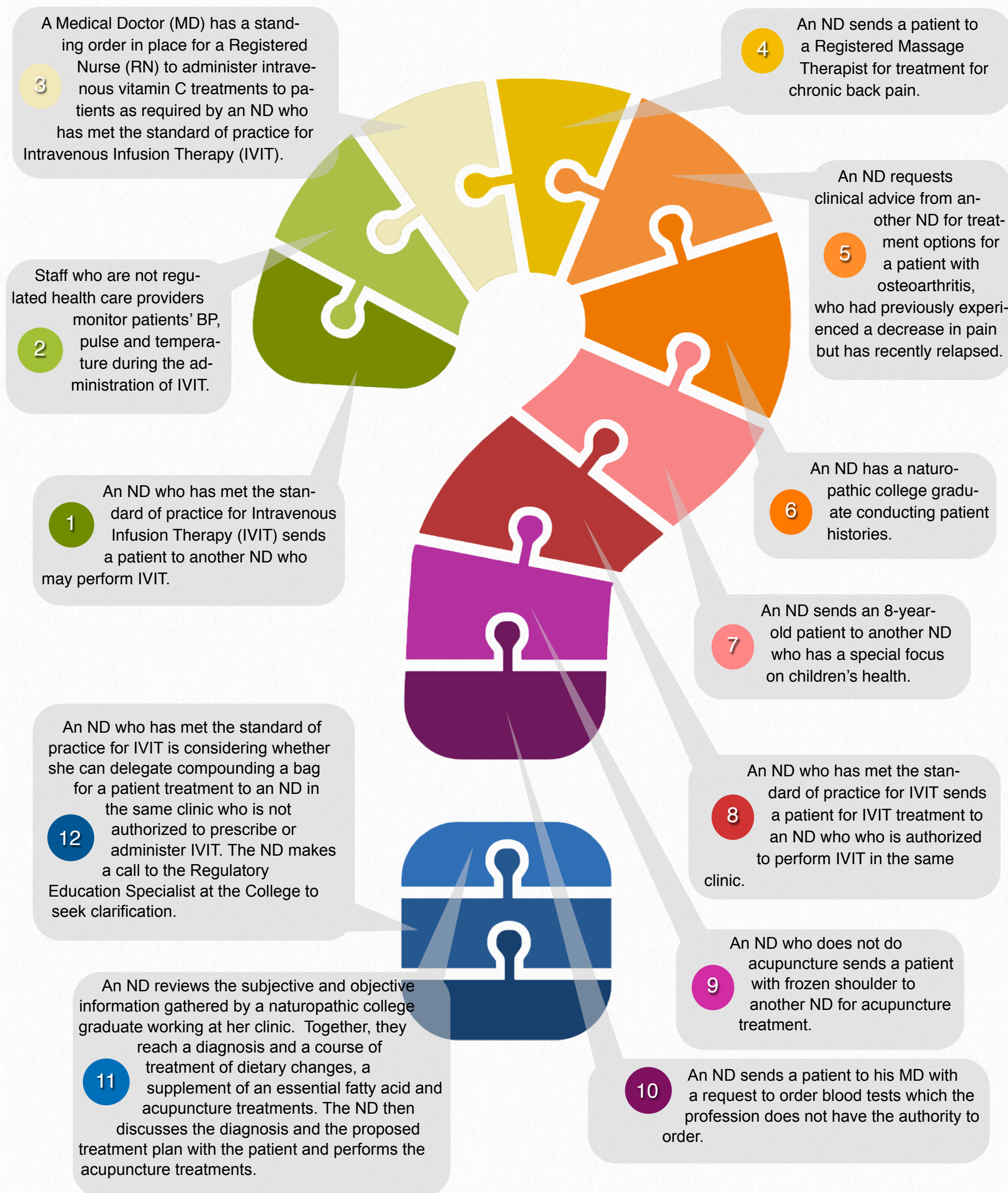


What am I? A Delegation, Referral, Consultation or Assignment of Care?

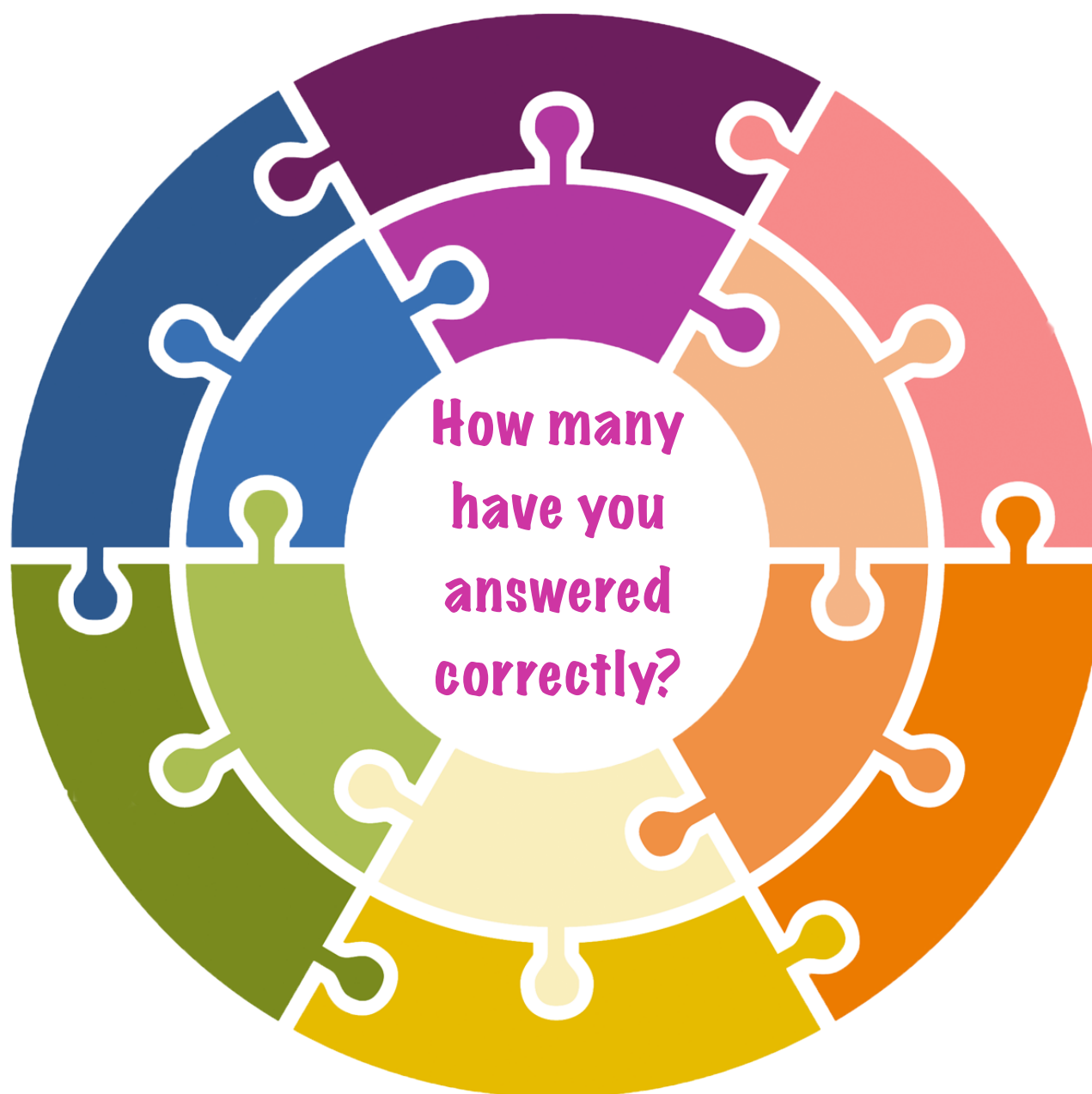


(Answers are on Page 7)

Quiz Answers!

Delegations, Referrals, Consultations and Assignment of Care

Check your answers to the situations on page 6 against the correct responses here provided by our Regulatory Education Specialist, Dr. Mary-Ellen McKenna, ND (Inactive).



1 An ND who has met the standard of practice for Intravenous Infusion Therapy (IVIT) sends a patient to another ND who may perform IVIT.

Referral

The ND who is providing the IVIT for this patient has the authority to perform IVIT and is therefore accepting a referral.

It is a common misunderstanding that this is a delegation. There is never a need for an ND to delegate to another ND. Both NDs have the same authority to perform the controlled acts as stated in the Naturopathy Act, 2007 and the General Regulation provided all the requirements, such as the standards of practice for prescribing and IVIT, are met.

2

Staff who are not regulated health care providers monitor patients' BP, pulse and temperature during the administration of IVIT.

Assignment of Care

The procedures involved are not controlled acts and the staff member - who is not a member of a regulated health profession - does not have their own training nor the knowledge, skill and judgment to perform the procedures by their own authority.

3

A Medical Doctor (MD) has a standing order in place for a Registered Nurse (RN) to administer intravenous vitamin C treatments to patients as required by an ND who has met the standard of practice for Intravenous Infusion Therapy (IVIT).

Delegation is allowed since there is an order in place from an MD

An RN does not have their own authority to administer a drug/substance by intravenous injection. The *Nursing Act*, 1991 requires an order be in place by a health care provider who has the authority to make the order, such as an MD, to then allow the RN to be able to perform the controlled act of administering by injection. Since the ND is then having the RN perform a controlled act as per the MD's order, it is done through a delegation from the ND.

4

An ND sends a patient to a Registered Massage Therapist for treatment for chronic back pain.

Referral

The massage therapist who is accepting the referral for this patient will be treating a specific health problem and providing treatment which they have the knowledge, skill and judgment to perform as a member of the College of Massage Therapists of Ontario.

An ND requests clinical advice from another ND for treatment options for a patient with osteoarthritis, who had previously experienced a decrease in pain but has recently relapsed.

5

Consultation

The ND is seeking professional advice from another health care provider (an ND in this case) regarding treatment for a patient who is no longer responding to the care being provided. The patient is not directly involved and is not being seen as a patient by the ND being consulted with (in which case this would be a referral).

6

An ND has a naturopathic college graduate conducting patient histories.

Assignment of Care

The procedure involved is not a controlled act and while the graduate has completed training at a naturopathic college and therefore has the knowledge, skill and judgment to take a patient history, they are not a member of a regulatory health college and are not to assess or treat patients on their own authority.

7

An ND sends an 8-year-old patient to another ND who has a special focus on children's health.

Referral

The ND who is accepting the 8-year-old as a patient has the authority to provide the assessments and treatments they determine to be the most appropriate. Even if the ND accepting the referral performs a controlled act, they are doing it on their own authority, so there is no need for a delegation.

8

An ND who has met the standard of practice for IVIT sends a patient for IVIT treatment to an ND who is authorized to perform IVIT in the same clinic.

Referral

The ND who is providing the IVIT for this patient has the authority to perform the controlled act and so is accepting a referral. The fact that the NDs who are making and accepting the referral are in the same clinic is irrelevant. The same would apply if the NDs worked in different clinics.

9

An ND who does not do acupuncture sends a patient with frozen shoulder to another ND for acupuncture treatment.

Referral

Both NDs have the same authority to perform the controlled act of acupuncture however the referring ND has chosen not to include acupuncture as a treatment they provide and therefore refers the patient to an ND who does.

10

An ND sends a patient to his MD with a request to order blood tests which the profession does not have the authority to order.

Referral

The MD has the authority to order the blood tests, and is expected to determine whether or not the suggested tests are indicated based on the information provided by the ND as well as his/her own knowledge, skill and judgment.

11

An ND reviews the subjective and objective information gathered by a naturopathic college graduate working at her clinic. Together, they reach a diagnosis and a course of treatment of dietary changes, a supplement of an essential fatty acid and acupuncture treatments. The ND then discusses the diagnosis and the proposed treatment plan with the patient and performs the acupuncture treatments.

Assignment of Care

The gathering of the subjective and objective patient information is conducted by the graduate as an assignment of care, providing the gathering of the objective information did not require the performance of a controlled act such as conducting an internal examination, which can only be done through a delegation.

Both communicating a diagnosis and acupuncture are controlled acts that the ND is not allowed to delegate. Therefore, the ND - not the graduate - must discuss the diagnosis with the patient and perform the acupuncture treatment.

While the ND chose to discuss the dietary and supplement recommendations with the patient these are both forms of treatment that are considered to be in the public domain and could have been done by the graduate as an assignment of care.

An ND who has met the standard of practice for IVIT is considering whether she can delegate compounding a bag for a patient treatment to an ND in the same clinic who is not authorized to prescribe or administer IVIT.

12

The ND makes a call to the Regulatory Education Specialist at the College to seek clarification.

NOT delegation, assignment of care, referral or consultation.

The ND who has met the standard of practice for IVIT cannot delegate the controlled act of compounding to another ND. The other ND, who has not met the standards of practice for prescribing or IVIT, is not legally authorized to compound a bag for IVIT.

Resources

Guideline for Assignment of Care

Guideline for Referrals and Consultations

Standard of Practice for Delegation