

Leadership and the delegation in nursing nursing essay



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Florence Nightingale once said, But then again, to look to all these things yourself does not mean to do them yourself...But can you insure that it is done when not done by yourself. (p. 17). These words, written in her Notes on Nursing, spoke of the idea of delegation in nursing. Over the years, delegation has become increasingly important in the nursing profession. It is important for a nurse to understand how to delegate to others efficiently without compromising patient safety or facing a lawsuit. This can sometimes prove to be a harder task than one might think, especially for a new graduate who has no experience with delegation. However, there are certain guidelines set in place that, if followed, will enable you to delegate tasks safely, properly, and effectively.

Delegation is defined as the “ transference of responsibility and authority for an activity to a competent individual” (Berman & Snyder, 2012). When delegating a task to another individual, there are five rights of delegation that must be considered. “ The five rights of delegation include the right task, the right circumstance, the right person, the right communication and the right supervision” (Tomey, 2009). The first right, the right task, takes into consideration whether it is within a person’s scope of practice to perform the task being delegated.

A specific task that can be delegated to one person may not be appropriate for another person, depending on each person’s experience and individual skill sets. Also, a task that is appropriate for one person to perform with one client may not be appropriate with a different client or the same client under altered circumstances. (Berman & Snyder, 2012)

A lot of times, a list of tasks that can and cannot be delegated can be found in the nurse practice act for the state of practice. In addition to considering if a task is within a person's scope of practice, the nature and complexity of the task to be delegated should also be considered. " Only activities that have a predictable outcome and are done the same way every time" should be delegated (Sheehan, 1998). For example, it is okay to delegate a task such as taking a blood pressure or measuring urine output. Tasks that are more complicated or could hurt a patient, such as changing a patient's surgical dressing, should not be delegated.

The right circumstance is the second right of delegation. Even if a person has the ability and is allowed to perform a certain task, it is important to consider the circumstances before delegating. For example, ambulating a patient is a task that can normally be delegated to a nursing assistant. However, if you consider a patient who is post-op for a hip replacement and has a history of hypotension and anemia, this task would not be appropriate to delegate to a nursing assistant or any other person who does not have the necessary training to know what to do if the person were to become unstable.

Generally, appropriate activities for consideration in delegation decision making include those which frequently reoccur in the daily care of a client or group of clients, which do not require the UAP to exercise nursing judgment, do not require complex and/or multi-dimensional application of the nursing process, for which the results are predictable and the potential risk is minimal, and which utilize a standard and unchanging procedure. (National Council of State Board Nursing, 1997)

The third right of delegation is the right person. It is important to consider who the best person would be to handle a given situation. This means taking into consideration whether or not a person has the knowledge, skill, and competency to perform the task. Also, it should be considered whether or not the person has performed the task in the past and if not, if they need supervision in performing the task. The RN must consider qualifications, job descriptions, and competency when delegating task to various caregivers. Qualifications are generally determined by state licensure or certification, and the RN may reference hospital policies and procedures, job descriptions, published state practice acts, or unit guidelines if unfamiliar with specific qualifications. For instance, an LVN/LPN may be permitted by license to draw blood in some states. In other states the LVN/LPN must have an additional certification to draw blood. (Osborn, 2010)

The fourth right of delegation is the right communication. It is very important when delegating a task to another person to make sure and communicate what is needed. This means not only telling the person what to do, but giving all information that will be needed in order to perform the task. For example, when assigning the task of taking a patient's blood pressure to someone, it is important to include when they need to be taken, as well as restrictions that may be needed such as to only use the left arm. In addition, specific instructions need to be given about when information should be reported back to you and any information that should be reported back immediately. For instance, if you assign the task of taking a patient's blood sugar to a nursing assistant, it is important to make sure that he or she knows what a normal reading and that any readings that are not in the expected range

should be reported immediately. It is also important to make sure that all instructions are understood by the person you assigning the task to and if any supervision may be needed.

The fifth right of delegation is the right supervision. It is very important that any time you delegate a task, you make sure that it has been done correctly and completely. At times, a task that is delegated will be completed under direct supervision. For example, when teaching a student to insert a foley catheter, you will be with them during the task guiding them through the process. It is not always possible to be present to directly supervise all tasks that you have delegated, even though you are still ultimately accountable. It is critically important to make sure and oversee the progress on the tasks that you have delegated to ensure they are properly executed,

The Board of Nursing has the legal responsibility to regulate nursing practice and provide guidance regarding delegation of nursing tasks. The licensed nurse's specialized education, professional judgment and discretion are essential for quality nursing care. Nurses are uniquely qualified for promoting the health of the whole person by virtue of their education and experience. Nursing is a knowledge-based process discipline and cannot be reduced solely to a list of tasks. Therefore, the nurse must coordinate and supervise the delivery of nursing care, including the delegation of nursing tasks to others. While some nursing tasks may be delegated to unlicensed assistive personnel (UAP), the practice-pervasive functions of assessment, evaluation and nursing judgment must not be delegated. All decisions related to delegation of nursing tasks must be based on the fundamental principle of protection of the health, safety and welfare of the public. The issues <https://assignbuster.com/leadership-and-the-delegation-in-nursing-nursing-essay/>

surrounding delegation are complex and multi-faceted. It is the responsibility of the licensed nurse to determine which tasks can be appropriately delegated and accept accountability for the outcomes. “ Assigning unqualified persons to perform nursing care functions, task or responsibilities and or failing to effectively supervise persons to whom nursing functions are delegated or assigned” constitutes misconduct. (South Carolina Board of Nursing, 2010)

In order to be able to delegate efficiently and effectively, it is important to consider the four principles of delegation. The first is the principle of result expected, which suggests that before delegating a task to someone, you should be able to clearly define the goals and results that are expected of them. In other words, as a nurse, you should be able to perform the skill that you are delegating to another person and be able to teach about it if necessary. The second principle is the principle of parity of authority and responsibility , which says that when delegating a task, you should choose a person who is capable of doing the job on their own and not impress excessive authority. The nurse should know the regulations in the state of practice regarding which tasks can be delegated to another person and those which should be done by only an RN. The third principle is the principle of absolute responsibility. This principle says that when delegating care to another person, the RN should be aware that he/she is the one who is ultimately responsible. It is very important to supervise tasks which have been delegated in order to ensure the safety of all patients and of her own license. The fourth principle is the principle of authority, which suggests that you should only delegate tasks that are within your jurisdiction. If you are

ever in doubt about an important decision, you should consult someone in a higher position about the issue. Also, you should understand which tasks you are allowed to delegate and which tasks that only you should be performing. You should also consider that there are some situations that do not require tasks to be delegated in order to be performed. For example, in assisted living facilities, care is provided to patients without having to have delegated by an RN. (Management Study Guide, n. d.).

It is very important as a nurse to consider all aspects that go into delegating tasks to others. When all the guidelines are followed correctly a good judgement is used when choosing who to delegate a task to, delegation can be a great tool that nurses can use. Your floor will run smoothly and you will be able to more efficiently care for your patients. It is of utmost importance that we as health care providers put the care and needs of the patients first when making decisions that could affect their treatment and ultimately their lives.