SCOPE
OF
PRACTICE
WHAT IS SCOPE OF PRACTICE?

- How is it defined
- What does it encompass
- What about others in nursing
LEGAL DEFINITION OF SCOPE OF PRACTICE (BRN)

...outlined in Nursing Practice Act, 2725

- Direct & indirect care... safety, comfort, personal hygiene, protection of patients, performance of disease prevention and restorative measures.

- Administration of medications & therapeutic agents,... ordered by & within licensure scope of a MD, dentist, podiatrist or psychologist.

- Performance of skin tests, immunization techniques, & withdrawal of blood (vein/artery)

- Ref: California BRN website and “Explanation of RN Scope of Practice”
Section 2725 continues...

- **Observation** of SxS of illness, reactions to treatment, behavior, or physical condition, &

  determining of whether the SxS, reaction, behaviors, or general appearance exhibit abnormal characteristics; &

  **implementation** ... of appropriate reporting, or referral, or standardized procedure, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.

- Ref: California BRN website and “Explanation of RN Scope of Practice”
The actions, procedures, tasks, and interventions that are permitted by law for a specific profession based on specific experience and educational qualifications.

Our primary concern as nurses must always be safe and proficient nursing care.

Ref: Lanette L. Anderson, MSN, JD, BBA, RN
...describes the who, what, where, when, why, and how of nursing practice.

Each of these questions must be sufficiently answered to provide a complete picture of the practice and its boundaries and membership.

The profession of nursing has one scope of practice that encompasses the full range of nursing practice.

The depth and breadth in which individual registered nurses engage in the total scope of nursing practice is dependent upon education, experience, role, and the population served.

- Ref: Nursing: Scope & Standards of Practice. ANA Silver Spring, Maryland, 2004 page 1
...describes the responsibilities for which its practitioners are accountable... provide direction for professional nursing practice and a framework for the evaluation of this practice

- **Standards of Practice** describe level of nursing care by the critical thinking model known as the nursing process...

- **Standards of Professional Performance** describe the level of behavior in the professional role...

*Ref: Nursing: Scope & Standards of Practice. ANA Silver Spring, Maryland, 2004 pages 1-4*
STANDARDS OF PRACTICE

1. Assessment
2. Diagnosis
3. Outcome Identification
4. Planning
5. Implementation
   - Coordination of Care
   - Health Teaching and Health Promotion
   - Consultation
   - Prescriptive Authority
6. Evaluation

Ref: Nursing: Scope & Standards of Practice. ANA Silver Spring, Maryland, 2004 pages 1-4
STANDARDS OF PROFESSIONAL PERFORMANCE

7. Quality of Practice
8. Education
9. Professional Practice Evaluation
10. Collegiality
11. Collaboration
12. Ethics
13. Research
14. Resource Utilization
15. Leadership

Ref: Nursing: Scope & Standards of Practice. ANA Silver Spring, Maryland, 2004 pages 1-4
VN SCOPE OF PRACTICE

Title 16 2518.5.
...basic assessment (data collection), participate in planning, executes interventions, & contribute to evaluation of interventions
...administers medications, applies communication skills, and contributes to and implements a teaching plan

California B&P Code 2860.5.
...administer medications ...withdraw blood
...skin tests and immunization techniques
......start and superimpose intravenous fluids (but not TPN, initiation of art/central lines, anti-neoplastics, neonatal, ‘pushes’)
<table>
<thead>
<tr>
<th>Activity</th>
<th>RN</th>
<th>VN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Independent Practice</strong></td>
<td>Yes &amp; with MD orders</td>
<td>No – under MD or RN B&amp;P Code, §2859</td>
</tr>
<tr>
<td><strong>Assessment</strong></td>
<td>RN must do 1/shift Title 22, §70215 (a)</td>
<td>Partial</td>
</tr>
<tr>
<td>• Data Collection</td>
<td>Yes</td>
<td>Yes- Title 16 §2518(a) basic assessment</td>
</tr>
<tr>
<td>• Analysis, synthesis, evaluation of data</td>
<td>Yes–NPA §2725(b)4</td>
<td>No – B&amp;P §2859 Report data to RN/MD</td>
</tr>
<tr>
<td>• Evaluate effectiveness of care plan through observation</td>
<td>Yes-Title16 §1443.5 Simple sign off?</td>
<td>Partial –Title 16 §2518 Contributes to the evaluation</td>
</tr>
<tr>
<td>• Pain must be asses with vital signs (H&amp;S Code §1254.7)</td>
<td>Yes</td>
<td>Partial - Data collection or is it more?</td>
</tr>
<tr>
<td><strong>Health Teaching</strong></td>
<td>Yes</td>
<td>Partial? – related to self-care</td>
</tr>
<tr>
<td><strong>CNA can do</strong></td>
<td><strong>CNA can not do</strong></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Collect data; i.e. vital signs</td>
<td>Assessments</td>
<td></td>
</tr>
<tr>
<td>Bathing and cleaning and ADLs</td>
<td>Education on pt’s health problem or post-discharge care</td>
<td></td>
</tr>
<tr>
<td>Wound care IF assessed by RN or MD 1st and wound /skin is not open / broken</td>
<td>Procedures requiring scientific knowledge or technical skills</td>
<td></td>
</tr>
<tr>
<td>Simple splinting as directed by RN or MD</td>
<td>Place NG tubes or catheters</td>
<td></td>
</tr>
<tr>
<td>Assist with CPR/Code Blue, IF trained</td>
<td>Moderate complex lab tests (waived testing)</td>
<td></td>
</tr>
<tr>
<td>Obtain venous blood for lab or 12-Lead EKG, IF trained</td>
<td>Tracheal suctioning</td>
<td></td>
</tr>
<tr>
<td>Transport stable patients and prepare patient area for arrival</td>
<td>Administer medication, including oxygen and regulation of IVs</td>
<td></td>
</tr>
</tbody>
</table>
1. **Define the issue.** Check policies & procedures. Do self-assessment of your skills, abilities, and competency. If you accept, you are accountable for completing it safely & competently.

2. **Review laws, rules, standards, etc.** ‘Common Practice’ may not be appropriate. VNs in one facility may do assessments without RN collaboration.
IS ‘THIS’ WITHIN MY SCOPE OF PRACTICE?

3. **Make the decision** – Willing to accept consequences? If not, do not perform the task. If another nurse with similar education/experience would perform the task, if you have a MD order, & documented competency, you may perform.

*Ref: Lanette L. Anderson, MSN, JD, BBA, RN,*
COLLABORATION
COMMUNICATION
Exchange of views, ideas, & perspectives of all that requires mutual respect, trust, and tenacity.

Strategies to build collaborative relationship

- Develop Emotional Maturity
  - Continually seek best practices & continually try to improve personal skill level
  - Strive to move conflict situations toward a resolution

Ref: http://www.nursingworld.org/mods/mod775/nrsdrfull.htm
Understand the Perspectives of Others

- Besides gender & generational differences, each discipline may have a different approach; i.e., medical (rule out to dx) & nursing (holistic).
- Different views & knowledge bases may lead to the best, most creative solution

Avoid Compassion Fatigue

- Burnout is a barrier to communication.
- SxS: fatigue, lack of energy/empathy, and depersonalizing patients.

Ref: http://www.nursingworld.org/mods/mod775/nrsdrfull.htm
#1 Cause of Errors & to prevent:
- Professional/collaborative relationships
- Provide appropriate information
  - Handoffs/reports
- Be sensitive to the perspectives of others
- Adapt to context of the situation
  - Physical, gender, cultural, psychological, timing
- Maintain respect for others & yourself
  - Clear realistic goals,
  - Positive feedback - tune out negative critic
- Watch non-verbal messages
- Listen

Ref: Communication for Nurses, Schuster & Nykolyn 2010
SBAR

- **Situation**
  - Concise statement

- **Background**
  - Pertinent & brief info related to situation

- **Assessment**
  - Your analysis and considerations of options

- **Recommendation**
  - What you request or recommend
PROFESSIONAL ORGANIZATIONS
<table>
<thead>
<tr>
<th>Organization</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Student Nurse Assoc.</td>
<td>California Student Nurse Assoc.</td>
</tr>
<tr>
<td>Academy of Medical Surgical Nurses</td>
<td>American Assoc. of Critical Care Nurses</td>
</tr>
<tr>
<td>Association of periOperative Registered Nurses</td>
<td>Assoc. of Women’s Health, Obstetric &amp; Neonatal Nursing</td>
</tr>
<tr>
<td>American Nurses Association Amer. Nurse Credentialing Center</td>
<td>Collaborative Alliance for Nursing Outcomes</td>
</tr>
<tr>
<td>American Organization of Nurse Executives</td>
<td>Association of California Nurse Leaders</td>
</tr>
<tr>
<td>American Assembly for Men in Nursing</td>
<td>National Association of Hispanic Nurses</td>
</tr>
<tr>
<td>Sigma Theta Tau, International Honor Society of Nursing</td>
<td>Nurses Christian Fellowship</td>
</tr>
<tr>
<td>California Nurses Association</td>
<td>United Nurses Assoc. of Calif. Union of Health Care Prof.</td>
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