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This week in class, we learned about legal issues and liability in nursing. Concerning this, the article I selected dealt with a home health nurse that inappropriately delegated re-inserting a GI tube to a certified nursing assistant (CNA). In this case, after being notified the patient's GI tube had come out, the nurse anticipated a lengthy wait time before being available to see the patient and initially recommended that the patient goes to the emergency department (NSO, n.d.). The patient's family indicated that they would prefer to wait for the nurse (NSO, n.d.). The CNA communicated to the nurse that they would be comfortable performing the reinsertion, which the nurse proceeded to delegate to her with the instruction not to resume feedings (NSO, n.d.). The CNA incorrectly placed the GI tube in the peritoneal space and failed to advise the family not to continue feedings until the nurse arrived to verify placement (NSO, n.d.). As a result, the family resumed feedings, and the patient developed peritonitis (NSO, n.d.). The family pursued litigation against the nurse and home health agency (NSO, n.d.). Ultimately, the case settled a pretrial agreement; according to NSO (n.d.), the total cost of the nurse's legal defense and her portion of the settlement was more than \$255,000.

This article left me with two overarching impressions. First, the delegation was unquestionably inappropriate, and the nurse should have recognized doing so exposed her to liability and jeopardized her client's safety. In this respect, she failed on several counts. For instance, when delegating tasks, the registered nurse needs to consider the knowledge and skills of delegates and if state and agency policy allows the nurse to delegate the task to that person (ATI, 2019). As another example, the supervision the nurse provided was inadequate (ATI, 2019). She failed to ensure that the CNA had placed the tube correctly or that family understood not to resume feedings until she could do so (NSO, n.d.). Considering

the facts, I believe the consequences were appropriate; besides the patient's medical expenses, this patient suffered a painful complication (NSO, n.d.). Accordingly, I think it is right and fair that either the nurse or her insurer pays restitution as part of a settlement.

Secondly, for me, this case study drove home the point that the liability nurses have is substantial and that failing to practice according to state law can carry considerable financial and professional consequences. In addition to this nurse's financial expenses, a state agency received a report of the incident (NSO, n.d.). In my practice, I think it is helpful to keep case reports like these in mind when cutting corners in the name of efficiency feels tempting. Furthermore, it serves as a reminder that if I ever face litigation, carrying malpractice insurance can drastically offset the expenses of defense and the fines or settlement fees I might incur.

## References

Holman, H. C., Williams, D., Sommer, S., Johnson, J., Ball, B. S., & Lemon, T. (2019). *Nursing leadership and management review module* (8<sup>th</sup> ed.). Assessment Technologies Institute, LLC.

NSO. (n.d.). *Nurse case study: Wrongful delegation of patient care to unlicensed assistive personnel.*

<https://www.nso.com/Learning/Artifacts/Legal-Cases/Wrongful-delegation-of-patient-care-to-unlicensed>