

Nursing Scope & Standards of Practice Regulation

REGULATIONS FOR SAFE NURSING CARE

Objectives

Describe laws and rules that impact scope of practice

Describe the importance of nurses practicing to their full extent of their education, training & competencies within the legal scope of practice

Nursing Practice

Nursing Practice is not just a list of tasks.

It is a process that changes & advances.

Any definition of the scope of practice must be flexible & broad enough to permit changes in practice consistent with trends in nursing and related health professions.

Key Principles & Assumptions

Responsibility & accountability is fundamental

Changes in scope of practice (SOP) are inherent

SOP is individualized

Overlapping SOP is common

Public protection is the priority

Standards of Conduct & Practice

Purpose

- Identifies nursing responsibility & accountability
- Violations may be grounds for disciplinary action

“The nurse shall be responsible & accountable for the quality of nursing care given”

“Responsibility cannot be avoided by accepting orders or directions of another person”

246-840-700 WAC

Standards & Responsibilities

Communicate

Document

Advocate

Know nursing and related laws & rules

Function within scope of practice

Maintain current knowledge in practice area

Follow privacy and HIPAA laws

SOP Decision Tree

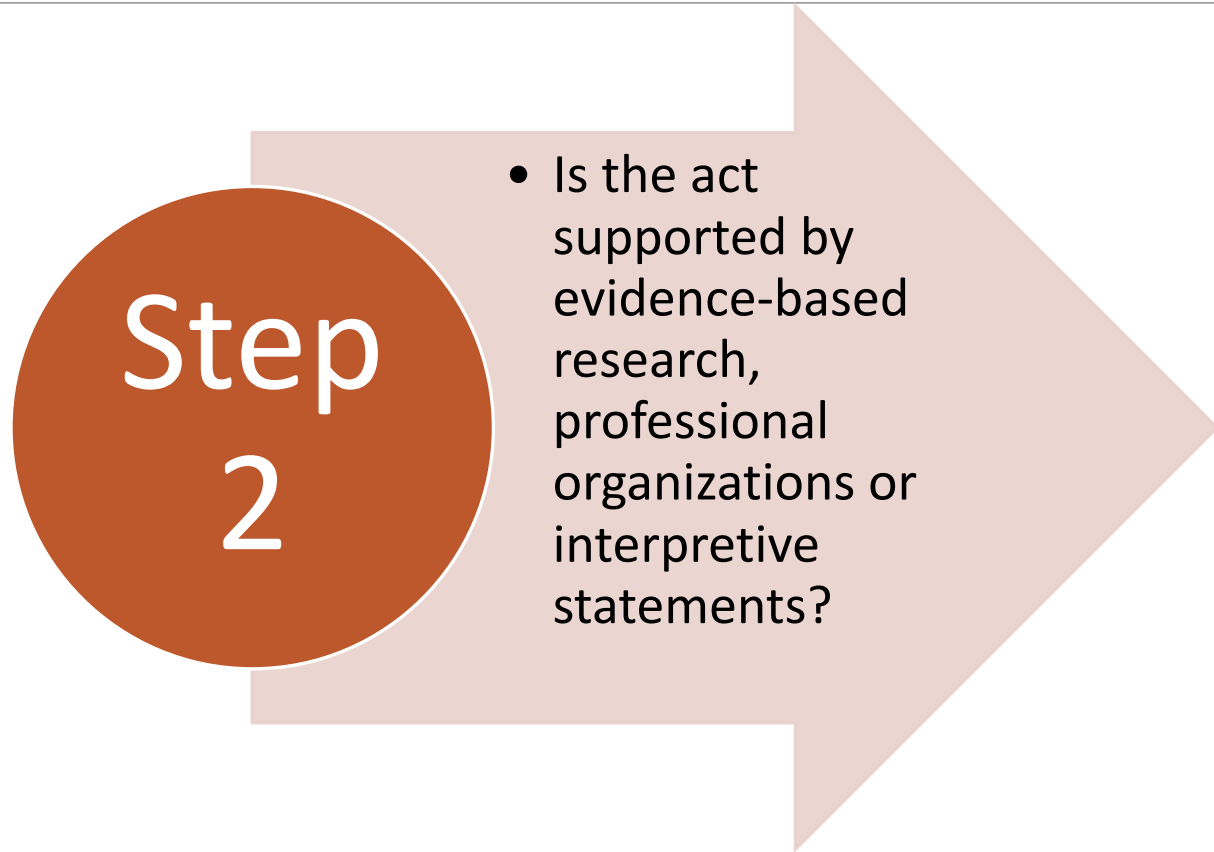
Is the act **consistent** with WA State Nurse Practice Act & other regulations?



Step
1

- Is the act consistent with WA State Laws, Rules & other regulations?

SOP Decision Tree



SOP Decision Tree



Step
3

- Do you have the required knowledge, skills & competency to perform this act safely?

SOP Decision Tree



Step
4

- Is the act supported by facility policies & procedures?

SOP Decision Tree



Step
5

- Would a reasonable & prudent nurse perform this act in this setting?

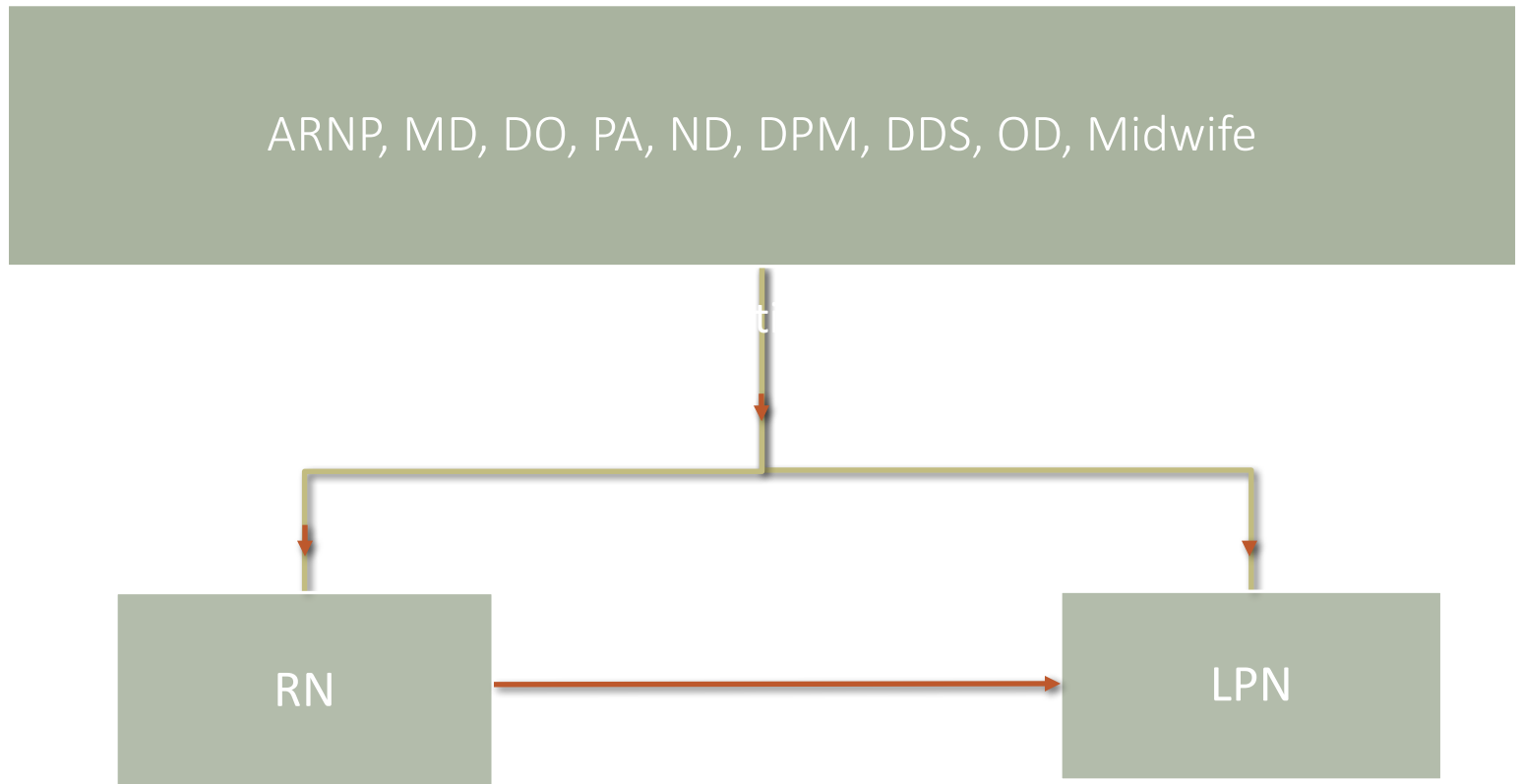
SOP Decision Tree



Step
6

- Are you prepared to assume accountability for the provision for safe care & the outcome of the care given?

Medical Regimens



TERCAP – WA State Snapshot

Nurse Characteristics

Nurse's Age (57 years or older) 51.19%

Primary Language: English: 81.02%

Licensure Type:

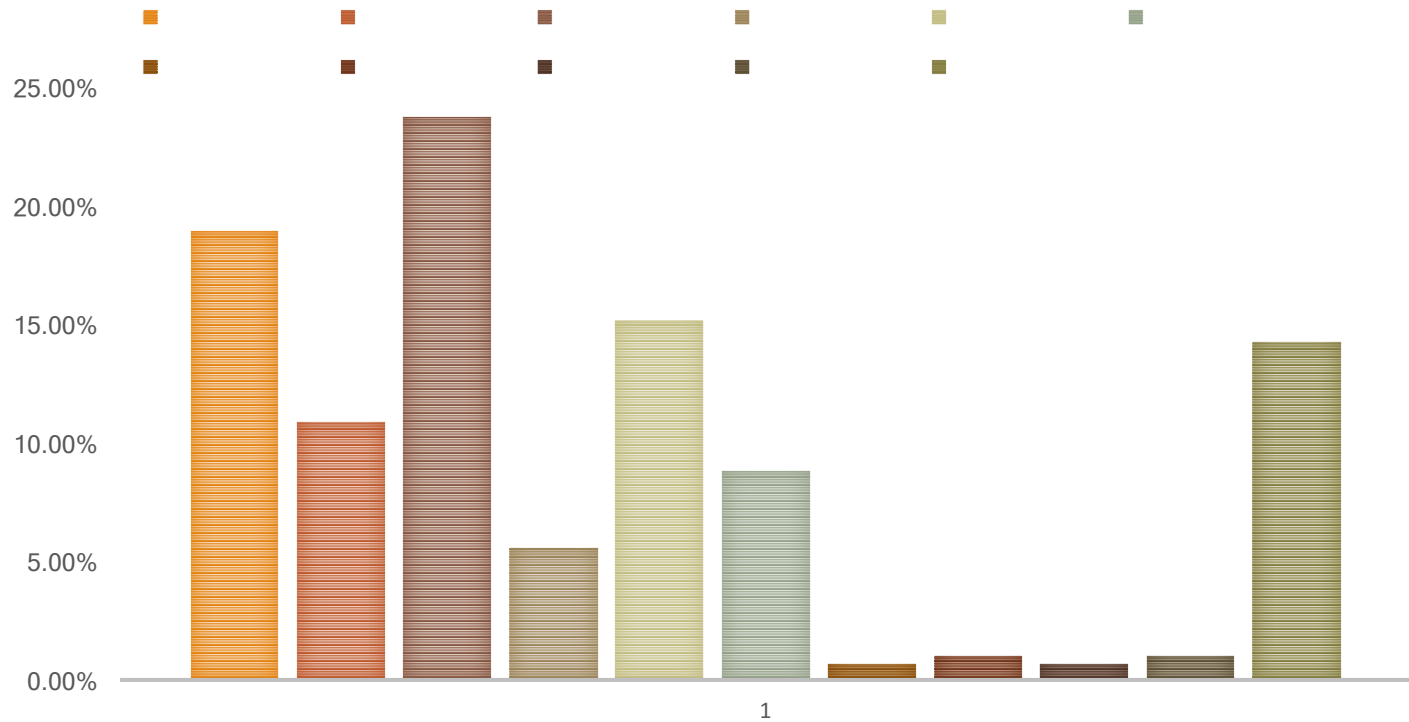
- RN: 70.85%
- LPN: 26.44%
- ARNP: 9.83%

Employment (worked in location where error occurred)

- < 1 month – 1 year: 2.03%
- 1 – 5 years: 12.54%
- > 5 years: 18.07%

Termination: 29.83%

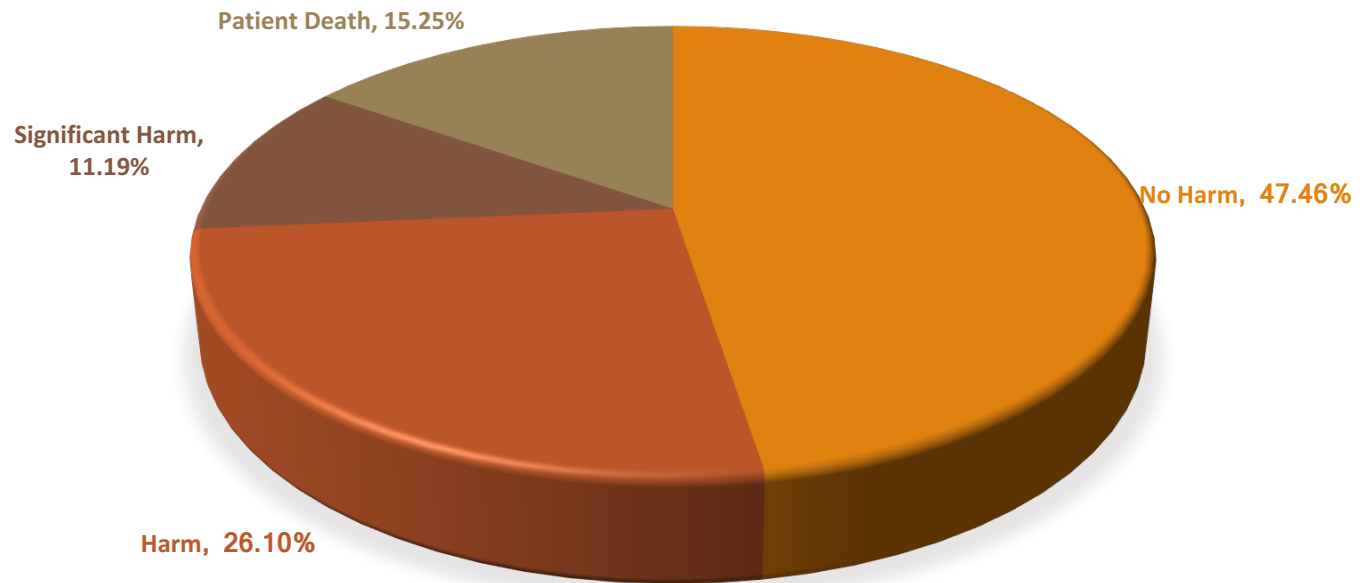
TERCAP Snapshot



TERCAP – WA State

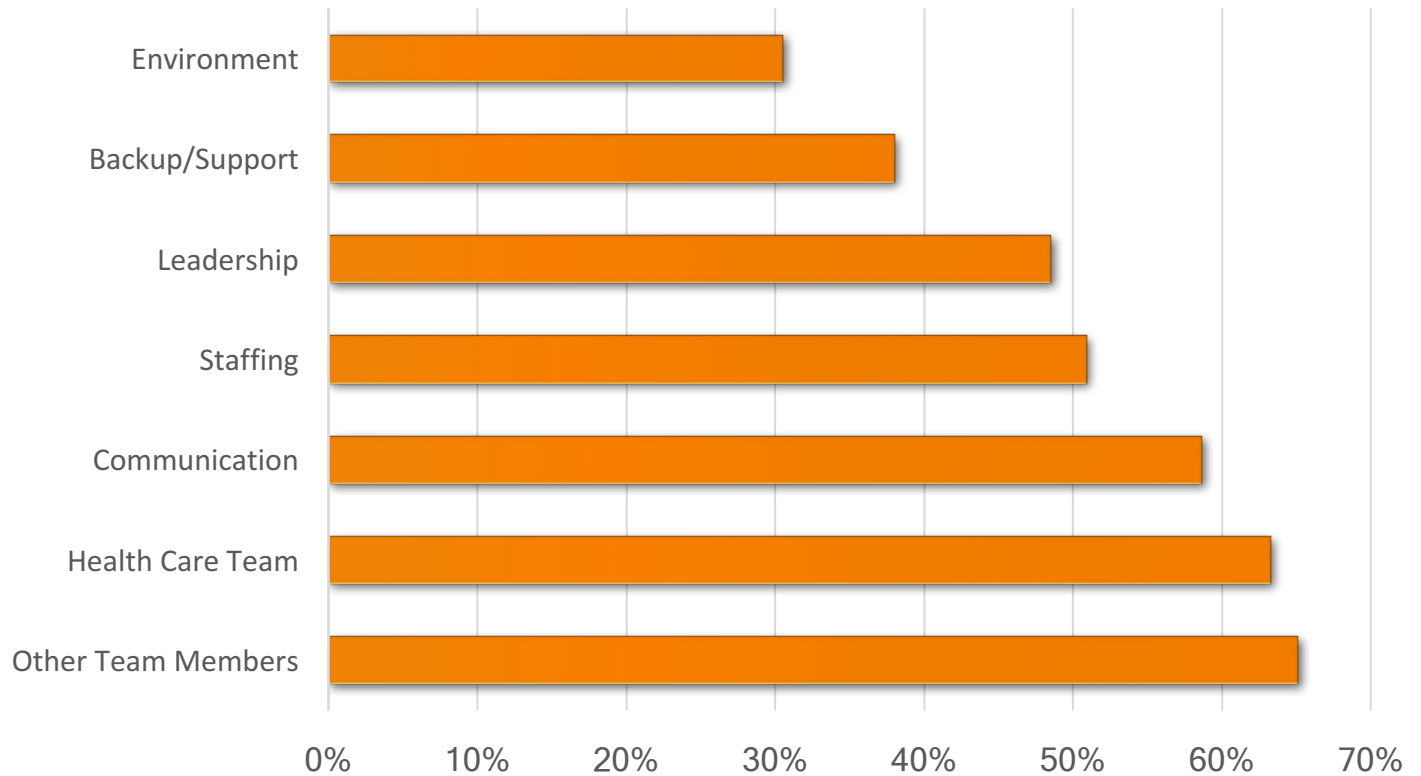
Patient Characteristics

TERCAP SNAPSHOT: PATIENT HARM



TERCAP – WA State Systems Factors

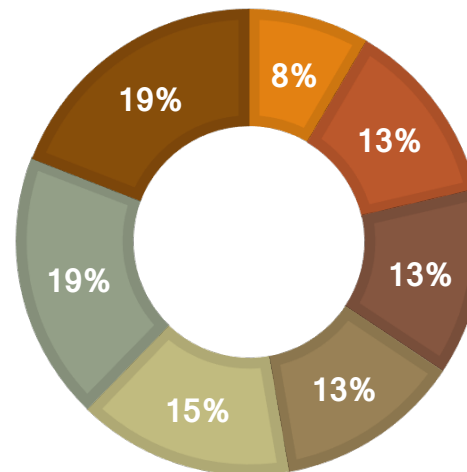
TERCAP Snapshot: Systems Factors



TERCAP Snapshot

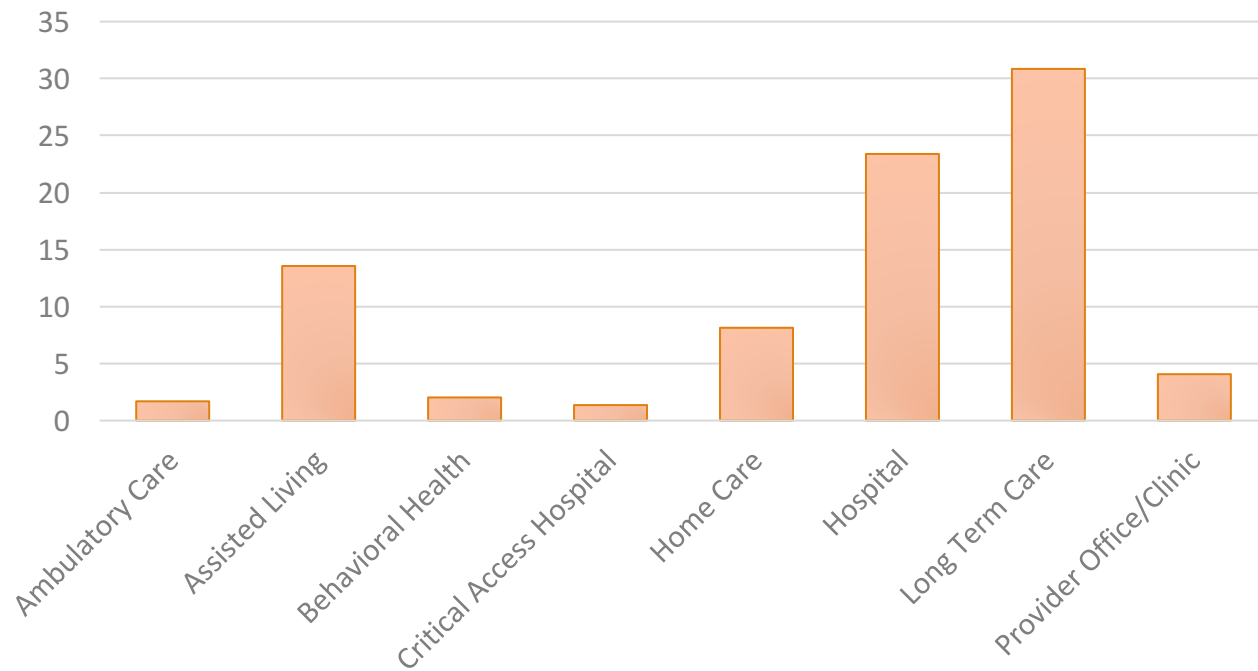
ERROR TYPES

- Medication Error
- Prevention
- Documentation
- Interpretation
- Intervention
- Clinical Reasoning
- Professional Responsibility



TERCAP Snapshot

TERCAP Snapshot: Facility Type



Patient Abandonment

What is patient abandonment?

What is it not patient abandonment?

Patient Abandonment – Key Concepts

Establishment of a nurse-patient relationship – Nursing Assignment

Leaving assignment without transferring care

Patient Abandonment



Abandonment

- Leaving emergency situation
- Sleeping on duty
- Ending a contractual relationship without adequate notice
- Leaving the patient in an unsafe situation to give care to an unassigned patient



Employee Problem

- Failing to call in, show up, or arrive late for an assigned shift
- Not working the remaining posted schedule

Scenario/Discussion

You accepted an assignment for a patient who needs a procedure that you do not feel competent to perform. Would refusing to perform the procedure mean you've abandoned your patient?

Agreeing to perform an activity that is outside your competency is acting outside your scope of practice, a violation. The answer is “no” as long as you refuse in an appropriate manner. It is your responsibility to immediately inform your supervisor. Document your objections.

Scenario/Discussion

You just finished a 12-hour shift, only to find out that no other nurse is available to relieve you. On the other hand, you accepted assignment at the beginning of your shift. Is this patient abandonment?

No. You accepted a patient assignment for your 12-hour shift. Refusing to continue is not patient abandonment.

Scenario/Discussion

You went home that evening after your shift ended and decided you would just not go to work the next morning. You did not call in to notify your employer that you have no intentions of returning to work. Is this patient abandonment?

No. Resigning without advanced notice after your patient assignment ends is not patient abandonment.

Scenario/Discussion

You provide home nursing care and have a contract agreeing to provide nursing care for 4 hours a day (Monday-Friday) to a patient for 3 months. A week into the contract, you tell your patient that you won't be able to provide care on Tuesday as arranged. Is this patient abandonment?

Yes. Ending a contractual relationship without giving adequate notice so that other arrangements can be made.

Scenario/Discussion

You are on shift at a hospital that is experiencing severe flooding and structural damage. Patients are being evacuated. The area you and your assigned patients (that were not able to leave the area already) are located is an unsafe area with rapidly-rising flood water. The only exit remaining is almost impassable and the remaining patients will not be able to get through the door. You decide to leave the area. Is this patient abandonment?

You will need to weigh your duty to provide care with your own safety. Leaving a scene that is dangerous for the nurse is not automatically considered patient abandonment.

Resources

Chapter 18.79 RCW Nursing Care:

<http://apps.leg.wa.gov/RCW/default.aspx?cite=18.79&full=true>

Chapter 246-840 WAC Practical & Registered Nursing:

<http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840&full=true>

Nursing Care Quality Assurance Commission Practice Information:

<http://www.doh.wa.gov/LicensesPermitsandCertificates/NursingCommission/PracticeInformation.aspx>

NCQAC Contacts

Ask a Scope of Practice Question:

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Questions
