

Montana School Nurse Delegation Decision Tree

2016 Montana BON Delegation Rule 24.159.1611 CRITERIA FOR DELEGATION OF NURSING TASKS	Example application in school setting: Answer following question:	Action to take if answer is negative:
(1) Delegation* is a nursing act distinct from teaching, supervising, consulting, and advising.	<i>Consider your role in your employment position. Do you have the authority to determine if task is delegated and to whom?</i>	⇒ NO ⇒ <i>Consider the roles of teaching and supervising without nursing delegation. Is this parental designation or administrative assignment? Contact BON for concerns.</i>
⇓ YES ⇓		
(2) Before delegating, the LPN* or RN* should consider the five rights of delegation: the right task, the right person to whom the delegation* is made, the right circumstances, the right direction* and communication by the LPN or RN, and the right supervision* and evaluation.	Have you educated yourself on the delegation rules & process in general? <i>Note: Delegation and the steps of delegation is a nursing intervention. Nurses have professional responsibilities to document their interventions.</i>	⇒ NO ⇒ <i>Do not delegate. Review Montana Board of Nursing Delegation Rules. Review delegation resources: NASN ANA, etc. Consider delegation after you have sufficient knowledge of process.</i>
⇓ YES ⇓		
(3) Delegation* of a nursing task to a UAP *shall be based solely on the determination of the patient's nurse, who has personally assessed the patient's condition, so that delegation* can be performed without jeopardizing the patient's welfare.	<i>It is your responsibility to assess the situation to the extent your professional judgment determines needed. Did you assess that the task can be delegated without jeopardizing the student's welfare?</i>	⇒ NO ⇒ <i>Do not delegate. If the situation/ assessment later changes, then may consider delegation.</i>
⇓ YES ⇓		
(4) The nursing task* to be delegated must be within the area of responsibility, scope of practice, and competency* of the nurse delegating the task.	Is the task within your responsibility and scope and are you competent to perform task yourself?	⇒ NO ⇒ <i>Do not delegate if task is not in your responsibility and scope of practice. If it is but you are not competent in the task yourself, take measures to gain competency. May then consider delegation.</i>
⇓ YES ⇓		
(5) The LPN or RN shall delegate to another only those nursing tasks *for which that person has the necessary skills and competence to accomplish safely. In maintaining accountability for the delegation*, the LPN* or RN* shall ensure: (a) that the UAP* has the education and demonstrated competency* to perform the delegated task;	See the following sub sections: <i>This often means you are providing the education and are responsible for the content of the education. The UAP demonstrates competency by showing you how to do the task, explaining back to you and/or you observe them doing the task. Has the UAP demonstrated competency to you to perform the task?</i>	⇒ NO ⇒ <i>Do not delegate. If the UAP later is adequately educated and shows competency, consider delegation.</i>
⇓ YES ⇓		
(b) the task delegated is consistent with the UAP's job description;	<i>See Rule Notice and Public Comments but in brief the "delegatee's job description need not specifically permit the performance of nursing tasks in order to be "consistent with the UAP's job description." Will the UAP be able to perform the task and not be in unmanageable conflict with their other job duties i.e. do they have the time and proximity needed?</i>	⇒ NO ⇒ <i>Do not delegate. If circumstances change for that UAP or another UAP is better available, consider delegation.</i>
⇓ YES ⇓		
(c) patient needs match the UAP's qualifications, available resources, and appropriate supervision*;	Can the student needs be met by a qualified UAP given the amount of resources available for adequate teaching and supervision of that UAP by you?	⇒ NO ⇒ <i>Do not delegate. If resources are adequate later, consider delegation.</i>
⇓ YES ⇓		
(d) results of the task are reasonably predictable;	Do you know if there is a typical outcome of the task is?	⇒ NO ⇒ <i>Do not delegate. If circumstances change later (research or history has later shown predictability) consider delegation.</i>

(e) the task does not require clinical reasoning, nursing judgment, or critical decision making;	↓ YES ↓ Can the task be completed by following a set procedure or clear algorithm without independent decision making?	⇒ NO ⇒	Do not delegate.
(f) patient needs and circumstances of the delegation are such that the delegation of the task poses minimal risk to the patient and can be safely performed according to clear and exact directions;	↓ YES ↓ Is the student condition sufficiently stable* so that the when the delegated tasks are completed by following a set procedure or clear algorithm the student is not at undue risk?	⇒ NO ⇒	Do not delegate.
(g) directions and guidelines are clearly communicated regarding the delegated task;	↓ YES ↓ Have you given the UAP clear directions and guidelines?	⇒ NO ⇒	Do not delegate. Consider delegation if clear directions and guidelines can be/ are given.
(h) for delegation of a routine task on stable* patients, there is verification that the UAP *follows each written facility policy or procedure when performing the delegated task;	↓ YES ↓ <i>See Rule Notice and Public Comments but in brief "it is the employers, institutions and facilities responsibility to ensure they have policies and procedures suitable in their practice settings so that a nurse may delegate in the appropriate circumstances."</i> Are there supportive policies or procedures? Have you instructed the UAP and verified their compliance of those policies/procedures?	⇒ NO ⇒	Do not delegate. Consider delegation when policies and/or procedures are present and when UAP has been instructed on them and you verify they will follow.
(i) those to whom nursing tasks* are delegated are properly supervised by monitoring performance, progress, and outcomes;	↓ YES ↓ Are you able to supervise the UAP to the degree you determine is needed given the situation?	⇒ NO ⇒	Do not delegate. If you later have the resources to provide adequate supervision, then reconsider delegation.
(j) evaluation of the effectiveness of the delegation;	↓ YES ↓ When you supervised, did you evaluate the effectiveness of delegation?	⇒ NO ⇒	Withdraw delegation if identified problems can't be remedied.
(k) follow-up on problems and intervention and revision of the plan of care* as needed;	↓ YES ↓ Are you able to remedy any identified problems by re-instruction, increased supervision or revising the plan of care?	⇒ NO ⇒	
(l) the observation and communication of the outcomes of the delegated task; and	↓ YES ↓ <i>This is part of supervision and the frequency is determined by your assessment of the task and situation.</i> Are you able to and have you observed the outcomes of the tasks and provided the UAP with ongoing communication?	⇒ NO ⇒	Do not delegate ongoing tasks if you are unable to observe and communicate outcomes adequately.
(m) documentation of the task.	↓ YES ↓ Have you set up a documentation system for the task and instructed the UAP to use it?	⇒ NO ⇒	Do not delegate. Consider delegation when documentation in place.

Left hand column states the exact current BON Rules for the CRITERIA FOR DELEGATION OF NURSING TASKS. The other two columns are example application and decision process and should not be construed as legal advisement. Consult the BON and/or your district attorney for questions. Also see BON rules 24.159.1625 GENERAL NURSING FUNCTIONS AND TASKS THAT MAY NOT BE DELEGATED and 24.159. 301 DEFINITIONS.

Definitions of the terms used above and noted by the addition of an asterisk * AND are found in BON Rules; 24.159. 301 DEFINITIONS. They include the following: competency, delegation, direction, LPN, nursing task, RN, stable, (plan) strategy of care, supervision, UAP.