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Nursing Scope, Law & Rules, and Policy & Procedure

Brittany Turner, MSN, RN, CNEcl, NPD-BC
Director of Continuing Education, Ohio Nurses Association

This article is not legal advice. Should legal advice be needed, seek legal counsel.

Ask Nurse Jesse: 'What should I do when I am asked to perform care on a patient that I have never done before? What do I do when management tells me that I must perform the nursing care ordered, and that if I don't, I will be reported? – Ohio RN'

There are a lot of factors to consider when a nurse feels that they have been asked to provide care that they are not comfortable providing. A nurse who has never done a particular skill or assessment may feel unprepared to complete it, and understandably has reservations. Resources that should be considered in this situation are the Ohio Revised Code (ORC) 4723, Ohio Administrative Code (OAC) 4723, Ohio Board of Nursing Decision Making Model, internal organizational policy, and any related ORC to the specific situation.

The OBN Decision Making Model

According to the Ohio Board of Nursing, the RN/LPN Decision Making Model should help nurses determine if they can perform the care in question.

According to the Ohio Board of Nursing (2019):

"The Decision Making Model is a guide for registered nurses (RNs) and licensed practical nurses (LPNs) to use when determining whether a specific procedure, task or activity is within the RN's or LPN's scope of practice and, if so, whether the specific procedure, task or activity is consistent with standards of practice, appropriate to perform based on the individual nurse's knowledge and skills, and appropriate based on the clinical setting."

The Ohio Board of Nursing (2019) also states "All nurses are responsible for knowing and practicing within the legal scope of practice set forth in Section 4723.01 (B), Ohio Revised Code (ORC) for RNs and Section 4723.01(F), ORC, for LPNs. In addition, RNs and LPNs are responsible for knowing and following the Standards of Practice for RNs and LPNs established in Chapter 4723-4, Ohio Administrative Code."

The Board of Nursing offers interpretive guidelines on their website that offer additional insight and guidance related to very specific nursing care situations. They are a great resource. However, the Board states that "Because it is not possible for the Board to establish Interpretive Guidelines for every procedure, task or activity, the Decision Making Model was developed so nurses could use it with their specific practices" (Ohio Board of Nursing, 2019). Therefore, while there are interpretive guidelines for some specific situations, the Decision Making Model can be used and applied by any nurse in Ohio for various situations.

The Decision Making Model states that the nurse must be able to demonstrate and document the knowledge, skills, and abilities to perform the assessment, skill, or care ordered. This is one of the simplest, yet often overlooked pieces of assessment in nurse decision making related to an unfamiliar situation. The nurse's assessment of their own knowledge, skills, and abilities does need to be reasonable, defensible, demonstrable, and able to be documented.

The Decision Making Model above is also available online at <https://nursing.ohio.gov/resources-for-practice-and-prescribing/resources/02-rn-and-lpn-decision-making-model>

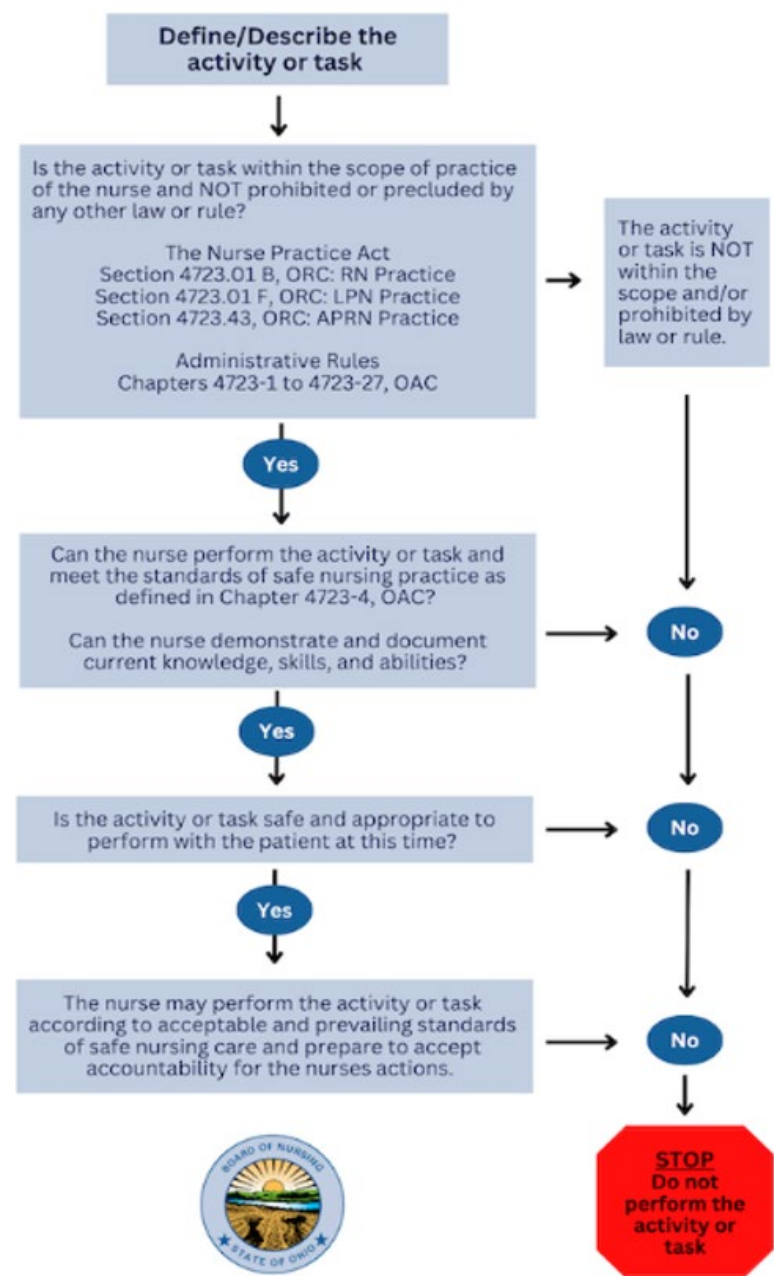
ORC and OAC

As mentioned above, Ohio nurses are required to know what ORC and OAC 4723 each say about their scope of practice. However, there are often times instances where another portion of the Ohio Revised Code or Administrative Code may have something to say about nurses that the nurse can use in their decision making.

For example, OAC 4731-18-03 outlines physician delegation for a specific type of laser treatment. While laser treatment isn't specifically called out in ORC or OAC 4723, a nurse could use this other portion of OAC to inform their knowledge of the procedure and how it may likely fit, or not fit, into the allowed scope of practice in Ohio.

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RN & LPN Decision Making Model



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Nurses & Health Professionals Lobby Day

Formerly Known as Nurses Day at the Statehouse (NDASH)



Understaffing = Patient Care Crisis

April 24, 2024

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Understaffing = Patient Care Crisis



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Empowering the Voices of Nurses and Health Professionals: A Call to Action at the Ohio Statehouse

Catharyne Henderson, BSN RN-BC
Ohio Nurses Association Board Member

In our relentless commitment to elevate patient care and foster a sustainable healthcare environment, the Ohio Nurses Association proudly announces the 2024 Nurses & Health Professionals Lobby Day. Scheduled for April 24, 2024, at the Ohio Statehouse, this pivotal event marks a significant opportunity for nurses, health professionals, and advocates to unite in a powerful demonstration of solidarity and purpose.

The Urgency of Now: Addressing the Staffing Crisis and Workplace Violence

At the core of our healthcare system are the dedicated nurses and health professionals who, daily, commit themselves to the well-being of their patients. However, this commitment is increasingly challenged by critical issues such as unsafe staffing levels and rising workplace violence. These are not mere inconveniences but significant barriers that compromise the quality of patient care and the mental and physical health of healthcare workers. The upcoming Lobby Day is not just an event; it is a movement toward rectifying these pressing issues that affect us all.

A Packed Agenda with a Purpose

The 2024 Nurses & Health Professionals Lobby Day is designed to not only highlight these challenges but also to provide actionable solutions through a series of empowering activities:

- **Rally for Safe Staffing:** There will be a rally alongside the sponsors of Ohio House Bill 285, aimed at establishing safe staffing levels that ensure quality care and a supportive work environment for nurses.
- **Panel Discussion:** Be inspired by a panel of nurses who have successfully championed minimum staffing standards in other states through legislative action. Their stories are not just tales of victory but blueprints for change.
- **Workshops:** A workshop focused on building power to address workplace violence and improve staffing through collective bargaining will equip attendees with practical skills and strategies to bring about positive change in their work environments.

- **Legislative Conversations:** Small group conversations with legislators offer a unique platform to directly voice concerns, share experiences, and discuss potential legislative solutions to the challenges facing healthcare workers today.
- **Continuing Education:** In recognition of the professional development of attendees, the event also offers continuing education credits, further enhancing the value of participation.

A Vision for the Future

This Lobby Day is more than an event; it is a catalyst for change, envisioning a future where healthcare environments are safe, supportive, and conducive to high-quality patient care. By participating, nurses and health professionals are not just advocating for themselves but for the entire community, reinforcing the idea that when we improve conditions for healthcare workers, we enhance care for patients.

Join Us: Be the Change

We invite nurses, health professionals, and advocates to join us at this critical juncture. Together, we have the power to shape policies, transform healthcare workplaces, and ensure that every patient receives the care they deserve. Let us unite at the Ohio Statehouse on April 24, 2024, for the Nurses & Health Professionals Lobby Day. Your voice is crucial in this fight for a brighter, safer future for healthcare in Ohio.

Together, We Can Make a Difference. Let Us Unite for Change!



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Nursing Scope, Law & Rules, and Policy & Procedure continued from page 1

There are numerous places in OAC that refer to nurses that are not located in 4723. An understanding of how to search the Ohio Administrative Code for references to the situation the nurse is facing will go a long way in helping the nurse make informed decisions that protect patients and the nurse.

The entire Ohio Revised Code and Ohio Administrative Code are both available at <https://codes.ohio.gov/>

However, a search via a search engine will also often yield results is phrased correctly. Always try searching “Ohio Administrative Code” and/or “Ohio Revised Code” with the other key words you are using when trying to find ORC or OAC related to the situation.

Policy and Procedure

In addition to practicing within the scope of practice, nurses should practice in accordance with organizational policies and procedures. When unsure about a specific task or skill, a policy and procedure for the organization is a great resource. Depending on the specific situation, the policy may enhance knowledge or clarify the issue, allowing the nurse to meet the requirement of having the knowledge, skills, and ability to perform the task. Other times, the nurse’s lack of knowledge, skill, or ability can’t be bridged in this way. It is up to the nurse to make the determination.

If an organization lacks the policy that is needed, be an advocate in your workplace to get the needed policy in place. A policy enhances nurse and patient safety. As a patient advocates, everyone involved with the organization should want adequate policy outlining care.

Being Forced to Perform Outside Scope

Workplaces will pressure nurses to “get the job done.” It is an unfortunate reality in many healthcare facilities. However, from the point of view of Ohio Law and Rules, a nurse cannot be forced into acting outside of their scope simply because they felt they had no choice. If a nurse acts outside of what the Board of Nursing determines was reasonable or acceptable, the nurse cannot use a lack of knowledge or pressure from the employer as a defense.

No one can make you do anything that you believe is unsafe nursing practice. While there may be consequences for standing up, it is a nurse’s responsibility to adhere to the law and rules of nursing practice in Ohio.

References

Ohio Board of Nursing. (2019). *RN and LPN Decision Making Model*. <https://nursing.ohio.gov/resources-for-practice-and-prescribing/resources/02-rn-and-lpn-decision-making-model>

2024 Safe Staffing Rally

Want to make your voice heard but can’t attend the full day of Nurses & Health Professionals Lobby Day “Understaffing = Patient Care Crisis? NOT TO WORRY! We will also have a Safe Staffing Rally on the Statehouse steps also on April 24th, from 11:00 a.m.-12:00 p.m., and it is FREE to attend the rally!

Join hundreds of health professionals to tell lawmakers to protect the most trusted profession by hearing and understanding the hard truths health professionals face. Together we may work toward positive change for patients and health professionals.



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Workplace Violence is Violence

Angela Nicholina Rentel BSN, RN
Ohio Nurses Association Board Member

Amid the chaos, my ears rang, and shock paralyzed me. Desperation screamed in my mind, urging me to move, to escape the looming threat. Tears welled in my eyes, but I fought the fear. “Get up. Get up,” echoed within me.

Struggling, I pushed against the unforgiving ground. The room blurred as the sickening taste of fear crept into my belly, threatening to overwhelm me. I bit my lip, forcing myself to focus. Where was I? What was happening? The disorientation

clung to me as blood trickled down my face, my swollen lip a testament to the brutality I couldn’t comprehend.

“GO! Get up!” I commanded myself, eyes scanning the familiar yet perplexing surroundings. Panic gripped me as a shadow approached, its forceful hands closing around my neck. A sickening crack echoed through the chaos as my head met cold tiles. Thrashing back and forth in a futile attempt to free myself, I stretched my arms towards the shadow, barely grazing across its skin. Gasping for air, the world darkened, an ironic calm settling over me. Was this the end?

As time slowed, visions of a peaceful death flickered—soft sheets, down-filled pillows, grey hair strewn across a pillowcase, family by my side. Yet, this violent reality contradicted my dreams. There was so much more I wanted to discover, so much more to do. How had I ended up here?

The hurt, betrayal, and confusion echoed in my thoughts. My heart, driven by compassion, led me to pursue a career in nursing—a calling, a desire to be a pillar of comfort in dark moments. Sacrifices were made—working three jobs, selling plasma for gas money—to fulfill this dream. I desperately wanted to be a nurse.

The idealistic vision shattered upon entering the nursing world—corporate greed, purposeful short staffing, angry patients, and gaslighting. The pandemic struck, turning my once-proud nursing scrubs into a target for anger and blame. Trust in healthcare workers eroded with the politicization, and we became scapegoats for societal uncertainties. Didn’t they know we’re trying to help?





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Family members screamed at healthcare workers. Patients died alone. Mothers were separated from their newly born infants. Coughs purposely directed towards nurses. N95 masks ripped off nurses faces and said they were only to be worn when deemed necessary. Fingers pointed at female nurses, blaming them for damaged recycled N95 masks due to makeup or moisturizer. A sacrifice for the health of the community.

Nurses gathered, masks in place, wide-eyed and fearful of an uncertain wave of impending death. How many in this room are going to die? N95 masks tested in the trenches of biological warfare, a thin paper bag handed with a big smile to protect our precious masks for future use. That paper bag, a worn and tattered safety blanket, still sat in my locker as a trauma bond after the pandemic dwindled. I have now become the canary in the coal mine.

As we faced the challenges, a new pandemic emerged—one of violence. Shocking statistics revealed the alarming prevalence of assaults against nurses. A staggering 1 in 4 nurses experienced assault at work, and nurses were

4 times more likely to endure violence than other professions. Workplace violence became ingrained, a dark facet of the job. Pulled aside after a violent attack and asked if they should have done something different or utilized their deescalation skills better, nurses often found themselves blamed for attacks. Perpetuating a cycle of shame for not handling the situation better and guilt for feeling torn about reporting the incident. Enough is enough.

In the face of adversity, a call to action arises. Safety in the workplace is not a luxury but a right. Violence should never be accepted. The statistics, chilling, serve as a rallying cry. We must report incidents, stand together, and reclaim control.

Solutions and Awareness

To address workplace violence in healthcare, we need comprehensive solutions. Institutions must prioritize and implement robust reporting mechanisms. Encouraging a culture of awareness and accountability is crucial in preventing and addressing violent incidents.

Support and Resources

Healthcare workers require strong support systems. Establishing counseling services, peer support networks, and mental health resources can help alleviate the emotional toll of workplace violence. Institutions should also collaborate with organizations dedicated to combating workplace violence, seeking guidance, and implementing best practices.

Advocacy for Change

It is imperative to advocate for policy changes and legislative measures that protect healthcare workers. As a collective voice, we can raise awareness, promote dialogue, and urge lawmakers to enact and enforce regulations that safeguard the well-being of those committed to healing others. The resilience of healthcare workers' demands acknowledgment, support, and change. The battle against workplace violence is a collective one.

We stand together, we win together.

Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare

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