

NATIONWIDE CHILDREN'S HOSPITAL / COLUMBUS, OHIO

ADVANCED PRACTICE REGISTERED NURSE STANDARD CARE ARRANGEMENT (SCA)

I. STATEMENT OF PURPOSE

- A. Advanced Practice Registered Nurses (APRNs) at Nationwide Children's Hospital (NCH) include the Certified Nurse Practitioner (APRN-CNP) (Pediatric Nurse Practitioner, Family Nurse Practitioner, Family Planning/Gynecology Nurse Practitioner, Neonatal Nurse Practitioner & Adult Nurse Practitioner), Clinical Nurse Specialist (APRN-CNS), Certified Registered Nurse Anesthetist (APRN-CRNA) and Certified Nurse Midwife (APRN-CNM).
- B. However, CRNAs in Ohio practice in a supervisory relationship with physicians and do not enter into SCAs and therefore are not included in this SCA.
- C. The APRN delivers individualized, comprehensive nursing care to patients and their families with attention to physical and developmental assessments, preventative health care, education, and medical management of acute and chronic illnesses.
- D. The collaborating physician/s must maintain a current license to practice medicine in Ohio and actively engage in the same or similar practice as the APRN. The APRN's scope of practice and prescriptive authority may not exceed that of the Collaborating Physician or the requirements set forth by the Ohio Board of Nursing.

II. GENERAL

- A. All APRNs credentialed and appointed at NCH must enter into a SCA with at least one collaborating physician who is credentialed and appointed to the Medical Staff at NCH ("Collaborating Physician"). The APRN and Collaborating Physician/s must be in the same or similar clinical practice.

For APRNs practicing in a specialty in which they have identical SCAs with multiple Collaborating Physicians, the APRNs and Collaborating Physicians may all sign one group sheet indicating the review.

The signatures of each APRN, and each Collaborating Physician, or the physician's designated representative, with whom the APRN primarily collaborates indicates review of and agreement to abide by the terms of this SCA. A physician's designated representative means a physician who serves as the department or unit director or chair within NCH and within the same practice specialty, that the APRN practices, and with respect to whom the physician has executed a legal authorization to enter collaborating agreements on the physician's behalf.

Re-approval of the SCA is required when modification is made to the body of the SCA. When review and approval of this SCA is necessary, it shall be in accordance with NCH's Medical Staff Bylaws and Policies.

- B. All APRNs at NCH must be employees of NCH or an employee leased by NCH (e.g. APRNs working for the Pediatric Academic Association or APRNs leased by NCH for off-site NICUs) and must be appropriately credentialed according to NCH policies and procedures.
- C. Consistent with Ohio rules and laws, the APRN's scope of practice, recognized standards of care, NCH's hospital policies and Medical Staff Bylaws and Policies, APRN-CNPs, APRN-CNS, and APRN-CNMs may enter into consult agreements with one or more pharmacists and each Collaborating Physician authorizes the same.

III. SCOPE OF PRACTICE

A. Certified Nurse Practitioner

- 1. The APRN-CNP is a registered professional nurse with advanced formal educational preparation, who holds national certification in an APRN specialty as approved by the Ohio Board of Nursing, and current Ohio licensure as a registered nurse and an APRN license with a designation of CNP.
- 2. Consistent with and in adherence to applicable Ohio rules and laws, the APRN-CNP's scope of practice, recognized standards of care, the applicable NCH Job Description, NCH's Medical Staff Bylaws, and NCH's hospital and Medical Staff Policies, APRN-CNPs in collaboration with a physician, may provide preventative and primary care services, provide services for acute illness, and evaluate and promote patient wellness, which consists of a broad range of health services including the ability to:
 - a. Assess the health status of individuals and families through health and medical history taking, physical examination, diagnostic tests, and defining of health and development problems.
 - b. Institute and provide continuity of health care to clients, work with the client to ensure understanding of and compliance with their therapeutic regimen and recognize when to refer the client to a physician or other health care provider.
 - c. Provide instruction and counseling to individuals, families, and groups in the areas of health promotion and maintenance, including involving such person(s) in planning for their health care.
 - d. Work in collaboration with other health care providers and agencies to provide and coordinate services to individuals and families including referral to other health care providers and community resources, when appropriate.
 - e. Provide care, including therapeutic and diagnostic interventions, in accordance with medical protocols, if applicable, which are agreed upon in advance between the APRN-CNP performing the services and the Collaborating Physician.
 - f. Participate in the admission, transfer, and discharge process by writing admission, transfer, and discharge orders in collaboration and after

discussion with the Collaborating Physician. Also order needed durable medical equipment as needed for continuation of care.

- g. Prescribe appropriate pharmacologic and non-pharmacologic treatment modalities in accordance with this SCA and applicable law.
- h. Order X-rays, scans, lab test & evaluate findings, make initial diagnosis, and initiate appropriate action to facilitate the implementation of the therapeutic plan.
- i. Order blood products as needed and in collaboration with the Collaborating Physician.

B. Clinical Nurse Specialist

- 1. The APRN-CNS is a registered professional nurse with advanced formal educational preparation, who holds national certification in an APRN specialty as approved by the Ohio Board of Nursing, and current Ohio licensure as a registered nurse and an APRN license with a designation of CNS.
- 2. Consistent with and in adherence to applicable Ohio rules and laws, the APRN-CNS' scope of practice, recognized standards of care, the applicable NCH Job Description, NCH's Medical Staff Bylaws, and NCH's hospital and Medical Staff Policies, the APRN-CNS, in collaboration with a physician/s, may provide and manage care of individuals and groups with complex health problems and provide services that promote, improve and manage health care, including through:
 - a. Advanced assessment of patients and families.
 - b. Collaboration with health care team to facilitate cost effective health promotion, disease prevention services, and education for patients and families.
 - c. Collaboration with other health care providers and agencies to provide and coordinate services to patients and families including referrals to other health care providers and community resources.
 - d. Ordering X-rays, scans and lab tests & evaluating findings, making initial diagnosis, and initiating appropriate action to facilitate the implementation of the therapeutic plan.
 - e. Ordering blood products as needed, in collaboration with the Collaborating Physician
 - f. Prescribing appropriate pharmacologic and non-pharmacologic treatment modalities in accordance with this SCA and applicable law.
 - g. Analyzing clinical trends and data to identify patterns for research development and applies research findings to practice.
 - h. Order durable medical equipment needed to continue care at home.

C. Certified Nurse Midwife

1. The APRN-CNM is a registered professional nurse with advanced formal educational preparation, who holds national certification in an APRN specialty as approved by the Ohio Board of Nursing, and current Ohio licensure as a registered nurse and an APRN license with a designation of CNM.
2. Consistent with and in adherence to applicable Ohio rules and laws, the APRN-CNM's scope of practice, recognized standards of care, the applicable NCH Job Description, NCH's Medical Staff Bylaws, and NCH's hospital and Medical Staff Policies, APRN-CNMs, in collaboration with a physician, may provide the management of preventative services and those primary care services necessary to provide care to women antepartally, intrapartally, postpartally, and gynecologically, which consists of a broad range of health services including the ability to:
 - a. Assess the health status of individuals and families through health and medical history taking, physical examination, diagnostic tests, and defining of health and development problems.
 - b. Institute and provide continuity of health care to clients, work with the regimen and recognize when to refer the client to a physician or other health care provider.
 - c. Provide instruction and counseling to individuals, families, and groups in the areas of health promotion and maintenance, including involving such person(s) in planning for their health care.
 - d. Work in collaboration with other health care providers and agencies to provide and coordinate services to individuals and families including referral to other health care providers and community resources, when appropriate.
 - e. Provide care, including therapeutic and diagnostic interventions, in accordance with medical protocols, if applicable, which are agreed upon in advance between the APRN-CNM performing the services and the Collaborating Physician.
 - f. Participate in the admission, transfer, and discharge process by writing admission, transfer, and discharge orders in collaboration and after discussion with the Collaborating Physician. Also order needed durable medical equipment as needed for continuation of care.
 - g. Prescribe appropriate pharmacologic and non-pharmacologic treatment modalities in accordance with this SCA and applicable law.
 - h. Order X-rays, scans, lab test & evaluate findings, make initial diagnosis, and I initiate appropriate action to facilitate the implementation of the therapeutic plan.

- i. Order blood products as needed and in collaboration with the Collaborating Physician

IV. AVAILABILITY OF COLLABORATING PHYSICIAN INCLUDING FOR REFERRAL AND CONSULTATION

- A. Consistent with the Medical Staff Bylaws and the applicable NCH hospital and Medical Staff policies, the APRN's scope of practice and established standards of care resources, the APRN shall determine when referral or consultation is necessary.
- B. The Collaborating Physician/s shall be continuously available either on-site or via telecommunication access to the APRN for referral or consultation. Unless a shorter time response time is required by the Medical Staff Bylaws or NCH's hospital or Medical Staff policies, the Collaborating Physician or designee shall be available to provide timely, direct, personal evaluation of the patient within twenty-four (24) hours, or sooner based on the condition of the patient, following a request by the APRN. For purposes of prescribing, Collaborating Physician/s shall be continuously available to communicate with the APRN either in person or via telecommunications, and response time of the Collaborating Physician shall be no more than thirty (30) minutes.
- C. APRN-CNM's shall make an immediate referral to the Collaborating Physician if a pregnant woman's fetus is in breech or face presentation.

V. COVERAGE OF ABSENCES

- A. In instances of emergency or planned absences of the APRN, an appropriate alternate health care provider will provide services. If this is not possible, scheduled patients will be contacted and rescheduled. If the patient requires more immediate attention, he or she will be directed to the appropriate facility and/or health care provider. When possible, APRN shall give the Collaborating Physician/s at least fourteen (14) days notice prior to a planned absence .
- B. In the event of an emergency or planned absence by a Collaborating Physician, the APRN shall be notified and the Collaborating Physician shall designate a physician colleague to cover in the Collaborating Physician's absence.

VI. INCORPORATION OF NEW TECHNOLOGY AND PROCEDURES

- A. The parties shall identify new technology and procedures required for their clinical practice. Educational in-services and seminars shall be utilized as necessary. Where appropriate, the APRN shall receive formal education and clinical training prior to the implementation of the new technology or procedure.
- B. When determining the appropriateness of additional skills, the APRN and collaborating physician will consult applicable NCH policies, the Board of Nursing website (www.nursing.ohio.gov), refer to the APRN decision making guide and APRN Licensure and Practice in Ohio resource. Requests for new services, procedures or techniques shall follow the process outlined in the NCH Medical Staff Advanced Practice Provider Policy.

VII. APRN PRECEPTORSHIP

The APRN will communicate to the Collaborating Physician when a student will be working with the APRN in the capacity of a Student APRN. The Student APRN will be supervised by the APRN or Collaborating Physician/s while performing all advanced activities including history and physicals, order writing, and procedures.

VIII. RESOLUTION OF DISAGREEMENTS

- A. In the event of a disagreement between the APRN and a Collaborating Physician regarding a matter of patient management that is within the scope of practice of both parties, the APRN and the Collaborating Physician shall work collaboratively to resolve the disagreement professionally and expeditiously.
- B. If the APRN and the Collaborating Physician are unable to resolve the disagreement, the following process will be utilized to resolve such conflicts:
 - 1. If the patient requires emergent care and a decision must be made immediately, the Collaborating Physician retains the ultimate authority, although the APRN shall have the right to pursue the issue through established NCH channels.
 - 2. If the decision can be delayed, the APRN and Collaborating Physician will discuss the issue and the established medical protocols (if applicable) for the treatment currently in place. The APRN and Collaborating Physician may refer to current professional literature (journals, research texts, etc.) and/or consult a specialist within the area in question.
 - 3. If a disagreement still exists, the Section Chief/Medical Director of the practice area or designee shall assist to settle the disagreement.
 - 4. If a disagreement still exists following intervention by the Section Chief/Medical Director of the practice area, the NCH Medical Director and Chief Nursing Officer shall make a final determination.
 - 5. If the APRN believes that a clinical encounter and/or decision-making involves ethical issues, the APRN may contact and request a consult by the Integrated Ethics Committee.

IX. PRESCRIPTIVE AUTHORITY

- A. An APRN-CNP, APRN-CNS, APRN-CNM, with a valid Ohio APRN license includes prescriptive authority, and may prescribe medications and therapeutic devices, including schedule II controlled substances, in accordance with Chapter 4723 of the Ohio Revised Code, the rules of the Ohio Board of Nursing, the APRN's scope of practice, the APRN Exclusionary Formulary (the "Board Formulary") and NCH Formulary. The Board Formulary is available at <http://www.nursing.ohio.gov/Practice-Prescribing.htm>. The prescriptive authority of an APRN may not exceed the prescriptive authority of the APRN's Collaborating Physician.

The signature of the APRN and the Collaborating Physician(s) on the SCA implies acceptance of the NCH Formulary as written with the exceptions as indicated in this Section IX.

B. Off label medications

1. The APRN may prescribe medications for off-label use if the following criteria are met:
 - a. The prescribing is not prohibited by the Board or NCH Formulary.
 - b. The off label indication(s) must be consistent with the APRN's scope of practice and clinical specialty/subspecialty practice.
 - c. The off-label indication(s) is/are supported by standard clinical practice and literature.
 - d. The medication(s) being used for off-label indication(s) are included in the NCH Formulary.
 - e. If the medication(s) used for off-label indication(s) are not included in the NCH Formulary, a list of such drug(s) shall be added as an addendum to this SCA. The signature of the APRN and the Collaborating Physician(s) on this SCA indicates agreement to the off-label indication(s) that appear in the NCH Formulary or those stated in the addendum to this SCA.
2. Many of the medications used in Neonatology are used for off-label indications in the treatment of infants. These drugs are listed in the latest version of the *NeoFax*® published by Acorn Publishing, and updated annually, as well as the *Pediatric Dosage Handbook* published by Lexicomp. These medications are consistent with clinical specialty/subspecialty practice and are included in the NCH Formulary. The off-label indication(s) is/are supported by standard clinical practice and literature.

C. Prescribing opiates to minors

1. Prescribing opiates to minors will be consistent with Ohio rules and laws and NCH's hospital policies and guidelines and the Medical Staff Bylaws and Policies.

D. Ohio Automated Rx Reporting System (OARRS):

1. Consistent with rule 4723-9-12 of the Ohio Administrative Code, the APRN will review a patient's Ohio Automated Rx Reporting System (OARRS) report under those situations that are deemed mandatory. Findings of the OARRS review and any changes to the plans of care will be documented consistent with Ohio law, rules and NCH policies and guidelines . (<http://www.med.ohio.gov/pdf/rules/4731-11-11%20FAQs.pdf>) (<https://nationwidechildrens.sharepoint.com/sites/A10029/SitePages/Ohio-Pain-Management-Opioid-Prescribing-Regulation.aspx>)
2. Review of the OARRS report and any applicable consultation with a Collaborating Physician prior to prescribing shall be documented in the patient's medical record.

X. QUALITY ASSURANCE PROVISIONS

A. Quality Assurance

Each APRN shall comply with all continuing education, licensure and certification requirements

Each APRN shall participate in a quality assurance process, which includes at a minimum periodic chart reviews which includes prescribing patterns, including schedule II controlled substances if applicable, at least annually and reviewed by at least one Collaborating Physician on the Medical Staff at NCH. The quality assurance process will include an opportunity for the APRN and Collaborating Physician to discuss feedback or issues related to the chart review and a process for patient evaluation of care. Documentation of participation in an ongoing, systematic quality assurance process with a plan to maintain or improve care delivery at NCH shall satisfy this Board of Nursing requirement.

XI. ARRANGEMENT REGARDING REIMBURSEMENT

Reimbursement shall comply with existing NCH policies and procedures. At all times, current State and Federal law shall govern APRN and Collaborating Physician reimbursement, and all relevant parties shall adhere to such State and Federal laws.

XII. MISCELLANEOUS

A. Notification of change of collaborating physician:

APRN shall notify the Board of Nursing of an addition or deletion of a Collaborating Physician not later than thirty (30) days after such change takes effect.

B. Retention of SCA:

NCH, or the APRN's employer if not NCH, shall maintain the most current copy of this SCA on file. Upon request of the Ohio Board of Nursing, APRN shall immediately provide a copy of this SCA to the Board of Nursing. Copies of previous SCAs shall be retained for three (3) years.

C. Other provisions:

This SCA constitutes the entire understanding among the parties with respect to the subject matter of this SCA. This SCA supersedes all prior and contemporaneous understandings or agreements between the parties with respect to the subject matter of this SCA. This SCA may at any time be amended in whole or part by written instrument executed by each party. Should any provision or portion of this SCA be held unenforceable or invalid for any reason, the remaining provisions or portion of this SCA shall continue in full force and effect. This SCA shall be governed by and construed in accordance with the laws of the State of Ohio.

IN WITNESS WHEREOF, each of the undersigned has caused this Agreement to be duly executed in its name and on its behalf as of the date listed below.

Collaborating Physician

Printed Name_____

Specialty_____

Practice Area_____

Business_____

Address_____

Phone_____

Signature_____

Date_____

Collaborating Physician

Printed Name_____

Specialty_____

Practice Area_____

Business_____

Address_____

Phone_____

Signature_____

Date_____

Collaborating Physician

Printed Name_____

Specialty_____

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Collaborating Physician

Printed Name_____

Specialty_____

Practice Area_____

Business_____

Address_____

Phone_____

Signature_____

Date_____

Collaborating Physician

Printed Name_____

Specialty_____

Practice Area_____

Business_____

Address_____

Phone_____

Signature_____

Date_____

This SCA was last reviewed on 8/2021