

Guide to Delegation for Colorado School Nurses

School district's responsibility for the student with special health needs

All students attending public schools must have access to health care during the school day and for extra curricular school activities, if necessary to enable the student to participate fully in the program. The federal laws include the Americans with Disabilities Act, Individuals with Disabilities Education Act (IDEA), and Section 504 of the Rehabilitation Act of 1973. Since most school districts in Colorado do not have a full time nurse in each school it is often necessary to delegate specific nursing tasks, including medication administration, to Unlicensed Assistive Personnel (UAP) so that children with special health care needs can attend school. Knowing when and how to delegate specific nursing tasks is essential for the school nurse. Only a registered nurse can delegate nursing care. Further, nursing delegation is not appropriate for all students, all nursing tasks, or all school settings (NASN 2006). Due to individual circumstances or complex medical needs, some nursing tasks can only be performed by a licensed nurse. Both the American Nurses Association and National Council for State Boards of Nursing have developed resources to support the registered nurse in making decisions related to delegation. It is the purpose of this document to provide guidance to registered professional school nurses who find it necessary to delegate nursing tasks.

State of Colorado

The *Colorado Nurse Practice Act* is the state law that licenses and regulates the practice of nursing. The *Rules and Regulations Regarding the Delegation of Nursing Tasks* provide further clarification and interpretation of the *Nurse Practice Act*. The Delegatory Clause of the *Colorado Nurse Practice Act* (12-38-101 C.R.S.) states, "... (1) Any registered nurse...may delegate any task included in the practice of nursing....In no event may a registered nurse delegate to another person the authority to select medications if such person is not, independent of such delegation, authorized by law to select medications." The *Rules and Regulations Regarding the Delegation of Nursing Tasks* (Chapter XIII. §4 – 9) allow the professional nurse to delegate nursing functions to Unlicensed Assistive Personnel (UAP) within specified guidelines.

Definitions

- **Registered nurse** – may perform independent nursing functions and delegated medical functions (*Colorado Nurse Practice Act 12-38-101 C.R.S.*)
- **Licensed practical nurse** – may perform under the supervision of a registered professional nurse, physician, or other qualified individual (*Colorado Nurse Practice Act 12-38-101 C.R.S.*)
- **Delegation** – the assignment to a competent individual the authority to perform in a selected situation a selected nursing task, including the administration of medication (*Chapter XIII – Rules and Regulations Regarding the Delegation of Nursing Tasks*)
- **Deelegatee** (Unlicensed Assistive Personnel/UAP)– an individual receiving the delegation who acts in a complementary role to the professional nurse and whom the professional nurse authorizes to perform tasks which the individual is not otherwise authorized to perform (*Chapter XIII - Rules and Regulations Regarding the Delegation of Nursing Tasks*)
- **Delegator** – the registered professional nurse who holds a current, active license in the state of Colorado, who makes the delegation (*Chapter XIII - Rules and Regulations Regarding the Delegation of Nursing Tasks*)
- **Supervision** – the provision of guidance and review by a qualified registered professional nurse for the accomplishment of a nursing task or activity including initial direction of the task and periodic inspection of the actual act of accomplishing the task or activity, and evaluation of the outcome (*Chapter XIII - Rules and Regulations Regarding the Delegation of Nursing Tasks*)

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The School Nurse and Delegation

“Delegation is the transfer of responsibility for the performance of a task from one individual to another while retaining accountability for the outcome” (American Nurses Association, 2008). ANA further clarified that a registered nurse (RN) can direct another individual to do something that that person would not normally be allowed to do and stressed that the nurse retains professional accountability for the overall care of the individual. Nursing tasks and nursing procedures performed in schools may be delegated solely by the supervising school nurse. The decision to delegate is based upon professional judgment that the UAP can safely perform a selected nursing task for a student. The professional nursing judgment of assessment, evaluation, and care planning may not be delegated (NASN, 2006; NASSNC, 2000). Delegation allows school nurses to utilize unlicensed school staff to provide safe and efficient nursing care for individual students or groups of students and provides a mechanism for workload distribution to better utilize the time and skills of each of the members of the school health team.

Who can Delegate?

- Only a registered professional nurse (RN) can delegate a nursing task.
- Parents cannot delegate to a teacher or any other unlicensed person in the school.
- School administrators cannot delegate nursing tasks to a teacher or any other unlicensed person in the school.
- The UAP or licensed practical nurse (LPN) cannot delegate nursing tasks.

Who is an Unlicensed Assistive Person (UAP)?

- Any person who does not have a professional nursing or medical license, who acts in a complementary role, and whom the professional nurse authorizes to perform certain nursing tasks, which the individual is not otherwise authorized to perform.
- A UAP could be a secretary, school administrator, teacher, paraeducator, therapist, bus driver, practical nurse, or health aide.
- UAP cannot train, redelegate, or ask any other person to perform any nursing task under any circumstances.

When can the School Nurse delegate?

- The task being considered for delegation is within the area of responsibility of the registered nurse (RN) and within the knowledge, skills and ability of the delegating nurse.
- The task being delegated does not require the professional judgment of a registered nurse.
- The student's condition is stable and the outcome of the task is predictable.
- The nursing task does not inherently involve ongoing assessments, interpretations, or decision making.
- The delegatee is competent to perform the task, and
- Ongoing supervision can be provided by the delegating nurse or nurse designee.

What is meant by supervision of the delegated nursing task?

Inherent in the decision to delegate is the requirement that the school nurse must supervise the UAP. The Colorado Nurse Practice Act defines supervision as "the provision of guidance and review by a qualified professional nurse for the accomplishment of a nursing task or activity, with initial direction of the task, periodic inspection of the actual act of accomplishing the task or activity, and evaluation of the outcome."

Supervision means the delegating RN or RN designee is available while the task is being performed to provide direction to the UAP through various means of direct, written or verbal communications. If the RN is unable to provide this supervision the RN is unable to delegate the tasks. (ANA, 2009)

The specific amount of time required for supervision will depend upon the abilities of the UAP, training, and type and number of delegated nursing care tasks. It is the nurse's responsibility to use professional

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judgment to make decisions related to the amount, frequency, and type of supervision needed. (NASN 2004)

Can the nurse delegate and provide supervision in exceptional situations?

Exceptional situations include but are not limited to activities on campus, off campus, during school hours and outside of school hours.

Delegation and supervision of nursing tasks during exceptional situations shall be determined by the registered nurse in consultation with school administration and may not be appropriate in some circumstances.

The nurse must have adequate time to determine appropriateness of delegation and will consider the following in the decision to delegate:

- Assessing student's health needs
- Establishing a safe plan of care
 - Location of activity
 - Availability of supplies and equipment
 - Availability of parent/guardian during the activity
 - Availability of other appropriate health care personnel
- Communication plan for unexpected situations that may occur during 24/7 care.
- Training the UAP, including the demonstration of skill competency to the RN
- Providing adequate supervision of UAP as determined by the delegating nurse.

Other considerations:

- Is the delegating nurse licensed to practice in the location of the activity?
- Is there a reliable mode of direct communication between the delegating nurse and UAP? (hard copy of written health care plan, text messaging, telephone, pager)
(Chapter 13 5.1D CNPA)

What is the legal liability for the school nurse?

The delegating RN is responsible for the act of delegating and for supervising and evaluating the delegated tasks and could be found liable if harm results from inappropriate actions in these areas. The delegation of nursing tasks to UAPs carries legal implications for the delegating RN. However, if the delegating nurse has taken steps to ensure that the task is delegated properly and that appropriate supervision is provided, the risk for legal liability is minimized. The UAP must follow the steps outlined in the plan of care.

The RN must satisfy that all of the criteria for delegation in the *Colorado Nurse Practice Act and Rules and Regulations Regarding the Delegation of Nursing Tasks* have been addressed, including responsibility for:

- Determining that the delegation is appropriate;
- Monitoring, outcome evaluation, and follow-up of each delegation;
- Documentation of the process for training and evaluating the delegatee.

What is the procedure for documentation of delegation?

1. Instructions for the procedure or task must be specific and broken into its individual components.
2. Specific steps for the procedure/task that will be delegated must be documented.
3. For complicated procedures or tasks, the delegatee and the RN may want to initial each step in the document.
4. Documentation of each demonstration of the task must be made, including signatures of both the RN and the delegatee and the date of the demonstration.

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5. The nursing task or procedure can be delegated once the delegatee has demonstrated competence through this training process.
6. A schedule for periodic evaluation of continuing competence should be established. The delegating nurse should determine frequency of evaluation.
7. Errors in carrying out a task must be documented along with the corrective actions taken.

The Delegatory Clause of the Nurse Practice Act allows registered nurses to determine whether nursing tasks other than those listed in the attached table can be safely delegated to unlicensed persons in the school. This can be done only on a case-by-case basis and assessment, training, on-going supervision, and regular evaluation must be included for each task and each individual. As with all other acts of delegation, a registered nurse must determine the appropriateness of the delegation and provide supervision and follow-up. Organizations or individuals other than the delegating nurse can provide training as long as the delegating nurse approves the process and provides the other steps.

4. CRITERIA FOR DELEGATION

- 4.1 *Any nursing task delegated by the professional nurse shall be:*
 - A. *Within the area of responsibility of the nurse delegating the task;*
 - B. *Within the knowledge, skills and ability of the nurse delegating the task;*
 - C. *Of a routine, repetitive nature and shall not require the Delegatee to exercise nursing judgment or intervention;*
 - D. *A task that a reasonable and prudent nurse would find to be within generally accepted nursing practice;*
 - E. *An act consistent with the health and safety of the Client; and*
 - F. *Limited to a specific Delegatee, for a specific Client, and within a specific time frame, except for Delegation in Schools as described in Section 7 of this Chapter, or Delegation in a Licensed Child Care Facility as described in Section 9 of this Chapter.*
- 4.2 *The Delegatee shall not further delegate to another individual the tasks delegated by the professional nurse.*
- 4.3 *The delegated task may not be expanded without the expressed permission of the Delegator.*
- 4.4 *The Delegator shall assure that the Delegatee can and will perform the task with the degree of care and skill that would be expected of the professional nurse. (Chapter 13, Rules and Regulations CO Nurse Practice Act)*

Can delegation be withdrawn?

- Delegated tasks must be withdrawn if the registered professional nurse who has delegated the procedure determines that circumstances have changed so that
 - the student is less stable and the task no longer has a predictable outcome or
 - the delegatee fails at any time to demonstrate competence and is unsafe in performing the task.
- If another registered nurse replaces the delegating nurse, the new nurse is responsible for re-delegating the task, following the procedures outlined above.

Rules and Regulations Regarding the Delegation of Nursing Tasks

Chapter XIII - Rules and Regulations Regarding the Delegation of Nursing Tasks addresses issues specific to the delegation of nursing tasks in schools.

5. RESPONSIBILITY OF THE DELEGATOR

- 5.1 *The decision to delegate shall be based on the Delegator's assessments of the following:*
 - A. *The Client's nursing care needs including, but not limited to, complexity and frequency of the nursing care, stability of the Client, and degree of immediate risk to the Client if the task is not carried out;*
 - B. *The Delegatee's knowledge, skills and abilities after training has been provided;*

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- C. The nature of the task being delegated including, but not limited to, degree of invasiveness, irreversibility, predictability of outcome, and potential for harm;*
- D. The availability and accessibility of resources, including but not limited to, appropriate equipment, adequate supplies and appropriate other health care personnel to meet the Client's nursing care needs; and*
- E. The availability of adequate Supervision of the Delegatee.*

5.2 The Delegator shall:

- A. Explain the Delegation to the Delegatee and that the delegated task is limited to the identified Client within the identified time frame;*
- B. As appropriate, either instruct the Delegatee in the delegated task and verify the Delegatee's competency to perform the delegated nursing task, or verify the Delegatee's competence to perform the delegated nursing task;*
- C. Provide instruction on how to intervene in any foreseeable risks that may be associated with the delegated task;*
- D. Provide appropriate and adequate Supervision to the Delegatee to the degree determined by the Delegator, based on an evaluation of all factors indicated in Section 5.1; and*
- E. If the delegated task is to be performed more than once, develop and employ a system for ongoing monitoring of the Delegatee.*

5.3 The Delegator, on an ongoing basis, shall evaluate the following:

- A. The degree to which nursing care needs of the Client are being met;*
- B. The performance by the Delegatee of the delegated task;*
- C. The need for further instruction; and*
- D. The need to continue or withdraw the Delegation.*

5.4 Documentation of the Delegation by the Delegator in the Client record shall adhere to generally accepted standards and minimally include, but not be limited to, the following:

- A. Assessment of the Client;*
- B. Identification of the task delegated, the Delegatee, the Delegator, time delegated, and time frame for which the Delegation is effective;*
- C. Direction for documentation by the Delegatee that the task or procedure was performed and the Client's response, if appropriate; and*
- D. Periodic evaluation of the Client's response to the performed delegated task.*

6. STANDARDS FOR THE ACCOUNTABILITY OF THE DELEGATOR

6.1 The Delegator shall adhere to the provisions of the Nurse Practice Act and the rules and regulations of the Board.

6.2 The Delegator is accountable for the decision to delegate and the assessments indicated in 5.1.

6.3 The Delegator is accountable for monitoring, outcome evaluation, and follow-up of each Delegation.

6.4 The Delegator is accountable for the act of delegating and supervising.

Can all nursing procedures be delegated?

All situations must be carefully assessed on a case by case basis by the registered professional nurse for delegation to occur. The following points must be considered:

- The task must be within the nurse's knowledge, skills and abilities.
- The nurse must assess whether the student's health condition is stable.
- The nurse must provide a specific written protocol for the delegated task.
- The nurse must determine if the delegatee is competent and the task can be safely performed

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W-Within Scope of Practice S-Within Scope with Supervision D-Delegated Tasks with Supervision T-Training with Supervision E-In Emergencies X-Cannot Perform				Provider = Person w/ legal authority to prescribe: MD, Advance Practice Nurse with prescriptive authority, Dentist, and Physician Assistant with prescriptive authority and a primary physician supervisor.	
Procedure	Provider order Required	RN	LPN	Unlicensed Assistive Personnel	
1.0 Activities of Daily Living					
1.1 Toileting/ Diapering		W	W	T	
1.2 Bowel/ Bladder Training		W	W	T	
1.3 Dental/ Oral Hygiene		W	W	T	
1.4 Lifting/ Positioning/ Transfers		W	W	T	
1.5 Oral Feeding					
1.5.1 Nutritional Assessment		W	X	X	
1.5.2 Oral Feeding	Y *	W	W	T	*Need Rx if specific food texture is required.
1.6 Special Feeding					
1.6.1 Naso-Gastric Feeding	Y	W	S	D	*Can be delegated if placement can be determined by an objective measure
1.6.2 Gastrostomy Feeding	Y	W	S	D	
1.6.3 Jejunostomy Tube Feeding	Y	W	S	D	
1.6.4 Total Parenteral Feeding (intravenous)	Y	W	X	X	
1.6.5 Gastrostomy Reinsertion to maintain stoma patency	Y	W	D	D	*Placement should be verified by healthcare provider before use
2.0 Urinary Catheterization					
2.1 Clean Intermittent Cath.	Y	W	S	D	
2.2 Sterile Catheterization	Y	W	S	X	
2.3 Indwelling Catheter Care (cleanse with soap & water, empty bag)		W	W	D	
3.0 Medical Support Systems					
3.1 Ventricular Peritoneal Shunt Monitoring	Y	W	S	T	

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3.2 Mechanical Ventilator					
3.2.1 Monitoring	Y	W	S	X	
3.2.2 Adjustment of Ventilator	Y	W	S	X	
3.2.3 Ambu bag		W	S	E	
3.3 Oxygen					
3.3.1 Intermittent/emergency	Y	W	S	D	
3.3.2 Continuous – monitoring	Y	W	S	D	
3.3.3 Pulse oximetry monitoring	Y	W	S	D	
3.4 Central Line Port/Catheter –Site Monitoring	Y	W	S	T	
3.5 Dialysis Access Port Monitoring	Y	W	S	T	
3.6 Subcutaneous Continuous Glucose Monitoring	Y	W	S	D	
4.0 Medication Administration					
4.1 Prescription/Non-Prescription Medications	Y	W	S	D	Students may self-carry inhalers & Epi-Pens per C.R.S. 05-156
4.2 Injections	Y	W	S	D	i.e.Glucagon, Epi-Pens, Insulin Delivery Systems
4.3 Per Naso-gastric Tube	Y	W	S	D	* Can be delegated if placement can be determined by an objective measure
4.4 Per Gastrostomy Tube	Y	W	S	D	
4.5 Intravenous	Y	W	S	X	* LPN needs IV certification
			*		
5.0 Ostomies (colostomy, ileostomy, urostomy)					
5.1 Ostomy Care (empty bag, cleanse w/ soap & water)		W	S	T	
5.2 Ostomy Irrigation	Y	W	S	X	
6.0 Respiratory					
6.1 Postural Drainage	Y	W	S	D	

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6.2 Percussion	Y	W	S	D	
6.3 Suctioning					
6.3.1 Pharyngeal	Y	W	S	D	
6.3.2 Tracheostomy	Y	W	S	D	
6.4 Tracheostomy Tube Replacement	Y	W	S	D	
6.5 Tracheostomy Care (Clean/Dress)	Y	W	S	D	
7.0 Screening					
7.1 Growth (height/weight)		W	S	T	
7.2 Vital Signs		W	W	T	
7.3 Hearing		W	S	T	
7.4 Vision		W	S	T	
7.6 Body Mass Index		W	S	T	
8.0 Specimen Collecting/ Testing					
8.1 Blood Glucose/Ketone	Y	W	S	D	
8.2 Urine Ketone	Y	W	S	D	
9.0 Other Healthcare Procedures					
9.1 Seizure Safety Procedures		W	S	T	
9.2 Pressure Ulcer Care	Y	W	S	D	
9.3 Dressing, Sterile	Y	W	S	D	
9.4 Dressing, Non-sterile		W	S	T	
9.5 Vagal Nerve Stimulator	Y	W	S	D	
10.0 Developing Protocols					
10.1 Healthcare procedures		W	X	X	
10.2 Emergency Protocols		W	X	X	

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10.3 Individualized Healthcare Plan		W	X	X	
10.4 IEP Health Assessments		W	X	X	
10.5 504 Health Assessments		W	X	X	
10.6 Home Bound Services-Health Assessments		W	X	X	

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