

Proposed Collaboration on Printed Distribution of Media

Summary of Request: Consider the proposed collaboration with the Texas Department of Aging and Disability Services (DADS) agency on the printed distribution of media in attachments one through five.

Background: The Texas Board of Nursing (BON) has a long history of providing educational opportunities for nurses related to regulation, jurisprudence and ethics. Teaching nurses about the laws that apply to their practice, in part, fulfills the Board's mission of patient safety. Two complex and challenging topics in nursing regulation have been the Delegation Rules (Rules 224 and 225) and the LVN and RN scope of practice. Utilizing different teaching methods has been shown to be effective when building new knowledge.

The Department of Aging and Disability Services (DADS), is a state agency that provides a continuum of services to older Texans and persons with disabilities in order that they may lead independent lives in the safest possible environments. DADS regulates many community-based and in-home service providers throughout Texas. Many nurses are employed in these settings and provide care to thousands of patients on a daily basis.

The Quality Assurance and Improvement Department within DADS has asked to partner with the BON in the printed distribution of five posters: Scope of Practice for Nurses; Rule 225 - Decision Tree; Rule 224 - Decision Tree; Five Rights of Delegation and Delegation Don'ts. The posters are based on information already developed by the BON. For example, the Scope of Practice poster summarizes the Board's Interpretive Guideline for LVN Scope of Practice under Rule 217.11. The other four posters were developed based on the Board's Rule 224, Delegation of Nursing Tasks by Registered Professional Nurses to Unlicensed Personnel for Clients with Acute Conditions or in Acute Care Environments and Rule 225, RN Delegation to Unlicensed Personnel and Tasks Not Requiring Delegation in Independent Living Environments for Clients with Stable and Predictable Conditions. The posters direct viewers to the Board's website for further information.

Pros: Nurses each have their own learning styles in which they best organize and retain information. The visual learning style is the most prevalent. Designing posters that incorporate information from the interpretive guideline and Board rules provide visual reminders to nurses and employers about how to keep patients safe.

Collaborative partnership with state agencies, such as DADS, facilitates the BON's efforts to communicate the licensing requirements related to scope of practice and delegation responsibilities throughout the state. Together, the BON and DADS can convey the importance of patient safety and the nurse's role in delivering safe and effective care to a larger audience.

The cost of developing, printing and distributing the posters will be incurred by DADS at their in-house print shop. The BON may choose to order and purchase the posters.

Cons: No cons are noted at this time.

Staff Recommendation: Move to accept and approve the proposed collaboration with DADS on the printed distribution of media to include the Texas Board of Nursing name and logo.

Scope of Practice for Nurses



Vocational Nurse

Registered Nurse

(1) Clarification of Practice Parameters

Directed practice under the supervision of a registered nurse, advanced practice registered nurse, physician assistant, physician, dentist, or podiatrist.

(Independent practice not permitted)

(2) Provider of Care:

- (a) Assist in the determination of predictable healthcare needs of clients within structured healthcare settings who are experiencing common, well defined health problems with predictable outcomes.
- (b) Utilize a systematic approach to provide individualized, goal-directed nursing care by:
 - (i) collecting data and performing focused nursing assessments;
 - (ii) participating in the planning of nursing care needs for clients, and in modifying the nursing care plan for assigned clients;
 - (iii) implementing appropriate aspects of care within the LVN's scope of practice, including compliance with other laws as are applicable to the LVNs practice setting;
 - (iv) implementing the teaching plan for clients with common health problems and well defined learning needs;
 - (v) providing direct basic care to assigned multiple clients in structured settings;
 - (vi) assist in the evaluation of the client's responses and outcomes to therapeutic interventions; and
 - (vii) utilize a problem-solving approach as the basis for decision making in Vocational Nurse practice

(3) Coordinator of Care:

Assign specific tasks, activities and functions and maintain appropriate supervision of licensed and unlicensed personnel in structured health settings for clients with predictable health care needs in accordance with designated job descriptions and/or job duties.

(4) Member of a Profession:

- (a) Assume accountability and responsibility for the quality of nursing care provided to clients.
- (b) Act as a client advocate to maintain a safe environment for clients.
- (c) Demonstrate behaviors that promote development of positive outcomes in relation to the practice of vocational nursing.

(1) Clarification of Practice Parameters

Practice set broadly by the NPA, Section 301.002, that precludes RNs from engaging in "acts of medical diagnosis or prescription of therapeutic or corrective measures"; RNs are permitted to engage in independent practice within the scope of their licensure.

(2) Provider of Care:

- (a) Determine the predictable or unpredictable health status and health needs of clients (individual and family) through interpretation of health data and preventive health practice in collaboration with clients and interdisciplinary health care team members.
- (b) Utilize a systematic approach to provide individualized, goal-directed nursing care by:
 - (i) performing comprehensive nursing assessments regarding the health status of the client(s);
 - (ii) formulating a nursing care plan based on determination of nursing diagnoses;
 - (iii) implementing nursing care within the RN's scope of practice, including compliance with other laws are applicable to the RN's practice setting;
 - (iv) developing and implementing teaching plans for clients concerning promotion, maintenance and restoration of health;
 - (v) providing for the care of multiple clients (individual and family) either through direct care or assignment and/or delegation of care to other members of the health care team;
 - (vi) evaluate client's (individual and family) responses and outcomes to therapeutic interventions; and
 - (vii) utilize a critical thinking approach to analyze clinical data and current literature as a basis for decision making in nursing practice.

(3) Coordinator of Care:

Make assignments to licensed staff (LVNs, RNs) and delegate to unlicensed staff in compliance with current BON rules in both structured and unstructured health settings for clients with predictable as well as unpredictable health needs.

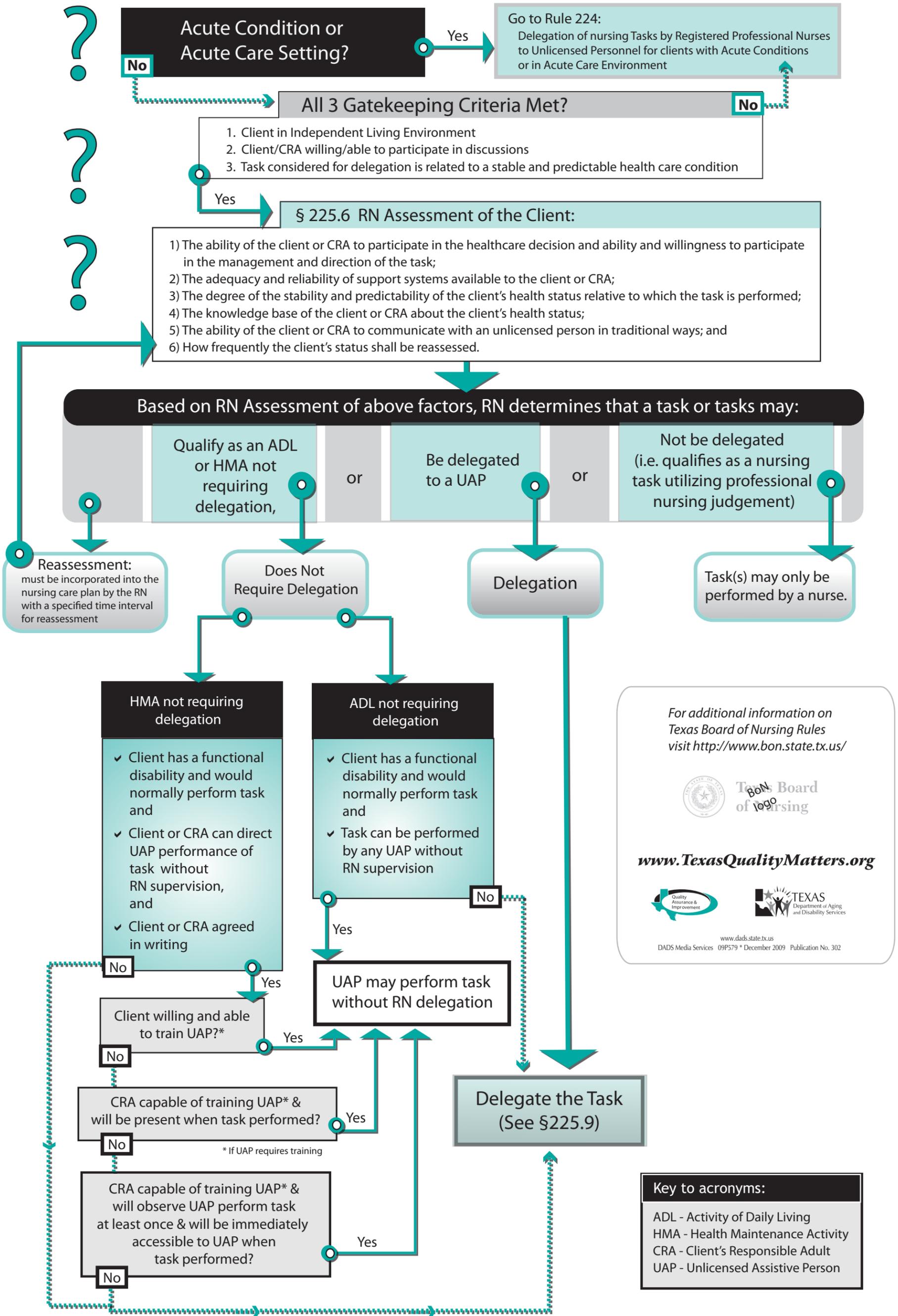
(4) Member of a Profession:

- (a) Assume accountability and responsibility for the quality of nursing care provided to clients.
- (b) Act as a client advocate to maintain a safe environment for clients.
- (c) Serve as a healthcare advocate in monitoring and promoting quality of health care and services for client; and
- (d) Participate in activities and act as a leader in promoting best practices within professional nursing.

The table above offers a brief synopsis of how the scope of practice for nurses educated and licensed as vocational nurses differs from nurses educated and licensed as registered nurses. These are minimum competencies, but also set limits on what the LVN or RN can do at his/her given level of licensure, regardless of experience. The interpretive guideline may be viewed in its entirety on the BON web page at www.bon.state.tx.us under the "Nursing Practice Information" section.

Rule 225

RN Delegation to Unlicensed Personnel and Tasks Not Requiring Delegation in Independent Living Environment for Clients with Stable and Predictable Conditions



Rule 224

Delegation of Nursing Tasks by Registered Professional Nurses to Unlicensed Personnel for Clients with Acute Conditions or in Acute Care Environments



Acute Condition or Acute Care Setting?

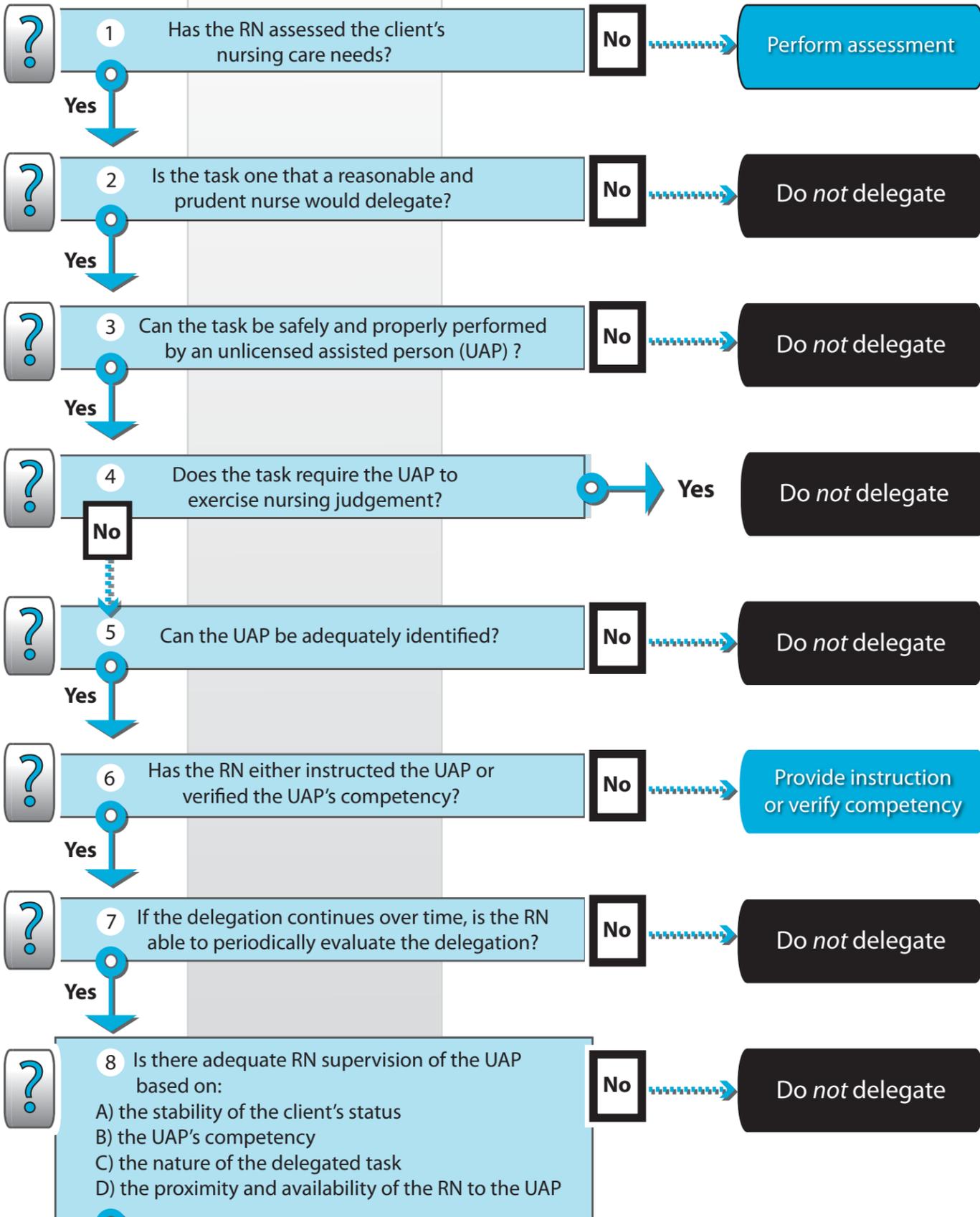
No

Go to Rule 225:

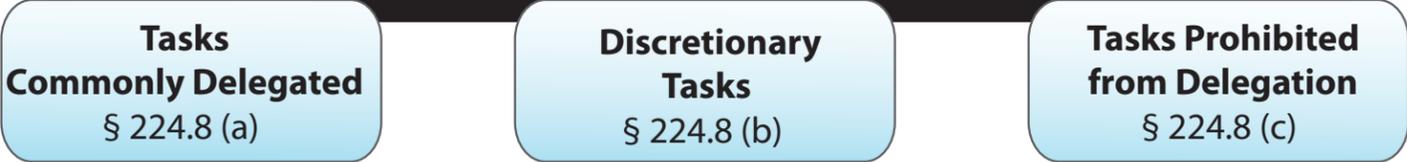
RN Delegation to Unlicensed Personnel (UAP) and Tasks not Requiring Delegation in Independent Living Environments for Clients with Stable and Predictable Conditions

Yes

§ 224.6 General Criteria for Delegation:



May consider task for delegation



For additional information on Texas Board of Nursing Rules visit <http://www.bon.state.tx.us/>



www.TexasQualityMatters.org



Five Rights of Delegation

The following principles delineate accountability for nurses at all levels from Nursing Service Administrators to staff nurses.

Nursing Service Administrator

Staff Nurse

Right Task

- Appropriate activities for consideration in delegation decisions are identified in UAP (Unlicensed Assistive Person) job description/role delineation.
- Organizational policies, procedures and standards describe expectations of and limits to activities

- Appropriate delegation activities are identified for specific client(s).
- Appropriate activities are identified for specific UAP.

Right Circumstances

- Assess the health status of the client community, analyze the data and identify collective nursing care needs, priorities, and necessary resources.
- Provide appropriate staffing and skill mix, identify clear lines of authority and reporting, and provide sufficient equipment and supplies to meet the collective nursing care needs.
- Provide appropriate preparation in management techniques to deliver and delegate care.

- Assess health status of individual client(s), analyze the data and identify client specific goals and nursing care needs.
- Match the complexity of the activity with the UAP competency and with the level of supervision available.
- Provide for appropriate monitoring and guiding for the combination of client, activity, and personnel.

Right Person

- Establish organizational standards consistent with applicable law and rules which identify educational and training requirements and competency measurements of nurses and UAP.
- Incorporate competency standards into institutional policies; assess nurse and UAP performance; perform evaluations based upon standards; and take steps to remedy failure to meet standards, including reporting nurses who fail to meet standards to board of nursing.

- Instruct and/or assess, verify and identify the UAP's competency on an individual and client specific basis.
- Implement own professional development activities based on assessed needs; assess UAP performance; perform evaluations of UAP based upon standards; and take steps to remedy failure to meet standards.

Right Direction/Communication

- Communicate acceptable activities, UAP competencies and qualifications, and the supervision plan through a description of a nursing service delivery model, standards of care, role descriptions and policies/procedures.

- Communicate delegation decision on a client specific and UAP-specific basis. The detail and method (oral and/or written) vary with the specific circumstances
- Situation specific communication includes:
 - ▲ specific data to be collected and method and timelines for reporting
 - ▲ specific activities to be performed and client specific instruction and limitation, and
 - ▲ the expected results or potential complications and timelines for communicating such information

Right Supervision/Evaluation

- Assure adequate human resources, including sufficient time, to provide for sufficient supervision to assure that nursing care is adequate and meets the needs of the client.
- Identify the licensed nurses responsible to provide supervision by position, title, role delineation.
- Evaluate outcomes of client community and use information to develop quality assurance and to contribute to risk management plans.

- Supervise performance of specific nursing activities or assign supervision to other licensed nurses
- Provide directions and clear expectations of how the activity is to be performed:
 - ▲ monitor performance,
 - ▲ obtain and provide feedback,
 - ▲ intervene if necessary, and
 - ▲ ensure proper documentation.
- Evaluate the entire delegation process:
 - ▲ evaluate the client, and
 - ▲ evaluate the performance of the activity.

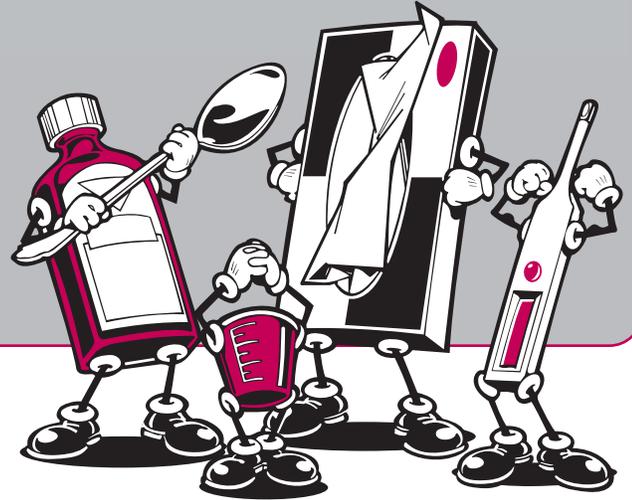
(Proof 11/18)

The Five Rights of Delegation, identified in *Delegation: Concepts and Decision-making Process* (National Council, 1995) from the National Council of State Boards of Nursing can be used as a mental checklist to assist nurses from multiple roles to clarify the critical elements of the decision-making process.

Source: <http://www.ncsbn.org>

Delegation

Don'ts



RN Tasks

Prohibited from Delegation

- ⊘ Assessment
- ⊘ Formulation of a nursing care plan
- ⊘ Implementation of parts of the nursing care plan
- ⊘ Responsibility and accountability of health education
- ⊘ Dose calculation
- ⊘ Injectable medications (except insulin)
- ⊘ Medications via a non-permanent tube
- ⊘ Verbal and telephone orders
- ⊘ Initial dose

It's the law -- 22 TAC § 225.12



www.TexasQualityMatters.org



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