

ADVISORY OPINION

OPINION: Safe Practice: Fitness to Practice
ADOPTED: 10/2019
REPLACES: Safety to Practice: Fitness to Practice
REAFFIRMED: 10/20, 1/22

This Nebraska Board of Nursing advisory opinion is issued in accordance with the Nebraska Nurse Practice Act, Neb. Rev. Stat. 38-2216 (2). As such, this advisory opinion is for informational purposes only and is non-binding. The advisory opinions define acts, which in the opinion of the board, are or are not permitted in the practice of nursing.

Safe Practice: Fitness to Practice

Licensed nurses are accountable for ensuring their actions and behaviors in practice meet all applicable professional standards of care. This requires constant awareness of the demands of their work and a continual process of evaluation and assessment of personal and environmental factors that may impact fitness to practice. The Canadian Nurses Association (2008) defines fitness to practise [sic] as “all the qualities and capabilities of an individual relevant to his/her capacity to practice...including, but not limited to, freedom from any cognitive, physical, psychological or emotional condition and dependence on alcohol or drugs that impairs his or her ability to practise [sic] nursing.”

Nurses must be able to safely and effectively perform those functions that fall within their defined scope of nursing practice and for which the nurse has accepted responsibility. Functional ability is an essential element of safe and effective nursing practice. Circumstances that may compromise the ability of the nurse to practice include, but are not limited to:

1. Personal or work-related stressors
2. Fatigue
3. The normal effects of aging
4. Acute or chronic health conditions
5. Prescription medications and/or other treatments
6. Current or recent history of substance use or dependency

The American Nurses Association (ANA) Code of Ethics (2015) cites the duty of the nurse to protect the patient, the public and the profession from potential harm when practice is impaired. Constant evaluation of one’s ability to practice nursing safely and effectively is the responsibility of the individual nurse.

Individual nurses retain accountability for determining what information they wish to share with employers and requesting reasonable accommodations.

The individual nurse also has a duty to identify impairment in the practice of colleagues and take action for immediate assistance if necessary. According to ANA (2015) that process begins with consulting supervisory personnel, followed by approaching the individual in a clear and supportive manner and helping them to access appropriate resources (3.6 Patient Protection and Impaired Practice). All health care professionals in Nebraska are subject to mandatory reporting requirements for impaired practice (DHHS, 172 NAC 5).

When evidence indicates that the nurse's functional ability is impaired, action by the Board of Nursing may be warranted. In some instances, it may be necessary for the Board of Nursing to require a formal objective assessment of fitness to practice, using reliable psychometric instruments and other methods administered by qualified licensed professionals in order to determine if any limitation of the nurse's practice is needed to ensure public protection

References:

American Nurses Association. (2014). *Addressing nurse fatigue to promote safety and health: joint responsibilities of registered nurses and employers to reduce risks* Position Statement. Washington, DC: Author.

American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. Washington, DC: Author. <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/>

Canadian Nurses Association. (2008). *Code of ethics for registered nurses*. Ottawa, ON: Author.

DHHS. (2017). 172 NAC 5. *Summary of mandatory reporting requirements*. <https://dhhs.ne.gov/licensure/Documents/SMRRequire.pdf>