XVII. MANAGEMENT AND DELEGATION

A. General Information:

- The judgments that you make in management and delegation situations have to be based on ________________ knowledge.
- You MUST know your ________ content, and then you can move on to management and delegation.

B. Definition:

1. Assignment: the distribution of _________ that each staff member is responsible for during a given shift or work period.
   - The RN assumes, along with their assignment , all the ____________________ and accountability for the work done.

2. Unlicensed assistive personnel: any __________________ personnel to whom nursing tasks are delegated and who work in settings with structured nursing organizations.
   a. UAP’s can perform tasks on ______________ clients in uncomplicated situations.
   b. Tasks such as _________, simple, repetitive, common activities that do not require nursing judgment. Examples: hygiene, feeding, and ambulation. Everyday things!

3. Delegation: is transferring to a competent individual the ________________ to perform a selected nursing task in a selected situation.
   a. Even though the authority to perform the task is delegated; the _____ always retains the accountability for the delegation.
   b. RN to RN assignments transfer ________ responsibility and accountability.
   c. With delegation, you can ______________ the responsibility but _____ the accountability.

4. Supervision: guidance and ________________, oversight and evaluation by the RN to see that the delegated task is accomplished.
   a. You must ______________ to see that the nursing tasks that you delegated are done properly.
   b. You must communicate a ________ frame and the ______________ of the task.
      - You’ve got to tell people what you want done ___________, and what you want done by a particular time.
c. Provide __________ directions and expectations of how you want the task to be performed and define the findings you wish ______________.

d. We need to ask these three questions after a delegated task is completed:
   - Was the task done ________________?
   - Was the task done in the proper ___________ frame?
   - Were the client’s ___________ met?

C. Delegation Principles:

1. Don’t assume someone is competent to do something just because of their _____ description.
   a. It is the RN’s responsibility to figure out the staff’s strength and ________________.
   b. This will help you delegate to the ____________ personnel and improve client care.
   c. When you identify a weakness, you are supposed to __________, teach, teach.

2. When staff members are pulled to a new floor, you should pretend they are a brand _______ nurse all over again.
   - Do not give this nurse any clients requiring any __________________ care.

3. Purchase your _______ malpractice insurance.
   a. When staff members perform tasks that have not been delegated and a problem occurs, the RN’s primary responsibility is to ____________, ____________, ____________.
   b. You better teach, and you had better __________________ what you taught.
   c. Always fill out an _______________ report, and go home and ______________ the incident. It’s very important that you protect yourself.

NCLEX® Critical Thinking Exercise:
I’m an ER nurse with 15 years of experience and I get pulled to the Labor and Delivery Unit. Which client are you going to give me?

1. The client with a severe DVT
2. The client in active labor
3. The client who is 8 hours post-partum, or
4. The client requiring fetal monitoring
D. Delegation to the LPN and UAP:

1. First, what is the LPN’s role in the nursing process?
   a. The RN never delegates ___________________.
   b. The LPN can assist the RN in _______ collection but that is not assessment in the NCLEX world.
   c. The LPN cannot do any form of __________________, because evaluation involves assessment, and we never delegate assessment.

2. The _____ must do the admission history.
   • If someone else, such as an LPN collects the admission data for you, never sign off on the form until you have _________________ the data.

3. Can the LPN implement tasks on the plan of care? _______

4. Can a LPN devise a teaching plan for a newly diagnosed diabetic? ___________

5. What type of clients can the RN delegate to the LPN? ___________
   a. An unstable client is medically fragile and requires a ______________ level of care.
   b. A client can be ______________ and stable at the same time.
      • Don’t let a complex, chronic diagnosis make you think the client is unstable and has to be seen only by the RN.
   c. Always consider a new admit ______________.
      • The RN should go assess the newly admitted client first; the new admission is your ______________.

NCLEX® Critical Thinking Exercise:
Which of the two clients would the RN delegate to the LPN?
1. A newly diagnosed diabetic who has a quarter-sized foot ulcer. Pedal pulses are present, but weak and morning glucose is 200 mg/dL.
2. A post-partum client who delivered 12 hours ago. Her blood pressure was 118/70 mm Hg at 8 am; now at 10 am, her blood pressure is 140/80 mm Hg.

d. Can the LPN perform any tasks in an unstable situation? __________

6. What type of clients can the RN delegate to the unlicensed assistive personnel? ______________
7. Delegating routine tasks to LPNs and UAPs.
   - The same activity may __________ in each situation. We know that feeding a healthy client who has two broken arms is different than feeding a client who has dysphagia; bathing a weak client is not the same as bathing a client who is severely burned.
   - So, if there is ever a degree of potential __________, the RN must retain the task, no matter how routine it is.

E. Delegation and the Brand New Nurse:

1. The head nurse is not only the manager on the floor, you as an RN are a manager of client care.

2. The 5 rights of delegation
   - The right ________
   - The right circumstances
   - The right ________
   - The right ______________
   - The right supervision and evaluation

F. Practice Questions:

1. You have a client with pneumonia requiring the following interventions. Which action could be delegated to the UAP?
   o 1. Monitor the sputum for changes
   o 2. Offer fluids between meals
   o 3. Teach family to record intake and output
   o 4. Assess respiratory rate with ambulation
2. An immune-suppressed client is placed in protective isolation. Which tasks can be delegated to unlicensed assistive personnel (UAP)? Select all that apply.

☐ 1. Take vital signs every two hours
☐ 2. Report temperature greater than 100.4°F (38°C).
☐ 3. Monitor white blood cell count
☐ 4. Teach good hand washing technique
☐ 5. Display Protective Isolation on client’s door
☐ 6. Plan daily care to minimize client exposure

3. Which client could be assigned to an LPN working under the supervision of an RN?

☐ 1. Client with abdominal pain scheduled for a CT scan
☐ 2. Client being discharged with home oxygen.
☐ 3. Client with post op wound infection taking oral antibiotics.
☐ 4. Client with vomiting that is receiving intravenous electrolyte solutions.

4. Which intervention could the RN delegate to an LPN?

☐ 1. Evaluating a client’s blood pressure for orthostatic hypotension.
☐ 2. Assisting the primary healthcare provider in the insertion of a nasogastric tube.
☐ 3. Providing explanation of glucose utilization to a new diabetic.
☐ 4. Planning the tasks of turning, bathing and ambulating an immediate post op client.