5.1 **Detail how the state Nurse Practice Act, other regulatory stipulations (e.g., Staffing ratios mandated in California), and professional standards influence the care delivery model(s).**

At Massachusetts General Hospital, standards of practice are an important component of the Professional Practice Model. They exist to define the scope of practice for the professional nurse and to ensure patients receive the highest quality of care by providing scientific rationales to support practice. Standards serve an essential role in guiding practice for the novice nurse, while also guiding behavior of more experienced staff nurses. Attachment 5.1.a illustrates the Standards of Practice component of the Professional Practice Model at MGH. Simply stated this element describes how standards of practice ensure the highest quality of care to patients and families. Along with multiple professional practice standards, the two major documents that influence practice are the Massachusetts Nurse Practice Act and Massachusetts Board of Registration in Nursing rules and regulations.

The Massachusetts Nurse Practice Act (OOD 4) defines the scope of practice influencing the nursing care delivery model at Massachusetts General Hospital (MGH) by delineating the appropriate role responsibilities and the delegation and supervision activities for nurses and nursing support staff. The Massachusetts Board of Registration in Nursing (MA BORN) rules and regulations (attachment 5.1.b) defines the role of the Registered Nurse and outlines the responsibilities and functions regarding delegation and supervision of selected nursing activities by licensed nurses to unlicensed personnel.

The MA BORN defines a Registered Nurse as an individual who is licensed to practice professional nursing and holds ultimate responsibility for direct and indirect nursing care. The responsibilities and functions of the Registered Nurse are further delineated that within the parameters of education and experience to assume full and ultimate responsibility for the quality of nursing care provided to individuals and groups. The regulations specifically address delegation. They state that a Registered Nurse may delegate nursing activities to other Registered Nurses or health care personnel provided that the Registered Nurse bear full and ultimate responsibility for making an appropriate assignment, for properly and adequately teaching, directing and supervising the delegate and for the outcomes of that delegation.

These regulations specify criteria for delegation and supervision and define activities, which may and may not be delegated. The requirements for delegation include:
- The nurse delegating the activity is directly responsible for the nursing care given to the patient, and the final decision as to what nursing activity can be safely delegated in any specified situation is within the scope of that nurse’s judgment.
- The nurse must make an assessment of the patient’s nursing care needs prior to delegating the nursing activity.
- The nursing activity must be one that a reasonable and prudent nurse would determine to be delegable, would not require the unlicensed person to exercise nursing judgment and that can be properly and safely performed by the unlicensed person.
- The unlicensed person must have documented competencies necessary for the performance of the task on file within the employing agency.
- The nurse must adequately supervise the performance of the delegated nursing activity.

The regulations also address the requirements of supervision. They state the degree of supervision is determined by the nurse, taking into account the stability and condition of the patient, the training and capability of the unlicensed person, the nature of the task being delegated and the proximity and availability of the nurse when the activity is performed. And, they continue by defining nursing activities that cannot be delegated.

Using the tenets of the Nurse Practice Act and the MA BORN regulations, the Policy Statement of Accountability (attachment 5.1.c) defines the accountability of the MGH Department of Nursing and of the Registered Nurse for the delivery of nursing care to each patient. This policy addresses the accountability and scope of practice, as well as, delegation and supervisory responsibilities.

In addition to the Massachusetts Nurse Practice Act and the MA BORN, numerous other professional standards are incorporated into practice and are used to development of clinical policies and procedures for the Department of Nursing. Forces 5.2, 5.3 and 5.4 clearly illustrate how these standards influence care delivery.
Standards of practice: ensuring our patients receive the highest quality of care

—by Debra Burke, RN, associate chief nurse

Standards of practice exist to ensure that patients receive the highest quality of care. They provide a detailed description of a particular practice or procedure, along with the scientific rationale supporting the practice.

Standards of practice provide a uniform structure by which to practice by spelling out precisely what to do in situations where a provider may have no prior experience. By breaking actions down into basic elements and providing appropriate rules, standards of practice also act as a teaching tool. As a teaching tool, standards of practice establish a level of expectation about care delivery within an organization.

Universal adherence to standards of practice provides an added layer of safety by standing clinical practice in situations where actual experts may not be present. With approved standards of practice, clinicians can step into situations and perform with confidence even when more experienced providers are not there for guidance.

It is important to understand that while nursing the essential role of guiding novice practice, standards of practice also guide the behavior of more experienced providers. Standards of practice are geared toward “typical” situations, and aren’t intended to supersede the specific, individual needs of any patient. Strictly adhering to standards without trusting clinical judgment doesn’t always constitute best care.

Standards of practice are geared toward “typical” situations, and aren’t intended to supersede the specific, individual needs of any patient. Healthcare professionals face never-ending situations every day. Understanding the unique clinical needs of each patient and the situation, and appreciating that latitude in applying standards is imperative to providing effective, high-quality care. Strictly adhering to standards without trusting clinical judgment doesn’t always constitute best care. It is up to the individual to recognize and interpret situations, to know what standards of practice apply in certain situations and how to apply them. The ability to integrate clinical knowledge and standards of practice is the hallmark of an experienced professional.

With advances in research and technology, it's important to re-examine standards of practice and adapt them to reflect the most up-to-date clinical knowledge of our learned and experienced professionals.
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244 CMR 3.00: REGISTERED NURSE AND LICENSED PRACTICAL NURSE

Section

3.01: Definition - Registered Nurse
3.02: Responsibilities and Function - Registered Nurse
3.03: Definition - Practical Nurse
3.04: Responsibilities and Functions - Practical Nurse
3.05: Delegation and Supervision of Selected Nursing Activities by Licensed Nurses to Unlicensed Personnel

3.01: Definition - Registered Nurse

Registered Nurse is the designation given to an individual who is licensed to practice professional nursing, holds ultimate responsibility for direct and indirect nursing care, is a graduate of an approved school for professional nursing, and is currently licensed as a Registered Nurse pursuant to M.G.L. c. 112. Included in such responsibility is providing nursing care, health maintenance, teaching*, counseling, planning and restoration for optimal functioning and comfort, of those they serve.

3.02: Responsibilities and Functions - Registered Nurse

A Registered Nurse shall bear full and ultimate responsibility for the quality of nursing care she/he provides to individuals and groups. Included in such responsibility is health maintenance, teaching, counseling, collaborative planning and restoration of optimal functioning and comfort or for the dignified death of those they serve. A Registered Nurse, within the parameters of his/her generic and continuing education and experience, may delegate nursing activities to other Registered Nurses and/or health care personnel, provided, that the delegating Registered Nurse shall bear full and ultimate responsibility for:

(1) making an appropriate assignment;

(2) properly and adequately teaching, directing and supervising the delegatee; and

(3) the outcomes of that delegation. A Registered Nurse shall act, within his/her generic and continuing education and experience to:

(a) systematically assess health status of individuals and groups and record the related health data;

(b) analyze and interpret said recorded data; and make informed judgments therefrom as to the specific problems and elements of nursing care mandated by a particular situation;

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(c) plan and implement nursing intervention which includes all appropriate elements of nursing care, prescribed medical or other therapeutic regimens mandated by the particular situation, scientific principles, recent advancements and current knowledge in the field;
(d) provide and coordinate health teaching required by individuals, families and groups so as to maintain the optimal possible level of health;
(e) evaluate outcomes of nursing intervention, and initiate change when appropriate;
(f) collaborate, communicate and cooperate as appropriate with other health care providers to ensure quality and continuity of care;
(g) serve as patient advocate, within the limits of the law.

* Defined as assignment consistent with the education, experience and demonstrated competence of the assignee and consistent with the needs of the patient(s).

3.03: Definition - Practical Nurse

Licensed practical nurse is the designation given to an individual who is a graduate of an approved practical nursing program, and who is currently licensed as a practical nurse pursuant to M.G.L. c 112. The licensed practical nurse functions within the framework specified by the nursing statutes and regulations of the Commonwealth.

3.04: Responsibilities and Functions - Practical Nurse

A licensed practical nurse bears full responsibility for the quality of health care s/he provides to patients or health care consumers. A licensed practical nurse may delegate nursing activities to other administratively assigned health care personnel provided; that the delegating licensed practical nurse shall bear full responsibility for:

(1) making an appropriate assignment,

(2) adequately teaching, directing and supervising the delegatee(s), and

(3) the outcome of that delegation: all within the parameters of his/her generic and continuing education and experience.

(4) A licensed practical nurse participates in direct and indirect nursing care, health maintenance, teaching, counseling, collaborative planning and rehabilitation, to the extent of his/her generic and continuing education and experience in order to:
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3.04: continued

(a) assess an individual's basic health status, records and related health data;
(b) participate in analyzing and interpreting said recorded data, and making informed judgments as to the specific elements of nursing care mandated by a particular situation;
(c) participate in planning and implementing nursing intervention, including appropriate health care components in nursing care plans that take account of the most recent advancements and current knowledge in the field;
(d) incorporate the prescribed medical regimen into the nursing plan of care;
(e) participate in the health teaching required by the individual and family so as to maintain an optimal level of health care;
(f) when appropriate evaluate outcomes of basic nursing intervention and initiate or encourage change in plans of care;
(g) collaborate, cooperate and communicate with other health care providers to ensure quality and continuity of care.

3.05: Delegation and Supervision of Selected Nursing Activities by Licensed Nurses to Unlicensed Personnel

The qualified licensed nurse (Registered Nurse/Practical Nurse) within the scope of his/her practice is responsible for the nature and quality of all nursing care that a patient/client receives under his/her direction. Assessment/identification of the nursing needs of a patient/client, the plan of nursing actions, implementation of the plan, and evaluation of the plan are essential components of nursing practice and are the functions of the qualified licensed nurse. The full utilization of the services of a qualified licensed nurse may permit him/her to delegate selected nursing activities to unlicensed personnel. Although unlicensed personnel may be used to complement the qualified licensed nurse in the performance of nursing functions, such personnel cannot be used as a substitute for the qualified licensed nurse. The following sections govern the licensed nurse in delegating and supervising nursing activities to unlicensed personnel. Delegation by Registered Nurses and Licensed Practical Nurses must fall within their respective scope of practice as defined in M.G.L. c. 112, § 80B, paragraphs 1 and 2. Said delegation must occur within the framework of the job description of the delegatee and organizational policies and procedures and also must be in compliance with 244 CMR 3.05(4) and (5).

(1) Definitions

Delegation - The authorization by a qualified licensed nurse to an unlicensed person as defined in 244 CMR 3.05(1) to provide selected nursing services.

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Supervision - Provision of guidance by a qualified licensed nurse for the accomplishment of a nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing the task or activity.

Unlicensed Person - A trained, responsible individual other than the qualified licensed nurse who functions in a complementary or assistive role to the qualified licensed nurse in providing direct patient/client care or carrying out common nursing functions. The term includes, but is not limited to, nurses’ aides, orderlies, assistants, attendants, technicians, home health aides, and other health aides.

(a) The qualified licensed nurse delegating the activity is directly responsible for the nursing care given to the patient/client, and the final decision as to what nursing activity can be safely delegated in any specified situation is within the specific scope of that qualified licensed nurse's professional judgment.
(b) The qualified licensed nurse must make an assessment of the patient's/client's nursing care needs prior to delegating the nursing activity.
(c) The nursing activity must be one that a reasonable and prudent nurse would determine to be delegable within the scope of nursing judgment; would not require the unlicensed person to exercise nursing judgment; and that can be properly and safely performed by the unlicensed person involved without jeopardizing the patient's/client's welfare.
(d) The unlicensed person shall have documented competencies necessary for the proper performance of the task on file within the employing agency; an administratively designated nurse shall communicate this information to the qualified licensed nurse(s) who will be delegating activities to these individuals.
(e) The qualified licensed nurse shall adequately supervise the performance of the delegated nursing activity in accordance with the requirements of supervision as found in 244 CMR 3.05(3).

(3) Supervision. The qualified licensed nurse shall provide supervision of all nursing activities delegated to unlicensed persons in accordance with the following conditions:

The degree of supervision required shall be determined by the qualified licensed nurse after an evaluation of appropriate factors involved, including, but not limited to, the following:

(a) the stability of the condition of the patient/client;
(b) the training and capability of the unlicensed person to whom the nursing task is delegated;
(c) the nature of the nursing task being delegated; and
(d) the proximity and availability of a qualified licensed nurse to the unlicensed person when performing the nursing activity.

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4/8/94  (Effective 3/11/94) – corrected
TITLE: STATEMENT OF ACCOUNTABILITY

POLICY: The Department of Nursing is accountable for assuring that competent, compassionate nursing care is provided to all patients. A Registered Nurse on the staff of the Department of Nursing is accountable for the nursing care and for the coordination and implementation of the collaborative aspects of care for each patient.

Nursing care is prescribed by a Registered Nurse and may be delivered by a Registered Nurse or other nursing staff member.

The Registered Nurse assesses each patient and assigns care based on the needs of the patient and the qualifications and level of competence of nursing personnel. The Registered Nurse plans, supervises, and evaluates the nursing care of each patient.

The accountability for nursing care and for the outcomes of nursing intervention is retained by the Registered Nurse assigned to the patient at all times even when that care is provided by others.

Nursing care assignments are the responsibility of a Registered Nurse who has the knowledge and experience necessary to make those decisions.

Approved: Nursing Executive Committee 04/26/94
Reviewed and approved: Department of Nursing 7/00
Reviewed and approved: Nursing Executive Operations 08/03
Reviewed and approved: Nursing Executive Operations 08/06