

August 14, 2001

Mary Jo Day, RN  
Associate Vice-President, Behavioral Health  
DePaul/Tulane Behavioral Health Center  
1040 Calhoun Street  
New Orleans, LA 70118

Dear Ms. Day:

Pursuant to your request regarding clarification of the scope of practice of registered nurses serving as a Licensed Independent Practitioner (LIP) for the purpose of performing face-to-face assessment of the secluded/restrained patient as required by HFCA standards for Patient Rights, the information you submitted was studied by the Nursing Practice Committee on July 17, 2001. The Committee presented its recommendation to the Board of Nursing on August 12, 2001, and, after due deliberation, the Board adopted the following opinion:

In reference to agenda item 6.3, that it is within the scope of authorized nursing practice for a registered nurse to conduct the face-to-face evaluation within one hour after a patient has been restrained or secluded provided the said RN has the documented knowledge, skills, and abilities.

It is further recognized, based on HCFA's definition of an LIP that the RN cannot serve as an LIP; however, an APRN with limited prescriptive and distributing authority may serve as an LIP as defined by HCFA conditions of Participation, Patient's Rights, Section 482.13.(f)(3)(ii)(C).

The members of the Nurse Practice Committee expressed their appreciation for your attendance at the Committee meeting. The information provided assisted the Board in its deliberation. HFCA's definition of a LIP was considered in the Committee's and Board's deliberation of the request.

If you have any questions regarding this communication, please contact me.

Sincerely,

Barbara L. Morvant, MN, RN  
Executive Director

cc: Karen Pejsach, MSN, RN

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