



NR584NP Week 3 Assignment: Risk Management Case Study Template

Name: _____

General Instructions:

1. Review the Week 3 Risk Management Case Study scenario in the course's Announcements section.
2. Use this template for the assignment. Use of this template is required. If the template is not used, a 10% deduction will be applied. See the rubric. Save the template and include your name in the file name.
3. Complete this using the provided scenario.
4. Follow APA grammar, spelling, word usage, and punctuation rules consistent with formal, scholarly writing.
5. Provide an in-text citation from three scholarly sources to support your writing.
6. Abide by Chamberlain University's academic integrity policy.

Complete the following sections:

1. Identification
 - a. Identify the risk.

The risk that has been identified in the case is the nurse practitioner who has delegated clinical tasks to the medical assistant who does not have the scope of practice and the authority to carry out the delegated clinical tasks independently within the outpatient facility. This risk is considered a direct threat to the safety of the patients since the medical assistant does not have the requisite education and legal authority to carry out the delegated clinical tasks safely and competently. The nurse practitioner is fully responsible for the consequences of the actions of the entire healthcare team despite the time constraints and other factors that may have led to the hazardous delegation of the medical assistant's tasks.

- b. Select the most appropriate classification of the risk.

The identified risk is primarily a clinical patient safety risk, with an operational dimension related to the system failures in workload and provider supervision. Clinical patient safety risks are all failures to meet legally authorized and professionally competent standards of care that place patients at risk of harm and adverse clinical events in the healthcare system. The operational aspect of the risk is related to the organizational factors that allow the dangerous delegation of tasks by the nurse practitioner to be unnoticed and untreated. Therefore, the risk will be mitigated by addressing the individual and organizational factors that led to the dangerous delegation of tasks by the nurse practitioner.

c. Describe the risk domain.

The risk domain that is applicable to the case is the clinical risk domain that covers patient safety risk directly related to care delivery failures and the scope of professional practice boundaries. Under the clinical risk domain, the scope of practice violations have been identified as an important risk category due to the exposure of patients to care provided by unauthorized and clinically unprepared individuals. The domain also includes inadequate supervision, verification of staff competency, and the absence of organizational policies that guide appropriate decisions for delegation in outpatient and clinical settings. The risk management of this domain involves the nurse practitioner's commitment to ensuring that all decisions for delegation are made with due regard for law and patient safety, as well as the need for efficiency.

2. Contributing Factors

a. Describe four factors that contribute to the risk.

The risk of inappropriate delegation within the designated health care setting arises as a result of four main factors. Firstly, the patient influx and time factors will directly influence the nurse practitioner to delegate tasks without fully assessing the medical assistant's legal authorization and competence to perform the delegated task. Second, the lack of awareness of the scope of practice of medical assistants will permit the nurse practitioner to make delegation decisions unwillingly and inadvertently exceed the legal limits in the hectic outpatient setting. Third, a lack of clearly stated organizational delegation policies makes the nurse practitioner and the medical assistant devoid of sufficient, readily available guidelines concerning what a legally appropriate task delegation in the practice environment is. Fourth, poor supervisory controls in the organization decrease the likelihood of unsafe delegation practices being identified and remedied before a patient safety incident or violation of regulations takes place.

3. Proactive Measures

a. Discuss three proactive measures to reduce or prevent the risk. Provide an in-text citation from one scholarly source to support your writing.

The risk of improper delegation in this type of setting can be minimized in a significant manner through three evidence-based proactive measures. For example, research by Crevacore et al. (2023) revealed that effective delegation is a challenging yet critical skill required for effective leadership by nurse practitioners. This is because effective delegation is determined by a strong understanding of the role and scope of practice of the delegatee. For this purpose, health organizations should invest in delegation education for nurse practitioners to bridge knowledge gaps. Health organizations should also develop policies and disseminate them to all staff regarding delegation practices in alignment with state nurse practice act regulations to ensure that all clinical staff are aware of delegation practices in a precise manner. Additionally, organizations should proactively manage workload to reduce pressures on nurse practitioners to make improper delegation decisions in a high-demand setting, such as an outpatient setting.