

Chapter 10

Delegation, Leadership, and Management

Chapter 10

Lesson 10.1

Learning Objectives

Theory

- 1) Differentiate between the three different leadership styles discussed in the chapter.
- 2) Compare and contrast examples of effective and ineffective communication.
- 3) Describe four characteristics of an effective leader.
- 4) List four considerations for delegating tasks to unlicensed assistive personnel (UAPs).

Learning Objectives

Clinical Practice

- 1) Determine the leadership style of the charge nurse on the unit to which you are assigned.
- 2) Appropriately delegate three tasks to a nurse's aide or UAP.

The Chain of Command

- Learn the organizational structure of your facility
- Know the chain of command for your area
 - Who is your immediate supervisor?
 - To whom does your supervisor report?
 - To whom should you report changes in patient condition?
 - To whom do you go with concerns or complaints?
 - Who is in charge of scheduling your hours?
 - Who should you call if you cannot make it to work?

Leadership Styles

- Laissez-faire leader
 - Does not attempt to control the team and offers little, if any, direction
- Autocratic leader
 - Tightly controls team members
- Democratic leader
 - Frequently consults with staff members and seeks staff participation in decision making

Good Leader Attributes

- Open-minded
- Consistent
- Responsible
- Able to teach
- Good problem-solver
- Excellent clinical skills
- Good sense of humor
- Sensitive
- Objective
- Flexible
- Decisive
- Calm
- Assertive and articulate
- Fair and organized
- Considerate
- Tactful
- Good role model

Keys to Effective Leadership

- Collaboration
- Effective communication
- Clinical competence and confidence
- Organization
- Delegation

Effective Communication

- Communicating in direct, concise terms in a tactful, friendly, nonthreatening way is essential to creating a supportive work environment
- When assigning tasks, be specific about what is to be done, how it is to be done, and when task is to be completed
- Treat others in the manner you prefer to be treated

Clinical Competence and Confidence

- Confidence in the ability to perform skills well is essential if you are to have the respect of the other members of the team
- Admit when a mistake has been made or when you don't know something

Organization

- Plan each day carefully; the plan should have some built-in flexibility for unforeseen events
- Decision-making ability is needed to quickly divide up patients and assign tasks

Delegation

- A licensed nurse transfers authority to perform a nursing duty in a selected patient situation
- The LPN is accountable for the tasks delegated
- Delegate only where permitted by law
- Competencies of unlicensed personnel must be documented before tasks are delegated to them

Delegation (cont'd)

- You are accountable for the tasks you delegate
- You are required to know the capabilities of each person to whom you delegate
- You must know whether the task can be legally delegated
- You must communicate effectively with the person to whom you are delegating

Delegation (cont'd)

- You must be familiar with the state's nurse practice act
- You must know what a UAP can or cannot do
- DO NOT delegate assessment, analysis, planning, or evaluation—these tasks can be performed only by licensed personnel
- Interventions requiring judgment should not be delegated

Delegation (cont'd)

- Delegating effectively means including the result desired, including the timeline for completion
- Delegating does not mean you give up responsibility for overall patient care
- Provide praise or constructive criticism on how the UAP performed the delegated task
- If UAP performance has been poor, document the specific facts, not your opinion

Question 1

Jackie is working in a hospital setting. Her charge nurse does not attempt to take control of the unit and offers little direction. Jackie is a new graduate nurse and finds this difficult at times. She knows that this what type of leadership style?

- 1) Laissez-faire
- 2) Autocratic
- 3) Democratic
- 4) Appropriate

Question 2

Denise works in a hospital where her charge nurse consults her staff and seeks participation in decision making. What type of leadership style is Denise's charge nurse exhibiting?

- 1) Laissez-faire
- 2) Autocratic
- 3) Democratic
- 4) Appropriate

Question 3

Mimi is working in a busy physician's office. She must delegate certain tasks to other team members working in the office. When delegating tasks, she realizes it is important to do all of the following *except*:

- 1) avoid being accountable for the tasks she delegates to others.
- 2) treat others in the manner she prefers to be treated.
- 3) be very specific about what is to be done.
- 4) be specific when tasks are to be completed.

Chapter 10

Lesson 10.2

Learning Objectives

Theory

- 5) Explain why interpersonal relationships are important when delegating and managing others.
- 6) Distinguish the skills and functions of the team leader with those of the charge nurse.
- 7) Identify management functions of the LPN/LVN working in a long-term care facility, home care, or an outpatient clinic.
- 8) Discuss techniques of effective time management.
- 9) Explain the importance of the readback for verbal or telephone orders.

Learning Objectives

Clinical Practice

- 3) Create a time-efficient work organization plan for a shift.
- 4) Demonstrate proficient use of the hospital computer.
- 5) Accurately and carefully transcribe orders per facility policy.
- 6) Document accurately for reimbursement.
- 7) Know your facility's policies and procedures and uphold the standards of nursing practice.
- 8) Find a mentor who can coach you on improving your delegation and management skills.

Leadership Roles

- Beginning leadership roles
 - Initially, new LPN/LVNs will perform leadership functions with UAPs
 - Later on, team leading may be required
- Advanced leadership roles
 - Charge nurse
 - Some training and experience in nursing administration and preparation in a specialized area in many states
 - Responsible for total nursing care of patients on the unit during the shift

Management Skills for the LPN/LVN

- Manage time
- Use a computer
- Order supplies
- Transcribe orders
- Place phone calls to physicians and families
- Process verbal orders
- Documentation for reimbursement

Time Management

- Make a “to-do” list before the shift starts
- List depends on where tasks are accomplished
 - Clinic, hospital ward, home health, skilled nursing facility, physician’s office
- Before making rounds, devise a time schedule for the work of the shift
- At the end of the workday, evaluate the effectiveness of your time management

Using the Computer

- Place orders to the various departments
 - Supplies, medications, diets, laboratory and diagnostic tests, engineering and housekeeping needs
- Schedule surgery
- Construct nursing care plans
- Track patient acuity levels
- Obtain laboratory results

Transcribing Written Orders

- First read all of the orders
- Transcribe stat orders first; verbally tell them to the nurse responsible for carrying them out
- Transfer the orders to the Kardex, computer “care plan,” medication and treatment cards, and the medication administration record (MAR)
- Check off each order as it is transcribed

Taking Verbal Orders

- The Joint Commission discourages verbal and telephone orders unless absolutely necessary
- Verbal orders can only be taken by licensed nurses, and in some states only by an RN
- Nurse enters the order on the physician's order sheet and marks it VO (verbal order) or TO (telephone order) with the date, time, first initial, last name, and professional designation
- Physician must sign the written form of the verbal order as soon as possible

Documentation for Reimbursement

- All nursing care and equipment used must be documented
- Reimbursement rates depend on documentation
- In long-term care facility, the minimum data set (MDS) must be filled in as accurately as possible for the facility to receive the maximum Medicare or Medicaid payment for services rendered

Risk Management

- Risk management attempts to prevent patients from engaging in litigation in the event of adverse outcomes
- A key tool is practicing according to the agency's policy and procedure manual
- Attending to patients' complaints can help decrease the risk of litigation

Question 4

As a charge nurse in a long-term care facility, transcribing written orders is a daily task. When transcribing written orders, it is important to remember:

- 1) stat orders should be taken off within 24 hours.
- 2) to check off each order prior to discharge of the patient.
- 3) allergies are important and the nurse should memorize all patient allergies.
- 4) all orders written preoperatively are considered canceled at the time the patient enters surgery.

Question 5

Janice, a new LPN, wants to make sure she is taking telephone orders properly. She knows it is important to do all of the following *except*:

- 1) have a pen ready and the patient's medical record open to the appropriate page to accept a new physician order.
- 2) write the order as close as you can remember to the physician's orders.
- 3) document the date and time, and indicate "TO" for telephone order with your first initial, last name, and LVN or LPN.
- 4) see that the physician signs off on the order when making rounds within 48 hours.