

CF OPERATING PROCEDURE
NO. 155-5

STATE OF FLORIDA
DEPARTMENT OF
CHILDREN AND FAMILIES
TALLAHASSEE, November 4, 2016

Mental Health/Substance Abuse

SUPERVISION OF UNLICENSED ASSISTIVE PERSONNEL PERFORMING NURSING DELEGATED
TASKS AND ACTIVITIES IN MENTAL HEALTH TREATMENT FACILITIES

1. Purpose. This operating procedure defines the processes for nurses to delegate and supervise tasks and activities of unlicensed assistive personnel (UAP).
2. Policy. Unlicensed assistive personnel may be delegated by nursing staff to perform tasks and activities they have demonstrated competency in performing. The designated tasks and activities will be completed under the supervision of a nurse. The established competency of a UAP will be documented by a registered nurse prior to the task or activity being delegated.
3. Scope. This operating procedure applies to healthcare providers treating individuals residing in state mental health treatment facilities, whether operated by the Department of Children and Families or by contract with private entities.
4. Reference. Chapter 64B9-14, Florida Administrative Code, Delegation to Unlicensed Assistive Personnel.
5. Definitions. For the purposes of this operating procedure, the following definitions shall apply:
 - a. Assignments. Normal daily functions of UAPs based on facility job duties which do not involve delegation of nursing functions or nursing judgment.
 - b. Competency. The demonstrated proficiency in the completion of specified tasks or activities with reasonable skill and safety that adheres to the prevailing standards of nursing practice.
 - c. Delegation. The assignment of a selected task or activity to a trained and competent UAP by a nurse qualified by licensure and experience to perform the task or activity.
 - d. Education. A certification of competency that the UAP has achieved in a specific activity.
 - e. Nursing Judgment. The intellectual process that a nurse exercises in forming an opinion and reaching a conclusion by analyzing data.
 - f. Supervision. The provision of guidance by a nurse and periodic inspection by the nurse for the accomplishment of a nursing delegated task or activity, provided the nurse is qualified and legally entitled to perform such task or activity. Registered nurse supervision is mandatory for any task that the licensed practical nurse may need assistance in performing, to ensure the licensed practical nurse has the required knowledge, skills, and abilities.
 - (1) Direct Supervision. The nurse supervising the task is on the premises but not necessarily physically present where the task or activity is being performed.

This operating procedure supersedes CFOP 155-5 dated March 30, 2014.

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(2) Immediate Supervision. The nurse supervising the task is on the premises and is physically present where the task or activity is being performed.

g. Testing. Verifying a trainee's ability to perform a specific duty.

h. Training. The learning of tasks by the UAPs through on the job experience or instruction by a nurse who has the education or experience to perform the task or activity to be delegated to the UAPs.

i. Unlicensed Assistive Personnel (UAP). Staff who have been assigned to function in an assistive role to registered nurses or licensed practical nurses in the provision of resident care services but do not hold licensure from the Division of Health Care Quality Assurance of the Department of Health. UAPs provide resident care services through direct assignments and delegated tasks or activities under the supervision of a nurse.

j. Validation. The competency of the UAP to complete a designated task has been confirmed by the nurse responsible for delegating the assignment through review of the education and training of the UAP and direct observation of the completion of the assigned task by the UAP.

6. Supervision of Unlicensed Assistive Personnel. UAPs shall perform all nursing delegated assignments under the supervision of a registered nurse or licensed practical nurse. Registered nurse supervision is mandatory for any tasks which a licensed practical nurse may need assistance in performing, to ensure the licensed practical nurse has the required knowledge, skills, and abilities.

a. The nurse shall verify the training and validate the competency of the UAP prior to assigning tasks or activities.

b. The nurse shall communicate the assignment to the UAP and verify in writing the UAP's understanding of the assignment.

c. The nurse shall inform the UAP's immediate supervisor of all nurse delegated assignments given to the UAP.

d. The nurse shall document verification of monitoring and supervision following the completion of the assignment.

e. The supervising nurse shall participate in performance evaluations of the UAP relative to nursing assigned duties as specified by facility procedure.

7. Procedures.

a. Delegations of Tasks and Activities. Tasks and activities that can be delegated by a nurse and performed by a UAP that require nurse supervision may include:

(1) Application of elastic wraps, support hose, posterior splints, and prosthetic or supporting appliances;

(2) Performance and documentation of blood pressure, temperature, pulse, respiratory rate, and pulse oximetry;

(3) Performance and documentation of height and weight checks;

(4) Specimen collection – stool and urine;

- (5) Recording resident care activities in progress notes;
- (6) Performance of periodic repositioning of individuals to provide comfort, maintain appropriate body alignment and skin integrity, and prevent skin breakdown;
- (7) Observing and recording intake and output of fluids; and
- (8) Serving, assisting with feeding, and recording consumption of diets including special diets.

b. Delegation of Tasks Prohibited. The nurse will not delegate any activity that requires the use of the special knowledge, nursing judgment, or skills of a registered or licensed practical nurse; activities that are not within the scope of practice of the supervising nurse; or activities for which the UAP has not demonstrated competence. Nursing duties that will not be delegated include, but are not limited to: nursing assessment, nursing diagnosis, nursing care planning, establishment of nursing goals, or evaluation of progress relative to the nursing plan of care.

c. Factors to Consider When Delegating Tasks.

- (1) Selection of tasks to be assigned.
 - (a) Potential for resident harm.
 - (b) The complexity of the task.
 - (c) Predictability or unpredictability of the outcome of the task and the reasonable potential for a rapid change in the medical status of the resident.
 - (d) Level of interaction required or communication available with the resident.
 - (e) Resources (both equipment and personnel) available in the resident setting.
- (2) Selection of specific delegate.
 - (a) Normal assignments of the UAP.
 - (b) Validation or verification of the documented and demonstrated competency of the delegate.
- (3) Condition of the resident.

d. Documentation of Training and Competence.

(1) Training. Each UAP expected to perform assigned tasks or activities under this operating procedure shall be trained and tested in the specific functions that will be delegated. A record of the training shall be established and signed by the registered nurse responsible for the training.

(2) Records. A training file shall be established for each UAP performing assignments under this operating procedure.

(3) Competency. Validation of competency will be documented annually by the supervising nurse and certification shall be maintained in the training file of the UAP.

(4) Recertification. On an annual basis, the nurse will observe completion of the task and document recertification when competency is demonstrated.

e. Communication, Consultation and Evaluation.

(1) The delegation of a task or activity by a nurse shall include written communication to the UAP of the task or activity to be completed, the expected or desired outcome, the limits of the UAP's authority, the time frame for the completion of the task, the nature of the supervision required, and verification of the UAP's understanding of the assignment, monitoring, and supervision.

(2) The supervising nurse shall conduct periodic inspections of the accomplishment of a newly delegated task or activity to a UAP.

(3) Provision of nursing care remains the responsibility of the nurse who delegates the task or assumes the responsibility for supervision.

(4) The registered nurse and the UAP's supervisor shall maintain open communication and consultation regarding the performance of nursing delegated assignments by UAPs. The registered nurse will have input into UAPs annual evaluation regarding the completion of nursing delegated tasks and activities.

f. Applicable Standards, Policies, and Procedures.

(1) Each facility shall develop policies and procedures for implementation of this operating procedure as applicable to the facility's organizational, staffing, and administrative requirements.

(2) The facility director of nursing shall be responsible for the establishment and periodic review, at least quarterly, of performance protocols of the tasks and activities that can be assigned to UAPs. Protocols will be maintained current with applicable standards and required levels of supervision.

8. Delegation of Authority.

a. Senior Registered Nurse Supervisors shall maintain a current list of each UAP on his/her units whose training and competence has been validated. This list shall be reviewed and updated at least quarterly whether any changes occur. The original and revised list shall be kept by the Senior Registered Nurse Supervisor in a designated area on the unit.

b. A written delegation of authority shall be issued by the Director of Nursing for all nursing positions assigned to supervise UAPs performing nursing delegated tasks and activities. This delegation shall require the nurse to supervise UAPs only when they perform nursing delegated tasks and activities unless the nurse has otherwise been given full supervisory authority. The delegation shall, at a minimum, cover those duties described in this operating procedure.

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

WENDY SCOTT
Director, Policy And Programs

SUMMARY OF REVISED, DELETED, OR ADDED MATERIAL

In paragraph 5f(2), language involving medication administration by UAPs was deleted because no facilities allow UAPs to administer medications.