Assignment Making

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OBJECTIVES

- At the end of this class, the student will be able to:
- Utilize the decision-making process as it applies to the management process in the assignment making process.
- Compare the steps of the nursing process with the steps of the management process in staffing.
- Discuss methods of assignment making.
- Describe the process used in conducting a client conference.
- Describe the process used to prepare for a client conference.

Con't OBJECTIVES

- State the common purpose of client care conferences.
- Describe various methods of evaluating the effectiveness of client care conferences.
- Differentiate between the roles of a licensed and unlicensed health care provider.

Required Reading

- REQUIRED Reading. **Marquis & Houston** (9th ed.)
- Refer to BRN Guidelines of:

  Bring to class

- -RN as Supervisor

  -RN responsibilities when floating to new client care unit
  -RN Ratios Alert

  -LVN - 2518.5 (www.bvnpt.ca.gov)

  -CNA – 2725.3 (can be found on the BRN website)

Definition of Assigning

- An assignment is the allocation of clients or client care responsibilities or interventions that are within the provider's scope of practice and/or scope of employment.
- Assignment describes the distribution of work that each staff member is to accomplish during a given work period (ANA-NCSBN n.d).
- The verb "assign", according to the NCSBN is used to describe

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Nurses Assign Client Care according to the:

- Client's condition
- Individual's scope of practice
- Competence of the individual performing the intervention
- Scope of employment/agency policy
- NOTE: RN, LVN, or NAP assumes responsibility and is accountable for completing assignment 6

Principles of Assignment Making

- Acuity
- Job description
- Scope of practice

also

- Experience
- Skill Level

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Acuity

- The severity of illness or client condition
- Can be considered in
  - Volume (census)
  - Severity (how sick patient is)
  - Intensity (amount of work or time involved with a level of complexity of the care required)
- Acuity level
  - 1 = Minimal Routine care
  - 2 = Average care
  - 3 = Above average care
  - 4 = Almost constant care

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Job Description

- ***Job*** = a collection of tasks or responsibilities employee conducts
- ***Task*** = a unit of work
- ***Functions*** = large number of tasks
- ***Job description*** = list of the general tasks, or functions, and responsibilities of a position

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Scope of Practice

- Limitations and extent to which a nurse can practice
- Determined by set of laws defined as the Nurse Practice Act
  - RN scope of practice broader than LVN d/t level of content of education

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Factors to be Considered when Making Assignments

- Patient's physiologic status and complexity of care
  - Acuity should be considered first, but you may not always see this actually happen
- Infection control procedure required
- Degree or level of supervision needed
- Skill level of staff

Guidelines for Assigning Patient Care

- Amount of nursing care time required
- Whose best qualified
- Maximize continuity of care
- Combine assignments
- Specify expected outcomes
- Designate one person to be responsible
- Provide help to staff
- Communicate clearly

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Legal Liability

- **Avoid liability by not assigning tasks that:**
  - **Are highly invasive**
  - **Belong exclusively to RNs**
  - **A person is not trained for**
  - **Does not have time to monitor the person**

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Practice question

A 52 year old is diagnosed with thrombocytopenia r/t acute lymphocytic leukemia, and is admitted to the hospital for treatment. The client should be: assigned to a

A) private room to avoid affecting other clients and staff.
B) private room to avoid being affected by other clients and staff.
C) semiprivate room to be stimulated during hospitalization
D) semiprivate room to have the opportunity to express his/her feelings about this illness

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Case Management (CM) definition

(Marquis & Houston, 9TH ED. Pg. 358-367)

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Client Care as a Case Management (CM) tool

- Involves multidisciplinary teams that assumes collaborative responsibility
  - Refer to box 6-3: Responsibilities of Case Managers/Discharge Planners

(Berman, 10th Ed. Pg. 99)

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Case Management Process Six components

- Planning
- Assessing
- Coordinating
- Implementing
- Monitoring progress
- Evaluation

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Identify Clients Who Could Benefit

- Organization's screening criteria
- Consider conference on a client for the following reasons:
  - Those experiencing severely chronic illnesses
  - Those experiencing catastrophic injuries

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Preparation

- Prepare for and plan client conference by gathering relevant information and data
  - Medical records
  - Interviews
  - Claims
  - Person/persons of interest to the client

facilitate, coordinate and collaborate

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Types of Conferences

- Care-planning conference
- Staff building conference
- Discharge planning conference
- Utilization review conference

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Nursing Roles Job Descriptions

Title 16 Code of Regulations RN

- Advocates
- Teaches
- Formulates nursing diagnosis
- Formulates care plan
- Explains health treatment
- Performs skills
- Evaluates effectiveness of care plan
- Delegates tasks to subordinates
- Supervises nursing care by subordinates

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RN Job Description

- American Nurse Association (ANA)
- Scope of Registered Nursing Practice are outlined in the Nursing Practice Act (NPA) Code Section 2725, California Code of Regulations Title 16 Section 1443.5, and portions of Title 22 Section 70215
- See BRN handout, Understanding the Role of the RN

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Title 16 Code of Regulations LVN

- Performs basic nursing services
- Administers meds
- Applies communication skills
- Contributes to teaching plan r/t self care
- Documents
- Current knowledge/skills maintained
- Confidentiality

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Licensed Vocational Nurse (LVN) Job Description

- Basic Assessment for an LVN is DATA COLLECTION ONLY!! (as defined by the law)
- LVN CANNOT perform that level of assessment which requires synthesis of data and evaluation (i.e., the nursing process)
- LVN's are NOT allowed to monitor or hang IV Fluids with ANY additives, including electrolytes. They MAY start IV and hang IVF without additives and monitor (like plain NS or D5).

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BRN NAP/UAP Scope

- The RN ultimately decides appropriateness of assigned task
  - NAP/UAP *may not* reassign an assigned task
  - NAP/UAP may perform ADLs (bathe, feed, ambulate, VS, weight, elimination, safety)

In home supportive services some NAP/UAPs are expanded as are assisted living agencies & adult day care

- NAP/UAPs can in a long term facility or home health
  - Simple dressing changes (no debridement or packing of wound)
  - Suction chronic trachs
  - GI feedings, care for wound healed gastrostomies
  - ADLs (bathe, feed, ambulate, VS, weight, elimination, safety)

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Nursing Assistant Personnel (NAP) Unlicensed Assistive Personnel (UAP) Job Description

- Unlicensed health care givers should be utilized only to be ASSISTIVE to licensed nursing personnel
- Examples of NAP/UAPs are certified nursing assistants, home health aides, and patient care technicians
- See BRN NAP/UAP handout

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NAPs/UAPs May Not

- Perform comprehensive assessments
- Validate assessment data
- Formulate a nursing diagnosis
- Identify goals of a nursing diagnosis
- Determine appropriate nursing interventions for a nursing diagnosis
- Evaluate nursing care
- Interpret or make decisions based on an assessment

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Skills Not to be Performed by NAP/UAP

- Administer meds
- Venipuncture or IV therapy
- Parenteral or tube feeds
- Invasive procedures (inserting NGT, cath, tracheal suctioning in acute hospital care)
- Assess pt condition
- Educate patients/families
- Complex labs
- Vital signs specifically for RN to give meds ie., HTN, Digoxin….

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ANY QUESTIONS???

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