

## Accountability, delegation and indemnity for the coronavirus adult critical care surge

***“Registered nurses... work in the context of continual change, challenging environments, different models of care delivery, shifting demographics, innovation, and rapidly evolving technologies... The confidence and ability to think critically, apply knowledge and skills, and provide expert, evidence-based, direct nursing care therefore lies at the centre of all registered nursing practice”***

Nursing and Midwifery Council<sup>1</sup>

Coronavirus is a global health emergency. For some people it will cause severe and life-threatening illness. For these members of the population, there is a need to urgently ensure sufficient critical care capacity is available with appropriate estate, equipment, expertise and support to deal with the increase demands that coronavirus creates.

During the coronavirus pandemic, nurse to ventilated patient ratios will have to decrease and additional non critical care nursing staff, allied health care professionals and support staff will be [redeployed](#) to critical care to assist in the care of these critically ill patients. Critical care nurses will need to be supported to manage increased numbers of critically ill patients whilst supervising and delegating to non critical care colleagues. This is an unprecedented situation and it is essential that a team working approach rather than a patient ratio approach needs to be adopted, taking account of skills, knowledge and welfare of all staff to provide the best patient care possible.

This guidance has been created by a collaboration of nurses involved in the care of critically ill people to assist registered nurses and associated redeployed staff (which includes the unregistered workforce, i.e. Health Care Assistants). This guidance aims to clarify the principles of accountability and delegation in the critical care surge environment during this pandemic. Case studies illustrating this guidance in practice can be found in Appendix A. There was no declared conflict of interest. The document is open source, there are no restrictions to the use of information from this document.

### Accountability

All staff working in the critical care surge environment are expected to perform as competently and safely as they can in these circumstances. They must also inform a senior member of staff, such as the critical care nurse leading the team, or the nurse in charge of the shift, when they are unable to perform competently and/or safely.

Before undertaking a task, each team member should be reasonably confident that they:

- have the ability (knowledge and skills) to perform the activity or intervention
- accept the responsibility for doing the activity
- have the authority to perform the activity within their role, through delegation and the policies and protocols of the organisation.

---

<sup>1</sup> NMC (2017) Future nurse: Standards of proficiency for registered nurses. NMC p.3

## **Delegation**

Due to the low critical care nurse to patient ratios, there will be more delegation required during the critical care surge, and it may be taking place in a busy and challenging environment.

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 registered nurse should make reasonable enquiries about a redeployed staff member's competence to perform tasks. Sometimes in the critical care surge environment, there might be limited time to make enquiries about the competence of other team members. The individual team member to whom the task is being delegated is accountable for accepting the task or not, depending upon their own assessment about their skill level. This should be emphasised in training for all staff redeployed to coronavirus critical care surge, alongside the continued requirement for high quality record keeping standards.

Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC<sup>2</sup>) have a decision Support Matrix (p.12) within their [delegation framework](#) which could prove useful for registered nurses in the critical care surge environment.

## **Indemnity**

The NHS has unlimited indemnity cover for all its employed staff and those providing their services as locums, bank staff and other self-employed roles. Any organisation employing redeployed staff to support the coronavirus pandemic critical care surge has the benefit of the NHS indemnity schemes. The Department of Health and Social Care (DHSC) has made it clear that anybody working in redeployed or backfilling roles in the coronavirus pandemic response will have indemnity cover for their work.

## **Skills**

As the environment becomes more familiar, redeployed staff may acquire new skills and be able to utilise other skills from their previous role. It would be good practice to keep a record of these new skills to ensure in the future you have a record of your learning on a timeline so that you can recall it and reflect on it.

The coronavirus pandemic is one of the biggest challenges the health and care sector has ever faced. All health care workers are highly valued for their skills and knowledge to work as a team caring for those critically ill patients.

## **Nursing and Health Care Professionals standards of proficiency**

[Health & Care Professions Council: Standards of proficiency](#)

[Nursing and Midwifery Council: Future Nurse: Standards of Proficiency for Registered Nurses](#)

---

<sup>2</sup> Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC 2019) Deciding to delegate: a decision support framework for nursing and midwifery. NIPEC; Belfast.