

Guideline: delegation of care by a registered nurse to a health care assistant

Te whakarite i ngā mahi tapuhi kia tiakina ai te haumaru ā-iwi

Regulating nursing practice to protect public safety



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Introduction

The Nursing Council of New Zealand has the authority under the Health Practitioners Competence Assurance Act 2003 (the Act) to set standards for nursing practice and provide guidance to nurses and employers. The purpose of this guideline is to assist nurses to make decisions about the delegation of activities to health care assistants. This guideline will also assist employers of nurses to understand the accountability and responsibilities of nurses in relation to delegation.

Changing demands within health care mean registered nurses are increasingly being assisted by health care assistants and other workers. Health care assistants are not regulated and do not have standardised educational preparation. Their role is determined by their employer and outlined in their job description. This guideline focuses on the activities that health care assistants might be asked to undertake by a registered nurse who has determined that the activity forms part of a nursing care plan. The Nursing Council is responsible for guiding registered nurses on how to safely direct, monitor and evaluate activities delegated to health care assistants.

When delegating to health care assistants, registered nurses should also consider that when nurses carry out care activities they take a comprehensive approach including consideration of the complex physical, social, mental and emotional needs of the health consumer, whereas a health care assistant may focus on the completion of the delegated activities.

Registered nurses should understand the role of the health care assistant to ensure they are not required to function beyond the limits of their education or knowledge and skills.

Note: health care assistants may have a variety of job titles such as carer, care giver, care assistant or health care support worker. For the purposes of this quideline the term health care assistant is used.



Understanding accountability

Registered nurses hold positions of trust and responsibility within the community. As registered health practitioners, nurses are answerable for their decisions and actions. They are professionally accountable to the Nursing Council and accountable under legislation for their actions. They must also answer to their employer and to health consumers, and must be able to justify their decisions. Registered nurses use their professional knowledge, judgment and skills to make decisions in partnership with health consumers based on their best interests. Registered nurses are responsible for ensuring the health care assistant has the knowledge and skills to undertake delegated tasks. They should inform health consumers when they are delegating aspects of nursing care to health care assistants.

Health care assistants are also legally accountable for their actions and accountable to their employer. They must therefore have the appropriate skills and knowledge to undertake activities, and be working within policy and the direction and delegation of a registered nurse. They must be careful not to lead health consumers to believe they are a nurse when undertaking aspects of nursing care.

Understanding delegation

Delegation is the transfer of responsibility for the performance of an activity from one person to another with the former retaining accountability for the outcome.

Direction is the active process of guiding, monitoring and evaluating the nursing activities performed by another. Direction is provided directly when the registered nurse is actually present, observes, works with and directs the person; direction is provided indirectly when the registered nurse works in the same facility or organisation as the supervised person but does not constantly observe his/her activities. The registered nurse must be available for reasonable access, i.e. must be available at all times on the premises or be contactable by telephone (in community settings).

The principles of delegation

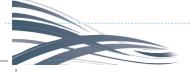
- The decision to delegate is a professional judgment made by a registered nurse and should take into account:
 - (a) the health status of the health consumer
 - (b) the complexity of the delegated activity
 - (c) the context of care, and
 - (d) the level of knowledge, skill and experience of the health care assistant to perform the delegated activity.

- 2 The decision to delegate must be consistent with the service provider's policies.
- 3 The registered nurse must ensure the health care assistant who has been delegated the activity:
 - (a) understands the delegated activity
 - (b) has received clear direction
 - (c) knows who and under what circumstances they should ask for assistance
 - (d) knows when and to whom they should report.
- 4 The registered nurse is responsible for monitoring and evaluating the outcomes of delegated nursing care.

The responsibilities of the registered nurse

The scope of practice of registered nurses can be found in Appendix 1.

- 1 Assessment and monitoring of the health status of the health consumer
 - (a) The health consumer must have a plan of care developed by a registered nurse who has undertaken a comprehensive assessment.
 - (b) The registered nurse must determine the level of skill and knowledge required to ensure the safety, comfort and security of the health consumer before delegating care. This must be based on an assessment of the health consumer including consideration of the complexity of the care required rather than the tasks to be performed.
 - (c) The registered nurse must provide ongoing monitoring of the health status of the health consumers for whom he/she is responsible. This must be planned along with the necessary support and guidance that will be provided to the health care assistant performing the delegated activity.
 - (d) The registered nurse must be directly involved with the health consumer when the health consumer's responses are less predictable or changing, and/or the health consumer needs frequent assessment, care planning and evaluation.



2 Providing direction

- (a) It is the registered nurse's responsibility to provide direct or indirect guidance according to the nature of the delegated activities and the abilities of the health care assistant to whom the activity is delegated. He/she must be available for timely advice regarding any nursing needs. If the registered nurse, whose role it is to provide direction, is off the premises and not contactable, another registered nurse must be contactable for such guidance.
- (b) Processes for seeking contact and support with the registered nurse must be clearly documented and communicated within the nursing setting.
- (c) An appropriately educated and experienced registered nurse may direct care across more than one setting if health consumer needs are predictable and the requirements for timely response are able to be met.

3 Evaluating and monitoring of care

- (a) The registered nurse retains accountability for evaluating whether the health care assistant carrying out the delegated activities maintains the relevant standards and outcomes. The registered nurse must be able to state the name and designation of the health care assistant they are delegating to.
- (b) The registered nurse is responsible for monitoring and evaluating the outcomes of delegated nursing care.

4 Risk assessment

- (a) If the registered nurse has made a professional judgment that delegation is inappropriate, she or he must communicate (and document) this to the health care assistant and the employer.
- (b) The registered nurse is responsible for reporting to the most senior person on shift or the unit or site manager (and documenting) any concerns that may jeopardise patient safety. This includes situations where designation, number or skills of available staff are insufficient to meet the assessed needs of the consumer.



The Five Rights of Delegation

The Five Rights of Delegation, identified in Delegation: Concepts and Decision-making Process (National Council of State Boards, 1995), can be used as a mental checklist to assist registered nurses to clarify the critical elements of the delegation decision-making process.

1. Right Activity

An activity that, in the professional judgement of the registered nurse, is appropriate for a specific health consumer.

2. Right Circumstances

Appropriate health consumer group, available resources and other relevant factors considered.

3. Right Person

Right person is delegating the right activity to the person with the right skills and knowledge to assist the right health consumer.

4. Right Communication

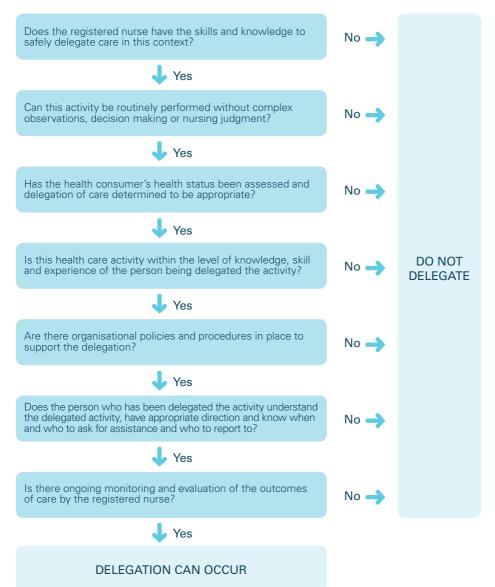
Clear, concise description of the activity to be undertaken, including the objective, and expected outcomes.

5. Right Direction

Appropriate monitoring, evaluation, intervention, as needed, and feedback. (Adapted from National Council of State Boards (1995) Delegation: Concepts and Decision-making Process.)



Decision-making process for delegation by a registered nurse





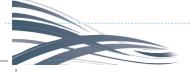
The responsibilities of the person carrying out the delegated activities

- (a) The person performing the delegated activity is accountable for his or her own actions.
- (b) The person must inform the registered nurse if they have not been trained to perform an activity.
- (c) The person must not accept any direction or delegation they feel is beyond their capabilities.
- (d) The person must inform the registered nurse if the delegated task appears more complex or if they are uncertain of the requirements or the health consumer's response at any stage of the activity.

The responsibilities of the employer

Employers are accountable and responsible for their employees. The Nursing Council recommends that employers have appropriate systems in place, including workload calculations with time factored in, to support the safe delegation of nursing care. Employers are also guided by their responsibilities under the Code of Health and Disability Services Consumers' Rights and the Health and Disability Services Standards. The Nursing Council assumes that registered nurses will be employed by healthcare employers who will support them to meet their professional obligations.

- (a) The employer is responsible for ensuring the skills mix of staff provides a safe standard of care to health consumers.
- (b) The employer is responsible for the employment of suitable staff to perform care provision and care supervision roles and to training that supports the provision of safe and competent care.
- (c) The employer must ensure there are clear role descriptions for nurses based on their scope of practice, direction/delegation policies and communication systems to support the registered nurse in this role.
- (d) The employer must have processes in place for monitoring the standard of care and for staff to document and report health consumer related concerns.
- (e) The employer is responsible for ensuring registered nurses are supported and are competent to safely delegate care.



- (f) The employer is responsible for ensuring health care assistants have appropriate job descriptions and understand their delegated activities and responsibilities.
- (g) Employers and managers who are not registered nurses are expected to seek professional advice on the designation, number and skills of the staff required to meet the assessed care needs of health consumers and to support the delegated tasks as determined by the registered nurse.

Circumstances influencing the safe delegation of care

On initial registration, registered nurses require experience, support and guidance to develop confidence in direction and delegation. Professional supervision may assist nurses to develop skill and confidence in delegation. New nurses, particularly nurses in their first year of practice, and casual nurses working on a shift-by-shift basis may find it difficult to delegate safely through lack of time or experience to form sound clinical judgment. They should be guided by more experienced registered nurses. Health care assistants will require support to make decisions on determining whether they have the appropriate skills to undertake delegated activities.

Factors influencing a registered nurse's ability to delegate are: her/his level of experience, staffing levels, the acuity of patients, the number of staff, the workload, the policy, quality and risk management frameworks, and access to other health professionals to support delegation and direction. Workload calculations need to include time factored to safely delegate.

Situations where responsibility for delegation is not clear

Registered nurses may work in situations where their responsibility and accountability for the delegation of care are not clear. For example, nurses and health care assistants or support workers may be employed by different agencies. A nurse may be engaged to provide clinical services for health consumers who are supported or assisted by others. In cases where nurses are employed as consultants or resource persons and are not in supervisory roles, nurses are responsible for their own practice and must provide care consistent with the standards established by the nursing profession, but are not expected to be responsible for the overall care of health consumers or for the care workers who provide that care.

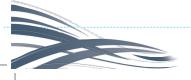


Where another, such as an employer, has the responsibility to assign care, the employer becomes accountable for delegation. The nurse has the responsibility to intervene (or give professional advice) if she or he feels the proposed delegation or assignment is inappropriate or unsafe. A registered nurse may be held responsible where an unsafe system is in place if the nurse ignores or complies with such a system leading to harm or potential harm to health consumers.

Employers are responsible for developing policies, job descriptions and memoranda of understanding that clarify the relationship between registered nurses and other workers employed in a health setting. This is particularly important in community settings when they are employed by different agencies.

Registered nurses, who are unclear about their duties and responsibilities, should clarify with their employers whether they, the registered nurses, are responsible for direction of the work of other health care workers. If so, the registered nurses are responsible for the delegations they make and guidance they provide.

(Adapted from Nurses and Midwives Board, New South Wales (2007), *Delegation and Supervision, by Registered Nurses of Medication Administration within Aged Care Facilities.*)



Glossary

Accountability

Appropriate

Assessment (of skill or competence)

Collaborate

Competence

Condition

Context

Delegation

Direction

Being answerable for your decisions and actions.

Matching the circumstances of a situation or meeting the needs of the individual or group.

A systematic procedure for collecting qualitative and quantitative data to describe progress and ascertain deviations from expected outcomes and achievements.

Work together, cooperate with each other.

The combination of skills, knowledge, attitudes, values and abilities that underpin effective performance as a nurse.

A restriction or limit included in a scope of practice under the Health Practitioners Competence Assurance Act.

The environment in which nursing is practised. It refers to the type of service and complexity of service required by people. It could also include the resources available, the physical setting or health facility, the amount of clinical support and/or supervision from nurses and the access to other health care professionals.

The transfer of responsibility for the performance of an activity from one person to another with the former retaining accountability for the outcome.

The active process of guiding, monitoring and evaluating aspects of nursing care performed by another. Direction is provided directly when the registered nurse is actually present, observes, works with and directs the person; direction is provided indirectly when the registered nurse works in the same facility or organisation as the supervised person but does not constantly observe his/her activities. The registered nurse must be available for reasonable access, i.e. must be available at all times on the premises or contactable by telephone (in community settings).



Enrolled nurse

A nurse registered under the enrolled nurse scope of practice.

Health assessment

A comprehensive health assessment is the assessment of a consumer's health status for the purposes of planning or evaluating care. Data are collected through multiple sources, including, but not limited to, communication with the consumer, and where appropriate their significant others, reports from others involved in providing care to the consumer, health care records, direct observation, examination and measurement, and diagnostic tests. The interpretation of the data involves the application of nursing knowledge and judgment. Health assessment also involves the continuous monitoring and reviewing of assessment findings to detect changes in the consumer's health status. (ANMC, 2007).

Health care assistant

A person employed within a health care, residential or community context who undertakes a component of direct care and who is not regulated in law by a regulatory authority.

Health consumer

An individual who receives nursing care or services. This term represents patient, client, resident or disability consumer. This term is used in the Health Practitioners Competence Assurance Act (2003)

Nursing judgment

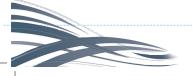
The ability to analyse and interpret the individual needs of a health consumer, evaluate the significance of each circumstance, compare the effect of the outcome of each action or alternative, and draw conclusions to make a decision that achieves the best outcome.

Registered health practitioner

A person who is registered under the Health Practitioners Competence Assurance Act, e.g. midwife, medical practitioner, occupational therapist.

Registered nurse

A nurse registered under the registered nurse scope of practice.



Responsibility

Stable and predictable health outcomes

Supervision

A charge or duty that arises from one's role or status in a profession or organisation.

Refers to circumstances where a health consumer's health status can be anticipated, a plan of care can be readily established, and is managed with interventions that have predictable outcomes (Nurses Board of South Australia, May 2005).

Supervision is provided by a registered nurse to an enrolled nurse who works under the direction of another registered health practitioner. The registered nurse provides guidance and feedback on the enrolled nurse's practice. This may include:

- monthly face-to-face meetings
- discussion of practice issues
- discussion of professional development and learning needs
- review of work content/nursing activities
- discussion of professional responsibilities and scope.



References

Australian Nursing and Midwifery Council (2006). Delegation and supervision.

Australian Nursing and Midwifery Council (2007). A national framework for the development of decision-making tools for nursing and midwifery practice.

College of Nurses Actearoa (NZ) Inc., Nurse Educators in the Tertiary Sector (NETS) and Nurse Executives of New Zealand (NENZ) (April, 1999). The Health Service Assistant and the Registered Nurse.

Health and Disability Commissioner Act (1994).

Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations (1996).

Health Practitioners Competence Assurance Act (2003).

National Council of State Boards (1995). Delegation: Concepts and Decision-making Process.

Nurse Executives of New Zealand (2006). Position statement: Role of nursing support worker.

Nurses and Midwives Board of New South Wales (2007). Delegation and Supervision, by Registered Nurses of Medication Administration within Aged Care Facilities.

Nursing and Midwifery Council (2008). Advice on delegation for registered nurses and midwives.

Nurses Board of South Australia (May 2005). Delegation by a registered nurse or midwife to an unlicensed healthcare worker.

Nursing Board of Tasmania (2001). Guidelines for the Scope of Nursing Practice.

Nursing Council of New Zealand (2010). Competencies for the enrolled nurse scope of practice.

Queensland Nursing Council (2005). Scope of Practice Framework for Nurses and Midwives

Royal College of Nursing, Royal College of Speech and Language Therapists, the British Dietetic Association and the Chartered Society of Physiotherapy (2006). Supervision, accountability and delegation of activities to support workers.



Appendix 1

The registered nurse scope of practice

Registered nurses utilise nursing knowledge and complex nursing judgment to assess health needs and provide care, and to advise and support people to manage their health. They practise independently and in collaboration with other health professionals, perform general nursing functions, and delegate to and direct enrolled nurses, health care assistants and others. They provide comprehensive assessments to develop, implement, and evaluate an integrated plan of health care, and provide interventions that require substantial scientific and professional knowledge, skills and clinical decision making. This occurs in a range of settings in partnership with individuals, families, whānau and communities. Registered nurses may practise in a variety of clinical contexts depending on their educational preparation and practice experience. Registered nurses may also use this expertise to manage, teach, evaluate and research nursing practice. Registered nurses are accountable for ensuring all health services they provide are consistent with their education and assessed competence, meet legislative requirements and are supported by appropriate standards. There will be conditions placed in the scope of practice of some registered nurses according to their qualifications or experience limiting them to a specific area of practice. Some nurses who have completed the required additional experience, education and training will be authorised by the Council to prescribe some medicines within their competence and area of practice.

The Nursing Council Competencies for Registered Nurses describe the skills and activities of registered nurses.



