This practice direction describes the responsibilities of Manitoba’s practical nurses when assigning and delegating client care tasks to unregulated care providers. This practice direction was created in collaboration with the College of Registered Nurses of Manitoba and the College of Registered Psychiatric Nurses of Manitoba.
Practice directions assist practical nurses in understanding their responsibilities and legal obligations, enabling them to make safe and ethical decisions within their practice. Practical nurses are expected to comply with the information disseminated in practice directions. Failure to do so may result in investigation for misconduct and/or an audit of the nurse’s practice.

Background

Unregulated care providers are formal members of the health care team who are not regulated and who have a scope of employment defined by their employer based on their qualifications and education.

Unregulated care providers are accountable to their employer for their individual actions and decisions. While no legislation formally defines their role, legislation restricts certain activities and roles to regulated professionals. This limits the scope of employment of the unregulated care provider.

Unregulated care providers include, but are not limited to, resident aides, health care aides, service workers in the community, psychiatric assistants, home support workers, and in some settings, office assistants.

Assignment

Nurses may assign unregulated care providers client care tasks, within the unregulated care provider’s scope of employment.

When assigning tasks, the nurse is required to:

- Use the nursing process to determine a plan of care and/or collaborate with other regulated professionals to determine a plan of care before assigning the task.
- Understand the scope of employment of the unregulated care provider and assign only tasks that fall within their position description and employer policies.
- Provide guidance and collaborate with the unregulated care provider.
- Collaborate with the health care team to determine an appropriate plan for re-assessment, monitoring and evaluation of the plan of care based on an assessment of risk associated with the client, task, environment and unregulated care provider (see Appendix A).
- Intervene when unsafe or unethical practice is identified. Interventions may include guidance, teaching and direction, clarification of the plan of care and, if necessary, reporting to the appropriate authority.

Delegation

There are circumstances where it is necessary to delegate tasks to unregulated care providers in order to provide access to care.

Delegation is the extension of authority by a nurse or other regulated professional to an unregulated care provider who does not have

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1 In this document, the use of the word nurse refers to licensed practical nurses (LPNs), registered nurses (RNs) and registered psychiatric nurses (RPNs).
the authority to perform the task as an assignment through their scope of employment.

Delegation is always client-specific and the task cannot be further delegated or transferred to another client.

Nurses may delegate tasks outside of the unregulated care provider’s scope of employment as long as the task meets the following conditions:

- The employer supports delegation of the task.
- The task would normally be performed by a client or their family member as part of self-care.
- The task has defined limits and does not require the nursing process.
- The need, response and possible outcomes have been identified and documented for the client.

Making the Decision to Delegate a Task

The nurse is required to:
1. Confirm that the employer supports delegation to an unregulated care provider and follow applicable policies and procedures.
2. Be competent and authorized to perform the task they are delegating.
3. Assess the client and determine that a need exists that cannot be met through assignment of the task to an authorized health-care provider.
4. Assess the competence of the unregulated care provider in relation to the delegated task on the specific client.
5. Identify the risk to the client through an assessment of the client, task, unregulated care provider and environment (see Appendix A).
6. Be satisfied that the decision to delegate is appropriate in the context of the client, task, unregulated care provider and environment.
7. Include information about the decision to delegate and process of delegation when obtaining informed consent from the client for the task.
8. Document the decision to delegate.

Engaging in the Process of Delegation

The nurse is required to:
1. Provide client-specific teaching to the unregulated care provider until the nurse is satisfied that the unregulated care provider is competent to perform the task in the context of the task, client and environment.
2. Ensure that support and consultation is available during the performance of the task.
3. Provide periodic monitoring and evaluation of the unregulated care provider’s competence.
4. Remain responsible for the decision to delegate and the ongoing assessment of the client’s health status and plan of care.
5. Utilize the nursing process to determine appropriate monitoring and evaluation of the plan of care based on assessment of the client, task, environment and unregulated care provider.
6. Terminate the delegation if a change in client status or the unregulated care provider’s competence indicates that the delegation is no longer appropriate or acceptable to the client.

Glossary

Assignment: Allocation of clients or specific client care tasks to health care providers. Occurs within the scope of practice of a regulated professional and within the scope of employment of an unregulated care provider.

Authorized health care provider: May be a regulated professional or an unregulated care provider. Regulated professionals are authorized through legislation and must meet requirements as set by their regulatory college. Unregulated care providers are authorized by their employer through their scope of
employment. Scope of employment may only include activities that are not restricted through legislation.

**Client-specific:** Performed on a specific client. Limits of the task are specific to the individual client and cannot be transferred to another client.

**Decision to delegate:** Decision made by an individual nurse to extend authority to an unregulated care provider to perform a specific task on a specific client.

**Delegation:** Extending authority to perform a specific client care task to an unregulated care provider who does not otherwise have the authority to perform the task.

**Regulated professional:** Professional regulated through legislation who provides or administers health services.

**Health care provider:** Paid provider of health care services.

**Nursing process:** Assessment, diagnosis or determination, planning, intervention and evaluation of and managing of the outcomes of care.

**Plan of care:** Written guideline for client care that documents the client’s health care needs. It includes assessment data, list of problems and therapies as well as expected criteria used to evaluate care.

**Process of delegation:** Process of extending authority to an unregulated care provider.

**Routine activities of living:** Activities that would normally be performed by the client or their family member as part of self-care. To assess a task as a routine activity of living, the need, response and outcome of the task must be predictable.

**Risk:** Potential of harm to the client.

**Scope of employment:** Range of responsibilities defined by an employer through position descriptions and policies.

**Task:** One part of client care. Has clearly defined limits.

**Teaching:** Providing instruction for a task where the goal is to determine that the person receiving instruction is competent to perform the task.

**Unregulated care providers:** Formal members of the health care team who are not regulated by a regulatory body and who have a scope of employment defined by their employer, based on their qualifications and educational preparation. Unregulated care providers are accountable and responsible to their employers for their individual actions and decisions.

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**For More Information**

Visit our website at [www.clpnm.ca](http://www.clpnm.ca) for more information and resources.

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**About the CLPNM**

The CLPNM is the governing body for the licensed practical nursing profession in Manitoba. Mandated to govern its members in a manner that serves and protects the public interest, the CLPNM establishes practice requirements for the provision of safe and effective nursing care.
References

The following documents were consulted during the development of this practice direction.

Canadian Nurses Association (2005). *Unregulated Health Workers: A Canadian and Global Perspective*

College and Association of Registered Nurses of Alberta (2014). *Assignment of Client Care: Guidelines for Registered Nurses*

College of Registered Nurses of British Columbia (2013). *Assigning and Delegating to Unregulated Care Providers*

College of Registered Nurses of Nova Scotia (2012). *Assignment and Delegation Guidelines for Registered Nurses and Licensed Practical Nurses*


National Council of State Boards of Nursing (2016). *National Guidelines for Nursing Delegation*

Tourangeau, Anne et al. (2015). *The Role of Nurses in Assigning, Delegating, Teaching and Supervising Patient Care Activities to Unregulated Care Providers in Home Care: A Jurisdictional Scan of Legislation, Regulation and Policy in Canada*

Appendix A
Factors to Consider when Assessing Risk to the Client

Lower Risk

Client
• Health status is well-defined and their condition is not expected to change negatively.
• Willing and able to direct care.

Task
• Has been established as routine and is performed as part of daily care.
• Is not expected to endanger the client’s health or well-being when performed properly.
• Involves few steps and minimal technical psychomotor skill.
• Has predictable outcomes.
• Not altered in different settings.

Unregulated Care Provider
• Has previous experience performing the task.
• Has relevant foundational education.

Environment
• Receives frequent ongoing assessment and care planning by a regulated professional.
• Allows for adequate time for training, evaluation and ongoing maintenance of competence.
• Contains clearly written procedures and policies.
• Enables supervision and supports that allow monitoring of the unregulated care provider as well as opportunity for the unregulated care provider to consult as necessary.

Higher Risk

Client
• Health status is not well-defined and/or changes or atypical responses may be anticipated.
• Has multiple health care needs.
• Unwilling or unable to direct care.

Task
• Is not routine and may vary in need.
• May endanger the client’s health, mental health or overall well-being.
• Involves numerous steps and a high degree of technical/psychomotor skill.
• Has risk of unpredictable outcomes.
• Requires high degree of technical/psychomotor skill.
• May require altering in different settings.

Unregulated Care Provider
• Has never performed the delegated task.
• Has no related foundational education/competencies.

Environment
• Has limited or unavailable ongoing assessment, care planning and evaluation by a regulated health care provider.
• Has a limited amount or type of training provided.
• Does not contain written policies and procedures or has inadequate written policies and procedures.
• Does not allow for adequate supervision and support.

Adapted from: College of Registered Nurses of British Columbia (2013). Assigning and Delegating to Unregulated Care Providers.