

# ASSESSMENT TOOLS FOR THE NURSE DELEGATION PROCESS



**SCHOOL OF NURSING**  

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# OUTLINE

- I. Acknowledgements
- II. Prior Research Study
  - Perspectives of Nurse Delegators and Long-Term Care Workers on Nurse Delegation
- III. Two Instrument Development Studies
  - Insulin Administration Competency Evaluation Tool Study
  - Stable and Predictable Condition Assessment Instrument Study
- IV. Future Research
  - Evaluation Study on Decision Patterns Using Case Scenarios on Clinical Stability and Predictability and Insulin Administration Competency
- V. Q&A

# ACKNOWLEDGEMENTS

- de Tornyay Center Healthy Aging Undergraduate Scholarship Program: Funded “Perspectives on Nurse Delegation” Research Project
- Heather Young, PhD, RN, FAAN, Erika Parada RN, BSN, and Jevahly Wark RN, BSN: Gave expert feedback on project content for both insulin administration studies
- Nurse delegator participants: Provided data for all three research studies
- Long-term care worker participants: Provided data for “Perspectives on Nurse Delegation” and “Insulin Administration Evaluation Tool” Studies
- Washington State Nurses Foundation (WSNF): Funded “Stable and Predictable Condition Assessment Tool for Insulin Administration” Study

# 2017 PERSPECTIVES ON NURSE DELEGATION

- Earlier project about perspectives on nurse delegation established study need
- Participants:
  - Nurse delegators
  - Long-term care workers
- 30-40 minute, semi-structured, role-specific interviews (in-person and by phone), focused on:
  - Reasons for getting involved in nurse delegation
  - Delegator and caregiver demographic information and training
  - Situations that were and were not appropriate for delegation
  - Medication administration, emphasizing insulin and other critical medications
- Findings established need for developing measures to assess:
  - Patient stability
  - Caregiver post-training knowledge

# INSULIN ADMINISTRATION COMPETENCY EVALUATION TOOL STUDY

- **Preliminary Research:**

- Content experts: focus on new nurse delegators and brevity
- Literature review: competency evaluation, insulin administration process, current nurse delegation laws, history of nurse delegation

- **Purpose:**

- Create a refined competency tool via preliminary research
- Determine tool's clinical utility and applicability via survey feedback from nurse delegator and long-term care worker

# INSULIN ADMINISTRATION COMPETENCY EVALUATION TOOL

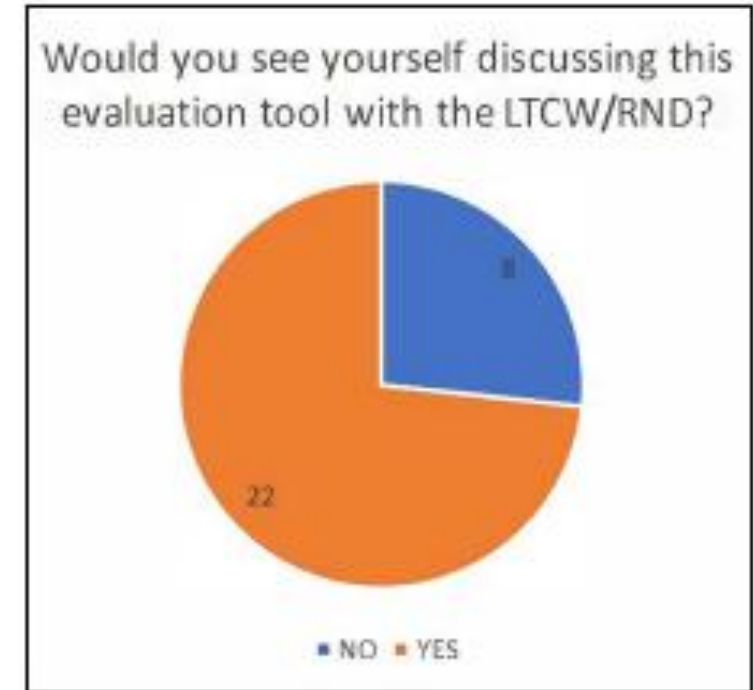
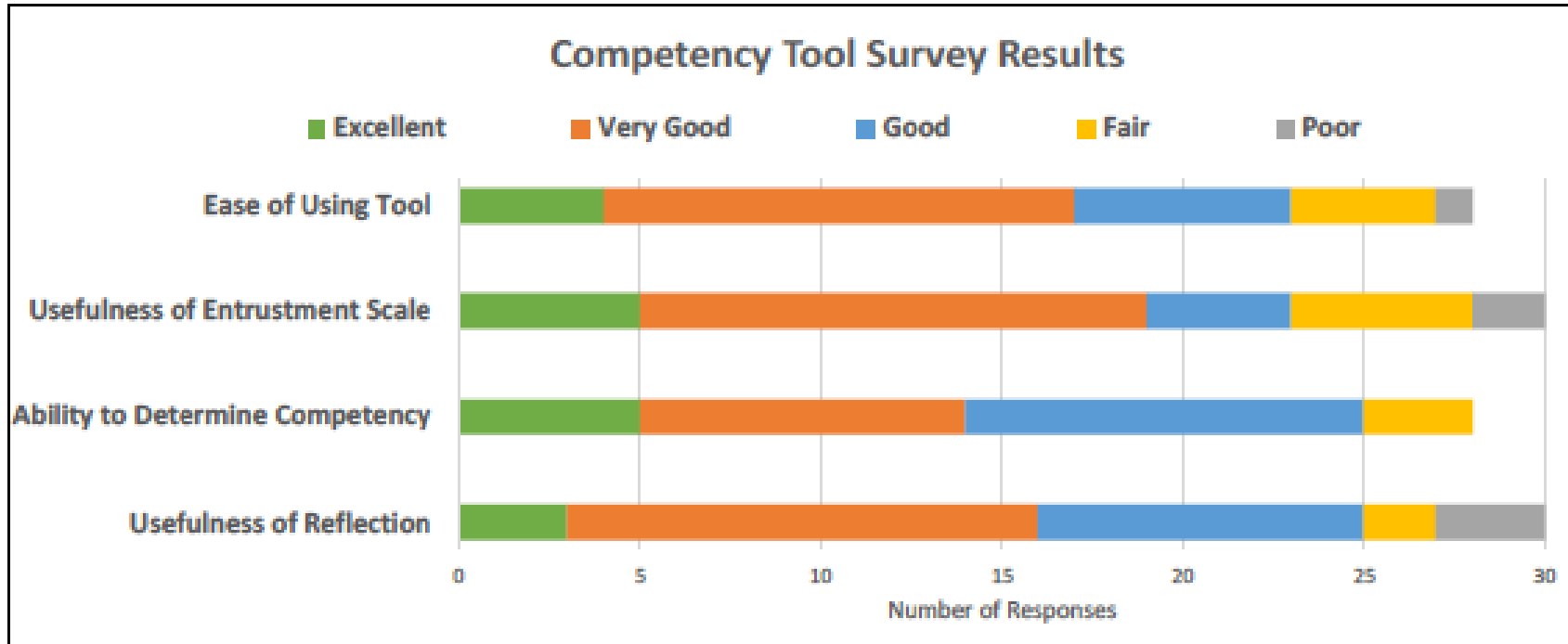
## Unique Characteristics:

- Entrustment scores use evaluator's observation based on ability to trust a trainee
- Self-reflection on one's attitude, knowledge, and skill adds potential value to competency evaluation
- Incorporated on-the-job mentorship and guidance
- Opportunity for standard language around task competency
- Skills based on current DSHS training resources

Insulin Delegation: Evaluation Form for Nurse Delegation						
Long-Term Care Worker's Name:						
	Evaluator Name	Evaluation Date	<b>Entrustment Scale</b> (used for observable practice):			
Evaluation 1:			1: Not trusted to perform skill even with supervision (Task should not be delegated)			
Evaluation 2:			2: Trusted to perform skill with direct supervision (Task should not be delegated)			
Evaluation 3:			3: Trusted to perform skill with indirect supervision (Task should not be delegated)			
Evaluation 4:			4: Trusted to perform skill independently			
			N/A: Skill was not observed at time of assessment (no score)			
Skill (and expectations)			Eval 1	Eval 2	Eval 3	Eval 4
<b>A. Evaluating Injection Site</b> (summary below) (JOB AID)						
<ul style="list-style-type: none"> <li>Identifies area of subcutaneous fat (upper outer area of arm)</li> <li>Skin intact, free of irregularities, not within 2 inches of nail</li> <li>Not before bath or activity that brings heat to area</li> </ul>						
<b>B. Medication Setup: Single Type of Insulin in a Syringe</b> (summary below)						
<ul style="list-style-type: none"> <li>Inform client what is being done and check 5 Rights of Medication Administration</li> <li>Inspect insulin vial and re-check 5 Rights of Medication Administration</li> <li>Perform hand hygiene, clean top of vial with sterile alcohol wipe</li> <li>Draw up the correct # of insulin units and check syringe for air</li> </ul>						
<b>C. Medication Administration: Single Type of Insulin in a Syringe</b> (summary below)						
<ul style="list-style-type: none"> <li>Informs client what is being done, and re-checks 5 Rights of Medication Administration</li> <li>Dons gloves and cleans skin with sterile alcohol wipe, holds skin taut</li> <li>Inserts syringe at 90° angle, then releases skin fold while holding syringe at 90° angle</li> <li>Removes syringe at same angle as inserted and immediately</li> <li>If bleeding occurs, applies pressure with cotton ball</li> <li>Performs hand hygiene and cleans work area</li> </ul>						
<b>D. Documenting Medication Administration</b> (summary below)						
<ul style="list-style-type: none"> <li>Documents according to workplace guidelines, and is professional</li> <li>Documents observed skin response, and reports changes</li> </ul>						
<b>E. Observe for Side Effects</b> (summary below)						
<ul style="list-style-type: none"> <li>Verbalize symptoms of low blood sugar (JOB AID), high blood sugar (JOB AID)</li> <li>Verbalize when to call 911</li> </ul>						
<b>F. Professional Skills</b> (summary below)						
<ul style="list-style-type: none"> <li>Communicates clearly with delegating RN (e.g.: uses SBAR)</li> <li>Listens actively and attentively, asks appropriate questions</li> <li>Communicates with empathy and sensitivity to cultural, racial, and ethnic differences</li> <li>Treats patients with dignity, humanity, and compassion</li> </ul>						
Insulin Delegation: Evaluation Form for Nurse Delegation (continued)						
Nurse Delegator Comments: (Consider strengths, areas for improvement, and goals for next evaluation)						
Week 1:						
<input type="checkbox"/> Discussed performance expectations for Week 2						
Week 2:						
<input type="checkbox"/> Discussed performance expectations for Week 3						
Week 3:						
<input type="checkbox"/> Discussed performance expectations for Week 4						
Week 4:						
<input type="checkbox"/> Discussed performance expectations for next evaluation period						
Long-Term Care Worker's Self-Reflection: (Consider strengths, areas for improvement, and personal goals for next evaluation)						
Week 1:						
Week 2:						
Week 3:						
Week 4:						

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# INSULIN ADMINISTRATION COMPETENCY EVALUATION TOOL STUDY RESULTS



# INSULIN ADMINISTRATION COMPETENCY EVALUATION TOOL STUDY SAMPLE SIZE

## Survey Demographics

Current Age (N=32)	
Less than 25 years	0.00%
25-29 years	3.12%
30-39 years	9.38%
40-49 years	15.62%
50 years or older	71.88%
Ethnicity (N=32)	
Hispanic	0.00%
Non-Hispanic	100.00%
Race (N=32)	
African American	9.38%
American Indian/Alaska Native	0.00%
Asian	6.25%
Caucasian	71.88%
Pacific Islander	0.00%
Other	12.50%
Education (N=32)	
Associate degree	25.00%
Bachelor's degree	37.50%
Graduate degree (masters or doctorate)	37.50%

What best describes you? (N=32)	
Long-term care worker (e.g., nursing assistant, home care aide)	3.12%
Nurse delegator	87.50%
Other professional involved in nurse delegation:	9.38%
Length of Time in Current Role (N=32)	
Less than 2 years	12.90%
2 to 5 years	32.26%
More than 5 years	54.84%
Length of Time Delegating Insulin (N = 32)	
Less than 6 months	6.45%
6-12 months	12.90%
More than 1 year	80.65%
# of patients you have delegated insulin for (N=32)	
1-5 patients	48.39%
5-20 patients	32.26%
More than 20 patients	19.35%



# STABLE AND PREDICTABLE CONDITION ASSESSMENT TOOL FOR INSULIN ADMINISTRATION STUDY

- **Preliminary Research –**

- Content experts: modify instrument to be task-specific (i.e. insulin administration) to avoid double charting and increase clinical utility
- Literature review: institutional comprehensive assessment tools, insulin administration risk factors, relevant NANDA diagnoses, current nurse delegation laws, and history of nurse delegation

- **Purpose:**

- Create refined instrument via preliminary research
- Determine clinical utility/applicability and potential improvements to current legal definition of stable and predictable condition via nurse delegator survey feedback

# STABLE AND PREDICTABLE CONDITION ASSESSMENT FOR INSULIN ADMINISTRATION TOOL

## STABLE AND PREDICTABLE INSTRUMENT FOR INSULIN ADMINISTRATION

Based on the criteria for delegation and risk factors for client instability and unpredictability, the nurse delegator can use this form to guide nursing judgment about nurse delegation of insulin administration.

### Category I: Care Compatibility with Nurse Delegation

Mark each nurse delegation criterion below as either "True" or "False" (refer to <a href="#">WAC 246-840-930</a> )	True	False
1. Client resides in a community-based or in-home care setting		
2. Client or authorized representative gives consent to delegation		
3. RN assessment of task has been completed (skip if currently being completed with this instrument)		
4. Client is in stable and predictable condition (skip if currently being assessed with this instrument)		
5. Delegation is within the scope of practice of the delegating RN		
6. Caregiver is properly trained and registered/certified to perform diabetes care and insulin injections when delegating insulin		
7. Required medications do not include injections (except insulin), sterile procedure, or central line maintenance		
8. Nursing judgment not required for task		
9. Results of task are reasonably predictable		
10. Task can be safely performed using exact, unchanging directions		
11. Task can be performed without complex observations or critical decisions		
12. Task can be performed without repeated nursing assessments		
13. Appropriate supervision is available for task, including with insulin injections, of at least weekly for the first four weeks of supervision.		
14. No specific laws or rules prohibit delegation		

If all criteria are met, continue to Category II on the next page ...

### Category II: Risk Factors for Client Instability and Unpredictability

Mark each item below as "Yes" or "No" to indicate whether the risk factor is present or not. (To further describe selected risk factors, use the "Additional Information" box below.)	Y	N
15. Alteration in mental status and/or delay in cognitive developed that diminishes self-care and functional ability related to diabetes		
16. Alcohol and/or illicit drug use		
17. Average daily physical activity is less or more compared to recent baseline since insulin was last prescribed or last insulin orders		
18. Compromised physical diabetic health status due to presence of other chronic diseases, such as chronic renal failure		
19. Client does not accept diagnosis		
20. Excessive stress		
21. Excessive weight gain or loss insulin compared to recent baseline since insulin was last prescribed or last insulin orders		
22. Inadequate blood glucose monitoring		
23. Undertreated blood glucose levels and/ or medications that produce inconsistent blood glucose levels, such as with steroid treatment, related to a recent change in scheduled and/or PRN medications		
24. Insufficient diabetes management, such as recent hospitalizations, due to hyperglycemia and/or hypoglycemia or inappropriate levels of HbA1c or other lab values		
25. Insufficient dietary intake, such as with skipping meals		
26. Insufficient knowledge of disease management		
27. Nonadherence to diabetes management plan		
28. Pregnancy		
29. Rapid growth period (pediatric clients)		
30. Additional information about the selected risk factor(s) (optional):		

FINAL DECISION	Yes	No
Based on the risk factors identified above, is this client in a stable and predictable condition appropriate for delegated insulin administration?		

## Unique Characteristics of Tool:

- References evidence-based risk factors for instability and unpredictability for insulin administration
- Provides a list of requirements, using the WAC regulations for nurse delegation
- Enables modifications to improve clinical utility of instrument, based on nurse delegator input

# RESULTS FOR STABLE AND PREDICTABLE CONDITION ASSESSMENT INSTRUMENT STUDY

## Results – Feedback on Instrument

### Support for Clinical Utility

- Useful with changes in wording and added sections
- Could help to share assessment with case manager
- Provides salient points and consistency for evaluation
- Comprehensive checklist format
- Could be helpful for new and experienced Nurse Delegates

### Arguments Against Clinical Utility

- Assessment should be based on experience, existing training, and nursing judgment
- Needs evaluation piece to cover overall health and well-being
- Does not reflect risk factors in community
- Needs more nurse delegator input
- Too long, time-intensive, requires extra paperwork
- Might not be helpful if English is limited

## Results – Clinical Attributes for Stability and Predictability

### Clinical Status

- Stable fasting blood glucose within parameters
- Dietary and treatment compliance and cooperation
- Stability of chronic conditions and frequency of new diagnoses
- Changes in mental status, independence, or other physical symptoms
- Medication effects
- Comorbidities
- Drug-seeking behaviors
- Communication ability and (rudimentary) understanding of diagnoses
- Status of immune system
- Client fragility/brittleness

### Health Care

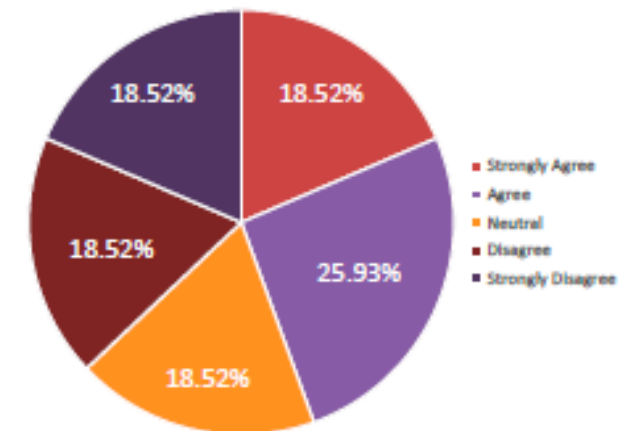
- Number of treatment/medication changes
- Frequency of hospitalizations, ER visits, provider visits
- Caregiver competency - knowledge and job performance
- Differences between assistance and administration with task

### Care Procedures

- Need for nursing judgment to execute task
- Adequate staff ratios, turnover rate, supervision, input/communication

## Results – Pie Chart on Instrument Clinical Applicability

Do participants agree that this instrument assists in making stable and predictable decisions within insulin administration?



## Quotes – Stable and Predictable Condition Legal Definition

*“It’s not very comprehensive and leaves a lot open for human judgment..”*

*“This description...doesn’t say enough about the importance of the evaluation of the caregivers that may affect the client’s condition.”*

\* Refer to Competency Tool Sample Size Slide for Demographic Information

# FUTURE RESEARCH STUDY

- **Focus of new study:**

- Nurse Delegator decision patterns and evaluation of insulin administration competency in response to stable and predictable condition within performance scenarios

- **Procedure:**

- Demographic data survey
- Address two clinical scenario types
  - Scenario #1: Answer questions about stability and predictability based on client clinical data
  - Scenario #2: Determine competency of insulin administration based on long-term care worker performance

- **Participants:**

- Any current or former nurse delegator



# THANK YOU!

**Questions??**

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