Provision 4

The nurse has authority, accountability, and responsibility for nursing practice, makes decisions, and takes action consistent with the obligation to provide optimal care.

4.1 Authority, Accountability, and Responsibility

Nurses bear primary responsibility for the nursing care that their patients and clients receive and are accountable for their own practice. Nursing practice includes independent direct nursing care activities, care as ordered by an authorized healthcare provider, delegation of nursing interventions, evaluation of interventions, and other responsibilities such as teaching, research, and administration. In each instance, nurses have the authority and retain accountability and responsibility for the quality of practice and for compliance with state nurse practice acts, and standards of care, including *The Code of Ethics for Nurses*.

In the context of the increased complexity and changing patterns in healthcare delivery, the scope of nursing practice evolves. Nurses must exercise judgment in accepting responsibilities, seeking consultation, and assigning activities to others who provide nursing care. Where advanced practice nurses have the authority to issue medication and treatment orders to nurses, these are not acts of delegation. Both the advanced practice nurse issuing the order and the nurse accepting the order are responsible for the judgments made and accountable for the actions taken.
4.2 Accountability for Nursing Judgments, Decisions, and Actions

In order to be accountable, nurses act under a code of ethical conduct that includes adherence to the scope and standards of nursing practice and such moral principles as fidelity, gratitude, and respect for the dignity, worth, and self-determination of patients. Nurses are accountable for judgments made and actions taken in the course of nursing practice, irrespective of other providers’ directives or institutional policies. Systems and technologies that assist in clinical practice are adjunct to, not replacements for, the nurse’s knowledge and skill. The nurse retains accountability and responsibility for nursing practice even in instances of system or technological failure.

4.3 Responsibility for Nursing Judgments, Decisions and Actions

Nurses are accountable for their judgments, decisions, and actions; but, in compromising circumstances, responsibility may be borne by both the nurse and the institution. Nurses accept or reject specific role demands and assignments based on their education, knowledge, competence, experience, and assessment of patient safety. Nurses in administration, education, and research also have obligations to the recipients of nursing care. Although their relationships with patients are less direct, in assuming the responsibilities of a particular role, they share responsibility for the care provided by those whom they supervise and teach. Nurses must not engage in
practices prohibited by law or delegate activities to others that are prohibited by their
state nursing practice acts or those of other healthcare providers.

Nurses have a responsibility to define, implement, and maintain standards of
professional practice. Nurses must plan, establish, implement, and evaluate review
mechanisms to safeguard patients and nurses. These include peer review processes,
credentialing processes, and quality improvement initiatives. Nurses must bring
forward difficult issues related to patient care, and/or institutional constraints upon
ethical practice for discussion and review. The nurse acts to promote inclusion of
appropriate others in all ethical deliberations. Nurse executives are responsible for
ensuring that nurses have access to and inclusion on organizational committees that
affect the quality and the safety of the care of the patients they serve. Nurses are
obligated to attend, actively engage, and contribute to the dialogue and decisions
made by such committees.

Nurses are responsible for assessing their own competence. When the needs of the
patient are beyond the qualifications or competencies of the nurse, consultation and
collaboration must be sought from qualified nurses, other health professionals, or
other appropriate resources. Educational resources should be used by nurses and
provided by agencies or organizations to maintain and advance nurse competence.
Nurse educators in any setting collaborate with their students to assess learning needs,
evaluate teaching effectiveness, and provide appropriate learning resources.
4.4 Delegation of Nursing Activities or Tasks

Nurses are accountable and responsible for the assignment or delegation of nursing activities. Such assignment or delegation must be consistent with state practice acts, institutional policy, and nursing standards of practice.

Nurses must make reasonable effort to assess individual competence when delegating selected nursing activities. This assessment includes the evaluation of the knowledge, skill, and experience of the individual to whom the care is assigned; the complexity of the assigned tasks; and the nursing care needs of the patient. Nurses are responsible for monitoring the activities and evaluating the quality and outcomes of the care provided by other healthcare workers to whom they have delegated tasks.

Nurses may not delegate responsibilities such as assessment and evaluation; they may delegate interventions. Nurses must not knowingly assign or delegate to any member of the nursing team a task for which that person is not prepared or qualified.

Employer policies or directives do not relieve the nurse of responsibility for making delegation or assignment decisions.

Nurses in management or administration have a particular responsibility to provide an environment that supports and facilitates appropriate assignment and delegation. This includes orientation, skill development; licensure, certification, and competency verification; and policies that protect both the patient and nurse from
inappropriate assignment or delegation of nursing responsibilities, activities, or tasks.

Nurses in management or administration should facilitate open communication with staff allowing them, without fear of reprisal, to express concerns or even to refuse an assignment for which they do not possess the requisite skills.

Nurses functioning in educator or preceptor roles share responsibility and accountability for the care provided by students when they make clinical assignments. It is imperative that the knowledge and skill of the nurse or nursing student be sufficient to provide the assigned nursing care under appropriate supervision.