Decision-Making Model for Scope of Nursing Practice Decisions:
Determining Advanced Practice Registered Nurse, Registered Nurse and Licensed Practical Nurse Scope of Practice Guidelines

The Oklahoma Nursing Practice Act enacted by the Legislature defines a scope of practice for nurses in this state. It is impossible for a practice act to list all of the duties, nursing functions and/or nursing activities licensed nurses are or are not permitted to perform. The Board has endorsed the following guidelines to assist nurses in determining a personal scope of practice based upon legal parameters of practice and one’s education, knowledge and experience. To provide documentation of the decision-making process for specific nursing tasks, Addendum A identifies nursing duties, functions, and activities that have been reviewed by Board committees and by the Board on or after November 10, 2009, based on questions submitted by licensees and other stakeholders. In some cases, the Board has issued a declaratory ruling, position statement, or guidelines to address specified nursing duties, functions, or activities. Please see the Board’s website (www.ok.gov/nursing/prac1.html) for a list of declaratory rulings, position statements, and guidelines that address specific nursing duties, functions, and activities.

The profession of nursing is a dynamic discipline. Practice potentials change and develop in response to health care needs of society, technical advancements, and the expansion of scientific knowledge. All licensed nurses share a common base of responsibility and accountability defined by the practice of nursing. However, competency-based practice scopes of individual nurses may vary according to the type of basic licensure preparation, practice experiences and professional development activities. The licensed nurse is responsible and accountable, both professionally and legally, for determining his/her personal scope of nursing practice. The intent of this guideline is to present a process to determine acts appropriate to nursing at various levels. Application of this guideline is accomplished through answering the following questions.

Describe the activity/task [act] being performed.

1. Is the act expressly permitted/prohibited by the Oklahoma Nursing Practice Act, Rules or Declaratory Rulings or any other applicable law?
   a. If Prohibited, the decision is complete.
   b. If Permitted, proceed to #2.
   c. If Unsure, proceed to #2.

If you are an Advanced Practice Registered Nurse (APRN), is the act for advanced practice nurses within the generally recognized scope and standards of your certifying body?
2. Does the act require you to have substantial specialized nursing knowledge, skill and independent judgment?
   a. If you answer NO to this question, the act may be within the basic scope of practice for an RN or LPN. Proceed to #3.
   b. If you answer YES, the activity may be an act within the scope of practice of an RN only at an advanced practice level. If you are an Advanced Practice Registered Nurse, proceed to #3.

3. Is the act consistent with ALL of the following?
   - Current national nursing standards.
   - Current nursing literature and research.
   - Appropriately established written policy and procedure of employing facility.
   - Current employing facility accreditation standards.
   a. If you answer NO to this question, the act is NOT within your scope of practice.
   b. If you answer YES, proceed to #4.

4. Do you personally possess the depth and breadth of knowledge to perform the act safely and effectively as demonstrated by knowledge acquired in a pre-licensure program, post-basic program, or continuing education program?
   a. If you answer NO, the act is NOT within your scope of practice.
   b. If you answer YES, maintain documented evidence and proceed to #5.

   If you are an APRN, do you personally possess the depth and breadth of knowledge to perform the act safely and effectively as demonstrated by knowledge acquired in your advanced nursing educational program or continuing education program?

5. Do you personally possess current, documented clinical competence to perform this act safely?
   a. If you answer NO, the act is NOT within your current scope of practice until competence is achieved.
   b. If you answer YES, proceed to #6.

6. Is the performance of the act within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?
As Declaratory Rulings, Board Guidelines, and Position Statements are developed by the Board in response to a specific question(s) to guide what a reasonable and prudent nurse should do, such rulings should be considered when responding below.

a. If you answer NO, the act is NOT within your scope of practice. Performance of the act may place both nurse and patient at risk.
b. If you answer YES, proceed to #7.

7. Are you prepared to accept the consequences of your action?

a. If you answer NO, the act is NOT within your current scope of practice.
b. If you answer YES, then:
   i. Perform the act based upon valid Order when necessary, and in accordance with appropriately established policies and procedures of employing facility.
   ii. Assume accountability for provisions of safe care.
c. If you are still unsure, stop and defer to a qualified individual.

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Regulatory Authority:

59 O.S. §567.1 et seq.
OAC Title 485
Summary of Decision Making Model

Is the act expressly permitted by the *Oklahoma Nursing Practice Act and Rules*, or Declaratory Rulings or any other applicable law?

If you are an Advanced Practice Registered Nurse (APRN), is the act for APRNs within the generally recognized scope and standards of your certifying body? (If yes, proceed to decision #3.)

Does the act require you to have substantial specialized nursing knowledge, skill and independent judgment?

Is the act consistent with ALL of the following:
  • Current national nursing standards?
  • Current nursing literature and research?
  • Appropriately established written policy and procedure of employing facility?
  • Current employing facility accreditation standards?

Do you (as an RN, LPN, or APRN) personally possess the depth and breadth of knowledge to perform the act safely and effectively as demonstrated by knowledge acquired in a pre-licensure program, post-basic program, or continuing education program?

Do you personally possess current, documented clinical competence to perform this act safely?

Is the performance of this act within accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience? As Declaratory Rulings, Board Guidelines and Position Statements are developed by the Board in response to a specific question(s) to guide what a reasonable and prudent nurse should do, such rulings should be considered when responding to this decision.

Are you prepared to accept the consequences of your actions?
**ADDENDUM A**

09-001 Can Registered Nurses adjust the rate of Elastomeric (such as ON-Q) Pumps?

In response to this practice question, the Nursing Education and Practice Advisory Committee concluded on October 12, 2009, that provided appropriate actions/steps are taken and in place, a Registered Nurse is PERMITTED to adjust the rate of elastomeric pumps. The Registered Nurse performing this task must be knowledgeable about the pump as well as the expected patient response to the intervention. Clinical competency must be assessed, documented and reassessed/documentated regularly. The act is to be performed upon valid order and in accordance with appropriately established policies and procedures of the employing facility (#1-6 in the Decision-Making Model).

(Assured by Board, 11/10/2009)

09-500 Is routine artificial rupture of amniotic membranes within the scope of practice of Registered Nurses?

In response to this practice question, the Nursing Education and Practice Advisory Committee concluded on October 12, 2009, that it is NOT within the scope of Registered Nurses to perform this activity. The act is not consistent with national standards of practice (#1-3 in the Decision Making Model) in that the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) does not support the artificial rupture of membranes by Registered Nurses. See AWHONN Clinical Position Statement: Amniotomy and Placement of Internal Fetal Spiral Electrode through Intact Membranes.

(Assured by Board, 11/10/2009)