Ohio Nurse Practice Act

What Every Nurse in Ohio Should Know!

Speaker
- Sue Dill Calloway RN, Esq. CPHRM
- AD, BA, BSN, MSN, JD
- President
- Patient Safety and Education
- 5447 Fawnbrook Lane
- Dublin, Ohio 43017
- 614 791-1468
- sdill1@columbus.rr.com

Objectives
- Discuss issues related to the Ohio NPA including 2 ways to lose your license,
- Identify the difference between ONA and OBN,
- Explain the two sources of law that comprise the NPA,
- Describe what is meant by the scope of practice,
- Explain what is meant by professional boundaries in nursing,
The Difference Between the OBN and ONA

- Sometimes nurses have confused these two

  - The Ohio Nurses Association (ONA)
    - Is a professional organization that nurses can join
    - Mission is to advance professional nursing in Ohio
    - Influences legislators and promotes education

  - The Ohio Board of Nursing (OBN)
    - Mission is to safeguard the health of the public through the effective regulation of nursing care
    - Grants nurses their license and can take it away
    - Regulates the practice of nursing
Ohio Board of Nursing

- 17 South High Street, Suite 400
- Columbus, Ohio 43215-7410
- 614 466-3947
- Email: board@nur.state.oh.us
- Website: www.nursing.ohio.gov
- Fax 614 466-0388
- Licensure unit 614 995-7675
- Has copies of laws and rules on their website
Ohio Board of Nursing

- License verification at http://www.nursing.ohio.gov/Verification.htm
- Includes RN and LPN verification
- OBN eliminated wallet cards because can be forged or altered
- Board disciplinary actions listed here also
- TJC and NCQA consider on-line status information as fulfilling the primary source requirement for verification of licensure
One Hour Requirement Category A

- Started back with the 2003-2005 RN renewal,
- Must have every two year renewal period
- Must have one contact hour of approved CE on Ohio laws and rules affecting nursing (24 total)
- Must be related to the NPA statute and NPA OAC rules
- Keep copies of CEUs in case audited (one time waiver)
  - OAC 4723-14-03 and ORC 4723.24

The Ohio Nurse Practice Act

The two sources that comprise the NPA are;

- Statute or laws
  - Ohio Revised Code (ORC), Chapter 4723
  - Statutes are passed by the Ohio legislature
- Regulations or rules
  - The Ohio Administrative Code (OAC), Chapter 4723-1 to 4723-27
  - Ohio Board of Nursing promulgates through the rule making authority

Law Changes

- LPN can not discontinue a peripherally inserted central catheter or any catheter that is longer than 3 inches
- Added solutions to the list that the LPN can hang through a venous line
  - Can’t insert an IV longer than 3 inches
  - Can start the IV and place a heparin lock
  - If has completed course in IV therapy, see new OAC 4723-17-07
- LPN can stop the blood if complication arises
  - Effective February 1, 2010 OAC 4723-17-03
Laws and Rules
- Licensure mandated for nurses in Ohio in 1967
- Ohio Board of Nursing (OBN) also regulates others
  - Dialysis technician regulated since 2000, ORC 4723.71-79 and OAC 4723-23
  - Certifies community health workers ORC 4723.81-99 and OAC 4723-26
  - Certified Medication Aide OAC 4724-27 and ORC 4723.61-69
    - At the delegation of a nurse in a nursing home or residential care facility
    - Not injections, IVs, can’t split pills, can’t put through a tube

Law Changes
- Good way to keep up is to read Momentum
- Past editions on the OBN website
- Also copies of the laws (ORC) and rules (OAC) are on OBN website at http://www.nursing.ohio.gov/Law_and_Rule.htm
- End of each statute and rule will tell you effective date
- All OAC reviewed at least every 5 years
- Has information on the website on recently adopted rules
OBN Website to Keep Up With Changes

Nursing Practice Resources

- Updates from the committee on prescriptive governance
- General information section (decision making model, PICC tip verification by RN, RN and LPN FAQ and scope of practice)
- Interpretive Guidelines (Monitor and manage OB patient with epidurals, sharp wound debridement, RN role in intubation, monitor patients with moderate sedation, etc.)
- Advanced Nursing Practice
  - Available at http://www.nursing.ohio.gov/Practice.htm
### Why is it important for nurses to know the NPA?

- Nurses have a legal obligation to be knowledgeable about both the laws and rules that regulate the practice of nursing.
- Identifies legal standards of practice.
- Disciplinary action may be taken for violation of either.
- A violation may be used in the courtroom to show deviation from the acceptable standard of care.
- Framework for public protection.

### ORC 4723.01 Definitions and the Practice of Nursing (3-29-10)

- Defines the practice of nursing for RNs and LPNs.
- These become the scope of practice.
- In other words what a nurse can legally do.
- For example a RN may assess health status, and provide health counseling, teaching, administer medications, teach, delegate, supervise, and evaluate nursing practice.
- See 6 page document on RN and LPN scope of practice at [http://www.nursing.ohio.gov/Practice.htm](http://www.nursing.ohio.gov/Practice.htm)
ORC 4723.01 Definitions and the Scope of the Practice of Nursing

Examples for LPN:
- Observation and patient teaching
- Contributions to the planning, implementation & evaluation of nursing
- Administer meds and treatments
- IV therapy if authorized
- Delegation of nursing tasks as directed by the RN
- Teaching nursing tasks to LPN and individuals who is authorized to delegate nursing task as per RN

ORC 4723.02 Composition of OBN

- 13 members;
  - 8 RNs and one must have certificate of authority (NP, CNS, CRNA, nurse-midwife)
  - 4 LPNs
  - 1 consumer
- 4 year terms
- May be reappointed one time (4-10-01)

ORC 4723.03 Prohibitions Unlicensed Practice

- Title protection so only RN or LPN can use these initials (also CNS, CNM, CNP, and APN)
- Only certified nurse anesthetist can use CRNA or NA
- Can not represent self as being a RN or LPN
- Can not sell or fraudulently obtain a license or certificate
- Can not use term graduate nurse (GN) or graduate profession nurse (GPN)
- Amended 4-7-05
ORC 4723.06 Powers of the Board

- Enforce and administer the NPA
- Develop criteria on who can sit for state boards
- Define standards for nursing education programs
- Renew nursing licenses, dialysis technicians and community health certificates
- Approve CNE programs
- Approve peer support programs
- Establish practice intervention and improvement program
- Amended 3-29-2010

Community Health Worker

- Program administrators for community health access program approach Board
- Wanted certification
- These individuals assist members of the community by assessing community health and supportive resources through home visits and referrals
- Provide education, role modeling and referrals
- Now chapter 26 of Ohio Administrative Code
- 02-02-2010 OAC 4723-26-04

ORC 4723.151 Prohibited Practices

- Can not medically diagnosis
- Can not prescription of medical measures
- Can not practice medicine or surgery
- Does not prohibit advanced practice nurses within their scope as in 4723.43
- Can not perform or induce abortion
- Effective date 05-17-2000
ORC 2317.17 IV Therapy by LPN

- Current license
- Can not initiate or maintain solutions thru central venous or arterial line, with exceptions
- Can not hang chemo
- Can not hang TPN
- Can not hang blood or blood component
- Can not hang investigational or experimental meds
- Effective date 06-26-2003

ORC 2317.17 IV Therapy by LPN

- Can not discontinue a central line or an A-line
- Can not mix IV except to reconstitute IV antibiotics
- Can’t hang 1st bag of IV with vitamins or lytes
- Can hang IV antibiotic
- Can’t insert a PICC line or remove one
- Can not aspirate any IV line to determine patency
- Only start IVs in hand, FA, and AC
- See OAC 4723-17 amended 02-01-2010

ORC 4723.24 Renewal of License

- Must renew every 2 years
- Must complete 24 hours of CNE
- At least 1 hour in statutes and rules regarding nursing practice
- Must pay fee and be eligible for re-licensure
- Remember to notify Board of change of address or name within 30 days
**ORC 4723.32 Exemptions from Licensure**

- Student nurse under program and supervised by instructor or preceptor
- Acting as nurses aide or orderly
- Medical assistance under supervision and control of MD or dentist
- Active military with license in another state
- Transporting military for no more than 72 hours
- Effective 09-29-2007

**ORC 4723.32 Exemptions from licensure**

If licensed in another state:
- Consulting with Ohio licensed person
- Teaching as a guest lecturer
- Evaluating nursing care for accredited organization
- In a declared disaster
- Providing care to someone in Ohio temporarily and can not exceed 6 months (employed by the patient or guardian)
- Amended 9-29-2007

**ORC 4723.28 33 Ways to Lose Your License**

- License revoked in another state
- Failing to renew your license or working when suspended
- Misdemeanor committed in the course of practice
- Felony, gross immorality or moral turpitude
- Amended 04-07-05
33 Ways to Lose Your License

- Selling, giving away, or administering drugs illegally
- Violating federal drug law
- Self administering dangerous drug
- Use of controlled substances or alcohol that impairs ability to practice
- Physical or mental impairment to practice
- Assisting or causing harm or depriving of means to summon assistance by patient
- Material deception/misrepresentation

- Declared mentally incompetent
- Violation of NPA
- Performing or inducing an abortion
- Practicing unsafe nursing care
- Sex with patients
- Verbal behavior that is sexual demeaning
- Violating professional boundaries
- Assisting suicide

Disciplinary Actions

- OBN can revoke, suspend, restrict, fine, or otherwise discipline nurse or dialysis tech
- For violations of the 33 ways to lose your license
- Must provide due process
  - This means the Board must give the nurse notice of what he or she did wrong and a hearing
- Remains part of nurse’s record
Board Disciplinary Actions  ORC 4723.28

- Permanent revocation
- Indefinite/automatic/immediately suspended
- Indefinite suspension with stay (probation)
- Restrictions such as medications, shifts, or type of practice
- Reprimand, Voluntary surrender, or Fines
- Otherwise discipline, take CE classes, write paper, do presentation

Disciplinary Actions

- Board staff review
- Board members decide what level of action to take
- Nurse can request formal hearing
- Hearing officer present
- Witnesses are called and under oath
- Evidence is presented
- Board action is public record
- Board can temporarily suspend if criminal action filed

Unauthorized Practice of Nursing

- Board has authority over its licensees and certificate holders
  - NP enters into SCA with a physician whose practice is not similar
  - Nurse prescribe drugs without certificate to prescribe
- Can get court orders to stop others from violating NPA
  - Violation is 5th degree felony on first offense
  - Second offense is 4th degree felony
- For example, person used initials "NA" who is not a CRNA
  - ORC 4723.44 revised 04-07-2005
ORC 4723.34  Mandatory Reports

- Every employer (of nurses, community health techs, medication aides, and dialysis techs) must report the person is engaged in conduct that would be grounds for disciplinary action or danger to public
- Prosecutors and nursing associations must report
  - Felony, charge of gross immorality or moral turpitude, misdemeanor created in the course of employment
- Reports in good faith is protected against retaliatory actions
- If person fails to provide a report then Board can get an order from a court to require

ORC 4723.34  Mandatory Reports

- Use the form prepared by the Board
- Include the name and address of the license, and charge
- Immunity is given for making reports under 4723.341
  - Must be in absence of fraud or bad faith
  - Includes civil liability and can be dismissed or disciplined by employer for reporting
- Amended 6-30-05

Rules (OAC) 27 Chapters
Chapter 4- Standards of Safe Nursing Practice

• This is a very important rule that every nurse should read and it discusses the following:
  • What is a violation of a standard of practice
  • Minimal acceptable standards of safe and effective practice
  • Standards relating to competent practice as a RN, LPN, and APN
  • Standards of practice promoting client safety
    • OAC 4723-4-01 and 4723-4-03 revised 02/01/2009

4723-4 Standards of Safe Nursing Practice

• Standards for applying the nursing process
• Maintain knowledge of duties, responsibilities and accountability of practice
• Follow law, rules, position statements, guidelines from nationally recognized nursing entities
  • APIC, ENA, ANA, ASPAN, AORN, AANA, etc.
• Recognizes and intervenes when complication arises
• Nurse maintains documentation of care provided

4723-4-03 Safe Nursing Practice

• Can provide care beyond basic nurse preparation if obtains education
  • If obtains proper education from recognized authority or source (evidenced based)
  • Demonstrates appropriate knowledge and skills
  • Maintains documentation of education and competency that is satisfactory to the board
  • Examples; insertion of PICC lines, light based medical devices (lasers) for hair removal only at delegation of physician, phototherapy for hyperbilirubinemia
4723-4 Safe Nursing Practice

- Demonstrate competence and accountability in all areas of practice
- Maintain confidentiality (Big issue now with new HIPAA laws, Breach Notification Law, State Attorney General can enforce, New Penalties for Breach, HITECH, etc.)
- Timely implements orders or treatment unless inaccurate or harmful or unauthorized
- Discusses what RN should consider in delegating to the LPN (4723-4-03 amended 02/01/2009)

4723-4-03 Dangerous Orders

- Clarify orders if you think it is inaccurate or harmful
- When clarifying order consult with appropriate LIP
- Notify LIP if nurse makes decision not to follow order or administer med or treatment
- Document that practitioners was notified and reason for not doing so
- Take any action to assure safety of client

4723-4-06 Promoting Client Safety

- Display name tag with title or initials
  - Such as RN, LPN, APN, CRNA, CNS, etc.
- Engaged in nursing through any form of telecommunication, must identify title to the patient
- Delegate in accordance with delegation rules (see section 13)
- Must timely and accurately chart assessments, observations, care provided and patient’s response
- Amended 02/01/2009
4723-4-06 Promoting Client Safety

- The nurse must accurately and timely report to the appropriate practitioner any error or deviation from the valid order
- Nurses cannot falsify medical records or any other documents related to nursing practice
- Nurses must promote a safe environment,
- Must provide privacy during exams,
- Can not physically, verbally, mentally, or emotionally abuse a patient,
- Can not misappropriate patient property

4723-4-06 Promoting Client Safety

- Nurses in administration must assure nurses are licensed or credentialed
- Must provide adequate supervision
- Only RN can supervise and evaluate the practice of nursing
- Nurse administrators should ensure nurses are licensed
- Can not make any false, misleading, or deceptive statements
  - See 4923-4-07 on how to apply the nursing process 02/01/2009

Professional Boundaries OAC 4723-4-06

- ORC 4723.28 (B)(31) allows the board to impose sanctions for failure to establish and maintain professional boundaries with a patient
- OAC contains more information on what this means
  - No seeking or obtaining personal gain at the expense of the client
  - No inappropriate involvement in client’s personal relationships
Professional Boundaries OAC 4723-4-06

- No sexual conduct with a patient
- No verbal behavior that is seductive or sexually demeaning to the patient
- The patient is presumed to be incapable of giving consent in these behaviors
- So what are some examples of prohibited behavior?
- Purpose is to maintain a professional relationship with the patient and not a personal one and there is a line that should not be crossed (although actually a continuum)

Professional Boundaries Examples

- Sharing personal information with patient
- Becoming too close to patients/family
- Accepting gifts from patient even if small gifts
- Plan activities with patient/family
- Complain to patients about other patients
- Complain to patients about your aches and pains or other staff members
- Buy or sale items to or from patients
- Inviting a patient to your home

Professional Boundaries

- Spending a disproportionate amount of the time with the patient
- Seeing the patient when you are off duty
- Keeping secrets with the patient
- Emails or phone calls after patient is discharged
- Patient dresses differently prior to nurse’s arrival or remains awake to see the nurse if you are on the night shift
- Conversations are of a sexual nature
The End

Questions?

• Sue Dill Calloway RN, Esq. CPHRM
• AD, BA, BSN, MSN, JD
• President
• Patient Safety and Education
• 5447 Fawnbrook Lane
• Dublin, Ohio 43017
• 614 791-1468
• sdill1@columbus.rr.com