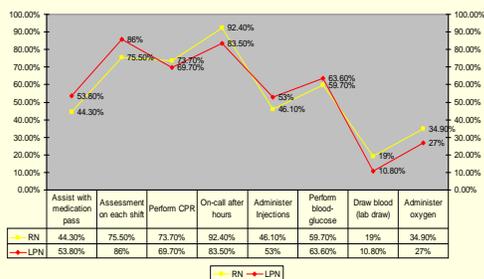


NURSE DELEGATION IN ASSISTED LIVING



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What Are Nurses Doing In AL?



Expectations of AL Nurses



- Lead
- Manage
- Train, educate, coach
- Utilize technology effectively
- Document
- Be a resident advocate
- Be a risk manager
- Be the resident "clinical expert"
- Delegate nursing tasks
- Know the Code

What Else Are AL Nurses Doing?

- Budgets
- Staffing
- Admissions/discharges
- Pre-admissions assessments/ISPs
- Marketing
- Management
- "First line" helper to dietary, human resources, activities, etc.
- Infection control



A Debatable Question.....

- Are nurses "needed" in assisting living facilities?



Nursing Delegation



What Is The Practice of “Professional Nursing”?

- The performance for compensation of any act in the observation or care of the ill, injured, or infirm, or for the maintenance of health or prevention of illness of others, that requires substantial nursing skill, knowledge, or training or application of nursing principles based on biological, physical and social sciences.

Wisconsin Nurse Practice Act
Wisconsin Statute Section 441.001(4).



What is Included In The Definition of Professional Nursing?

- Observing and recording symptoms and reactions;
- Performing procedures and techniques in the treatment of the sick under the general or special supervision or direction of a physician;
- The performance of general nursing procedures and techniques;
- The supervision of a patient and the supervision and direction of an LPN and less skilled assistants.

Wisconsin Statute Section 441.001(4)

Practical Nursing

- “The performance for compensation of any simple acts in the care of convalescent, subacutely or chronically ill, injured or infirm persons, or of any act or procedure in the care of the more acutely ill, injured or infirm under the specific direction of a nurse or physician...”

Wisconsin Statutes Section 441.001(3).

A Simple Act Means...

- "The act does not require any substantial nursing skill, knowledge, or training, or the application of nursing principles based on biological, physical, or social sciences, or the understanding of cause and effect in the act..."

or

- "The act is one that is of a nature of those approved by the board for the curriculum of schools for licensed practical nurses."

Wisconsin Statute Section 441.001(3)

Basic/Complex Nursing Care

- Basic: care performed following defined nursing procedure with minimal modification – responses of the patient are predictable.
- Complex: condition not predictable, medical/nursing orders likely to change frequently or have complex modifications, condition likely to require modifications to nursing care and responses to that care not predictable

Caregiver

- A "Caregiver" is:
 - A person with regulatory approval from an agency or is employed by an entity
 - Who has access and regular direct contact with the entity's clients
 - Who is under the entity's control
- NOT: solely maintenance, clerical, administrative or other support persons with no regular direct contact with clients, but DOES INCLUDE a person seeking a license, certification, registration from DHS.

Wis. Admin. Code HFS 13.03(3), Wis. Stat. sec. 50.065(1)(ag)

Standards of Practice for LPNs And RNs

DHS 83 Important Definitions to Know:

Intermediate Level Nursing Care: Care that is required by a person who has a long-term illness or disability who has reached a relatively stable condition. DHS 83.02(26).

Medication Administration: direct injection, ingestion or other application...to a resident by a practitioner, the practitioner's authorized agent, CBRF employees or the resident at the direction of the practitioner. DHS 83.02(29)



Important Definitions continued....

■ **Direct Supervision:** Immediate availability to continually coordinate, direct and inspect at first hand the practice of another.

■ **General Supervision:** To regularly coordinate, direct and inspect the practice of another.

Wis. Admin. Code N6.02(6) and (7)

Yet More Important Definitions

- **Supervision:** The CBRF shall provide supervision appropriate to the resident's needs. DHS 83.38(1)(b)
- **Nursing Care:** nursing procedures other than personal care that an RN or LPN performs directly on or to a resident. DHS 83.02(35)

■ **Significant Change In Condition:**

Deterioration which results in further impairment of a long term nature;
Deterioration in 2 or more ADLs;
Pronounced deterioration in communication or cognitive abilities;
Deterioration in behavior or mood to where relationships become problematic.

Significant improvement. DHS 83.02(52)

Del' • ə • gāt

To entrust another;

To appoint as one's representative;

To assign responsibility or authority.

Miriam Webster's online Dictionary

Supervision and Direction of Delegated Nursing Acts

■ In the supervision and direction of delegated nursing acts an RN shall:

- > Delegate tasks commensurate with educational preparation and demonstrated abilities of the person supervised;
- > Provide direction and assistance to those supervised;
- > Observe and monitor the activities of those supervised;
- > Evaluate the effectiveness of acts performed under supervision.

Wis. Admin. Code N6.03(3)

Delegation in AL - CBRF

■ When med administration is supervised by an RN, practitioner or pharmacist, the CBRF shall ensure: 1) The RN, practitioner or pharmacist coordinates, directs and inspects the administration of meds and the med administration system; 2) The RN, practitioner or pharmacist participates in the resident's assessment and ISP review regarding the resident's medical condition and med regime goals. DHS 83.37(2)(b).



New DHS 83 Provision

- Injectables, nebulizers, stomal and enteral meds, and meds, treatment, preparations delivered rectally or vaginally shall be administered by an RN or LPN within the scope of their license. Such med administration may be delegated to non-licensed employees pursuant to N 6.03(3).
DHS 83.37(2)(e)

Even More Nursing Provisions in DHS 83

- At least annually, the CBRF shall have a doctor, pharmacist or RN conduct an on-site review of the med administration and storage system. DHS 83.37(1)(e)2.
- With psychotropics, the CBRF shall ensure the resident is reassessed at least quarterly by a practitioner, pharmacist or RN for desired responses and side effects and document results. Must also ensure all caregivers understand the benefits and side effects of the psychotropic med. DHS 83.37(1)(h)
- CBRF shall report all med errors and any adverse drug reactions to a practitioner, pharmacist or supervising nurse immediately. Shall also report to the prescribing practitioner, supervising nurse or pharmacist when a resident refuses meds for 2 consecutive days. DHS 83.37(k)

The Last of the Pertinent DHS 83 Nursing Provisions

- Transfer of medications from the original container to another container shall be done by a practitioner, pharmacist or RN. Transfer of medication to another container may be delegated by the practitioner, pharmacist or RN. If this occurs and the med is given by non-licensed staff, the CBRF shall have a legible label on the new container with med name, resident name, dose and instruction for use. The original container must be maintained until the med is gone.
DHS 83.37(3)

Delegation In AL - RCAC

- Medication and management shall be performed by, or, as a delegated task, under the supervision of a nurse or pharmacist. HFS 89.23(4)



Delegation In AL - AFH

- HFS 88: Before a licensee or service provider dispenses or administers a prescription medication to a resident, the licensee shall obtain a written order from the physician who prescribes the medication specifying by name or position who is permitted to administer the medication, under what circumstances, and in what dosage. The written order shall be kept in the resident's file. Wis. Admin. Code HFS 88.07(3).



Managing Your Risk

- What does this mean for me, the nurse who works for an assisted living facility? In other words, "how do I cover my assets?"



Do you feel like this sometimes?



Delegation

1) Delegate tasks commensurate with the educational preparation and demonstrated abilities of the person supervised.



Delegation

2) Provide Direction And Assistance To Those Supervised

"Professionalize the non-professional"



Delegation

**3) Observe and Monitor The Activities
Of Those Supervised**

- Reward and recognize



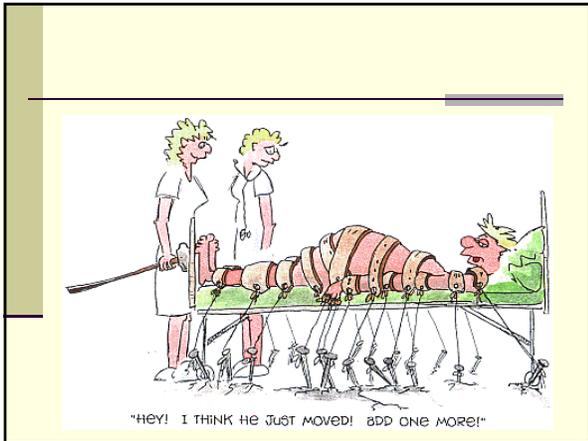
Delegation

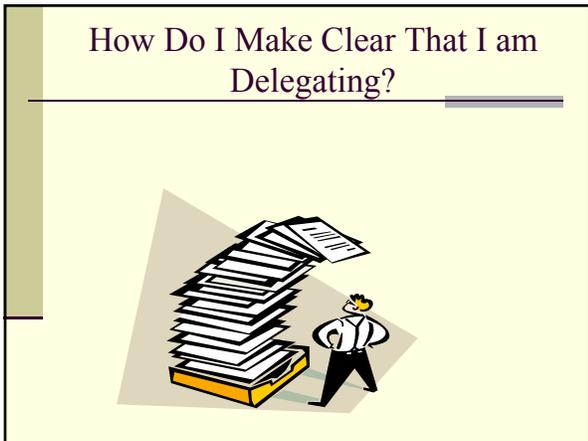
**4) Evaluate The Effectiveness Of Acts
Performed Under Supervision**

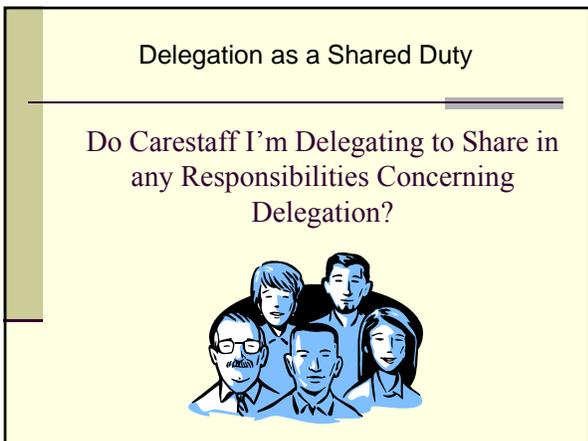


**Commonsense Delegation Strategies for
Nurses –A Summary**

- Is delegation of the task appropriate?
- RN should seek consultation from an experienced professional if concerns;
- Assess resident and situation to determine predictability of the situation;
- Assess UAP willingness/abilities: skill, absence of direct supervision, training and interaction needed
- Training
- Contacting the nurse
- Evaluate & document
- Rescind







The 5 Rights of Delegation

- **Right Task**
One that is delegable for a specific patient.
- **Right Circumstances**
Appropriate patient setting, available resources, and other relevant factors considered.
- **Right Person**
Right person is delegating the right task to the right person to be performed on the right person.

The 5 Rights of Delegation (cont'd)

- **Right Direction/Communication**
Clear, concise description of the task, including its objective, limits and expectations.
- **Right Supervision**
Appropriate monitoring, evaluation, intervention, as needed, and feedback

WNA Decision Tree for Delegation

1. Is Task within RN scope of practice?
2. Are there laws or policies prohibiting the delegation?
3. Can the task be performed without observation or critical decision making that requires the judgment of a nurse?
4. Can the task be performed safely according to clear unchanging directions?
5. Are the outcomes of the task reasonably predictable?

What Are Your Best Practices?



Standards of Practice for Nurses

- RNs
 - Assessment
 - Planning
 - Intervention
 - Evaluation
- LPNs
 - Accept proper assignments
 - provide basic nursing care
 - record care/report
 - consult with RN when delegated act improper
 - assist in data collection and ISP development
 - reinforce teaching



Violations of Standards

- Can equate to unprofessional conduct or misconduct in the eyes of the Board of Nursing and could result in a licensee being reprimanded, limited, suspended, revoked. Or, a renewal may be denied.
- Department of Regulation & Licensing
- What's the *good* news????

Commonsense Risk Management Strategies For AL Nurses

- Familiarity with the regulations applicable to your facility (i.e., DHS 83, 89, 88)
- Training
- Provision of services
- Care plans/ISPs
- Reporting Change in Condition
- Medication administration
- Personnel
- Familiarity with how assisted living facilities are inspected (surveyed)
- Know Your Residents
- Know Your Staff
- Know Your Families
- Document, document, document

Common sense Risk Management

- Staying current
 - > Seminars
 - > Professional journals
 - > WALA conference & seminars
 - > Professional organizations
 - > "American Assisted Living Nurses Association."
www.alnursing.org



Common sense Risk Management

- > Destruction of meds;
- > Freedom of choice of pharmacy provider;
- > Caregiver misconduct reporting requirements;
- > Physician orders and meds.
- > Reporting of Incidents and Notification
- > Prompt/Adequate Treatment
- > ISPs
- > Quality of facility documentation

Additional Resources for Assisted Living Nurses

- WALA
■ www.ewala.org
- ALFA
■ www.alfa.org
- DHS
■ www.dhfs.wisconsin.gov/bqaconsumer/assistedliving/aslivindex.htm
- Caregiver registry
■ www.dhfs.state.wi.us/caregiver/misconduct.htm
- DRL
■ www.drl.wi.gov/index.htm
- WNA
■ www.wisconsinnurses.org

Case Studies



THANK YOU!

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