CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 1397

Chapter 203, Laws of 2009

61st Legislature 2009 Regular Session

REGISTERED NURSES--DELEGATION OF AUTHORITY

EFFECTIVE DATE: 07/26/09

Passed by the House March 3, 2009 Yeas 97 Nays 0

FRANK CHOPP

Speaker of the House of Representatives

Passed by the Senate April 14, 2009 Yeas 48 Nays 0

CERTIFICATE

I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1397** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BARBARA BAKER

BRAD OWEN

Chief Clerk

President of the Senate

Approved April 24, 2009, 1:47 p.m.

FILED

April 27, 2009

CHRISTINE GREGOIRE

Secretary of State State of Washington

Governor of the State of Washington

SUBSTITUTE HOUSE BILL 1397

Passed Legislature - 2009 Regular Session

State of Washington 61st Legislature 2009 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Moeller, Ericksen, Cody, Green, Hinkle, Morrell, Bailey, Williams, Nelson, and Wood)

READ FIRST TIME 02/10/09.

- 1 AN ACT Relating to the delegation of authority to registered
- 2 nurses; and amending RCW 18.79.260.

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- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 **Sec. 1.** RCW 18.79.260 and 2008 c 146 s 11 are each amended to read 5 as follows:
 - (1) A registered nurse under his or her license may perform for compensation nursing care, as that term is usually understood, to individuals with illnesses, injuries, or disabilities.
- (2) A registered nurse may, at or under the general direction of a 9 10 licensed physician and surgeon, dentist, osteopathic physician and surgeon, naturopathic physician, optometrist, podiatric physician and 11 12 surgeon, physician assistant, osteopathic physician assistant, advanced registered nurse practitioner acting within the scope of his 13 14 license, administer medications, treatments, tests, inoculations, whether or not the severing or penetrating of tissues is 15 involved and whether or not a degree of independent judgment and skill 16 is required. Such direction must be for acts which are within the 17 18 scope of registered nursing practice.

p. 1 SHB 1397.SL

- 1 (3) A registered nurse may delegate tasks of nursing care to other 2 individuals where the registered nurse determines that it is in the 3 best interest of the patient.
 - (a) The delegating nurse shall:

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- 5 (i) Determine the competency of the individual to perform the 6 tasks;
 - (ii) Evaluate the appropriateness of the delegation;
- 8 (iii) Supervise the actions of the person performing the delegated 9 task; and
- 10 (iv) Delegate only those tasks that are within the registered 11 nurse's scope of practice.
 - (b) A registered nurse, working for a home health or hospice agency regulated under chapter 70.127 RCW, may delegate the application, instillation, or insertion of medications to a registered or certified nursing assistant under a plan of care.
 - (c) Except as authorized in (b) or (e) of this subsection, a registered nurse may not delegate the administration of medications. Except as authorized in (e) of this subsection, a registered nurse may not delegate acts requiring substantial skill, and may not delegate piercing or severing of tissues. Acts that require nursing judgment shall not be delegated.
 - (d) No person may coerce a nurse into compromising patient safety by requiring the nurse to delegate if the nurse determines that it is inappropriate to do so. Nurses shall not be subject to any employer reprisal or disciplinary action by the nursing care quality assurance commission for refusing to delegate tasks or refusing to provide the required training for delegation if the nurse determines delegation may compromise patient safety.
 - (e) For delegation in community-based care settings or in-home care settings, a registered nurse may delegate nursing care tasks only to registered or certified nursing assistants. Simple care tasks such as blood pressure monitoring, personal care service, diabetic insulin device set up, verbal verification of insulin dosage for sight-impaired individuals, or other tasks as defined by the nursing care quality assurance commission are exempted from this requirement.
- 36 (i) "Community-based care settings" includes: Community 37 residential programs for people with developmental disabilities, 38 certified by the department of social and health services under chapter

71A.12 RCW; adult family homes licensed under chapter 70.128 RCW; and boarding homes licensed under chapter 18.20 RCW. Community-based care settings do not include acute care or skilled nursing facilities.

- (ii) "In-home care settings" include an individual's place of temporary or permanent residence, but does not include acute care or skilled nursing facilities, and does not include community-based care settings as defined in (e)(i) of this subsection.
- (iii) Delegation of nursing care tasks in community-based care settings and in-home care settings is only allowed for individuals who have a stable and predictable condition. "Stable and predictable condition" means a situation in which the individual's clinical and behavioral status is known and does not require the frequent presence and evaluation of a registered nurse.
- (iv) The determination of the appropriateness of delegation of a nursing task is at the discretion of the registered nurse. Other than delegation of the administration of insulin by injection for the purpose of caring for individuals with diabetes, the administration of medications by injection, sterile procedures, and central line maintenance may never be delegated.
- (v) When delegating insulin injections under this section, the registered nurse delegator must instruct the individual regarding proper injection procedures and the use of insulin, demonstrate proper injection procedures, and must supervise and evaluate the individual performing the delegated task weekly during the first four weeks of delegation of insulin injections. If the registered nurse delegator determines that the individual is competent to perform the injection properly and safely, supervision and evaluation shall occur at least every ninety days thereafter.
- (vi) The registered nurse shall verify that the nursing assistant has completed the required core nurse delegation training required in chapter 18.88A RCW prior to authorizing delegation.
- (vii) The nurse is accountable for his or her own individual actions in the delegation process. Nurses acting within the protocols of their delegation authority are immune from liability for any action performed in the course of their delegation duties.
- (viii) Nursing task delegation protocols are not intended to regulate the settings in which delegation may occur, but are intended to ensure that nursing care services have a consistent standard of

practice upon which the public and the profession may rely, and to safeguard the authority of the nurse to make independent professional decisions regarding the delegation of a task.

- (f) The nursing care quality assurance commission may adopt rules to implement this section.
- (4) Only a person licensed as a registered nurse may instruct nurses in technical subjects pertaining to nursing.
- 8 (5) Only a person licensed as a registered nurse may hold herself 9 or himself out to the public or designate herself or himself as a 10 registered nurse.

Passed by the House March 3, 2009. Passed by the Senate April 14, 2009. Approved by the Governor April 24, 2009. Filed in Office of Secretary of State April 27, 2009.

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