



## **Nursing Care Quality Assurance Commission**

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### **Determining Your Scope of Practice**

Advisory opinions are the mechanism by which the Nursing Commission can answer questions related to the scope of practice for nursing. Advisory opinions are created in response to nurses and health care providers and/or consumers who have questions about how to interpret the nurse practice act and/or how to apply the nursing process to their particular practice situation. Requests for a formal advisory opinion are sometimes preceded by a call to the nursing commission for guidance on a clinical or practice issue. During the course of describing the clinical/practice situation, the commission will refer to the Law Relating to Nursing RCW 18.79 and the rules (WAC 246-840) which offer additional clarification in applying the law to practice. Often nurses have questions about a particular task or procedure to which they want a definitive yes or no answer. For example, can I as a registered nurse take an order from an office nurse who is working with a physician? The nurse practice act/law for nursing has not specifically delineated tasks and procedures or a “laundry list” of activities that are allowed. Rather, the laws and rules give a broad, process oriented description of acceptable nursing practice. However, there are some common definitions listed in the rules and guidelines that relate directly to the nursing process.

The approach used by the nursing commission in answering practice questions is to first identify the level of licensure. The context of the clinical situation is also relevant. The degree of independence in performing the activity, skill, or procedure is considered. The questions are raised such as, has the patient-prescriber relationship been established? Is the nurse following the prescribed medical regimen? What level of preparation is necessary in order to perform the skill safely and competently? Are there quality assurance mechanisms in place in order to evaluate the performance of the skill or task? What is the community standard? Is there a current body of knowledge cited in the nursing literature?

Over the years, the Nursing Commission has answered many practice questions without a formal advisory opinion. However, there are clinical issues that are more complex than can be answered by trying to apply the nursing process. There may be issues of cross-discipline scope of practice and other regulatory concerns. The option of requesting an advisory opinion is always available. However, there may be existing advisory opinions that are related to the practice issue and it may be useful to review the approach used by the commission in answering similar questions.

The Commission encourages the Washington nurses to empower themselves to determine their own scope of practice. In 1999, the Commission adopted and published a decision tree for determining nursing scope of practice. The Commission will continue to provide guidance and tools to help nurses make well informed decisions about their practice.

The Nursing Commission is responsible for regulating the practice of nursing in our state. This does not mean that the Commission will decide how nurses will practice in the various practice settings, but whether or not that practice meets the standard of conduct established in the Nurse Practice Act. Using the following guidelines and the attached decision tree, nurses may decide what is within their scope of practice.

#### A. Basic Nursing Education Preparation

1. Was the skill/task taught in your basic nurse program?
2. If a task has become so routine in the nursing literature and in nursing practice, it can reasonably and prudently be assumed within scope.
3. Is the task/skill in your hiring agency policy and procedure manual?
4. If it was not included in your basic nursing education, have you since completed a comprehensive training program, which included clinical experience. Has this training been documented in your personnel file?
5. Does carrying out the duty pass the “reasonable and prudent” standard for nursing?
6. Is the action reflective of the consumer’s desires and is it appropriately authorized?

If you can answer “yes” to all the above questions, the task is within your scope of practice and you do not need to seek an advisory opinion from the commission. If you cannot answer “yes” to the above, please proceed to option B.

#### B. Nursing Commission Advisory Opinion

1. Has the Washington State Nursing Commission made an advisory opinion regarding the task/skill?
2. Is the task/skill in your hiring agency policy and procedure manual?
3. Is your competency in performing this task documented in your personnel file?
4. Does carrying out the duty pass the “reasonable and prudent” standard for nursing?
5. Is the action reflective of the consumer’s desires and is it appropriately authorized?

If you can answer “yes” to the questions in section B, the task is within your scope of practice and you do not need to seek an advisory opinion from the commission. If you cannot answer “yes” to the above, please proceed to option C.

#### C. Existing Literature and Research

1. Is this a big, new task you have never done in your facility before?
2. What information exists related to the standard of care from a local, community or national perspective related to the task/skill?
3. Are there statements and opinions from professional groups or nursing organizations about the task/skill?
4. Does the task/skill meet the requirements of the Washington nursing law (nurse practice act)?
5. Does carrying out the duty pass the “reasonable and prudent” standard for nursing?

If you can answer “yes” to these questions, your institution may consider including the task/skill in the policies and procedures, document individual competency and proceed with performance of the task/skill.

If you cannot answer “yes” to the questions in section C above and you would like the nursing commission to consider issuing an advisory opinion, you may:

1. Obtain an advisory opinion request from the Commission office;
2. Complete the review of the literature and gather information using criteria provided by the Commission; and,
3. Submit 5 copies of the results for review and consideration by the Nursing Commission. After the commission makes a recommendation, the conclusion will be sent to you following the next regularly scheduled Commission meeting.