

Review of Position Statement:
15.23 The RN's Use of Complementary Modalities

Summary of Request:

Board position statements are reviewed annually and revised when a need for change is identified. This position statement is being revised to reflect both the LVN and RN role.

Historical Perspective:

Board position statements do not have the force of law, but are a means of providing direction for nurses on issues of concern to the Board relevant to protection of the public. Board position statements are reviewed annually, and revised as needed, for relevance and accuracy to current practice, the Nursing Practice Act and Board rules..

Position Statement 15.23, The RNs Use of Complementary Modalities was sent to the Nursing Practice Advisory Committee for input on revisions to include the roles of both the LVN and the RN within the position statement since prior to this revision only the role of the RN was addressed. The feedback from the Nursing Practice Advisory Committee is incorporated into the proposed revisions.

Pros and Cons

Pros: Adoption of the proposed changes to position statement 15.23 will provide an opportunity for updated and improved guidance to nurses based on current practice standards, and will offer clarification for frequently asked questions. As this information is available on the BON web page, it can be readily accessed without the delays that could occur were it necessary to speak with board staff via phone or e-mail for this same information.

Cons: None noted.

Recommendation: I move to adopt the changes to position statement 15.23, The Use of Complementary Modalities by the LVN or RN, with allowance for non-substantive word editing for purposes of clarity as may be deemed necessary by Board staff.

15.23 The ~~RN's~~ Use of Complementary Modalities by the LVN or RN

Nursing is a dynamic profession. The scope of practice for one ~~RN~~nurse may differ from the scope of practice for another ~~RN~~nurse; therefore, it is impractical to create an exhaustive listing of ~~all~~ tasks that may or may not be performed by a ~~registered~~ nurse in any setting. ~~According to the Nursing Practice Act (NPA) for the State of Texas, Section 301.002(2), "professional nursing" is defined, in part, as focused on the maintenance of health or prevention of illness through nursing practices that may include assessment, intervention, evaluation, rehabilitation, and/or the care, counsel, and health education of a person who is ill, injured, infirm, or experiencing a change in normal health processes. These nursing actions may be independent or collaborative.~~

A number of complementary therapeutic modalities have long been incorporated into standard nursing practice to assist patients in meeting identified health needs and goals. Educational preparation to practice complementary modalities may be acquired through formal academic programs or continuing education.

Differentiating the Roles of the LVN and RN

The Licensed Vocational Nurse (LVN) and the professional or Registered Nurse (RN) have different roles within the nursing process. The nursing practice of an LVN requires supervision with oversight from a registered nurse, advanced practice registered nurse, physician, physician assistant, podiatrist or dentist. The LVN performs focused assessments and *contributes to* care planning, interventions, and evaluations. The RN is responsible for the overall coordination of care and performs comprehensive assessments, initiates the nursing care plan, implements and evaluates care of the client or patient.

Additional references related to the topics of supervision, assessment, and the nursing process may be found in the following resources on the BON web site:

1. Nursing Practice Act (NPA):
 - a. 301.002, Definitions, and
 - b. 301.353, Supervision of Vocational Nurse
2. Board Rule 217.11, Standards of Nursing Practice
3. Interpretive Guideline for LVN Scope of Practice
4. Frequently Asked Question: LVN's "Supervision of Practice"
5. Frequently Asked Question: LVN's Performing Initial Assessments

Complementary Modalities

Depending upon the practice setting and modality considered, complementary modalities may be used alone or in conjunction with conventional modalities. Regardless of practice setting, the ~~professional registered nurse~~LVN or RN who wishes to incorporate the use of complementary modalities into his/her ~~professional~~ nursing practice is accountable and responsible to adhere to the

Nursing Practice Act ([NPA](#)), [Board](#) Rules; and Regulations Relating to ~~Professional~~-[Nursing](#) Education, Licensure and Practice.

Rules that are particularly relevant to [LVNs or](#) RNs who integrate complementary therapies into ~~professional~~ nursing practice include rule 217.10, *Restrictions to Use of Designations for Licensed Vocational or Registered Nurse*, which requires a ~~registered~~ nurse who uses the title, [either "LVN" or "RN" \(either whether expressed or implied\)](#), to comply with the NPA and Board Rules. In addition, rule 217.11, *Standards of Nursing Practice*, forms the foundation for safe nursing practice and establishes the [LVN's or](#) RN's duty to his/her clients. While all standards apply when engaging in the practice of ~~professional registered~~ nursing, those standards most applicable to the ~~RN~~[nurse](#) who engages in complementary modalities include §217.11(1), ~~standards~~ (A)-(D), (F), (G), (R), and (T), ~~and §217.11(3)(A)~~. Additional standards may apply depending upon the specific practice situation. In order to show accountability when providing integrated or complementary modalities as nursing interventions, the [LVN or](#) RN should be able to articulate and provide evidence of:

1. Educational activities used to gain or maintain the knowledge and skills needed for the safe and effective use of such modalities;
2. Knowledge of the anticipated effects of the complementary therapy and its interactions with other modalities, including its physiological; [and/or](#) emotional/spiritual impact;
3. Selection of appropriate interventions, whether complementary, conventional, or in combination, to meet the client's needs. The interventions and rationale for selection should be documented in the client's nursing care plan. The demonstrated ability of the [LVN or](#) RN to properly perform the chosen intervention(s) should be maintained by the [LVN or](#) RN and/or his/her employer;
4. Instruction/education provided regarding the purpose of the selected intervention, e.g., how it is performed, and its potential outcomes;
5. Collaboration with other health care professionals and applicable referrals when necessary;
6. Documentation of interventions and client responses in a client's record;
7. Development and/or maintenance of policies and procedures relative to complementary modalities when used in organized health care settings;
8. Abstinence from making unsubstantiated claims about the therapy used; and
9. Acknowledgment that, as with conventional modalities, each person's response to the therapy will be unique.

While some complementary therapies, such as massage, have long been within the realm of nursing, there is a much broader connotation applied when an [LVN or](#) RN holds himself/herself out as a registered or certified practitioner of such a therapy. "Registered" or "certified" titles, [in relation to a complementary modality](#), imply a degree of mastery above those basic skills acquired through a

pre-licensure nursing program. The [LVN or](#) RN is accountable to hold the proper credentials (e.g., license, registration, certificate, etc.) to safely engage in the specific practice. The Six-Step Decision Making Model (accessible on the [Texas Board of Nursing \(BON\)](#) web page) may be a useful tool for the [LVN or](#) RN who is uncertain whether a given modality is within his/her scope of practice. The ~~professional registered~~ nurse who wishes to integrate complementary modalities when engaging in the practice of nursing should be familiar with not only the NPA ~~and~~ BON rules, [and any applicable Federal or State regulations](#), but also any prevailing standards published by national associations, credentialing bodies, and ~~professional~~ nursing organizations related to the [LVN's or](#) RN's area of practice.