Delegation by registered nurses

The skill mix of care staff working in nursing settings informs the requirement for a clear set of guidelines for registered nurses who delegate aspects of nursing care to enrolled nurses or to assistants in nursing. Delegation is different from allocation or assignment which involves asking another person to care for one or more individuals on the assumption that the required activities of care are normally within that person’s responsibility and scope of practice. This is the case for a registered nurse allocating care to another registered nurse. However, the principles that apply to delegation may also apply to allocation.

The practice of registered nurses, midwives and enrolled nurses is governed by the Nursing and Midwifery Board of Australia (NMBA) pursuant to the Health Practitioner Regulation National Law and Other Legislation Amendment Act 2017 (in force in each state and territory). Assistants in nursing are not regulated by the NMBA. The registered nurse delegating care to an assistant in nursing or any other unregistered person is responsible for determining the delegation is appropriate, and the outcome evaluated and recorded.

Delegation by registered nurses must be guided by the NMBA’s A national framework for the development of decision making tools for nursing and midwifery practice.

The purpose of this guideline is to:

- clarify the role and obligation of registered nurses when delegating aspects of nursing care;
- guide registered nurses through the issues to be considered in delegating aspects of nursing care; and
- clarify the role and obligation of employers in the delegation of aspects of nursing care by nurses.

The Australian Nursing and Midwifery Federation recommends adoption of the following:

1. Nursing care needs of the person are assessed by registered nurses who develop and document a nursing plan of care, and make informed decisions relating to delegation of any part of that nursing plan of care to another person.
2. The wishes, wellbeing and interests of the person are central to the assessment and care delivery process developed by the registered nurse.
3. Registered nurses must be familiar with the NMBA Standards for practice for enrolled nurses in order to be confident that a delegated activity is within the scope of enrolled nursing practice.
4. A registered nurse must not direct an enrolled nurse or assistant in nursing to perform aspects of nursing care:
   a) where the registered nurse reasonably believes the skill or competency level of the enrolled nurse or assistant in nursing is inadequate; or
   b) where the registered nurse reasonably believes the nursing care is outside scope of practice of the enrolled nurse or the role of the assistant in nursing.
5. Each registered nurse and enrolled nurse is responsible for their own practice and conduct. This responsibility for the registered nurse includes an informed, responsible approach to delegation. The registered nurse remains accountable for delegated aspects of nursing care.
6. Registered nurses and enrolled nurses cannot assume that the policies, protocols and practices of the employer are always in accordance with legislative requirements. Registered nurses and enrolled nurses should seek advice or assistance from the ANMF state and territory branches, the NMBA and other relevant organisations in matters relating to regulation and other legislation.
7. In accepting any delegated nursing activity, the enrolled nurse or assistant in nursing is making an undertaking to personally perform that activity. A delegated activity may not be re-delegated to another person by the person to whom the registered nurse has delegated the aspects of nursing care.
8. Enrolled nurses are responsible for their own practice and conduct and work under the supervision and delegation of a named and accessible registered nurse. In accepting delegated aspects of nursing care, enrolled nurses are accepting responsibility and accountability for delivery of those aspects of nursing care.

9. Enrolled nurses and assistants in nursing have a responsibility to advise the delegating registered nurse if they are not competent to provide any aspect of the delegated nursing care.

10. Enrolled nurses and assistants in nursing assist registered nurses by providing delegated aspects of nursing care within the limits specified by their education, training and experience, and in accordance with legislation.

11. Enrolled nurses and assistants in nursing work within a nursing care plan developed by registered nurses and work under registered nurse supervision at all times. This supervision may be direct or indirect.

12. Assistants in nursing are accountable to registered nurses for all delegated activities.

13. Employers are responsible for ensuring that all employees are competent to carry out the role for which they have been employed.

14. Employers are responsible for ensuring that registered nurses have access to information regarding the safety and competence for practice of each assistant in nursing to whom they may consider delegating aspects of nursing care.

15. Employers are responsible for ensuring that registered nurses are not required to delegate aspects of nursing care to assistants in nursing where this is expressly prohibited by state or territory Acts or Regulations, contrary to any industrial instrument, or where the registered nurse considers the assistant in nursing is not competent to provide the delegated aspects of nursing care.

16. Employers are responsible for ensuring agency or workplace policies, protocols and practices in relation to delegation are in line with state and territory legislation, industrial instruments, and the NMBA Professional Practice Framework.

17. Subject to meeting minimum staffing levels and skill-mix, mandated by statute or applicable industrial instruments, employers should consult with nursing staff, in determining staffing levels and skill mix that are adequate and appropriate to meet the nursing care needs of the person. This includes enabling the registered nurse to evaluate the outcomes of all delegate care. Employers must provide staffing levels and skill mix that enable nurses to practice in accordance with the NMBA Standards for practice, consistent with research on safe nurse staffing levels.

18. Employers are responsible for providing resources and infrastructure for the continuing professional development of all nursing staff involved in the delivery of care.

References

1. A delegation relationship exists when one member of the multidisciplinary health care team delegates aspects of consumer care, which they are competent to perform and which they would normally perform themselves, to another member of the health care team from a different discipline, or to a less experienced member of the same discipline. Delegations are made to meet consumers' needs and to ensure access to health care services – that is, the right person is available at the right time to provide the right service to a consumer. The delegator retains accountability for the decision to delegate and for monitoring outcomes. Delegation may be either the:
   - transfer of authority to a competent person to perform a specific activity in a specified context or
   - conferring of authority to perform a specific activity in a specific context on a competent person who does not have autonomous authority to perform the activity.
Delegation is a two-way, multi-level activity, requiring a rational decision-making and risk assessment process, and the end point of delegation may come only after teaching and competence assessment. Delegation is different from allocation or assignment which involves asking another person to care for one or more consumers on the assumption that the required activities of consumer care are normally within that person’s responsibility and scope of practice. Many of the same factors regarding competence assessment and supervision that are relevant to delegation also need to be considered in relation to allocation/assignment.

2. The term assistant in nursing, means a person who assists a registered nurse in the delivery of nursing care.


4. The terms registered nurse, midwife and enrolled nurse are protected titles under the Health Practitioner Regulation National Law Act 2009. These nurses and midwives are registered for practice by the NMBA.

5. The PPF is made up of NMBA approved registration standards, accreditation standards, guidelines and competency standards that define the requirements of expectations of the National Board; for nurses and midwives. [http://www.nursingmidwiferyboard.gov.au/](http://www.nursingmidwiferyboard.gov.au/)