Duty to Our Patients: Board of Nursing (BON) and Patient Safety Standards

Presented by
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Purpose of this Session

You will be able to describe:

- Our licensure duty to the patient and patient populations
- BON guardrails for minimum safe nursing practice
- BON mandate to improve patient safety through event analysis & apply in a scenario.
It is all about

OUR “Duty to the Patient”
A Nurse’s “Power”

◆ Knowledge (licensure)
◆ Access to Personal and Financial Information
◆ Physically/Emotionally Exposed
◆ Control Client’s Actions and Environment
◆ Gatekeeper: Control Client Access to Physician or Other Caregivers
Client's VULNERABILITY

- Illness/Sedation
- Knowledge deficit
- Age
- Disability
- Fear Retribution
Lunsfords, 648 S.W. 2d 391 (Tex. App.--Austin, 1983), the court in affirming the disciplinary action of the Board, held that

- Each nurse has a duty to his or her patients
- This duty supercedes any physician order and any facility policy
- Patients are vulnerable and the nurse must act in the best interest of the patient
Duty to a Patient

217.19 (a) (5) Duty to a patient--A nurse's duty is to always advocate for patient safety, including any nursing action necessary to comply with the standards of nursing practice (§217.11 of this title) and to avoid engaging in unprofessional conduct (§217.12 of this title). This includes administrative decisions directly affecting a nurse's ability to comply with that duty.
Our mission is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely.
Patient Safety Slide as BON Reference & Legislature

- http://www.iom.edu
- http://ahrq.gov
- http://www.psqh.com/
- http://www.ihi.org/ihi
- http://www.ismp.org
The BON Regulates Practice Through:

- Nurse Practice Act
- Rules & Regulations
- Guidelines
- Position Statements
Nursing Practice Act (NPA)

- **TEXAS** Law that regulates professional and vocational nursing
- Defines professional and vocational nursing
- Gives BON the authority to make rules
BON Rules/Regulations are Grouped by Subject Matter

- Definitions
- Standards and Scope of Practice
- Professional Responsibilities
- Minor Incident Reporting
- Nursing Peer Review
- Fitness to Practice
- Licensure
- Disciplinary Process
- Peer Assistance
- Advanced Practice Nursing
Rule 217.11 and 217.12

- Minimal acceptable level for safe, effective care
- Identifies unprofessional behaviors
- Most directly affects a Nurse’s practice
217.11 = Standards of Practice

- Divided into four sections
  - Section 1: Applicable to all Nurses
  - Section 2: Specific to LVNs
  - Section 3: Specific to RNs
  - Section 4: Specific to RNs with APN authorization
217.12 Unprofessional Conduct Rule

- Purpose to protect the public from nurses’ conduct that is:
  - Incompetent
  - Unethical
  - Illegal

- Rule categories include:
  - Unsafe Practice
  - Misconduct
  - Drug related actions or conduct
  - Unlawful practice
  - Criminal conduct
NPA and Rules

- Equally enforceable; amended periodically
- RNs and LVNS are required to know and comply with both NPA & Rules as applicable
- Changes communicated via “Texas Board of Nursing Bulletin”
Position Statements (PS)

- Intended to clarify the rules or address specific practice-related issues.
  - Represent the Board’s position on issues
  - Provide guidance for decisions, policies, and practice
  - Do not have the force of law
  - Reviewed annually
Position Statements

15.1 Nurses Carrying Out Orders From Physician's Assistants
15.2 Role of the Licensed Vocational Nurse in the Pronouncement of Death
15.3 LVNs Engaging in Intravenous Therapy, Venipuncture, or PICC Lines
15.4 Educational Mobility
15.5 Nurses with the Responsibility for Initiating Physician Standing Orders
15.6 Board Rules Associated With Alleged Patient "Abandonment"
15.7 The Role of LVNs & RNs in Management and/or Administration of Medications via Epidural or Intrathecal Catheter Routes
15.8 The Role of the Nurse in Moderate Sedation
15.9 Performance of Laser Therapy by RNs or LVNs
15.10 Continuing Education: Limitations for Expanding Scope of Practice
15.11 Delegated Medical Acts
15.12 Use of American Psychiatric Association Diagnoses by LVNs, RN or APNs
15.13 Role of the LVNs & RNs As School Nurses
15.14 Duty of a Nurse in Any Practice Setting
15.15 Board's Jurisdiction Over Nursing Titles and Practice
15.16 Development of Nursing Education Programs
15.17 Board of Nurse Examiners/Board of Pharmacy, Joint Position Statement, Medication Error
15.18 Nurses Carrying out orders from Advance Practice Nurses
15.19 Nurses Carrying Out Orders from Pharmacists for Drug Therapy Management
15.20 Registered Nurses in the Management of an Unwitnessed Arrest in a Resident in a Long Term Care Facility
15.22 APNs Providing Medical Aspects of Care for Themselves or Others With Whom There is a Close Personal Relationship
15.23 The RNs Use of Complementary Modalities
15.24 Nurses Engaging In Reinsertion of Permanently Placed Feeding Tubes
15.25 Administration of Medication & Treatments by LVNs
Practice Guidelines and Interpretive Guidelines

- Provide guidance to both the nurse and the employer
- Do not carry the force of rules, viewed as setting standards of practice

- Rules and Guidelines Governing the Graduate Vocational and Registered Nurse Candidates or Newly Licensed Vocational or Registered Nurse
- Guidelines For Transitioning Of The Experienced Nurse Back Into Clinical Practice Or Into a New Practice Setting
- Interpretive Guideline for LVN Scope of Practice Under Rule 217.11
- APN - Guidelines for Determining APN Scope of Practice
- APN - CNS Diagnosis and Management Course Guidelines
First Do No Harm!

BON mandates event analysis to improve patient safety.
BON Regulates Review of Individuals & Systems for Patient Safety

Through Specified Event Reviews:

- RULE § 217.16 Minor Incident Rule
- Rule § 217.19 Incident Based Peer Review
- RULE §217.19 Peer Review for Factors
- RULE §217.20 Safe Harbor
RULE §217.16 Reporting of Minor Incidents

1) At the nurse/unit level, “an incident should be evaluated to determine if:

(A) the incident is primarily the result of factors beyond the nurse's control and addressing those factors is more likely to prevent the incident from reoccurring;
How the BON Mandates Event Analysis for Patient Safety cont’d

- Rule §217.19 Incident Based Peer Review

- At the nurse/unit/facility level, determines if deficiency in care was controlled by the nurse or due to external factors or both.

  - (5) If the result of a factor(s) beyond the nurse's control, the committee must submit a report to the applicable patient safety committee, or to the nurse administrator if there is no patient safety committee. A patient safety committee must report its findings back to the incident-based peer review committee.
RULE 217.19 Peer Review for Factors

(c) If a person who makes a report required under Subsection (b) (termination for practice....) is required ...the person shall submit a copy of the report to the nursing peer review committee. The nursing peer review committee shall review the conduct to determine if any deficiency in care by the reported nurse was the result of a factor beyond the nurse’s control. A nursing peer review committee that determines that there is reason to believe that the nurse’s deficiency in care was the result of a factor beyond the nurse’s control shall report the conduct to the patient safety committee at the facility where the reported conduct occurred, or if the facility does not have a patient safety committee, to the chief nursing officer.

Patient Safety Committee evaluates influence of factors on the conduct of the reported nurse & other practicing nurses.
How the BON Mandates Event Analysis for Patient Safety cont’d

RULE §217.20 Safe Harbor

- Defines the process by which a nurse attains protection when asked by a supervisor or physician to engage in conduct which he/she in good faith believes would violate his/her nurse’s duty to a patient.

- The desired outcome/intent of the Safe Harbor process is to attain a collaborative resolve of the situation that is believed to violate the nurse’s duty to a patient. Resolve can be achieved at any point in the process.
Review of “Factors” for Patient Safety

- Did “factors” outside the nurse's control contribute to a deficiency in care?
  - Human Factors:
    - communications, training, fatigue/scheduling
  - Environment/Equipment
  - Rules/Policies/Procedures
  - Barriers
Safety - It Doesn’t Just Happen

High Risk Situation + High Risk Behavior = Event of Harm

Prevent Human Error – Use safety behaviors & best practices

Systems & Processes – Find & Fix Problems

Use the BON mandates for event analysis to improve patient safety!
Let’s Practice

217.11 Standards of Practice

(A) Know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the nurse's current area of nursing practice;

(B) Implement measures to promote a safe environment for clients and others;

(O) Implement measures to prevent exposure to infectious pathogens and communicable conditions;

External Factors contributing to the deficiency in care:

1.
2.
3.
4.
5.

“All Washed Up”