Mission

The mission of the North Carolina Board of Nursing is to protect the public by regulating the practice of nursing.

NCBON Regulatory Authority

- Legislative Authority to regulate nursing is codified in NC G.S.90-171 – Nursing Practice Act (NPA)
- Components of Practice defined in G.S.90-171.20 (7) and (8)
- Rules for Occupational Licensing Boards- North Carolina Administrative Code - NCAC Title 21:Chapter 36
- RN practice is independent
- LPN practice is dependent/directed
Healthcare System Challenges

- Pressure to expand scope
- Pressure to use least costly employees to deliver care
- Pressure to lower standards

Relevance for Healthcare Leaders

- Vigilance to uphold standards in education and practice
- Realistic expectations to contain costs and deliver care
- Need for innovation and collaboration

RN/LPN Scope of Practice

What defines RN/LPN scope of practice?

- Nursing Practice Act - Law
- NC Administrative Code - Rules
- Level of Licensure – RN or LPN
- Board Interpretive Statements/Opinions
- Agency Policy/Procedure - can restrict, but not expand scope
Registered Nurse

- Full scope of nursing, comprehensive care for all clients in all settings
- Teaching theory and practice of nursing, managing nursing personnel, and administering nursing services

Clarification of RN Scope

Responsibilities:
- Comprehensive client assessment
- Plan and evaluate nursing care
- Implement nursing care
- Teach & counsel clients
- Collaborate with multidisciplinary team
- Manage delivery of nursing care; supervise, teach & evaluate nursing personnel
- Administer nursing services
- Accept responsibility for nursing actions

Licensed Practical Nurse

- Directed scope of nursing, under supervision of RN, APRN, MD or other authorized provider
- Collecting focused data
- Contributing to and participating in the comprehensive care of clients
Clarification of LPN Scope

Responsibilities:
- Participate in focused client assessment
- Participate in planning & evaluation
- Implement established plan of care as assigned
- Report and record client information
- Collaborate in implementing health care plan
- Participate in teaching & counseling clients
- Accept responsibility for nursing actions

PH Nursing Supervisors and Directors

- Responsibilities of Public Health Nursing Supervisors and Directors
  - Managing Nursing Services
  - Administering Nursing Services

RN ONLY Managing Nursing Services

- RN is accountable for validating qualifications of nursing personnel and establishing mechanisms for validation of competency
- RN makes final determination of competency
- LPN may participate in on-the-job validation that tasks have been performed according to agency policy/standards
RN ONLY
Administering Nursing Services

• Identification and implementation of standards, policies and procedures regarding nursing care
• Planning and Evaluation of Nursing Care Delivery System
• Management of Personnel

RN/LPN Scope of Practice

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<td>Implementation 1) Supervision not required 2) Assign and delegate to RNs, LPNs, UAP 3) Broad supervisory responsibility</td>
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RN/LPN Scope of Practice

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Delegation: Definitions

- **Delegation**: Transferring to a competent individual the authority to perform a selected nursing activity in a selected situation. The nurse retains the accountability for the delegation.

- **Assignment**: Designating responsibility for implementation of a specific activity or set of activities to a person licensed and competent to perform such activities.

Assignment and Delegation

- RN assigns to RNs & LPNs within Scope of Practice and delegates to all Unlicensed Assistive Personnel (UAP)
- LPN assigns to other LPNs within Scope of Practice and delegates to qualified UAP validated as competent by the RN
  - LPN has limited supervisory authority
  - LPN may not assign to or supervise RNs
  - Under the continuous supervision and availability of the RN

More Definitions

- **Accountability/Responsibility**: Being answerable for actions or inaction of self, and of others in the context of delegation or assignment.

- **Supervision**: The provision of guidance or direction, evaluation, and follow-up by the licensed nurse for the accomplishment of an assigned or delegated nursing task.

RN and LPN are answerable for actions or omissions of self and others in the context of assignment or delegation - not personally responsible for everything that happens
Criteria for Delegation of Tasks to UAP

- Performed frequently
- Established sequence of steps in task
- Little or no modification from one client to another
- Predictable outcome
- Separate task performance from interpretation/decision making

21 NCAC 36.022 1-License Required

What Activities May Be Delegated?

- Determined by
  - Knowledge/skills of unlicensed personnel
  - Verification of clinical competence
  - Stability of client’s condition
    - Predictability
    - Absence of risk of complication
    - Rate of change
    - Variables in the practice setting

21 NCAC 36.040 1 Roles of UAP

Delegation of Tasks to UAP

RN maintains accountability for:
- Validating competency of UAP
- On-going patient assessment
- Evaluation of client’s response to care
- Interpretation/decision-making regarding client care
Delegation of Tasks to UAP

LPN is accountable for:

- Verifying qualifications (as validated by RN) of staff
- Participation in on-going observations and evaluation of client’s response to care
- Supervision limited to validation that tasks have been performed as assigned or delegated and according to standards of care

The Five Rights of Delegation

- **Right Task** - One that is delegable for a specific client.
- **Right Circumstances** - Appropriate client setting, available resources, and other relevant factors considered.
- **Right Person** - Right person is delegating the task to the right person to be performed on the right client.
- **Right Direction/Communication(s)** - Clear concise description of task, including objectives, limits and expectations by delegator.
- **Right Supervision** - Appropriate monitoring, evaluation, intervention as needed, and feedback to delegatee

NCBON Practice Resources

- Position Statements
- Decision Trees
- Joint Statements
- Frequently Asked Questions (FAQ’s)
- Practice Consultants
Licensed Nurse’s Role in Assigning to RN/LPNs and Delegating to UAPs

- Decision Tree for RN/LPN Delegation to UAP
- Decision Tree for RN/LPN Scope of Practice

Accepting an Assignment

- Licensee is responsible for accepting only assignments that he/she is competent to perform

Accepting an Assignment

- Based on variables of each practice setting—
  - stability of clients;
  - complexity and frequency of care;
  - available resources, including qualifications and number of staff and proximity of clients to personnel
  - policies, procedures, and communication channels

- LPN must consider the degree of RN supervision .0225 (a) (2)
Advanced Practice Registered Nurses

- Expanded scope of nursing practice
- Graduate degree with advanced knowledge of theory, assessment, interventions, and management of health care
- NP, CRNA, CNM, CNS

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Questions/Discussion