



# EAP, RN, AAP, UAP, CNA, TA ... Delegation in School Health

2022

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EAP, RN, TA, **UAP**, CAN, AAP, SAAP

- UAP – Unlicensed Assistive Personnel
- Any unlicensed personnel, regardless of title, who may participate in patient care activities through the delegation process.

**Teacher, teacher's aide,  
administrative assistant,  
school bus driver, coach, ...**

We use many acronyms in schools, and in school health. This discussion is around one specific acronym – the Unlicensed Assistive Personnel (UAP), their role, the process of delegation, and who may assign the tasks for the UAP to perform. A UAP may be a teacher who gives insulin injections to a student, a school secretary distributing daily medication, or a nursing assistant. Any school staff member performing a medical task would be considered a UAP (General Assembly Program Evaluation Division, 2017).

<b>Why is the School Nurse a Registered Nurse?</b>			
School Health Activity	Registered Nurse (RN) ( <b>Bolded</b> activities may only be completed by the RN)	School Nurse Extender (Require ongoing practice supervision and direction from RN)	
		Licensed Practical Nurse (LPN)	Unlicensed Assistive Personnel (UAP)*
<b>Health Care Plans (IHP/EAP/504/IEP)</b>	<b>Develop, implement and evaluate health plans. Update with changes.</b>	Implement health plans under RN direction/supervision. Report student progress to RN.	Complete assigned tasks per training and protocol under supervision of school nurse.
<b>Medication</b>	<b>Review orders and assess for clarity and need at school. Monitor expected student response and side effects. Manage medication administration process in the school setting. Provide training and assure competence of staff.</b>	Administer ordered medications as assigned by RN per local policy. Report student response and/or concerns to the school nurse. May teach medication administration but may not determine competence.	Administer ordered medications as directed by RN per local policy. Report student response and/or concerns to the school nurse.

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Shown is an excerpt from an available one-page summary to use when educating staff and administrators on why a school nurse must be an RN and the role of the school nurse extender (other licensed people like an LPN, or someone functioning in the UAP role). This can serve as a reminder to school staff when explaining roles. Can discuss the areas that are outlined in the chart.

## Why use UAP?

**Use of UAP can free the school nurses' time to allow license dependent activities:**

- **assess, plan, provide complex nursing care, and evaluate outcomes that contribute to the education of students with special health care needs**
- **care coordination and development of plans such as IHPs, Emergency Action Plans (EAP)**
- **Collaboration with 504 plans and Individualized Educational Plans (IEPs) teams related to specialized healthcare needs of identified students**

**Use of UAP allow for some student care to occur in the physical absence of the school nurse:**

- **Nurse has more than one school**
- **More than one task is to be performed at the same time in a school building.**

In North Carolina, UAPs perform about 60% of all health services provided in schools (North Carolina General Assembly Program Evaluation Division (2017). The National Association of School Nurses reports that UAP are a valuable part of the school health program. By delegating tasks to the UAP, a school nurse is left with more available time to address the more complex requirements that must be completed by an RN. If UAP are used in the school setting, appropriate steps must be taken to ensure the competency of the UAP in performing assigned tasks (NASN, 2015).

With the ratio of students to school nurses, and the more complex health issues that students attending school are facing, there are many cases where a school nurse may not be present to perform certain tasks. These tasks may include predictable tube feedings, catheterizations, medication administration, fingerstick blood sugars and much more.

## Definitions

**Designate:** to name or indicate

The principal may designate the school staff to perform a task delegated by the school nurse.

**Delegate:** the process for a nurse to direct another person to perform nursing tasks and activities within a BON structure.

The school nurse is accountable for the outcome of delegation as it is transferring the responsibility of a nursing task to another person (UAP).

Although a principal can indicate (designate) who may perform these tasks, only a registered nurse, the school nurse, can delegate the task. Delegation is a regulated process. The ANA defines delegation as the process for a nurse to direct another person to perform nursing tasks and activities.

According to the ANA's scope and standards of practice school nursing, the school nurse is accountable for delegation and must follow state law, upholding the standards of school nursing practice. It is the responsibility of the school nurse to decide when delegation is not appropriate due to student safety, legal issues or regulatory reasons (ANA, 2017). In addition, sometimes the individual designated by the principal may turn out to not be a good fit (give some reasons).

**Article 25A.**  
**Special Medical Needs of Students.**

**§ 115C-375.1. To provide some medical care to students.**

- It is within the scope of duty of teachers, including substitute teachers, teacher assistants, student teachers, or any other public school employee when authorized by the board of education or its designee, (i) to administer any drugs or medication prescribed by a doctor upon written request of the parents, (ii) to give emergency health care when reasonably apparent circumstances indicate that any delay would seriously worsen the physical condition or endanger the life of the pupil, and (iii) to perform any other first aid or lifesaving techniques in which the employee has been trained in a program approved by the State Board of Education. No employee, however, shall be required to administer drugs or medication or attend lifesaving techniques programs.
- Any public school employee, authorized by the board of education or its designee to act under (i), (ii), or (iii) above, shall not be liable in civil damages for any authorized act or for any omission relating to that act unless the act or omission amounts to gross negligence, wanton conduct, or intentional wrongdoing. Any person, serving in a voluntary position at the request of or with the permission or consent of the board of education or its designee, who has been given the authority by the board of education or its designee to act under (ii) above shall not be liable in civil damages for any authorized act or for any omission relating to the act unless the act amounts to gross negligence, wanton conduct, or intentional wrongdoing.
- At the commencement of each school year, but before the beginning of classes, and thereafter as circumstances require, the principal of each school shall determine which persons will participate in the medical care program. (2005-22, s. 2(b); 2006-264, ss. 57(a), (c).)

**“It is within the scope of Duty of teachers, teachers’ assistants, substitute teachers or other public school employees ...**

**“The Principal of each school shall determine which persons will participate in the medical care program.”**

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What does the general statute say about school staff tending to the special healthcare needs of students? According to General Statute 115C-375.1 it is within the responsibilities of school staff to perform necessary medical tasks such as medication administration, and care needed in school, when appropriately trained. The Principal will determine (designate) the person to complete these tasks. Three things are required for school staff to participate in these activities: physician prescription, parental authorization, and training. The recognized standard for the training is instruction from the school nurse and is a part of the delegation process.

**NC BOARD OF NURSING**

**21 NCAC 36 .0401 ROLES OF UNLICENSED PERSONNEL**

(a) Definitions. As used in Section .0400: (1) "Nursing care activities" means activities performed by unlicensed personnel that are delegated by licensed nurses in accordance with paragraphs (b) and (c) of this Rule. (2) "Patient care activities" means activities performed by unlicensed personnel if health care needs are incidental to the personal care required. (b) The Board, as authorized by G.S. 90-171.23(b)(1)(2)(3), shall determine those nursing care activities that may be delegated to unlicensed personnel. The registered and licensed practical nurse, in accordance with 21 NCAC 36 .0224 and .0225 and G.S. 90-171.20(7)(8), may delegate nursing care activities to unlicensed personnel, regardless of title, that are appropriate to the level of knowledge, skill, and validated competence of the unlicensed personnel. (c) Those nursing care activities that may be delegated to unlicensed personnel shall be determined by the following variables: (1) knowledge and skills of the unlicensed personnel; (2) verification of clinical competence of the unlicensed personnel by a registered nurse employed by the agency. (3) stability of the client's condition, which involves predictability, absence of risk of complication, and rate of change, and which excludes delegation of nursing care activities that do not meet the requirements defined in 21 NCAC 36 .0221(b); (4) the variables in each service setting, which include: (A) the complexity and frequency of nursing care needed by a given client population in the practice setting in which the nurse practices; (B) the proximity of clients to staff in the practice setting in which the nurse practices; (C) the number and qualifications of staff in the practice setting in which the nurse practices; (D) the accessible resources; and (E) established policies, procedures, practices, and channels of communication that lend support to the types of nursing activities being delegated, or not delegated, to unlicensed personnel in the practice setting in which the nurse practices. History Note: Authority G.S. 90-171.20(2)(4)(7)d., e.g.; 90-171.43(4); 90-171.55; 42 U.S.C.S. 1396i-3 (1987); Eff. March 1, 1989; Amended Eff. December 1, 1995; October 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. January 9, 2018; Amended Eff. January 1, 2019.

**"The registered nurse may delegate nursing care activities to unlicensed personnel, regardless of title, that are appropriate to the level of knowledge, skill, and validated competence of the unlicensed personnel.**

**In an organization like a school system, UAP supervision is the responsibility of the School Nurse - only an RN has the authority to delegate nursing tasks to a non-nurse (UAP).**

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What does the BON say about delegation? According to the Board of Nursing (BON), a registered nurse is the only professional that has the authority to delegate to a UAP in a setting such as a school.

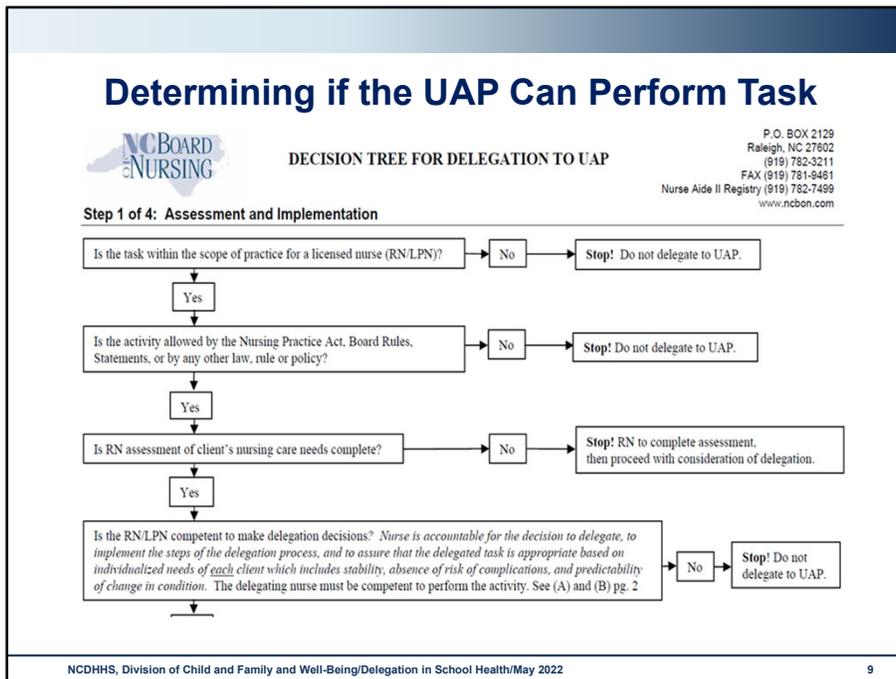
## When can a UAP perform nursing care activities (tasks)?

After these 4 steps are completed:

1. Designated by the principal.
2. Trained by the school nurse (RN).
3. Validated by the school nurse (RN).
4. Assigned by the school nurse (RN).

***Validation of UAP - A process for the RN to ensure the UAP has the skills, knowledge and behaviors to methodically perform the right competencies to do the work that is required. – NC BON***

Once the principal has designated the person to perform the needed task, it is up to the school nurse to determine if the person designated will be an appropriate person to perform the task. The nurse will train the UAP, following specific guidelines on how to perform the assigned task, and what to do if there is an issue. Once trained, the school nurse must then validate that the UAP is able to perform the assigned task (competence). When competence is assured the school nurse may then assign that task to the UAP.



In determining if a task is appropriate for a UAP to perform, consider the NC BON decision tree.

## How will we train?

- Steps needed to carry out nursing activity - check list, procedure
  - Demonstration of competency - Teach-back, return demonstration
  - Communication plan
  - Emergency plan
- 
- **\*A parent may provide guidance and input, but final training must be performed by the School Nurse**

Discuss role of parent. The RN must do the training. Discuss the need for a Plan of Care.

## How will we validate?

1. RN observes UAP performing tasks.
2. RN documents on UAP Competency Checklist.
3. RN and UAP sign and date.
4. Validation occurs during training, repeated annually, and as needed for the addition of new skills.

RN "I have validated that \_\_\_\_\_ has demonstrated competency in these skills and is able to accept the delegation of these tasks."

UAP "I \_\_\_\_\_ agree I have received training, successfully completed a competency validation, and accepted responsibility for the tasks for which I have been trained. I will request guidance from the nurse and additional training as needed."

The RN should keep on file the competency checklist for the task to be performed by the UAP. Record of training.

## Steps to Delegation



School district should develop a policy for using/training UAP with the input of the school nurse/lead nurse.



School Health Program develops customized UAP Competency Checklist.



Communicate to staff/administration.



Create/edit procedures as needed.

Steps that the school health program/LEA should take to ensure that delegation and assignment of tasks to UAP are being consistently done according to requirements.

Policy development.

Competency checklists for tasks that are assigned to a UAP.

Discussion with school administration and school staff to make sure that they understand.

Procedures if needed

## Remember, in school health ...

Only a school nurse (RN) can validate UAP skills competency.

Only a school nurse (RN) can assign tasks to UAP after validation.

Principals may designate UAP to perform only the tasks that have been validated and delegated by a nurse.

\*Delegation is a process by which a nurse directs another person (UAP) to perform nursing tasks and activities.

Remember that delegation is a process, not simply the assignment of a task. Delegation must include training of the task/activity and validation that the UAP is capable **before** assigning the nursing task or activity. Use the decision tree.

Delegated activities must be regularly observed to assure that competence continues, and that the student response is as intended. Medicaid reimbursement requires at least a monthly observation with documentation by the RN.

## References

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