Position Statement
Formulated: July 29, 2010
Reviewed: January 2018
Revised: November 2014

Scope of Practice Decision Tree

The profession of nursing is a dynamic discipline. Practice potentials change and develop in response to the health care needs of society, technical advancements, and the expansion of scientific knowledge. All licensed nurses share a common base of responsibility and accountability defined as the practice of nursing. However, competency based practice scopes of individual nurses may vary according to the type of basic licensure preparation, practice experiences, and professional development activities. The parameters of the practice scopes are defined by basic licensure preparation and advanced education. Within the scope of practice, all nurses should remain current and increase their expertise and skill in a variety of ways (e.g., practice experience, in-service education, and continuing education). Practice responsibility, accountability, and relative levels of independence are also expanded in this way. The licensed nurse is responsible and accountable, both professionally and legally, for determining his/her personal scope of nursing practice. Since the role and responsibilities of nurses, and consequently the scope of nursing practice, is ever changing and increasing in complexity, it is important that the nurse makes decisions regarding his/her own scope of practice.

The South Carolina Board of Nursing has adopted the following decision tree to assist nurses in interpreting the applicability of South Carolina’s laws and regulations in practice situations. If you have a scope of nursing practice question, follow each step of the decision tree to resolve the question. If you are not able to answer your question after going through each step, consult your institution’s or agency’s nursing practice committee. If the nursing practice committee of your institution or agency cannot resolve the issue, the committee may submit a written request to the SC Board of Nursing’s Administrator for an opinion from the Board’s Nursing Practice and Standards Committee. When submitting your question to the Practice and Standards Committee, please include documentation from the institution or agency committee discussions for each step of the decision-making process noted below.

Page 2 of 5

1. Describe the act to be performed.
   • Describe what are you being asked to do?
   • Are there written policies/procedures available to describe how and under what circumstances you will perform this act?
• Does the new responsibility require professional judgment or simply the acquisition of a new skill?
• Is this a new expectation for all RNs? LPNs?
• Has this been done before by others in your unit or health care facility?
• Is it just new to you?
• What about the other facilities in your community or region?
• What are the nurse manager’s expectations about you or other nurses becoming responsible for this procedure?
• When will this become effective?
• Will there be an opportunity to help you attain the needed clinical competency?
• Who will be responsible for the initial supervision and evaluation of this newly performed task?
• Will you be given additional time to learn the skill if you need it?

2. Review the scope of practice for your licensure level.

(The Nurse Practice Act and other S.C. Board of Nursing policies are available on the S.C. Board of Nursing’s website at www.llr.state.sc.us/POL/Nursing - Click on Laws/Policies)

• LPN: “Practice of Practical Nursing” means the performance of health care acts that require knowledge, judgment, and skill and must be performed under the supervision of an advanced practice registered nurse, registered nurse, licensed physician, licensed dentist, or other practitioner authorized by law to supervise LPN practice.

Practice includes but is not limited to: collecting health care data; administering and delivering medications and treatments as prescribed by an authorized licensed provider; implementing nursing interventions and tasks; providing basic teaching for health promotion and maintenance; assisting in the evaluation of responses to interventions, providing for the maintenance of safe and effective nursing care rendered directly or indirectly; participating with other health care providers in the planning and delivery of health care; delegating task to qualified others; performing additional acts that require special education and training and that are approved by the board including, but not limited to, intravenous therapy and other specific nursing acts and functioning as a charge nurse.

Definition: “Additional acts” [S.C. Code of Laws: 40-33-20 (3)] means activities performed by a nurse that expand the scope of practice, as established in law. Supporting documentation regarding these activities, as described in Chapter 40-33-20 (3), must be submitted in writing to the SC Board of Nursing for approval before a nurse implements additional acts.

• RN: “Practice of registered nursing” means the performance of health care acts in the nursing process that involve assessment, analysis, intervention, and evaluation. This practice requires specialized independent judgment and skill and is based on knowledge and application of the principles of biophysical and social sciences.
Practice includes but is not limited to: assessing the health status of persons and groups; analyzing the health status of persons and groups; establishing outcomes to meet identified health care needs of persons and groups; prescribing nursing interventions to achieve outcomes; implementing nursing interventions to achieve outcomes; administering and delivering medications and treatments prescribed by authorized licensed providers; delegating nursing interventions to qualified others; providing for the maintenance of safe and effective nursing care rendered directly or indirectly; providing counseling and teaching for the promotion and maintenance of health; evaluating and revising responses to interventions, as appropriate; teaching and evaluating the practice of nursing; managing and supervising the practice of nursing; collaborating with other health care professionals in the management of health care; participating in or conducting research, or both, to enhance the body of nursing knowledge; consulting to improve the practice of nursing; and performing additional acts that require special education and training and that are approved by the board.

Definition: “Additional acts” [S.C. Code of Laws: 40-33-20 (3)] means activities performed by a nurse that expand the scope of practice, as established in law. Supporting documentation regarding these activities, as described in Chapter 40-33-20 (3), must be submitted in writing to the SC Board of Nursing for approval before a nurse implements additional acts.

• APRN: An “advanced practice registered nurse” means a registered nurse who is prepared for an advanced practice registered nursing role by virtue of additional knowledge and skills gained through an advanced formal education program of nursing in a specialty area that is approved by the board. The categories of advanced practice registered nursing practice are nurse practitioner, certified nurse-midwife, clinical nurse specialist, and certified registered nurse anesthetist. An APRN shall hold a doctorate, a post-nursing master’s certificate, or a minimum of a master’s degree that includes advanced education composed of didactic and supervised clinical practice in a specific area of advanced practice registered nursing. In addition to those activities considered the practice of registered nursing, an APRN may perform delegated medical acts.

Practice includes but is not limited to: assessing clients, synthesizing and analyzing data, understanding and applying principles at an advanced level; providing expert teaching and guidance; working effectively with clients, families and members of the health care team; managing clients’ physical and psycho-social health status; utilizing research skills; analyzing multiple sources of data; identifying alternative possibilities to health care problems and selecting appropriate treatment; making independent decisions in solving complex client problems; performing acts of diagnosing, prescribing, administering and dispensing therapeutic measures; recognizing limits of knowledge; and consulting with or referring to other health care providers as appropriate.

3. Is the act expressly permitted or prohibited by the S.C. Nurse Practice Act for the licensure that you hold? (The Nurse Practice Act is available on the S.C. Board of Nursing’s website at www.llr.state.sc.us/POL/Nursing/ - Click on Laws/Policies)

• Unsure → Go to #4.
• Permitted → Go to #5.
• Prohibited → Stop! The act is not within your scope of practice.

4. Is the act consistent with your scope of nursing practice based on all of the following?

Education taught in basic nursing education programs or through attainment of additional competencies. Established policies and procedures in the employing organization or facility.

Standards of Nursing Practice or scope of practice statements from professional organizations and the S.C. Nurse Practice Act (The Nurse Practice Act and other S.C. Board of Nursing policies are available on the S.C. Board of Nursing’s website at www.llr.state.sc.us/POL/Nursing/ - Click on Laws/Policies)

Professional and ethical responsibilities resulting in best practices.

• Yes → Go to # 5.
• No → No, the act is not within your scope of practice.

5. Do you personally possess the depth and breadth of knowledge to perform the act safely and effectively, as acquired in a pre-licensure program, post-basic program, continuing education program or structured self-study?

• Yes → Go to #6.
• No → Stop! Until additional knowledge gained, then go to #6.

6. Do you personally possess current clinical skills to perform the act safely?

• Yes → Go to #7.
• No → Stop! Until clinical skills are attained, then go to #7.

7. Is the performance of the act (a) within the accepted standard of nursing practice which would be provided in similar circumstances and (b) consistent with appropriate established facility/agency policies and procedures?

• Yes → Go to #8.
• No → Stop! Performance of the act may place both patient and nurse at risk. Notify appropriate person(s) according to facility policies/procedures.

8. Are you prepared to accept the consequences of your actions?

• Yes → Perform the act with valid orders when necessary and in accordance with agency polices and procedures.
• No → Stop! No accountability is assumed! Notify appropriate person(s) according to facility policies/procedures.

An overview of the scope of practice decision-making process is provided as an Appendix.
Appendix

Overview of Scope of Practice Decision Tree for SC Nurses

Each nurse is responsible for implementing the decision tree as noted in its entirety in the SC Board of Nursing’s document entitled, “Scope of Practice Decision Tree.”

1 Is the act being considered for delegation expressly permitted or prohibited by the S.C. Nurse Practice Act for the license you hold?

If Permitted: Go to #3

If Unsure: Go to #2

If Prohibited: Not within your scope.

2 Is the act consistent with all of the following?

- Education taught in your basic nursing education program or through attainment of additional competencies.
- Established policies and procedures in your employing organization or facility.
- Standards of Nursing Practice or scope of practice statements from professional organizations and the SC Nurse Practice Act.
- Professional and ethical responsibilities resulting in best practices.

Yes: Go to #3

No: Not within your scope.

3 Do you possess the depth and breadth of knowledge to perform the act safely and effectively, as acquired in a pre-licensure program, post-basic program, continuing education program or structured self-study?

Yes: Go to #4

No: Stop! Until additional knowledge gained, then go to #4.

4 Do you possess current clinical skills to perform the act safely?

Yes: Go to #5

No: Stop! Until clinical skills are attained, then go to #5.

5 Is the performance of the act (a) within the accepted standard of nursing practice which would be provided in similar circumstances and (b) consistent with appropriate established facility/agency policies and procedures?

Yes: Go to #6

No: Stop! Performance of the act may place both patient and nurse at risk. Notify appropriate person(s) according to facility policies/procedures.
Are you prepared to accept the consequences of your actions?

Yes: Perform the act with a valid order when necessary, and in accordance with agency policies and procedures.

No: Stop! No accountability is assumed. Notify the appropriate person(s) according to facility policies/procedures.

If you continue to have questions after considering the above noted questions, consult the nursing practice committee at your institution/agency. If the nursing practice committee at your institution/agency cannot resolve the issue, the committee may submit a question to the SC Board of Nursing’s Practice and Standards Committee. When submitting a question to the Practice and Standards Committee, please include documentation from the institution/agency committee discussions for each step of the decision-making process noted in the detailed version of the decision-making process outlined in the SC Board of Nursing’s document entitled, “Scope of Practice Decision Tree.”

Correspondence for the South Carolina Board of Nursing’s Practice and Standards Committee should be mailed or e-mailed to:

Board of Nursing
SC Department of Labor, Licensing & Regulation
P O Box 12367
Columbia, SC 29211
nurseboard@llr.sc.gov