

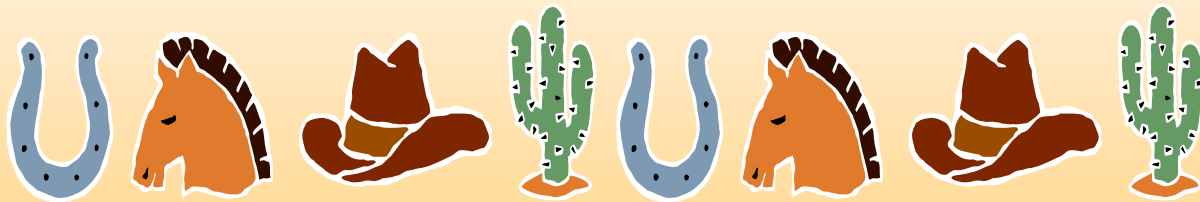
Round 'em up, Lead 'em out:

The ART of DELEGATION

and Other Scenarios

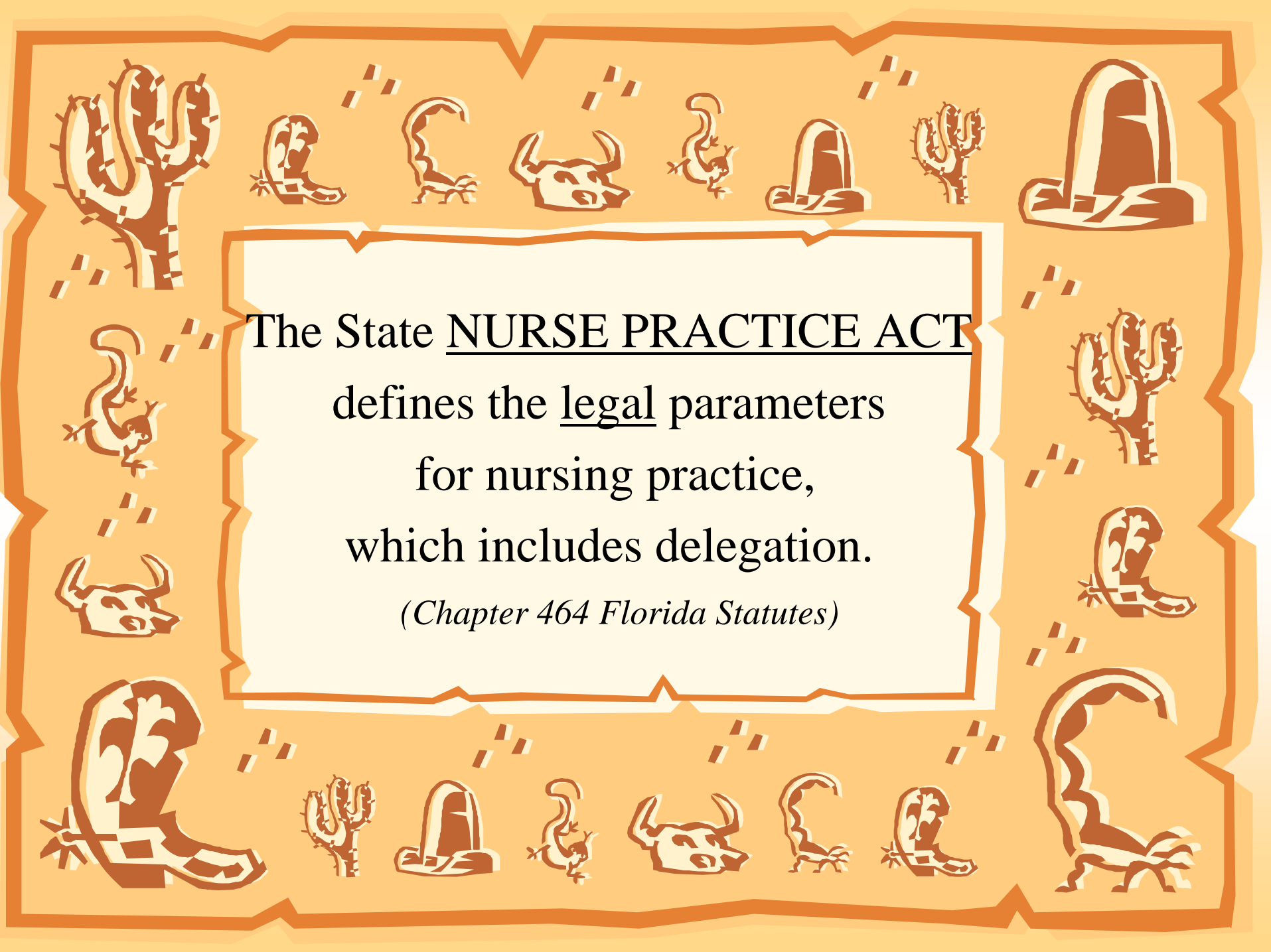
Mary K. Parry, MS, BSN, RN, CNA-BC

Gloria Dunham, MA, BSN, RN



Objectives

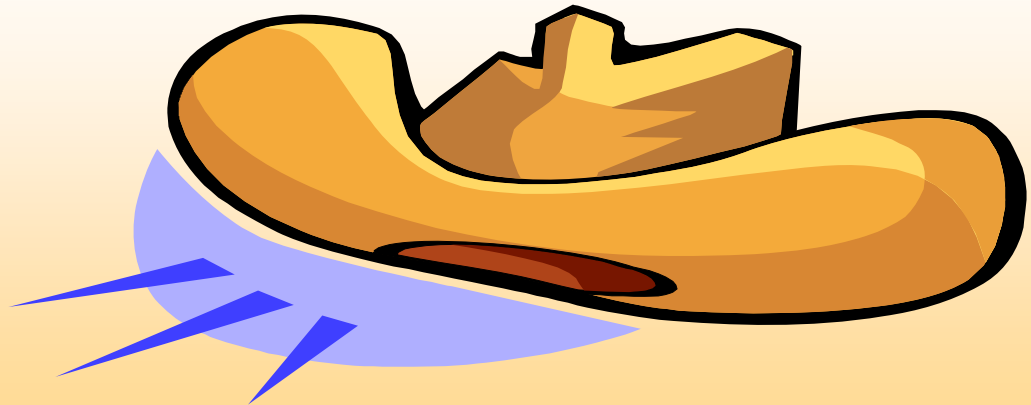
- Define delegation according to the Florida Board of Nursing
- Name activities that CAN and CANNOT be delegated
- Identify the responsibility of the nurse for supervision of delegated tasks
- List factors to consider in selecting a task or delegating to a specific individual
- Describe how communication is the key to the delegation process
- Discuss the “5 Rights” of delegation and the role of the Charge Nurse in delegation



The State NURSE PRACTICE ACT
defines the legal parameters
for nursing practice,
which includes delegation.
(Chapter 464 Florida Statutes)

Florida Board of Nursing

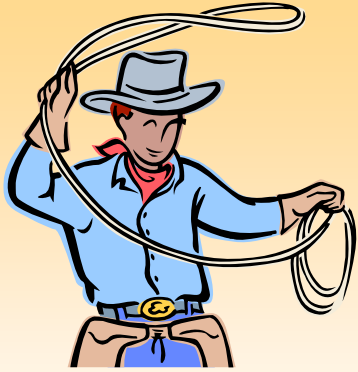
- Rules of the Board of Nursing
- Chapter 64B9-14 of Florida Administrative Code “Delegation to Unlicensed Assistive Personnel”



Definition of Delegation

“Transference to a competent individual the authority to perform a selected task or activity in a selected situation by a nurse qualified by licensure and experience to perform the task or activity”

(Rules of Florida Board of Nursing, Chapter 64B9-14.001 of Florida Administrative Code)



Who is the delegator?

- In Florida, it is the RN or LPN who delegates authority to the UAP (Unlicensed Assistive Personnel)
- UAP's may be CNA's, PCA's, Techs, Student Nurses, etc.
- UAP's do not hold licenses from the Division of Health Quality Assurance of the Department of Health

What are the roles of each?

REGISTERED NURSE

- Observation, Assessment, Nursing Diagnosis, Planning, Intervention, Evaluation of Care and Health Teaching
- Administration of Medications and Treatments as prescribed by a duly authorized licensed practitioner in the state
- Supervision and Teaching of other personnel in the performance of the above acts.

What are the roles of each?

LICENSED PRACTICAL NURSE

- Performance of selected acts including administration of treatments and medication in the care of the ill, injured, or infirm and the promotion of wellness, maintenance of health, and prevention of illness of others.
- Works under the direction of a Registered Nurse, a Licensed Physician, a Licensed Osteopath, a Licensed Podiatric Physician or a Dentist.

What are the roles of each?

UNLICENSED ASSISTIVE PERSONNEL

- Are assigned to function in an assistive role to RN's or LPN's in the provision of patient care services through regular assignments, or delegated tasks or activities, and under the supervision of a nurse.
- “Assignments” are the normal daily functions of the UAP based on institutional job duties which do not involve delegation of nursing duties or nursing judgment.

The RN may delegate elements of care but does not delegate the nursing process itself.

The RN transfers the responsibility for the performance of a task, but retains professional accountability for the overall care of the patient.



Activities that CAN be delegated

- Activities of daily living
- Data collection – I&O, Vital Signs, Accuchecks
- Activities/procedures authorized in the job description and for which the individual is competent

Activities that should NOT be delegated

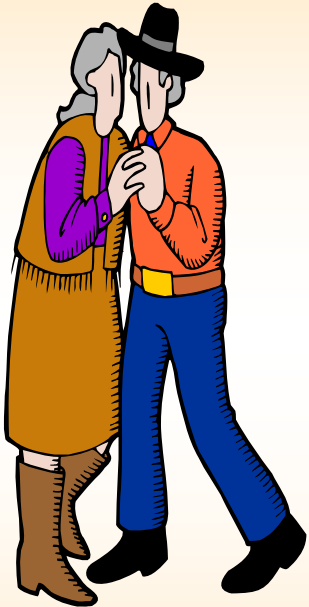
- Activities outside of the scope of practice or job description
- Activities for which the individual has not demonstrated competence
- Activities that include the use of the nursing process or the judgment/skill of a nurse:
 - Nursing assessment, diagnosis, nursing goals and plan of care, evaluation of patient progress

You cannot delegate something for which you don't have the knowledge and skills yourself.



Nurses are accountable for supervising those to whom they have delegated tasks!

What about Supervision?



“Supervision is the provision of guidance by a qualified nurse and inspection by the nurse for the accomplishment of a nursing task or activity, provided the nurse is qualified and legally entitled to perform such task or activity.”

The delegator must use **nursing judgment to consider the suitability of the task or activity to be delegated.**

- **The needs and condition of the patient**
- **Potential for harm to the patient**
- **Complexity of the task**
- **Predictability of the outcomes**
- **Level of interaction/communication required**
- **Resources – equipment or personnel**

Factors to consider in delegating to a specific individual

- Normal assignment
- Validation of education/training
- Job description
- Competency



Don't Assume!

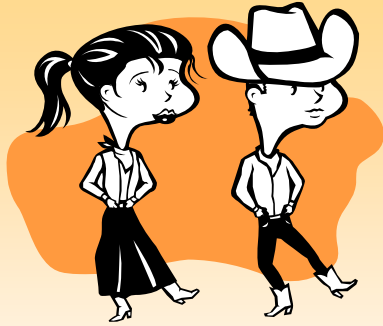
- That team members know what you want
- That all staff understand priorities of care
- That UAP's or LPN's understand the scope of their practice



Communication:

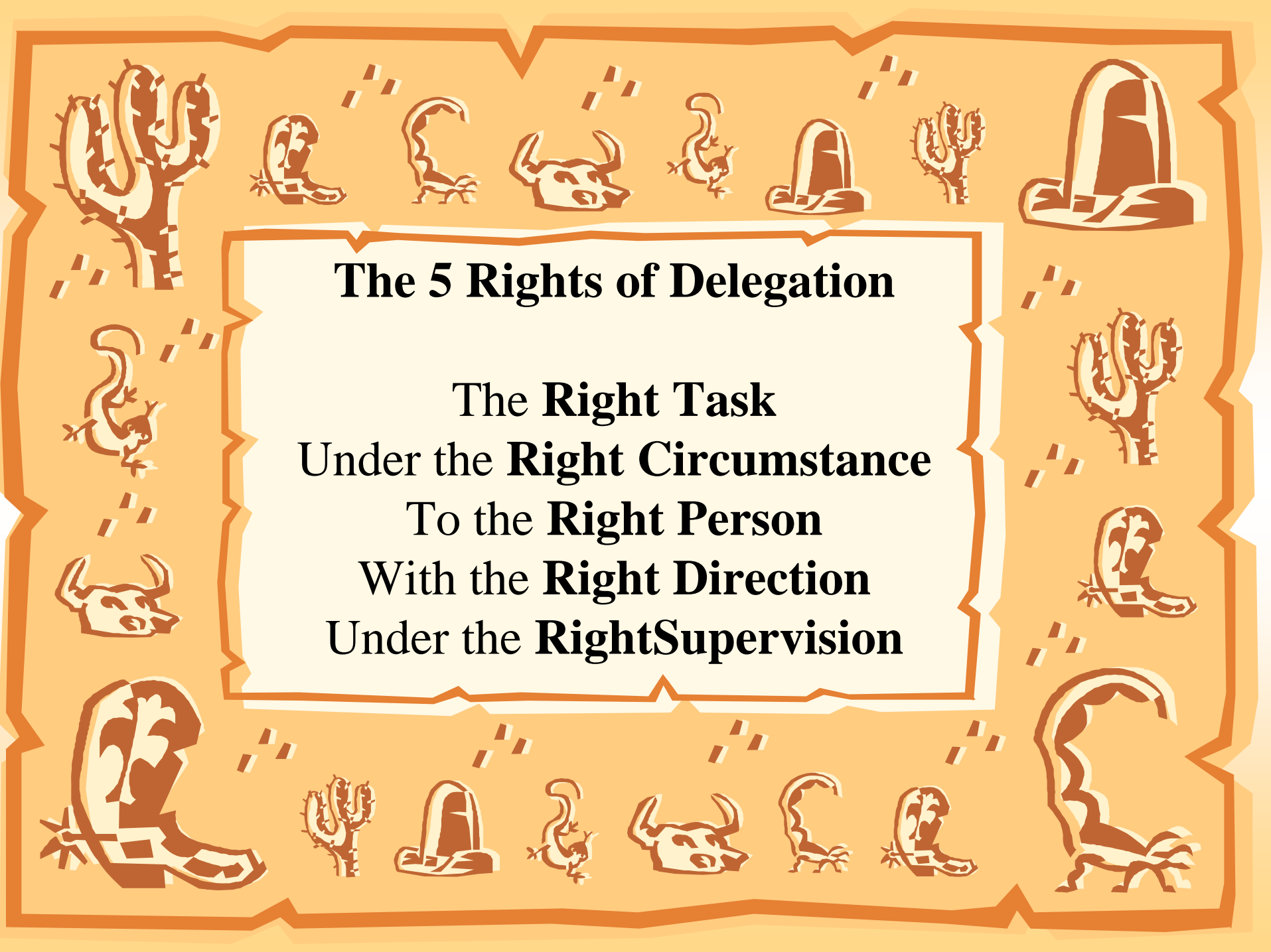
The Key to the Delegation Process

- 1. Identification of the task or activity**
- 2. The expected or desired outcome**
- 3. The limits of authority**
- 4. The time frame**
- 5. The nature of supervision required**
- 6. Verification of the delegate's understanding of the assignment**
- 7. Verification of monitoring and equipment**



Communication:

- Based on a relationship - conveys dignity and mutual respect
- 4 C's of Communication:
Clear, Concise, Correct and Complete
- Two-way process – specify what you want reported back and allow opportunity for clarification or questions
- Promotes teamwork!



The 5 Rights of Delegation

The **Right Task**
Under the **Right Circumstance**
To the **Right Person**
With the **Right Direction**
Under the **Right Supervision**

Charge Nurse responsibilities in delegation

1. Assignment:

- based on condition of the patients
- the competence of members of the staff
- degree of supervision required

2. Availability as a clinical resource person

3. Direct delegation of specific tasks

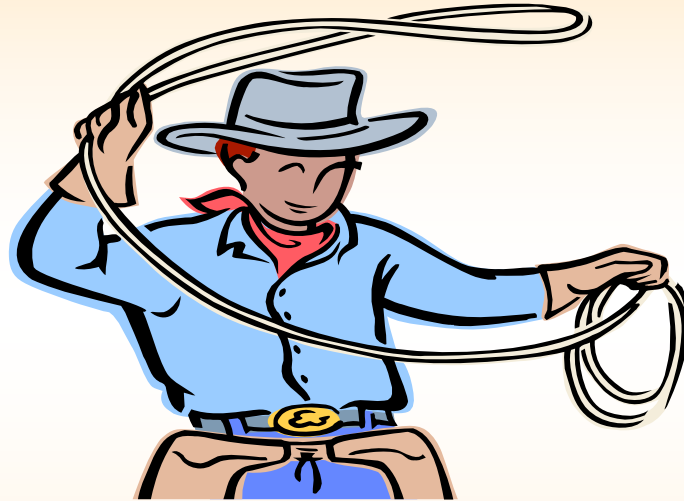
4. Supervision of delegated tasks

5. Evaluation and feedback

6. Chain of command



Any questions?



- AND NOW ON TO OTHER SCENARIOS...