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An advisory opinion adopted by AZBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of AZBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training, and supervision to assure the safety of their patient population and or decrease risk.

OPINION: Scope of Practice Decision Tree

APPROVED DATE: 5/1993

REVISED DATE: 5/96, 1/02, 9/05, 8/09, 5/12, 1/13, 9/2016, 12/2019

ORIGINATING COMMITTEE:

SCOPE OF PRACTICE COMMITTEE

Within the Scope of Practice of X RN X LPN

ADVISORY OPINION SCOPE OF PRACTICE DECISION TREE

It is the mission of the Arizona State Board of Nursing, to protect the public and act as their advocate by effectively regulating the practice of nursing.

Scope of Practice can be defined as the range of nursing activities common to all nurses. An individual nurses' Scope of Practice can be influenced by their education, experience and population served.

Because the roles and responsibilities of nurses are influenced by the healthcare system which is ever changing and increasing in complexity, it is important that the nurse is empowered to make decisions regarding his/her own scope of practice to which they are professionally and legally responsible.

Registered Nurses (RN) and Licensed Practical Nurses (LPN) in the state of Arizona are responsible for having a working knowledge of the Nurse Practice Act (NPA) and Advisory Opinions (AO), which are interpretations of what the law requires for a specific nursing task or function. Advisory Opinions are not laws, they serve as official opinions of the Arizona State Board of Nursing (ARS § 32-1606 (A) (2)).

Scope of Practice Decision Making Tool (next page):

This tool is intended to provide direction in the decision making process. If a nurse finds the decision making guidelines inadequate to reach a definitive decision, refer to the current Advisory Opinions, <http://www.azbn.gov/AdvisoryOpinions.aspx>.

REFERENCES

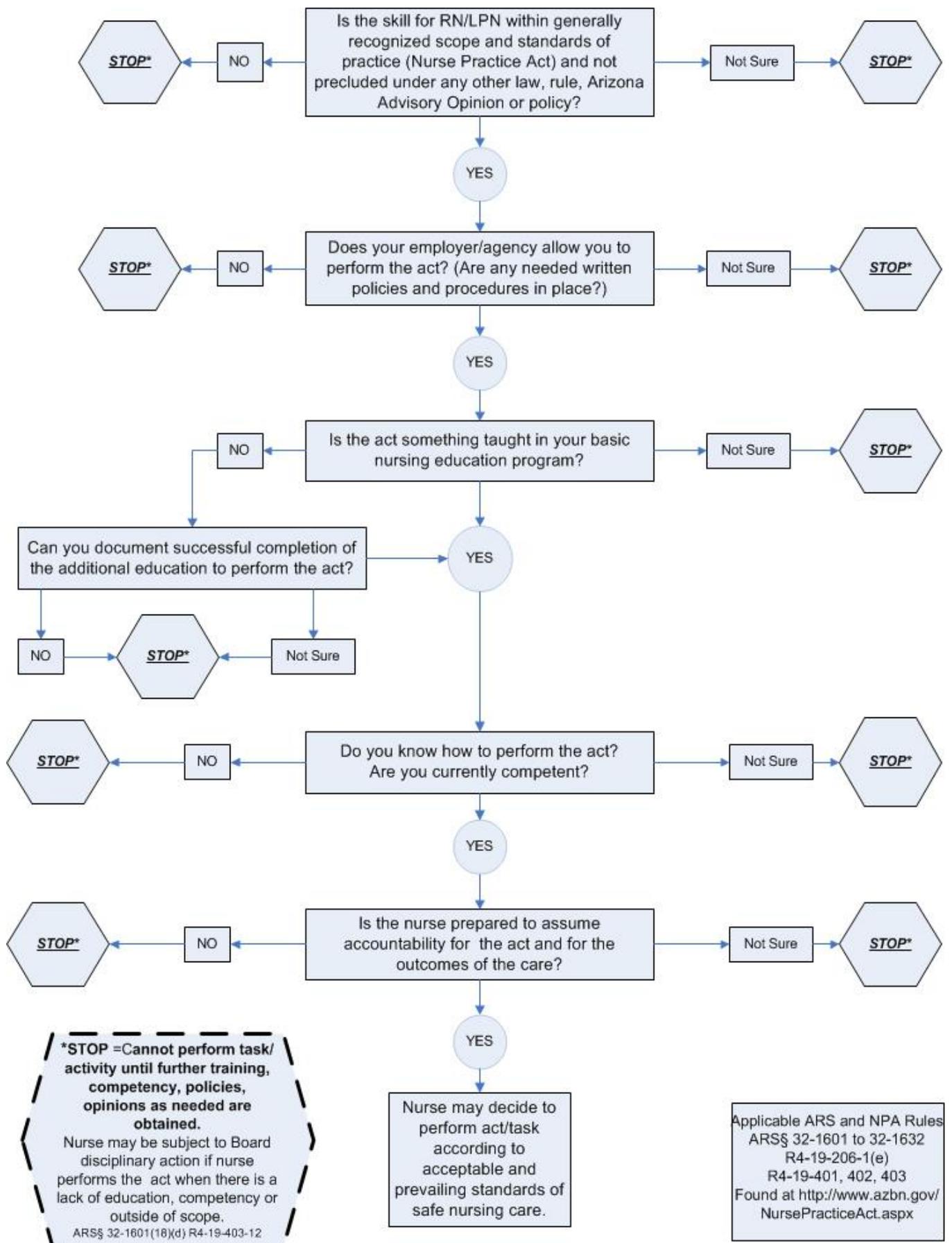
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Proposed changes

Process for Utilizing the Decision Making Tool

How to use this process/tool: answer each of the questions in the order of the tool, proceed to the next question or stop and follow the instructions to defer the task/activity to a qualified professional until the requirements for that step can be met.

Determine if the activity is consistent generally recognized scope and standards of practice (Arizona Nurse Practice Act) and not precluded under any law, rule Arizona Advisory Opinion or policy.

Not sure- Review the NPA and AO's found at www.azbn.gov/NursePracticeAct.aspx , and employer's policies and procedures, then if yes, continue. If No, Stop.

No- Stop. Defer the activity/task to a professional qualified to do the activity/task or to the Arizona State Board of Nursing for a decision.

Yes – Continue

Is the skill for the RN/LPN within generally recognized scope and standards of practice?

Not sure – Review any specialty organizations that may have scope of practice statements or research data in health related literature to support this activity. If none found, see NO. If supporting data found, continue.

NO – Stop. Defer the activity/task to a professional qualified to do the activity/task.

Yes – Continue

Is the activity something taught in your basic nursing education program?

Not sure- Stop, Defer the activity/task to a professional qualified to do the activity/task or until additional training can be obtained

No – Stop, Defer the activity/task to a professional qualified to do the activity/task or until additional training can be obtained.

Yes – Continue

Do you know how to perform the act? Are you currently competent?

Not Sure- Seek consultation and validation of competency. Do not attempt the act unless you feel a reasonable and prudent nurse with your same education and experience would perform.

No – Stop. Defer the activity/task to a professional qualified to do the activity/task until additional training can be obtained.

Yes – Continue

Is the nurse prepared to assume accountability for the act and for the outcomes of the care?

Not Sure- Is the outcome reasonably predictable; is the setting one in which there is support for negative outcome with minimal harm to patients? If no Stop and defer. If **Yes**, Perform the task according to the acceptable and prevailing standards of nursing care.

No – Stop. Defer the activity/task to a professional qualified to do the activity/task.

Yes – Decide to whether to accept, agree to learn or refuse to accept the newly assigned task or procedure and be aware of the implications of each action.

Accept the newly assigned task. You have now made an agreement with your employer to incorporate this new responsibility, under the conditions outlined in the agency's procedure manual. You are accountable to perform the task correctly.

Agree to learn the new procedure according to the plans established by the employer for your education, skills practice and evaluation. You will be responsible for letting your nurse manager know when you feel competent to perform this skill.

Make sure that documentation is in your personnel file validating this additional education. If you do not believe you are competent use your chain of command to develop additional competency. Together you can develop an action plan for gaining competency.

Refuse to accept the newly assigned task. You will need to document your concerns for patient safety as well as the process you use to inform your employer of your decisions. Keep a personal copy of this documentation and send a copy to the nurse executive. Courtesy requires you also send a copy to your nurse manager. When you refuse to accept the assigned task, be prepared to offer options such as transfer to another unit (if this new role is just for your unit) or perhaps a change in work assigned tasks with your colleagues. Keep in mind though, when you refuse an assignment you may face disciplinary action, so it is important that you be familiar with your employer's grievance procedure.

Other Considerations:

Does your employing facility policy allow you to perform activity?

The nurse should follow the facility policy or procedure to complete the task.

Record of education and supervised clinical practice is maintained.

Advisory Opinion

Incorporating New Procedures/Skills into the Practice of the Registered Nurse Practitioner
Formal education and specialty certification is the foundation of the Registered Nurse Practitioner's (RNP) Professional Scope of Practice and is defined by law (ARS § 32-1601 (15) (d)) and A.A. C. R4-19-508. Personal Scope of Practice evolves over the professional lifetime of the individual and may change in conjunction with the clinical setting, new and existing research, standards of care and new technology. However, personal scope of practice can never exceed legal scope of practice.

Under A.A.C. R4-19-508 (C), "An RNP shall only provide health care services within the nurse practitioner's scope of practice for which the RNP is educationally prepared and for which competency has been established and maintained. Educational preparation means academic coursework or continuing education activities that include both theory and supervised clinical practice." Increasing skills can occur in a variety of ways, including guided and supervised practice, in-service education, and continuing education. Providing safe, high quality, and evidence based care should be the focus of the RNP as they make decisions regarding their Personal Scope of Practice.

When making decisions about incorporating a new procedure or skill, the RNP should first refer to the Scope of Practice Decision Tree (2009) referenced below. Not only must the RNP be competent in the skill, but the RNP must be able to safely manage any complications arising from performance of the skill. The RNP is responsible to maintain records that reflect the acquisition and maintenance of competency.

Example of documentation:

1. General:
 - a. A written policy and procedure are maintained by the RNP or employer when applicable.
 - b. Documentation of satisfactory completion of the instruction.
 - c. Documentation of satisfactory supervised practice.
2. Course of Instruction should include:
 - a. Anatomy and physiology of the body system.
 - b. Indication and contraindications
 - c. Potential adverse reactions
 - d. Manipulation of instrumentation (if applicable).
 - e. Distinguishing between normal and abnormal findings.
 - f. Patient care surrounding the procedure, including the management of potential complications.

References:

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<http://www.nursingworld.org/EspeciallyForYou/AdvancedPracticeNurses/Scope-of-Practice.aspx>

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