Not only do Kentucky laws and regulations guide an advanced practice registered nurse (APRN) in determining one’s individual scope of practice, additional factors need to be considered. The purpose of regulation—public protection—allows the public to have access to providers who have acquired knowledge and validated competence to provide care in a safe, competent manner.

Scope of practice is the legal authority for the regulated professional to practice. It sets certain boundaries.

In Kentucky, advanced practice registered nursing is defined in KRS 314.011 (8) as the performance of additional acts by registered nurses licensed as APRNs. Thus the legal scope of practice for advanced practice registered nursing is predicated on the:

- Added knowledge and skills obtained through an accredited education program that prepares the registered nurse for one (1) of the four (4) APRN roles;
- Education in a specific role as a nurse practitioner, nurse anesthetist, nurse midwife, clinical nurse specialist;
- Certification through a national organization or agency recognized to certify registered nurses for advanced practice registered nursing practice;
- Certification in at least one advanced practice population focus: family/across the life span, psychiatric-mental health across the life span, adult-gerontology (either acute care or primary care), women’s health/gender specific, neonatology, pediatrics (either acute care or primary care); and
- Additional acts subject to the approval of the Board, and consistency with certifying agencies’ and organizations’ national scopes and standards. The APRN legal scope of practice includes prescribing treatment, drugs, devices, and ordering diagnostic tests. Prescribing of drugs is defined and limited by statute. The statute also states that the performance of the additional acts shall be consistent with the national certifying organization’s scopes and standards of practice, recognized by the Board. The Board recognizes the scope and standards of several national certifying organizations in 201 KAR 20:057.
The following questions related to education and certification, personal competence, evidence-based practice, and specific patient circumstances and practice environment will assist the individual licensee to consider whether a particular act or procedure is within the APRN’s scope of practice.

1. **How do I determine whether an act is within my scope of practice?**

   *Define or describe the act/task/procedure.*

   - What am I wanting to do or being asked to do?
   - Should I perform this act/task/procedure?

2. **Is the act/task/procedure expressly prohibited by the nursing law, regulations, advisory opinions, or other local, state, federal laws?**

3. **Is the act/task/procedure expressly permitted by the nursing law, regulations, advisory opinions, or other local, state, federal laws?**

4. **Is the act/task/procedure consistent with my graduate education, current national educational accreditation standards, current nursing scope and standards, current certification examination blueprint/outline/role delineation study, current evidence-based nursing literature, my institution’s policies and procedures, the institution’s accreditation standards?**

   **Law & Regulations**

   An APRN (licensed by the Board and certified by a national organization in an advanced practice role and population foci) must first determine whether the statutes (the Nurse Practice Act) prohibit the action in question. For example, an APRN designated as a Family Nurse Practitioner may not write a prescription for a Schedule II drug for 30 days. This action would be outside the APRN, designated FNP’s scope of practice. (KRS 314.011(8)(a)

   - Am I licensed to practice in the appropriate role/population foci?
   - Do my qualifications, training, and licensure match this role and how I define my role with the public?
   - Is the information regarding my training easily accessible and can it be validated to the licensure board, the public, health care credentialing staff, facilities, a court of law and other interested parties?
Advanced Educational Preparation

The APRN must determine whether his/her program of study gave the APRN a knowledge base upon which to accomplish the action.

- Did I complete a postbasic, accredited educational program that prepared me to diagnose and manage the care of patients in this population (family, adult-gerontology, neonatology, pediatric, psychiatric/mental health, women’s health) of patients?
- Did the curriculum for my population focused advanced practice educational program provide the basic background knowledge for the APRN to develop new skills to perform this act in a safe and effective manner?
- Did my postbasic accredited educational program prepare me to practice primary care or acute care with the population of patients for which I am planning to diagnose and manage care?
- Did my postbasic accredited educational program include supervised clinical and didactic training focusing on this population?
- How did I acquire the additional knowledge and skill to perform the act?

Certification Based on Professional Scope and Standards

Next, the APRN must determine whether the action is consistent with the scope and standards set by the national certifying organization that certifies the APRN. Generally, these scope and standard statements are written in broad language and will probably support most actions. However, there may be exceptions.

- Do professional nursing standards support or validate what I am doing?
- Is additional certification required to do this skill on an ongoing or specialized basis?

Is this act/task/procedure consistent with current nursing literature and research, and institution policies and procedures?

Evidence-Based Research and Community Standard

The APRN should ascertain whether there is evidence supporting the performance of the action by the APRN. Also, does the standard of practice within the community support the APRN’s performance of the action?

- Is this act supported by evidence based research?

5. Do I have the requisite knowledge, skill and experience to do the act/task/procedure?

- Have I practiced this act/task/procedure?
• **Could I defend my actions if an adverse event occurs?**

• **Can I produce documentation/evidence that I have acquired the APRN knowledge, skill, and experience to perform the act/task/procedure?**

• **Can I safely perform the act/task/procedure?**

<table>
<thead>
<tr>
<th>Personal Knowledge, Skill and Ability = Competence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once the action is determined to be within the legal scope of practice of an APRN, the individual must determine whether he/she has the knowledge, skill and ability to safely perform the action themselves. Does the APRN need additional education or training?</td>
</tr>
<tr>
<td>- Did I complete a postbasic accredited educational program that prepared me for sub-specialization (limited portion of a narrowly defined professional discipline)?</td>
</tr>
<tr>
<td>- Did I complete a program beyond my postbasic accredited educational program for my advanced practice role/population focus that provided me additional knowledge and expertise in a more discrete area of specialty practice?</td>
</tr>
<tr>
<td>- Have I completed a specialty preceptorship, fellowship, or internship that qualifies me beyond my basic educational training?</td>
</tr>
</tbody>
</table>

6. **Individual Patient Condition**

The patient’s condition and acuity level are the primary factors in determining the most appropriate APRN to manage the patient’s health care needs, not the setting of care. Neither a primary care APRN nor an acute care APRN is restricted to providing care in any particular setting. (NONPF, 2013)

- What are the circumstances and the condition of the patient for whom the acts are being performed?
- Do I have the knowledge and training to differentially diagnose and manage the conditions for which I am seeing this patient?
- What are the clinical competencies/skills required to treat this condition?
- How have I achieved and demonstrated competence and maintained competence?
- Does the act involve independent judgments and decisions that require a substantial knowledge base to assure patient safety and welfare?
• What are the potential complications and adverse reactions which may result from the actions and do I have the knowledge required for the recognition of adverse reactions and ability to take appropriate nursing interventions as required?
• Am I personally prepared to accept and manage the consequences of my diagnosis and treatment, or do I have a formally established relationship with a provider who is trained and immediately available? (201 KAR 20:057 Section 3)
• Am I an expert, adequately knowledgeable or a novice provider in this field?

Kentucky Revised Statutes [KRS 314.021(2)] state:

“All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience in nursing and shall practice nursing with reasonable skill and safety.”

Kentucky Administrative Regulations [201 KAR 20:057 Section 3] state:

“In the performance of advanced practice registered nursing, the advanced practice registered nurse shall seek consultation or referral in those situations outside the advanced practice registered nurse's scope of practice.”

7. Setting/Patient Care Environment

• What is the “accepted standard of care” which would be provided by another reasonable and prudent practitioner with similar training and experience?
• Does the environment that I work in support this scope of practice through structures such as staffing, consultation, policies and procedures, protocols, and community standards?
• Do I need to seek consultation and referral for the care of this patient? (201 KAR 20:057 Section 3)
• What are the potential consequences of accepting treatment responsibility for this patient?
• If I am not the primary care provider, will my responsibility for the provision of care be shared with the primary provider?
• Is the safety of the patient at acute risk if I do not act?
• Will the safety of the patient be compromised if I do act?
• Is there a personal or formal relationship with this patient that would potentially affect my ability to provide or to deny care?

8. What is my decision to perform or decline to perform the activity or task?
Kentucky Board of Nursing (KBN) Scope of Practice Decision-Making Model for APRNs

Use the process flow below to think through your scope of practice decision. Please see the Kentucky Board of Nursing (KBN) Guidelines for Determination of APRN Scope of Practice for additional consideration.

Define the activity or task; clarify the problem.
a. I am being asked to ______________
b. Should I do ______________?

Is the activity or task expressly prohibited by KY Nursing Laws & Administrative Regulations, advisory opinion statements, or other laws (state, federal)?

NO

Is the activity expressly permitted by KY Nursing Laws & Administrative Regulations, advisory opinion statements, or other laws (state, federal)? Am I unsure?

YES

UNSURE

Is the activity or task consistent with my APRN education, population foci & certification, national standards of practice, current APRN competencies, current nursing literature and research, institution policies and procedures, institution accreditation standards, information on certification test content outline, or role delineation study?

YES

NO

Do I have the required knowledge, skill and experience to do the activity or task?
a. If I do this activity or task, can I defend myself if an adverse event occurs?
b. Can I produce documentation/evidence that I have the APRN knowledge, skill, education, and experience to do the activity or task?
c. Am I confident that I can safely do the activity or task?

YES

NO

Am I prepared to manage the consequences and results and accept accountability for my actions and decisions?

YES

NO

UNSURE

Will the patient be safe and have no harm if I do this task?

YES

NO

UNSURE

What is my decision to perform or decline to perform the activity or task according to the currently accepted standards of care and in accordance with my institution’s policies and procedures?

STOP

Refer to qualified provider

Acknowledgements:
Adapted and reprinted with permission from the American Nurses Association 2015.
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3/16/15