Medication Administration and Nurse Delegation

Core Concepts:

- Category 1 Medication Administration Certification provides for personnel to administer some medications in some settings WITHOUT nurse delegation.
- Settings where personnel may do Category 1 authorized actions WITHOUT nurse delegation are:
 - o Residential settings with 5 or fewer living together
 - o Adult Day Services locations where 16 or fewer are participating
- All other settings require nurse delegation for all medication and nursing tasks
- Nurses may delegate any nursing TASK in any setting (OBN's law/rule)
 - Nurses can only delegate MEDICATIONS that DODD authorizes as delegable
 - o Nurse delegation of medications or tasks follows OBNs rules for delegation
- In settings that do not require nurse delegation the only nursing TASKS personnel may do are the 13 "Health Related Activities" included in the Category 1 certification
- Anything going into a g/j tube requires nurse delegation
 - Food/ fluids is nursing task nurse delegates
 - o Medication requires Category 1 and Category 2 certifications plus delegation
- Insulin and other Injectable Treatments for Metabolic Glycemic Disorders always requires nurse delegation and Cat 1 and Cat 3 certifications
- Glucagon Category 1 certification and nurse delegation in all settings
- Unlicensed personnel can never do medications or treatments that require judgement
 - o Step by step instructions
 - o Clear, measurable, observable parameters
 - o Reasonably predictable outcomes
- All medications must be prescribed (even if you can them buy over-the-counter)
 - Except for:
 - Topicals comfort, cleansing, and barrier (stand-alone training required)
 - Topicals for musculoskeletal comfort (with Category 1 certification)

Category 1 Certification:

- Oral medications
- Topical Medications
 - 1. Skin
 - 2. Eyes
 - 3. Ears
 - 4. Vaginal
 - 5. Rectal
 - 6. Nasal
- Metered dose inhaled medications
 - 1. Inhalers
 - 2. Nebulizers when dosage is premeasured
- Oxygen
- Topical, Over the Counter medications for Musculoskeletal Comfort without a prescription
- Glucagon injection (WITH NURSE DELEGATION in ALL settings)
- 13 non-drug "Health Related Activities"
 - 1. Taking Vital Signs
 - 2. Application of clean dressings that do not require assessment/judgement
 - 3. Basic Intake/Output measurement
 - 4. Oral suctioning
 - 5. External catheter care
 - 6. Emptying and replacing ostomy bags
 - 7. Glucometer testing
 - 8. Pulse Oximeter testing
 - 9. Application of prescribed compression hose
 - 10. Use of cough assist devices and insufflators
 - 11. C-PAP and Bi-PAP
 - 12. Application of Percussion Vests
 - 13. Collection of specimens by non-invasive means

Category 2 Certification – plus nurse delegation

- For administration of Medications in G/J Tube
- Only valid when Category 1 is current

Category 3 Certification – plus nurse delegation

- Administration of Insulin injection
- Inhaled Insulin
- Injectable Treatments for Metabolic Glycemic Disorders
- Only valid when Category 1 is current

Nursing Delegation

Core Concepts:

- Ohio Board of Nursing (OBN) governs the practice of nursing
- OBN rules dictate the standards and conditions under which a nurse may delegate
- OBN authorizes delegation of nursing TASKS (but acknowledges and supports DODD's authorization of delegation of some medications)
- DODD definition of "Nurse Delegation" is OBN law/rules for delegation (i.e. DODD say delegation is whatever the OBN says it is).
- Delegation of medications as allowed by DODD must be done by the nurse according to the OBN laws/rules
- Definition of RN practice includes delegation
- Definition of LPN practice includes delegation "at the direction of an RN"
- Only the delegating nurse can determine if a nursing task/medication meets the OBN's standards and conditions for delegation
 - o A task/medication MAY be delegable but only the RN can decide if it IS delegable
 - o OBN provides specific guidance for the nurse's judgement to be applied when deciding if a task/medication is delegable

OBN's OAC 4723-05 Criteria and standards for a licensed nurse delegating to an unlicensed person.

- E) Prior to delegating a nursing task to an unlicensed person, the delegating nurse shall determine each of the following:
- (1) That the nursing task is within the scope of practice of the delegating nurse as set forth in section <u>4723.01</u> of the Revised Code.
 - If a nurse cannot do it the nurse cannot delegate it
 - If it is a medication route that is not authorized in DODD rule the nurse cannot delegate it
- (2) That the nursing task is within the knowledge, skill, and ability of the nurse delegating the nursing task;
 - If the nurse does is not currently proficient in the task the nurse cannot delegate it;
 - the nurse may need to ramp up their own ability before they are able to delegate the action to an unlicensed person
- (3) That the nursing task is within the training, ability, and skill of the unlicensed person who will be performing the delegated nursing task;
 - For medications, the nurse must make sure the person has the required DODD certifications (training)
 - The nurse uses nursing judgement to determine if the personnel has the ability and skill; most often by direct observation initially

- (4) That appropriate resources and support are available for the performance of the task and management of the outcome; and
 - The nurse needs to asses and determine this
 - The nurse's knowledge of the task and the setting/situation allows the nurse to judge this
- (5) That adequate and appropriate supervision by a licensed nurse of the performance of the nursing task is available in accordance with rule 4732-13-07 of the Administrative Code.
 - The nurse's judgement is applied to determine what is adequate and appropriate supervision based on what is being delegated to whom, and for whom;
 - And what nursing oversite can be put in place
- (6) That:
- (a) The nursing task requires no judgment based on nursing knowledge and expertise on the part of the unlicensed person performing the task;
- (b) The results of the nursing task are reasonably predictable;
- (c) The nursing task can be safely performed according to exact, unchanging directions, with no need to alter the standard procedures for performing the task;
- (d) The performance of the nursing task does not require that complex observations or critical decisions be made with respect to the nursing task;
- (e) The nursing task does not require repeated performance of nursing assessments; and
- (f) The consequences of performing the nursing task improperly are minimal and not lifethreatening.
- (F) Prior to delegating a nursing task, the delegating nurse shall:
- Take these that will inform the nurse's decisions about
 - whether the task can be delegated or not
 - what supervision will be needed
 - the length of time the delegation will be authorized
- (1) Identify:
 - (a) The individual on whom the nursing task may be performed; and
 - (b) A specific time frame during which the delegated nursing task may be performed.
- (2) Complete an evaluation of the conditions that relate to the delegation of the nursing task to be performed, including:
 - (a) An evaluation of the individual who needs nursing care;
 - (b) The types of nursing care the individual requires;
 - (c) The complexity and frequency of the nursing care needed;
 - (d) The stability of the individual who needs nursing care; and
 - (e) A review of the evaluations performed by other licensed health care professionals.

- (G) The delegating nurse shall be accountable for the decision to delegate nursing tasks to an unlicensed person.
- (H) If a licensed nurse determines that an unlicensed person is not correctly performing a delegated nursing task, the licensed nurse shall immediately intervene.

OBN's OAC 4723-13-06 Minimum curriculum requirements for teaching a nursing task.

- in DD setting (A) and (B) of this teaching is part of certification classes; but the nurse may need to provide additional training too
- if the task is not part of DODD Certification the delegating nurse must assure all the information listed is part of the training
- reminder of above requirement for the nurse to assure: "That the nursing task is within the training, ability, and skill of the unlicensed person who will be performing the delegated nursing task"

A licensed nurse shall include all of the following when teaching an unlicensed person to perform a nursing task:

- (A) Presentation of information on infection control and universal precautions;
- (B) Presentation of information and directions on the concepts underlying the nursing task;
- (C) Presentation of information and direction on how to correctly perform the specific nursing task according to current standards of practice following step-by-step directions readily available to the unlicensed person;
- (D) Demonstration of the nursing task; and
- (E) Observation and documentation of a satisfactory return demonstration by the unlicensed person of the nursing task.

OBN's OAC 4723-13-07 Supervision of the performance of a nursing task performed by an unlicensed person.

- The OBN prescribes the factors the RN must take into consideration for determining the necessary supervision
- The delegating nurse needs to take these supervision requirements into consideration as part of the decision about whether a task is delegable
- If supervision cannot be provided the task is not delegable by OBN standards
- (A) When a licensed nurse delegates a nursing task to an unlicensed person in accordance with this chapter, supervision of the performance of the nursing task by the unlicensed person shall be provided by the delegating nurse. For purposes of this rule, supervision includes initial and ongoing direction, procedural guidance, and evaluation, and may include direct observation of the performance of the nursing task. The delegating nurse shall evaluate the performance by the unlicensed person of the delegated nursing task, the need for further instruction, and the need to withdraw the delegation.

- (B) If the substantial purpose of the setting, institution, or agency where a delegated nursing task is being performed is the provision of health care services, the supervision provided by the delegating nurse shall be on-site direct supervision.
- (C) If the substantial purpose of the setting, institution, or agency where a delegated nursing task is being performed is other than the provision of health care services, the supervision provided by the delegating nurse may be on-site direct supervision, or indirect supervision provided by the delegating nurse who is always accessible through some form of telecommunication. Prior to the delegation of any nursing task in a setting, institution, or agency where the substantial purpose of the setting, institution, or agency is other than the provision of health care, a registered nurse shall conduct an assessment. The assessment and the following factors shall be used by the delegating nurse to determine the supervision required by the delegating nurse.
- (1) The number of individuals who require nursing care and the health status of the individuals;
- (2) The types and number of nursing tasks that will be delegated;
- (3) The continuity, dependability, and reliability of the unlicensed person who will be performing the delegated nursing task;
- (4) If the delegating nurse is assuming responsibility for more than one setting, the distance between settings, the accessibility of each setting, and any unusual problems that may be encountered in reaching each setting; and
- (5) The availability of emergency aid should the nurse be too far from the setting to arrive at the setting in a timely manner.

Summary:

- OBN authorizes nurses to delegate Tasks if the nurse decides it is safe and appropriate to do so according to the considerations listed in Ohio Administrative Code 4723-13
- DODD authorized nurses to delegate some routs of medication if the nurse decides it is safe and appropriate to do so according to the considerations listed in Ohio Administrative Code 4723-13

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