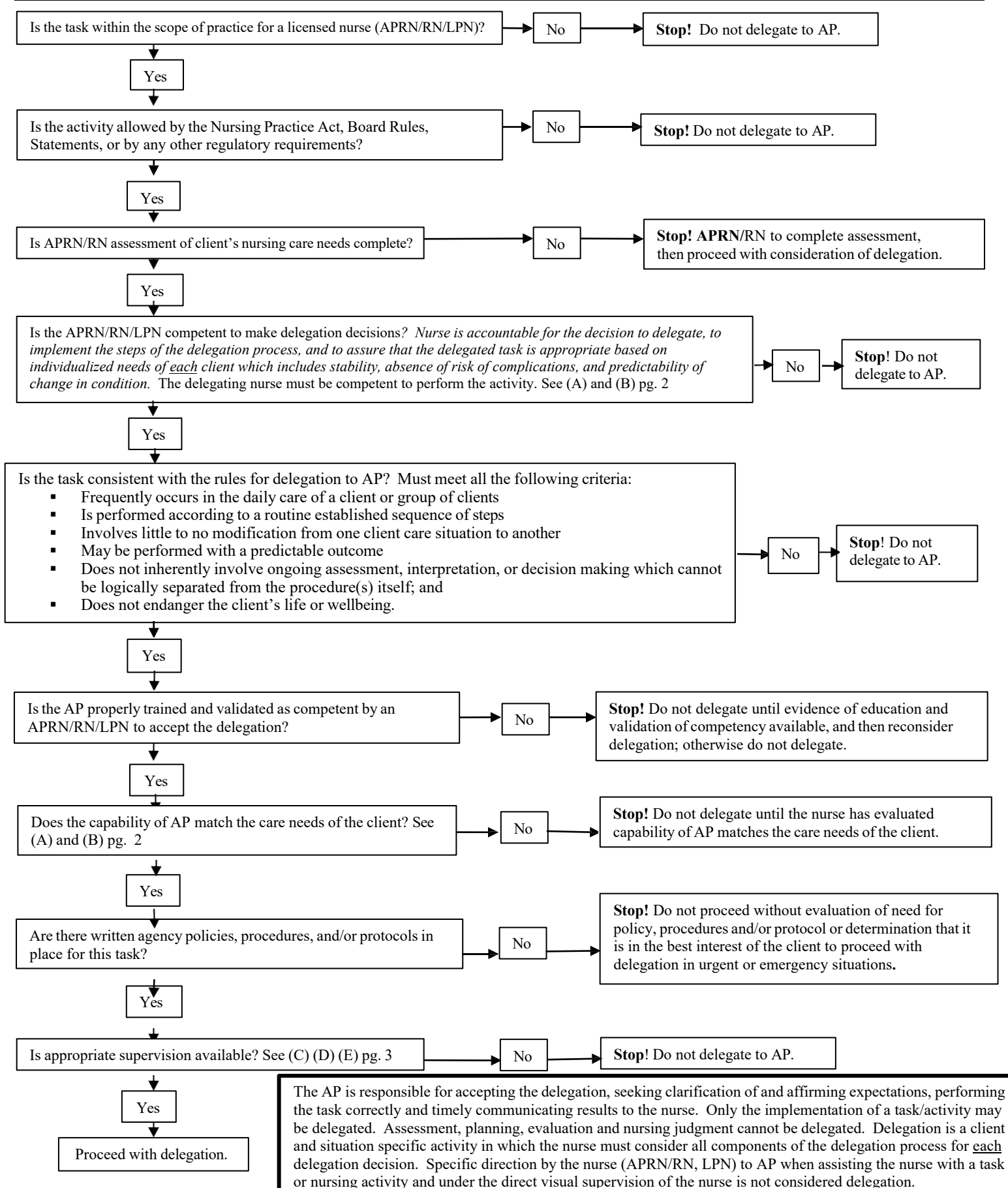


## DECISION TREE FOR DELEGATION BY APRN, RN, LPN TO ASSISTIVE PERSONNEL (AP)

(This decision tree does not apply to delegating nursing duties to Medical Assistants as restricted by [NAC 630.800](#))

### Step 1 of 4: Assessment and Implementation

[Assistive Personnel Defined: Click here](#)





### IMPORTANT COMPONENTS FOR DELEGATION TO AP

**Prior to proceeding to Step 2, consider the following:**

Delegation is a process of decision-making, critical thinking and nursing judgment. Decisions to delegate nursing tasks/activities to AP are based on the APRN/RN’s assessment of the client’s nursing care needs. The LPN may delegate nursing tasks/activities to AP under the supervision of the RN. Additional criteria that must be considered when determining appropriate delegation of tasks include, but are not limited to:

<p><b>(A) Variables:</b></p> <ul style="list-style-type: none"><li>▪ Knowledge and skill of AP</li><li>▪ Verification of clinical competence of AP</li><li>▪ Stability of the client’s condition which involves predictability, absence of risk of complication, and rate of change</li><li>▪ Variables specific for each practice setting:<ul style="list-style-type: none"><li>○ The complexity and frequency of nursing care needed by a given client population</li><li>○ The proximity of clients to staff</li><li>○ The number and qualifications of staff</li><li>○ The accessible resources</li></ul></li><li>▪ Established policies, procedures, practices, and channels of communication which lend support to the types of nursing activities being delegated, or not delegated, to AP</li></ul>	<p><b>(B) Use of critical thinking and professional judgment for The Five Rights of Delegation:</b></p> <ol style="list-style-type: none"><li>1. Right Task – the task must meet all of the delegation criteria</li><li>2. Right Circumstance – delegation must be appropriate to the client population and practice setting</li><li>3. Right Person – the nurse must be competent to perform the activity and to make delegation decisions, the nurse must ensure the right task is being delegated to the right person (AP) and competence has been validated by an APRN/RN, and the delegation is for the individualized needs of the client</li><li>4. Right Communication – the nurse must provide clear, concise instructions for performing the task</li><li>5. Right Supervision – the nurse must provide appropriate supervision/monitoring, evaluation, and feedback of AP performance of the task</li></ol>
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**Step 2 of 4: Communication - Communication must be a two-way process**

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**The nurse:**

- Assesses the AP's understanding of:
  - Task to be performed and expectations of performance of tasks
  - Information to report including client specific observations, expected outcomes and concerns
  - When and how to report/record information
- Communicates individualized needs of client population, practice setting, and unique client requirements
- Communicates and provides guidance, coaching, and support for AP
- Allows AP opportunity for questions and clarification
- Assures accountability by verifying AP accepts delegation
- Develops and communicates plan of action in emergency situations
- Determines communication method between nurse and AP

**The AP:**

- Asks questions and seeks clarification
- Informs the nurse if AP has never performed the task or has performed it infrequently
- Requests additional training or guidance as needed
- Affirms understanding and acceptance of delegation
- Complies with communication method between nurse and AP
- Reports care results to nurse in a timely manner
- Complies with emergency action plans

**Documentation by nurse and AP**

**(as determined by facility/agency policy) is:**

Timely, complete and accurate documentation of provided care:

- Facilitates communication with other members of the health care team
- Records the nursing care provided.

**Step 3 of 4: Supervision and Monitoring** – The APRN/RN supervises the delegation by monitoring the performance of the task and assures compliance with standards of practice, policies and procedures. The LPN supervision is limited to on-the-job assurance that tasks have been performed as delegated and according to standards of practice established in agency policies and procedures. Frequency, level, and nature of monitoring vary with the needs of the client and experience of the AP.

<p><b>(C) The nurse takes into consideration the:</b></p> <ul style="list-style-type: none"> <li>▪ Client’s health stability, status, and acuity</li> <li>▪ Predictability of client response to interventions and risks posed</li> <li>▪ Practice setting and client population</li> <li>▪ Available resources</li> <li>▪ Complexity &amp; frequency of nursing care needed</li> <li>▪ Proximity of clients to staff</li> <li>▪ Number and qualification of staff</li> <li>▪ Policies, procedures, &amp; channels of communication established</li> </ul>	<p><b>(D) The nurse determines:</b></p> <ul style="list-style-type: none"> <li>▪ The amount/degree of supervision required</li> <li>▪ Type of supervision: direct or indirect</li> <li>▪ The Five Rights of Delegation have been implemented:               <ol style="list-style-type: none"> <li>1. Right Task</li> <li>2. Right Circumstances</li> <li>3. Right Person</li> <li>4. Right Directions and Communications</li> <li>5. Right Supervision and Evaluation</li> </ol> </li> </ul>	<p><b>(E) The nurse:</b></p> <ul style="list-style-type: none"> <li>▪ Maintains accountability for nursing tasks/activities delegated and performed by AP</li> <li>▪ Monitors outcomes of delegated nursing care tasks</li> <li>▪ Intervenes and follows-up on problems, incidents, and concerns within an appropriate timeframe</li> <li>▪ Nursing management and administration responsibilities are beyond LPN scope of practice. To assure client safety, the LPN may need authority to alter delegation or temporarily suspend AP per agency policy until appropriate personnel action can be determined by the supervising APRN/RN.</li> <li>▪ Observes client response to nursing care and AP’s performance of care</li> <li>▪ Recognizes subtle signs and symptoms with appropriate intervention when client’s condition changes</li> <li>▪ Recognizes AP’s difficulties in completing delegation activities</li> </ul>
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**Step 4 of 4: Evaluation and Feedback** – Evaluate effectiveness of delegation and provide appropriate feedback

<ul style="list-style-type: none"> <li>▪ Evaluate the nursing care outcomes:           <ul style="list-style-type: none"> <li>○ (APRN/RN) Evaluate the effectiveness of the nursing plan of care and modify as needed</li> <li>○ (LPN) Recognize the effectiveness of nursing interventions and propose modifications to plan of care for review by the APRN/RN</li> </ul> </li> <li>▪ Evaluate the effectiveness of delegation:           <ul style="list-style-type: none"> <li>○ Task performed correctly?</li> <li>○ Expected outcomes achieved?</li> <li>○ Communication was timely and effective?</li> <li>○ Identify challenges and what went well</li> <li>○ Identify problems and concerns that occurred and how they were addressed</li> </ul> </li> <li>▪ Provide feedback to AP regarding performance of tasks/activities and acknowledge the AP for accomplishing the task</li> </ul>
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**Nevada Administrative Codes (NAC) and Nevada Revised Statutes (NRS):**

[NAC 632.047](#) “Delegation” defined

[NAC 632.048](#) “Direct supervision” defined.

[NAC 632.059](#) “Immediate supervision” defined

[NAC 632.087](#) “Supervision” defined.

~~[NAC 632.222](#)~~ Delegation and supervision of nursing care. (see revised LCB File [RO19-22](#))

~~[NAC 632.224](#)~~ Supervision of others; duties of chief nurse; determination of authorized scope of practice; verification of competency.

~~[NAC 632.230](#)~~ Limitations on performance of tasks; supervision of others.

~~[NAC 632.212](#)~~ Duties included; competency required.

**NAC CHAPTER 630 - PHYSICIANS, PHYSICIAN ASSISTANTS, MEDICAL ASSISTANTS, PERFUSIONISTS AND PRACTITIONERS OF RESPIRATORY CARE**

[NAC 630.800](#) “Delegating practitioner” defined.

**Information Links:**

[American Nurses Association Decision Tree for Delegation by Registered Nurses, 2012](#)

[Joint Statement on Delegation ANA and NCSBN Decision Tree for Delegation to Nursing](#)

[Assistive Personnel, 2005](#)

[National Council of State Boards of Nursing Decision Tree – Delegation to Nursing Assistive Personnel, 2015](#)