Practice Directive Delegation

College of Registered Nurses of Prince Edward Island

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Background

Many Registered Nurses work within multidisciplinary teams while providing care to clients in a variety of clinical settings. RNs must understand the role of other regulated health workers as well as the job descriptions of any unregulated health workers (UHW) within their worksite.

The purpose of this practice directive is to guide the RN during the delegation process.

Scope of Practice vs Scope of Employment

Scope of practice differs from scope of employment. A regulated health professional's scope of practice is derived from the following:

- Legislation (Registered Nurses Regulations)
- Education
- Personal Experience
- Individual Competencies

In PEI the Registered Nurses Regulations outline the *Reserved Activities* that any RN holding a registration in PEI is legally entitled to perform. However, an individual RN must also consider their education, personal experiences and individual competencies before performing any *Reserved Activity* or related skill. For example, the insertion of a Central Vascular Access Device is within the scope of practice of an RN, in order to perform this task, an RN must have additional education/training, experience, and have been deemed competent in this skill.

An employer will determine the scope of employment for both regulated and unregulated health workers. Employers outline the scope of employment through job descriptions, policies and procedures. The scope of employment cannot be outside of a regulated health professional's scope of practice or beyond the education received by a UHW.

Scope of employment may be role or area specific. For example, a nurse working in a particular clinical area of a hospital has the authorization to administer specific medications using the IV "push" method. If that same nurse was to float to a different clinical area within the hospital, this practice may not be authorized in the other clinical area.

Delegation

Delegation is the transfer of the nurse's responsibility for the performance of a task to another nursing staff member or other member of the multidisciplinary team while retaining accountability for the outcome. Accountability cannot be delegated.

The Registered Nurse is responsible and accountable for the overall delivery of nursing care. An RN must be familiar with scope of practice/scope of employment of other regulated health care workers and the scope of employment/competencies of UHWs prior to delegating a task.

Before an RN considers delegating a task, they must assess the client and identify the task to be delegated. The RN must consider the **Rights of Delegation**.

When the RN considers delegation, they must identify the "right" *person* to delegate the task to. Does this person have the necessary knowledge, skill, and authority to perform the task? If the RN has concerns about the person receiving the delegation, and the person's ability to perform the task, then delegation should not occur.

The "right" *task* must fall within the scope of practice/scope of employment of the individual receiving the delegation. The Regulated Health Professions Act states that a person cannot require another person to perform a *Reserved Activity* unless that person is authorized to perform it. This means, for example, a UHW could not perform a *Reserved Activity* (insertion of a urinary catheter) even under the direction of an RN because the UHWs are not legally authorized to do it. The Act does allow for an exception for persons to "assist" individuals with acts of daily living that may fall within certain *Reserved Activities*. Please refer to Section 86(4)(g) of the Act for more details.

"Rights" of Delegation

The "right" person

The "right" task

The "right" circumstance

The "right" direction and Communication

The "right" supervision and evaluation

The "right" *circumstance* refers to the stability of the patient and whether the situation requires the competencies of an RN. The RN must assess the situation and determine if delegation of the task is safe.

As previously mentioned, the RN does not delegate their overall accountability of care to a client. When the RN decides to delegate a task, they must ensure they are available to provide any **necessary supervision and evaluation**. Supervision includes the RN's monitoring of the client's condition and being available for consultation should the person receiving delegation require assistance. Evaluation includes ensuring proper documentation of the care provided (in accordance with organizational policies) and the ongoing adjustment of the care plan as necessary.

It is important to note that the RN delegates tasks but does not delegate functions in situations where the competency of a RN is required.

Documentation

The person who performs the task is responsible to document according to documentation standards. The RN is responsible to ensure that documentation is completed by reviewing all documentation completed during the care period.

Key Points

- Delegation of a nursing task is always context-specific and not determined by the task alone
- The client's safety is central to any decision related to delegation.
- At any time, an RN may resume responsibility and perform the task.
- When the RN becomes aware of an unsafe situation, they must intervene immediately.
- Scope of responsibility for client care is shared across the care team.