ADVISORY OPINION STATEMENT

ROLES OF NURSES IN THE DELEGATION OF
TASKS TO PARAMEDICS IN A HOSPITAL EMERGENCY DEPARTMENT

The Kentucky Board of Nursing is authorized by Kentucky Revised Statutes (KRS) Chapter 314 to regulate nurses, nursing education and practice, promulgate regulations and to issue advisory opinions on nursing practice, in order to assure that safe and effective nursing care is provided by nurses to the citizens of the Commonwealth.

The Kentucky Board of Nursing issues advisory opinions as to what constitutes safe nursing practice. As such, an opinion is not a regulation of the Board and does not have the force and effect of law. It is issued as a guideline to licensees who wish to engage in safe nursing practice, and to facilitate the delivery of safe, effective nursing care to the public.

Opinion: Roles of Nurses in the Delegation of Tasks to Paramedics in a Hospital Emergency Department

Approved Date: 2/2003
Revised: 2/2005; 2/2012; 4/2018
Editorial Revision: 1/2011; 5/2012; 04/2015
Reviewed: 1/2012

Accountability and Responsibility of Nurses

In accordance with KRS 314.021(2), nurses are responsible and accountable for making decisions that are based upon the individuals’ educational preparation and current clinical competence in nursing, and requires licensees to practice nursing with reasonable skill and safety. Nursing practice should be consistent with the Kentucky Nursing Laws, established standards of practice, and be evidence based.

Rationale for Advisory Opinion

The Board of Nursing has received inquiries on the role of the registered nurse in the delegation of patient care services to paramedics in a hospital emergency department.
Background

Effective July 15, 2002, KRS 311A.170(5) permits a paramedic to be employed by a hospital to work as a licensed paramedic in the emergency department of the hospital subject to specific conditions. One of the conditions states: “…A paramedic shall provide patient care services under the orders of a physician, physician assistant, advanced practice registered nurse, or as delegated by a registered nurse….”

The statutes governing paramedic practice may be obtained from the Kentucky Board of Emergency Medical Services, (KBEMS) 118 James Court, Lexington, KY, 40505; telephone number 859-256-3565; website https://kbems.kctcs.edu.

Advisory Opinions

It is the opinion of the Board that:

The Board has promulgated an administrative regulation, 201 KAR 20:400 governing the delegation of nursing tasks. 201 KAR 20:400 Section 2(2) states: “A registered nurse may delegate a task to a paramedic employed in a hospital emergency department in accordance with KRS 311A.170 and Sections 3 and 4 of this administrative regulation.” Although paramedics are licensed, when delegating pursuant to 311A.170 a nurse should be guided by the standards outlined in 201 KAR 20:400.

Based upon the statutes governing registered nursing practice, the focus of registered nursing practice is on the application of substantial specialized knowledge, judgment and nursing skill in the assessment, planning, implementation and evaluation of nursing care. Therefore, the registered nurse, prior to delegating a task, is responsible and accountable for:

1. Determining the nursing care needs of the client. The nurse retains responsibility and accountability for the nursing care of the client, including nursing assessment, planning, evaluation and assuring documentation;
2. Determining that the task to be delegated is consistent with the facilities policies;
3. Following written policies and procedures of the health care facilities that are consistent with KRS Chapters 314 and 311A.170.

Nursing practice should be consistent with the Kentucky Nursing Laws, established standards of practice, and be evidence based.

Triage by Paramedics

Inquiries were received requesting an opinion on the application of 201 KAR 20:400 (Delegation of nursing tasks) to the performance of triage by paramedics in a hospital setting.

The following sections of the Kentucky Administrative Regulations (KAR) and Kentucky Revised Statutes (KRS) apply to this question:

In addition, the Board noted that the term "triage" has been defined to mean:

“... a process in which a group of patients is sorted according to their need for care. The kind of illness or injury, the severity of the problem, and the facilities available govern the process.” (Mosby’s Medical, Nursing and Allied Health Dictionary, Fourth Edition)

Following discussion of these statutes and administrative regulations the Board advised that the process of triage by a paramedic falls under the provisions of KRS 311A.170(5)(a) and 902 KAR 20:016 Section 4(8)(b). This activity should be delineated in the established policies and procedures of the emergency department. Since the performance of triage is within the scope of paramedic practice and is permitted under 902 KAR 20:016 Section 4(8)(b), it is an act that may be performed under the supervision of a registered nurse, but is not an act that is delegated by the nurse. Further, a nurse is not required to meet the criteria in 201 KAR 20:400 Section 2(3) prior to a paramedic providing triage. It was the opinion of the Board that triage, as performed by a paramedic, does not meet the requirements of 201 KAR 20:400 Section 2(3) and 902 KAR 20:016 Section 4(8)(a)1 and 2.

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**Determining Scope of Practice**

KRS 314.021(2) holds all nurses individually responsible and accountable for the individual's acts based upon the nurse's education and experience. Each nurse must exercise professional and prudent judgment in determining whether the performance of a given act is within the scope of practice for which the nurse is both licensed and clinically competent to perform. In addition to this advisory opinion statement, the Kentucky Board of Nursing issued Advisory Opinion Statement #41 RN/LPN Scope of Practice Determination Guidelines which contains the KBN Decision-Making Model for Determining Scope of Practice for RNs/LPNs, and published the APRN Scope of Practice Decision Making Model providing guidance to nurses in determining whether a selected act is within an individual nurse's scope of practice now or in the future. Copies of Advisory Opinion Statement #41 RN/LPN Scope of Practice Determination Guidelines and the APRN Scope of Practice Decision Making Model may be downloaded from the Board's website [http://kbn.ky.gov](http://kbn.ky.gov).

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**Applicable Statutes From the Kentucky Nursing Laws**

KRS 314.021(2) holds all nurses responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.

KRS 314.011(2) defines "delegation" as:

... Directing a competent person to perform a selected nursing activity or task in a selected situation under the nurse's supervision and pursuant to administrative regulations promulgated by the board in accordance with the provisions of KRS Chapter 13A.

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1 A copy of the *Kentucky Nursing Laws* may be downloaded from the Kentucky Board of Nursing website at [http://kbn.ky.gov](http://kbn.ky.gov).
KRS 314.031(1) states: "It shall be unlawful for any person to call or hold himself out as or use the title of nurse or to practice or offer to practice as a nurse unless licensed or privileged under the provisions of this chapter."

KRS 314.011(6) defines "registered nursing practice" as:

…The performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:

a) The care, counsel, and health teaching of the ill, injured or infirm;

b) The maintenance of health or prevention of illness of others;

c) The administration of medication and treatment as prescribed by physician, physician assistant, dentist, or advanced practice registered nurse and as further authorized or limited by the board, and which are consistent either with American Nurses' Association Scope and Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:

1. Preparing and giving medications in the prescribed dosage, route, and frequency, including dispensing medications only as defined in subsection (17)(b) of this section;
2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
3. Intervening when emergency care is required as a result of drug therapy;
4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
6. Instructing an individual regarding medications;

d) The supervision, teaching of, and delegation to other personnel in the performance of activities relating to nursing care; and

e) The performance of other nursing acts which are authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.