

## Delegation to Unregulated Care Providers

### **Can RNs delegate tasks to unregulated care providers (UCP) such as Continuing Care Aides or Special Care Aides? What are RNs responsible for when delegating tasks? What are the UCPs responsible for?**

- Utilizing their in-depth nursing knowledge-base, critical thinking and decision-making skills, it is within the RN scope of practice to determine when it is appropriate to delegate a task to an UCP (1).
- RNs demonstrate leadership in nursing for the optimal coordination and provision of care (2).
- RNs cannot delegate the overall accountability for the appropriate assignment and oversight of client care and are accountable for the decision to delegate components of care (3).
- RNs demonstrate knowledge of the delegation process (4).
- The key elements of supervision between the point of care RN and the UCP they are delegating care to are directing, assigning, delegating, guiding and monitoring an individual's performance of an activity to influence its outcome (5).
- The UCP is accountable for competently performing the delegated task (6).
- The UCP is also accountable for identifying when they are not able to safely perform a task and communicating that to the RN (6).
- When the client's nursing care needs are complex, the RN cannot delegate or assign the nursing care plan or the nursing assessment to another care provider (7).
- When, in the opinion of the RN, client care would be jeopardized, the RN has the authority and professional responsibility to refuse to assign or delegate any part of the nursing care plan or nursing assessment (8).
- A decision tree for delegation to UCPs can help RNs and managers determine the appropriateness of delegation (9).

### **What should RNs consider when deciding to delegate?**

There are eight areas to be considered:

1. Client choice;
2. Level of client stability and predictability;
3. Competencies of the care provider;
4. Potential for harm;
5. Frequency of occurrence;
6. Level of decision-making;
7. Scope of employment; and,
8. Ability for the client to care for themselves.

A RN working with clients and UCPs (at the point of care) must consider if the task is appropriate for the client in their current situation. Does the UCP have the proper education and demonstrated competence to perform the task? Are there policies in place to support the delegation? Is there appropriate supervision in place to evaluate and monitor the UCP's abilities and the client's response to the activity? (10)

**Do RNs delegate to other regulated nurses such as RPNs or LPNs?**

**No.** RPNs and LPNs have legislated scopes of practice and therefore do not require delegation. RNs are accountable for safe assignment of care to regulated nurses.

**SRNA Resources**

- [Interpretation of the RN Scope of Practice \(2015\)](#)
- [Registered Nurse Practice Standards \(2019\)](#)
- [Registered Nurse Entry-Level Competencies \(2019\)](#)

**External Resources**

- [Canadian Nurses Protective Society, InfoLaw: Delegation to Other Health Care Workers](#)
- [American Nurses Association/National Council of State Boards of Nursing Joint Statement on Delegation](#)

<b>Resource Key</b>		
<b>Number</b>	<b>Resource</b>	<b>Reference</b>
1	Interpretation of the RN Scope of Practice (2015)	page 1
2	Registered Nurse Practice Standards (2019)	Indicators 40 and 43, page6
3	Interpretation of the RN Scope of Practice (2015)	pages 8 and 19
4	Registered Nurse Entry-Level Competencies (2019)	Competency 5.4, page 9
5	Interpretation of the RN Scope of Practice (2015)	page 9
6	Interpretation of the RN Scope of Practice (2015)	page 8
7	Interpretation of the RN Scope of Practice (2015)	page 10
8	Interpretation of the RN Scope of Practice (2015)	page 10
9	Interpretation of the RN Scope of Practice (2015)	pages 24-25
10	Interpretation of the RN Scope of Practice (2015)	pages 20-23

*RN is used to represent all SRNA members including NPs and RN(AAP)s.*