

**NURSING DIRECTIVES/GUIDELINES**

**SUBJECT/TITLE: Delegation of Nursing Tasks to Unlicensed Personnel**

**SECTION:** Standards of Care

**SUMMARY:** Specific nursing tasks can be delegated to unlicensed personnel working in local health departments under certain conditions.

**BRIEF BACKGROUND:** It is the responsibility of the registered nurse to decide when, how, and if it is appropriate to delegate nursing care tasks to an unlicensed person.Generally, tasks that can be delegated are those that have predictable results and for which the consequences of performing the task or procedure improperly are minimal and not life-threatening (18VAC90-20-440.1 (f).

***Definitions*** (Code of Virginia Title 54.1. Chapter 30 – Nursing Article 1. Board of Nursing):

“Professional nursing”, “registered nursing”, “registered professional nursing”, means the performance for compensation of any nursing acts in the observation, care and counsel of individuals or groups who are ill, injured or experiencing changes in normal health processes or the maintenance of health; in the prevention of illness or disease; in the supervision and teaching of those who are or will be involved in nursing care; in the delegation of selected nursing tasks and procedures to appropriately trained unlicensed persons as determined by the Virginia Board of Nursing; or in the administration of medications and treatments as prescribed by any person authorized by law to prescribe such medications and treatment. Professional nursing requires specialized education, judgment and skill based upon knowledge and application of principles from the biological, physical, social and behavioral sciences.

“Unlicensed person” means an appropriately trained individual, regardless of title, who receives compensation, who functions in a complementary or assistive role to the registered nurse in providing direct patient care or carrying out common nursing tasks and procedures, and who is responsible and accountable for the performance of such tasks and procedures. With the exception of certified nurse aides, this shall not include anyone licensed or certified by a health regulatory board that is practicing within his recognized scope of practice.

“Delegation” means the authorization by a registered nurse to an unlicensed person to perform selected nursing tasks and procedures. (Licensed practical nurses are **not** authorized to delegate nursing care tasks).

“Supervision” means guidance or direction of a delegated nursing task or procedure by a qualified registered nurse who receives compensation, who provides periodic observation and evaluation of the performance of the task and who is accessible to the unlicensed person.

The “entity responsible for client care” is defined as the local health district.

**PROCEDURE/DIRECTIVE:**

* Criteria for delegation:
	+ A delegation plan is not required for those tasks that unlicensed persons normally perform in local health departments such as phlebotomy, measuring vital signs, and performing simple lab tests. These are not necessarily considered nursing tasks only and are commonly taught in courses for unlicensed persons.
	+ If the public health nurse does not wish to be the supervising or delegating nurse, s/he should not serve on interview panels or provide input for or prepare the evaluation of the unlicensed person. If the nurse is performing the duties of a supervisor, s/he is the supervisor.
	+ If a health director or nurse manager decides to allow public health nurses to delegate nursing tasks to unlicensed persons, there must be a plan for delegation adopted by the district responsible for the client care (18VAC 90-20-430). This district plan must contain the following:
* A nursing assessment of the client population to be served;
* An analysis and identification of nursing care needs and priorities;
* Organizational standards to provide for sufficient supervision that ensures safe nursing care to meet the needs of the clients in their specific settings;
* Communication of the district delegation plan to staff;
* Identification of the educational and training requirements for unlicensed persons and documentation of their competencies.
	+ The delegating public health nurse must determine if the task or procedure can be properly and safely performed by the unlicensed person and the delegation does not jeopardize the health, safety, and welfare of the client.
	+ The delegating public health nurse is responsible and accountable for nursing care of the client including nursing assessment, planning, evaluation, documentation and supervision.
	+ Delegated tasks and procedures must be within the knowledge, area of responsibility, and skills of the delegating public health nurse.
	+ The delegating public health nurse must communicate, on a client-specific basis, to an unlicensed person with clear, specific instructions for performance of activities, potential complications, and expected results.
	+ The person to whom a nursing task has been delegated is clearly identified to the client as an unlicensed person by a name tag worn while giving client care and by personal communications by the delegating public health nurse when necessary.
	+ Unlicensed personnel cannot reassign delegated tasks and procedures.
* Nursing tasks may only be delegated after the public health nurse has made an assessment.
* Required assessment: In all cases, the public health nurse will make the following assessment prior to delegating any nursing task to an unlicensed person (18VAC 90-20-440):
* The delegating nurse shall assess the clinical status and stability of the client’s condition, determine the type, complexity and frequency of the nursing care needed and delegate only those tasks that:
* Do not require the exercise of independent nursing judgment;
* Do not require complex observations or critical decisions with respect to the nursing task or procedure;
* Frequently recur in the routine care of the client or group of clients;
* Do not require repeated performance of nursing assessments;
* Utilize a standard procedure in which the tasks can be performed according to exact, unchanging directions; and
* Have predictable results and for which the consequences of performing the task improperly are minimal and not life-threatening.
* The delegating public health nurse shall also assess the training, skills, and experience of the unlicensed person and shall verify the competency of the unlicensed person in order to determine which tasks are appropriate for the unlicensed person and the method of supervision required.
* A document outlining the training and demonstration of these competencies should be in the public health nurse’s and the unlicensed person’s district personnel folder. The public health nurse will present a written record of how each of the criteria was met. That record should be retained in a place designated by the district.
* The delegating public health nurse shall determine the method and frequency of supervision based on factors to include, but not be limited to the: (18VAC 90-20-450)
* Stability and condition of the client;
* Experience and competency of the unlicensed person;
* Nature of the tasks or procedures being delegated;
* Proximity and availability of the registered nurse to the unlicensed person when the nursing tasks will be performed.
* The delegating public health nurse must monitor the performance of delegated tasks and ensure appropriate documentation.
* The delegating public health nurse must evaluate client outcomes and be accessible for consultation and intervention.
* In the event the delegating nurse is not available, the delegation shall either be terminated or delegation authority shall be transferred by the delegating nurse to another public health nurse who shall supervise all nursing tasks as stated above.
* An unlicensed person **may not** delegate a task for which s/he is responsible to another unlicensed person.
* After on-going assessment of the client’s condition or the unlicensed person’s competence, the public health nurse may determine that delegation of the task is no longer appropriate.
* Nursing tasks that **shall not** be delegated to an unlicensed person are:
* Activities involving nursing assessment, problem identification, and outcome evaluation that require independent nursing judgment;
* Counseling or teaching except for activities related to promoting independence in personal care and daily living;
* Coordination and management of care involving collaboration, consultation and referral;
* Emergency and non-emergency triage; and
* Administration of medications except as specifically permitted by the Virginia Drug Control Act (§ 54.1-3400 et seq. of the *Code of Virginia).* The Virginia Drug Control Act cited is silent on the delegation of the administration of medication by unlicensed persons in the schools; therefore, it is prohibited.
* The public health nurse may teach unlicensed persons to administer medications and treatments to students in school and may, from time to time, review the procedures with the unlicensed persons to assess if more training is needed. (Refer to Code of Virginia §54.1-3408 Section M and §54.1-2901, Chapter 29, Article I for provisions on employees of a school board, administering insulin and glucagon). Refer to the definition of “professional nursing” for clarification, specifically that nurses may “teach those who are or will be involved in nursing care.” Teaching and supervising the instruction of an unlicensed person does not mean that the public health nurse is the delegating or the supervising nurse.

In those instances in schools when the principal or his designee assigns the performance of treatments to special needs students to one of his or her unlicensed staff, the school retains the responsibility of any adverse outcome, even if the procedure was taught to the unlicensed person by the public health nurse. However, if the district and the school choose to have the public health nurse be the delegating nurse, liability transfers to the Department of Health. If a public health nurse working in a school setting delegates intermittent catheterization or any other special procedure to an unlicensed person, a full delegation plan shall be written. This plan should be reviewed at least annually or more frequently if the delegating nurse chooses to do so**.**

* The “delegating” public health nurse retains the responsibility and accountability for the nursing care of the client.

**EVIDENCE BASE:**

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