

Excerpt from [Title 172, Chapter 99](#)

99-004 STANDARDS FOR DELEGATION

99-004.01 Delegation of Nursing Interventions. Full utilization of licensed nurses may require auxiliary patient care services provided by persons carrying out interventions for the support of nursing services as delegated by RNs. The scope of delegation may vary depending on the level of nursing judgement required for the interventions, the knowledge and skills of the unlicensed person, the method and frequency of supervision, and the client/patient's condition, ability, and willingness to be involved in the management of his/her own care.

99-004.01A Premises of delegation.

99-004.01A1 Only licensed nurses are legally authorized to practice nursing as defined in the Act.

99-004.01A2 Only RNs licensed in accordance with the Act may delegate nursing interventions to be performed by others on behalf of the nurse. Such delegation shall be in a manner that does not conflict with the Act or these regulations.

99-004.01A3 RNs retain accountability for the application of nursing process when making the decision to delegate nursing interventions, and for the adequacy of client/patient care and outcomes related to the delegation decision.

99-004.01A4 Nursing is a process discipline based upon a systematized body of nursing knowledge and cannot be reduced to a list of tasks. Individual tasks or activities labeled as nursing provided in isolation by unlicensed persons functioning independently of the nurse is unlawful and constitutes the practice of nursing without a license.

99-004.01A5 Many nurses are employees of organizations. Within organizational hierarchy, the transference of organizational responsibility and accountability occurs within the decision making framework defined by the institution. Such a framework is a managerial division of responsibilities, and may include a nursing service delivery model and employer guidelines. The standards applied at the organizational level must meet or exceed the standards for delegation as defined within these regulations.

99-004.01A6 Although unlicensed persons may be used to complement licensed nurses in the provision of nursing care, such persons cannot be used as a substitute for the licensed nurse.

99-004.01B Standards for Delegation.

99-004.01B1 RNs shall use a systematic delegation decision making process based upon nursing education, a body of nursing knowledge, and nursing judgement to delegate in a manner that allows for safe, accountable, and responsible provision of nursing care.

99-004.01B2 RNs shall match the level of judgement required for the selected interventions with the experience and competency of the unlicensed person(s) and with the level of supervision available.

99-004.01B3 The detail and method of communication shall be congruent with the level of nursing judgement required for the delegated nursing intervention and the experience and competency of the unlicensed person and the frequency and method of supervision.

99-004.01B4 Nursing service administrators may select nursing service delivery models and develop employer guidelines for the provision of nursing care that do not conflict with the Act or these regulations. Nursing service administrators are accountable to provide adequate resources to carry out the delegation plan.

99-004.01B5 Staff RNs may utilize employer guidelines in the delegation decision making process but retain accountability for individual delegation decisions, the delegation plan, and evaluation of delegation outcomes.

99-004.01C *Delegation Process*. RNs shall utilize a decision making process to delegate in a manner that protects public health, welfare, and safety. Such a process shall include:

1. Assessing client/patient(s) and resources.
 - a. Nursing service administrators shall assess the health status of group(s) of client/patients, analyze the data and identify collective nursing care needs, priorities, and necessary resources.
 - b. Staff RNs shall assess client/patients individual health status, analyze the data, and identify the client/patient's specific goals, nursing care needs and necessary interventions.
2. Developing a delegation plan. The delegation plan shall include:
 - a. Selecting and identifying nursing interventions which may be delegated.
 - (1) Selected interventions shall be those:
 - (a) which frequently recurs in the daily care of a client/patient or group of clients/patients,
 - (b) which do not require the unlicensed person to exercise independent nursing judgment,
 - (c) which do not require complex and/or multi-dimensional application of the nursing process,
 - (d) for which the results of the intervention are predictable and the potential risk is minimal, and
 - (e) which utilize a standard and unchanging procedure.
 - (2) Interventions which shall not be delegated include, but are not limited to:
 - (a) activities including data collection, problem identification, and outcome evaluation which require independent nursing judgement;
 - (b) teaching except for that related to promoting independence in personal care and activities of daily living;
 - (c) counseling, except that unlicensed persons may be instructed to recognize and report basic deviations from healthy behavior and communication patterns, and may provide listening, empathy, and support.
 - (d) coordination and management of care including collaborating, consulting, and referring;
 - (e) triage and/or the giving of advice; and
 - (f) treatments which are complex interventions as defined in 172 NAC 99-002.
 - (3) RNs. shall identify the selected nursing interventions.
 - (a) Nursing service administrators shall identify selected interventions through an organizational description of a nursing service delivery model and employer guidelines.
 - (b) Staff RNs shall identify selected interventions on an individual basis.
 - (4) If an RN delegates medication provision, such delegation shall be done in accordance with the Medication Aide Act Neb. Rev. Stat. Sections 71-6718 to 71-6742.

- b. Selecting and identifying unlicensed persons providing auxiliary patient care services in support of nursing and to whom nursing interventions may be delegated.
 - (1) RNs shall assess and identify the unlicensed person(s) education/training, experience, and competency to provide selected nursing interventions .
 - (2) Nursing service administrators shall establish organizational standards which identify educational and training requirements, and competency measurements of unlicensed persons. Nursing service administrators shall identify unlicensed persons by a position title and role delineation/job description.
 - (3) Staff RNs shall instruct and/or assess, verify, and identify the unlicensed person's competency on an individual and client/patient specific basis.
 - c. Selecting and identifying the methods of supervision and the licensed health care professionals responsible to provide supervision.
 - (1) The method of supervision and the frequency of assessment, inspection, and evaluation shall be determined by RNs after an evaluation of the involved factors including, but not limited to the following:
 - (a) the willingness and ability of the client/patient to be involved in the management of his/her own care;
 - (b) the stability of the client/patients condition;
 - (c) the experience and competency of the unlicensed person(s) providing nursing interventions; and
 - (d) the level of nursing judgement required for the delegated nursing interventions.
 - (2) Nursing service administrators shall establish organizational standards and employer guidelines which provide for sufficient supervision to assure that the nursing care is adequate and meets the needs of the client/patients. Nursing service administrators shall identify the licensed health care professionals responsible to provide supervision by a position title and role delineation/job description.
 - (3) Staff RNs shall determine the method of supervision on an individual basis and identify any other licensed nurses who have been assigned the responsibility for supervision.
 - d. Communicating the delegation plan.
 - (1) Nursing service administrators shall communicate the delegation plan to licensed nurses responsible to provide supervision and to unlicensed persons(s) responsible to provide nursing interventions through description of a nursing service delivery model and employer guidelines.
 - (2) Staff RNs shall communicate decisions regarding selected interventions and the conditions of supervision to licensed nurses responsible to provide supervision and to unlicensed person(s) responsible to provide nursing interventions as appropriate and on an individual basis.
 - (a) Communication of selected interventions to unlicensed persons shall be in accordance with 172 NAC 99-005.02 item 3.
3. Implementing the delegation plan by providing direction and supervision.
- a. Direction shall include:
 - (1) initial instruction related to the delegated intervention(s);

- (2) monitoring to assure that the delegated nursing intervention(s) have been provided; and
 - (3) evaluating client/patient responses and delegated nursing interventions.
- b. Supervision:
 - (1) may be provided by the delegating RN, by other licensed health care professionals identified in the delegation plan in accordance with 172 NAC 99-004.01C item 2.c., and/or by licensed nurses directing unlicensed persons in accordance with 172 NAC 99-005.02.
 - (2) shall include direct supervision, indirect supervision, or a combination of both methods.
 - (a) RNs may utilize both direct and indirect methods of supervision. When indirect supervision methods are utilized, RNs shall be available through telecommunication.
 - (b) LPNs may only utilize direct methods of supervision.
- 4. Evaluating the delegation plan by:
 - a. obtaining feedback from unlicensed persons;
 - b. providing feedback to unlicensed persons;
 - c. measuring client/patient response and goal attainment related to the delegated interventions; and
 - d. altering the delegation plan as indicated by client/patient response.