

OKLAHOMA BOARD OF NURSING
2915 N. Classen Boulevard, Suite 524
Oklahoma City, OK 73106
(405) 962-1800

Decision-Making Model for Scope of Nursing Practice Decisions:
Determining RN/LPN Scope of Practice Guidelines

The Oklahoma Nursing Practice Act enacted by the Legislature defines a scope of practice for nurses in this state. It is impossible for a practice act to list all of the duties, nursing functions and/or nursing activities licensed nurses are or are not permitted to perform. The Board has endorsed the following guidelines to assist nurses in determining a personal scope of practice based upon legal parameters of practice and one's education, knowledge and experience.

1. Describe the activity/task [act] being performed.
2. Is the act expressly permitted/prohibited by the Oklahoma Nursing Practice Act?
 - a. If **Permitted**, proceed to #3.
 - b. If **Prohibited**, the decision is complete.
 - c. If **Unsure**, proceed to #3.
3. Does the act require you to have substantial specialized nursing knowledge, skill and independent judgment?
 - a. If you answer **NO** to this question, the act may be within the basic scope of practice for an RN or LPN. Proceed to #4.
 - b. If you answer **YES**, the activity may be an act within the scope of practice of an RN only at an advanced practice level. Proceed to #4.
4. Is the act consistent with the scope of practice based upon at least ONE of the following factors?
 - a. Standards of practice of a national nursing organization.
 - b. Positive and conclusive data in nursing literature and research.
 - c. Appropriately established policy and procedure of employing facility.
 - i. If you answer **NO** to this question, the act is **NOT** within your scope of practice.
 - ii. If you answer **YES**, proceed to #5.
5. Do you personally possess the depth and breadth of knowledge to perform the act safely and effectively as demonstrated by knowledge acquired in a pre-licensure program, post-basic program, or continuing education program?

- a. If you answer **NO**, the act is **NOT** within your scope of practice.
 - b. If you answer **YES**, maintain **documented evidence** and proceed to #6.
6. Do you personally possess current, documented clinical competence to perform this act safely?
- a. If you answer **NO**, the act is **NOT** within your current scope of practice until competence is achieved.
 - b. If you answer **YES**, proceed to #7.
7. Is the performance of the act within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?
- a. If you answer **NO**, the act is **NOT** within your scope of practice. Performance of the act may place both nurse and patient at risk.
 - b. If you answer **YES**, proceed to #8.
8. Are you prepared to accept the consequences of your action?
- a. If you answer **NO**, the act is **NOT** within your scope of practice.
 - b. If you answer **YES**, then:
 - i. Perform the act based upon valid Order when necessary, and in accordance with appropriately established policies and procedures of employing facility.
 - ii. Assume accountability for provisions of safe care.

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Regulatory Authority:

59 O.S. §567.1 et seq.
OAC Title 485

Summary of Decision Making Model

