held by the Board on July 9, 1985 and by correspondence received by the Board. The following comments excerpted from the transcript of the hearing and the correspondence show the drastic division which these rules have caused within the nursing profession.

COMMENTS IN FAVOR

1. The revised standards are to become effective July 1, 1992 and are to affect only future nursing students. They would not affect anyone taking the examination prior to February 1992.
2. The rules do not affect LPNs.

3. Nursing is the only health discipline that does not require a baccalaureate degree as a minimal level of entry. It is only one of the few which does not require some type of internship.
4. There are three main areas of change in the nursing profession: (1) an increasing knowledge base; (2) increasing technology and (3) increasing complexity. It is impossible to prepare nurses to function in this capacity in two or three years.
5. Under current health care trends, nurses must be able to function autonomously, use sophisticated decision-making skills and independently operationalize nursing care and health education programs with individuals and groups in a variety of settings.
6. There is a market demand for BSNs.
7. The quality of nursing care improves in relation to educational background but the cost of nursing care does not increase.
8. There is currently minimal to no salary differential between nurses with baccalaureate degrees and those with associate or diploma degrees.
9. There would be some decreased cost attributable to less downtime and more independent role actions.
10. It is actually cheaper to go to basic four-year programs than the two plus two programs.
11. The maximum productivity of each employee at the bedside is determined by licensure and the legal accountabilities associated with that licensure. There is a need to have one level of professional nurse.
12. In answer to the argument that associate degree nurses and diploma degree nurses have higher passing rates on the examinations, it is argued that the examination is written with the diploma and associate degrees in mind.

#### COMMENTS OPPOSED

1. The public will be faced with the increased health care costs.
2. Higher numbers of diploma and associate degree nurses pass the licensing examination on the first try.

3. For the 1984 National Council Licensure Examination for RNs the passing scores were as follows:

	<u>Mean Score</u>	<u>% Passing first time</u>
AD grad	1988.7	90
Diploma	1979.7	92
BSN	1917.6	86

4. Down the road, diploma and associate degree nurses will be considered second-class nurses.
5. There are no empirical studies proving BSNs make better nurses.
6. The educational program toward the BSN decreases the hours of nursing classes in favor of liberal arts classes.
7. Seventy percent of RNs in West Virginia are not BSNs.
8. There would be an escalation in cost of nursing education by as much as 83%.
9. Restricting entry into nursing is most likely to affect those in rural areas, those of a lower socio-economic class and minorities.
10. The proposed legislative rules are inconsistent with the national plan and with the professional organization's position on nursing education, both of which provide for two levels of entry for nursing, registered professional nurses and technical nurses. The proposed legislative rule would limit professional and educational mobility for those being current LPSs as well as associate degree and diploma nurses.
11. There would be endorsement problems for nurses wishing to enter the State.
12. The current educational system is not in place to accommodate this change.
13. Licensure data for West Virginia from June of 1985 shows that 35.8% of the RNs have an associate degree, 47.4% of the RNs have a diploma degree, 13.8% of the RNs have a BSN degree, 2.7% of the RNs have an MSN degree and .3% of the RNs have their doctorate.
14. LPNs will be forced to start over since colleges will not give credit for vocational technical courses.

15. Annual tuition and fees currently for an ADN degree are \$1,600, for a BSN at a state school, \$4,800 and for a BSN at a private school is \$20,000.
16. A national poll of nurses showed that in 1980, 70% were opposed to the BSN as entry level and in 1981, 80% were opposed.
17. There is a lack of nurse educators. There is currently only one masters program and no doctoral program in West Virginia.
18. A systematic plan of implementation needs to be projected, including a cost analysis.
19. The Board of Regents was asked to review the proposed legislative rules and the effect they would have upon the education system in this state. In its report, The Board of Regents stated that since no other state has adopted this proposal, there is no objective experience available to allow assessment of the concept. The Board of Regents reported that there are currently eight (8) BSN and eight (8) ADN programs in this state which typically graduate and register 450 nurses annually, which is 63% of the professional nurses currently educated in West Virginia. Increasing the number of years of training will have a negative impact on the number of nurses that could be educated.

The Board of Regents pointed out that there would be a need of legislative approval and appropriation of funds to implement the additional system and that the output of nurses would be drastically reduced during the transition.

In estimating the total cost of conversion, the Board of Regents determined there would be \$436,575 in one time start-up costs and \$869,650 in continuing annual increases, as well as a potential loss of \$1.3 million in federal vocational education funds.

The Board of Regents recommended beginning by converting ADN program to BSN program at the various institutions and that the implementation be extended by at least two to four years.

In the absence of agreement among the members of the nursing profession as to the reasonableness of the proposed legislative rules, the Committee must make the determination as to whether or not the rules are reasonable. The proposed rules would affect not only members of the nursing profession

but also the general public which could face increased health care cost and would through taxes be required to pay the costs of upgrading the nursing programs.

VI. CAN THE PROPOSED LEGISLATIVE RULE BE MADE LESS COMPLEX OR MORE READILY UNDERSTANDABLE BY THE GENERAL PUBLIC?

Definitely. To begin with a large part of the proposed legislative rule merely restates the code. This unnecessary language could be removed, making the proposed legislative rule more concise. There are also instances of ambiguous terms and language which is not specific enough, all of which is too time consuming to set forth in this abstract. Should the Committee agree to the concept envisioned by the Board, counsel would be available to assist the Board in rewriting the rules to make them less complex and more understandable to the general public.

VII. WAS THE PROPOSED LEGISLATIVE RULE PROMULGATED IN COMPLIANCE WITH THE REQUIREMENTS OF CHAPTER 29A, ARTICLE 3 AND WITH ANY REQUIREMENTS IMPOSED BY ANY OTHER PROVISION OF THE CODE?

The proposed legislative rules were not accompanied by a brief summary of content and a statement of circumstances which require the rule as required by W.Va. Code, §29A-3-11 (a) and (3).