We have heard from Assisted Living Managers and Delegating Nurses that there is uncertainty about the role of the Delegating Nurse and his/her responsibilities. The Maryland Board of Nursing has worked with OHCQ to provide training to Delegating Nurses and to identify sources of authority for their responsibilities. It is the responsibility of the Assisted Living Manager, who oversees the day-to-day operations of the program and is responsible for providing or ensuring provision of access to medical and psychosocial care, to support the Delegating Nurse as he/she complies with the responsibilities outlined in this memorandum.

I. REGULATIONS WHICH GOVERN THE REGISTERED NURSE CASE MANAGER/DELEGATING NURSE’S PRACTICE IN ASSISTED LIVING:

A. The Maryland Nurse Practice Act cites to include but not limited to the Regulations governing:
   1. The Registered Nurse Standards of Practice (COMAR 10.27.09).
   2. The Delegated Nursing Function Regulations (COMAR 10.27.11).

B. The Regulations Governing Assisted Living Programs, (COMAR 10.07.14) which are issued by the Department of Health and Mental Hygiene.

RESPONSIBILITY OF CASE MANAGER/DELEGATING NURSE:

A. The registered nurse who serves as the case manager/ delegating nurse (RN, CM/DN) must complete the Maryland Board of Nursing and OHCQ approved case manager/delegating nurse curriculum offered by a community college and other approved educational sites prior to serving as a delegating nurse. The RN, CM/DN may:
   1. Teach the medication administration training program;
   2. Serve as the case manager/delegating nurse in Assisted Living.

B. The registered nurse who agrees to serve as the case manager/delegating nurse is responsible for the delegating medication administration and supervision of medication administration to residents in assisted living settings in compliance with COMAR 10.27.11.
3. This responsibility includes:
   a. perform an initial and 45 day assessment during the site visit to the home. The follow-up visit must occur at a minimum of every forty-five (45) days
   b. assessing the clinical status of the client every 45 days.
   c. assessing the competency of the medication assistant administering medication at the same time as the 45 day site visit.
   d. assessing the task to be delegated included complexity.
   e. assessing the environment in which the task is to be performed.
   f. determining the instruction and frequency of supervision required to monitor the caregiver.

4. The Registered Nurse Case Manager/Delegating Nurse may only delegate medication administration to an individual who has completed a Board approved Medication Administration Training Program for Assisted Living and who is certified with the Board as a Medication Technician.

5. The RN, CM/DN must document the 45 day visit by entering the patient’s assessment onto the medical record and leaving instructions for the Medication Assistant/Medication Technician for monitoring activities.

6. A registered nurse may NOT present him/herself to an assisted living facility by limiting their activities to “Medication Review” and only examining the medication record.

7. The RN, CM/DN must follow the standards for delegating (COMAR 10.27.09) and the Delegated Nursing Function Regulations (COMAR 10.27.11) when delegating.

II. NURSING DOCUMENTS

The RN, CM/DN, upon completion of the required training which has been approved by the Maryland Board of Nursing and the Office of Health Care Quality, has been provided with suggested tools for use as each exists or may modify a tool in order to meet the needs of the resident population you are serving.

It is the resident population and the individual resident’s clinical status which is the critical foundation for determining what nursing functions can be delegated, to whom, under what condition and at what frequency.

III. THE FOLLOWING NURSING DOCUMENTS AND TOOLS HAVE BEEN PROVIDED TO THE RN, CM/DN TO ASSIST IN PROVIDING NURSING CARE TO YOUR ASSISTED LIVING RESIDENTS:

- Sample Initial Nursing Assessments
- Sample 45 day Nursing Assessments
- Sample Medication Assistant/Medication Technician Contact Record
- Sample Drug Regime Review Form
- Sample Client Assessment - Independent Self Administration of Medication
- Sample Assessment-What the Client Knows about taking his/her medication
- Delegating Nurse Checklist for Assisted Living Facility
- Educational Guidelines for Delegating Nurse/AL Manager for Initial Nursing Visit
- Educational Guidelines for AL Manager and Delegating Nurse-45 day Nursing Assessment
- Educational Guidelines for AL Manager: When to Call Delegating Nurse
- Guidelines for Delegating Nurse and AL Manager to Identify Medication Errors
- Sample Guidelines - Documenting Disciplinary Action for Medication Errors
- Sample Medication Error Incident Report Form
- Medication Assistant: Observational Checklist
- Medical Appointment Record (going to the Doctor Form)
- Family medication Sign out Sheet
- Skin Integrity Log
- Bowel Function Log
- Behavior Tracking Log
- Insomnia Tracking Log
- Coumadin Monitoring Log
- Medication Technician Authorization Form
- Nursing Delegation Grid
IV. SERVICES THE REGISTERED NURSE CASE MANAGER/DELEGATING NURSE MAY PERFORM:

A. The Health Care Practitioner Physical Assessment (see COMAR 10.07.14.09 (A) and (B)).

B. The resident’s current medication profile to be completed within 14 days of the resident’s admission (COMAR 10.07.14.21(C) and (D)).

C. The on-site quarterly review for the resident who self-administer’s medication but requires assistance (see COMAR 10.07.14.21 (F) (G) and (I)).

D. Teach the Medication Technician Training Program (see COMAR 10.07.14.21 (K)(1)(b) and (K)(7)).

E. Teach the required Medication Technician Clinical Update.

F. Serve as the RN, CM/DN by authorizing the Medication Technician to administer medications to Assisted Living residents. (see COMAR 10.07.14.21 (J), COMAR 10.27.09 and COMAR 10.27.11).

V. NURSING DETERMINATION OF APPROPRIATE NURSING STAFF

The RN, CM/DN utilizes the following documents to assist in determining when a CNA is needed to care for the assisted living resident:

A. The Delegation of Nursing Function Regulations COMAR 10.27.11 and the Office of Health Care Quality Regulations COMAR 10.07.14 address level of care. These regulations assist the RN, CM/DN in determining if a certified nursing assistant (CNA) is necessary in order to be able to care for the client given the client’s needs.

1. OHCQ regulations addressing levels of care describe the abilities that staff shall have in order to be able to provide the level of care and services that a client at level 1, level II or level III may require. As the level of care increases, the skill of staff must also increase in order to care for the client safely.

2. The RN, CM/DN assessment of the client, the OHCQ regulations COMAR 10.07.14 and the Delegated Nursing Functions Regulations COMAR 10.27.11 from the Nurse Practice Act that will assist in determining:
   a. Can someone without any training care for this client?
   b. Can someone with simple directions from the RN,CM/DN care for this client? or,
   c. Are the skills and training of the certified nursing assistant necessary to provide safe care for the client?

B. The RN, CM/DN has five documents to assist with determining whether a certified nursing assistant, or an unlicensed individual staff member may care for an individual client. These documents include but are not limited to:

1. Delegated Nursing Function Regulations (COMAR 10.27.11) which requires the registered nurse to assess:
   a. the client for chronicity, stability and predictability;
   b. the skills the care giver needs to competently perform the task;
   c. the complexity of the task to be delegated;
   d. the environment in which the task is be performed; and
   e. the instruction and supervision required to monitor the care giver.
2. The Maryland Board of Nursing Regulations Governing the Standards of Practice for the Registered Nurse (COMAR 10.27.09) which requires the nurse when delegating, to delegate to:
   a. individuals competent to perform the delegated acts;
   b. instruct, direct and regularly evaluate the performance of the task by the person to whom the task(s) were delegated; rectify a situation when the nursing task is performed incorrectly; and,
   c. prohibit continued performance when the task is performed incompetently.

3. The Regulations Governing Assisted Living (COMAR 10.07.14.04) describe the knowledge and skill staff must have in order to care for clients who are considered Level I, Level II and Level III.

4. The Resident Assessment Form completed by a licensed health care provider and the Assisted Living Manager (or his or her designee) including the individual client’s level of care which was completed at the time of the client’s admission to the facility.

5. The Delegation Decision Making Grid which is a tool that provides a scoring mechanism for seven essential elements that should be considered when making delegation decisions. The rating of the seven identified elements assist the nurse to evaluate: client needs, available resources to support the delegating decisions and the circumstances surrounding delegation. A low score would indicate the activity may be considered for delegation, a high score would indicate caution against delegation.

VI. HELPFUL WEB SITES

MBON Web site www.mbon.org
Click on Nursing practice and Regulations, and then click on:
   1. RN CM/DN 16 hours training program in Assisted Living: Approved educational forms
   2. RN, CM/DNs approved to teach the 20 hours Medication Technician Training Program and to delegate nursing functions in Assisted Living.

Office of Health Care Quality Web site www.dhmh.state.md.us/ohcq
   • For what is new click on Alerts and Newsletters
   • For Assisted Living Assessment Tool Forms and to download the order form for the video on Cuing and Coaching click on Assisted Living Forms

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