Principles of Delegation

Delegation is the act of transferring the responsibility of a task to another person while maintaining accountability for the outcome. Delegation is an essential skill for nurses to have. The RN must be fully aware of the policies and procedures regarding delegation in their state. Unlicensed Assistive Personnel can perform non invasive interventions, such as skincare, hygiene, range-of-motion exercises, mobility and grooming. Certain invasive tasks on stable patients, such as changing dressings, inserting a urinary catheterization and medication administration can be delegated to Licensed Practical Nurses. Registered Nurses are responsible for any element of the nursing process (ADPIE), such as initial patient assessment, discharge planning, health education, care planning, interpreting patient data, etc. The RN remains responsible for any delegated nursing care and are required to evaluate the result of the tasks delegated.



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Delegation

Assigning Responsibility
Assigning Responsibilities
Delegation involves assigning the responsibility of performing a task to another person while maintaining accountability for the outcome.

Unlicensed Assistive Personnel (UAP)

Noninvasive Procedures
Nun-invasive Procedure
Tasks that can safely be delegated to an unlicensed assistive personnel (UAP), include noninvasive interventions, such as skincare, hygiene, range-of-motion exercises, mobility and grooming. The care given by UAP are routine tasks that do not require an assessment.

Licensed Practical Nurse (LPN)

Stable Patients with Predictable Outcome
Stable-table Patient with Predictable Outcome
It is important to be aware that LPN restrictions vary by state.
Tasks that can be assigned to an LPN include the tasks performed by a UAP, but also include certain invasive tasks, such as changing dressings, inserting a urinary catheterization and medication administration (oral, subcutaneous, and intramuscular). The LPN can also gather patient data, but it is the RNs responsibility to interpret the data. An LPN cares for stable patients with predictable outcomes.

Dressing Changes
Changing Dressing
LPNs can perform dressing changes and observe a patient's response to treatments and record data. Any negative changes to a patient's status should be reported to the supervising RN.

Catheterization
Catheter-cat
It is within the scope of practice for LPNs to insert and remove urinary catheterizations. They can collect urine specimens.

Select Med Administration
Administering Select Meds
LPNs are licensed to give oral and intravenous medications. They are unable to give IV push medications, IV medications through a central venous access device, a central venous line or a midline catheter.

Registered Nursing (RN)

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Unstable Patients

Unstable-table Patient

Registered nurses are responsible for assessments, discharge planning, health education, care planning, evaluating patient data, care of invasive lines, and administering parenteral medications. They must never delegate any element of the nursing process, which includes; Assessment, Diagnosis, Planning, Implementation, Evaluating (ADPIE). An RN often cares for the unstable patients.

Parenteral Therapy

Nutrition-plate IV

There are certain tasks that RNs should not delegate to LPNs, such as the starting transfusions of blood or blood products, starting or monitoring parenteral nutrition and medication, and accessing central venous access devices or central venous lines.

Discharge Planning & Health Education

Laying Out Plans

RNs are educated in interpreting data, assessing and incorporating patient education into their care. These tasks are incredibly important to ensure that patients are successful and knowledgeable in managing their health at home. RNs educate the patient on their health condition, what problems to watch for, and how to handle them. They assess the level of patient knowledge about the medications prescribed, and whether any equipment is needed when returning home, etc.

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