Program Assessment Summary Report Form

Program being assessed. NURSING

Previous Action Plan.
N/A

Summary of results of previous Action Plan.
34T

Semester and year of program assessment. Spring and Fall 2015

State program student learning outcome addressed.
PSLO 3: Implement one’s role as a nurse in ways that reflect integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context

List courses from which the assessment data is gathered.
NUR 204

List participating faculty and their academic department.
I. Grutzner

Number of sections involved in this program assessment.
3

Number of students involved in this program assessment.
Spring 2015 – 52; Fall 2015 – 25;

State the specific question(s) asked and/or the method of assessment.
In order to deliver sage, quality care for patients, nurses must learn to delegate. The RN assigns or delegates tasks based on the needs and condition of the patient, potential for harm, stability of the patient’s condition, complexity of the task, predictability of the outcomes, abilities of the staff to whom the task is delegated, and the context of other patient needs. All decisions related to delegation and assignment are based on the fundamental principles of protection of the health, safety and welfare of the public.

Describe the method used to answer the question and/or measure the method of assessment.
Students are required to manage the delegation and assignment of tasks and supervision in a given case study. The case study consists of 5 modules, each worth 20 points. Points are awarded for each correct action and points are deducted for each omission of a required action.
Narrative summary of results
Spring 2015: 48% earned a grade of 90 or better; 38% earned a grade of 80-90; 14% earned a grade of 70-80;
Fall 2015: 72% earned a grade of 90 or better; 24% earned a grade of 80-90; 4% earned a grade of 70-80.

Summary of conclusions drawn.
The majority of students are able to apply the principles of delegation.

Action Plan for improvement.
N/A

Resources needed to implement action plan.
N/A

Attach or paste supporting documentation of results (graphs, tables, etc.).
☐ Documentation is attached
☒ Documentation is pasted below
Delegation Case Study

• Instructions: After reviewing the scenario, address each module and answer according to the ANA principle of 'the transfer of responsibility for the performance of an activity from one individual to another while retaining accountability for the outcome'.
• Follow the NY State Nurse Practice Act as it relates to Delegation and Supervision.
• You will be graded on the completeness of your answers. 1 point deduction for each overlooked item.

Scenario
Sarah Yandell, RN, a staff nurse on the medical-surgical floor of a large hospital, has just finished receiving report from the RN on the previous shift. As Sarah looks over her assignments for the day, she sees that the nurse manager has scheduled an LPN to float over from the postpartum unit. Sarah is assigned to supervise the LPN and orient her to the unit. Sarah also has a nursing assistant, with whom she has worked closely for longer than 8 months, assigned to work with her. Sarah reviews the tasks that must be accomplished for her seven assigned patients. Three patients are receiving intravenous antibiotics and need laboratory results monitored. A newly diagnosed diabetic patient will be discharged tomorrow and needs continued patient education about diabetes management. Two postoperative patients need dressing changes and assistance with ambulating. A post–cerebrovascular accident (CVA) patient with stable vital signs was just transferred from the medical intensive care unit and needs a nursing assessment and a care plan. The routine activities of patient assessments, updating care plans, taking vital signs, assisting with each patient's personal hygiene, giving scheduled and PRN medications, passing meal trays, stocking supply carts, and answering call lights also must be accomplished. In addition to all of these tasks, Sarah knows that she will have to spend time orienting the LVN to the unit.

Module 1: What should be included in Sarah's plan to orient the LVN to the medical-surgical unit?

Module 2: When reviewing the tasks to be completed, what may Sarah delegate to the LPN? What level of supervision will be required?

Module 3: What may Sarah delegate to the nursing assistant? And what level of supervision will be required?

Module 4: What tasks might be assigned to the nursing assistant (tasks that a nursing assistant is responsible for performing as a condition of employment and as spelled out in the job description)?

Module 5: What patient care activities must be done by Sarah and may not be delegated to the LPN or the nursing assistant?
Suggested Responses to Case Study on Delegation

Module 1

Suggested Answer: If Sarah has not previously worked with this LPN in the medical-surgical unit and/or is not aware of the person’s background in caring for adult medical-surgical patients, a call to the nurse manager is in order to verify the LPN’s skill and experience in working on this particular unit with this particular patient population, as well as the LPNs overall knowledge or organizational policies such as infection control and emergency procedures. Sarah will need to talk directly to the LPN about her experience in working with adult medical-surgical patients. After verifying the LPN’s knowledge and level of experience, Sarah can plan orientation and delegation for this nurse. Items she will have to consider include location of supplies and emergency equipment; medication administration, documentation, and communication processes unique to the particular unit; introductions to key personnel (e.g., unit secretary, unlicensed assistive personnel [UAP], other nurses); and location of patient rooms and introduction to patients.

Module 2

Suggested Answer: Assuming the LPN has occasional experience in working with medical-surgical patients, Sarah may delegate scheduled and PRN medication administration to the LPN (with the exception of the IV medications, which Sarah will administer). Sarah will provide frequent, direct supervision for the LPN because their working relationship is new. After assessing and developing the plan of care for the newly admitted CVA patient, Sarah may be able to delegate to the LPN some care tasks such as monitoring vital signs and assisting with ambulation. Sarah should ask the LPN to assist her with changing dressings and ambulating postsurgical patients to help the LPN gain experience in working with this patient population.

Module 3:
**Suggested Answer:** Sarah may delegate the following tasks to the nursing assistant: retrieving lab reports from the computer system and assisting stable patients with ambulation. After assessing and developing the plan of care for the newly admitted CVA patient, Sarah may delegate some of the patient’s personal hygiene tasks to the nursing assistant as well. Sarah will need to provide initial directions and periodic supervision for the nursing assistant.

**Module 4:**

**Suggested Answer:** The nursing assistant assignment will include taking and recording routine vital signs and reporting out-of-range values to the RN, passing meal trays and water according to unit procedures, straightening up patient rooms and making beds, assisting patients with personal hygiene, and answering call lights and communicating patient needs to the RN.

**Module 5:**

**Suggested Answer:** Sarah may not delegate the following activities: reviewing lab values and making decisions for further action; providing patient education; making initial and ongoing patient assessments; tending to care plan updates; and supervising the LPN and nursing assistant.