



## Policy and Procedure # 435

### Nurse Delegation

Approval: \_\_\_\_\_ Effective Date: 5/9/24

#### POLICY:

EFI will ensure our clients receive quality medical care. Follow-up to medical care will be provided in the client's home whenever possible within the nurse delegation guidelines.

REFERENCE:           WAC 388-101-3670  
                          WAC 388-101-3375  
                          RCW 18.79  
                          RCW 18.88A  
                          WAC 246-840-910 through 246-840-960  
                          WAC 246-888

#### PROCEDURE:

1. After medical treatment, clients often require follow-up care. If the prescribed care falls within the nurse delegation guidelines and there is an employee capable of providing the necessary care, nurse delegation training will be arranged by the medical coordinator or their supervisor.
2. Before performing any delegated nursing task the employer must:
  - A. Complete staff training as required by WAC 388-101-3260.
  - B. Be either a Nursing Assistant-Registered (NA-R), a Nursing Assistant Certified (NA-C) or a Home Care Aide Certified (HCAC);
  - C. Complete the Nurse Delegation for Nursing Assistants class (9hours);
  - D. Complete the Nurse Delegation Training: Special Focus on Diabetes (3 hours) when the provider anticipates Nursing Assistant may be administering insulin injection under nurse delegation; and
  - E. Receive task-specific training from a delegating Registered Nurse
3. Once an employee is delegated a nursing task they must perform the task as follows:
  - A. In all compliance and protocols of WAC 246-840 and WAC 246-841-405;
  - B. Only for the client who is the subject of the delegation
    1. If a new medication is prescribed the registered nurse delegator will determine if it must be delegated.
    2. Employees must be delegated for a new medication unless the new medication falls within the same type, i.e. topical medications and ointments.
  - C. Delegation of tasks is not transferable between employees.



## Policy and Procedure # 435

### **Nurse Delegation**

4. Employees may, under some circumstances, decline specific tasks.
  - A. If an employee does not feel capable of performing specific tasks safely, efforts will be made to have another trained employee perform that task.
  - B. If no trained employees are able to safely perform the task, the client or their advocate will request in-home care.
  
5. Nursing tasks that an employee can perform when delegated by a Registered Nurse include, but are not limited to, the following:
  - A. Oral and topical medications and ointments;
  - B. Nose, ear, eye drops and ointment;
  - C. Suppositories, enemas, and ostomy care in established and healed conditions;
  - D. Gastronomy feedings in established and healed conditions;
  - E. Blood glucose monitoring;
  - F. Orders that require making adjustments to oxygen tanks.
  
6. Skin Observation Protocol (SOP) - When SOP is triggered in a client assessment, the Case Resource Manager (CRM) must refer the client to the delegating nurse to complete the SOP.
  - A. The Registered Nurse will complete all observation, education, referrals, service planning, recommendations and documentation as required by the SOP.
  
7. Delegation may be rescinded by the registered nurse delegator from an employee based on the following circumstances which may include but are not limited to:
  - A. The registered nurse believes patient safety is being compromised;
  - B. The client's condition is no longer stable and predictable;
  - C. When the frequency of staff turnover makes delegation impractical to continue in the setting;
  - D. A change in the nursing assistant's or home care aide's willingness or competency to do the task;
  - E. When the task is not being performed correctly;
  - F. When the client or authorized representative requests rescinding the delegation;
  - G. When the facility's license lapses or;
  - H. When caregivers are not currently registered, certified, or have restrictions to practice.