



## Accountability: You and the law

All members of the nursing team are personally accountable for their actions to their service users, colleagues, regulatory body, employer and the law. There are three main considerations: organisational, team and personal accountability.

Accountability in terms of the NMC Code (2018), means being held to account for your actions and being able to explain how you used your professional judgement to make decisions, including decisions to delegate aspects of care. Under the Code you remain accountable for the decisions made by the people you delegate to.

### Delegation

Delegation is the process by which the delegator allocates clinical or non-clinical treatment of care to a competent person. The delegator is accountable for the decision to delegate and remains accountable for the delegated task.

Registered nurses are responsible for managing the nursing care and are accountable for the appropriate delegation and supervision of care provided by others in the team.

The NMC Code (2018) gives clear expectations for individuals on the NMC register when they delegate to others. The NMC Code states under Practise effectively at section 11:

Be accountable for your decisions to delegate tasks and duties to other people.

#### To achieve this, you must:

- 11.1 Only delegate tasks and duties that are within the other person's scope of competence, making sure that they fully understand your instructions.
- 11.2 Make sure that everyone you delegate tasks to is adequately supervised and supported so they can provide safe and compassionate care.
- 11.3 Confirm that the outcome of any task you have delegated to someone else meets the required standard.

### Principles of delegation

Points to consider when delegating

- Delegation must always be in the best interests of the service user and not performed simply to save time or money.
- Anyone you delegate to must have been suitably trained to perform the intervention.
- Full records of training given, including dates, should be kept.
- Evidence that anyone you delegate to is competent and has been assessed. This should be recorded, preferably against recognised standards.
- The role should be within their job description.

- All team members need to be informed that the activity has been delegated.
- The person who delegates the activity must ensure that an appropriate level of supervision is available and that anyone you delegate to has the opportunity for mentorship.
- The level of supervision and feedback required depends on the recorded knowledge and competence, the needs of the service user, setting and the activities assigned.
- Anyone you delegate to must

- The whole process must be assessed to identify any risks.
- Ongoing monitoring and escalation plans as required.
- Commissioning considerations may also need to be taken into account when delegating.
- Delegation must consider the context of every situation rather than focusing on the task alone.
- There should be clear guidelines and protocols in place so that the support worker is not required to make a standalone clinical judgement.

# Points to check when delegating

- Is delegation in the best interests of the service user?
- Are there clear guidelines and protocols in place?
- Have you considered the clinical risk involved in delegating?
- Do you have authority to delegate the work and the appropriate clinical knowledge?
- Does your colleague have the skills and knowledge requiuhe

- Does your colleague have the capacity to take on additional work?
- Can you provide support and supervision and check that the outcome of the delegation meets the required standard?

# Checklist to determine whether to accept delegation

- Has the degree of risk been considered?
- Are you sure that the activity is not too complex for you to accept?
- Would you be compromising the service user's care by accepting it?





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