

Rule Reference (Emphasis added)	CCMU & OSBN Interpretive Guidance
<p>OAR 411-086-0040(2)(d) A <b>Registered Nurse</b> shall <b>complete</b> and <b>document</b> a comprehensive nursing assessment within fourteen days of admission.</p> <p>OAR 851-045-0030 (2) (c) defines comprehensive assessment.</p> <p>OAR 851-045-0060 (2) (a) allows the RN to conduct and document initial and ongoing comprehensive and focused assessments.</p> <p>OAR 851-045-0050 (2) (a) allows the LPN to conduct and document initial and ongoing <b>focused</b> assessments.</p>	<p><i>There is no authority for the LPN to conduct and document comprehensive assessments. Therefore, the comprehensive assessment <b>must</b> be conducted and documented by a RN.</i></p> <p><i>From CMS's RAI Version 2.0 Manual, P. 1-18: The RAI <b>must</b> be conducted or coordinated by a RN who signs and certifies the completion of the assessment<sup>3</sup>.</i></p>
<p>OAR 411-086-0060(2) (d) The [care] plan shall be reviewed and completed...with participation from the resident's <b>RN</b> care manager...</p> <p>OAR 851-045-0050 (2) (c) says that the LPN contributes to the development of a comprehensive plan of nursing care, and develops focused plans of care.</p>	<p><i>Evidence of active participation by an RN in the residents' care plan is required for compliance with this rule.</i></p> <p><i>The LPN's role is contributory related to care plan development and is under the direction of the RN. The LPN does not have the authority to independently develop the entire care plan.</i></p>
<p>OAR 411-086-0030 The <b>RN</b> care manager is a registered nurse who is <b>responsible and accountable for managing the nursing care</b> of his/her assigned residents. <b><u>Each resident shall have a RN care manager responsible for his/her care.</u></b></p> <p>OAR 851-045-0050 (2) states that the LPN's practice is under the clinical direction of the RN or other licensed provider who has the authority to make changes in the plan of care.</p>	<p><i>This specific rule does not preclude a LPN from active participation in the development, planning, implementation and evaluation of care, however, every resident MUST have a RN care manager. This RN is not intended to be in name only, and would require a level of knowledge and familiarity about each residents' condition, care, and treatment in order to be found as "responsible and accountable" for managing their nursing care.</i></p> <p><i>The RN and LPN work as a team. The RN leads this team and has the authority and responsibility to manage the nursing care of the client. This care management includes the performance of ongoing assessments to address changes or potential changes in resident condition. The LPN assists in this care management.</i></p>

<p>OAR 411-086-0030(2)(c)(A) The <b>RN</b> care manager shall <b>delegate</b> to other <b>licensed</b> personnel only those nursing functions and tasks that the licensee is competent and qualified to perform <u>and that are permitted by ORS Chapter 678 and the rules adopted thereunder.</u></p> <p>OAR 851-045-0060 (8) provides standards by which RNs may delegate tasks of nursing.  OAR 851-045-0040 (5) provide standards by which all licensed nurses (both RNs and LPNs) may assign and supervise care. Definitions for assignment, delegation and supervision are found in OAR 851-045-0030 (2).</p>	<p><i>Further guidance on supervision and delegation may be found in OSBN policies entitled “Licensed Nurse Supervision in Settings other than Community-based Care” and “Registered Nurse (RN) Delegation in Settings other than Community-based Care.” Both may be found on the OSBN website at <a href="http://www.oregon.gov/OSBN">www.oregon.gov/OSBN</a> under the Board Policies section.</i></p>
<p>OAR 411-086-0030(3) The name of the responsible <b>RN</b> care manager shall be documented in each resident’s clinical record.</p>	<p><i>It is intended that each resident’s assigned RN be clearly identified in the clinical record.</i></p>