Department of Health Nursing Care Quality Assurance Commission

Advisory Opinion

The Nursing Care Quality Assurance Commission (NCQAC) issues this advisory opinion in accordance with WAC 246-840-800. An advisory opinion adopted by the NCQAC is an official opinion about safe nursing practice. The opinion is not legally binding and does not have the force and effect of a duly promulgated regulation or a declaratory ruling by the NCQAC. Institutional policies may further restrict practice in that facility's setting and/or impose additional requirements to assure patient safety and/or decrease risk.

Title:	Registered Nurse Delegation in School Settings: Kindergarten-Twelve (K-12) Grades, Public and Private Schools Number: NCAO 15.01
References:	Chapter 18.79 Nursing Care RCW WAC 246-840 Practical and Registered Nursing Common School Provisions, Title 28A RCW
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Approved By:	Nursing Care Quality Assurance Commission (NCQAC)

Conclusion Statement

Under Washington law, <u>Chapter 28A.210 RCW</u>, the registered nurse (RN) is permitted to delegate certain nursing care and medical tasks to non-credentailed, unlicensed assistive personnel (UAP) who are school employees in public and private kindergarten through twelve (K-12) grade schools. (<u>Common School Provisions</u>, <u>Title 28A RCW</u>). These laws provide specific legal exceptions to delegation limits under the Nurse Practice Act, <u>Chapter 18.79 RCW</u>. It is not within the scope of practice for the licensed practical nurse (LPN) to delegate nursing tasks to unlicensed persons in the K-12 school setting. The NCQAC recommends using the <u>Nursing Delegation Decision Tree Tool</u> to determine if it is within the scope of the RN to delegate a task in the school setting. (Page 5). Delegation to UAP is a serious reponsibility of the nurse.

Background and Analysis

Washington State students with acute or chronic health care needs depend on help with nursing tasks during the school day. Students must have access to health care during school hours and at extracurricular school-sponsored events to enable them to participate fully. Many state school districts do not

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have a full-time school RN. Providing nursing care and delegation in schools is uniquely challenging since a school's primary mission is education, not health care. It is not a traditional health care setting where advanced emergency equipment and other licensed health care practitioners are readily available.

Nursing Delegation Overview

Nursing delegation is defined as, "The transfer of the performance of selected nursing tasks to competent individuals in selected situations." The nurse delegating the task is responsible and accountable for the nursing care of the patient. The nurse delegating the task supervises the performance of the unlicensed person. Nurses must follow the delegation process. RCW 18.79.260 and WAC 246-840-930. Nurses are not allowed to delegate administration of medications, the piercing or severing of tissues, or acts that require nursing judgment unless specifically allowed by law. RCW 18.79.260. WAC 246-840-940. Chapter 28A.210 RCW allows exceptions for the RN to delegate certain medical tasks to non-credentialed UAP in schools. This law applies only to kindergarten through twelve grades (K-12) of both public and private schools. Common School Provisions, Title 28A RCW. Chapter 28A.210 RCW does not apply to early childhood programs (child care facilities, preschools, head start programs, or early head start programs) licensed by the Department of Children, Youth, and Families (DCYF), state schools for the blind, deaf, or sensory handicapped (Chapter 72.40 RCW), or camp settings not under the jurisdiction of a K-12, public or private school. Chapter 28A.210 RCW.

In K-12 schools, these tasks are sometimes performed by non-credentialed UAP who are school employees, or by a parent-designated adult (PDA) for specific conditions according to the student's individual health plan (IHP) and/or emergency care (ECP). The law requires an IHP and ECP for students with diabetes or seizure disorder. An ECP is required for students with anaphylaxis. <u>Chapter 28A.210 RCW</u>. The school law allows a PDA to perform specific tasks for:

- Students with diabetes (<u>RCW 28A.210.330</u>).
- Students with a seizure disorder. (RCW 28A.210.355)

Under the <u>Common School Provisions</u>, <u>Title 28A. RCW</u>, <u>Chapter 28A.210 RCW</u>, the RN may delegate some nursing tasks to unlicensed UAP in the school setting that would not be allowed under the nursing law. These include:

- The administration of legend drugs and over-the counter medications given by specifics routes (topical medications, oral medications, eye drops, ear drops, and intranasal medications with a prescription from an <u>authorized health care practitioner</u>.
- The administration of epinephrine using an auto-injection device.
- The performance of non-sterile, intermittent bladder catheterization.
- The performance of other routine and non-complex nursing tasks that do not require puncturing of tissue, sterile procedures, or nursing judgment.

The RN assigned to a student, or who has a student caseload, is responsible for the decision to delegate nursing care to UAP. The law provides protection from coercion or retaliation by others (such as administrators, teachers, parents, or other health care providers) if the nurse determines it is inappropriate to delegate a task.

The school RN may provide training to the PDA. The law does not permit the RN to delegate tasks to a PDA who is not also a school employee. The school RN is not responsible for the supervision of the PDA for those tasks authorized by the parent. RCW 28A.210.260.

Teaching/Training vs. Delegation

It is important to clarify that teaching/training and competency assessment is different than the delegation process. The term "training/teaching" and "delegation" are often used incorrectly. The delegation process requires teaching/training. Not all training/teaching and competency assessment processes require delegation.

Telehealth Nursing Services

The nursing and nursing assistant laws and rules do not prohibit the RN delegator from using telehealth services to initiate or provide ongoing evaluation, or supervision of delegated tasks to UAP. Telehealth may not be appropriate in some circumstances. The most important consideration is whether it is safe for the patient to perform the initial and ongoing assessment, evaluation, or supervision using telehealth services following the nursing and delegation laws and rules (RCW 18.79, WAC 246-840, RCW 18.88A, WAC 246-841).

Recommendations

Delegation, as historically constructed in the school setting, allows the school RN to supervise care to best assure patient safety. Delegation may only be done if a student's condition is stable and predictable unless a legal exception for emergency care exists. It is important to clarify that tasks requiring nursing skill and judgment may not be delegated. It is expected that the school RN will develop the IHP and ECP and will communicate, collaborate, and coordinate care with the parents/guardians, health care practitioners, and PDAs as appropriate. Tasks requiring sterile techniques, puncturing of the skin (other than those allowed by exception), and those requiring nursing judgment may not be delegated. The school RN must understand the delegation process and the principles of delegation:

Principles of Delegation

The Nursing Commission adopts the following principles for RNs from the *American Nurses Association and National Council of State Boards of Nursing Joint Statement on Delegation*. The RN delegating in a school setting:

- Takes responsibility and is accountable for providing nursing care.
- Directs the care and determines whether delegation is appropriate.
- Delegates specific tasks but not the nursing process.
- Uses nursing judgment concerning a student's condition, the competence of the UAP, and the degree of supervision required prior to delegation,
- Delegates only those tasks where the UAP has the knowledge, skill, and ability to perform the task safely (considering training, cultural competence, experience, regulations, and institutional policies and procedures).
- Communicates and verifies comprehension and acceptance of delegation and responsibility (consider a letter of intent to accept delegation based on law and school policy in instances where the task is not previously recognized in law).
- Provides opportunities for the UAP to ask questions and clarify expectations
- Uses critical thinking and professional judgment when following the Five Rights of Delegation

(National Council of State Boards of Nursing):

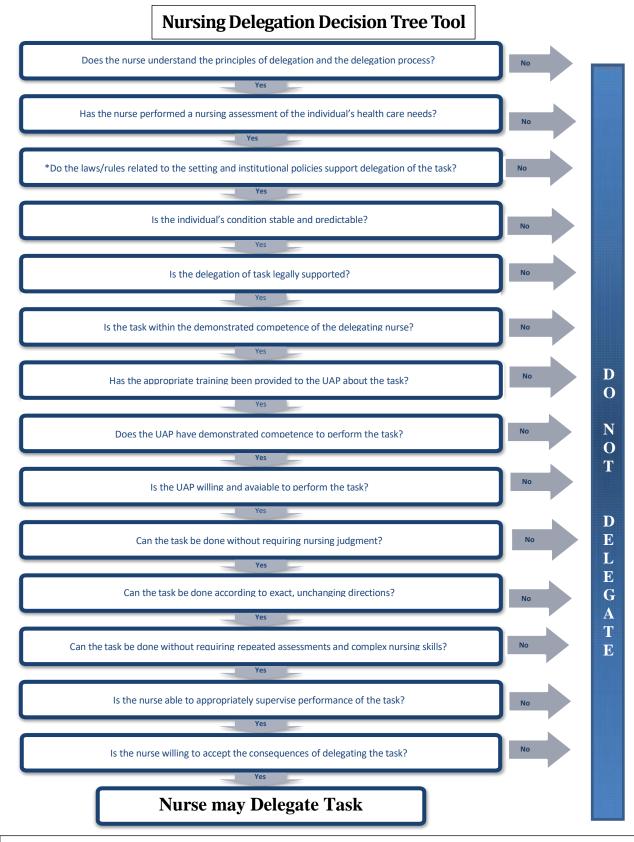
- o Right task task is appropriate to be delegated
- o Right circumstances appropriate setting and necessary resources
- o Right person right task for the right student
- o Right directions and communication clear, culturally appropriate and concise training of the tasks (objectives, limits, expectations and skills competency demonstration)
- Right supervision and evaluation appropriate monitoring, evaluation, intervention, supervision, feedback, and documentation
- Should be involved in establishing systems to assess, monitor, verify, and communicate ongoing competency requirements in areas related to delegation

Telehealth Nursing Services

The school RN or LPN may provide telehealth services to students within their legal scope of practice. The same standards and requirements for delegation apply regardless of whether the services are provided face-to-face or through telecommunication technology. Telehealth services may not always be available or appropriate for the specific student and/or situation. The nurse must use nursing judgment and consider what aspects of the initial and ongoing assessment, evaluation, delegation, and supervision need to be done face-to-face. The Nursing Telehealth Practice RN, LPN, NT, and NA Advisory Opinion, Telehealth Advanced Practice Nursing Care Services Advisory Opinion, and Frequently Asked Questions Website for more guidance and requirements about telehealth nursing services.

Conclusion

Where law permits, appropriately designated, trained, and supervised unlicensed persons can, through the principles of delegation assist the school RN in meeting the health care needs of students in a safe and effective manner. The use of UAP for specific tasks is a decision the school RN makes on a case-by-case basis and is determined through the decision-making process that includes the components of nursing delegation.



^{*}Note: Only the RN may delegate tasks in some settings (adult family homes, assisted living facilities, community residential homes for the developmentally disabled, in-home settings, and kindergarten-twelve (K-12) grade school settings.

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References

Delegation: National Association of School Nurses (NASN)

Delegation: National Council of State Boards of Nursing (NCSBN)

Joint Statement on Delegation: American Nurses Association and the National Council of State Boards of Nursing

Schofield, S.L. (2018). A qualitative case study on delegation of school nursing practice: school nurses, teachers, and paraprofessionals perspectives (rowan.edu)

Washington State Office of the Superintendent of Public Instruction: Health Services Resources