RN/LPN Epic Access Changes: Scope, Accountability, and Safety

Purpose

Epic security is being updated to align RN and LPN access with New York State scope of practice, internal clinical policies, and role-based security standards. The main change is that shared RN/LPN security is being separated so that order-management and order-triggering workflows reflect role-specific scope and accountability. These changes will be made in Epic on 9/8/26.

What Is Changing

LPN workflows have been rebuilt in Epic and are available for review in the Playground (PLY) environment using existing training resources. Key changes include Review Orders replacing Active Orders Plus, removal of select navigators, and view-only access for LPNs to Acknowledge Orders and Sign & Held Orders. LPNs will no longer be able to acknowledge or sign new orders or complete documentation workflows that directly generate orders in these areas.

Basis for the Change

New York Education Law Article 139, Section 6902 defines RN and LPN practice separately and describes LPN practice as more limited and under direction. New York State references further note that LPNs may not practice independently or perform functions reserved to the RN role, such as nursing assessment and triage. Internal policy CM C-23 requires RN acknowledgment of all inpatient orders before action is taken, and limits verbal orders to defined urgent circumstances with proper documentation, read-back, and provider co-signature. Internal policy CM N-05 states that standard nursing orders and referrals are written by the RN and authorizes defined RN protocol-based orders, referrals, and emergency workflows.

LPN Responsibilities for Orders in Epic

LPNs remain essential members of the care team and will continue to provide direct patient care and complete documentation that does not independently generate orders. These Epic changes clarify accountability for ordering, align system functionality with licensure scope and organizational policy, and support safe, standardized workflows across roles while helping ensure nurses are consistently practicing within their legal scope of practice and protected from assuming unintended accountability.

RN Responsibilities for Orders in Epic

RNs retain responsibility for acknowledging orders, managing telephone and verbal orders per policy, and completing protocol-based or order-triggering workflows in Epic. New York State guidance authorizes RNs to execute written non-patient-specific orders and protocols issued by authorized practitioners under approved policy and protocol. CM N-05 supports RN entry of selected orders and referrals, including immunization workflows, HIV testing by policy, certain consults/referrals, wound/skin orders, and emergency specimen labeling workflows that do not independently create diagnostic orders. Verbal orders in inpatient units and the Emergency Department are obtained and documented by RNs only in emergency situations and managed in accordance with policy CM C-23, including timely provider co-signature.

Key References

- NYSED Practice Information / FAQ
- NYSED Article 139
- NYS Education Law §6902
- NYSED Non-Patient-Specific Orders and Protocols
- NYSED Non-Patient-Specific Orders PDF
- NYS DOL LPN overview
- Policy CM N-05 Nursing Orders / Referrals
- Policy CM C-23 Computerized Practitioner Order Entry (CPOE)