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OPINION: DELEGATION
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ORIGINATING COMMITTEE:
 Practice & Education Committee

An advisory opinion adopted by WSBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of WSBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training and supervision to assure the safety of their patient population and/or decrease risk.

Within the Scope of Practice/Role of APRN RN LPN CNA

**ADVISORY OPINION
 DELEGATION**

In accordance with Wyo. Stat. §33-21-122(c)(iii) of the Wyoming Nursing Practice Act (NPA), the Wyoming State Board of Nursing (WSBN) has approved the following Advisory Opinion on Delegation.

Intent of Advisory Opinion:

The WSBN has received numerous inquiries regarding the role of nurses and unlicensed assistive personnel (UAP) in the delegation and assignment process. The Administrative Rules and Regulations of the Wyoming State Board of Nursing, Chapter 3 outlines scope of practice for nurses and the role of CNAs as well as rules for assignment and delegation. In addition to these rules, the following advisory opinions offer clarification on scope of practice and role: *LPN and RN Scope of Practice*; *CNA Role*; *CNA II Role*; and *LPN IV Therapy Scope of Practice*.

The Board offers the following answer to the questions, “*Is he/she working under my license?*” and “*Am I liable for their negligent acts?*” Please review the responsibilities described through the three-prong approach including the nurse, Delegatee and employer (or system). Each person in the process has their

own responsibilities and could potentially be subject to discipline for not fulfilling their duties.

The Board has adopted the National Council of State Boards of Nursing, *National Guidelines for Nursing Delegation*¹ to provide clear direction and standardization of the delegation process. The delegation process should be based on these guidelines for the safe delegation of nursing responsibilities.

FIGURE 1

Delegation Model



Employer/Nurse Leader Responsibilities

1. The employer must identify a nurse leader responsible for oversight of delegated responsibilities for the facility. If there is only one licensed nurse within the practice setting that licensed nurse must be responsible for oversight of delegated responsibilities for the facility.

Rationale: The nurse leader has the ability to assess the needs of the facility, understand the type of knowledge and skill needed to perform a specific nursing responsibility, and be accountable for maintaining a safe environment for patients. He or she is also aware of the knowledge, skill level, and limitations of the licensed nurses and UAP. Additionally, the nurse leader is positioned to develop appropriate staffing models that take into consideration the need for delegation. Therefore, the decision to delegate begins with a thorough assessment by a nurse leader designated by the institution to oversee the process.

2. The designated nurse leader responsible for delegation, ideally with a committee (consisting of other nurse leaders) formed for the purposes of addressing delegation, must determine which nursing responsibilities may be delegated, to whom, and under what circumstances. The nurse leader must be aware of the state/jurisdiction's NPA and the laws/rules and regulations that affect the delegation process and ensure all institution policies are in accordance with the law.

Rationale: A systematic approach to the delegation process fosters communication and consistency of the process throughout the facility.

3. Policies and procedures for delegation must be developed. The employer/nurse leader must outline specific responsibilities that can be delegated and to whom these responsibilities can be delegated. The policies and procedures should also indicate what may not be delegated. The employer must periodically review the policies and procedures for delegation to ensure they remain consistent with current nursing practice trends and that they are consistent with the state/jurisdiction's NPA (institution/employer policies can be more restrictive, but not less restrictive).

Rationale: Policies and procedures standardize the appropriate method of care and ensure safe practices. Having a policy and procedure specific to delegation and delegated responsibilities eliminates questions from licensed nurses and UAP about what can be delegated and how they should be performed.

4. The employer/nurse leader must communicate information about delegation to the licensed nurses and UAP and educate them about what responsibilities can be delegated. This information should include the competencies of delegates who can safely perform a specific nursing responsibility.

Rationale: Licensed nurses must be aware of the competence level of staff and expectations for delegation (as described within the policies and procedures) in order to make informed decisions on whether or not delegation is appropriate for the given situation. Licensed nurses maintain accountability for the patient. However, the Delegatee has responsibility for the delegated activity, skill, or procedure.

5. All delegates must demonstrate knowledge and competency on how to perform a delegated responsibility. Therefore, the employer/nurse leader is responsible for providing access to training and education specific to the delegated responsibilities. This applies to all RNs, LPN/VNs, and UAP who will be delegates. Competency validation should follow education and competency testing should be kept on file. Competency must be periodically evaluated to ensure continued competency. The context and processes associated with competency validation will be different for each activity, skill, or procedure being delegated. Competency validation should be specific to the knowledge and skill needed to safely perform the delegated responsibility as well as to the level of practitioner (i.e., RN, LPN/VN, and UAP) to whom the activity, skill, or procedure has been delegated.

Rationale: This ensures that competency of the Delegatee is determined not only at the beginning of the delegation process, but on an ongoing basis, as well.

6. The nurse leader responsible for delegation, along with other nurse leaders and administrators within the facility, must periodically evaluate the delegation process. The licensed nurse and/or his or

her manager (if applicable) must report any incidences to the nurse leader responsible for delegation. A decision should be made about corrective action, including whether further education and training are needed or whether that individual should not be allowed to perform a specific delegated responsibility.

Rationale: Patient safety should always be the priority for a health care setting. If any compromises in care are noted, immediate action must be taken. Gravlin and Bittner (2010) identified that evaluation of the effectiveness of the delegation process and resolution of any issues is critical to delegation.

7. The employer/nurse leader must promote a positive culture and work environment for delegation.

Rationale: A positive culture nurtures effective communication and collaboration in order to create an environment supportive of patient-directed care.

Licensed Nurse Responsibilities

Any decision to delegate a nursing responsibility must be based on the needs of the patient or population, the stability and predictability of the patient's condition, the documented training and competence of the Delegatee, and the ability of the licensed nurse to supervise the delegated responsibility and its outcome, with special consideration to the available staff mix and patient acuity. Additionally, the licensed nurse must consider the state/jurisdiction's provisions for delegation and the employer's policies and procedures prior to making a final decision to delegate. Licensed nurses must be aware that delegation is at the nurse's discretion, with consideration of the particular situation. *The licensed nurse maintains accountability for the patient, while the Delegatee is responsible for the delegated activity, skill, or procedure.* If, under the circumstances, a nurse does not feel it is appropriate to delegate a certain responsibility to a Delegatee, the delegating nurse should perform the activity him/herself.

1. The licensed nurse must determine when and what to delegate based on the practice setting, the patients' needs and condition, the state/jurisdiction's provisions for delegation, and the employer policies and procedures regarding delegating a specific responsibility. The licensed nurse must determine the needs of the patient and whether those needs are matched by the knowledge, skills, and abilities of the Delegatee and can be performed safely by the Delegatee. The licensed nurse cannot delegate any activity that requires clinical reasoning, nursing judgment, or critical decision making. The licensed nurse must ultimately make the final decision whether an activity is appropriate to delegate to the Delegatee based on the Five Rights of Delegation (National Council of State Boards of Nursing, 1995). See Table 1 for the description of the Five Rights of Delegation.

Table 1

<p>Right Task</p> <p>The activity falls within the delegatee's job description or is included as part of the established written policies and procedures of the nursing practice setting. The facility needs to ensure the policies and procedures describe the expectations and limits of the activity and provide any necessary competency training.</p>
<p>Right Circumstance</p> <p>The health condition of the patient must be stable. If the patient's condition changes, the Delegatee must communicate this to the licensed nurse, and the licensed nurse must reassess the situation and the appropriateness of the delegation.</p>
<p>Right Person</p> <p>The licensed nurse along with the employer and the Delegatee is responsible for ensuring that the Delegatee possesses the appropriate skills and knowledge to perform the activity.</p>
<p>Right Directions and Communication</p> <p>Each delegation situation should be specific to the patient, the licensed nurse, and the Delegatee.</p> <p>The licensed nurse is expected to communicate specific instructions for the delegated activity to the Delegatee; the Delegatee, as part of two-way communication, should ask any clarifying questions. This communication includes any data that need to be collected, the method for collecting the data, the time frame for reporting the results to the licensed nurse, and additional information pertinent to the situation.</p> <p>The Delegatee must understand the terms of the delegation and must agree to accept the delegated activity.</p> <p>The licensed nurse should ensure that the Delegatee understands that she or he cannot make any decisions or modifications in carrying out the activity without first consulting the licensed nurse.</p>
<p>Right Supervision and Evaluation</p> <p>The licensed nurse is responsible for monitoring the delegated activity, following up with the Delegatee at the completion of the activity, and evaluating patient outcomes. The Delegatee is responsible for communicating patient information to the licensed nurse during the delegation situation. The licensed nurse should be ready and available to intervene as necessary. The licensed nurse should ensure appropriate documentation of the activity is completed.</p>

Rationale: The licensed nurse, who is present at the point of care, is in the best position to assess the needs of the patient and what can or cannot be delegated in specific situations.

2. The licensed nurse must communicate with the Delegatee who will be assisting in providing patient care. This should include reviewing the delegatee's assignment and discussing delegated responsibilities, including information on the patient's condition/stability, any specific information pertaining to a certain patient (e.g., no blood draws in the right arm), and any specific information about the patient's condition that should be communicated back to the licensed nurse by the Delegatee.

Rationale: Communication must be a two-way process involving both the licensed nurse delegating the activity and the Delegatee being delegated the responsibility. Evidence shows that the better the communication between the nurse and the Delegatee, the more optimal the outcome (Corazzini, Anderson, Mueller, Hunt-McKinney et al., 2013). The licensed nurse must provide information about the patient and care requirements. This includes any specific issues related to any delegated responsibilities. These instructions should include any unique patient requirements. The licensed nurse must instruct the Delegatee to regularly communicate the status of the patient.

3. The licensed nurse must be available to the Delegatee for guidance and questions, including assisting with the delegated responsibility, if necessary, or performing it him/herself if the patient's condition or other circumstances warrant doing so.

Rationale: Delegation calls for nursing judgment throughout the process. The final decision to delegate rests in the hands of the licensed nurse as he or she has overall accountability for the patient.

4. The licensed nurse must follow up with the Delegatee and the patient after the delegated responsibility has been completed.

Rationale: The licensed nurse who delegates the "responsibility" maintains overall accountability for the patient, while the Delegatee is responsible for the delegated activity, skill, or procedure.

5. The licensed nurse must provide feedback information about the delegation process and any issues regarding Delegatee competence level to the nurse leader. Licensed nurses in the facility need to communicate, to the nurse leader responsible for delegation, any issues arising related to delegation and any individual that they identify as not being competent in a specific responsibility or unable to use good judgment and decision making.

Rationale: This will allow the nurse leader responsible for delegation to develop a plan to address the situation.

Delegatee Responsibilities

Everyone is responsible for the well-being of patients. While the nurse is ultimately accountable for the overall care provided to a patient, the Delegatee shares the responsibility for the patient and is fully responsible for the delegated activity, skill, or procedure.

1. The Delegatee must accept only the delegated responsibilities that he or she is appropriately trained and educated to perform and feels comfortable doing given the specific circumstances in the health care setting and patient's condition. The Delegatee should confirm acceptance of the responsibility to carry out the delegated activity. If the Delegatee does not believe he or she has the appropriate competency to complete the delegated responsibility, then the Delegatee should not accept the delegated responsibility. This includes informing the hospital leadership if he or she does not feel he or she has received adequate training to perform the delegated responsibility, is not performing the procedure frequently enough to do it safely, or his or her knowledge and skills need updating.

Rationale: The Delegatee shares the responsibility to keep patients safe and this includes only performing activities, skills, or procedures in which he or she is competent and comfortable doing.

2. The Delegatee must maintain competency for the delegated responsibility.

Rationale: Competency is an ongoing process. Even if properly taught, the Delegatee may become less competent if he or she does not frequently perform the procedure. Given that the Delegatee shares the responsibility for the patient, the Delegatee also has a responsibility to maintain competency.

3. The Delegatee must communicate with the licensed nurse in charge of the patient. This includes any questions related to the delegated responsibility and follow-up on any unusual incidents that may have occurred while the Delegatee was performing the delegated responsibility, any concerns about a patient's condition, and any other information important to the patient's care.

Rationale: The Delegatee is a partner in providing patient care. He or she is interacting with the patient/family and caring for the patient. This information and two-way communication is important for successful delegation and optimal outcomes for the patient.

4. Once the Delegatee verifies acceptance of the delegated responsibility, the Delegatee is accountable for carrying out the delegated responsibility correctly and completing timely and accurate documentation per facility policy. The Delegatee cannot delegate to another individual. If the Delegatee is unable to complete the responsibility or feels as though he or she needs assistance, the Delegatee should inform the licensed nurse immediately so the licensed nurse can assess the situation and provide support. Only the licensed nurse can determine if it is appropriate to delegate the activity to another individual. If at any time the licensed nurse determines he or she needs to perform the delegated responsibility, the Delegatee must relinquish responsibility upon request of the licensed nurse.

Rationale: Only a licensed nurse can delegate. In addition, because they are responsible, they need to provide direction, determine who is going to carry out the delegated responsibility, and assist or perform the responsibility him/herself, if he or she deems that appropriate under the given circumstances.

REFERENCES
NEED TO ADD