

## Missouri State Board of Nursing

The mission of the Missouri State Board of Nursing is to protect the public by development and enforcement of state laws governing the safe practice of nursing.

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 as 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 parameters of the practice scopes are defined by basic licensure preparation and advanced education. Within this scope of practice, all nurses should remain current and increase their expertise and skill in a variety of ways, e.g., practice experience, in-service education, and continuing education. Practice responsibility, accountability, and relative levels of independence are also expanded in this way.

The licensed nurse is responsible and accountable, both professionally and legally, for determining his/her personal scope of nursing practice. Since the role and responsibilities of nurses, and consequently the scope of nursing practice, is ever changing and increasing in complexity, it is important that the nurse makes decisions regarding his/her own scope of practice.

## THE PRACTICE OF NURSING

### **The Practice of Professional (Registered) Nursing:**

The performance for compensation of any act which requires substantial specialized education, judgment and skill based on knowledge and application of principles derived from the biological, physical, social and nursing sciences, including, but not limited to:

- Responsibility for the teaching of health care and the prevention of illness to the patient and his or her family;
- Assessment, nursing diagnosis, nursing care, and counsel of persons who are ill, injured or experiencing alterations in normal health processes;
- The administration of medications and treatments as prescribed by a person licensed by a state regulatory body to prescribe medications and treatments;
- The coordination and assistance in the delivery of a plan of health care with all members of a health team;
- The teaching and supervision of other persons in the performance of any of the foregoing.

**335.016.(10), RSMo 2000**

### **The Practice of Advanced Practice Nursing:**

A nurse who has had education beyond the basic nursing education and is certified by a nationally recognized professional organization as having a nursing specialty, or who meets criteria for advanced practice nurses established by the board of nursing. **335.016.(2), RSMo 2000.**

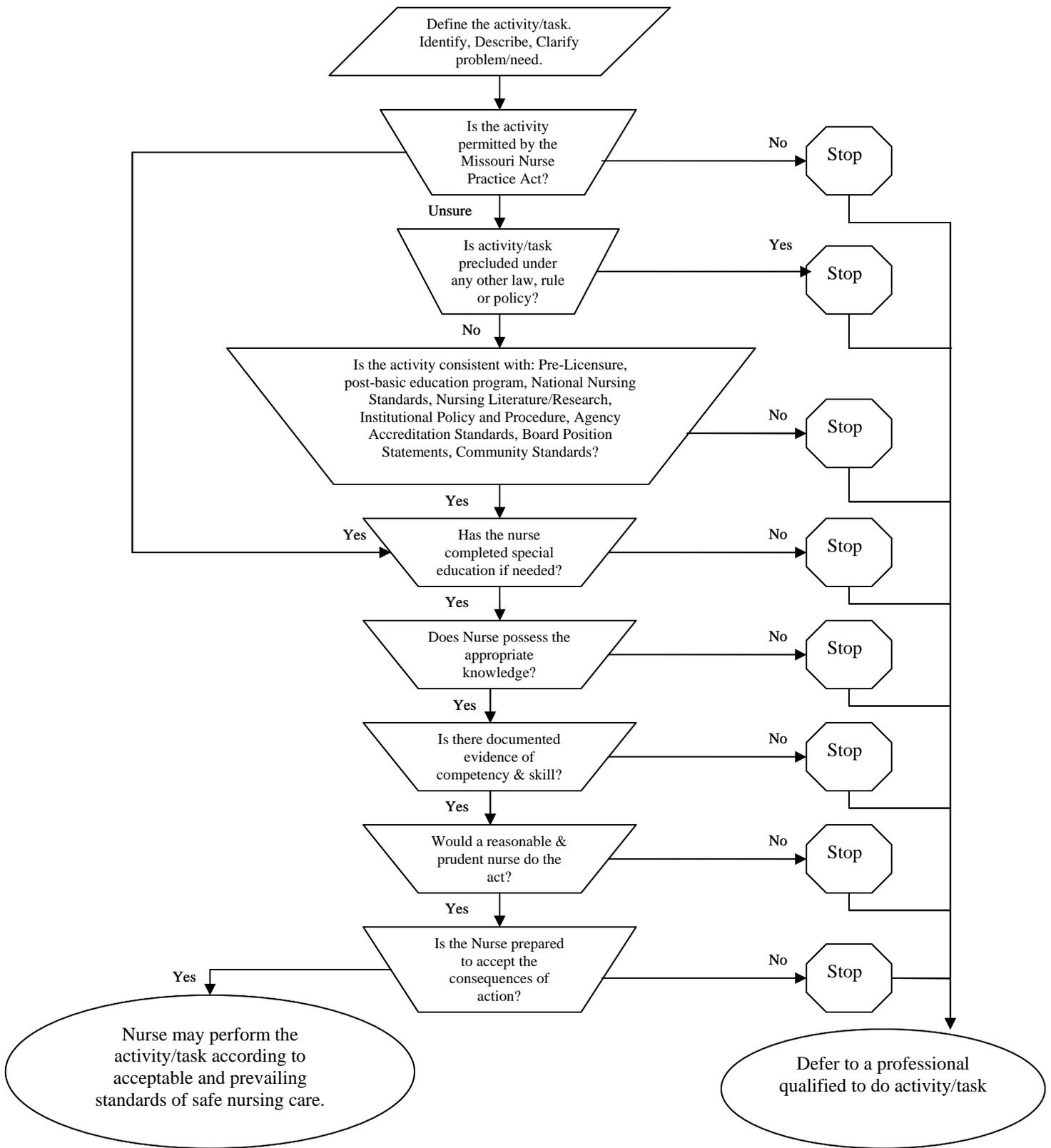
Advanced practice nurses shall function clinically within the professional scope and standards of their advanced practice nursing clinical specialty area and consistent with their formal advanced nursing education and national certification, if applicable, or within their education, training, knowledge, judgment, skill, and competence as a registered professional nurse. **20 CSR 2200-4.100(5).**

### **The Practice of Practical Nursing:**

The performance for compensation of selected acts for the promotion of health and in the care of persons who are ill, injured, or experiencing alterations in normal health processes. Such performance requires substantial specialized skill, judgment and knowledge. All such nursing care shall be given under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse. For the purposed of this chapter, "direction" shall mean guidance or supervision provided by a person licensed by a state regulatory board to prescribe medications and treatments or a registered professional nurse, including, but not limited to, oral, written, or otherwise communicated orders or directives for patient care. When practical nursing care is delivered pursuant to the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a registered professional nurse, such care may be delivered by a licensed practical nurse without direct physical oversight.

**335.016.(9), RSMo 2000**

## Scope of Practice Decision Making Model



## Decision Making Process

### 1. Define the Activity/Task:

**Clarify** what is the problem or need?  
**Who** are the people involved in the decision?  
**What** is the decision to be made and where (what setting or organization) will it take place?  
**Why** is the question being raised now?  
Has it been discussed previously?

### 2. Is the activity permitted by Missouri Nurse Practice Act?

**NO** – Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question # 5 – Special education needed?  
**Unsure** -- Go to Question # 3 – Precluded by other law, rule, or policy?

### 3. Is activity/task precluded under any other law, rule or policy?

**No** – Go to Question #4 – Consistent with....  
**Yes** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.

### 4. Is the activity consistent with:

**Pre-licensure/post-basic education program**  
**National Nursing Standards**  
**Nursing Literature/Research**  
**Institutional policies and procedures**  
**Agency Accreditation Standards**  
**Board Position Statements**  
**Community Standards?**

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question # 5 – Special education needs?

### 5. Has the nurse completed special education if needed?

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question # 6 – Possess appropriate knowledge?

### 6. Does nurse possess appropriate knowledge?

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question #7—Documented competency?

### 7. Is there documented evidence of competency & skill?

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question #8 – Reasonable & prudent nurse?

### 8. Would a reasonable & prudent nurse perform the act?

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/task.  
**Yes** – Go to Question #9 – Prepared to accept consequences?

### 9. Is nurse prepared to accept the consequences of action?

**No** -- Stop. Defer the activity/task to a professional qualified to do the activity/.  
**Yes** – Nurse may perform the activity/task according to acceptable and prevailing standards of nursing care.

## Guidelines for Decision Making

The nurse is constantly involved in the decision-making and problem solving process, whether as a staff nurse or a manager, regardless of the practice setting. Although their perspectives are different the process is the same. The following steps are basic to the process.

**Clarify:** What is the problem or need?  
Who are the people involved in the decision?  
What is the decision to be made and where (what setting or organization) will it take place?  
Why is the question being raised now?  
Has it been discussed previously?

**Assess:** What are your resources?  
What are your strengths?  
What skills and knowledge are required?  
What or who is available to assist you?

**Identify** What are possible solutions?  
**Options:** What are the characteristics of an ideal solution?  
Is it feasible?  
What are the risks?  
What are the costs?  
Are they feasible?  
What are the implications of your decision?  
How serious are the consequences?

**Point of** What is the best decision?  
**Decision:** When should it be done?  
By whom?  
What are the implications or consequences of your decision?  
How will you judge the effectiveness of your decision?

## Application of Guidelines for Decision Making

### **Clarify what it is you are being asked to do:**

- ◆ Gather facts that may influence the decision.
- Are there written policies and procedures available to describe how and under what conditions you will perform this task?
- Does the new responsibility require professional judgement or simply the acquisition of a new skill?
- Is this a *new* expectation for all RNs? LPNs? APRNs?
- Has this been done before by others in your unit or health care facility?
- Is it just new to you?
- What about the other facilities in your community or region?
- What are the nurse manager's expectations about you or other RNs, LPNs, APRNs, becoming responsible for this procedure?
- When will this become effective?
- Will there be an opportunity to help you attain the needed clinical competency?
- Who will be responsible for the initial supervision and evaluation of this newly performed task?
- Will you be given additional time to learn the skill if you need it?

### **Assess:**

- Are you clinically competent to perform this procedure?
- Do you currently have the knowledge and skills to perform the procedure?
- Have you had experience in previous jobs with this procedure?
- Who is available to assist you who has that skill and knowledge?
- Is that person accessible to you?
- Do you believe you will be able to learn the new skill in the allotted time?
- How can you determine that you are practicing within your scope of nursing?
- What is the potential outcome for the patient if you do or do not perform the procedure?

### **Identify options and implications of your decision. The options include:**

- The responsibility/task is not prohibited by the Nurse Practice Act.

If you believe that you can provide safe patient care based upon your current knowledge base, or with additional education and skill practice, you are ready to accept this new responsibility.

You will then be ethically and legally responsible for performing this new procedure at an acceptable level of competency.

If you believe you will be unable to perform the new task competently, then further discussion with the nurse manager is necessary.

At this point you may also ask to consult with the next level of management or nurse executive so that you can talk about the various perspectives of this issue.

It is important that you continue to assess whether this is an isolated situation just affecting you, or whether there are broader implications. In other words, is this procedure new to you, but nurses in other units or health care facilities with similar patient

populations already are performing? To what do you relate your reluctance to accept this new responsibility? Is it a work load issue or is it a competency issue?

At this point, it is important for you to be aware of the legal rights of your employer. Even though you may have legitimate concerns for patient safety and your own legal accountability in providing competent care, your employer has the legal right to initiate employee disciplinary action, including termination, if you refuse to accept an assigned task. Therefore, it is important to continue to explore options in a positive manner, recognizing that both you and your employer share the responsibility for safe patient care. Be open to alternatives.

In addition, consider resources which you can use for additional information and support. These include your professional organization, both state and national, and various publications. The American Nurses Association Code for Nurses, standards on practice, and your employer's policies and procedures manuals are valuable resources. The Nurse Practice Act serves as your guide for the legal definition of nursing and the parameters that indicate deviation from or violation of the law.

### **Point of decision/Implications.**

#### **Your decision maybe:**

**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 procedure manual. You are now legally accountable for its performance.

**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 enough to proceed after the initial inservice, then it is your responsibility to let the educator and nurse manager know you need more time. 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.

**For additional information on the Nurse Practice Act, Rules and Regulations, and Position Statements see the MSBN web page: <http://pr.mo.gov/nursing.asp>**