Direction and delegation

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Policy
This policy is for students, nurses, midwives and managers to make effective decisions about direction and delegation. The level of direction will vary according to the health care setting, context of care and the health status of the health consumer.

Purpose
To assist nurses and midwives in the Canterbury and West Coast District Health Boards and Students of Nursing/midwifery to make decisions in relation to direction and delegation within a nursing/midwifery context in a variety of health care settings.

This guideline will also assist nurses/midwives, employers and managers of nurses/midwives, to understand the accountability and responsibilities of nurses/midwives, and students of nursing/midwifery, in relation to direction and delegation.
Scope/Audience

Registered Nurse (RN)
Registered Midwife (RM)
Enrolled Nurse (EN)
Bachelor of Nursing Students; Diploma of Enrolled Nursing Students
Bachelor of Midwifery Students
Health Care Assistants, and other unregulated health care workers with patient/client care duties, i.e. students, orderly's
Allied Health Personnel
Medical Officers
Other: e.g. NZ Defence Force Medics, University/Polytechnic Tutors and Clinical Lecturers, Research Personnel, University Scientists

AND: Managers and coordinators (e.g. Nurse, Midwife, Allied Health, Medical) of Registered and Enrolled Nurses, and unregulated health personnel

Associated documents

In the first instance, please refer to:
NCNZ Guideline: Delegation of care by a registered nurse to a health care assistant.
NCNZ Guideline: Responsibilities for direction and delegation of care to enrolled nurses.
Midwifery Scope of Practice: Competency 4.6 (2004)
Student Nurse/Midwife responsibilities with Fluid and Medication Management, Volume 12
Roles and Responsibilities, Volume 12
CDHB Fluid and Medication Checking Procedure, policy, Volume 12
Patient Self Medication Policy, Volume 12

Definitions

Direction:

Direction is the active process of guiding, monitoring and evaluating aspects of nursing care performed by another.
Direction is provided directly when the RN/RM is actually present, observes, works with and directs the person.

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Direction is provided indirectly when the RN/RM works in the same facility or organisation as the supervised person but does not constantly observe their activities. The RN/RM 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)

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.

1 Principles of delegation

- The decision to delegate is a professional judgement made by a RN/RM and should take into account:
  - the health status of the health consumer
  - the complexity of the nursing/midwifery intervention required
  - the context of care, and
  - the level of knowledge, skill and experience of the person who is to perform the delegated activity.

- The registered nurse, midwife, medical off, allied health personnel must understand the enrolled nurse role and scope of practice (or any other scope of practice of anyone else delegating to) and provide ongoing monitoring of the health status of the patient/client for whom they are responsible.

- The RN/RM should ensure that the person who has been delegated the activity understands the nursing/midwifery interventions required, and knows when to ask for assistance, and when to report back to the RN/RM.

- The RN/RM is responsible for monitoring and evaluating the outcomes of delegated nursing/midwifery care (see section 6 Decision Making Process: Delegation by a Registered Nurse or Registered Midwife).

2 Five rights of delegation

Prior to delegation of an activity to another nurse/ midwife or non regulated health care provider, the following will be considered:
2.1 Right activity
In the professional judgement of the RN, the activity is appropriate for a specific health consumer.

2.2 Right Circumstances
Appropriate health setting, available resources, and other relevant factors are considered.

2.3 Right Person
Right person is delegating the right activity to the right person to assist the right health consumer.

2.4 Right Communication
Clear and concise description of the activity. Include its objective, limits, expectations and who to report back to.

2.5 Right Direction
Appropriate monitoring, evaluation, intervention, as needed, and feedback.

3 Roles and responsibilities
Registered Nurse (RN) directing/delegating a colleague: e.g. enrolled nurse, other registered nurse:

- The patient/client will have a plan of care, which may be developed in collaboration with the enrolled nurse/other registered nurse colleague.
- The RN will determine if it is appropriate for the colleague to complete interventions based on the complexity of the patient/client’s needs.
- The RN will provide ongoing monitoring of the health status of the patient/client for whom they are responsible.
- The RN will be directly involved with the patient/client when the patient / client’s responses are less predictable or changing.
- The RN will provide direct or indirect guidance according to the interventions and the competence of their colleague. If the RN providing direction is off the premises and not contactable, another RN must be contactable for such guidance of the colleague.
The RN who is directing/delegating, retains accountability for evaluating whether the colleague maintains the relevant standards and outcomes.

Processes for seeking contact and support from the RN who is directing and delegating colleagues, must be communicated within the health care setting.

Enrolled Nurses working under the direction/delegation of a Registered Health Practitioner (Registered Nurse, Registered Midwife, Medical Officer, Allied Health) as covered under the Health Practitioners’ Competency Assurance Act

The enrolled nurse must practice within their scope of practice and level of competence, and will not fulfill the functions of a registered nurse/midwife.

The enrolled nurse will escalate changes in health status and concerns of the patient/client to the registered health practitioner.

The enrolled nurse will refer issues outside their scope to a registered nurse/midwife who is supervising the enrolled nurse.

The enrolled nurse will receive regular direction from a registered nurse/midwife to provide guidance and feedback on the enrolled nurse’s practice.

The enrolled nurse has a responsibility to ensure they

- accept and recognise the legal limitations and ethical parameters of the role
- understand the EN scope of practice and the RN/RM responsibility and accountability for direction and delegation of nursing care
- can name the RN/RM who is providing direction and delegation
- know how and when to obtain further direction and assistance from that RM/RN
- demonstrates knowledge and skill in carrying out delegated nursing/midwifery care
- informs and seeks guidance from the RN/RM when the EN encounters situations or aspects of care which are beyond his/her educational preparation and competency to perform
- documents the transfer of all or part of a health consumer’s care to a RN/RM when the health consumer’s needs are beyond their scope of practice
4 Enrolled Nurse Coordination of Health Care Assistants:

Enrolled nurses may coordinate the provision of care by health care assistants within the team as delegated by the Registered Nurse. This may occur within aged residential care facilities that are DHB owned.

During the period of coordination the Enrolled Nurse will have Registered Nurse supervision and must not assume overall responsibility for nursing assessment or care planning.

The Enrolled Nurse will seek guidance from the Registered Nurse if they encounter a situation beyond their own knowledge, competence and scope of practice (see decision making framework 1.19 See individual workplace policy for coordination duties.

Note: the Enrolled nurse is able to administer some medications as per the “Roles and Responsibility policy”:

Note: The Enrolled Nurse will not double independent check a medication with an unregulated health care worker.

5 Responsibilities of the Unregulated Health Care worker:

The responsibilities of the Unregulated Health Care giver may include, but are not limited to, health care assistants, nursing/midwifery students, technicians, defence force medics

- The person performing the delegated activity is accountable for his or her own actions.
- The person must inform the RN/RM if they have not been trained to perform an activity.
- The person must not accept any direction or delegation they feel is beyond their capabilities.
- The person must inform the RN or their supervising registered health professional 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.
6 Decision Making Process: Delegation by a Registered Nurse or Registered Midwife

Does the registered nurse/midwife have the skills and knowledge to safely delegate care in this context?

- **YES**

Can this activity be routinely performed without complex observations, decision making or nursing judgement?

- **YES**

Has the health consumer’s health status been assessed and delegation of care determined to be appropriate?

- **YES**

Is this healthcare activity within the level of knowledge, skill and experience of the person being delegated the activity?

- **YES**

Are there organisational policies and procedures in place to support the delegation?

- **YES**

Does the person who has been delegated the activity understand the delegated activity, have appropriate direction and knows when and who to ask for assistance and who to report to?

- **YES**

Is there ongoing monitoring and evaluation of the outcomes of care by the Registered Nurse/Midwife?

- **YES**

**DELEGATION CAN OCCUR**

**DO NOT DELEGATE**

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7 Decision Making Process: Enrolled Nurse (EN) coordination of Health Care Assistants (HCA), within the Aged Residential Care (ARC) Facilities at CDHB and WCDHB

Does the Registered Nurse have the skills and knowledge to safety oversee Direction and Delegation in this context; and have they assessed the EN’s skills and knowledge

Is there on-going monitoring and evaluation of the outcomes of care, by the Registered Nurse, in the ARC facility

Does the RN understand the EN scope of practice. Does the EN understand the RN responsibilities; and their own EN responsibilities, when coordinating a team of Health Care Assistants in the ARC facility?

Are the activities of the Health Care Assistant within their own level of knowledge, skill and experience?

Are there organisational policies, procedures and guidelines in place to support the direction and delegation of the EN, and the Health Care Assistant?

Are opportunities made available for the EN and the HCA to evaluate and discuss patient care together; and to collaborate on care, throughout the period of EN coordination?

The RN will continue to direct and delegate care which is provided by the EN and the HCA

ENROLLED NURSE COORDINATION OF THE HEALTH CARE ASSISTANT(S) MAY OCCUR
Measurement/Evaluation

The effectiveness will be measured through auditing of incident reporting, documentation audits examining delegation documents, and via evaluation of education and training.

References


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<tr>
<th>Procedure Owner</th>
<th>Nurse Coordinator, Nursing Workforce Development</th>
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<tr>
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<td>Executive Director of Nursing</td>
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