

Practice Requirement for Licensed Practical Nurses, Registered Nurses & Advanced Practice Nurses

Statement of Purpose

Nursing practice hours are required as a measurement of continued competence for initial as well as continued licensure. The purpose of this policy is to articulate the types of activities and roles a nurse may use to meet the practice requirement.

Background/Significance

Nursing practice occurs in a wide variety of settings and nurses work in many different roles. As nursing practice has evolved, this diversity has increased. When counting practice hours, however, it is much easier for nurses who work in traditional roles to identify nursing practice hours than for nurses who work in more unique roles.

Wherever the licensed nurse practices, his/her practice must be in keeping with the statutory definition of the practice of nursing (ORS 678.010 (7)) and with the scope and standards of practice found in Division 45 of the Nurse Practice Act's administrative rules (OAR 851-045-0030 through 851-045-00100) at <http://oregon.gov/OSBN/pdfs/npa/Div45.pdf>. Advanced Practice Nurses are additionally responsible to meet the requirements specified in their respective Divisions. Division 50 (NP), Division 52 (CRNA), Division 54 (CNS) and Division 56 (Prescriptive and Dispensing Authority) further define these additional requirements.

The Oregon statutory definition of the practice of nursing is as follows:

ORS 678.010(7) "Practice of nursing means diagnosing and treating human responses to actual or potential health problems through such services as identification thereof, health teaching, health counseling and providing care supportive to or restorative of life and well-being and including the performance of such additional services requiring education and training which are recognized by the nursing profession as proper to be performed by nurses licensed under ORS 678.010 to 678.410 and which are recognized by rules of the board."

Board Statement

The Board acknowledges that nursing practice may occur in any setting, provided the nurse uses nursing knowledge and skill, and in particular uses the nursing process, as the basis for practice. These positions may be in a variety of health care settings, health care organizations, settings which do not exist for the purpose of providing health care or entrepreneurial ventures in which the nurse uses substantial nursing knowledge and skill. Whether the nurse uses the title "nurse" or has a job description that requires a nursing license is secondary to the actual use of the nursing process and other elements of the scope of nursing practice as defined by the administrative rules of the Board. It is not the setting or the job title that makes a role nursing practice, but the application of the body of nursing knowledge.

The Board asserts the following:

1. Licensed registered and practical nurses are required to practice 960 hours, at the level of license being sought, in the five years preceding application for licensure or renewal of an existing license. See OAR 851-031-0006 (3) (e) for rule reference to practice hours at <http://oregon.gov/OSBN/pdfs/npa/Div31.pdf>.
2. Advanced Practice Nurses are required to meet additional practice qualifications consistent with their licensing category. Fulfillment of advanced practice hours may be used to meet both the basic and advanced nursing hours requirements.
3. Practice hours may be accomplished in either a paid or unpaid role which may include a volunteer role.
4. Practice hours are based on the application of nursing knowledge appropriate to the scope of practice for the license.
5. The burden of proof that activities meet the practice requirement remains with the applicant for

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- renewal of licensure or applicant for licensure by endorsement.
6. The Board may validate practice hours through a random audit process.
 7. The Board will consider the following elements and ask the following questions when evaluating applicants for licensure regarding meeting the practice requirement:
 - a. Are the activities the nurse performs within the statutory definition of the practice of nursing?
 - b. Are the activities consistent with the administrative rules found in Division 45 of the Nurse Practice Act? If practicing at the advanced practice nurse level, are hours presented consistent with additional requirements and competencies beyond the scope of the registered nurse or licensed practical nurse?
 - c. Do the activities require application of the knowledge and skill gained from nursing education?
 - d. Does the nurse use the elements of the nursing process in his/her work?
 - e. Are the activities within the scope of practice for which application for licensure is made (licensed practical nurse, registered nurse, or advanced practice nurse)?
 - f. In a situation where care is provided for a family member or friend, would the nurse, if unavailable to provide the care, have to utilize a nurse to provide the care?
 - g. Can the nurse describe how he/she uses nursing knowledge and elements of the nursing process in his/her work?
 - h. Can the nurse volunteer articulate what parts of the volunteer role use elements of nursing practice?

Documentation

As with any type of nursing work, it is critical that appropriate documentation occurs. It is incumbent upon the licensed nurse to ensure that he/she has developed and is maintaining documentation equal to the level of professional nursing practice.

For any practice hours reported at the time of licensure renewal, the nurse must be able to document both the hours of care and the work performed in the role of nurse. Documentation is retained by the licensee for the purposes of auditing. The documentation of practice hours may be accomplished in a variety of ways. Some examples follow:

- Written tracking of dates and hours providing care
- Employment contracts with specified dates/hours
- Pay stubs
- Schedules showing assigned work hours for a specific person

Documentation of the work performed, while functioning in the role of a nurse, is also an expectation. Documentation of this work might need to be accessed during the audit process. This documentation may be provided through one or more of the following:

- Listing of duties associated with a position held
- Summary of job activities
- Position Descriptions

Care of the clients must also be documented. Examples of this type of documentation may include:

- Documents reflecting care planning
- Patient care records
- Work products such as nursing policies and procedures, patient teaching materials, professional papers, presentation outlines, etc.

Volunteer Work

Volunteer work, regardless where it occurs, may meet the practice requirement provided the nurse can demonstrate the application of nursing knowledge and skill and that he/she is following his/her scope of

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practice. Often, nurses are in the position of caring for a member of the immediate family or for a friend/neighbor. This type of nursing practice may be applied towards meeting the practice requirement for renewal of licensure provided the activities performed are those which require the judgment and skill of a licensed nurse at the level of licensure for which application is made, and are not activities that one could perform without nursing education and licensure. The nurse who cares for a family member must be able to separate those activities which are nursing practice from those which are house-hold or other non-nursing duties.

Nurses involved in screenings may be applying nursing knowledge during the screenings or they may be functioning in a more basic role. If the nurse is conducting a specific assessment (such as a blood pressure reading), evaluating the significance of the assessment, providing health teaching, and/or referral of the client to another provider, these activities demonstrate the practice of nursing. If the nurse is only taking readings and providing the result for the client to have or share with their provider, this is simply completion of a task which could be accomplished by anyone trained to gather this data.

Continuing Clinical Education Post Licensure

A licensed nurse may count post-licensure continuing education that includes specific clinical application of nursing knowledge as practice hours. The hours must be focused on application of knowledge. Examples include clinical nursing courses taken as part of a RN-BSN program and precepted clinical experiences associated with a specialty certification (such as for Wound, Ostomy and Continence certification courses). Documentation of the experience should be retained by the nurse for submission, if audited. Examples of documentation may include:

- Preceptor log sheets
- College transcripts and course syllabi
- Certificates of completion.

Dual Licensure in a Discipline Outside of Nursing

Nurses may also practice nursing in combination with another professional license. A nurse who functions under dual licensure is accountable for describing and justifying which of the activities he/she performs are nursing practice. Nurses will be held to the standards of accountability and practice found in the Nurse Practice Act when their nursing license is used in conjunction with a secondary license or role. Nurses must also be accountable to requirements of any additional licensing and be aware of the potential for conflict in role expectations. Examples of conflict between licensure categories may include but are not limited to: levels of autonomy, billing practices, recordkeeping, specialty population focus, and confidentiality.

A nurse may work in a setting in which the nursing role is combined with another role and is defined by the position description which specifies expectations from both roles. In other instances a nurse may hold separate positions functioning solely in a nursing role at times and functioning solely under another license at other times. In all instances, the nurse must be able to document those hours that are being counted as nursing practice based on the scope of practice defined in the Nurse Practice Act.

Preparing for License Renewal

It is the responsibility of the licensed nurse to take appropriate steps to prepare for license renewal and complete the required practice hours before the license expiration date. The required 960 hours required is roughly equivalent to six months full-time employment.

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Questions and Answers

1. Q: What happens if the nurse does not meet the practice requirement?:

A: The nurse must complete an approved re-entry program or individualized plan prior to issuance of license. Another option for the registered nurse or licensed practical nurse is to complete the licensing exam for the level of licensure sought and satisfactorily complete required supervised clinical practice. These specific requirements are written in OAR 851-031-0070 (1) (2), as are more details on supervised clinical practice. These rules may be found at <http://oregon.gov/OSBN/pdfs/npa/Div31.pdf>

2. Q: How does the Board enforce this requirement?

A: When a nurse applies for license renewal, the application is evaluated to ensure that all licensure standards are met. One of those standards is completion of practice hours. The application of the individual nurse is evaluated by the Board's staff. If the nurse does not meet the standard set for practice hours, he/she is referred to one of the options mentioned in question 1 above or the Board may seek additional documentation to reflect meeting the practice hour requirement.

3. Q: What if a nurse does not agree with this evaluation of practice hours?

A: The complete file will be investigated. The licensee has contested case rights as outlined in ORS chapter 183 related to Board actions taken against a license.

4. Q: What other helpful tips does the Board have for counting practice hours?

A: At times, nurses find they must figure out how many hours they were employed by a particular employer. Most nursing employers maintain records showing time worked, so the nurse may request a copy of those records. With volunteer work or other unpaid nursing practice, nurses should maintain ongoing personal records regarding hours and type of nursing work as outlined in the section on documentation above.

5. Q: My position requires me to be on-call frequently. Do I count all on-call hours as practice hours?

A: All on-call hours would not be counted as practice hours. Only the time spent engaged in nursing practice would be counted such as being called in for a case during on-call hours or consulting with a client by phone. If the time-keeping system for the facility or practice does not track these hours separately, the nurse would need to maintain a record of the time spent carrying out nursing functions during on-call hours.

References: Arizona State Board of Nursing Advisory Opinion: Dual Profession and Dual Health Care Licensure/Certification
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The Oregon State Board of Nursing (OSBN) is authorized by Oregon Revised Statutes Chapter 678 to exercise general supervision over the practice of nursing in Oregon to include regulation of nursing licensure, education and practice in order to assure that the citizens of Oregon receive safe and effective care. The OSBN further interprets statute and rule and issues opinions in the form of Board Policies, Policy Guidelines and Position Statements. Although they do not have the force and effect of law, these opinions are advisory in nature and issued as guidelines for safe nursing practice.