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LD 2166

LD 2166 Resolve, Regarding Legislative Review of Chapter 6: Delegation of Nursing Activities and Tasks to Unlicensed Assistive Personnel by Registered Professional Nurses, a Major Substantive Rule of the Department of Professional and Financial Regulation, State Board of Nursing

Testimony in Support

February 10, 2026

Senator Bailey, Representative Mathieson, and members of the Health Coverage, Insurance and Financial Services Committee, my name is Karen Chandler, RN, MSN, and I am a resident of Windham, Maine. I am a registered nurse providing testimony in support of this bill.

It is essential that nurses are able to effectively delegate tasks to Unlicensed Assistive Personnel (UAP). The nurse remains responsible for all patient assessments. UAPs extend the nurse's capacity and allow the nurse to focus on ongoing assessments, responses to medications, and changes in patient status.

Examples of tasks that can be delegated to UAPs include vital sign measurement, with the nurse responsible for interpreting the results and assessing and reporting any critical changes. Turning and ambulating patients can also be delegated after the nurse has assessed the appropriate level of assistance needed and whether the patient is tolerating the activity. Fingerstick glucose monitoring is another example, with the nurse evaluating the results, administering medications based on physician orders, and continuing to monitor how the patient tolerates treatment.

Having UAP support allows nurses to focus their attention on critical changes and the ongoing evaluation of every patient. When nurses are mired in routine tasks, it limits the time available to process clinical information and intervene appropriately. Nurses must act as an early warning system for their patients, often identifying subtle concerns long before significant changes appear in vital signs.

Thank you for the opportunity to provide comments in support of this important legislation.

Respectfully,
Karen Chandler, RN, MSN