



# **The Role of the Professional School Nurse in the Delegation of Care in Florida Schools**

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## **Role of the Professional School Nurse in the Delegation of Care in Florida Schools**

### **Purpose**

The purpose of this guideline is twofold: (1) to clarify the nursing practice standards for the delegation of health care within the school setting, and (2) to ensure student safety by promoting the provision of school health services that meet appropriate standards of care and applicable provisions of Florida Statutes and Florida Administrative Code.

### **Issue Summary**

Schools provide a unique opportunity for the educational and public health systems, with their specific mandates and missions, to unite with the common goal of ensuring that Florida's children are able to optimize their full potential intellectually, socially, emotionally and physically, thus able to navigate their communities with success. The ability of this partnership to succeed in promoting the success of students is often challenged by increasing legislative mandates, static revenue that is insufficient to fund adequate numbers of school nurses and the demands of the clinical care required by the rapidly increasing numbers of students with chronic and complex health conditions requiring monitoring, medications, medical procedures and treatments during the school day.

Within the framework of school health, the educational and public health systems work cooperatively, each within the scope of specific statutes that define the services necessary to provide education and health services in schools. Sometimes caught in the confusing connection created by these statutes is the professional school nurse (RN) tasked with providing health services. These RNs must provide safe, consistent care in the face of rising school and student caseloads, increasingly complex care related to advancements in medical technology and statutory mandates that conflict with those of Florida's Nurse Practice Act.

Approximately 799,903 of Florida's 2.86 million school children have a health condition that can adversely affect their ability to stay in school and be physically and/or emotionally prepared to learn. All children, with or without chronic conditions, are susceptible to injuries, episodic illnesses or problems that require nursing assessment, care planning, intervention and/or management during the school day. As the financial constraints and number and complexity of student health needs have increased, many local programs are increasingly resorting to meeting these needs not just through the use of professional school nurses (RN), but also licensed practical nurses (LPN) and unlicensed assistive personnel (UAP).

In a year long process, a statewide workgroup consisting of state level registered nursing consultants and RNs from local school districts and county health departments examined the role of the RN in the school setting and the pros and cons of using LPNs and UAP. They also examined state model practices and national standards of practice, as well as local interpretation and implementation of statutes, and found that some local hiring practices may result in staffing patterns that can jeopardize student safety and increase liability to the RNs, school district and/or county health departments (CHD) due to the medical errors of LPNs and UAP working under the RN's nursing license.

The purpose of this document is to provide clearer guidance and technical assistance to address staffing shortfalls and reduce liability while implementing high quality, safe school health services in Florida schools.

## Introduction

Florida professional school nurses recognize that healthy students are successful learners and that children and adolescents deserve an educational environment that enables and motivates them to achieve learning success. However, meeting student's individual health needs within the educational system is particularly challenging, due to the increased number and complexity of health conditions, high student-to-nurse ratios, the ongoing shortage of RNs and the challenges of working within the dual missions of education and health. As the health-related needs of students increase, many local school health programs are adopting staffing models that include the delegation of health care duties to UAP. Student safety is the primary concern in determining whether or not and how UAP should be used to assist the RN deliver increasingly complex health services to students.

## Background

The provision of health care in Florida's schools is mandated by several Florida laws (see Appendix A):

- The Florida Nurse Practice Act (Chapter [464](#), Florida Statutes) determines the scope of practice for licensed nurses, more commonly referred to as RNs. The act specifies that "professional nursing" means the performance of those acts that require substantial specialized knowledge, judgment, and nursing skill; including the supervision and teaching of other personnel in the performance of these acts. The practice of "practical nursing" means the performance of selected acts under the direction of a registered nurse or other specified licensed professionals. As used in the Nurse Practice Act, "professional nursing" means RN (registered nurse) and "practical nursing" means LPN (licensed practical nurse).
- Section [1006.062](#), Florida Statutes, Administration of medication and provision of medical services by district school board personnel, permits school personnel designated by the school principal to assist in the administration of prescribed medication. Additionally, certain health-related services may be performed by UAP in the school setting upon successful completion of child-specific training as provided by a registered nurse or other specified licensed health professional.
- Florida Administrative Code rule [64B9-14](#), Delegation to unlicensed assistive personnel, provides definitions and specific requirements in the delegation of tasks and activities to UAP. Delegation is defined as the transference to a competent individual the authority to perform selected tasks or activities by a nurse qualified by licensure or experience. Only the supervising professional nurse can determine if an LPN possesses the training and experience necessary to assist in the training, monitoring and evaluation of UAP.
- Florida Administrative Code rules [6A-6.0251](#), [6A-6.0252](#) and [6A-6.0253](#) contain requirements for individualized health care plans, emergency care plans, child-specific training and the assurance that there are trained staff available to meet the health care needs of students with severe allergies, pancreatic insufficiency and diabetes if they are unable to safely self-administer medication in the school setting or in a health emergency.

The unique challenge for Florida school nurses is to incorporate these laws, often interpreted differently by different agencies, into practice standards that ensure the safety and well-being of students. A discussion of these issues is presented in the following section.

## Delegation Issues

Due to the [Individuals with Disabilities Education Act](#) and [Section 504 of the Rehabilitation Act](#), student health needs must be addressed in order to ensure that all students have access to education in the least restrictive environment. Delegation of health care services for children in school has become increasingly complex with the advances in diabetes technology, complex medical procedures such as urinary catheterization and gastrostomy tube feeding, and the administration of emergency medications, such as auto-injectable epinephrine, rectal diastat and injectable glucagon.

All the above, while also having the responsibility for a wide range of activities, including direct care, case management, health screenings, health teaching, health record reviews and promoting a healthy

and safe school environment. Several issues complicate the delegation of these various roles and responsibilities:

- The Nurse Practice Act, Chapter 464, Florida Statutes, establishes the standards which govern the professional conduct and performance of nursing activities. It clearly defines the role of the professional nurse (RN) as one who delegates, provides supervision and training, and performs acts requiring specialized knowledge. This authority is not extended to LPNs.
- Section 1006.062, Florida Statutes, allows certain services to be provided by designated staff whose primary role is education or educational support. Based upon knowledge, training, the complexity of care and time commitment, it is preferable that school health services be provided by a person whose primary role in the school is the provision of school health services.
- Section 1006.062(1), Florida Statutes, requires medication training by an RN, LPN, physician (MD) or physician's assistant (PA) in accordance with the school district medication administration policy and the county's approved school health services plan. Although this section of Florida law allows an LPN to provide training of UAP pursuant to the approved school district medication policy, it does not allow LPNs to perform child-specific training and delegation to paraprofessionals. These responsibilities are addressed separately in section 1006.0062(4), Florida Statutes, explicitly assigning them to the RNs, advanced practice registered nurses (APRNs), MDs and PAs, as noted below.
- Section 1006.062(4), Florida Statutes requires UAP to successfully complete child-specific training by an RN, APRN an MD, or PA in order to perform health-related services. Only the professional registered nurse may delegate the authority based upon nursing judgment and capability of the individual to safely perform the task or activity to be delegated.

The principal provides administrative supervision for the school but only the professional nurse can provide the nursing supervision necessary for the delegation of health tasks. Recognition of the difference between designation and delegation is critical to the provision of safe care in the schools.

The UAP may have partial or total responsibility for providing direct services under the supervision of the professional school nurse. Delegation to UAP by the registered nurse must occur only with:

1. Appropriate basic health training. Florida Administrative Code rule 64F-6.004 requires that health room staff have current certification in first aid and cardiopulmonary resuscitation (CPR) by a nationally recognized certifying agency. It is also recommended that training for all UAP include but not be limited to: communication, confidentiality, documentation, infection control, district specific policies and procedures, and medication administration.
2. Child-specific training by statutorily designated health professionals.
3. Monitoring and evaluation of UAP's performance and the student's medical progress.

Key factors for the appropriate use of UAP and LPNs are:

- Clear role definition.
- Adequate training.
- Appropriate delegation, supervision, monitoring and evaluation.
- District policies that support safe delegation.

Professional school nurses, in collaboration with the CHD and school district administration, should develop clear, limited, written practice descriptions that ensure adequate training and competency to perform identified tasks. UAP shall not make clinical assessments, nursing judgments or implement nursing tasks requiring licensure. There should be written protocols for handling specific student health issues, with directions for particular signs and symptoms that must be reported to the school nurse or require engagement of emergency services. When the professional nurse delegates responsibilities, the nurse must be available to provide direction, supervision, and immediate intervention in a situation as needed. Such availability may be facilitated by use of a telephone, cell phone or other electronic device. If at any time the school nurse determines that delegation is not safe and the UAP is not competent to complete the task for any reason, the school nurse must work with school administrator(s)

to make provisions for the needed health services and identify a more qualified individual who is willing to accept the responsibilities of delegation.

Many counties have staffed their schools with LPNs rather than UAP. With adequate supervision, this has proven to be effective and provides students with an enhanced level of health services.

However, schools are an independent practice setting where complex nursing judgments are frequently necessary; requiring that LPNs work under the supervision of RNs. The staffing of RNs in school health programs ensures compliance with Florida law, the safety of students, the availability of specialized nursing skills and knowledge, and the delegation and training of UAP where they are necessary to assist in the provision of basic health services in schools.

### **Conclusion**

Staffing or budgetary reasons may make the use of UAP a necessary adjunct to many school health services programs. If properly trained and supervised, they can help ensure that basic health services are available to students and increase the cost-effectiveness of the program. Staffing decisions must be based on the complexity of the services needed, the stability of the student's health condition, staff competencies and the amount of direct and indirect supervision required. While the use of UAP may be an alternative to extend health staffing, their improper use will compromise students' quality of care, and create additional liability for the district and/or the RN who delegates health care responsibilities under their license.

The registered professional school nurse takes the lead in helping school districts safely determine whether and how to use UAP to extend the delivery of health services. However, lack of an adequate professional nursing presence leads to unsafe care for students and increased school district and/or CHD liability. The professional school nurse is the only member of the education team who is legally qualified, trained and capable of assessing the health needs of the student population and is the only one who can legally delegate nursing activities to UAP. Adequate RN to LPN and UAP ratios and continuing supervision are essential to ensure the safe delivery of nursing services to students.

### **Recommendations**

1. School districts and CHDs must ensure there is adequate RN coverage to support school health services for the school population. This includes:
  - The evaluation of school nurse workloads on at least an annual basis.
  - The review of student acuity levels in district schools and school/community indicators to determine appropriate staffing to ensure quality outcomes.
  - The provision of professional supervision for LPNs.
  - The provision of nursing assessment, consultation, etc. that require specialized knowledge, judgment and experience.
  - The training, delegation and supervision of UAP.
2. Local programs should minimize their liability by ensuring that only RNs are responsible for the training, delegation and supervision of UAP.
3. School nurses should be provided continuing education opportunities to develop competence in the complex skills of delegation.

### **References**

- Nursing Delegation in the School Setting (National Association of School Nurse [NASN], 2019)  
Retrieved April 2, 2021 from <https://www.nasn.org/advocacy/professional-practice-documents/position-statements/ps-delegation>
- School Nurse Workload: Staffing for Safe Care (NASN, 2020)  
Retrieved April 2, 2021 from <https://www.nasn.org/advocacy/professional-practice-documents/position-statements/ps-workload>

Principles for Delegation by Registered Nurses to Unlicensed Assistive Personnel (UAP, American Nurses Association, 2012)  
Retrieved April 2, 2021 from  
<https://www.nursingworld.org/~4af4f2/globalassets/docs/ana/ethics/principlesofdelegation.pdf>



## Appendix A

### Florida Laws and Codes Regarding Nursing Delegation in the School Setting (2021)

#### Nurse Practice Act, Part 1 of Chapter 464, Florida Statutes

Section 464.003(19), Florida Statutes "Practice of professional nursing" means the performance of those acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences which shall include, but not be limited to:

- (a) The observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care; health teaching and counseling of the ill, injured, or infirm; and the promotion of wellness, maintenance of health, and prevention of illness of others.
- (b) The administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments.
- (c) The supervision and teaching of other personnel in the theory and performance of any of the acts described in this subsection.

Section 464.003(3)(b), Florida Statutes, "Practice of practical nursing" means the performance of selected acts, including the administration of treatments and medications, in the care of the ill, injured, or infirm and the promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist.

The professional nurse and the practical nurse shall be responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.

#### Florida Administrative Code rule 64B9-14.002, Delegation of Tasks or Activities

In the delegation process, the delegator must use nursing judgment to consider the suitability of the task or activity to be delegated.

- (1) Factors to weigh in selecting the task or activity include:
  - (a) Potential for patient harm.
  - (b) Complexity of the task.
  - (c) Predictability or unpredictability of outcome including the reasonable potential for a rapid change in the medical status of the patient.
  - (d) Level of interaction required or communication available with the patient.
  - (e) Resources both in equipment and personnel available in the patient setting.
- (2) Factors to weigh in selecting and delegating to a specific delegate include:
  - (a) Normal assignments of UAP.
  - (b) Validation or verification of the education and training of the delegate.
- (3) The delegation process shall include communication to UAP which identifies the task or activity, the expected or desired outcome, the limits of authority, the time frame for the delegation, the nature of the supervision required, verification of delegate's understanding of assignment, verification of monitoring and supervision.
- (4) Initial allocation of the task or activity to the delegate, periodic inspection of the accomplishment of such task or activity, with total nursing care responsibility remaining with the qualified nurse delegating the tasks or assuming responsibility for supervision.

**Florida Administrative Code rule 64B9-14.003, Delegation of Tasks Prohibited**

The registered nurse or licensed practical nurse, under direction of the appropriate licensed professional as defined in section 464.003(3)(b), F.S. shall not delegate:

- (1) Those activities not within the delegating or supervising nurse's scope of practice.
- (2) Nursing activities that include the use of the nursing process and require the special knowledge, nursing judgment or skills of an RN or LPN, including:
  - (a) The initial nursing assessment or any subsequent assessments.
  - (b) The determination of the nursing diagnosis or interpretations of nursing assessments.
  - (c) Establishment of the nursing care goals and development of the plan of care.
  - (d) Evaluation of progress in relationship to the plan of care.
- (3) Those activities for which the UAP has not demonstrated competence.

**Section 1006.062, Florida Statutes, Administration of medication and provision of medical services by district school board personnel**

- (1) Notwithstanding the provisions of the Nurse Practice Act, part I of chapter 464, district school board personnel may assist students in the administration of prescription medication when the following conditions have been met:
  - (a) Each district school board shall include in its approved school health services plan a procedure to provide training, by a registered nurse, a licensed practical nurse, an advanced practice registered nurse licensed under chapter 464, Florida Statutes; a physician licensed under chapter 458, Florida Statutes, a physician assistant licensed under chapter 458 or 459, Florida Statutes; or a doctor of osteopathy licensed pursuant to chapter 459, Florida Statutes, to the school personnel designated by the school principal to assist students in the administration of prescribed medication. Such training may be provided in collaboration with other school districts, through contract with an education consortium, or by any other arrangement consistent with the intent of this subsection.
  - (b) Each district school board shall adopt policies and procedures governing the administration of prescription medication by district school board personnel.

The policies and procedures shall include, but not be limited to, the following provisions:

1. For each prescribed medication, the student's parent shall provide to the school principal a written statement which grants to the school principal or the principal's trained designee permission to assist in the administration of such medication and which explains the necessity for the medication to be provided during the school day, including any occasion when the student is away from school property on official school business. The school principal or the principal's trained designee shall assist the student in the administration of the medication.
  2. Each prescribed medication to be administered by district school board personnel shall be received, counted, and stored in its original container. When the medication is not in use, it shall be stored in its original container in a secure fashion under lock and key in a location designated by the school principal.
- (2) There shall be no liability for civil damages as a result of the administration of the medication when the person administering the medication acts as an ordinarily reasonably prudent person would have acted under the same or similar circumstances.

- (3) Nonmedical district school board personnel shall not be allowed to perform invasive medical services that require special medical knowledge, nursing judgment, and nursing assessment, including, but not limited to:
  - (a) Sterile catheterization.
  - (b) Nasogastric tube feeding.
  - (c) Cleaning and maintaining a tracheostomy and deep suctioning of a tracheostomy.
- (4) Nonmedical assistive personnel shall be allowed to perform health-related services upon successful completion of child-specific training by a registered nurse or advanced registered nurse practitioner licensed under chapter 464, a physician licensed pursuant to chapter 458 or chapter 459, or a physician assistant licensed pursuant to chapter 458 or chapter 459. All procedures shall be monitored periodically by a nurse, advanced registered nurse practitioner, physician assistant, or physician, including, but not limited to:
  - (a) Intermittent clean catheterization.
  - (b) Gastrostomy tube feeding.
  - (c) Monitoring blood glucose.
  - (d) Administering emergency injectable medication.
- (5) For all other invasive medical services not listed in this subsection, a registered nurse or advanced registered nurse practitioner licensed under chapter 464, a physician licensed pursuant to chapter 458 or chapter 459, or a physician assistant licensed pursuant to chapter 458 or chapter 459 shall determine if nonmedical district school board personnel shall be allowed to perform such service.
- (6) Each district school board shall establish emergency procedures in accordance with section 381.0056(5), Florida Statutes for life-threatening emergencies.
- (7) District school board personnel shall not refer students to or offer students at school facilities contraceptive services without the consent of a parent or legal guardian. To the extent that this subsection conflicts with any provision of chapter 381, the provisions of chapter 381 control.
- (8) Each district school board shall adopt a policy and a procedure for allowing a student who is a qualified patient, as defined in section 381.986, Florida Statutes, to use marijuana obtained pursuant to that section. Such policy and procedure shall ensure access by the qualified patient; identify how the marijuana will be received, accounted for, and stored; and establish processes to prevent access by other students and school personnel whose access would be unnecessary for the implementation of the policy.

**Florida Administrative Code rule 64F-6.002: School Health Services Plan**

- (1) Protocols for supervision of school health services personnel shall be described in the local school health services plan to assure that such services are provided in accordance with statutory and regulatory requirements and professional standards. These shall be kept on file at the local school district and the county health department (CHD).
- (2) Decisions regarding medical protocols or standing orders in the delivery of school health services are the responsibility of the CHD medical director in conjunction with district school boards, local school health advisory committees, the school district medical consultant, or the student's private physician.

**Florida Administrative Code rule 64F-6.004: Meeting Emergency Health Needs**

- (1) The school nurse, in cooperation with the school principal or the person designated by the principal or the acting principal, shall assist in the planning for the training of those persons who provide care on a day-to-day basis to students who are ill or injured while on school grounds during school hours.

**Florida Administrative Code rule 6A-6.0251(1)(3-4) Use of Epinephrine Auto-Injectors**

- (1) In accordance with subsection 64F-6.004(4), F.A.C., the school nurse shall develop an annual individualized health care plan (IHCP) that includes an emergency care plan (ECP), in cooperation with the student, parent/guardians, healthcare provider, and school personnel for the student with life-threatening allergies.
- (2) The IHCP shall include provisions for child-specific training in accordance with Section 1006.062(4), F.S., to protect the safety of all students from the misuse or abuse of auto-injectors. The ECP component shall specify that the emergency number (911) will be called immediately for an anaphylaxis event and describe a plan of action if the student is unable to perform self-administration of the epinephrine auto-injector.

**Florida Administrative Code rule 6A-6.0252(1)(a-b) Use of Prescribed Pancreatic Enzyme Supplements**

- (1) Definitions.
  - (a) Emergency Care Plan (ECP). An ECP is a child-specific action plan to facilitate quick and appropriate responses for an individual emergency in the school setting. The ECP may be a component of the Individualized Healthcare Plan (IHP) that is developed consistent with Sections 1002.20(3)(k) and 1006.062(4), F.S. The ECP shall specify when the emergency number (911) will be called and describe a plan of action when the student is unable to self-administer medication or self-manage treatment as prescribed.
  - (b) Individualized Health Care Plan (IHP). An IHP is a written plan of care developed at the local level to outline the provision of student healthcare services intended to achieve specific student outcomes. The IHP is part of the nursing process that is detailed in the National Association of School Nurses Position Statement: Use of Individualized Healthcare Plans to Support School Health Services (2020) as incorporated by reference in Rule 6A-6.0253, F.A.C., Diabetes Management. The IHP is developed by a registered nurse (RN) in collaboration with the family, student, student's health care providers, and school personnel for the management of pancreatic insufficiency or cystic fibrosis while in school, participating in school-sponsored activities, and in transit to or from school or school-sponsored activities. The IHP is child-specific and includes a written format for nursing assessment (health status, risks, concerns, and strengths), nursing diagnoses, interventions, delegation, training, expected outcomes, and goals to meet the health care needs of a student with pancreatic insufficiency or cystic fibrosis and to protect the safety of all students from the misuse or abuse of medication.

**Florida Administrative Code rule 6A-6.0253(1)(c-d) and (2-4) Diabetes Management.**

- (2) Definitions.
  - (c) Emergency Care Plan (ECP). An ECP is a child-specific action plan to facilitate quick and appropriate responses for an individual emergency in the school setting. The ECP may be a component of the Individualized Healthcare Plan (IHP) that is developed consistent with Sections 1002.20(3)(j) and 1006.062(4), F.S. The ECP shall specify when the emergency number (911) will be called and describe a plan of action when the student is unable to self-administer medication or self-manage treatment as prescribed.
  - (d) Individualized Healthcare Plan (IHP). An IHP is a written plan of care developed at the local level to outline the provision of student healthcare services intended to achieve specific

student outcomes. The IHP is part of the nursing process that is detailed in the National Association of School Nurses Position Statement: Use of Individualized Healthcare Plans to Support School Health Services (2020), (<http://www.flrules.org/Gateway/reference.asp?No=Ref-12105>), which is hereby incorporated by reference and available online at <https://www.nasn.org/nasn/advocacy/professional-practice-documents/position-statements/ps-ihrs>. A hard copy may be obtained by contacting Student Support Services, Turlington Building, 325 West Gaines Street, Suite 644, Tallahassee, Florida 32399. The IHP is developed from the Diabetes Medical Management Plan (DMMP) by a registered nurse (RN) in collaboration with the family, student, student's health care providers, and school personnel for the management of diabetes while in school, participating in school-sponsored activities, and in transit to or from school or school-sponsored activities. The IHP is child-specific and includes a written format for nursing assessment (health status, risks, concerns, and strengths), nursing diagnoses, interventions, delegation, training, expected outcomes, and goals to meet the health care needs of a student with diabetes and to protect the safety of all students from the misuse or abuse of medication, supplies, and equipment.

- (3) School districts are to have appropriate personnel, whether licensed nurses or trained school personnel, assigned to each school a student with diabetes would otherwise attend if he or she did not have diabetes. School districts are to ensure that such personnel are available to provide the necessary diabetes care throughout the school day and during school-sponsored activities.
- (4) The Department of Education, in collaboration with the Department of Health, shall develop technical assistance regarding the care of students with diabetes, and shall identify and provide sources to school districts for training school personnel.

Appendix B

**COMPARISON CHART: AUTHORITY TO DELEGATE AND RELATED ACTIVITIES**

Florida Law and Activity	Professional Nurse (RN)	Practical Nurse (LPN)
<b><i>Nurse Practice Act (Chapter 464, Florida Statutes)</i></b>		
• Delegate	Y	N
• Supervise	Y	N
• Provide Training	Y	N
<b><i>Administration of medication and provision of medical services by district school board personnel (Section 1006.062, Florida Statutes)</i></b>		
1. Medication Administration		
• Delegate	N/A	N/A
• Supervise	N/A	N/A
• Provide General Training	Y	Y
• Provide Child-Specific Training and Delegation of Care	Y	N
2. Provision of health-related services		
• Delegate	Y	N/A
• Supervise	Y	N/A
• Provide Child-Specific Training	Y	N
○ Conduct Periodic monitoring	Y	N
○ Delegate other invasive procedures	Y	N
<b>Authority to perform indicated nursing activities:</b> Y = Yes; N = No; N/A = Not addressed		

## Appendix C

### Questions and Answers

#### 1. Who can delegate?

In the school setting, only the professional school nurse (RN) can delegate nursing activities. The practical nurse (LPN) functions under the direction of a registered nurse. The professional nurse must work collaboratively with the school principal to identify appropriate staff to receive training and delegation of care.

#### 2. What tasks cannot be delegated by the RN?

- Nursing assessments.
- Nursing diagnoses.
- Establishment of nursing care goals and development of care plans.
- Evaluation of progress in relation to the plan of care.
- Tasks that do not fall in the RN scope of practice according to the Florida Nurse Practice Act.

#### 3. What is the difference between training and delegating as related to accountability?

**Training is a prerequisite to all delegation.** After completion of training, the registered nurse must document UAP competency through testing, skill verification, and continued monitoring.

#### 4. What actions should the nurse take when nursing judgment does not permit delegation of a task under current circumstances?

- Establish a local protocol for communicating and addressing these events.
- Use delegation decision tree to verify the decision not to delegate (see Appendix E).
- Articulate nursing judgment concerns to principal and nursing supervisor.
- Consult with parents, principals, and nursing supervisors to explore other solutions that provide services and protect the health and safety of students. Potential solutions may include:
  - ✓ Identify and train another UAP from existing school staff.
  - ✓ Seek a licensed provider/volunteer from a community partner.
  - ✓ Allow parent, on request to enroll student permanently or temporarily in a school where a licensed care provider is available.
  - ✓ Allow parents to have the child assigned to a school close to their workplace to accommodate parent's willingness to provide services for their child.
  - ✓ Change staffing patterns temporarily to place RN/LPN in the school until the UAP is able to perform task competently.
  - ✓ Recommend that parent/guardian/relative/friend provide care while school-based solution is prepared for implementation.

#### 5. Can health tasks be delegated to volunteers?

The use of volunteers in school health services must be consistent with local school district policy. The Public School Volunteer Health Care Practitioner Program (Section [381.00593](#), Florida Statutes) sets forth the requirements for a professional health volunteer. The volunteer should limit services to those within their professional scope of practice. The law stipulates that:

- Volunteers must have a valid, active Florida license and complete background screening in accordance with section [381.0059](#), Florida Statutes.
- School district must assume liability protection for volunteer health care practitioners.

- The CHD must supervise the program and perform periodic reviews per section [381.00563](#), Florida Statutes.

6. What is the LPN's role in delegation?

Despite the value of the LPN to the school health team, practice limitations and the highly independent nature of school health services makes delegation by the practical nurse to UAP inappropriate. The practical nurse is encouraged to assist the supervising RN in delegating to UAP by gathering pertinent health information, reporting student's response to care, and assisting in monitoring UAP skills and competencies.

The Florida Nurse Practice Act defines the scope of practice for the RN and LPN as defined in the chart below.

<b>SCOPE OF PRACTICE</b> <b>Florida Nurse Practice Act, Chapter 464, Florida Statutes</b>	
<b>RN (Professional Nurse)</b>	<b>LPN (Practical Nursing)</b>
Performance of those acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences.	Performance of selected acts.
Observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care; health teaching and counseling of the ill, injured, or infirm.	
Promotion of wellness, maintenance of health, and prevention of illness of others.	Promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist.
Administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments.	Administration of treatments and medications, in the care of the ill, injured, or infirm under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist.
Supervision and teaching of other personnel in the theory and performance of any of the above acts.	Teaching of general principles of health and wellness to the public and to students other than nursing students.
Responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.	Responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.



7. What is the UAP’s role in delegation?

The UAP cannot provide training or delegation. The UAP must be willing to receive child-specific training and demonstrate proficiency in performing the delegated task. The UAP must function within the defined parameters of delegation and notify the professional nurse when a situation exceeds their delegated authority. The role of UAP is defined by Florida Statute as delineated in the following chart.

<b>UAP ROLE IN SCHOOL HEALTH SERVICES</b> <b>Section 1006.062(3)-(5), Florida Statutes</b>	
<b>Allowed</b>	<b>Not Allowed</b>
Must successfully complete child-specific training by registered nurse, advanced practice registered nurse, physician, or physician assistant. All procedures must be monitored periodically by an RN, APRN, physician, or physician assistant (PA).	Invasive medical services that require special medical knowledge, nursing judgment, and nursing assessment.
Examples of tasks allowed: <ul style="list-style-type: none"> <li>• Intermittent clean catheterization</li> <li>• Gastrostomy tube feeding</li> <li>• Monitoring blood glucose</li> <li>• Administering emergency injectable medication</li> </ul>	Examples of tasks not allowed: <ul style="list-style-type: none"> <li>• Sterile catheterization</li> <li>• Nasogastric tube feeding</li> <li>• Cleaning and maintaining a tracheostomy and deep suctioning of a tracheostomy</li> </ul>
For all other invasive medical services, a RN, APRN, physician, or PA shall determine if UAP shall be allowed to perform such service.	

8. Can the school nurse follow parent orders?

No, the Nurse Practice Act defines the practice of professional nursing to include “The administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments.” (Section 464.003(3)(a)(2), Florida Statutes). Therefore, a school nurse can only take orders from a duly licensed practitioner.

9. How does the RN ensure safe delegation of health care tasks (procedures, treatments, medication administration) when students are on school transportation or off-campus at school-sponsored activities?

Successful field trips require collaboration and team planning among school administrators, teachers, school nurses, other school staff, parents and students. To protect student health and safety and the school district, as well as the school and the RN from liability, it is recommended that the school board have policies and procedures to ensure that school staff and UAP who accompany students off-campus receive first aid and cardiopulmonary resuscitation training, medication administration training and child-specific training, prior to the RN delegating the tasks that will need to be performed off-campus. All Florida statutes and rules mentioned herein must be complied with whether delegated tasks will be performed on campus or off-campus.

An RN may train and delegate care to school staff or UAP who are accompanying students on an out-of-state field trip. The delegation to school staff or UAP is legally and appropriately made in Florida and is not negated by crossing state lines. The child(ren) remain in the care, custody and control of the school district while on the field trip.

In the case of a CHD RN working in a school district that employs school district RNs, delegating to a school district staff person or UAP who is accompanying students on an out-of-state field trip, the delegation will extend from school hours through non-school hours for the duration of the school sanctioned event regardless of location. The training and education is not a joint activity but the responsibility of the delegating CHD RN. The school district remains responsible for the duration of the event. The school staff person or UAP will consult the CHD RN during regular school hours. If the school staff person or UAP is instructed to consult the district nurse during hours that extend beyond the regular school day, the school district nurse should be aware of the possibility of this consultation and be prepared for same. If the school district does not employ RNs, the CHD and school district may consider a memorandum of agreement for the CHD to make available an RN for after school hours consultation from a school staff person or UAP.

10. What health services may be provided by staff or volunteers under the direction of the professional school nurse?

Local policy must be used in conjunction with the table below:

PROVISION OF HEALTH SERVICES					
Tasks P = Provide; A = Assist; * Not applicable	LPN	UAP	Non-Medical School District Staff	Volunteer	
				RN	Other
Case management	P	A		P	
Child-specific training and delegation of tasks	A			P	
Data collection (i.e. health problem list, surveys, monthly statistics)	P	P	P	P	A
Determine nursing diagnosis and develop health care plan	A	A	A	P	
Develop health education curriculum				A	
Develop health policy and procedure	A			A	
First aid	P	P	P	P	P
IEP staffing/504 Plan	A			A	
Initial screenings (vision, hearing, BMI)	P	P	P	P	P
Managing communicable disease	P	A		A	
Medication administration	P	P	P	P	
Nursing assessment	A	A		P	
Perform delegated treatments as prescribed	P	P	P	P	
Provide health education	P	A		P	A
Record review (immunizations & physical exams)	P	P	P	P	P
Scoliosis initial screening, recheck, and referral	P	A	A	P	A
Screening follow-up (vision, hearing, BMI, scoliosis)	P	A	A	A	
Screening recheck (vision, hearing, BMI)	P	*	*	P	
Screening referral (vision, hearing, BMI)	P			P	
Staff wellness programs	A	A	A	A	A
Taking verbal/phone order from medical provider	P			P	

**Note:** "Assist" means assisting the professional nurse.

Appendix D

**Sample Delegation Check List**

If one or more items are checked as “no”, more in-depth preparation is recommended before delegation to UAP will be safe.

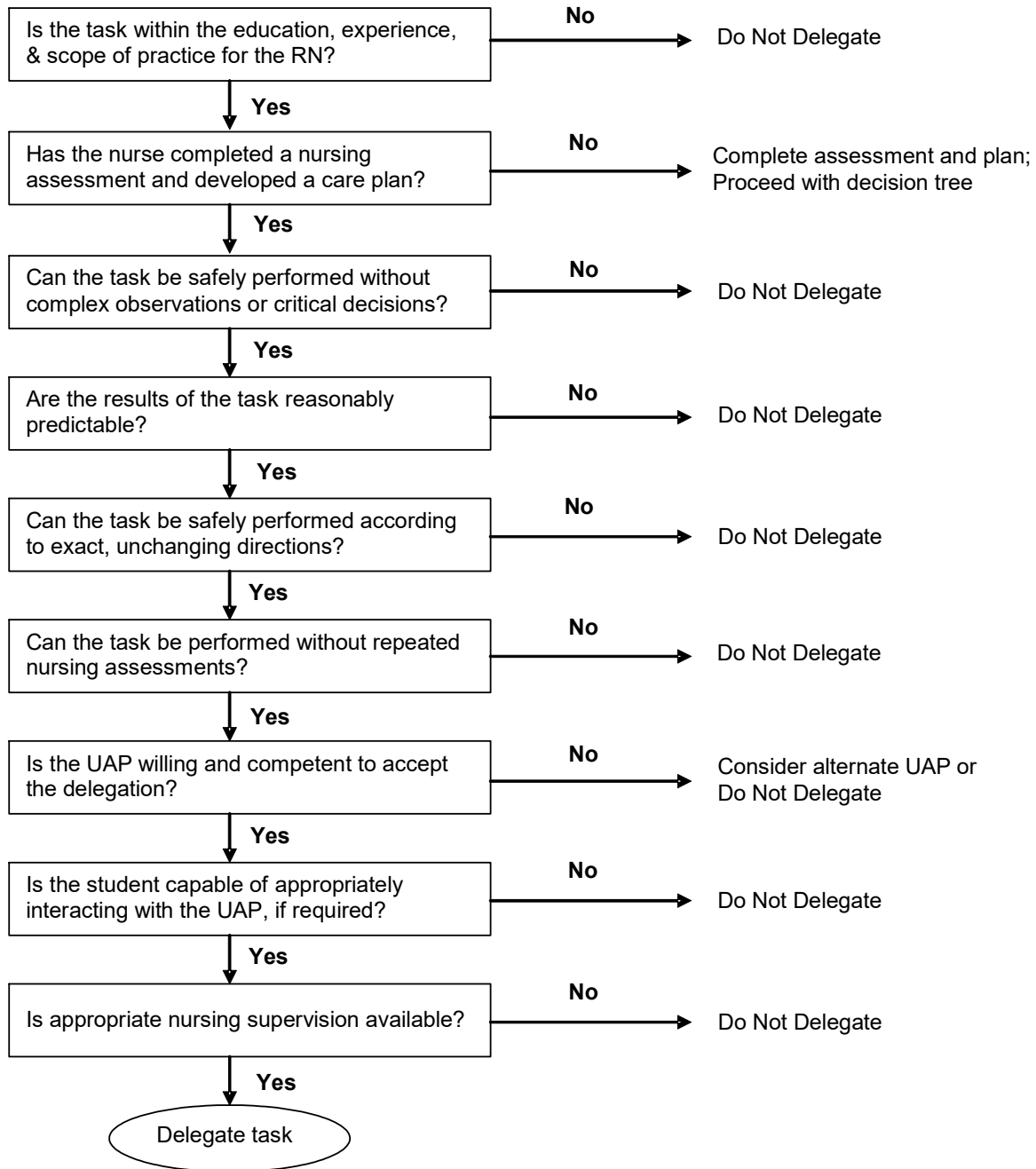
<b>Criteria for Delegation</b>	<b>Yes</b>	<b>No</b>
<b>School Registered Nurse</b>		
Has developed an Individualized Healthcare Plan (IHP) approved by parent/guardian		
Has established communication links between RN & parent/guardian, health care provider, and delegated UAP for supervision, monitoring, and consultation		
<b>Unlicensed Assistive Personnel</b>		
Has completed all necessary training		
Has demonstrated skill competence		
<b>Parent/Guardian</b>		
Has signed an agreement or approved the IHCP and the use of the selected UAP		
Has signed any required written authorizations		
Has provided all necessary equipment and supplies		
Has completed health history information forms		
Has provided all required emergency information		
<b>Student</b>		
Is medically stable		
If able, has completed initial self-care education		
If capable of performing tasks, has demonstrated skill competence		
Agrees to follow local policies & procedures		
<b>Health Care Provider</b>		
Has provided required health/medical history, information and authorization forms		
Has signed a statement indicating student’s level of independent functioning		
Has been sent a copy of IHP and notice of selected services being provided by UAP		
Has provided specific written orders related to treatment or medications		

Developed from recommendations of Diabetes Guidelines for the Care & Delegation of Care for Students with Diabetes in Florida Schools 2015.

Appendix E

**Sample Delegation Decision Tree**

(Diastat, Insulin, Epi pen, etc. or other complex emergency procedures requiring delegation)



Adapted from Ohio Board of Nursing Delegation Tree

Appendix F  
**Registered School Nursing  
Sample Delegation Policy**

**TITLE:** DELEGATION OF NURSING FUNCTIONS TO UNLICENSED ASSISTIVE PERSONNEL (UAP)

**PURPOSE:** To provide guidelines to the professional school nursing staff regarding delegation of nursing responsibilities.

**REQUIREMENTS:** The professional nurse is responsible and accountable for the quality of nursing care provided to each student receiving care in school, whether the nurse provides the care directly or through delegation.

The training and supervision of personnel providing nursing tasks is included in the legal definition of the practice of professional nursing.

**Delegation:** is the transference to a competent individual the authority to perform a selected task or activity in a selected situation by a registered nurse (RN) qualified by licensure and experience to perform the tasks or activity(ies).

**Delegator:** The RN is the delegating authority.

**Delegate:** The UAP receiving the authority from the Delegator.

Any nursing task delegated by the RN (delegator) shall be:

- Within the area of responsibility of the RN delegating the task.
- Within the knowledge, skills and ability of the RN delegating the task.
- Of a routine, repetitive nature that does not require professional judgment, ongoing assessments, interpretations or decision making of a RN.

When a student's condition is stable and the outcome of the task is predictable;

- Limited to specific UAP (delegates) within a specified time frame (i.e. school year) when ongoing supervision is provided by the RN.

The UAP (delegates) shall not further delegate the tasks delegated by the RN to another individual, nor may the tasks be expanded without the express permission of the RN (delegator).

The RN (delegator) shall assure that the UAP (delegate) can competently perform the task(s) and that the UAP is willing to assume the responsibility of performing the task(s).

**PROCEDURE:**

**RESPONSIBILITIES OF THE RN (delegator)**

1. The decision to delegate shall be based on the registered school nurse's assessment of the following:
  - An individual student's nursing care needs, including but not limited to, the complexity and frequency of the nursing care, the stability of the student's health concerns and the degree of immediate risk if the task is not carried out.

- Observation of UAP knowledge, skills, and abilities.
  - The nature of tasks being delegated, including but not limited to, the degree of invasiveness, the predictability of the outcome, the complexity of the task(s), and the potential for harm given the student-specific characteristics.
  - The available and accessible resources such as the necessary equipment, adequate supplies and other appropriate health care related personnel (e.g. school psychologist, school social worker, school counselor, health education, emergency medical service (EMS) system) to meet the student's nursing care needs.
  - The availability of the RN to appropriately supervise the UAP. Delegation shall only take place at the school, during the regular school day, and during regular school hours.
2. Annual training will be required for all district UAP assigned to school clinics, each school year prior to the first day of school. Training will be provided by the Registered School Nurses (RN) from FLDOH in \_\_\_\_\_ County and/or in collaboration with the RNs from \_\_\_\_\_ County School District.
  3. The Delegator shall instruct the UAP in the delegated tasks and verify the delegate's competence to perform the required task. The RN will monitor/observe the UAP successfully performing the required clinic duties, tasks, and skills in the school clinic setting, as needed. The RN may require additional training and observation time of any UAP's performance of clinic duties, tasks, and skills, to assess competency, depending on the medical needs of students in the school.
  4. The Delegator shall also instruct the delegate how to intervene in the event of any foreseeable risks that might be associated with the task for particular students.
  5. The Delegator shall provide ongoing evaluation of the following:
    - The degree to which the nursing care needs of the student are being met.
    - The performance of the delegated clinic duties, tasks and skills by the UAP.
    - The UAP's need for further general or student-specific instruction.
    - The need to withdraw the delegation. Refer to the School Health Program *Retracting Delegation to UAP Policy*.
  6. The RN (Delegator) is responsible for:
    - Making a decision to delegate.
    - Monitoring the skills of the delegate.
    - Following-up as needed.
  7. At the Delegator's sole discretion, the RN may refuse to delegate school health responsibilities to UAP who do not show competency to care for students' health.
  8. At the Delegator's sole discretion, the RN may require that a Delegate undergo additional training and observation before delegating to Delegate.
  9. At the Delegator's sole discretion, the RN may at any time retract delegation from any UAP.

## DOCUMENTATION

### DOCUMENTATION OF TRAINING BY THE REGISTERED NURSE INCLUDES:

1. Training techniques employed. (e.g. demonstration, lecture, written instructions/testing).
2. Specific instructions for a delegated task and broken into specific steps.
3. Date of nurse evaluation of UAP's readiness to perform.
4. Signatures and date of UAP verifying training.
5. Completion of Delegation to UAP form.
6. Ongoing documentation of supervision (e.g. methods used to supervise such as direct observation, conference, record review, and telephone consultation) shall be maintained.

### \_\_\_\_\_ COUNTY SCHOOL HEALTH PROGRAM

**TITLE:**           **RETRACTING DELEGATION TO UNLICENSED ASSISTIVE PERSONNEL (UAP) PROCEDURE**

**PURPOSE:**    To provide guidelines to the professional school nursing staff regarding retracting delegation of nursing responsibilities to UAP.

1. The decision to retract delegation shall be based solely on the school nurse's assessment and nursing judgment. A nurse may retract delegation to UAP for any reason other than a discriminatory reason. Reasons for retracting delegation, include but are not limited to the following:
  - UAP caused a medication incident that is severe and detrimental to a child's safety.
  - UAP causes a medical error in administering medications.
  - UAP fails to follow the \_\_\_\_\_ County School Health Program policy and Quality Assurance Program of filling out the incident form within 24 hours of discovering the incident; calling 911 or Poison Control if indicated, and notifying the Principal, the parent, School District Student Services Coordinator, and FL DOH School Health RN.
  - Despite additional training UAP fails to demonstrate the ability to carry out delegated tasks; or UAP breaches patient confidentiality.
2. Depending on the seriousness of the medical error, the RN(s) from the county health department and/or school district or contracted school health services provider may retrain the UAP, require a return demonstration, and document training.
3. Once a Retraction of Delegation occurs the UAP will no longer operate under the nurse's license.
4. When a Retraction of Delegation occurs, the UAP, the RN Supervisor and/or School Health Coordinator, and the school Principal will be notified.

### REFERENCES:

- Florida Nurse Practice Act: Part 1 of Chapter [464](#), Florida Statutes
- Delegation to Unlicensed Assistive Personnel: Florida Administrative Code rule [64B9-14](#)
- School Health Services Program: Section [381.0056](#), F.S.

\_\_\_\_\_ **County School Health Program**

**Registered School Nurse (RN) Delegation to Unlicensed Assistive Personnel (UAP)**  
**20\_\_ - 20\_\_ School Year**

**Employee Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **School Site** \_\_\_\_\_

The delegation process shall include communication to the UAP which identifies the task or activity, the expected or desired outcome, the limits of authority, the time frame for the delegation, the nature of the supervision required, verification of delegate's understanding of assignment, verification of monitoring and supervision. Florida Administrative Code rule [64B9-14.002\(3\)](#)

**The expected outcome for all UAP who have received delegation is to provide the students with the same standard of care provided in the training received and acknowledged.**

**Requirements for safe delegation include:**

- Current child/adult First Aid/CPR/AED with current Certification posted in clinic. Expires: \_\_\_\_\_
- Attended Annual Health Aide/Technician Training provided by the FLDOH in \_\_\_\_\_ County and/or \_\_\_\_\_ County School District **or** Completed the School District General Training test. General Training date expires: \_\_\_\_\_
- Demonstrated correct procedures for medication administration including: Epinephrine (EpiPen), Diastat, Glucagon, asthma inhalers, nebulizer treatments, topical, oral, nasal, optic and otic routes.
- RN observed UAP demonstrate competence in the school clinic setting and continues periodic monitoring.
- Completed Level I and Level II Diabetes Training.
- Level III Diabetes Care.
- Completed Level III Diabetes Training (Child-specific).  
UAP has demonstrated competence in following the Diabetes Medical Management Plan (DMMP), which clearly outlines the actions to be taken. Additional training will be required if a current student develops Diabetes, or a new student enrolls with Diabetes.
- UAP will not be trained to provide Level III Diabetes care due to minimal or inconsistent time being spent working in the school clinic.

**COMPLETED OR IN PROCESS:**  Blood borne Pathogen training,  Biomedical Waste training

**Other:** \_\_\_\_\_

**DELEGATION APPROVED:** I have determined the UAP has successfully completed training to delegate the above indicated care tasks during regular school hours for a period not to exceed the end of the current regular school year. Periodic monitoring of tasks will be performed during the school year. **THIS DELEGATION IS LIMITED TO SCHOOL GROUNDS, DURING REGULAR SCHOOL HOURS.**



**EXCEPTION(S) (NO DELEGATION):**

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DELEGATION WILL NOT BE ASSIGNED, OR IS RETRACTED**

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RN Signature: \_\_\_\_\_ Date: \_\_\_\_\_

UAP Competence: The ability to use effective communication; to collect basic objective and subjective data; to perform selected non-complex nursing activities safely, accurately, and according to standard procedures; and to seek guidance and direction when appropriate. (Role of the Professional School Nurse in the Delegation of Care in Florida Schools 09/2010).

I understand the elements of the training provided and can successfully perform the required skills. I have had the opportunity to ask questions and received satisfactory answers. I am familiar with all the procedural guidelines, and I understand that I am to follow all procedural guidelines. Upon signing this, I understand the health services that I will be providing, and I agree to perform the above health services that were delegated by the registered school nurse from FLDOH in \_\_\_\_\_ County or \_\_\_\_\_ School District. Further, I possess the training and skills and I have demonstrated competency to safely and effectively perform the health service(s) during regular school hours for a period not to exceed the last day of the 20\_\_ - 20\_\_ School Year, or until the delegation is retracted by the registered school nurse from FLDOH in \_\_\_\_\_ County or \_\_\_\_\_ County School District. I understand that the Delegator (RN) will monitor and observe my continued performance as a UAP.

The time frame for this Delegation is for the 20\_\_-20\_\_ School Year, or earlier if this Delegation is Retracted.

Delegate's Name: \_\_\_\_\_

Delegate's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

UAP/School Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Appendix G

**Tools for Documenting Skills and Supervision**

**SAMPLE SKILLS CHECKLIST – GLUCAGON INJECTION**

Student's Name: \_\_\_\_\_

Instructor: \_\_\_\_\_

Trainee's Name: \_\_\_\_\_

Explanation/Return Demonstration	Demo Date	Date	Date	Date	Date
1. Observes student for signs of unresponsiveness					
2. Places student on his side					
3. Obtains Glucagon from the health room					
4. Prepares injections according to package directions					
5. Checks expiration date on Glucagon					
6. Withdraws Glucagon from vial					
7. Cleanses area of skin with alcohol swab					
8. Gives injection. Applies light pressure when withdrawing needle					
9. States that student should be placed on side after injection due to possible vomiting					
10. States when snack should be given to student					
11. Documents procedure on appropriate form					

*Adapted from the Escambia County School Health Services Programs (August 2001).*

Appendix H

Plan for Supervision and Evaluation of Unlicensed Assistive Personnel (UAP)

Name of Procedure or Medication/Route: \_\_\_\_\_

<b>Method of Supervision</b>	
<input type="checkbox"/> Direct observation of Delegate	<input type="checkbox"/> Conference with Delegate
<input type="checkbox"/> Record Review (Review of Student's Procedure Record) Nurse or Nursing Supervisor **	<input type="checkbox"/> Telephone Consultation by School
<i>** Unlicensed Assistive Personnel (UAP)/Paraprofessional has been informed of the signs, symptoms, and/or complications that require an immediate call to the school nurse or nursing supervisor.</i>	
<b>Evaluation</b>	
Evaluation of UAP/Paraprofessional will be performed once every:	
<input type="checkbox"/> month <input type="checkbox"/> 2 months <input type="checkbox"/> 3 months <input type="checkbox"/> semester <input type="checkbox"/> 6 months <input type="checkbox"/> school year	
<b>Specified Health Procedure Needs are Being Met by Delegate</b>	
Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)	Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)
Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)	Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)
Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)	Date: _____ <input type="checkbox"/> Procedure performed competently ** <input type="checkbox"/> Additional training required <input type="checkbox"/> Procedure not performed competently (delegation withdrawn)
<i>**UAP/Paraprofessional performs delegated task competently as evidenced by performing task according to the procedure skills checklist.</i>	
<input type="checkbox"/> Additional training performed	Date: _____
<input type="checkbox"/> Delegation withdrawn	Date: _____

Comments: \_\_\_\_\_

Plan implemented on: \_\_\_\_\_  
Date
Signature of Registered School Nurse

UAP/Delegate Name: \_\_\_\_\_

UAP/Delegate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pull at the end of the school year and store with Student Treatment Record.

*Adapted from the Escambia County School Health Services Programs (July 2003).*

## Appendix I

### Glossary of Terms

**Accountability:** Being responsible and answerable for actions or inactions of self or others in the context of delegation. (*Delegation: Concepts and Decision-Making Process*, National Conference of School Board Nurses (NCSBN))

**Assignment:**

1. Normal daily functions of UAP based on institutional or agency job duties which do not involve delegation of nursing functions or nursing judgment. (Florida Administrative Code rule [64B9-14.001](#))
2. Designating nursing activities to be performed by an individual consistent with his/her licensed scope of practice. (*A Conceptual Framework for Continued Competence*, NCSBN)
3. The downward or lateral transfer of both the responsibility and accountability of an activity from one individual to another. The lateral or downward transfer must be made to an individual of skill, knowledge, and judgment. The activity must be within the individual's scope of practice. (Excellence in School Nursing (ESN) Workshop, 10/2004)

**Authority:** The source of the power to act. (*Delegation: Concepts and Decision-Making Process*, NCSBN)

**Competency:** Demonstrated ability to carry out specified tasks or activities with reasonable skill and safety that adheres to the prevailing standard of practice in the nursing community. (Florida Administrative Code rule [64B9-14.001](#))

**Complex Observations:** Watching and monitoring simultaneous elements of complicated client situations, which may involve intricate measurements, require immediate analysis and which may result in changes in the planned intervention. (*Merriam Webster's Collegiate Dictionary*)

**Critical Decisions:** Those determinations that are important junctures or turning points, which have significant impact on the outcome of a situation. (*Merriam Webster's Collegiate Dictionary*)

**Delegation:**

1. Transference to a competent individual the authority to perform a selected task or activity in a selected situation by a nurse qualified by licensure and experience to perform the task or activity. (Florida Administrative Code rule [64B9-14.001](#))
2. The transfer of responsibility for the performance of an activity from one individual to another, with the former retaining the accountability for the outcome. (American Nurses' Association, 1994, p.11)
3. Transferring to a competent individual the authority to perform a selected nursing task in a selected situation. The nurse retains accountability for the delegation. (*Delegation: Concepts and Decision-Making Process*, National Council of State Boards of Nursing [NCSBN])

**Delegatee/Delegate:**

1. UAP receiving the authority from the delegator. (Florida Administrative Code rule [64B9-14.001](#))
2. The person receiving the delegation. (*Delegation: Concepts and Decision-Making Process*)
3. The individual to whom a nurse delegates authority to perform a selected nursing activity in a selected situation. (Schwab & Gelfman: *Legal Issues in School Health Services*, p. 611)

**Delegator:**

1. Registered nurse or licensed practical nurse delegating authority to UAP. (Ch. (Florida Administrative Code rule [64B9-14.001](#)))

2. The person making the delegation. (*Delegation: Concepts and Decision-Making Process*, NCSBN)

**Nursing Assessment:** The establishment of a database through the gathering of objective and subjective information relative to a client, confirmation of the data, and communication of the information. (*NCLEX-RN Test Plan*, NCSBN)

**Nursing Judgment:**

1. Intellectual process that a nurse exercises in forming an opinion and researching a conclusion by analyzing data. (Florida Administrative Code rule [64B9-14.001](#))
2. Process by which nurses come to understand the problems, issues or concerns of clients, to attend to salient information and to respond to client problems in concerned and involved ways. Includes both conscious decision-making and intuitive response. (Benner: *Expertise in Nursing Practice: Caring, Clinical Judgment and Ethics*)

**Supervision:**

1. Provision of guidance by a qualified nurse and periodic inspection by the nurse for the accomplishment of a nursing task or activity, provided the nurse is qualified and legally entitled to perform such task or activity. The supervisor may be the delegator or a person of equal or greater licensure to the delegator. (Florida Administrative Code rule [64B9-14.001](#))
2. Provision of guidance or direction, evaluation and follow-up by the licensed nurse for accomplishment of a nursing task delegated to unlicensed assistive personnel. (*Delegation: Concepts and Decision-Making Process*, NCSBN)
3. Active process of directing, guiding and influencing the outcome of an individual's performance of an activity. Supervision is generally categorized as on-site (the nurse being physically present or immediately available while the activity is being performed) or off-site (the nurse has the ability to provide direction through various means of written and verbal communication). (Excellence in School Nursing Workshop, October 2004)

**Supervision, Direct:** Supervisor is on the premises but not necessarily immediately physically present where the tasks and activities are being performed. (Florida Administrative Code rule [64B9-14.001](#))

**Supervision, Immediate:** Supervisor is on the premises and is physically present where the task or activity is being performed. (Florida Administrative Code rule [64B9-14.001](#))

**Supervision, Indirect:** Supervisor is not on the premises but is accessible by two-way communication, is able to respond to an inquiry when made, and is readily available for consultation. (Florida Administrative Code rule [64B9-14.001](#))

**Training:** Learning of tasks by UAP through on the job experience or instruction by a nurse who has the education or experience to perform the task or activity to be delegated. (Florida Administrative Code rule [64B9-14.001](#))

**Unlicensed Assistive Personnel (UAP):**

1. Persons who do not hold licensure from the Division of Health Quality Assurance of the Department of Health but who have been assigned to function in an assistive role to registered nurses or licensed practical nurses in the provision of patient care services through regular assignments or delegated tasks or activities and under the supervision of a nurse. (Florida Administrative Code rule [64B9-14.001](#))
2. Any unlicensed personnel, regardless of title, to whom nursing tasks are delegated. (*Delegation: Concepts and Decision-Making Process*, NCSBN)

**UAP Competence:** The ability to use effective communication; to collect basic objective and subjective data; to perform selected non-complex nursing activities safely, accurately, and

according to standard procedures; and to seek guidance and direction when appropriate.  
(*Nebraska Board of Nursing Rules, NCSBN*)

**Validation:** Ascertaining the competency including psychomotor skills of the UAP, verification of education or training of the UAP by the qualified individual delegating or supervising the task based on pre-established standards. Validation may be by direct verification of the delegator or assurance that the institution or agency has established and periodically reviews performance protocols, education or training for UAP. (Florida Administrative Code rule [64B9-14.001](#))