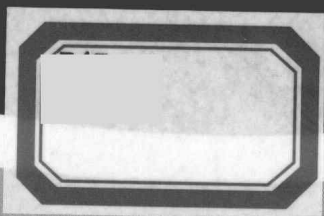


Nursing **Delegation** and **Management** of Patient Care

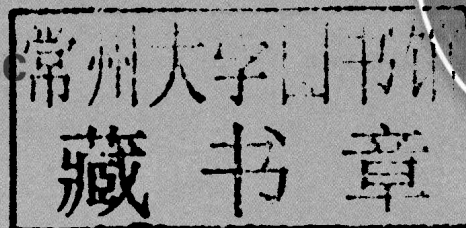
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Nursing Delegation and Management of Patient Care



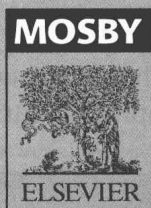
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Nursing Delegation and Management of Patient Care

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Nursing **Delegation** and **Management** of Patient Care

*I dedicate this book to my loving family: my husband Robert, my son Robert,
my lovely daughter Lisa, my baby John, and to my in-laws, Edward and
Irene Motacki, Uncle Ted Tatarek, and brother-in-law Brian Motacki.
Thank you for your support in my nursing endeavors and philanthropy work.*

Thank you and I love you.

Kathleen Motacki

*For all of the marvelous nurses I have worked with over the years ...
and to Elaine, Peggy, Jody, Kathleen, Cristina, Asha, and Ulysses at Ramapo.*

Kathleen Burke



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Associate Clinical Professor at Saint Peter's College School of Nursing, Jersey City, New Jersey, has more than 33 years of experience in nursing, 7 years as a Professor of Nursing, and currently teaches traditional 4-year nursing courses at the Jesuit College of New Jersey. Her areas of clinical and classroom expertise include: pediatric nursing, nursing leadership and management, community health, Lifespan, and Prep for Success programs. She has taught pediatric NCLEX® review sessions. She is a referral liaison at Children's Specialized Hospital, New Brunswick, New Jersey. She holds board certification in pediatric nursing from the American Nurses Credentialing Center (ANCC). She was on the ANCC examination-standard-setting committee for the new pediatric credentialing examination. She was the lead investigator for the American Nurses Association School of Nursing Curriculum Study on Safe Patient Handling and Movement. She received the 2008 National Occupational Research Agenda (NORA) Partnering Award for the American Nurses Association Safe Patient Handling and Movement Training Program for her role in the Schools of Nursing research project. She is past president of the Epsilon Rho Chapter Sigma Theta Tau International Nursing Honor Society and is presently the Vice-President for Saint Peter's College for Mu Theta Chapter-At-Large, Sigma Theta Tau International Nursing Honor Society. Professor Motacki obtained her BSN and MSN in transcultural nursing administration from Kean University, Union, New Jersey. She

has published several articles in nursing journals, her latest a continuing nursing education series for contact hours, "Safe Patient Handling in Pediatrics" in the *Journal of Pediatric Nursing*. She has published several books including *The Illustrated Guide to Safe Patient Handling and Movement*, Springer Publishing; *Silent Medical Errors*, Publish America; *Life is Ridiculous*, Dorrance Publishing; and *My Friends*, Dorrance Publishing. She has presented at conferences on Safe Patient Handling and Movement in New Jersey, Florida, Rhode Island, at The Sigma Theta Tau International Nursing Honor Society Biennium in Indianapolis, and the Annual Safe Patient Handling and Movement Conference. She was the keynote speaker at the Founders Day Dinner for the New Jersey Consortium of Chapters at Rutgers University. She is a nurse philanthropist and her volunteer efforts include: Our Lady of Fatima Rehabilitation Hospital in Liberia, Africa; Children's Specialized Hospital, New Brunswick, New Jersey; Children's Miracle Network; The International Wheelchair and Amputee Athletic Games; Lupus Foundation; Holy Spirit Church; Sigma Theta Tau International Nursing Honor Society; and American Cancer Society for Breast Cancer Research. Professor Motacki is married to a dialysis health care administrator and has three children: Robert, a Master's Prepared Special Education Teacher; Lisa, who is attending the school counseling Graduate Program at Caldwell College; and John, who attends New Jersey City University.

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Professor of Nursing, and Assistant Dean in Charge of Nursing at Ramapo College of New Jersey, she has more than 36 years of experience in nursing and has served in a wide variety of positions over the years. As an educator, she has taught at the diploma, associate, baccalaureate, masters, and doctoral levels. She has been a Senior Vice President of a local community based hospital, and later served as an Assistant Dean at the University of Medicine and Dentistry of New Jersey (UMDNJ). Since 2007, she has led the Nursing Programs at Ramapo College of New Jersey. Her clinical and academic expertise includes nursing informatics, leadership, performance improvement and program evaluation. She also serves as a nurse research consultant to two local Magnet Hospitals. As a consultant to the Centers of Excellence program of the National League for Nursing (NLN), she works with nursing programs to further develop their innovative programs. Dr. Burke also assisted with the development of the Certified Nurse Educator exam of the NLN. She also serves as a Senior Examiner to the Malcolm Baldrige National Quality Program as well as being a site examiner for the National League for Nursing Accrediting Commission. In her role as the leader of the Nursing

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She received a BS from Rutgers University College of Nursing, and MA and PhD from New York University, Division of Nursing. She presents frequently on innovations in nursing education, technology in the curriculum, performance excellence and the partnering of academic and clinical institutions. She holds membership in Sigma Theta Tau, Phi Delta Kappa, and Omicron Delta Kappa. She has been inducted into the Stuart Cook Master Educators' Guild at UMDNJ and has received numerous Who's Who citations. She has also received numerous grants in support of the Nursing Programs at Ramapo.



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Preface to the Instructor

Nursing Delegation and Management of Patient Care is designed to assist nursing students and novice nurses to begin to develop an understanding of the myriad of issues facing them as managers of care and the potential nursing leaders of tomorrow. This is only a beginning; the concepts of management and leadership are changing daily. Health care is moving at an unprecedented speed, and it is imperative that we all attempt to keep up. What is the important lesson here is that as nurses, we need to keep current, questioning, and focused on what is “best” for our patients and practice.

There is massive information, both in the scholarly and commercial literature, that focuses on what makes a good manager or leader. It is important that nurses keep in touch with this literature, but they need to be able to differentiate between what is “best evidence” and what is best-selling fiction. As you move into practice, your professional organizations, your health care library/librarian, and your own engagement in the profession will be your best allies. Keep in touch with the current literature and strive to continually improve the care that you deliver to patients and families. Remember: continuous improvement is continuous!

This book is divided into 5 sections, each dealing with a concept of leadership and management. American Organization of Nurse Executives (AONE) (2005) delineated five areas of competency for the nurse manager. These areas are: communication and relationship building, knowledge of the health care environment, leadership, professionalism, and business skills. The emphasis on particular competencies will be different depending on the position in the organization. There are skills necessary for managing the business of health care. These would include:

- Financial Management
- Human Resource Management
- Performance Improvement
- Foundational Thinking Skills
- Technology
- Strategic Management
- Clinical Practice Management

Other competencies are necessary for the art of managing health care. This is leading the people of health care. These competencies would include:

- Human Resource Skills
- Relationship Management and Influencing Behaviors
- Diversity
- Shared Decision Making

And lastly, there are competencies for creating the leader in yourself:

- Personal and Professional Accountability
- Career Planning
- Personal Journey Disciplines
- Optimizing the Leader Within

FEATURES

The text is organized according to these competencies of nurse leaders and managers. Each chapter includes a Clinical Corner box written by a nurse leader that shares a current practice that is utilized in practice. Additionally, there is an evidence-based discussion from a current piece of literature that reviews current research and/or best practice. It is our hope that the reader gleans some ideas from these sections to spark their own practice. Each chapter concludes with some NCLEX®-exam style question that may prove helpful in reviewing the content.

ANCILLARIES

Evolve Resources for Nursing Delegation and Management of Patient Care, first edition is available at <http://evolve.elsevier.com/Motacki/delegation/> to enhance student instruction. This online resource is organized by chapter and includes the following:

For instructors:

- Case Studies
- Test Bank Questions
- PowerPoint Slides

For students:

- NCLEX®-exam style practice questions with answers and rationales

Preface for the Students

Nursing Delegation and Management of Patient Care

is designed to assist you as you prepare to become the nursing leaders of tomorrow. To help you make the most of your learning experience, here are the key features that you will find in this text:

Objectives begin each chapter and explain what you should accomplish upon completion of each chapter.

Key terms with definitions are placed at the beginning of each chapter for quick reference.

CHAPTER 12

Monitoring Outcomes and Use of Data for Improvement

Chapter Objectives

1. Relate the principles of performance improvement to the monitoring of patient care data.
2. Discuss routine information monitored by nurse managers.
3. Identify methods of analyzing data in health care.
4. Identify outcomes for various areas of nursing responsibility.
5. Differentiate between data and information.
6. Analyze the role of the nurse manager in assisting unit staff to deal with the information provided by the data collected.

Definitions

Benchmarking Process of comparing the performance of an organization against a set standard or best practice

Data Factual information (as measurements or statistics) used as a basis for reasoning or decision making

Information Knowledge gained from the analysis of data collected

Outcomes What follows as a result or consequence of the planned care delivered to patients. It is the objective evaluation of

Core Measures Those measures determined to be vital to the delivery of safe patient care by The Joint Commission and measured throughout the country

FOUR DOMAINS OF NURSING DATA

Many of the chapters in this text have discussed areas of importance for the nurse and nurse manager. Many of these areas of importance will be measured on a routine basis. And the nurse needs to be knowledgeable of the levels of performance in these key areas.

What are the uses of outcome information? Many individuals, especially in some health care organizations, believe that very little is done with all of the information that is collected on a daily basis. In organizations that have adopted a philosophy of organizational learning, outcome data are taken very seriously and used to drive improvement. These organizations have knowledge of their level of current performance

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LEGAL CORNER

CLINICAL CORNER
Improving Performance Based on Data—
The Role of the Advance Practice Nurse
Mary Jo Auci

Acute Myocardial Infarction Time

[illegible][illegible]

154 SECTION THREE ••• Information Management

EVIDENCE-BASED PRACTICE

Hospitals Crack Down on Deadly Infections
Modified from Francis, T. (2007). *Hospitals crack down on deadly infections*. The Wall Street Journal, June 26.

Hard-to-treat, drug-resistant strains of methicillin-resistant *Staphylococcus aureus* (MRSA) have become increasingly common, accounting for more than 60% of hospital staph infections. Patients with these drained immune systems are dying, and with all the spread of these infections, hospitals are working to prevent and isolate these infections through early identification and isolation of infected patients. While early efforts at Newark's Israel Medical Center are saying early efforts to identify patients are well worth the cost and have decreased the number of patients at the zero and cut ICU patients who carry MRSA infections to less than 10% in about 6 months. Under the direction of Maryland Medical Center is reporting similar results and reports that the surveillance efforts pay for themselves in prevention of costly infections. "Active surveillance" involves the screening of all patients, symptomatic and asymptomatic, when they enter the hospital. New equipment for the rapid screening of samples is sensitive but is being proved through the use of samples is isolated early, making it less likely the bug will spread. The hospitals currently it

Previously, the Centers for Disease Control and Prevention (CDC) estimated that 3.95 of every 1000 patients discharged from a hospital had been diagnosed with MRSA; more recent studies suggest the numbers to be as high as 34 of 1000. Targeted patients are care of the organism without active infection, 12 per 1000 estimated that 126,000 patients are hospitalized with MRSA infections each year; 5000 of these patients die, costing \$4.5 million annually in health care costs. It is seen that MRSA is a major concern in health care. It was in the beginning, and the MRSA infections are on the rise. With measures as simple as hand washing, MRSA infections in hospitals could be significantly decreased when hand washing is combined with isolation of infected patients and the use of gloves and gloves during the care of these infected patients.

NCLEX® EXAM QUESTIONS

1. What are the uses of outcome information?
 1. Detect needed improvements and motivate and assist staff.
 2. Plan daily schedule on unit and detect needed improvements.
 3. Evaluate staff for errors and discuss remediation.
 4. Provide staff support and evaluate negative behavior.
2. Nursing data fall into four domains:
 1. client care, provider staffing, administrative, and research
 2. client care, billing, administrative, and research
 3. core values, provider staffing, administrative, and research
 4. core values, billing, administrative, and reports
3. Mechanisms related to resource identification and allocation have to be driven by internal data, and

Information systems that consider all domains of hospital data include:

1. clinical, fiscal, administrative, and patient satisfaction data
2. classification, financial, administrative, and patient satisfaction data
3. clinical, financial, social, and patient satisfaction data
4. clinical, financial, administrative, and patient satisfaction data.

The most common performance indicator reviewed by nurses on a routine basis is the patient satisfaction report. Included in this report is:

1. the level of satisfaction of all discharged patients
2. the nursing perception of care delivered to the patients surveyed

Evidence-Based Practice boxes review current research and/or best practice.

Each chapter ends with NCLEX®-exam style review questions.

Clinical Corner boxes discuss topics related to practice process improvements made by nurses.



Acknowledgments

Thank you to Dr. Kathleen Burke who agreed to take on this project with me. Her knowledge and expertise has made this book an excellent and exceptional resource for senior-level students and new graduate nurses. Her lead on the clinical corners and the evidence-based practice boxes make this book unique. Thank you to the contributors and reviewers for their expertise and input. Thank you to senior acquisitions editor Yvonne Alexopoulos, senior developmental editor Danielle Frazier, editorial assistant Heather Rippetoe, and project manager Pat Costigan for their unending patience with this project. Finally, thank you to my daughter Lisa for assisting me with permissions and references.

Kathleen Motacki

Thank you to Kathleen Motacki for asking me to assist her in this project. Also to Jean Kenworthy of Elsevier who suggested my name to Kathleen. Thank you to the contributors and reviewers for their expertise and input. Thank you to senior acquisitions editor Yvonne Alexopoulos, senior developmental editor Danielle Frazier, editorial assistant Heather Rippetoe, and project manager Pat Costigan for their unending patience with this project. I would also like to thank my many colleagues who assisted with the evidence-based practice boxes and clinical corners. Their names are listed under contributors.

Kathleen Burke

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