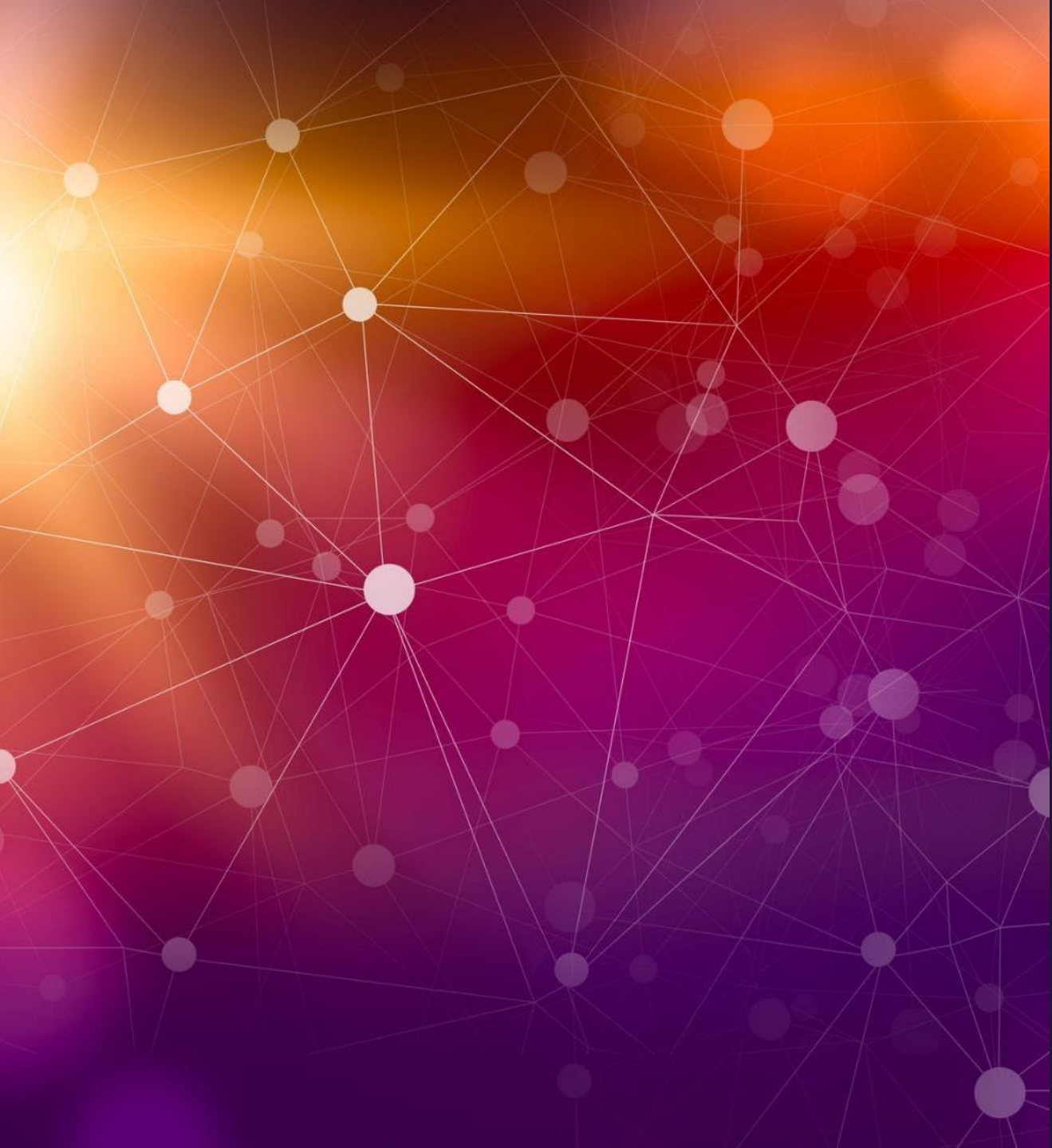




NURSING DELEGATION

by

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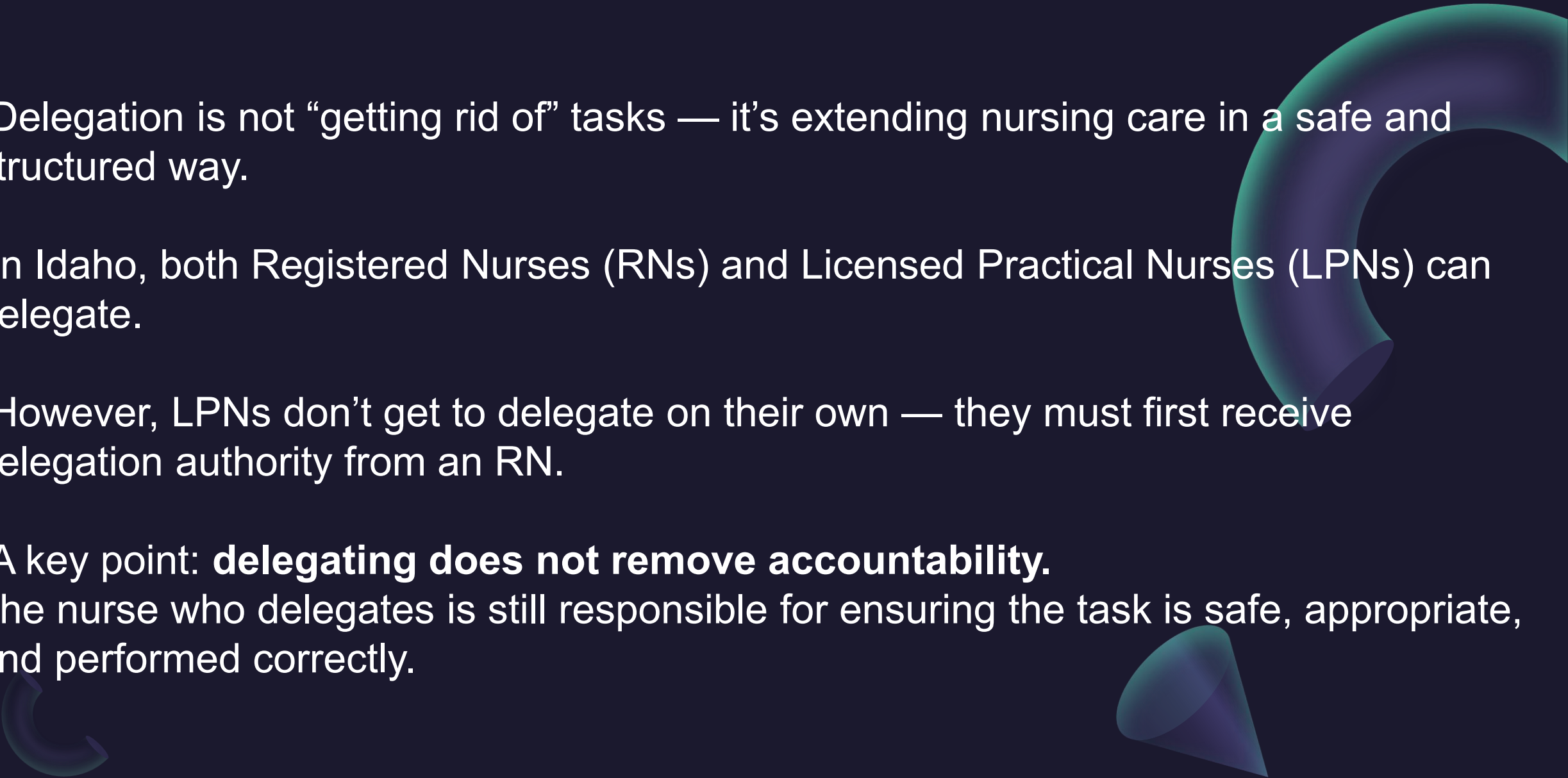
&

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What even is it?

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- Delegation is not “getting rid of” tasks — it’s extending nursing care in a safe and structured way.
 - In Idaho, both Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) can delegate.
 - However, LPNs don’t get to delegate on their own — they must first receive delegation authority from an RN.
 - A key point: **delegating does not remove accountability.**
The nurse who delegates is still responsible for ensuring the task is safe, appropriate, and performed correctly.

Both RNs & LPNs can delegate

LPNs must first be delegated by an RN
Accountability stays with the nurse



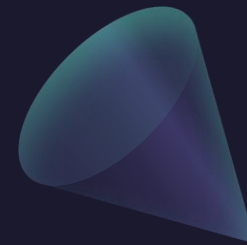
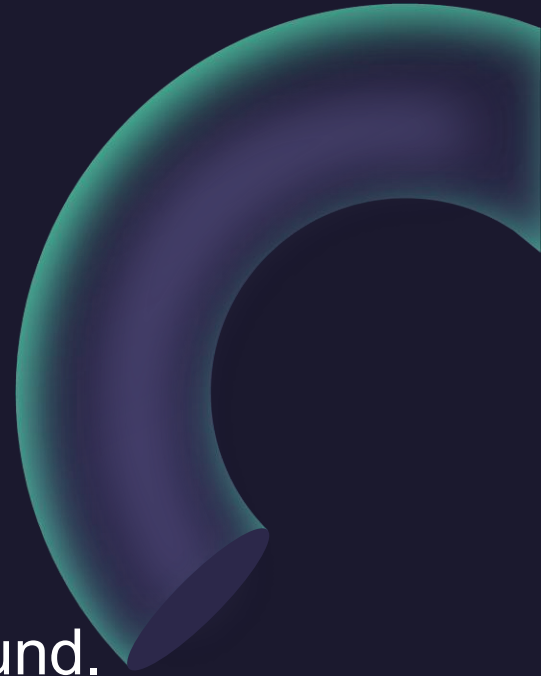
Idaho's Nurse Practice Act (IDAPA 23.01.01.401) is our legal foundation.

- Nurses are expected to use professional judgment in decision-making, especially when delegating.
- Delegation, when done well, keeps residents safe and keeps facilities compliant.

When done poorly, it can jeopardize patient safety, survey results, and your license.

Preparing to Delegate

- Before delegating, preparation is critical.
- Review your state regulations, your facility's policies, and your employer's expectations.
This makes sure your delegation is legally and organizationally sound.
- Organize materials so you can easily retrieve them if a surveyor or auditor asks, "Show me where delegation is documented."
- Think of this as creating your "delegation toolbox"
— having everything in place before you hand off a task.



The background of the slide is a dark blue gradient with a faint, abstract network pattern. This pattern consists of numerous small, light-blue circular nodes connected by thin, white lines, creating a complex web-like structure that spans the entire frame. The nodes and lines are more prominent in some areas, particularly towards the right side, while fading into the background on the left.

The Delegation Process

The lovely process that is Delegation

- **Assess the resident** — is their condition stable enough for a UAP to handle delegated care?

- **Validate UAP skills** — never assume. Always test competency.

- **Assumption of Delegation** — when nurses change, the new nurse must assume delegation in writing.

- **Instructions** — every delegated task should come with written and verbal instructions. Clarity protects you and supports staff.

- **Supervision/Evaluation** — initial and ongoing as needed.

- **Rescinding Delegation** — if a resident's condition changes or a UAP can no longer safely perform the task, delegation must be rescinded immediately.

Validating Competence

- Delegation isn't valid until the UAP shows they can do the task correctly. Watching them perform it in real time is required.

- The **Skills Checklist** is the official record of competency. It belongs in the employee file.

Staff must demonstrate skills with 100% accuracy — because when it comes to medications and resident safety, “almost correct” isn't enough.

- Competence isn't a one-time event. Ongoing supervision ensures skills stay sharp and safe.



UAP Skills & Knowledge



- What do UAPs need to know before you delegate?
- Basic clinical skills: vitals, blood glucose checks.
- Medication safety: forms (pills, liquids, drops, creams, inhalers), routes, and especially the **6 rights** — right patient, right drug, right dose, right route, right time, right documentation.
- They must know how to recognize a medication error, a refusal, or an allergic reaction.
- Resident rights: refusal, dignity, and privacy always come first.
- Emergency skills: use of oxygen, EpiPen, CPAP, mechanical lifts.
- Finally, **documentation must be correct.**

Key Takeaways

- Unlike medication administration or direct care, **delegation is not mandatory**. You, as the nurse, are under no obligation to delegate if you believe it would jeopardize safety.
- Delegation is a tool — use it when it helps provide safe, efficient care. But if you don't have confidence in the UAP's ability, you are well within your right to say “No.”
- In Idaho, RNs are the foundation for delegation. LPNs may also delegate, but only when an RN has first authorized them to do so.
- Think of delegation as **situational** — the right task, the right person, the right time.
- And if you do delegate, follow the golden rule: **Validate, Instruct, Supervise, Document**. Ultimately, you are protecting not just your license, but also the residents you care for and the facility you represent.

RESOURCES

[Nurse Delegation Tool Kit - Idaho Health Care Association](#)

www.ihca.org/nurse-delegation-toolkit/

[Residential Assisted Living Facilities \(RALF\) | Idaho Department of Health and Welfare](#)

<https://healthandwelfare.idaho.gov/services-programs/assisted-care-and-facilities/residential-assisted-living-facilities-ralf>

[Board of Nursing | Division of Occupational and Professional Licenses](#)

<https://dopl.idaho.gov/bon/>

[Professional Registered Nurse Consulting | Beesleyconsulting.com](#)

<https://www.beesleyconsulting.com>

Questions?

Thank you!!

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