The Five Rights of Delegation

All decisions related to delegation of nursing activities must be based upon the fundamental principle of public protection. Licensed nurses have ultimate accountability for the management and provision of nursing care, including all delegation decisions. However, seldom is a single nurse accountable for all aspects of the delegation decision-making process, its implementation, supervision, and evaluation.

The Five Rights of Delegation, identified in *Delegation: Concepts and Decision-making Process* (National Council, 1995), can be used as a mental checklist to assist nurses from multiple roles to clarify the critical elements of the decision-making process. Nursing service administrators (all levels of executive/management nurses) and staff nurses each have accountability in assuring that the delegation process is implemented safely and effectively to produce positive health outcomes.

Nursing service administrators (NSA) and staff nurses must work together collaboratively and cooperatively to protect the public and maintain the integrity of the nursing care delivery system. The following principles delineate accountability for nurses at all levels from NSA to staff nurses.

Right Task

Nursing Service Administrator (NSA)	Staff Nurse
■ Appropriate activities for consideration in delegation decisions are identified in UAP job descriptions/role delineation.	■ Appropriate delegation activities are identified for specific client(s).
■ Organizational policies, procedures and standards describe expectations of and limits to activities.	■ Appropriate activities are identified for specific UAP.

Generally, appropriate activities for consideration in delegation decision-making include those:

1. which frequently reoccur in the daily care of a client or group of clients;
2. which do not require the UAP to exercise nursing judgment;
3. which do not require complex and/or multi-dimensional application of the nursing process;
4. for which the results are predictable and the potential risk is minimal; and
5. which utilize a standard and unchanging procedure.

Right Circumstances

Nursing Service Administrator (NSA)	Staff Nurse
■ Assess the health status of the client community, analyze the data and identify collective nursing care needs, priorities, and necessary resources.	■ Assess health status of individual client(s), analyze the data and identify client specific goals and nursing care needs.
■ 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.	■ Match the complexity of the activity with the UAP competency and with the level of supervision available.
■ Provide appropriate preparation in management techniques to deliver and delegate care.	■ Provide for appropriate monitoring and guiding for the combination of client, activity and personnel.

Right Person

Nursing Service Administrator	Staff Nurse
■ Establish organizational standards consistent with applicable law and rules which identify educational and training requirements and competency measurements of nurses and UAP.	■ Instruct and/or assess, verify and identify the UAP's competency on an individual and client specific basis.
■ Incorporate competence 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.	■ 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

Nursing Service Administrator	Staff Nurse
■ 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 any client specific instruction and limitation, and ♦ the expected results or potential complications and time lines for communicating such information.

Right Supervision/Evaluation

Supervision may be provided by the delegating licensed nurse or by other licensed nurses designated by nursing service administrators or the delegating nurse. The supervising nurse must know the expected method of supervision (direct or indirect), the competencies and qualifications of UAP, the nature of the activities which have been delegated, and the stability/predictability of client condition.

Nursing Service Administrator	Staff Nurse
■ 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.	■ Supervise performance of specific nursing activities or assign supervision to other licensed nurses.
■ Identify the licensed nurses responsible to provide supervision by position, title, role delineation.	■ 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 outcomes of client community and use information to develop quality assurance and to contribute to risk management plans.	■ Evaluate the entire delegation process: ♦ evaluate the client, and ♦ evaluate the performance of the activity.