

**ORC, OAC, OBN, ODH, O MY!
CATEGORY A
OHIO NURSE RULE & LAW**

UNDERSTANDING THE NURSE PRACTICE ACT,
SCOPE OF PRACTICE, AND LEGAL RESPONSIBILITIES

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OBJECTIVES

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1. Review and Discuss Differences/Roles of the Ohio Revised Code, Ohio Administrative Code, Ohio Board of Nursing, and the Ohio Department of Health
 2. Evaluate Nursing example of how ORC Law becomes rules in OAC
 3. Review The Ohio Nurse Practice Act, Roles and scopes of the RN, LPN, and APRN; CNE requirements, Delegation/5 Rights; 4 forms of Licensure
 4. Discuss Legal Responsibilities, Violations, and role of the American Nurse Association (ANA) and Review the Nurse Code of Ethics

OUTLINE OF DISCUSSION TOPICS

1. Identify key differences between Ohio Revised Code (ORC) and Ohio Administrative Code (OAC)
2. Discuss the Role that ORC and OAC play in the nurses' roles
3. Review Ohio Department of Health (ODH) and Ohio Board of Nursing (OBN) responsibilities
4. Address role of Ohio Nurse Practice Act- Governed by OAC and ORC/Regulated by OBN
5. Discuss the primary chapters of OBN Administrative rules, including scope and delegation
6. Review National Nurses Associations and Ethical nursing standards
7. Examine recent law updates
8. Close with Nursing Pledge and Key Points

ORC VS. OAC

Feature	Ohio Revised Code (ORC)	Ohio Administrative Code (OAC)
Who creates it?	Ohio General Assembly (State Legislature)	Ohio Department of Health (ODH), Ohio Department of Aging, and other regulatory agencies
What does it contain?	Broad laws governing assisted living, including licensing, resident rights, and basic operational requirements	Detailed rules and procedures that explain how assisted living facilities must comply with ORC laws
Legal Authority	Has the full force of law	Has the force of law but must align with the ORC
Example Law/Rule	ORC § 3721.01 – Defines “residential care facilities” (assisted living) and sets general requirements *Definitions	OAC 3701-16-02 – Specifies licensing requirements, inspections, and staffing rules for assisted living OAC 4723- Specifies rules for nursing practice
Enforcement	Violations can lead to fines, license revocation, or criminal charges	State agencies enforce compliance through inspections, penalties, and corrective actions
Focus	Big-picture legal framework for assisted living	Day-to-day operational and regulatory compliance rules- How we <u>administer</u> the law

ORC OR OAC?



ORC

Skilled care/120 days
Risk Agreements
Notice of Transfer/Discharge
Resident Rights



OAC

Application/Renewal
Personnel Requirements/Qualifications
Resident Agreement
Resident Health Assessments, Personal Care
Services, Medications, Diets
Infection Control

EXAMPLE OF HOW ORC LAW BECOMES OAC RULE-
THIS PROCESS ENSURES THAT LEGISLATURE PASSED BY THE LAW/ORC ARE PROPERLY IMPLEMENTED AND ENFORCED THROUGH SPECIFIC ADMINISTRATIVE RULES/OAC



Step 1 the ORC establishes the law

ORC 4723.48 gives Ohio board of nursing the authority to regulate the delegation of nursing task

- It states that the APRN or RN delegate certain tasks to the LPNs and unlicensed personnel, but the board must create rules specifying how that should be done** the law is broad and does not give details it just gives the board the power to make the rules



Step 2 the OAC establishes the rules

Based on ORC 4723.48 Ohio board of nursing rights OAC 47 23-13, which provides specific guidelines for delegation

- Specifically, OAC 4723-13-05 explains which nursing task may be delegated to unlicensed personnel



Step 3 the implementation and enforcement

Nurses and healthcare facilities must follow the OAC rules when delegating task-OBN enforces through audits, licensing, and disciplinary action

OHIO DEPARTMENT OF HEALTH (ODH)



Licensing and certification- Must meet requirements before they can operate



Inspections and surveys- Regular unannounced inspections



Regulations enforcement- OAC/laws for staff training, med management, and resident care



Investigating complaints- Investigate all complaints



Infection control and public health oversight- Assist with infection control outbreaks

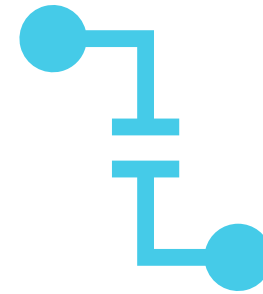


Medicaid waiver program oversight- Monitoring communities that participate

OHIO BOARD OF NURSING (OBN)



Establishes rules to regulate nursing practice within our state



Rules are within the OAC in Chapters 4723-1 to 4723-27

OHIO NURSE PRACTICE ACT OVERVIEW



- Enacted to protect public health
- Defines legal nursing practice
- Governed by Ohio Revised Code (ORC) & Ohio Administrative Code (OAC)
 - OAC 4723-1 to 4723-27
- Regulated by the Ohio Board of Nursing

KEY CHAPTERS OF OBN ADMINISTRATIVE RULES

Chapter 4723-1 Board Organization

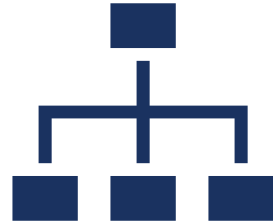
Chapter 4723-2 Public Notice

Chapter 4723-4 Standards of Practice for Registered Nurses and Licensed Practical Nurses

Chapter 4723-5 Nursing Education Programs

Chapter 4723-13 Delegation of Nursing Tasks

Chapter 4723-14 Continuing Education Requirements



Outlines the Structure, responsibilities, and record-keeping practices of the Board



Example: Name and address changes

Name changes must be submitted electronically within 30 days of the change and accompanied by appropriate legal documents (marriage certificates, divorce decree)

Address changes require to notify the Board in writing or electronically within 30 days of change

CHAPTER 4723-I BOARD ORGANIZATION

CHAPTER 4723-2 PUBLIC NOTICE



Describes procedures for issuing public notices regarding Board activities and rule changes



Example: announcement of public hearing to discuss proposed amendments to current rules and allow stakeholders and the general public the opportunity to participate in the rulemaking process

CHAPTER 4723-4 STANDARDS OF PRACTICE FOR REGISTERED NURSES AND LICENSED PRACTICAL NURSES

- Defines the professional standards and scope of practice for nurses, including guidelines on patient care, documentation and ethical contact
- Includes:
 - Scope of Practice as outlined in 4723-4-03 * Next Slide
 - Knowledge and Accountability- Nurses are required to maintain current knowledge of their duties and responsibilities
 - Competence- Must demonstrate competence by recognizing and appropriately responding to complications
 - Advanced Procedures- LPNS may undertake nursing care beyond basic preparation if they have acquired necessary education and demonstration
 - Implementation of Orders- Nurses should only implement orders that are accurate and authorized
 - Communication and Collaboration- Expectations to report and consult with other healthcare team members
 - Confidentiality- Must uphold patient confidentiality

4723-4 CONTINUED - SCOPE OF PRACTICE

- 4723-4-03 Registered Nurses
 - Patient health and develop a nursing diagnosis
 - Develop, implement, and evaluate nursing care plans
 - Administer medications and treatment as prescribed by a licensed healthcare provide
 - Perform advanced procedures with proper education and competency, such as IV therapy and specialized interventions
 - Supervise and delegate tasks to LPNs and unlicensed person out while ensuring patient safety
 - Provide patient education and health promotion



4723-4 CONTINUED - SCOPE OF PRACTICE



- 4723-4-04 Licensed Practical Nurses *Under the direction of an RN, physician, or other authorized healthcare provided
 - Collecting and documenting patient data, but not making nursing diagnoses
 - Providing basic nursing care within their training and competency
 - Administering medication and treatments (with certain restrictions, especially regarding IV therapy)
 - Performing procedures within their education and training, as long as they have demonstrated competence
 - Communicating patient status changes to an RN or physician
 - Reinforcing patient education initiated by an RN or healthcare provider

DIFFERENCES BETWEEN RN & LPN SCOPE

Responsibility	RN	LPN
Independent assessment and nursing diagnosis	Yes	No
Developing nursing care plans	Yes	No
Supervising and delegating to others	Yes	Limited
Administering IV medications (with restrictions for LPNs)	Yes	Limited
Performing specialized procedures	Yes	Limited
Working independently	Yes	No

CHAPTER 4723-5 NURSING EDUCATION PROGRAMS

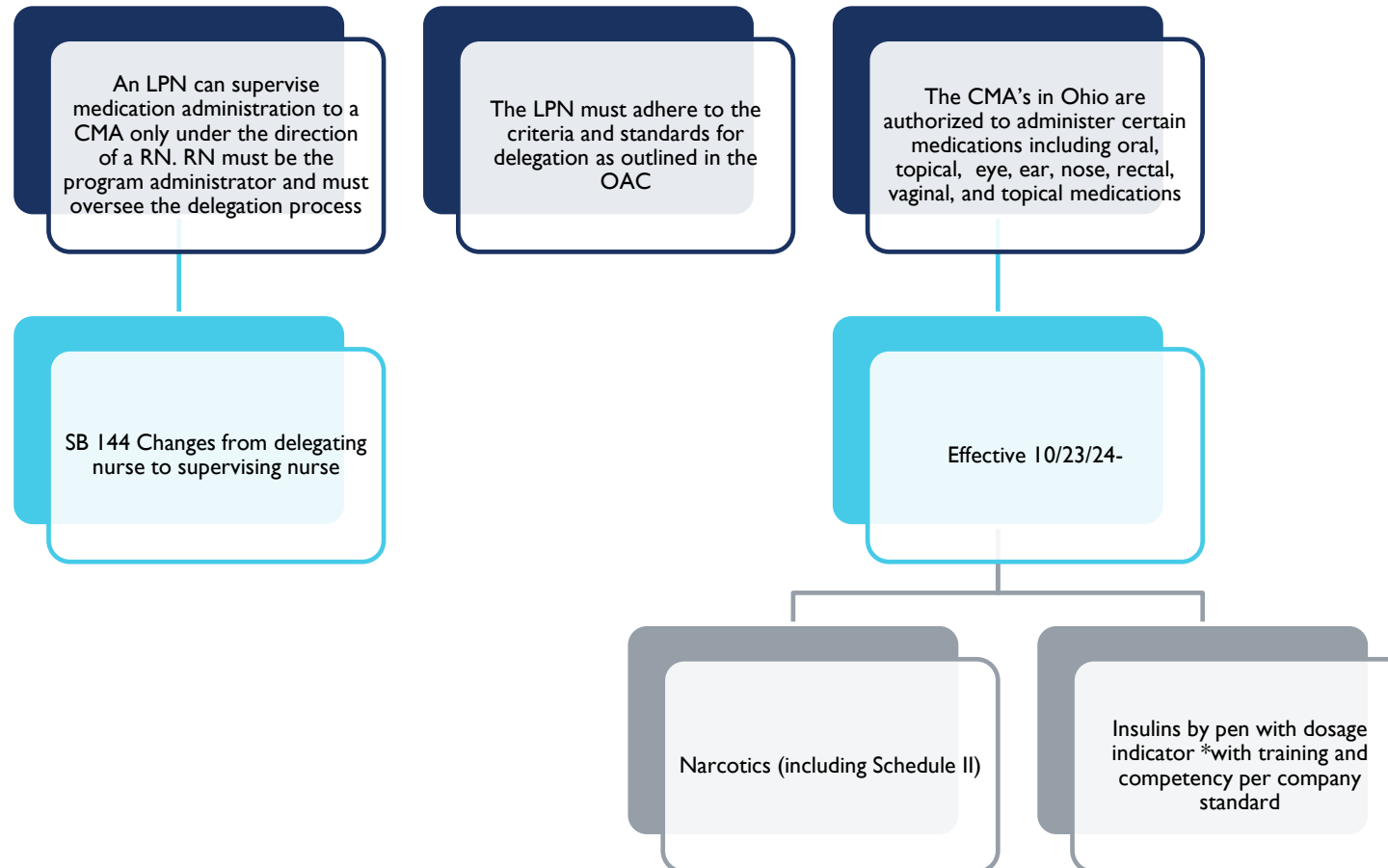
- Establishes criteria for the approval and operation of nursing education programs in Ohio and mandates that programs must not provide false or misleading information to the board
- Specifies Qualifications for various roles
 - Program Administrator- Min Masters degree with major in nursing, 5 years exp in nursing with 2 years as faculty
 - Faculty- Min Bachelors degree in Nursing, 2 years experience

CHAPTER 4723-13 DELEGATION OF NURSING TASKS

- Sets forth guidelines for delegating nursing task to unlicensed individuals, ensuring that such delegation is performed safely and appropriately
- Delegation Authority
 - An advanced practice registered nurse (APRN/CNP) may delegate medication administration to an unlicensed person following specific requirements as forth by the revised code
 - A Registered Nurse may delegate a nursing task to an unlicensed person if all specified conditions are met
 - Licensed practical nurses in Ohio have limited delegation authority and can only delegate nursing task under the direction of a registered nurse, physician, or other authorized healthcare provider
 - **Permissible Medication Delegation-licensed nurses may delegate the administration of certain medications to unlicensed individuals

LPN "SUPERVISION" TO CMA'S

OAC 4723-27-01 THROUGH 10



5 RIGHTS OF DELEGATION

Right	TASK- appropriate for delegation
Right	CIRCUMSTANCE- environment and patient are safe for task
Right	PERSON-individual performing tasks is competent
Right	DIRECTION/COMMUNICATION-clear instructions and expectations
Right	SUPERVISION/EVALUATION- oversee the task and provide feedback

1. **Assessment before delegation**-the nurse must ensure the task is within the nurses' scope of practice, the nurse possesses the necessary knowledge and skill to delegate the task, then license person has the appropriate training and ability to perform the task, adequate resources and support are available, proper supervision will be route provided during task performance
2. **Task suitable for delegation** should require no nursing judgment, have predictable results, be performed according to exact unchanging directions, not necessitate complex observations or critical decisions, not involve repeated nursing assessments, and have minimal non-life-threatening consequences if performed improperly
3. The delegating nurse must identify the specific individual who receive the care and the timeframe for task performance, and evaluate the patient's condition required nursing care complexity and frequency of the care patient stability and assessments from other healthcare professionals
4. The **delegating nurse remains accountable** for the decision to delegate and must intervene if the unlicensed person performs the task incorrectly

4723-13 CONTINUED NURSE DELEGATION

4723-13 CONTINUED LICENSE PRACTICAL NURSE DELEGATION AUTHORITY

LPNs cannot independently delegate nursing task to unlicensed individuals

LPNs may only delegate when specifically directed to do so by an RN and must follow established protocols

LPNs cannot delegate medication administration or any task that requires nursing judgment

LPNs remain responsible for ensuring the delegated task is performed correctly and must report any issues to the **supervising RN**

Example:

- **ALLOWED:** under an RN's direction and Lpn may delegate a non-complex task -example assisting a patient with ambulation to a trained nursing assistant
- **NOT ALLOWED:** an LPN cannot independently delegate medication administration or wound care to an unlicensed person

CNE REQUIREMENTS OAC 4723-14



- RN's and LPNS must complete 24 hours of continuing education per two-year renewal cycle
 - At least 1 of those hours must be related to Ohio nursing
- Additional CE Requirements for APRN's
 - add 12 hours in advanced pharmacology
- First time License Renewal (New Nurses)
 - Only need 1 hour of nursing law CE
- Must keep proof of CE certificates for 6 years in case of audit
 - Failure may result in disciplinary action

LEGAL RESPONSIBILITIES & VIOLATIONS

- Nurses are legally obligated to adhere to the standards and regulations set forth by OAC
 - Maintain professional conduct (OAC 4723-4-06)
 - Can result in disciplinary actions by the Ohio Board of Nursing
- Report impaired practice, abuse, unsafe conditions: complaints@nursing.ohio.gov
- Disciplinary actions: Suspension, fines, license revocation
 - Momentum- online Quarterly
- ORC 4723.341: Whistleblower protections
 - Immunity to individuals who report misconduct by nurses in Ohio
 - Reports made in good faith can not result in civil lawsuits or employer retaliation

AMERICAN NURSE ASSOCIATION (ANA)

National professional organization that represents and advocates for Registered Nurses across United States

- Sets the national standards for nursing education, ethics, and practice
- Protects nurses' rights and advocates for replacing improvements

Advocacy and policy development such as staffing ratios, workplace safety, and access to quality healthcare

Research and evidence-based practice publishing for nursing improvements

Nurses can join the ANA or their state nurse's association for networking advocacy and career resources



NATIONAL ASSOCIATION OF LICENSED PRACTICAL NURSES (NALPN)

NURSE CODE OF ETHICS



Set of guiding principles that define the moral and the professional obligations of the nurses



ANA Code of Ethics is the most widely recognized standard in the US



Serves as a foundation for ethical nursing practice

9 PROVISIONS OF THE NURSE CODE OF ETHICS

Provision ONE	Provision TWO	Provision THREE	Provision FOUR	Provision FIVE	Provision SIX	Provision SEVEN	Provision EIGHT	Provision NINE
Respect for Human Dignity: Treat all patients with respect and honor individual patient choices and cultural beliefs; regardless of background or health condition	Commitment to Patients: The nurse's primary duty is to the patient and patient advocacy is key to ensuring patient's rights and well-being	Protecting Patient Rights and Confidentiality: Protecting patient rights and confidentiality (HIPPA); reporting unethical or unsafe practices that threaten patient safety	Authority, accountability, and responsibility: Nurses accept accountability for their own actions and decisions and maintain professional competence through continue learning	Self-care and professional growth: Nurses must maintain their own physical and mental well-being and seek education and professional development opportunities	Creating a safe ethical work environment: Nurses must help to maintain a healthy work environment and prevent unethical behavior by collaborating with colleagues to uphold ethical standards	Advancing the Nursing Profession: Nurses contribute to research, education, and leadership in nursing and advocate for innovation and improvements in patient care	Collaboration for Human Rights & Public Health: Working to promote health equity by addressing social detriments of health and advocating for vulnerable populations	Upholding Integrity of the Nursing Profession: Nurse must support ethical policies and laws that benefit patients and society by taking action against discrimination, injustice, and unethical practices

RECENT LAW UPDATES

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- Mandatory offense Reporting Rule- **4723-7-08** (2/1/24) Nurses must report certain legal offenses within 30 days of event including felonies, misdemeanors directly related to nursing practice, drug law violations, and DUI/OVI incidents
 - Old rule was only on biannual renewal

SENATE BILL 81



- Change to **4723-9** Changes to APRN Prescriptive Authority
- Establishment of the Safe-Haven Program **4723-19**. Replaces the OBN existing substance use disorder monitoring program with the new Safe Haven program.
 - Expanded scope-Unlike the previous program which focus solely on substance use, the safe haven program also addresses impairments resulting from mental or physical disabilities
 - Inclusion of applicants -The program extended support to individuals applying for licensure or certification not just those already practicing
 - Third-party administration -OBN contract with external monitoring organization to administer the program and ensure confidentiality and specialized oversight
 - Voluntary participation -Practitioners are no longer mandated to surrender their licenses or certificates as a condition of participation, promoting a more supportive environment for seeking help
 - Protection from disciplinary action- The board is obligated to abstain from initiating disciplinary measures against certain impaired individuals who are actively participating in the program and complying with its requirements

INTERNATIONAL COUNCIL OF NURSES (ICN) PLEDGE

- ❖ In full knowledge of the obligations I am undertaking, I promise to care for the sick, with all the skills and understanding I possess, without regard to race, creed, color, politics or social status, sparing no effort to conserve life, to alleviate suffering, and to promote health.
- ❖ I will respect at all times, the dignity and religious beliefs of the patients under my care, holding in confidence all personal information entrusted to me, and refraining from any action that might endanger life or health.
- ❖ I will endeavor to keep my Professional knowledge and skill at the highest level, and to give loyal support and cooperation, to all members of the health team.
- ❖ I will do my utmost to honor the international code of nursing ethics, and to uphold the integrity of the professional nurse.



Pledge

FINAL KEY POINTS



ORC, OAC, ODH, and OBN are all crucial for the function of nurses



RN's and LPN's have different scopes and delegation process's



National Associations and Code of Ethics maintain integrity in the nursing profession

RESOURCES

- Ohio Board of Nursing- www.nursing.ohio.gov
- Momentum Journal- <https://nursing.ohio.gov/about-us/momentum-magazine>
 - ANA- www.nursingworld.org
 - NALPN- www.nalpn.org
- <https://codes.ohio.gov/ohio-revised-code/chapter-3721>
- <https://codes.ohio.gov/ohio-administrative-code/chapter-3701-16>

REFERENCES

1. Ohio Revised Code (ORC) Chapter 4723

The Ohio Revised Code (ORC) Chapter 4723 outlines the legal framework for nursing practice in Ohio, including licensing requirements, disciplinary actions, and scope of practice.

Available at: <https://codes.ohio.gov/ohio-revised-code/chapter-4723>

2. Ohio Administrative Code (OAC) 4723

The Ohio Administrative Code (OAC) 4723 establishes specific rules that govern nursing practice as regulated by the Ohio Board of Nursing.

Full text available at: <https://codes.ohio.gov/ohio-administrative-code/chapter-4723>

3. Ohio Board of Nursing

The Ohio Board of Nursing website provides updates on nursing laws, licensure information, and disciplinary actions.

Website: <https://nursing.ohio.gov/>

4. Ohio Nurse Practice Act Handbook

A summary guide of Ohio nursing laws published by nursing organizations for educational purposes. Check your CE provider for access.

5. Continuing Education (CE) Providers

Ohio nurses are required to complete Category A CEU courses on Ohio law and rules. Approved providers can be found on the Ohio Board of Nursing website.

6. National Council of State Boards of Nursing (NCSBN)

The NCSBN provides resources on nursing regulations, scope of practice, and interstate nursing compacts.

Website: <https://www.ncsbn.org/>



THANK YOU!