CHAPTER 54-05-02
STANDARDS OF PRACTICE FOR REGISTERED NURSES

Section
54-05-02-01 Statement of Intent [Repealed]
54-05-02-02 Registered Nurse Responsibility to Implement the Nursing Process [Repealed]
54-05-02-02.1 Registered Nurse Responsibility to Implement the Nursing Process [Repealed]
54-05-02-02.2 Assigning of Nursing Interventions [Repealed]
54-05-02-03 Registered Nurse Responsibilities as a Member of the Nursing Profession [Repealed]
54-05-02-04 Standards Related to Registered Nurse Professional Accountability
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54-05-02-07 Standards Related to Registered Nurse Responsibility to Organize, Manage, and Supervise the Practice of Nursing
54-05-02-08 Dispensing in Title X Clinic

54-05-02-01. Statement of intent.

Repealed effective April 1, 2014.

54-05-02-02. Registered nurse responsibility to implement the nursing process.

Repealed effective February 1, 1998.

54-05-02-02.1. Registered nurse responsibility to implement the nursing process.

Repealed effective April 1, 2014.

54-05-02-02.2. Assigning of nursing interventions.

Repealed effective April 1, 2014.

54-05-02-03. Registered nurse responsibilities as a member of the nursing profession.

Repealed effective April 1, 2014.

54-05-02-04. Standards related to registered nurse professional accountability.

Each registered nurse is responsible and accountable to practice according to the standards of practice prescribed by the board and the profession. It is not the setting or the position title that determines a nursing practice role, but rather the application of nursing knowledge. Through the application of the nursing process, the registered nurse practices nursing independently and interdependently. Registered nurses also practice nursing dependently through the execution of diagnostic or therapeutic regimens prescribed by licensed practitioners. The administration and management of nursing by registered nurses includes assigning and delegating nursing interventions that may be performed by others. The registered nurse practices within the legal boundaries for nursing through the scope of practice authorized in the Nurse Practices Act and rules governing nursing. The registered nurse shall:

1. Demonstrate honesty and integrity in nursing practice;
2. Base nursing decisions on nursing knowledge and skills, the needs of clients, and registered nursing standards;

3. Accept responsibility for judgements, individual nursing actions, competence, decisions, and behavior in the course of nursing practice;

4. Maintain competence through ongoing learning and application of knowledge in registered nursing practice; and

5. Report violations of the act or rules by self or other licensees and registrants.

History: Effective April 1, 2014.
General Authority: NDCC 43-12.1
Law Implemented: NDCC 43-12.1-02(5)

54-05-02-05. Standards related to registered nurse scope of practice.

The registered nurse utilizes the nursing process to assess, diagnose, establish a plan with outcome criteria, intervene, evaluate, and document health problems in nursing practice settings. The registered nurse shall:

1. Participate in nursing care, health maintenance, client teaching, counseling, collaborative planning, and rehabilitation, to the extent of the registered nurse's basic nursing education and additional skills through subsequent education and experiences;

2. Conduct a comprehensive nursing assessment determined by the knowledge, skills, and abilities of the registered nurse and by the client's immediate condition or needs;

3. Apply nursing knowledge based upon the integration of the biological, psychological, and social aspects of the client's condition;

4. Develop a plan of care based on nursing assessment and diagnoses that prescribe interventions to attain expected outcomes;

5. Revise nursing interventions consistent with the client's overall health care plan;

6. Utilize decisionmaking, critical thinking, and clinical judgment to make independent nursing decisions and nursing diagnoses;

7. Implement the plan of care which includes the nursing interventions, treatment, and therapy, including medication administration and delegated medical and independent nursing functions;

8. Evaluate and document the client's response to nursing care and other therapy;

9. Identify changes in client's health status and comprehend clinical implications of client's signs and symptoms as part of expected, unexpected, and emergent client situations;

10. Communicate, collaborate, and consult with other health team members;

11. Provide comprehensive nursing and health care education in which the registered nurse:

   a. Assesses and analyzes educational needs of learners;

   b. Plans educational programs based on learning needs and teaching-learning principles;

   c. Implements an educational plan either directly or by assigning selected aspects of the education to other qualified persons; and
d. Evaluates the education to meet the identified goals.

12. Participate in quality improvement activities to evaluate and modify practice;

13. Promote a safe and therapeutic environment;

14. Demonstrate knowledge and understanding of the statutes and rules governing nursing and function within the legal boundaries of registered nursing practice; and

15. Observe and follow the duly adopted standards, policies, directives, and orders of the board as they may relate to the registered nurse.

**History:** Effective April 1, 2014.

**General Authority:** NDCC 43-12.1

**Law Implemented:** NDCC 43-12.1-02(5)

**54-05-02-06. Standards related to registered nurse responsibility to act as an advocate for the client.**

The registered nurse is responsible and accountable for the care provided and for assuring the safety and well-being of the client. The registered nurse provides care based upon client care needs; the knowledge, skills, and abilities of the registered nurse; and organization policy. The registered nurse functions as a member of a health care team by collaborating with the client and health care team in providing client care. The registered nurse shall:

1. Respect the client's rights, concerns, decisions, and dignity;

2. Promote safe client environment and takes appropriate preventive interventions to protect client, others, and self;

3. Communicate client choices, concerns, and special needs with other health team members regarding:
   a. Client status and progress;
   b. Client response or lack of response to therapies; and
   c. Significant changes in client condition.

4. Maintain appropriate professional boundaries; and

5. Assume responsibility for nurse's own decisions and actions.

**History:** Effective April 1, 2014.

**General Authority:** NDCC 43-12.1

**Law Implemented:** NDCC 43-12.1-02(5)

**54-05-02-07. Standards related to registered nurse responsibility to organize, manage, and supervise the practice of nursing.**

In the administration and management of nursing care, registered nurses may assign and delegate the responsibility for performance of nursing interventions to other persons. Assigning of nursing interventions may be made by registered nurses to others who are authorized to provide nursing care through licensure as a registered nurse or licensed practical nurse. The registered nurse shall:

1. Assign to another only those nursing interventions that are included within that nurse's scope of practice, education, experience, and competence including:
a. Assigning nursing care within the registered nurse scope of practice to other registered nurses;

b. Assigning nursing care to a licensed practical nurse within the licensed practical nurse scope of practice based on the registered nurse's assessment of the client and the licensed practical nurse's ability; and

c. Supervise, monitor, and evaluate the care assigned to a licensed practical nurse.

2. Delegate to another only those nursing interventions for which that person has the necessary skills and competence to accomplish safely. The delegation of the intervention must pose minimal risk to the client and consequences of performing the intervention improperly are not life-threatening. Unlicensed assistive persons complement the licensed nurse in the performance of nursing interventions but may not substitute for the licensed nurse. A licensed nurse may delegate an intervention to a technician who may perform limited nursing functions within the ordinary, customary, and usual roles in the individual's field. In maintaining accountability for the delegation of nursing interventions, the licensed registered nurse shall:

a. Ensure that the unlicensed assistive person is on a registry and has the education and demonstrated competency to perform the delegated intervention;

b. Ensure that results of interventions are reasonably predictable;

c. Ensure that interventions do not require assessment, interpretation, or independent decisionmaking during its performance or at completion;

d. Provide clear directions and guidelines regarding the delegated intervention or routine interventions on stable clients;

e. Verify that the unlicensed assistive person follows each written facility policy or procedure;

f. Provide supervision, observation, and feedback to the unlicensed assistive person;

g. Observe, evaluate, and communicate the outcomes;

h. Monitor performance, progress, and outcomes and assure documentation of the delegated intervention;

i. Intervene and provide followup as needed;

j. Revise plan of care as needed; and

k. Retain professional accountability for the nursing care as provided.

3. The registered nurse administrator shall select nursing service delivery models for the provisions of nursing care, which does not conflict with this chapter and includes the following:

a. Assess the health status of groups of clients, analyze the data, and identify collective nursing care needs, priorities, and necessary resources.

b. Be responsible to determine that licensed nurses have the required competencies expected for the nurses' current nursing practice roles.

c. Establish training, supervision, and competency requirements of all individuals providing nursing care.

d. Shall identify nursing personnel by a position title, job description, and qualifications.
e. Ensure that the unlicensed assistive person is on a registry and has the education and demonstrated competency to perform the delegated intervention.

**History:** Effective April 1, 2014.
**General Authority:** NDCC 43-12.1-08
**Law Implemented:** NDCC 43-12.1-08(1)

54-05-02-08. Dispensing in title X clinic.

A registered nurse may dispense oral contraceptive pills, transdermal contraceptive patches, and vaginal contraceptive rings, pursuant to an order of an authorized prescriber, in the course of working in a title X clinic.

**History:** Effective July 1, 2020.
**General Authority:** NDCC 43-12.1, 43-15
**Law Implemented:** NDCC 43-15-02(7)