CONSIDERATIONS FOR PRACTICE

In Michigan, the Public Health Code is the primary statute that defines regulations for nurses and other health care professionals. School nursing practice is also influenced by federal, state, local laws and in some instances the Michigan School Code. School Nursing: Scope and Standards of Practice are "expectations that guide the practice of school nursing" (2017, preface, ix). This document contains important information that is not all inclusive or a substitute for a nurse's decision making or judgement. It is intended as a broad direction for school nurse practice.

OVERVIEW

The Michigan Board of Nursing has promulgated <u>specific administrative rules</u> about delegation.

According to NASN, "Nursing delegation in the school setting is the assignment by the school nurse – not a school administrator – to a competent unlicensed individual (also called unlicensed assistive personnel (UAP) the performance of a selected nursing task in a selected situation for an individual student. The school nurse facilitates the UAP training, evaluation of UAP competence, and provides for ongoing supervision of the UAP and evaluation of the student's health outcomes. The nursing process can never be delegated." (NASN, 2018)

The National Certification Board of School Nurses states, the decision of whether or not to delegate or assign is based upon the RN's judgment concerning the condition of the patient, the competence of all members of the nursing team and the degree of supervision that will be required of the RN if a task is delegated. (NCSBN, 2019).

National Information

National Association of School Nurses (NASN): Nursing Delegation in the School Setting

- Recommended Qualifications for Unlicensed School Personnel (UAP)
- Sample Skill Checklist for UAP
- Principles of Practice Nursing Delegation to UAP's in the school setting

NASN: Delegation in the School Setting Position Statement

NASN Course: School Nurse Delegation: Do's and Don'ts of the D-Word

National Council of State Boards of Nursing / American Nurses Association: — National
Guidelines for Nursing Delegation

MICHIGAN SPECIFIC INFORMATION

Michigan Law

The Michigan State Board of Nursing allows safe delegation of nursing tasks to unlicensed persons in the Occupational Regulation Sections of the Michigan Public Health Code, Act 368 of 1978, Part 172 Nursing. The law authorizes the RN to delegate nursing activities and requires

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that the RN teach and supervise less skilled personnel in the performance of delegated nursing activities.

DELEGATION AND SCOPE OF PRACTICE					
Title	Description				
Public Health Code <u>Section</u> 333.17201 Updated <u>PA 499 of 2016</u>	Defines nursing scope of practice. The RN's scope of practice includes the teaching, direction, and supervision of less skilled personnel in the performance of delegated nursing activities. Public Health Code, 1978 PA 368, as amended, recognizes registered nurses as fully licensed health professionals.				
Public Health Code <u>Section</u> 333.16104	Defines delegation as the "authorization granted by a licensee to a licensed or unlicensed individual to perform selected acts, tasks, or functions which fall within the scope of practice of the delegator and which are not within the scope of practice of the delegatee and which, in the absence of the authorization, would constitute illegal practice of a licensed profession".				
Board of Nursing General Rules <u>338.10104</u>	The Michigan Board of Nursing has promulgated specific administrative rules about delegation. Only a registered nurse may delegate nursing acts, functions, or tasks. A registered nurse that delegates nursing acts, functions, or tasks shall do all of the following: a. Determine whether the act, function, or task delegated is within the registered nurse's scope of practice. b. Determine the qualifications of the delegatee before such delegation. c. Determine whether the delegatee has the necessary knowledge and skills for the acts, functions, or tasks to be carried out safely and competently. Supervise and evaluate the performance of the delegate. (e) Provide or recommend remediation of the performance when indicated. (2) The registered nurse shall bear ultimate responsibility for the performance of nursing acts, functions, or tasks performed by the delegatee: within the scope of the delegation.				

Public Health Code Section 333.16109	Defines Supervision: Supervision requires continuous availability of direct communication in person or by radio, telephone, or telecommunication between the supervised individual and a licensed health professional, the availability of the licensed health professional to review the practice of the supervised individual, to provide consultation to the supervised individual, to review records, and to further educate the supervised individual in the performance of the individual's functions.
Public Health Code <u>Section</u> 333.17208	The Occupational Regulation Sections of the Michigan Public Health Code, Act 368 of 1978, Part 172 Nursing states that a licensed practical nurse performs under the supervision of a registered professional nurse, physician, or dentist.

Delegation and Supervision

Delegation is defined in the Occupational Regulation Sections of the Michigan Public Health Code, Act 368 of 1978, Article 15, Part 161, General Provisions as "authorization granted by a licensee to a licensed or unlicensed individual to perform selected acts, tasks, or functions which fall within the scope of practice of the delegator and which are not within the scope of practice of the delegatee and which, in the absence of the authorization, would constitute illegal practice of a licensed profession." In their General Rules, Part 1 - General Provisions the Michigan Board of Nursing have promulgated specific administrative rules about delegation which are summarized below (Michigan Nurses Association, 2009).

NOTE

- ONLY an RN may delegate nursing acts, functions or tasks. LPNs may not delegate.
- LPNs must be supervised by the RN, physician, or dentist.
- The RN only delegates tasks not the responsibility or accountability for patient care.
- The RN delegates from her/his scope of practice. The RN cannot delegate acts/tasks/functions that are not within her/his scope of practice.
- The RN determines whether the delegatee has the knowledge/skill to do a specific task.
- The RN determines whether the task for a specific client can be performed safely and competently for the specific client.

Sections of the Michigan Public Health Code, Act 368 of 1978, Article 15, Part 161, General Provisions as the licensed health professional overseeing the work of another individual and

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requires that the licensed health professional provide supervision. The RN must fulfill the requirement for continuous availability. Occupational Regulation Sections of the Michigan Public Health Code, Act 368 of 1978, Article 15, Part 161, General Provisions, 333.16215 ties delegation to supervision. You cannot delegate without supervising.

Delegatable Nursing Services

The school nurse must first determine if the task can be delegated using criteria set forth in Michigan law, in professional standards and in assessment of the unique characteristics of the individual student requiring nursing services. A nursing task may be determined to be delegatable and assigned to be performed by nursing assistive personnel (UAP) under the supervision of a registered nurse (RN) if the individual situation meets all of the criteria and in the nurse's judgment, it is safe to do so.

Non-Delegatable Nursing Services

Not all nursing tasks may be delegated. Certain nursing services may only be performed by an RN or Licensed Practical Nurse (LPN). Should a nursing task fail to meet the criteria for delegation, the nursing task/procedure must be performed by the RN or LPN. Examples of these tasks *may* include a complex tracheotomy suctioning; tracheotomy tube or inner cannula change or replacement; any medication that requires calculation of the dose unless the specific method of calculation is provided; assessment before or after administration; and certain medications given by injection. Any service needing nursing assessment and/or performed on "an as needed basis" is not delegatable.

It is important to note that a specific task is only delegated for a **specific student**; therefore, a procedure that is delegatable for one student **may not necessarily** be delegatable for any other student.

Michigan law does not delineate which nursing tasks can be delegated, though based on the nurse's assessment and judgment examples of those tasks *may* include; calculation of insulin doses providing appropriate training on the student's specific method of calculation is provided., pharmacy or prescriber prepared hand-held inhalant medication administration, clean intermittent/non-complex bladder catheterization; student specific emergency medications; and assembly of supplies and supervision of student finger stick for blood sugar with appropriate training of the individual student specific needs.

CONSIDERATIONS FOR SCHOOL NURSE PRACTICE

Assessment/Determination

1. The school nurse is expected to be familiar with the most recent requirements for delegation set forth in Michigan law.

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- 2. In compliance with the law, the registered nurse shall determine the nursing tasks which will be delegated to the unlicensed person.
- 3. In determining whether aspects of a student's health care may be delegated to an unlicensed person, the nurse must assess and document that:
 - The availability of the school nurse (Selekman & Ness, 2019)
 - The student's health care needs are chronic, stable, uncomplicated, routine, and predictable
 - The student is unable to perform his/her own care;
 - The environment is conducive to delegation of nursing tasks; and
 - The unlicensed person is able to perform the delegated nursing in a safe and competent manner.
 - The five rights of delegation can be met: the right task, right circumstance, right person, right directions and communication and right supervision and evaluation. (Selekman & Ness, 2019)
- 4. The school nurse shall have input and agree with the selection of the unlicensed assistive personnel to whom he/she will delegate nursing tasks.
- 5. The school nurse is responsible for verifying the competency, orienting, instructing, supervising and evaluating the unlicensed person in the performance of delegated tasks. It is recommended that these steps are documented.
- 6. Any nursing function that requires nursing knowledge, judgment, and skill may not be delegated. These include, but are not limited to:
 - The initial nursing assessment or intervention;
 - Development of a nursing diagnosis;
 - Establishment of the nursing care goal;
 - Development of a nursing care plan; and
 - Evaluation of a student's progress or lack of progress toward goal achievement.

Delegation depends on the complexity of the task and condition of the student. Therefore, continuation of delegation is entirely at the discretion of the delegating nurse who may decide at any time that the student's medical safety requires a licensed professional to perform the task.

Accountability

Accountability covers all aspects of the nursing task including ensuring that the right child gets the right medication/treatment at the right dose/right procedure and right time, as well as the

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documentation of this action. Accountability also includes nursing review of the order for accuracy.

Confidentiality

It is the responsibility of the school nurse to instruct the UAP in the importance of confidentiality and understanding the consequences of breaching confidentiality.

Effective Communication

As part of the selection process, the UAP must be willing to be supervised and must possess the ability to communicate with the school nurse. The school nurse must be able to clearly and effectively communicate with the UAP and must be available to the UAP for any questions.

Documentation

Accurate and complete recording of the delegated procedure is the responsibility of the UAP, under the leadership and supervision of the registered nurse. The school nurse will document on a skills checklist the training date and their observation of a return demonstration as well as periodic supervision/evaluation of the UAP. (See Appendix C, D).

Glossary

Delegatable Nursing Services: Nursing functions which may be delegated to and performed by unlicensed assistive personnel under the supervision of a registered nurse.

Non-Delegatable Nursing Services: Nursing functions that require nursing knowledge, judgment, and skill and may not be delegated.

School Nurse: A registered nurse currently licensed by the Michigan Board of Nursing working in a school setting.

Unlicensed Assistive Personnel: Assistive Personnel (AP): Any assistive personnel trained to function in a supportive role, regardless of title, to whom a nursing responsibility may be delegated. This includes but is not limited to certified nursing assistants or aides (CNAs), patient care technicians, CMAs, certified medication aids, and home health aides (formerly referred to as "unlicensed" assistive personnel [UAP]). An individual who is not licensed or certified to provide nursing care but is trained to function in an assistive role to the registered professional nurse in the provision of (student) care activities delegated by and under the supervision of the professional registered nurse (NCSBN, 2019)

REFERENCES

American Nurses Association & National Association of School Nurses. (2017). *School Nursing:* Scope and Standards of Practice (3rd ed.) Silver Spring, MD: ANA & NASN

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- Michigan Public Health Code, Act 368 of 1978, Article 15, Part 161, General Provisions. http://www.legislature.mi.gov/(S(Imhqof45tr0qf3e4bzisp555))/documents/mcl/pdf/mcl-368-1978- 15-161.pdf
- Michigan Nurses Association (MNA) (2009). RN accountability for delegation decisions: Legal parameters in Michigan and professional guidelines. Lansing, MI: Author.
- National Association of School Nurses. (2018). *Delegation*. <u>Delegation National Association</u> of School Nurses (nasn.org)
- National Council of State Boards of Nursing & American Nurses Association. (2019). *National guidelines for nursing delegation*. NGND-PosPaper 06.pdf (ncsbn.org)
- Selekman, J. & Ness, M. (2019). Students with chronic conditions. In J. Selekman, R. Adair Shannon, & C.F. Yonkaitis (Eds.), *School nursing: A comprehensive text* (3rd ed. pp.481-499). F.A. Davis
- Occupational Regulation Sections of the Michigan Public Health Code, Act 368 of 1978, Part 172 Nursing. http://legislature.mi.gov/doc.aspx?mcl-368-1978-15-172

Additional Resources

Bobo, N. (2018). *Principles for practice: Nursing delegation to unlicensed assistive personnel in the school setting.* (2nd ed.) Silver Spring, MD: National Association of School Nurses.

Combe, L., & Clark, Y. (2019). Management of school health staff. In J. Selekman, R.A. Shannon, & C.F. Yonkaitis (Eds.), School nursing: *A comprehensive text* (3rd ed., pp. 936-957). Philadelphia, PA: F.A. Davis Company.

Evidenced Based School Nurse Text Resources

Legal Resources for School Health Services – Resha & Tailiferro School Nursing: A Comprehensive Text – Janice Selekman School Nursing: Scope and Standards of Practice – ANA & NASN

APPENDIX A - Five Rights

Appendix B – Delegation Decision Tree

Appendix C- Skills Check List

Appendix D – Training/Supervision Acknowledgement

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APPENDIX A

Five Rights of Delegation (ANA, 2012; NBCSN, 1997; NASN, 2010)

The Right Task - Is the task:

- based on written medical orders?
- repeated frequently?
- reasonably routine with a predictable outcome?
- to be performed according to an established sequence of steps without modification? one that does not involve assessment, interpretation, or decision-making?

The school nurse must review each case to evaluate whether the nursing task can be safely delegated. If the task is not routine, is complicated, or requires additional expertise or assessment to administer, that particular task may need to be administered only by a licensed person.

The Right Circumstances - Have you clearly evaluated the circumstances regarding;

- A child's particular vulnerability because of age, developmental level, cognitive abilities, gender, or specific health issues?
- Whether the environment is appropriate, safe, and sufficiently confidential for the UAP to perform the delegated task.

The Right Person - Is the person:

- Available at the right time?
- Open to and good at working with students?
- Competent to do the task?
- Consents to be supervised?

The Right Direction/Communication - Have you taken into account:

- How much training of the UAP will be required to perform the task in a safe and appropriate way?
- What are the learning needs of the UAP?
- How many tasks will the UAP need to learn?
- Does UAP possess the skills and knowledge to communicate appropriately to the school nurse?

The school nurse must determine the UAP competency and document the training, observations, and competence of the delegate.

The Right Supervision - Have you clearly considered:

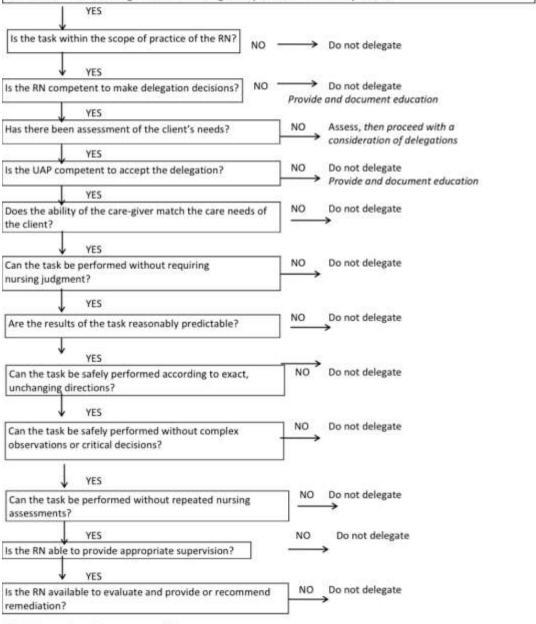
- How much initial and ongoing supervision will be required for the UAP to correctly perform the task?
- What type of supervision will be needed?
- Is the school nurse available to periodically supervise the UAP and available on call?

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APPENDIX B Delegation Decision-Making Tree

From MNA. Adapted from a model developed by the Ohio Nurses Association and the National Council of State Boards of Nursing.

Do RNs have laws & rules that support delegation? The Occupational Regulation Section of the Michigan Public Health Code and the Michigan Board of Nursing Rules provides this authority to RNs.



The RN bears the ultimate responsibility.

Appendix C Skills Checklist for Staff Training Name:

Date trained: _____

School Nurse Instructor:

Supervision/Evaluation

	1	T		_			ı	1
	Demo	Return	Date	Date	Date	Date	Date	Date
	date	Demo date						
State name and purpose of								
procedure								
Preparation for procedure								
When done								
Where done								
 Special Instructions 								
Supplies								
•								
•								
Steps to the procedure:								
1.								
2.								
3.								
4.								
5.								
Able to state expected								
student outcomes:								
•								
•				1				
Appropriate documentation								
Appropriate communication								
with school nurse (provide								
examples								

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Appendix D

Training/Supervision of School Personnel Administering Medication has received training to administer medications according to School policy and procedures. S/he has demonstrated knowledge and understanding of the policies and procedures listed above.				
I have been instructed in theSchool's medication policy and administration procedures. I understand that I am to administer medications to students according to these procedures and as delegated to me by the school nurse. I understand that I am to report immediately to the school nurse any new orders, change in medication orders, changes in a student's health status, and discovery of a medication error. I understand that I may not delegate this task to any other person.				
School staff signature	Date			

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