



Idaho Board of Nursing

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In response to questions from nurses and their employers, the members of the Board of Nursing addressed the issue of ‘safety to practice’. In particular, nurses wanted to know if they should continue to practice while taking prescribed medications, including pain medications; whether they should refuse assignments to work overtime or extra shifts; whether they should consider retirement from practice when they have reached a certain chronological age.

The Board’s “Position on Safety to Practice” provides thoughtful direction to assist nurses and their employers in addressing these concerns.

IDAHO BOARD OF NURSING
POSITION ON SAFETY TO PRACTICE
Adopted April 29, 2005

One essential element of safe nursing practice is a nurse’s functional ability: the competence and reliability with which a nurse is able to practice at any given time.

The board is aware that nurses sometimes experience situations that may compromise their ability to safely practice for either the short or long term. Some of these situations involve personal or job-related stress, sleep deprivation, the normal effects of aging, and episodic or persistent health conditions, some of which may require pain management or the use of maintenance-level prescribed medication. The list is not exclusive.

Whether a nurse should continue active nursing practice when that practice may be compromised depends upon the nurse’s ability to function safely and effectively. The assessment of functional ability is an individualized process that does not lend itself to application of a set format based on select elements. On the contrary, assessment of functional ability requires active consideration of all relevant factors, such as diagnosis, prescribed treatment and situational events, as well as an evaluation of the impact of those factors on the individual being assessed.

Although constant evaluation of one’s ability to safely and competently practice nursing is the responsibility of each individual nurse, the Board of Nursing remains the ultimate decision maker. In some instances, it may be necessary for the board to require objective physical and/or functional assessment, using reliable psychometric instruments and methods administered by qualified licensed professionals. For example, even though an individual nurse might perceive that he is capable of safe practice, a neuropsychiatric assessment, done at the Board’s request, may indicate functional impairment.

Licensed nurses are accountable for assuring that their actions and behaviors meet all applicable standards at all times. This requires constant awareness of the demands of the job and a continual process of evaluation and assessment in order to make sure that the nurse is fit to practice and competent to safely perform those functions that fall within the defined scope of nursing practice and for which the nurse has accepted responsibility. Nurses who practice while not fit to do so may be subject to disciplinary action by the board including, among others, license suspension or revocation, remedial measures, or monitored practice.