



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

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Division of Public Health

MEMORANDUM

TO: LHD Directors of Nursing, Nursing Supervisors, and other Nursing Leaders
LHD Health Directors

FROM: Susan Haynes Little, DNP, RN, CPHN, PHNA-BC, CPH, FAAN
Chief Public Health Nursing Officer, Director of Nursing

DocuSigned by:

Susan Little

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Angela Callicutt, MSN, RN, CPHN, CPHQ
Assistant Director of Nursing, Office of the Chief Public Health Nurse

Tom Mitchell, EMT-P
Chief, Office of Emergency Medical Services

DocuSigned by:

Tom Mitchell

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Chuck Lewis, EMT-P, RN
Assistant Chief, Emergency Medical Services

DATE: October 2, 2023

SUBJECT: Joint Memo on Credentialed Emergency Medical Services (EMS) Providers
Working in Local Governmental Public Health Settings and Nursing Delegation

Purpose

The purpose of this joint memo from the NC DHHS Office of the Chief Public Health Nurse and the NC Office of Emergency Medical Services is to clarify the role of Credentialed Emergency Medical Services (EMS) Providers working in local public health settings and delegation by the Registered Nurse (RN) or Licensed Practical Nurse (LPN) to Credentialed EMS Providers.

Credentialed EMS Provider Roles, Functions, and Medical Oversight

The role and scope of the Credentialed EMS Provider is defined by administrative code **10A NCAC 13P .0505 SCOPE OF PRACTICE FOR EMS PERSONNEL**. Credentialed EMS Personnel may work in public health and community health facilities, initiatives, and clinics under established protocols as defined in **10A NCAC 13P .0506 PRACTICE SETTINGS FOR EMS PERSONNEL** under the medical oversight of a Physician, licensed by the NC Medical Board, who is associated with the practice setting where the individual will function. The Credentialed EMS Provider shall be

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restricted to performing within the scope of practice as defined by the North Carolina Medical Board pursuant to **G.S. 143-514 SCOPE OF PRACTICE FOR CREDENTIALLED EMERGENCY MEDICAL SERVICES PERSONNEL**.

In the local governmental public health setting, the Credentialed EMS Provider should function in the role and job specification for which they are hired and are restricted to performing under the protocols/policies/standing orders in place within the practice setting. The Credentialed EMS Provider's roles and functions must be consistent with their level of credential and adhere to the standards provided in the [North Carolina Medical Board Approved Medications and Skills for the EMS Credential Provider](#) protocol. Examples of medications that can be administered and skills that can be performed by Credentialed EMS Providers in the public health setting include, but are not limited to:

Medications	EMR	EMT	AEMT	MEDIC
ACE inhibitors				X
Acetaminophen	X	X	X	X
Antibiotics				X
Anti-emetic preparations				X
Antivirals				X
Aspirin	X	X	X	X
Diphenhydramine	X	X	X	X
Diuretics				X
Epinephrine	X	X	X	X
Glucose, oral	X	X	X	X
Medications	EMR	EMT	AEMT	MEDIC
Immunizations			X	X
Insulin				X
Lidocaine			X	X
Narcotic antagonists	X	X	X	X
Nasal spray decongestant		X	X	X
Non-prescription medications		X	X	X
Non-steroidal anti-inflammatory		X	X	X
Oxygen	X	X	X	X
Steroid preparations				X
Tuberculosis skin test			X	X

Skills	EMR	EMT	AEMT	MEDIC
12-Lead ECG Acquisition & Transmission		X	X	X
12-Lead ECG Interpretation				X
Cardiopulmonary Resuscitation	X	X	X	X
Foreign Body Airway Obstruction	X	X	X	X
Gastric Intubation		X	X	X
Glucose Measurement	X	X	X	X

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Hemostatic Agent	X	X	X	X
Injections – Subcutaneous and Intramuscular		X	X	X
Medication Administration	X	X	X	X
Nebulizer Inhalation Therapy		X	X	X
Non-Invasive Positive Pressure Ventilation	X	X	X	X
Orthostatic Blood Pressure	X	X	X	X
Oxygen Administration	X	X	X	X
Patient Assessment	X	X	X	X
Pulse Oximetry	X	X	X	X
Skills	EMR	EMT	AEMT	MEDIC
Specimen Collection		X	X	X
Spinal Motion Restriction	X	X	X	X
Splinting	X	X	X	X
Stroke Screen	X	X	X	X
Suction-Basic	X	X	X	X
Temperature Measurement	X	X	X	X
Urinary Catheterization				X
Venous Access-Blood Draw			X	X
Venous Access-Existing catheters				X
Wound Care	X	X	X	X

The Practice of Nursing

The RN role and scope of practice are defined by **G.S. 90. 9A NURSING PRACTICE ACT (NPA)**, and **21 NCAC 36 .0224 COMPONENTS OF NURSING PRACTICE FOR THE REGISTERED NURSE (RN Rules)**. The RN Rules define RN scope of practice including their roles and responsibilities for supervision, administration, and management of nursing services delivery and personnel. The RN scope of practice includes components for assessment, planning, implementation, and evaluation. The LPN role and scope of practice are defined by the NPA and **21 NCAC 36 .0225 COMPONENTS OF NURSING PRACTICE FOR THE LICENSED PRACTICAL NURSE**. When collaborating within an interdisciplinary team, the RN remains responsible and accountable at all times for all aspects of nursing care of assigned clients, whether rendered directly or indirectly. The LPN scope of practice limits the LPN to participating and assisting in carrying out those components of nursing practice. The RN may assign nursing care to be carried out by an LPN.

The practice of nursing requires the utilization of nursing knowledge, judgment, and decision-making. The nurse who provides direct or indirect nursing services is practicing nursing, whether in a volunteer or employee capacity. Delegation and assignment of nursing activities are important parts of the implementation component of practice for both the RN and the LPN. The licensed nurse may assign and/or delegate nursing care activities to unlicensed assistive personnel (UAP) based upon their own license level, assessment of the client's status, clinical competence of available licensed and unlicensed personnel, the variables in each practice setting, and the employer's policies/procedures. For an LPN to delegate to UAP, there must first be a completed RN assessment of the client's nursing care needs. When delegating, the

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licensed nurse must follow the NC Board of Nursing (NCBON) guidance provided in the [Delegation of Nursing Activities Position Statement for RN and LPN Practice](#) and the [Decision for Delegation to the UAP](#)

Delegation by the Licensed Nurse to Credentialed EMS Providers

The licensed nurse may delegate nursing care tasks to Credentialed EMS Providers working in public health provided the delegated duties and tasks are part of the Credentialed EMS Provider's scope of practice and level of credential, and the Credentialed EMS Provider has RN-validated competencies to carry out the delegated tasks. When delegating, the licensed nurse must first be competent to perform the activity. The delegating nurse remains accountable for the decision to delegate, to implement the steps of the delegation process, and to assure that the delegated task is appropriate based on individualized needs of each client which includes stability, absence of risk of complications, and predictability of change in condition.

Responsibility for supervision of Credentialed EMS Providers is determined by the agency's delegation protocols and policies. The delegating nurse must also be knowledgeable of the information contained within the [Joint Position Statement, the North Carolina Board of Nursing, and the Office of Emergency Medical Services](#).

This memo remains valid until replaced.

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