

Assignment of Care¹- Practice Guideline

Within a practice setting, RNs/NPs may employ a number of mechanisms in order to perform or direct another nurse to perform a required competency. The purpose of this practice guideline is to outline the practice expectations for RN/NPs who are responsible for preparing assignment (s) of care within their practice setting.

In adherence to the current version of the Standards of Practice of RNs and NPs, RNs/NPs are accountable to practice independently and in collaboration with the health care team while understanding and respecting other team members' scope of practice and contribution in the delivery of safe, competent, and ethical care. RNs/NPs use their knowledge and understanding of the scope of practice of various nursing disciplines to perform assignment of care.

Assignment of Care

Assignment of care is the process of designating/assigning the accountability and responsibility for meeting client(s) care requirements for a specific period of time to an individual who is competent to provide the care and the care is within their individual scope of practice or scope of employment for UCPs. It is a knowledge-based process of matching the most appropriate health care provider based on the assessment of client needs.

Nursing practice among individual groups of nurses may differ in the same environment based on context, educational preparation, competence, and focus. It is important for nurses to be aware of the limits of their individual competence and practice as well as ensuring they understand other nurses' (e.g., NPs, RNs, Licensed Practical Nurses (LPNs), unregulated care providers (UCPs, etc.) roles and levels of competence.

Common ground exists between the scope of practice of nurses with respect to their unique and shared competencies. Mutual understanding is needed to promote role clarity and ensure each provider is utilized properly and working to their optimized and/or full scope of practice. It is imperative that nurses know the limits of scope of practice and that they consult with the most appropriate health care provider when that limit has been reached.

Assignment is defined as:

- the allocation of duties (e.g., responsibility for client care, interventions, or specific tasks as part of client care) to individuals whose scope of practice or scope of employment authorizes the performance of these duties.
- occurs throughout scheduled periods of work and must be re-evaluated as necessary to meet the changing needs of the client (NANB, 2019).
- Consideration must be given to the needs of the client population, the practice environment including availability of health care providers on the collaborative team, and the individual nurse's level of competence.

¹ For further information on scope of practice and the bibliography, refer to the most current version of the College's Scope of Practice Framework.

- The individual accepting the assignment is accountable for the outcomes of their actions and may perform the competencies/interventions independently because the intervention(s) is within their individual scope of practice or employment.

During assignment of care, RNs/NPs must determine which designation of nursing care provider most appropriately matches the client's needs by analyzing simultaneously three equally important factors: the client, the nurse, and the environment.

The RN/NP must:

- determine who is the right health care provider for the client, in the right place, at the right time, for the right reason, and

- consider:

Client

- the acuity, complexity, and variability of the client's condition or situation,
- the client's plan of care,
- predictability of the outcome of care,

Nurse

- the scope of practice/employment of the nursing care providers,
- competency level and expertise of each individual provider,

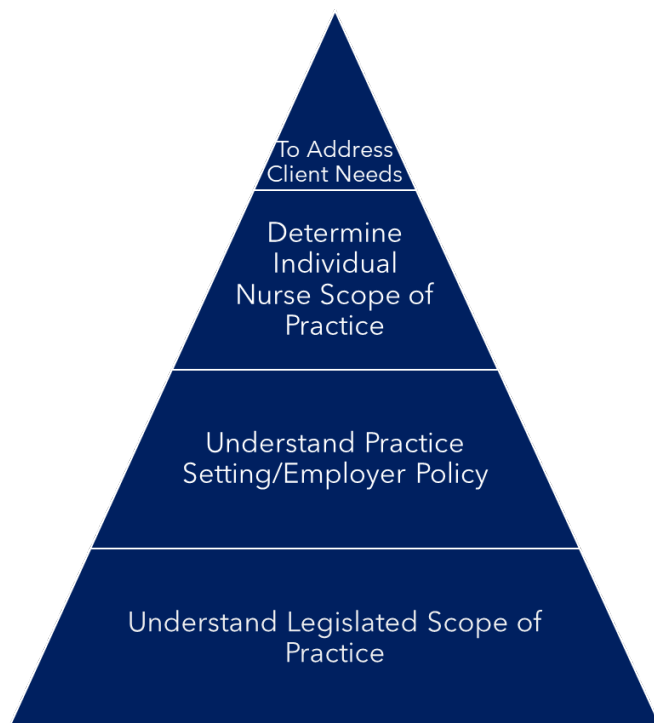
Environment

- the context of practice in which care is provided, and
- the resources and supports available to the care provider (e.g., mentorship, supervision, preceptorship, and employer policies, procedures, protocols, guidelines, and job/role descriptions, etc.).

When the care needs of the client changes and/or are no longer within the scope of the nursing care provider, the RN/NP must collaborate with the nursing care provider to determine whether to direct, supervise, reassign, or assume client care. Conversely, the nursing care provider is responsible to communicate to the RN/NP if and when changes occur and where re-evaluation of the assignment may be required.

As client care needs become less defined, more unstable, unpredictable without an established plan of care, with higher complexity, and higher risk of negative outcomes, the greater the need for enhanced collaboration and communication. This does not necessarily mean the entire care of the client is moved to the RN, but portions may be transferred, and the RN must collaborate with the nursing care provider and the individual practitioner is accountable for the portion of care they provide. The RN and the nursing care provider within the collaborative relationship will need to determine whether all care or portions of the care will be transferred to the RN.

When preparing the assignment of care, the RN/NP may consider the following elements to determine the most appropriate nursing care provider:



Client Need - Client health care needs determine the breadth and depth of knowledge, skills, and judgement of nurse competencies necessary for that setting.

Individual Nurse Scope of Practice - Is determined from regulatory and/or legislated scope of practice, the practice setting/employer policy and the individual nurse's level of expertise of competence.

Practice Setting/Employer Policy - Determines the policies and practice expectations (scope of employment) for all health care providers in that practice setting.

Legislated Scope of Practice - Legislation provides the authority for the regulatory body to set the scope of practice for the profession.

(Adapted from CRNM, 2020)

Unregulated Care Providers (UCPs)

UCPs include, but are not limited to, health care aides, support workers, personal care attendants, and student support workers who are not regulated by legislation and have a variance in educational preparation. UCPs have a scope of employment usually specified in a job description and are accountable for their individual actions and decisions, within their scope of employment, and to their employer.

When assigning UCPs to provide client care in institutionally based settings, nurses must be knowledgeable of the approved scope of employment of UCPs articulated in job descriptions and employer policies. UCPs perform duties under the direction of a nurse and are authorized to practise by the employer. The specific roles and activities performed by UCPs should be determined in collaboration with nursing staff and should be reflective of the context of practice. For further details on UCPs as part of the collaborative team in institutionally based settings, please refer to the most current version of CRNNL's Professional Responsibilities When Working with Institutionally Based Unregulated Care Providers.

Within community settings, the RN, in collaboration with the client, client's family, health professionals, and/or an employer/agency owner, authorizes UCPs to perform select nursing tasks, rather than through assignment. Generally, a client/ family or employer/agency will assign or hire UCPs to care for a client within the client's home or practice setting (e.g., school, personal care home, or through a home care agency) and the RN authorizes the UCP to perform a specific nursing task(s). The RN establishes authorization through either:

- (1) Assistance,
- (2) Direction, or
- (3) Delegation.

The authorization is based on the RN's assessment for a specific client on a non-transferable basis for a specific task. When a nursing task is **delegated** to an UCP, the RN retains responsibility for assessment, planning, and evaluation of the client's care. These phases of the nursing process require the knowledge, skills, and professional judgment of an RN and cannot be delegated to others. Please review the most current version of CRNNL's documents Unregulated Care Providers in Community Settings.

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