CHAPTER 9

DELEGATION AND ASSIGNMENT

Section 1. Statement of Purpose.

(a) The purpose of the board These Board Rules are adopted to implement the Board’s authority to: in adopting rules and regulations in this chapter is:

(i) To establish acceptable standards of safe delegation of nursing tasks.

(ii) To provide criteria for the Board to evaluate safe and competent delegation of nursing tasks.

Section 2. Definitions.

(a) “Authority” means the source of the power to act.

(b) “Delegation” is transferring to a competent individual the authority to perform a specific nursing task in a selected situation. The nurse retains the responsibility and the accountability for the delegated tasks.

(c) “Assignment” is the performance of designated nursing activities/tasks by a licensed nurse or certified nursing assistant that are consistent with the scope of practice of a licensed nurse or the role description of a certified nursing assistant; the distribution of work that each staff member is responsible for during a given work period.

(d) “Evaluation” is the final and critical step of delegation; to review the nursing care provided, the effectiveness of the nursing interventions and the need to change any part of the plan of care in order to better meet patient needs.


(a) All decisions related to delegation and assignment are based on the fundamental principles of protection of the health, safety and welfare of the public, (the statements in Section 3 are directly from the Joint Statement on Delegation, American Nurses Association and the National Council of State Boards of Nursing, 2006).

(i) The registered nurse RN takes responsibility and accountability for the provision of nursing practice.

(ii) The registered nurse RN directs care and determines the appropriate utilization of any nursing assistant CNA involved in providing direct patient care.

(iii) The registered nurse RN may delegate components of care but does not delegate the nursing process itself. The functions of assessment, planning, evaluation and nursing judgment are pervasive to nursing practice and cannot be delegated.
(iv) The decision of whether or not to delegate or assign is based upon the registered nurse’s judgment concerning the condition of the patient, the competence of members of the nursing team and the degree of supervision that will be required of the registered nurse if a task is delegated.

(v) The registered nurse delegates only those tasks for which she or he believes the other health care worker has the knowledge and skill to perform, taking into consideration training, cultural competence, experience and facility/agency policies and procedures.

(vi) The registered nurse individualizes communication regarding the delegation to the nursing assistant and client situation. The communication should be clear, concise, correct and complete. The registered nurse verifies comprehension with the nursing assistant and that the nursing assistant accepts the delegation and the responsibility that accompanies it.

(vii) Communication must be a two-way process. Nursing assistants must have the opportunity to ask questions and/or for clarification of expectations.

(viii) The registered nurse uses critical thinking and professional judgment when following the Five Rights of Delegation:

(A) The Right task;

(B) Under the Right circumstances;

(C) To the Right person;

(D) With the Right directions and communication; and

(E) Under the Right supervision and evaluation.

(b) Chief nursing officers are accountable for establishing systems to assess, monitor, verify and communicate ongoing competence requirements in areas related to delegation. (Joint Statement on Delegation, American Nurses Association and the National Council of State Boards of Nursing, 2006, pg 2).

Section 4. Section 3. Accountability.

(a) The delegating licensed nurse retains accountability for:

(i) Nursing care when delegating nursing tasks or interventions to ensure patient safety;

(ii) The decision to delegate;

(iii) Verifying the delegatee’s competency to perform the tasks;

(iv) Providing direction or supervision;
(v) The performance of the delegated task;

(vi) Evaluating the effectiveness of the delegated nursing task or interventions performed under direction or supervision.

(vi)(b) Certain nursing functions require nursing knowledge, judgment, and skill and may not be delegated as specified within the parameters of Advisory Opinions.


(a) The licensed nurse delegates tasks based on the needs and condition of the patient/client, potential for harm, stability of the patient’s/client’s condition, complexity of the task, predictability of the outcomes, ability of the staff to whom the task is delegated, and the context of other patient/client needs.

(b) Nursing assistant CNA may complement the licensed nurse in the performance of nursing functions but shall not substitute for the licensed nurse.

(c) Delegation shall be task-specific, client-specific, and nursing assistant CNA specific.

(d) The standards of nursing assistant CNA practice evolve from the performance of delegated nursing related tasks and services regardless of an individual's title or care setting.

(e) The delegator shall be a licensed nurse.

(i) The delegating nurse must delegate only those tasks which:

(A) Are within his/her area of responsibility and scope of practice;

(B) A reasonable, prudent nurse would find, within his/her sound nursing judgment, appropriate to delegate;

(C) In the opinion of the delegator, can be properly and safely performed by the CNA without jeopardizing the client’s welfare;

(D) Do not require the CNA to exercise nursing judgment, complex observations or nursing assessments, critical decision making or interventions except in an emergency situation; and

(E) Are client specific, task specific, and CNA specific and outcomes are predictable.

(i)(ii) When delegating a nursing task, the delegator shall:

(A) Make an initial assessment of the client's nursing care needs before delegating the task;

(B) Verify the nursing assistant’s CNA’s competence to perform any nursing
task prior to delegation;

(C) Verify appropriate continuing education for each CNA nursing assistant for each task to be performed;

(D) Communicate with CNA nursing assistant allowing the opportunity to ask questions, provide feedback, or clarification;

(E) Inform the patient/client of the decision to delegate;

(F) Provide appropriate direction or supervision;

(G) Remain accountable for the delegated tasks;

(H) Evaluate client outcomes and make adjustments accordingly; and

(I) Make clear to the CNA nursing assistant that the delegated task cannot be re-delegated.

(J) Delegation is unnecessary if the particular activity or task is already within the legally recognized scope of practice of the individual (delegate) who is to perform the activity or task;

(1.) An element of assignment exists in all delegation; however, for the purpose of these rules, assignment means that an individual designates another to be responsible for specific patients—clients or selected nursing functions for specifically identified patients—clients;

(ii) The delegating nurse must delegate only those tasks which:

(A) Are within his/her area of responsibility and scope of practice;

(B) A reasonable, prudent nurse would find, within his/her sound nursing judgment, appropriate to delegate;

(C) In the opinion of the delegator, can be properly and safely performed by the nursing assistant without jeopardizing the client's welfare;

(D) Do not require the nursing assistant to exercise nursing judgment, complex observations or nursing assessments, critical decision making or interventions except in an emergency situation; and

(E) Are client specific, task specific, and nursing assistant specific and outcomes are predictable.
Section 6.  

Degree of Direction or Supervision.

(a) The degree of required direction or supervision for the 

nursing assistant CNA shall comply with the following criteria:

   (i) Direction or supervision means a licensed nurse providing appropriate guidance in 

the accomplishment of a nursing task, including but not limited to:

   (A) Periodic observation and evaluation of the performance of the task; and

   (B) Validation that the task has been performed according to established 

standards of practice.

   (ii) Delegation will ensue after an evaluation of factors including but not limited to the:

   (A) Stability of the client;

   (B) Training and capability of the delegtee;

   (C) Nature of the nursing task being delegated; and

   (D) Proximity and availability of the delegator to the delegtee.

   (iii) The delegating nurse or another qualified nurse shall be readily available either in 

person or by telecommunication.

Section 7.  

Basic Nursing Functions, Tasks, and Skills that May Not be Delegated.

(a) The following nursing functions require nursing knowledge, judgment, and skill 

and may not be delegated:

   (i) The nursing process:

      (A) Assessment;

      (B) Development of the nursing diagnosis;

      (C) Establishment of the nursing care goal;

      (D) Development of the nursing care plan; and

      (E) Evaluation of the patient’s progress, or lack of progress, toward goal 

achievement.

   (ii) Nursing interventions, including but not limited to the following:

      (A) Administration of medications;
(B) Calling or relaying of physician or health care provider orders including prescriptions;

(C) Any procedure requiring the use of sterile technique including wound or dressing care;

(D) Insertion or removal of peripheral or central intravenous catheters;

(E) Insertion or removal of nasogastric or other feeding tubes;

(F) Insertion or removal of urinary foley catheters or suprapubic catheters;

(G) Removal of:

(I) Endotracheal tubes;

(II) Chest tubes;

(III) Jackson-Pratt drain tubes (JP tubes);

(IV) Arterial or central catheters;

(V) Epidural catheters; and

(VI) Any indwelling device.

(H) Patient triage.

(b) The authority to receive verbal orders from providers.

(c) Teaching or counseling patients or a patient’s family relating to nursing care and nursing services.

(d) —

Section 8. Decision Tree for Delegation to Certified Nursing Assistants/Nurse Aides:

Joint Statement on Delegation

American Nurses Association (ANA) and the National Council of State Board of Nursing (NCSBN)

National Council of State Boards of Nursing (NCSBN)