Considerations For The Assignment And Performance Of Specialized Procedures

Non-licensed direct care staff may perform specialized procedures in ICF/DD-N facilities once written protocols for the procedures have been approved by the Department of Developmental Services, Health Facilities Program Section. Upon receipt of the approval letter by the facility, it is the responsibility of the facility registered nurse to provide training, certification and on-going monitoring of non-licensed direct care staff performing the approved specialized procedures. In the provision of quality health care, it is also the responsibility of the registered nurse to determine when tasks or performance of approved specialized procedures may be appropriately assigned to non-licensed direct care staff. This suggested listing was developed from various resources to assist the registered nurse in making those determinations. Please review the considerations when requesting an approval for a specialized procedure protocol.

Considerations for assignment and performance of specialized procedures by non-licensed direct care staff includes, but are not limited to the following:

1. Client has a chronic and stable health condition requiring the procedure and the procedure is considered routine for this client.
2. Pose little potential hazard for the client.
3. Involve little or no modification from client care situation to another.
4. Be performed with predictable outcome.
5. Not inherently involve on-going assessments, interpretations, or decision-making which could not be logically separated from the procedure itself.
6. Staff have been employed at the facility for such time as to be familiar with policies and procedures and knowledgeable of emergency responses.
7. Staff have been trained by the registered nurse to perform specific procedure required by the client and there is frequent RN supervision.
8. Licensed staff may be required to perform procedure for limited period of time.

Non-licensed direct care staff shall NOT insert or remove the following:

1. Nasogastric and gastrostomy tubes.
2. Tracheostomy appliances.
3. Indwelling catheters.
4. Any intravenous apparatus.

References:
Board of Registered Nursing, Advisory, Unlicensed Assistive Personnel, 7/1977
Department of Public Health, Licensing and Certification, Amended Title 22 Draft Regulations.