



# National Association of State School Nurse Consultants

## Delegation of School Health Services

### Position

The National Association of State School Nurse Consultants (NASSNC) recognizes that:

- school nursing services are essential for the health and well being of the student population in order for them to benefit from educational programs and to maximize energy for learning; and
- both the volume and range of nursing services that must be provided at schools have increased dramatically over the past decade.

NASSNC believes student health services should be directly provided by **qualified school nurses** who are licensed registered professional nurses (RNs), in order to ensure quality and the safe provision of services. However, due to the volume and range of services needed certain aspects of student care may need to be delegated to **licensed practical/vocational nurses (LPNs/LVNs)** or **unlicensed assistive personnel (UAPs)**.

NASSNC believes the **delegation** can only be done by the RN to qualified LPNs/LVNs or UAPs in accordance with the state Nurse Practice Act and other applicable state laws. State Nurse Practice Acts provide the legal parameters for nurses when delegating tasks to unlicensed individuals. It charges the delegating RN with the responsibilities of determining which student care activities may be delegated, under what circumstances it is appropriate to delegate, and by whom the delegated portions of care can safely be provided. The delegating RN is responsible for: assessing students' needs; establishing individual student health care plans; and training, determining the competency of, supervising, and evaluating LPNs/LVNs and UAPs to whom care activities have been delegated.

### Rationale

More students with special health care needs are now attending school. Therefore, the level of health services that schools must provide has increased. As a result, local school boards must provide additional staff and resources to sufficiently and safely care for students with chronic or urgent health care needs. Ancillary staff may be useful in some settings in meeting these growing demands. However, the safety and welfare of students must be the priority. Therefore a higher level of care delegated by a RN may be required.

When all or a certain part of a student's nursing care is delegated by a RN, the performance of the activity or procedure is transferred to another person. The RN retains the accountability for ensuring that the student will receive safe and competent care. This is similar to the assignment of

certain tasks to a classroom assistant while the teacher retains responsibility for the learning outcome.

School administrators are legally responsible for the safety of all students, including the provision of required health services by qualified staff. They have certain responsibilities regarding the educational placement of students. However, school administrators cannot legally decide the level of nursing care required by an individual student with special health care needs. The administrator is licensed to make educational decisions; the RN is licensed to provide nursing services and therefore maintains the authority to make nursing decisions.

The RN, based on his or her knowledge, and in accordance with the state's Nurse Practice Act and related state and employer/agency rules and regulations, is responsible for determining whether care must be provided by a RN or may be delegated to a LPN/LVN or a trained and supervised UAP. The RN must determine whether aspects of a student's health care may be delegated to an unlicensed person. The RN must assess and document that the student's health care needs are *chronic, stable, uncomplicated, routine, and predictable* and that the unlicensed person is able to perform the delegated nursing in a safe and competent manner.

Any nursing function that requires nursing knowledge, judgment, and skill may not be delegated. Whether or not a task can be delegated depends on the complexity of the task and condition of the student. Continuation of delegation is the decision of the delegating RN. The delegating RN may decide at any time that the student's medical safety requires a licensed professional to perform the task or that a person previously delegated the task is no longer competent to do so. It is important to note that a specific task is only delegated for a *specific student*. Thus, a procedure that is delegable for one student *may not* be delegable for any other student.

By professional and legal mandate, RNs are ultimately responsible for the quality of nursing they provide and are personally and professionally liable for all errors in nursing judgment. If the RN's actions violate the requirements of the Nurse Practice Act, the state board of nursing can take disciplinary action against the RN, including revocation of his/her license to practice nursing. In addition, school staff can be held liable for their actions if they practice nursing or medicine without a license authorizing such practice. School staff that are assigned to perform a delegated nursing task under the supervision of the school nurse are held accountable for that task to the extent that they have been trained.

## Definitions

**Competent:** “[H]aving requisite or adequate ability or qualities; legally qualified or adequate” (Merriam-Webster, 2010).

**Registered professional nurses competence** is the ability of the nurse to act with and integrate the knowledge, skills, values, attitudes, abilities and professional judgment that underpin effective and quality nursing and is required to practice safely and ethically in a designated role and setting (NCSBN, 2005).

**Unlicensed nursing assistive personnel competence** “is built upon formal training and assessment, orientation to specific settings and groups of patients, interpersonal and communication skills, and the experience of the nurse aide in assisting the nurse to provide safe nursing care” (NCSBN, 2005, p. 39).

**Delegation:** The “process for a nurse to direct another person to perform nursing tasks and activities . . . the RN can direct another individual to do something that person would not normally be allowed to do . . . the nurse retains accountability for the delegation” (NCSBN, 2006).

**Licensed Practical Nurse (LPN) or Licensed Vocational Nurse (LVN):** A graduate of generally a one-year technical nursing education preparation program and licensed by the state.

**Unlicensed Assistive Personnel (UAP):** Personnel that do not have a license to provide healthcare and to whom nursing tasks are delegated by a RN. Typically, these individuals work in settings without structured nursing organizations, such as a school environment. (National Council of State Boards of Nursing, 2005)

**School Nursing:** “[A] specialized practice of professional nursing that advances the well-being, academic success and life-long achievement and health of students. To that end, school nurses facilitate positive student responses to normal development; promote health and safety, including a healthy environment; intervene with actual and potential health problems; provide case management services; and actively collaborate with others to build student and family capacity for adaptation, self-management, self advocacy, and learning (NASN, 2010).

**Qualified School Nurse:** A RN with minimum educational preparation of a Bachelor Science in Nursing (BSN), licensed by the state. National certification is preferred (NASN, 2002).

**Supervision:** The “provision of guidance and oversight of a delegated nursing task . . . with availability of the supervising nurse through various means of written and verbal communication” (NCSBN, 2006).

## Summary

The NASSNC believes that schools have an obligation to ensure the quality and safe provision of school nursing services as necessary for the health, safety and well being of students. Therefore, school nursing services should be provided by qualified school nurses and with utmost regard for protecting the student. School nursing services must either be directly provided by a qualified school nurse or delegated at the discretion of the qualified school nurse to LPNs/LVNs or trained UAPs. In either case, the RN retains accountability for competency of staff and the outcome. The qualified school nurse must continue to practice safely and competently through lifelong learning.

## References

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Approved: July 1995 // Revised: September 1998, April 2000 and July 2010.

*Please note: The objective of this paper is to provide a broad position of national best practice guidance which can then be implemented within the confines of each state nurse practice act and other laws affecting the practice of nursing.*