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Title: Delegation Practices among Top- and Average-performing Internists

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Purpose:To test the hypothesis that highly efficient internists, those that deliver high quality care at a lower cost, have different approaches to delegating tasks to nurses and

other office-based clinical staff than average performers.

• There is minimal understanding of the individual physician factors that drive greater cost-efficiency of health care without sacrificing quality.

• Some of this variation may be attributable to variation in utilization of nurses, including nature of task delegation.

 Survey data was collected from a non-representative sample of internists practicing in Massachusetts, California, Oregon, and Washington who were either in the top-performing decile (n=100) or the 45th and 55th percentile (n=100) on dimensions of cost-efficiency and quality.

 Physicians were asked whether they delegated each of 24 tasks, grouped into four high-level categories (Electronic Health Record entry, physical exam, health assessment, and treatment), to Nurse Practitioners (NPs), Physician Assistants (PAs), Registered Nurses (RNs), Licensed Practical Nurses (LPNs)/Licensed Vocational Nurses (LVNs), or Nursing/Medical Assistants.

Key Findings:

 By role, physicians in the top decile were significantly more likely to delegate one or more tasks to NPs and RNs. (Chart 1)

 Physicians in the top decile were significantly more likely to delegate one or more treatment tasks (e.g., provided wound care) to RNs and one or more physical exam tasks (e.g., assessed vital signs) to LVNs/LPNs. (Chart 2)

 Physicians in the top decile were significantly less likely to delegate one or more health assessment tasks (e.g., obtained health history) to Nursing Assistants/ Medical Assistants. (Chart 2)

Charts: Chart 1. Type of Delegation – Any Delegation by Task and by Role

Chart 2. Type of Delegation – Any Delegation by Task-Role

Chart 3. Degree of Delegation – Mean Number of Tasks Performed by Role (out of 24 possible tasks)

References: This is based on a non-published survey.

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