## SECOND SUBSTITUTE SENATE BILL 6220

State of Washington60th Legislature2008 Regular SessionBy Senate Ways & Means (originally sponsored by Senators Keiser,<br/>Parlette, Pflug, Prentice, and Kohl-Welles)by Senators Keiser,

READ FIRST TIME 02/12/08.

AN ACT Relating to delegation of nursing tasks to care for persons with diabetes; amending RCW 18.79.260 and 18.88A.210; and creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. Sec. 1. (1) The legislature finds that Washington state has developed a strong community-based long-term care system in 6 an effort to honor the desire of elderly persons and persons with 7 8 disabilities to live in their own home or other home-like settings and to provide long-term care services in a cost-effective manner. 9 The legislature further finds that more than fifteen percent of adults over 10 age sixty-five in Washington state have diabetes. 11 Current nurse 12 delegation statutes limit the ability of elderly and disabled persons with diabetes to remain in their own homes or in other home-like long-13 14 term care settings.

15 (2) It is the intent of the legislature to modify nurse delegation 16 statutes to enable elderly persons and persons with disabilities who 17 have diabetes to continue to reside in their own home or other 18 home-like settings. While blood glucose testing is already a task that 19 can be delegated, the legislature intends to authorize nurse delegation of administration of insulin injections as provided in this act. For publicly funded clients of the department of social and health services, the legislature intends that nurse delegation of administration of insulin injection be provided only for those clients who are unable to inject themselves and who do not have an appropriate informal support system to assist with insulin injections.

7 Sec. 2. RCW 18.79.260 and 2003 c 140 s 2 are each amended to read 8 as follows:

9 (1) A registered nurse under his or her license may perform for 10 compensation nursing care, as that term is usually understood, to 11 individuals with illnesses, injuries, or disabilities.

(2) A registered nurse may, at or under the general direction of a 12 licensed physician and surgeon, dentist, osteopathic physician and 13 surgeon, naturopathic physician, podiatric physician and surgeon, 14 physician assistant, osteopathic physician assistant, or advanced 15 16 registered nurse practitioner acting within the scope of his or her 17 license, administer medications, treatments, tests, and inoculations, whether or not the severing or penetrating of tissues is involved and 18 whether or not a degree of independent judgment and skill is required. 19 20 Such direction must be for acts which are within the scope of 21 registered nursing practice.

(3) A registered nurse may delegate tasks of nursing care to other
 individuals where the registered nurse determines that it is in the
 best interest of the patient.

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(a) The delegating nurse shall:

26 (i) Determine the competency of the individual to perform the 27 tasks;

28 (ii) Evaluate the appropriateness of the delegation;

29 (iii) Supervise the actions of the person performing the delegated 30 task; and

31 (iv) Delegate only those tasks that are within the registered 32 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.

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1 (c) Except as authorized in (b) or (e) of this subsection, a 2 registered nurse may not delegate the administration of medications. 3 Except as authorized in (e) of this subsection, a registered nurse may 4 not delegate acts requiring substantial skill, and may not delegate 5 piercing or severing of tissues. Acts that require nursing judgment 6 shall not be delegated.

7 (d) No person may coerce a nurse into compromising patient safety 8 by requiring the nurse to delegate if the nurse determines that it is 9 inappropriate to do so. Nurses shall not be subject to any employer 10 reprisal or disciplinary action by the nursing care quality assurance 11 commission for refusing to delegate tasks or refusing to provide the 12 required training for delegation if the nurse determines delegation may 13 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, <u>diabetic insulin</u>
<u>device set up</u>, <u>verbal verification of insulin dosage for sight-impaired</u>
<u>individuals</u>, or other tasks as defined by the nursing care quality
assurance commission are exempted from this requirement.

21 "Community-based care settings" includes: (i) Community 22 residential programs for ((the developmentally disabled)) people with developmental disabilities, certified by the department of social and 23 24 health services under chapter 71A.12 RCW; adult family homes licensed under chapter 70.128 RCW; and boarding homes licensed under chapter 25 26 18.20 RCW. Community-based care settings do not include acute care or 27 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. ((However)) 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.

7 (v) When delegating insulin injections under this section, the registered nurse delegator must instruct the individual regarding 8 proper injection procedures and the use of insulin, demonstrate proper 9 injection procedures, and must supervise and evaluate the individual 10 performing the delegated task weekly during the first four weeks of 11 delegation of insulin injections. If the registered nurse delegator 12 13 determines that the individual is competent to perform the injection 14 properly and safely, supervision and evaluation shall occur at least every ninety days thereafter. 15

16 (vi) The registered nurse shall verify that the nursing assistant 17 has completed the required core nurse delegation training required in 18 chapter 18.88A RCW prior to authorizing delegation.

19 ((<del>(vi)</del>)) <u>(vii)</u> The nurse is accountable for his or her own 20 individual actions in the delegation process. Nurses acting within the 21 protocols of their delegation authority are immune from liability for 22 any action performed in the course of their delegation duties.

(((vii))) (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.

31 (4) Only a person licensed as a registered nurse may instruct32 nurses in technical subjects pertaining to nursing.

33 (5) Only a person licensed as a registered nurse may hold herself 34 or himself out to the public or designate herself or himself as a 35 registered nurse.

36 **Sec. 3.** RCW 18.88A.210 and 2003 c 140 s 5 are each amended to read 37 as follows:

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(1) A nursing assistant meeting the requirements of this section
 who provides care to individuals in community-based care settings or
 in-home care settings, as defined in RCW 18.79.260(3), may accept
 delegation of nursing care tasks by a registered nurse as provided in
 RCW 18.79.260(3).

6 (2) For the purposes of this section, "nursing assistant" means a 7 nursing assistant-registered or a nursing assistant-certified. Nothing 8 in this section may be construed to affect the authority of nurses to 9 delegate nursing tasks to other persons, including licensed practical 10 nurses, as authorized by law.

11 (3)(a) Before commencing any specific nursing care tasks authorized 12 under this chapter, the nursing assistant must ((<del>(a)</del>)) <u>(i)</u> provide to 13 the delegating nurse a certificate of completion issued by the department of social and health services indicating the completion of 14 15 basic core nurse delegation training, (((b))) (ii) be regulated by the department of health pursuant to this chapter, subject to the uniform 16 17 disciplinary act under chapter 18.130 RCW, and ((<del>(c)</del>)) <u>(iii)</u> meet any 18 additional training requirements identified by the nursing care quality 19 assurance commission. Exceptions to these training requirements must adhere to RCW 18.79.260(3)(e)(((<del>v)</del>)) (vi). 20

21 (b) In addition to meeting the requirements of (a) of this subsection, before commencing the care of individuals with diabetes 22 that involves administration of insulin by injection, the nursing 23 24 assistant must provide to the delegating nurse a certificate of completion issued by the department of social and health services 25 indicating completion of specialized diabetes nurse delegation 26 27 training. The training must include, but is not limited to, instruction regarding diabetes, insulin, sliding scale insulin orders, 28 and proper injection procedures. 29

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