



Te Kaunihera Tapuhi o Aotearoa
Nursing Council of New Zealand

Guideline: direction and delegation

June 2008

Regulating nursing practice to protect public safety

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The Nursing Council of New Zealand appreciates the feedback it received during consultation and has incorporated many changes into the guideline. There were a significant number of responses that indicated that the guideline would not be readily implemented in some non-acute settings. The Council acknowledges this but has decided to release this guideline as an interim document that will be reviewed after further consultation and consideration of these issues.

Purpose

The purpose of this guideline is to assist nurses in New Zealand to make decisions in relation to direction and delegation within a nursing context in a variety of health care settings. This guideline will also assist employers of nurses to understand the accountability and responsibilities of nurses in relation to direction and delegation.

Introduction

Registered nurses, nurse assistants, enrolled nurses and nurse practitioners are regulated and accountable to the community for providing quality care through safe, ethical and effective practice. The Nursing Council of New Zealand (Council) sets standards for nursing practice and provides guidance to practitioners and employers. The minimum standards for nurses in relation to direction and delegation are described in the scopes of practice and competencies (see Appendix). This document provides more detailed information on how direction and delegation should be carried out in practice.

The Council does not regulate or determine the work of unregulated health care workers but it is responsible for guiding nurses on how to safely direct, monitor and evaluate the care that is provided by them. The same principles are to be used by registered nurses working with enrolled nurses, nurse assistants, nursing students and nurses returning to practice or nurses new to an area of practice. It is expected that employers will develop policies in collaboration with schools of nursing, which describe the relationship between the registered nurse and student.

The rights of consumers

The Council acknowledges the rights of consumers and their whanau to determine their own care and expects registered nurses to work in partnership with them when delegating and directing care.

Understanding direction and 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 process and the outcome.

Direction is the active process of directing, guiding, monitoring and influencing the outcome of an individual's practice. 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 immediately contactable by telephone (in community settings).

The principles of direction and delegation

- 1 The decision to delegate is a professional judgment made by a registered nurse and should take into account
 - (a) the health status of the client
 - (b) the complexity of the delegated activity
 - (c) the context of care
 - (d) the level of knowledge, skill, and experience of the person to perform the delegated activity.
- 2 The decision to delegate must be consistent with the service provider's policies.
- 3 The registered nurse should ensure that the person who has been delegated the activity understands the delegated activity, has appropriate direction and knows when and whom to ask for assistance and to whom to report.
- 4 The registered nurse is responsible for monitoring and evaluating the outcomes of delegated nursing care.

The responsibilities of the registered nurse

1 Assessment and monitoring of the health status of the client

- (a) The registered nurse must complete a comprehensive assessment of the client and develop a plan of care before using his/her professional judgement to delegate interventions. The registered nurse must determine the level of skill and knowledge required to ensure the safety, comfort, and security of the client prior to delegating care. This determination must be based on an accurate health assessment of the client including consideration of the complexity of the care required rather than the tasks to be performed.
- (b) The registered nurse should provide an ongoing monitoring of the health status of the clients for whom he/she is responsible. This must be planned along with the necessary support and guidance that will be provided to the person performing the delegated activity.
- (c) The registered nurse must be more directly involved with the client when the client's responses are less predictable or changing, and/or the client needs frequent assessment, care planning and evaluation.

2 Providing direction

- (a) It is the registered nurses responsibility to provide direct or indirect direction according to the nature of the delegated activities. 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 should be contactable for such guidance.
- (b) Processes for seeking contact and support with the registered nurse should 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. This is providing that the processes for direction, and the context, are appropriate.

3 Evaluating and monitoring of care

- (a) The registered nurse retains accountability for evaluating whether the person carrying out the delegated activities maintains the relevant standards and outcomes. The registered nurse should be able to name the person to whom he or she is delegating.

- (b) The registered nurse is responsible for monitoring and evaluating the outcomes of delegated nursing care.

4 Risk assessment

- (a) The registered nurse is responsible for reporting to an appropriate person any concerns that may jeopardise patient safety. This includes situations where staffing levels or skills mix are unsafe.

- (b) If the registered nurse has made a professional judgment that delegation is inappropriate, she or he should communicate this to the nurse/unregulated worker and the employer.

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 client.

2. Right circumstances

Appropriate client setting, available resources, and other relevant factors considered.

3. Right person

Right person is delegating the right activity to the right person to assist the right client.

4. Right communication

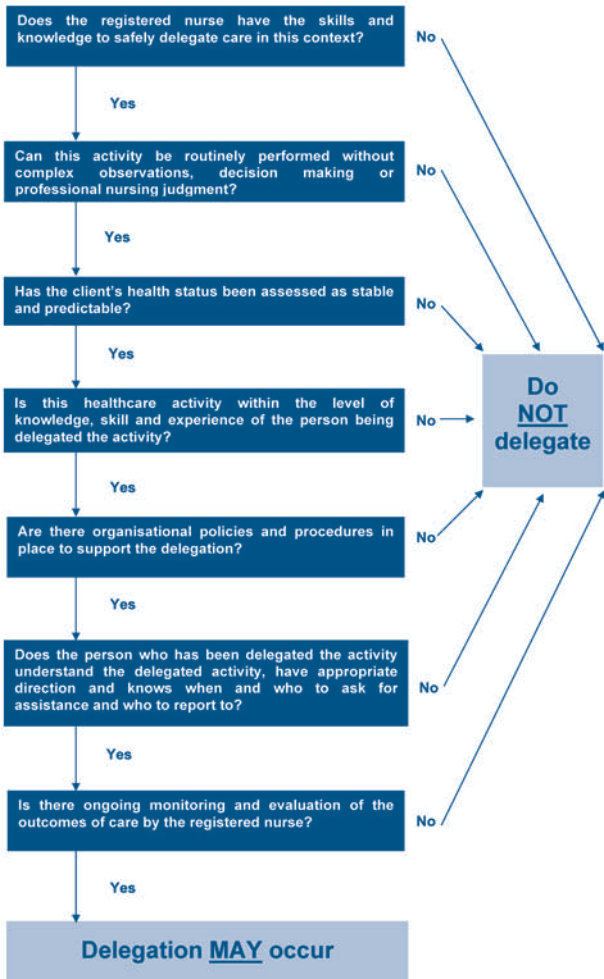
Clear, concise description of the activity, including its objective, limits and expectations.

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

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

The responsibilities of the employer

Employers need to ensure they have the appropriate systems in place to support the safe delegation of nursing care. Employers are also guided by their responsibilities under the Health and Disability Commissioner's Consumer Code of Rights and the Health and Disability Sector standards.

- The employer is responsible for ensuring the skills mix of staff provides a safe standard of care to clients.
- The employer is responsible for the employment of suitable staff to perform various roles and to provide adequate training for the provision of safe and competent care.
- The employer must ensure that there are clear role descriptions for nurses

and others based on their scope of practice, direction/ delegation policies and communication systems to support the registered nurse in this role.

- The employer should have processes in place for monitoring the standard of care and for staff to document and report client related concerns.
- The employer is responsible for ensuring registered nurses are supported and are competent to safely delegate care.
- The employer is responsible for ensuring that unregulated health care workers understand their delegated activities and responsibilities.
- Non nurse employers are expected to seek professional advice on staffing, skills mix and delegation of nursing activities.
- Employers are responsible for developing policies, job descriptions and memoranda of understanding that clarify the relationship between registered nurses and unregulated workers in community settings particularly when they are employed by different agencies.

Circumstances influencing the safe delegation of care

On initial registration, registered nurses require support and guidance to develop confidence in direction and delegation. Clinical 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. Enrolled nurses and nurse assistants and others will require support to make decisions on determining whether delegated activities are within their scope of practice.

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.

Direction and delegation of care to enrolled nurses and nurse assistants

Within the nursing team, enrolled nurses and nurse assistants are responsible and accountable for their own clinical practice within their scope of practice.

The registered nurse ensures that the enrolled nurse or nurse assistant is assigned to provide nursing care for people who have stable and predictable health outcomes in situations that do not call for complex nursing judgment. The registered nurse collaborates with the nurse assistant or enrolled nurse regarding the ongoing health status of the client and any interventions beyond his or her scope of practice to ensure appropriate management where

necessary; and provides professional advice in a timely manner to facilitate best care for the client.

The enrolled nurse or nurse assistant, in accepting assigned nursing care, has a responsibility¹ to ensure that he/she:

- accepts and recognises the legal limitations and ethical parameters of the role
- demonstrates knowledge and skill in carrying out assigned nursing care
- informs the registered nurse of any aspects of care which are beyond his/her educational preparation and competency to perform
- informs the registered nurse and documents information about changes in the condition of a client and the outcomes of assigned care
- is able to name the registered nurse who is providing the direction with regard to every client to whom he/she has been assigned or for whom aspects of care have been assigned
- must know how and when to obtain further direction and assistance from that registered nurse.

¹ *Note these responsibilities also apply to an enrolled nurse (or a registered nurse who may only practise in a maternity facility) working under the direction of a midwife.*

Enrolled nurses and nurse assistants must not delegate activities from a nursing care plan to an unregulated healthcare worker or other enrolled nurses or nurse assistants. However, they can collaborate with other employees to divide workload according to skill level and competencies, provided that:

- the context (including client condition) they are practising in has been assessed by a registered nurse as stable or unchanged
- other employees have been assessed by a registered nurse as competent
- delegation of care activities is well established and supported by policy.

(Adapted from Queensland Nursing Council (2005) *Scope of Practice Framework for Nurse and Midwives.*)

Direction and delegation of care to unregulated health care workers

Unregulated health care workers assist registered nurses by completing personal care and other activities that do not require specialised nursing knowledge, judgement and skill. Their role relationships with registered nurses will vary according to the context. Unregulated health care workers may have a care-worker or other qualification or no formal education for their role. They are not professionally regulated, so are not bound by standards set by a regulatory authority. The Council does not regulate or determine the scope of practice of unregulated health care workers. As it regulates the practice of nursing, the Council expects unregulated health care workers to work with the support and direction

of a registered nurse when carrying out activities delegated to them by a registered nurse from a care plan.

When delegating to healthcare workers, 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 client, whereas a health care worker may focus on the completion of the delegated activities.

Registered nurses should understand the role of the unregulated health care worker to ensure that they are not required to function beyond the limits of their education or competence.

Situations where responsibility for direction and delegation is not clear

Registered nurses may work in situations where their responsibility and accountability for the delegation of care are not clear.

In general a registered nurse must be involved with the client when the client's responses are less predictable or changing, and/or the client needs frequent assessment, care planning and evaluation.

In other instances, nurses may be engaged to provide clinical services for clients and may act as consultants and resource persons to other healthcare workers. 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 clients nor for the care workers who provide that care. However 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 clients.

Employers are responsible for developing policies, job descriptions and memoranda of understanding that clarify the relationship between registered nurses and other unregulated workers in community settings particularly 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 healthcare 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*)

Appendix: Scopes of practice and competencies

The scope of practice for registered nurses:

Registered nurses utilise nursing knowledge and complex nursing judgement 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 and nurse assistants. They provide comprehensive nursing assessments to develop, implement, and evaluate an integrated plan of health care, and provide nursing interventions that require substantial scientific and professional knowledge and skills. This occurs in a range of settings in partnership with individuals, families, whanau 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. There will be conditions placed on the scope of practice of some registered nurses according to their qualifications or experience limiting them to a specific area of practice.

The following competencies describe the skills and activities of registered nurses in relation to direction and delegation.

Competency 1.3

Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by nurse assistants, enrolled nurses and others.

Indicator: Understands accountability for directing, monitoring and evaluating nursing care provided by nurse assistants, enrolled nurses and others.

Indicator: Seeks advice from a senior registered nurse if unsure about the role and competence of nurse assistants, enrolled nurses and others when delegating work.

Indicator: Takes into consideration the role and competence of staff when delegating work.

Indicator: Makes appropriate decisions when assigning care, delegating activities and providing direction for enrolled nurses, nurse assistants and others.

Competency 2.8

Reflects upon, and evaluates with peers and experienced nurses, the effectiveness of nursing care.

Indicator: Identifies one's own level of competence and seeks assistance and knowledge as necessary.

Indicator: Determines the level of care required by individual clients.

Indicator: Accesses advice, assistance, debriefing and direction as necessary.

Competency 4.1

Collaborates and participates with colleagues and members of the health care team to facilitate and coordinate care.

Indicator: Provides guidance and support to those entering as students, beginning practitioners and those who are transferring into a new clinical area.

The scope of practice for enrolled nurses:

Enrolled nurses practise under the direction of a registered nurse or midwife to implement nursing care for people who have stable and predictable health outcomes in situations that do not call for complex nursing judgement. The responsibilities of enrolled nurses include assisting clients with the activities of daily living, recognising the changing needs of clients and performing delegated interventions from the nursing or midwifery care plan.

The scope of practice for nurse assistants:

Nurse assistants assist registered nurses to deliver nursing care to individuals in community, residential and hospital settings. They perform delegated interventions from the nursing care plan to provide care and comfort for individuals and groups, assist and support clients with activities of daily living, observe and report changes in individual/group conditions and behaviours, safe guard dignity and promote independence and health and safety. The nurse assistant does not undertake independent nursing assessments or plan and evaluate nursing interventions. Nurse assistants may be required to practise in a specific area based on the area of focus in their education programme and designated on their practising certificate.

The following competencies describe the skills and activities of enrolled nurses and nurse assistants in relation to direction and delegation.

Competency 1.3

Recognises own scope of practice and the registered nurse responsibility and accountability for delegation of nursing care.

Indicator: Demonstrates knowledge of relevant legislation pertaining to the delivery of client care.

Indicator: Ensures practice is within the scope of practice and adheres to legislated requirements and relevant policies and procedural guidelines.

Competency 1.4

Demonstrates accountability and responsibility within the health care team when assisting or working under the direction of the registered nurse.

Indicator: Understands the nurse assistant and the enrolled nurse role and boundaries in relation to the scopes of practice and within the registered nurse's delegation.

Glossary of terms

Accountability

Being answerable for your decisions and actions.

Client

Clients are individuals, groups or communities of health care consumers who work in partnership with nurses to plan and receive nursing care. The term clients includes patients, residents and/or their families/whanau/representatives or significant others.

Collaborate

Work together, co-operate with each other.

Competence

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

Nursing judgment

The ability to analyse and interpret the individual needs of a client, 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.

Delegation

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

Direction

The active process of directing, guiding, monitoring and influencing the outcome of an individual's practice. 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 immediately contactable by telephone (in community settings).

Nurse Assistant

Second level nurse regulated by the Nursing Council of New Zealand.

Responsibility

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

Supervision

"The monitoring of, and reporting on, the performance of a health practitioner by a professional peer" (Health Practitioners Competence Assurance Act 2003). Supervision may be required by Council for a new or returning nurse, or after a review of competence or conduct.

Stable and predictable health status

Refers to the circumstances where a client's health status can be anticipated, the plan of care can be readily established and is managed with interventions that have predictable outcomes.

Unregulated healthcare worker

is not regulated in law by a regulatory authority but:

- is employed within a health care, residential or community support context and undertakes a component of direct hands on care
- is paid a salary, honorarium or allowance to provide that care
- performs health care activities that have traditionally been, and continue to be within the role and scope of regulated health professionals
- performs health care activities that may also, or otherwise be provided by family or significant other(s)
- works under the delegation and direction (either direct or indirect) of a registered nurse in the performance of health care activities
- contributes to the delivery and reporting on of health care and personal care
- provides assistance in a range of services focused on supporting people with routine activities of daily living
- contributes to risk management and quality assurance processes
- works within legislative frameworks (e.g. Health and Disability Commissioner Consumer Rights, Health and Disability Sector Standards).

Adapted from the Nurses Board of South Australia (May 2005).

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