

3DHB Direction & Delegation – Nursing and Allied Health

Title: 3DHB Direction & Delegation – Nursing, Midwifery and Allied Health	
Type: Policy	HDSS Certification Standard [optional]
Issued by: HHS/ELT Committees for CCDHB	Version: 4 (CCDHB)
Applicable to: Nursing, Midwifery, Allied Health Scientific and Technical workforces, including unregulated healthcare workers	Contact person: Chief Nursing Officer
Lead DHB: CCDHB	

Purpose:

This policy provides health care workers with:

- guidance to assist them to safely direct and delegate patient care, activities to others to support quality care guidance on their responsibilities and accountabilities when accepting delegated task
- this policy does not replace clinical judgment or obtaining clear guidance and support from managers, senior staff and the organisation.

Scope:

This document applies to all healthcare workers employed in or working within the 3DHBs with direct and in-direct patient/client contact. While the principles of this policy apply to the medical workforce, the inclusion of medical practitioners within the scope of this document will be considered at the time of the policy review.

Current scope therefore includes, but is not limited to:

- Registered Nurses (RN) Enrolled Nurses (EN) Midwives, Allied Health, Scientific & Technical professions (AHST)
- Agency workers
- Unregulated healthcare workers
- Contractors
- Third party service providers, and any other individuals or suppliers working for the organisations, including personnel affiliated with third parties, contractors, temporary workers and volunteers
- Students

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Definitions:

Healthcare worker is a generic term used for a person or persons working in the healthcare environment. It encompasses both healthcare professionals and unregulated healthcare workers.

Healthcare professional is a healthcare worker who has a professional qualification. Their profession may or may not be registered under the Health Practitioners Competence Assurance (HPCA) Act (2003), or the Social Workers Registration Act (2003) and they may or may not have a professional membership. Other healthcare professionals who are not registered under the HPCA act, but do have a professional qualification and are regulated through their professional body or association include (but are not limited to) Speech-Language Therapists and Clinical Physiologists.

Unregulated healthcare worker (previously referred to as Kaiāwhina) is a healthcare worker whose practice is not regulated under the HPCA act and they do not have a professional qualification or belong to a professional association or body. Unregulated healthcare workers work under the direction and delegation of a healthcare professional (above). Unregulated healthcare workers include, but are not limited to:

- Health Care Assistant (HCA)
- Health Care Support worker
- Mental Health Support Worker (MHSW)
- Maternity Support Workers (MSW)
- Care Assistant/assistant
- Allied Health Assistant (AHA)
- Technician
- Radiology Assistant

Student means a healthcare worker who is training to become a healthcare professional.

Accountability means being answerable for one's decisions or actions.

Delegation can be described as the allocation of work to an unregulated healthcare assistant or other healthcare professional. When delegating activities the healthcare professional must ensure the person performing the task is competent (NCNZ, 2011). In the delegation process the healthcare professional is responsible and accountable for the decision to delegate.

The person performing the delegated activity is accountable for his or her own actions. When delegating work to an unregulated healthcare worker the unregulated healthcare worker is accountable and responsible for completion of the task but the healthcare professional retains accountability and responsibility for the plan of care and decision to delegate the task.

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Direction is “...the active process of guiding, monitoring and evaluating the ... activities performed by another.” (NCNZ, 2011).

- **Direction** is provided *directly* when the healthcare professional is actually present and observes, works with and directs the person undertaking the task/activity.
- **Direction** is provided *indirectly* when the healthcare professional works in the same facility or service, and is available but does not constantly observe the person undertaking the activities (NCNZ, 2011).

Responsibility means having control over an action. “A charge or duty that arises from one’s role or status in a profession or organisation.” (NCNZ, 2011)

Roles and Responsibilities:

Employers (the DHBs)

- Employers are accountable and responsible to their employees and patients/clients to support safe delegation of care and to ensure a safe skill mix which enables staff to provide a safe standard of care.
- Employer’s responsibilities are set out in the Health and Disability Code of Consumer Rights (1996) and the Health and Disability Service Standards (2008).

Managers, team leaders, service or operations managers, clinical coordinators, clinical leaders, professional leaders/advisors, charge nurse managers/midwife manager, associate charge nurse/midwife managers must ensure:

- there is a safe skill mix to provide safe clinical care and facilitate safe delegation and supervision of unregulated healthcare workers and other members of the health care team as required. They must seek professional advice when needed to achieve this requirement
- staff understand the principles and procedures of safe delegation and know what to do if they feel unsafe delegation practice is occurring
- all staff have clear role descriptions and demonstrate an understanding of their area or scope of practice.. Students without role descriptions are required to work within the guidelines of the DHBs and their tertiary education provider (TEP)
- Unregulated healthcare workers have clear role descriptions and demonstrate understanding of their roles and responsibilities
- all staff practice is evaluated through annual appraisal and compliance with other regulatory and local policy requirements relevant to their role and/or profession
- that staff are supported to maintain and develop skills required to ensure safe patient care or to carry out activities required in their role. This includes professional

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development required to develop new knowledge, skills and attitudes to keep up with new technologies and models of care

- that unregulated healthcare workers work under the delegation of a healthcare professional which may require direct or indirect supervision arrangements
- when unregulated healthcare workers are working with a number of disciplines in the team the line management structures are appropriate.

The person delegating the activity must:

- have a clear understanding of their own role description responsibilities and competency
- ensure that the delegation is appropriate and that the person being delegated to is able to decline when the delegation is outside of their scope, training, policy, competency or for other reasons they will be unable to complete the delegated task
- use professional and clear language when delegating to another person
- retain responsibility for the decision to delegate the activity or patient care
- assess the patient, context, care requirements and treatment plan of a patient before making a decision to delegate
- be available to provide timely advice to the person being delegated to (or provide an alternative contact person).
- provide direct or indirect guidance according to the nature of the delegated activities and abilities of the person completing the delegated activity (NCNZ, 2011)
- provide clear direction on the expected activity, its objective and the expected outcome and ensure the person clearly understands what they are being asked to do, how to contact them if necessary and how to report back to them
- ensure feedback on the outcome of the task from the person undertaking the task and evaluate this
- ensure that the task that they are delegating is appropriate for the person they are delegating to, and that that person is competent and capable of completing the task to the required standard
- ensure they understand and work within the principles of safe direction and delegation
- complete any required documentation related to the delegation
- communicate with the person competing the delegated activity if it is no longer appropriate for them to carry out the task
- inform health consumers that aspects of their care are being delegated (NCNZ, 2011)
- respect their colleagues and be aware of the power that one holds as a person delegating care to another person

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- all documentation regarding patient care should comply with local documentation standards and policy.

The person being delegated to must:

- have a clear role description and demonstrate understanding of their roles and responsibilities
- be accountable and responsible for his or her own actions in regards to the work/activity being delegated and for carrying out the work that has been delegated to them
- not undertake a task that they have not been trained to perform or feel is beyond their capability
- feedback and complete required documentation related to the delegation as required by the organisation and/or profession from the delegator if they have not been trained to perform the activity or feel it is beyond their capabilities/experience
- inform the delegator if the task appears too complex or if they are uncertain of the requirements
- inform the delegator (and other team member if appropriate) if the client/patient's response or circumstances change at any stage of the activity or if the situation requires urgent attention
- inform the delegator if they are no longer able to complete the activity
- ensure that any unsafe delegation is reported to a more senior person (as appropriate in the situation)
- ensure they understand and work within the principles of safe delegation
- must clearly identify their role to the health consumer. Unregulated healthcare workers and students must be careful to ensure that they do not mislead health consumers that they are healthcare professionals (NCNZ, 2011).
- all documentation regarding patient care should comply with local documentation standards and policy.

If the person being delegated the task is an unregulated healthcare worker, they must not delegate the delegated task to a third person.

If the person being delegated the task is a healthcare professional or student, the task must not be delegated to a third party unless delegated to do so by the person delegating the task.

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Policy Content

The primary motivation for delegation is to serve the best interests of the patient/client. The following principles apply to delegation (RCN, 2006, NCNZ, 2011):

- The decision to delegate is a professional judgment and should take into account:
 - The health status of the patient/client
 - The complexity of the delegated activity
 - The context of care
 - The level of knowledge, skill and experience of the individual to perform the delegated activity.

- The activity to be delegated is discussed and if both parties feel confident, the activity can be delegated and carried out.

- The healthcare professional must ensure that the individual who has been delegated the activity:
 - Understands the delegated activity
 - Has received clear instruction
 - Knows who and under what circumstances they should ask for assistance
 - Knows when and to whom they should report back to and what documentation is required.

The five rights of delegation

The five rights of delegation can be used as a mental checklist to assist healthcare professionals to clarify the critical elements of the delegation decision making process.

1. *Right Activity*

An activity that, in the professional judgement of the healthcare professional, is appropriate for a specific patient/client.

2. *Right Circumstances*

Appropriate patient/client group, available resources and other relevant factors considered.

3. *Right Person*

Right person is delegating the right activity to the person with the right skills and knowledge to assist the right patient/client.

4. *Right Communication*

A clear and concise description of the activity to be undertaken, including the objective, and expected outcomes.

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5. Right Direction

Appropriate monitoring, evaluation, intervention and feedback plan is in place.

Note: The ISBAR communication framework can be used to structure communication in regards to delegation of work.

The “decision making process flow chart” ([Appendix one](#)) can be used to facilitate sound decision making with regards to delegation.

Contraindication for delegation

Activities should not be delegated if patient complexity or the task required is beyond the scope of practice, policy or role description and/or competence and capability of the person to which the task is being delegated.

Activities that should not be delegated generally include:

- Complex clinical assessments
- Making a diagnosis
- Interpreting referrals
- Interpreting findings of tests or outcomes of treatments
- Planning/initiating or changing a treatment programme
- Discharge planning
- Administering some treatments, tests, therapies or medications (this will depend on the clinical case and to whom the task is being delegated) however these should be considered very carefully as to the appropriateness of delegation
- Activities or procedures that require clinical judgment and immediate treatment changes should not be delegated

References:

Guideline for Delegation to Occupational Therapy Assistants (2012) New Zealand Occupational Therapy Board. Retrieved from <https://www.otboard.org.nz/wp-content/uploads/2018/01/Guideline-for-the-Delegation-to-Occupational-Therapist-Assistant.pdf>

Health and Disability Services (Core) Standards (2008). Retrieved from <https://www.standards.govt.nz/assets/Publication-files/NZS8134.1-2008.pdf>

HDC Code of Health and Disability Services Consumers’ Rights Regulation 1996. Retrieved from <https://www.hdc.org.nz/your-rights/about-the-code/code-of-health-and-disability-services-consumers-rights/>

National Council of State Boards of Nursing. (2015) National Guidelines for Nursing Delegation Retrieved from https://www.ncsbn.org/NCSBN_Delegation_Guidelines.pdf

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Nursing Council of New Zealand, (2011). Guideline: responsibilities for direction and delegation of care by a registered nurse to a health care assistant Retrieved from http://www.nursingcouncil.org.nz/content/download/447/1922/file/nurse_delegation_RN.pdf

Nursing Council of New Zealand, (2011). Guideline: responsibilities for direction and delegation of care to enrolled nurses. Retrieved from http://www.nursingcouncil.org.nz/content/download/446/1919/file/Nurse_delegation_EN_.pdf

Royal College of Nursing, Royal College of Speech and Language Therapists, the British Dietetic Association and the Chartered Society of Physiotherapy. (2006). Supervision, accountability and delegation of activities to support workers. Retrieved from <https://www.rcslt.org/-/media/Project/RCSLT/supervision-accountability-and-delegation-of-activities-to-support-workers.pdf?la=en&hash=6D9E9C51597801F79DD7FA0055344A9FD923F331>

Weydt, A. (2010). Developing delegation skills. OJIN: The online journal of issues in nursing, 15 (2), manuscript 1. Retrieved from <http://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol152010/No2May2010/Delegation-Skills.html>

Related Documents:

[Assistant referral form \(ORA and CDS\)](#) – Capital and Coast DHB

[Assistant Referral Form Mental Health](#) - Capital and Coast DHB

[Allied health profession specific documentation standards](#) – Capital and Coast DHB

[Unregulated Health Care Workers \(Kaiāwhina\): Health Care Assistant, Mental Health Support Worker Role and Responsibilities](#) – Capital and Coast DHB

[3DHB Clinical Learning Experiences](#)

Clinical Learning Environment Policy

Keywords for searching: [up to four words, to assist staff in finding document]

1. Direction
2. Delegation
3. Accountability

Appendix

Decision Making Flowchart

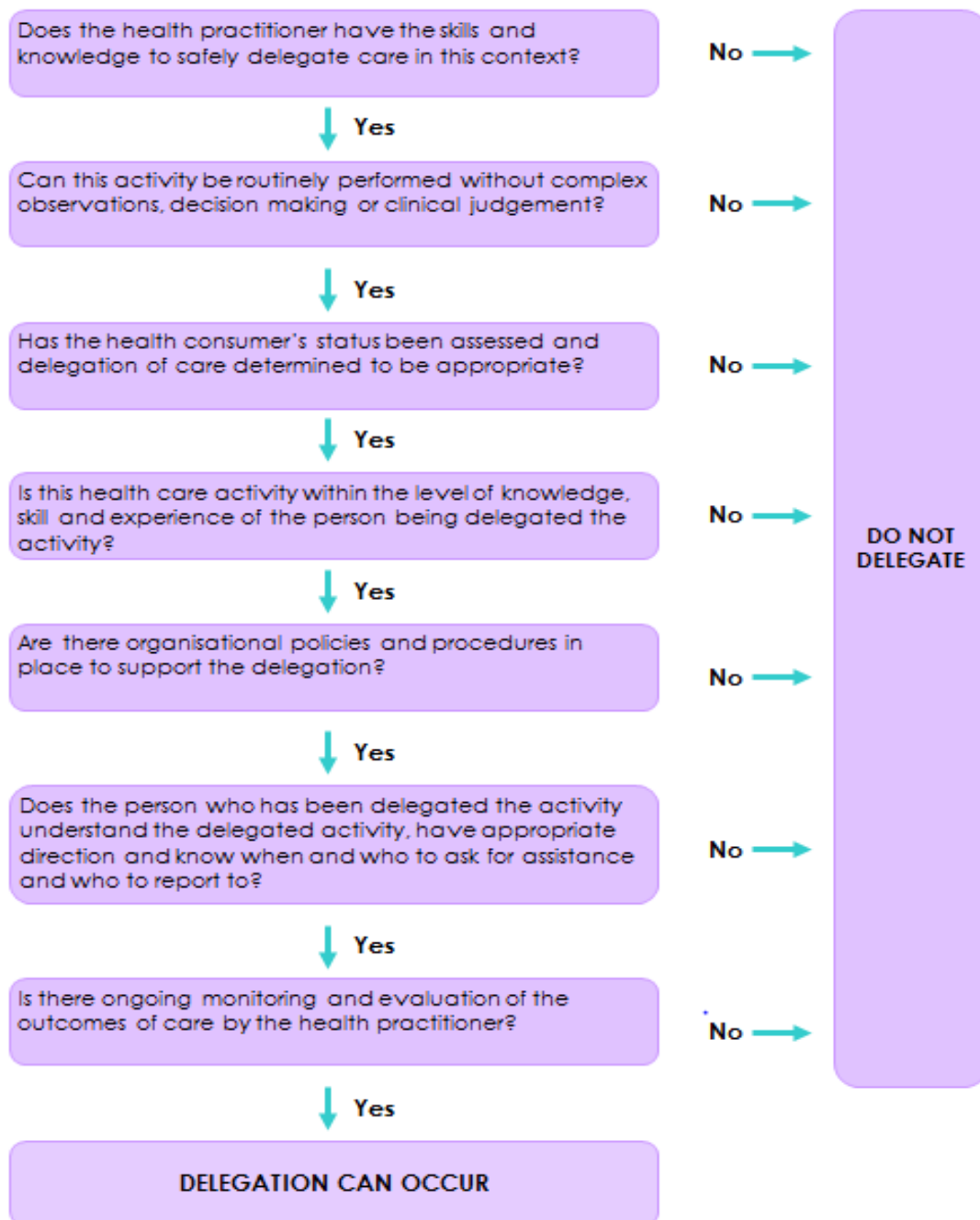
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Appendix one Decision making flow chart



Decision-making process for delegation



Adapted with permission from: NCNZ. (2011). Guideline: delegation of care by a registered nurse to a healthcare assistant. Accessed 16 February 2015, from <http://www.nursingcouncil.org.nz/Publications/Standards-and-guidelines-for-nurses>

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