

Scope of Practice Decision Making Model for Advanced Registered Nurse Practitioners Jimmy A. Reyes, DNP

The Iowa Board of Nursing acknowledges that advanced practice nursing is dynamic and fluid. The scope of advanced practice nursing evolves and changes through experience, clinical competency, evidence-based practice and research, technology, legislation, and changes in the health care system (Kleinpell, et al., 2012; LACE, 2012; NCSBN, 2008). That said, advanced practice nurses may need to practice in new settings, perform additional tasks and functions, and develop new set of skills during their professional careers. The Iowa Board of Nursing is often asked questions regarding the scope of practice of Advanced Registered Nurse Practitioners (ARNPs) such as; “does my training and experience match within the scope of practice required to practice?” or “is it within the scope of practice of the ARNP to perform this procedure”.

According to the literature, scope of practice is defined as a set of rules, regulations, and boundaries within which a fully qualified ARNP may practice (Kleinpell et al., 2012; NCSBN, 2009). Scope of practice reflects the population foci or the patients that can be cared for by the ARNP; the procedures, tasks, and functions that ARNPs can perform; and may influence the capacity for reimbursement and payment models (Kleinpell et al., 2008; Kleinpell et al., 2012).

Determining ARNP scope of practice may include:

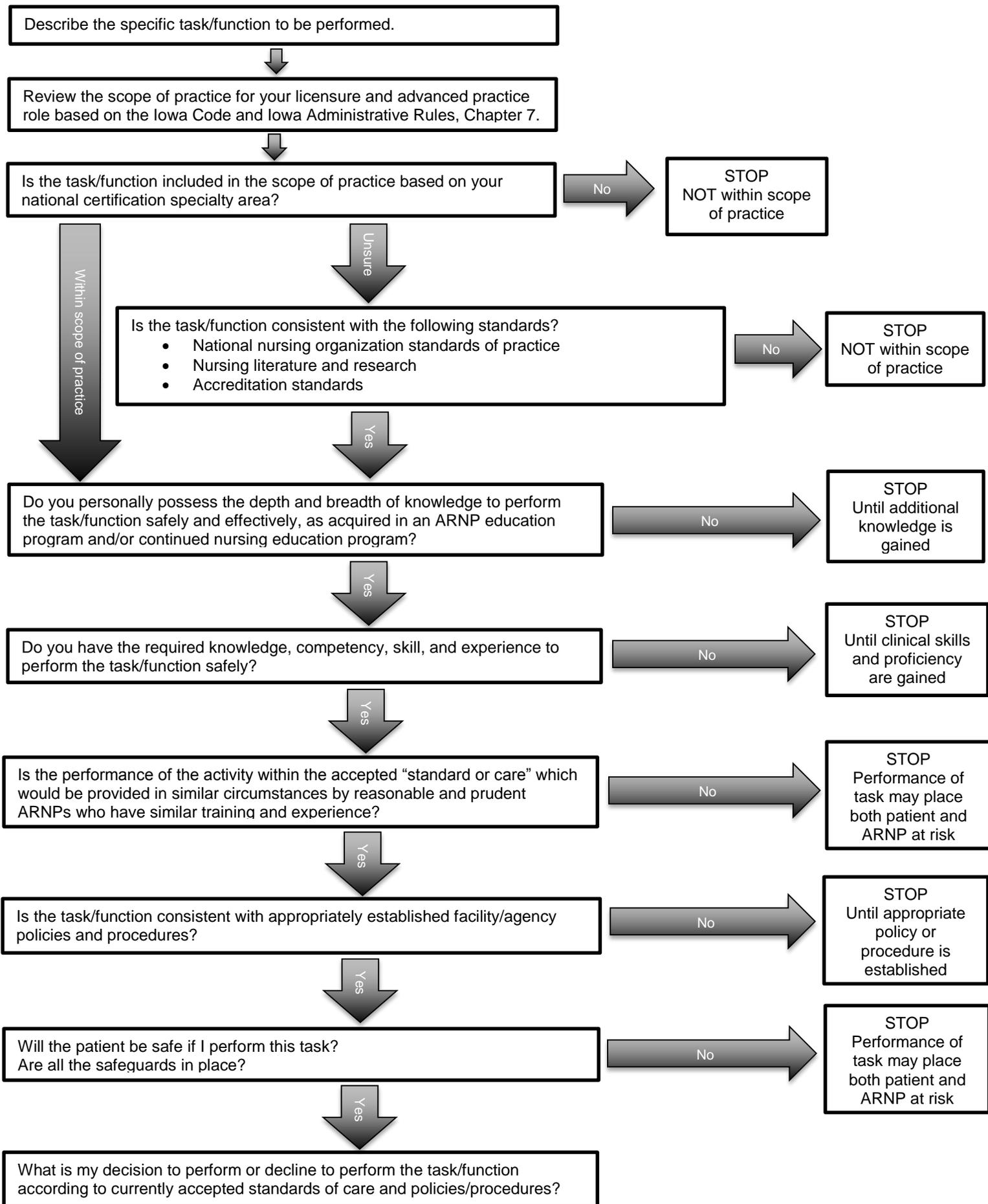
- State law and regulation
- National nursing organization standards of practice
- Accreditation standards
- Institutional policies and procedures
- Professional liability and risk management concerns
- Nursing literature and research (ANA, 2015; IBON, 2009; NCSBN, 2009)

The following questions (embedded in the *Scope of Practice Decision Making Model for ARNPs*) may help to clarify whether a new activity/procedure can be incorporated into an individual's scope of practice:

- Is the task/function included in the scope of practice based on your national certification specialty area?
- Is the task/function consistent with national nursing organization standards of practice, nursing literature and research, and accreditation standards?
- Do you personally possess the depth and breadth of knowledge to perform the task/function safely and effectively, as acquired in an ARNP education program and/or continued nursing education program?
- Do you have the required knowledge, competency, skill, and expertise to perform the task/function safely?
- Is the performance of the activity within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent ARNPs who have similar training and experience?
- Is the task/function consistent with appropriately established facility/agency policies and procedures?
- Will the patient be safe if I perform this task? Are all the safeguards in place?
- What is my decision to perform or decline to perform the task/function according to currently accepted standards of care and policies/procedures?

The Iowa Board of Nursing understands that individual scope of practice will vary and that what is within the individual scope of practice for one ARNP may not be within the individual scope of practice for another ARNP authorized to practice in the same role and specialty (NCSBN, 2009). Most important, it is critical to keep in mind that the Board holds each ARNP accountable for knowing and practicing within his/her professional and individual scope of practice (IBON, 2009).

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