APPENDIX 4

DELEGATION OF NURSING TASKS TO CARE WORKERS

The above may be undertaken by an individual member of staff after:-

- Agreement of Line Manager ……
- Patient's / Representative Consent ……
- Health Professional's agreement as competent signed below

This page is to be completed for

- Patient ……
- Task ……
- Training delivered / date ……

Observations of Practice	Comments	Signature of Health Professional

- Signed off as competent

Signature of Health Professional

……..

Signature of Care Worker

……..

Agreed Review Date: ……..

Copy - Individual staff
Patient's Notes