

TITLE

Identify the obstacles that affect the process of delegation among staff nurses

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Submitted by

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A research project submitted by

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In the partial fulfillment for the Degree of
Bachelor of Science in Nursing (BSN)

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I NayabGul(Regd. No. BSNRN60153032) declare that the contents of my research project entitled “Identify the obstacles that affect the process of delegation” are based on my own research findings and have not been taken from any other work except the references and has not been published before. I also undertake that I will be responsible for any plagiarism in this project.

NayabGul

Student Name

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Abstract

“Identify this study the obstacles that affect the process of commission among staff nurse” was conducted with the aim to
To improve the delegation skills among staff nurses by using effective delegation skills
To raise the standard of nurses

Objective:

- * Find out the obstacles that affect the process of delegation among staff nurse.
- * How ineffective delegation leads to poor delegation.
- * Explore the benefits of delegation towards nurses, establishment and delegator.

Methodology:

Descriptive study design was used for this study. To conduct this study a convenient sample of thirty staff nurses took from Allied Hospital Faisalabad. Information was collected through a self-administered questionnaire, which consisted of 14 close ended questions on liker scale.

Results:

A large Number of people 41.19 % strongly agreed, 37.38% agreed, 15% neutral, 5.23% disagree and 0.71% strongly disagree that different gene like lack of trust and confidence, fear of competition, inexperience overdependence leads to affect delegation.

Conclusion:

In conclusion research worker would say that the above mentioned aspects strongly affected the multitude public presentation in professional life and hint them toward negative consequences. By proper treatment and using standard methods of evaluation staff nurses can overcome these factors.

Key words

Nurses, delegation, delegator, descriptive.

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Chapter1

Introduction

Study background

According to A.N.A “Conveyance of responsibility for the performance of a task from one person to another”.

The meaning of a delegation is a gathering of individuals who have been entrusted with a particular occupation or given a particular reason, or the demonstration of relegating a particular assignment or reason to a man or gathering of individuals.

It is one of the kernel abstraction of managing leadership.

In any case, the individual who appointed the work stays responsible for the result of the assigned work. Assignment enables a subordinate to decide, i.e. it is a move of basic leadership specialist from one hierarchical level to a lower one.

Delegation, if legitimately done, is not resignation.

The opposite of effective delegation is micromanagement, where a manager provides too much input, direction, and review of delegated work. In general, delegation is good and can save money and time, help in building skills, and motivate people. Poor delegation, on the other hand, might cause frustration and confusion to all the involved parties. Some agents however do not favor a delegation and consider the power of making a decision rather burdensome

Responsibility and accountability

Responsibility denotes an obligation and accomplish a task, whereas accountability is accepting ownership for the results or lack. Responsibility can be transferred, but accountability is shared.

Accountability is being responsible and answerable for actions & reactions of self

Components of Delegation are followings

1. Care outcome patient :

Care is safely provided.

2. Accountable and responsible :

Both supervisor and delegate have an obligation and care for that patient and ensure the task is completed.

3. Sharing activities:

Both the supervisor and delegator work together to get a accomplish care.

4. Appropriate authority :

The supervisors select the appropriate person to delegate the task.

Process of delegation

- 1: Define the task
- 2: Decide on delegate
- 3: Determine the task
- 4: Reach agreement
- 5: Monitor performance

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Steps of a successful delegation

1: Definition of errand.

2: Selection of the individual or a group

Explanations behind appointing individual or group? What are they going to receive in return? What are you going to receive in return?

3: Estimate capacity and preparation demands.

4: Explanation of reasons

5: State required outcomes

6: Consider assets required

Talk about and concur what is required to take care of business. Consider individuals, area, premises, hardware, cash, materials, other related exercises and administrations.

7: Agree due dates

Now you may need to affirm understanding with the other individual of the past focuses, receiving thoughts and elucidation. And additionally demonstrating to you that the occupation should be possible, this fortifies duty.

Strategies for checking and controlling must be concurred with the other individual. Neglecting to concur this ahead of time will make this observing appear like impedance or absence of trust.

8: Support and impart

Consider who else has to realize what's happening, and illuminate them. Include the other individual in considering this so they can see past the current issue. Try not to leave the individual to educate your own associates of their new obligation. Caution the individual about any cumbersome matters of governmental issues or convention. Educate your own particular supervisor if the undertaking is imperative, and of adequate profile.

9: Feedback on results

It is fundamental to tell the individual how they are getting along, and whether they have accomplished their points. If not, you should audit with them why things did not go to arrange, and manage the issues. You should assimilate the results of disappointment, and pass on the credit for achievement.

Obstacles to delegation

- Fear of being disliked.
- Inability to give up control of the situation.
- Inability to determine what to delegate and to whom.
- Past experience with delegation that did not turn out well.
- Lack of confidence to move beyond being a novice nurse.
- Tendency to isolate oneself and choosing to complete all tasks alone.
- Lack of confidence in delegating to staff that were previously one's peers.

- Inability to prioritize using Maslow's Hierarchy of Needs and the Nursing Process.
- Thinking of oneself as the only one who can complete a task the way it is supposed to be done
- Inability to develop working relationships with other team members.
- Lack of knowledge of the capabilities of staff, including their competency, skill, experience, level of education, job description, and so on.
- Fear of being viewed as being unable to care for patients independently.
- Fear of staff refusing to carry out delegated tasks.
- Lack of administrative support.
- Poor communication skills.

Fivestages of delegation

- 1: The Right task
- 2: Under the Right circumstance
- 3: To the Right person
- 4: With the Right directions and communication
- 5: Under the Right supervision and evaluation.

Five Stages of Delegation

I DO	Realization
I DO, YOU WATCH	Observation
WE DO	Collaboration
YOU DO, I WATCH	Evaluation
YOU DO	Delegation

Delegation and SMART, or SMARTER

A basic designation control is the SMART acronym, or even better, SMARTER. It's a snappy agenda for legitimate assignment. Delegated errands must be:

Particular (Specific)

Quantifiable (Measureable)

Concurred (Agreed)

Practical (Realistic)

Time limited (Time bound)

Moral (Ethical)

Recorded(Recorded)

Reasons why people avoid to delegate

Not Enough time

Not getting credit

Delegate out of a job

Lack of confidence in team members

Losing control

Fear of failure

Reactions from other team member

Research problem:

Research problem is defined as; it is an enigmatic, perplexing or troubling condition.

Cases of poor delegation and obstacles in delegation are very excessive in today's society. It is a serious problem. Managers are less aware of the issues related to obstacles of delegation.

Through this research we are evaluating the "obstacles that affect the process of delegation" its causes and other factors to know the most contributing causes to poor delegation and make the delegation better.

Significance

1. Through this research survey we can highlight the obstacles that affect process of delegation. This study can help to identify different agent responsible for poor people delegation.
2. Study may helpful for investigator to use suitable measures to prevent the obstacles and improve the process of delegation.
3. The study may help the hospital to fulfill its goals which can cost effective and satisfy the affected role, health care organizations have to satisfy their nursing staff and other employee.

Research purpose

1. To assess the obstacles that effects the process of delegation among staff nurses. How ineffective delegation leads to poor delegation.
2. To explore the benefits of delegation towards nurses, organization and delegator.

Research question

“Research question is specific query that researchers want to savoir-faire the research job”. During this subject field we were supposed to answer the following question

1. What are the obstacles that affect the physical process of delegation?
2. How inexperience delegator leads to poor delegation?
3. How delegation enhances performance of staff members?

Chapter 2

Literature Review

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Relevant Literature

Delegation is out of one of eminently distinctive management skills. These execution and logical rules will guide in delegation (and will help you to help your manager when you are being delegated a task or new restraint – process of delegation is two way!). Good delegation prevent time from wasting, build up people, benedict a beneficiary, and galvanize. Poor delegation might cause you circumvention, Di-spirit besides obscures the other person, and fails to achieve the task or purpose itself. So it's a management skill that's worth improving. Here are the simple steps to follow if you want to get delegation right, with different levels of delegation freedom

That you can fling. This deputation skills template bargain with general delegacy principles and mental process, which is applicable to someone s and squad, or to specially formed grouping of people for individual project (including 'virtual teams'). Delegation is a very helpful aid for succession planning, personal development - and seeking and encouraging promotion.

It's how we grow in the job - relegation enables us to gain experience to take on higher obligation. (Eleanor J. Sullivan) Lack of trust, lack of confidence, veneration of overburdening, clinical leadership inexperience affects delegation.

To delegate effectively, the delegator must be a leader. Delegation can be a germ of frustration unless the delegator has the traits and characteristics of a leader. The Subject Council of StateDepartment Game board of nursing NCSBN identifies delegation as a “building complex process of pro praxis requiring sophisticated clinical discernment”.

Yet many nurse received little formal breeding in delegation during their education and employers rarely evaluate and develop nurses' delegation skills as they do other clinical competencies. Bittner and Gravlin reported ineffective delegation of BASIC nursing caution can consequence in poor patient outcomes, potentially impacting caliber scale, satisfaction, and reimbursement for the institution. Considering this, there is potential for inappropriate and ineffective delegation in acute care

Curtis and Nicholls (2004) found effective delegation requires skills such as: sensitivity to the capabilities of the team members; ability to communicate clearly and directly; knowledge of the stages involved in effective delegation; and a vision of how delegation can benefit delegators, delegates and organizations.

Delegation has bold impingement on practice of nursingthroughout history and nurses were the original advantageous or constructivepersonal and that may done tasks within the scope of nursing practice.

Now a 24-hour interval delegated from medico is common. The message from national and International nursing organizations is that “Globally nurses must reference the need of nursing

expertise in delegating. In British Columbia the use of delegation in nursing is increasing day by day and it is vital that nurses demonstrate competence in delegation.

In poor people partnership it is difficult to delegate when the nurse does not know about their faculty capability. It is also not practical to memory access each of staff's acquirement in all sphere before making a delegation determination. Staff nurse should also periodically access staff competency reward.

Delegation is predicted to grow as the wellness tending workforce better so that employment display their skills to providers and professional boundary are challenged through role extension service. The scope of nursing practice involves in reply to wellness care needs and the motivating forces suggestion changes in nursing practice today and the interfaces between nanny, other wellness pro, and nurse assistive personnel NAP. The evolving role for Registered Nurses from primary caregiver to the supervisory program and on other hand care providers has been driving force by the emergence of nurse assistive

Nurses now manage affected persona care processes for optimum patient effect as opposed to performing primary nursing functions where the RN provides the volume of direct care. The RN role today makes vital role in the contributions of other caregivers.

Quality patient upkeep outcomes in the linguistic context of attention bringing through a mix of skill providers requires that RN's uses their time efficiently to identify patient problems and optimize care delivery through the mission of care.

Challenging the RN in the delegation is now require in the complex Seth of increased patient acuity and the heavy use of technology in care and residential district or domicile settings where indirect supervising of delegation is required

.The demands and variety of the RN part today may leave-taking nanny s confused about what constitutes delegation and where their accountability lie. The crucial ability to delegate, now vener the 21st one C nurse, is the means to contend with the chaotic health care environment.

Chapter 3

Material and Methodology

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Research design

To answer the above mentioned question a descriptive study design was used.

Descriptive research is used to explore and describe the phenomena in real life situations.

Descriptive study is designed to gain more information about characteristics within a particular field of study. It also provides an accurate account of characteristics of particular individuals, situations or groups

Research tool

Research tool was self-made close ended questionnaire consisting of fourteen questions.

Sampling

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Sampling is the process of selecting Representative somebody from the population to collect appropriate information from them.

Sampling technique

A convenient sampling technique was used for this.

Target population

My targeted population is the staff of Allied Hospital Faisalabad, Inspection and repair who were supposed to suffer from this trouble or having knowledge regarding the deputation and the obstacle that affect the delegation.

Inclusion criteria

The criteria that specify population characteristics are referred to as inclusion criteria.

Staff of Allied Hospital Faisalabad are the participants of my research study.

Exclusion criteria

Criteria not specify population characteristics are called exclusion criteria.

Staff members of any other organization who do not have knowledge about the delegation are not included in our research study.

Time frame work

Time limit for this study was from 23-02-17 to 10-05-17.

Site and Setting

Land site is defined as,

Overall location for the research.

Allied Hospital Faisalabad was the site for our research project.

Setting is “More specific property where data collection occurs”.

Therefore nursing staff rooms of Allied Hospital Faisalabad are the setting of my research study.

Ethical consideration

While conducting this field of study, special attention was given to different ethical face. While selecting the sampling for our study, a fair survival of individuals was followed. During data collection an informed consent was taken from every individual to make sure voluntary participation. The right to participate voluntarily and right to withdraw at any time. Permission to use the obtained information for research purpose. Participants' information was kept confidential.

Chapter 4

Data analysis & data interpretation

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Data collection

Information collection is the process of gathering or measure information's on variable quantity of interest.

There are different case for information compendium method but in this enquiry study we used a structured data collection method. A self-administered questionnaire was developed to collect the information from the participant.

The self-administered questionnaire consisted of declarative command with Likert plate. All interrogative in this research study were closed ended questions. Because close-ended questions offer respondents with alternative reply, from which subjects must choose the one that most closely matches the appropriate answer.

Data analyzes

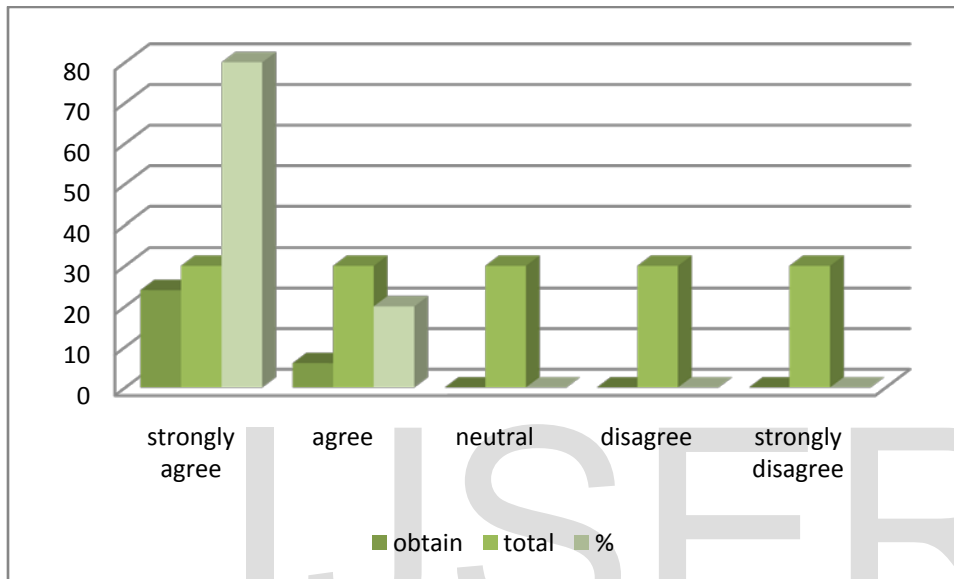
Data was analyzed by using SPSS software version 16.

Results

The information was analyzed descriptively with the help of tables and graphical record as follow:

Question no.1

Lack of trust and confidence affect the process of delegation?

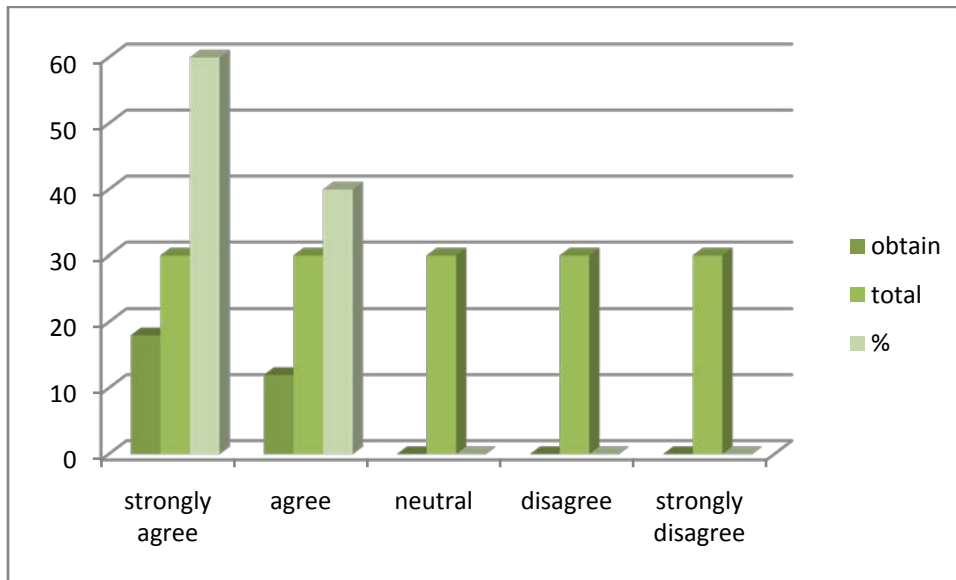


80% staff nurses strongly agreed, 20% agreed from this statement.

Question no.2

Inexperience delegate leads to poor delegation.

statements	obtain	Total	%
strongly agree	18	30	60
agree	12	30	40
neutral	0	30	0
disagree	0	30	0
strongly disagree	0	30	0

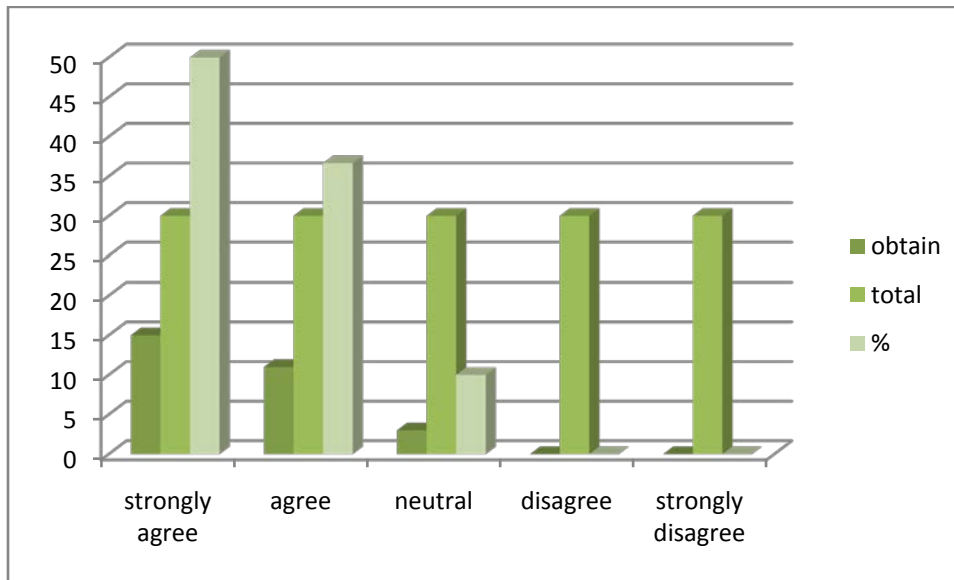


60% staff nurses strongly agreed and 40% agreed on this statement.

Question no.3

Fear of overburdening to the delegator leads to deficient delegation.

statements	obtain	total	%
strongly agree	15	30	50
agree	11	30	36.66666667
neutral	3	30	10
disagree	0	30	0
strongly disagree	0	30	0

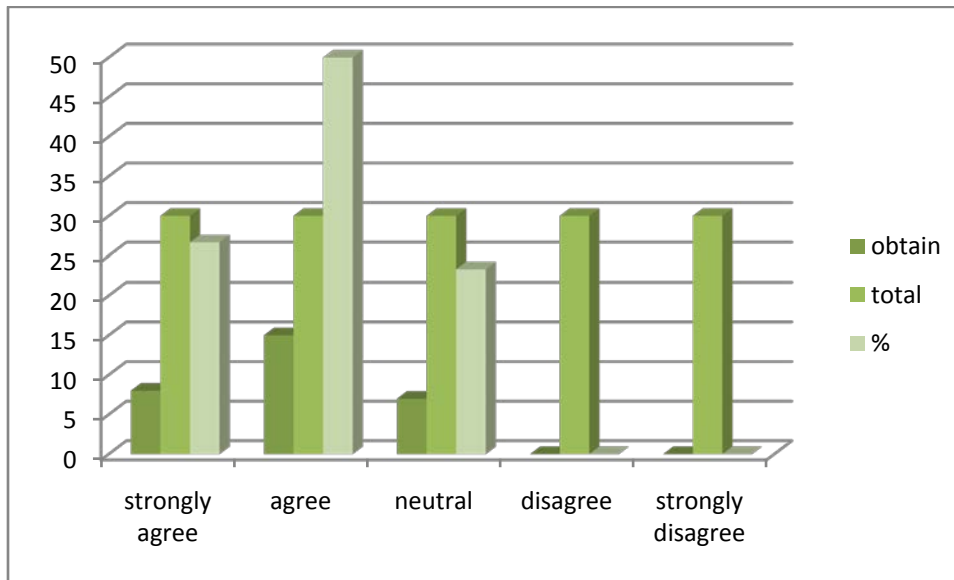


50% staff nurses strongly agreed, 36.67% agreed and 10% neutral from this statement.

Question no.4

Lack of confidence to the delegate leads to reduce delegation.

statements	obtain	Total	%
strongly agree	8	30	26.66666667
agree	15	30	50
neutral	7	30	23.33333333
disagree	0	30	0
strongly disagree	0	30	0

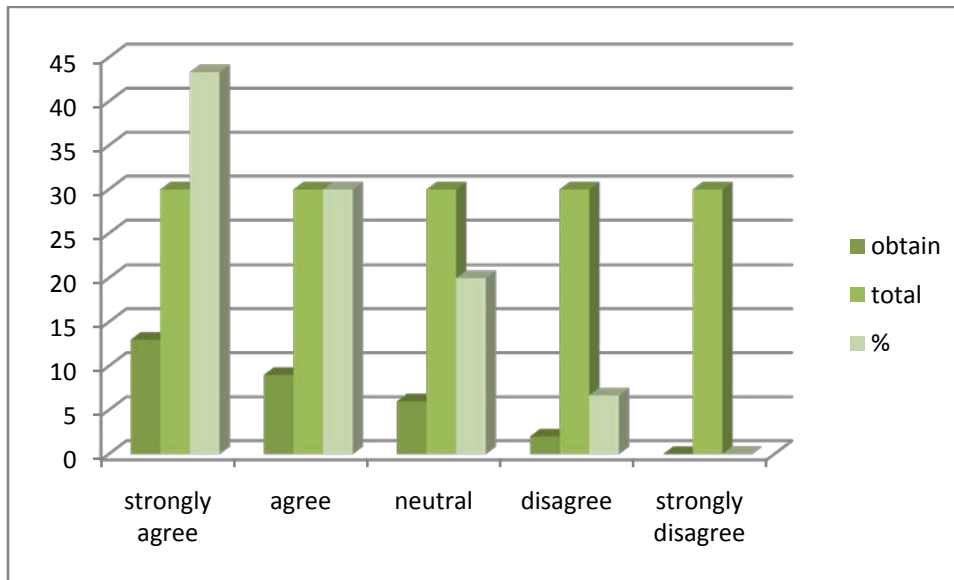


26.67% staff nurses strongly agreed, 50% agreed, 23.34% neutral from this statement.

Question no.5

Over dependence of the delegate on other affect delegation.

statements	obtain	total	%
strongly agree	13	30	43.33333333
agree	9	30	30
neutral	6	30	20
disagree	2	30	6.66666667
strongly disagree	0	30	0

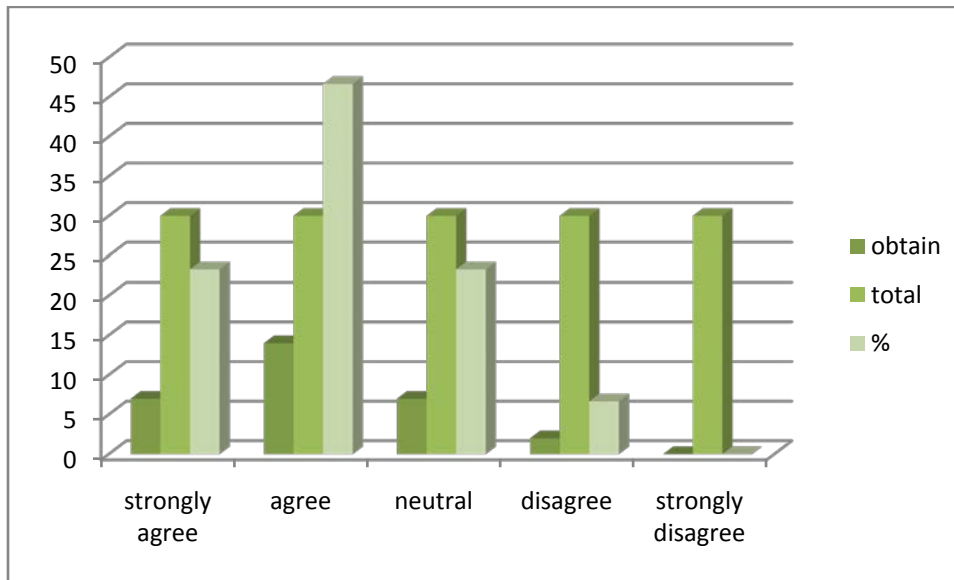


43.34% staff nurses strongly agreed, 30% agreed, 20% neutral and 6.67% disagree from this statement.

Question no.6

Rigid chains of command do not facilitate delegation.

statements	obtain	total	%
strongly agree	7	30	23.33
agree	14	30	46.67
neutral	7	30	23.33
disagree	2	30	6.67
strongly disagree	0	30	0

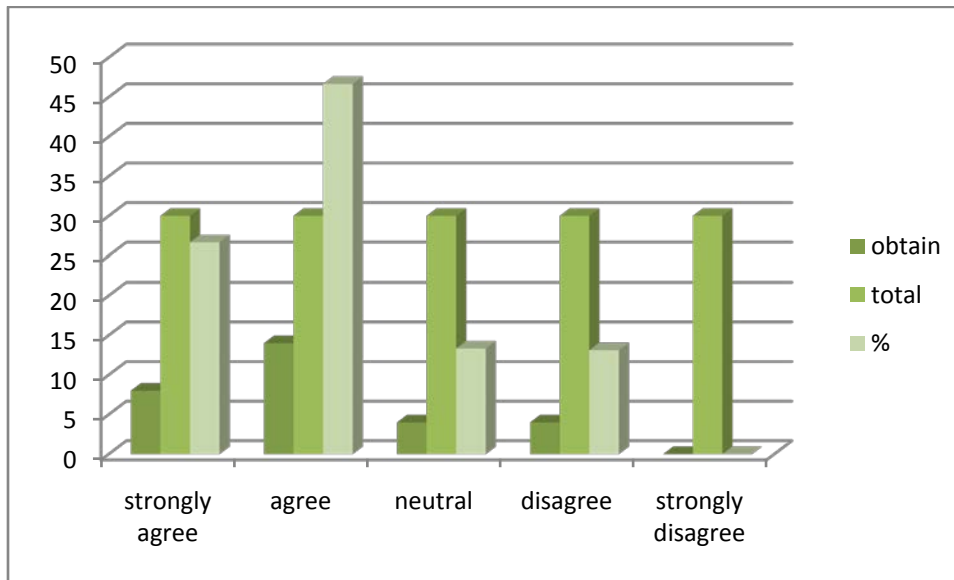


23.34% staff nurses strongly agreed, 46% agreed, 23.34% neutral, 6.67 disagreed.

Question no.7

Potential barrier to effective delegation include delegate's inexperience.

statements	obtain	total	%
strongly agree	8	30	26.67
agree	14	30	46.67
neutral	4	30	13.33
disagree	4	30	13.13
strongly disagree	0	30	0

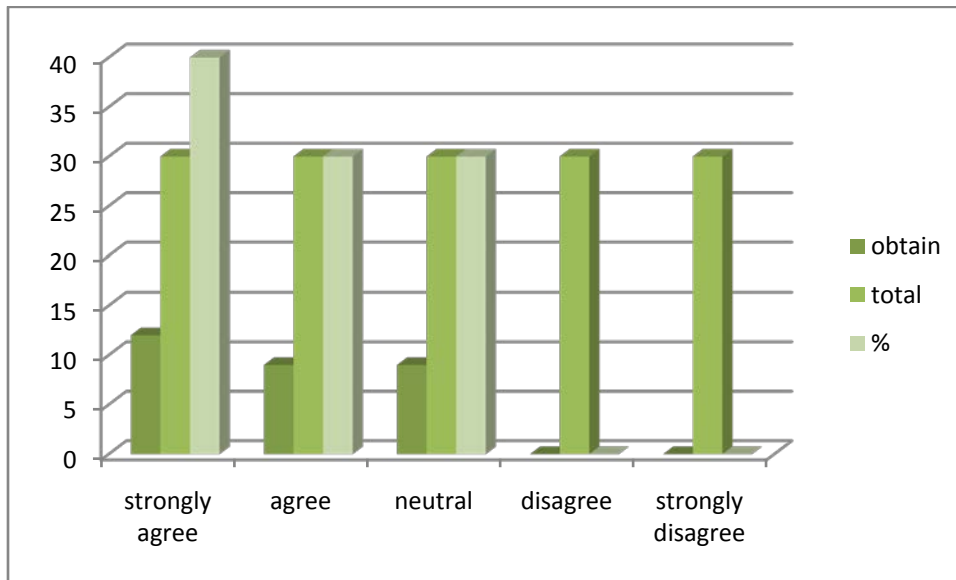


26.67% staff nurses strongly agreed, 46.67% agreed 13.35% neutral and 13.34% disagree from this statement.

Question 8:

Delegate of your work saves time.

statements	obtain	total	%
strongly agree	12	30	40
agree	9	30	30
neutral	9	30	30
disagree	0	30	0
strongly disagree	0	30	0

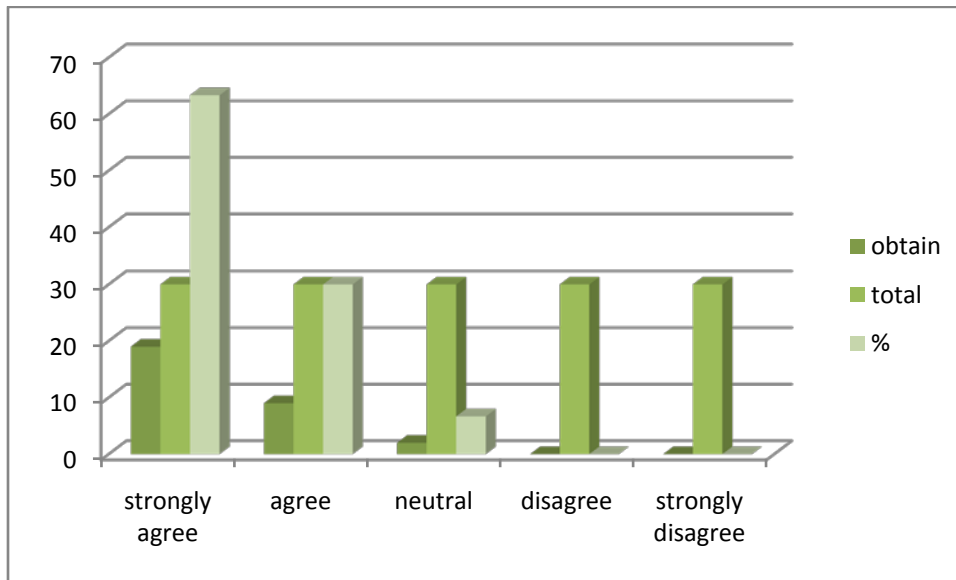


40% staff nurses strongly agreed, 30% agreed and 30% neutral.

Question 9:

Delegation will give you more time for leadership task and develop your staff.

statements	obtain	total	%
strongly agree	19	30	63.33
agree	9	30	30
neutral	2	30	6.67
disagree	0	30	0
strongly disagree	0	30	0

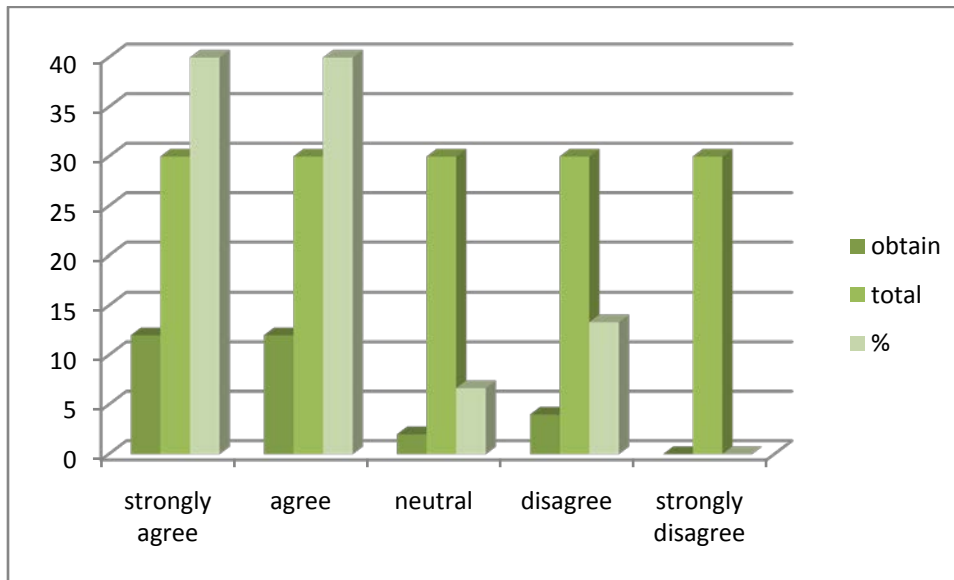


63.34% staff nurses strongly agreed, 30% agreed and 6.67% neutral.

Question 10:

Financial constrain also can interfere with delegation.

statements	obtain	total	%
strongly agree	12	30	40
agree	12	30	40
neutral	2	30	6.67
disagree	4	30	13.33
strongly disagree	0	30	0

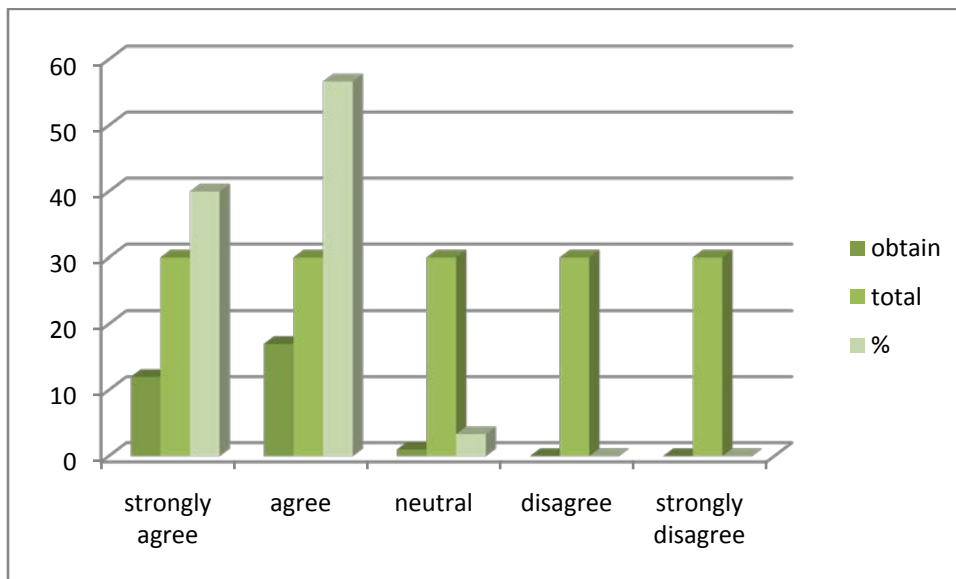


40% staff nurses strongly agreed, 40% agreed, 6.67% neutral, 13.34% disagreed.

Question:11

Poor delegation and interpersonal skills can also be a barrier to delegation.

statements	obtain	total	%
strongly agree	12	30	40
agree	17	30	56.67
neutral	1	30	3.34
disagree	0	30	0
strongly disagree	0	30	0

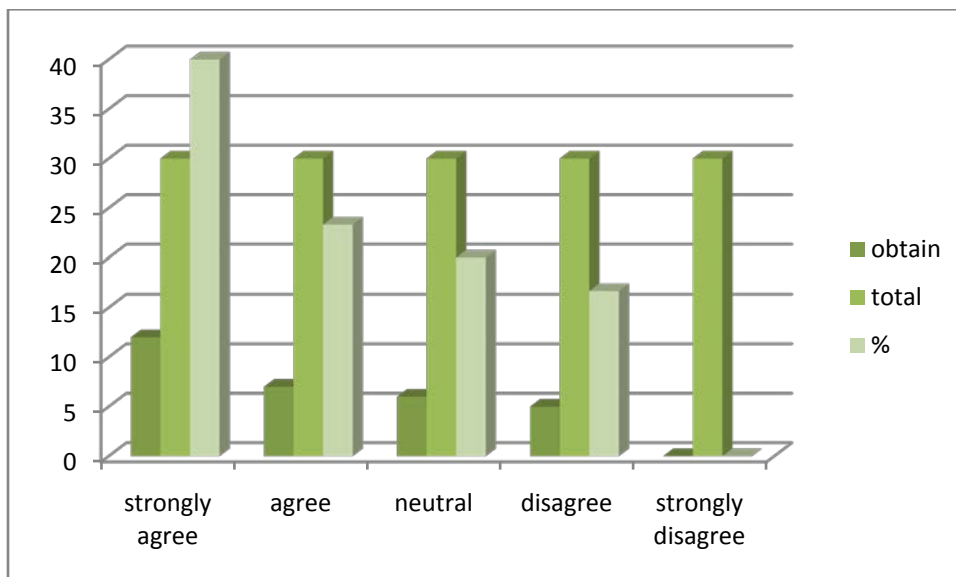


40% staff nurses strongly agreed, 56.67% agreed and 3.34% neutral from this statement.

Question12:

The majority of barriers to delegation arise from the delegator.

statements	obtain	total	%
strongly agree	12	30	40
agree	7	30	23.33
neutral	6	30	20
disagree	5	30	16.67
strongly disagree	0	30	0

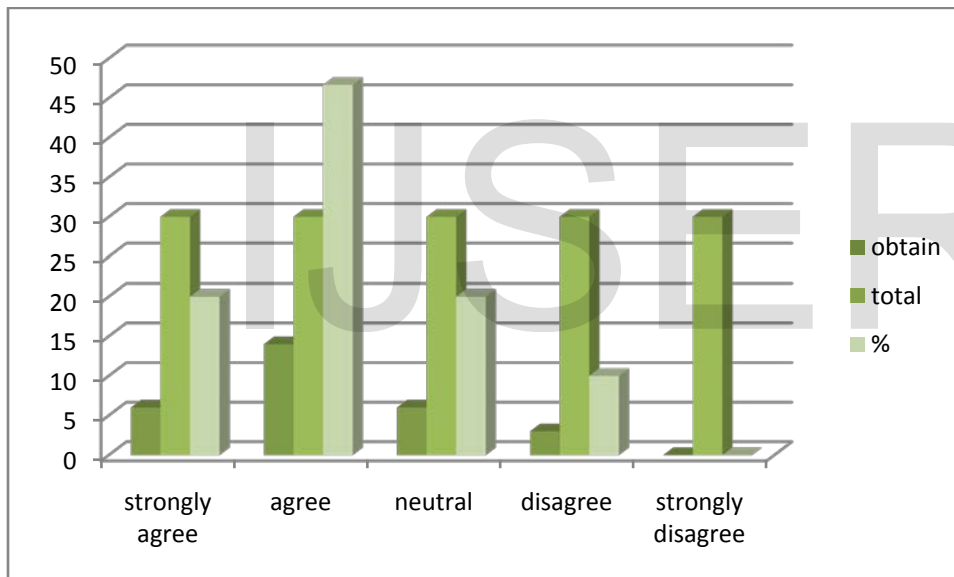


40% staff nurses strongly agreed, 23.34% agreed, 20% neutral and 16.67% disagreed from this statement.

Question 13:

Ineffective delegation results in missed or omitted routine care.

statements	obtain	total	%
strongly agree	6	30	20
agree	14	30	46.67
neutral	6	30	20
disagree	3	30	10
strongly disagree	0	30	0



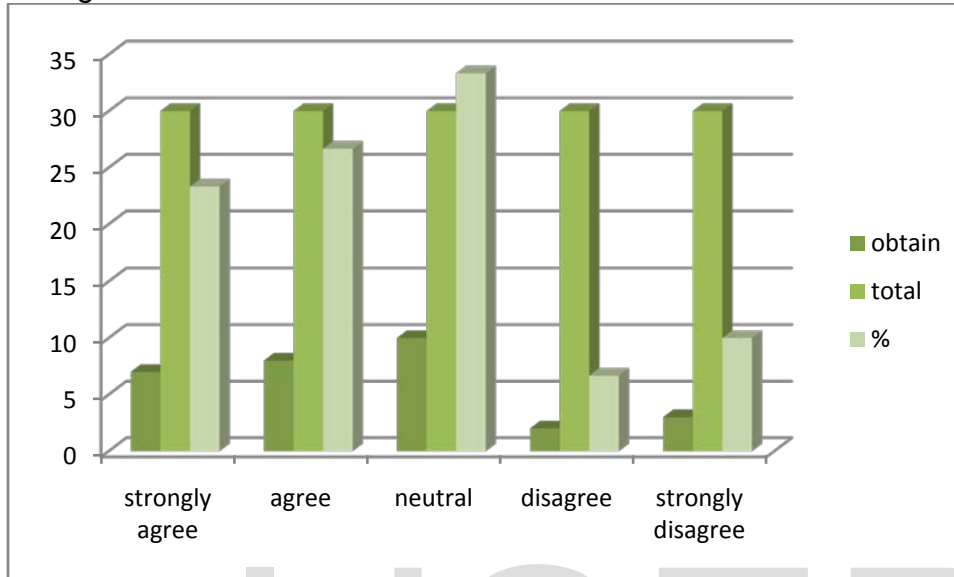
20% staff nurses strongly agreed, 46.67% agreed, 20% neutral and 10% disagreed.

QUESTION 14:

The delegator can boost the delegate's lack of self-assurance on simple task.

statements	obtain	total	%
strongly agree	7	30	23.33
agree	8	30	26.67

neutral	10	30	33.34
disagree	2	30	6.67
strongly disagree	3	30	10



23.34% staff nurses strongly agreed, 26% agreed, 33.34% neutral, 6.67% disagreed and 10% strongly disagreed from this statement.

Chapter 5

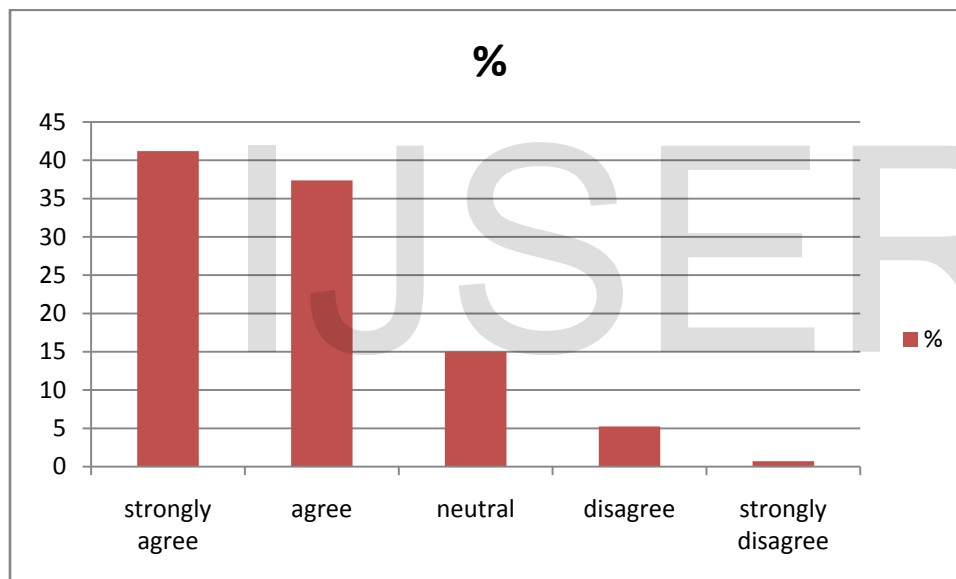
Discussion

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Discussion

This work was the first to write up an examination of component that effects delegation. The causes most frequently mentioned by citizenry in this survey were Want of faith and self-assurance inexperience, Fear of overburdening, want of confidence to the delegate which is almost similar to the Synonyms/Hypernyms (Ordered by Estimated Frequency) of noun finding of other international studies insecurities effects delegation and atomic number 82 to poor feedback among to people as evidenced in the subject field of Eastern Journal of Direction and leadership (2011). My research findings were also matches with the recent research studies which show that factors we identified in our research subject field were significant and we must have to reduce those factors which effects the findings of process of delegation.

Conclusion



Overall 41.19 % people strongly agreed, 37.38% agreed, 15% neutral, 5.23% disagreed and 0.71% strongly agreed on these statements, which effects process of delegation.

Suggestions

Figure out how to give up. ...

Set up a firm need framework. ...

Play to your specialists' qualities. ...

Continuously incorporate guidelines. ...

Try not to be reluctant to educate new aptitudes. ...

Trust, yet confirm

Limitations

.My targeted population was the Nursing staff of Allied Hospital FSD who were supposed to suffer from this problem and have knowledge regarding the importance of delegation

This study has some restriction.

It is confined to Allied Hospital FSD.

Sample size is moderate therefore somehow it is good representative Allied Hospital FSD.

Acknowledgement

I am extremely thankful to my research faculty member **Mam Shafquat, Mam Sana Sumbal and my institute IUHcollege of Nursing** because without their effort and help I was not able to conduct and complete this research study.

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Appendix

Permission letter for conducting research study

Topic

Identify the obstacles that affect the process of delegation among staff nurses

Respected Madam,

I am the student of Final year of BScN and conducting a research study to find the **“identify the obstacles that affect the process of delegation.”** I want to perform this study under the roof of IUH College of Nursing Faisalabad. I want to collect data from staff members of Allied Hospital Faisalabad. I will take informed consent from all participants. Kindly allow me for this study. I shall be very thankful to you.

Yours obediently,

NayabGul

BScN

4th semester

Research faculty

Sr. no	Statements	Strongly agree	agree	neutral	Disagree	Strongly disagree
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CONSENT FORM

Identify the obstacles that affect the process of delegation among staff nurses

Dear participants:

I am, the student of BScN 4th semester going to conduct a research study. The purpose of this study is to find out **the obstacles that affect the process of delegation**. For this purpose a questionnaire will be distributed for the data collection. The questionnaire will take approximately 20 to 30 minutes. Your participation will be voluntary and you may discontinue at any time. Your all information will be confidential.

If you are agreed give your signature on this consent form.

Signature:

Date:

1:	Lack of trust and confidence affect the delegation process.					
2:	Inexperience delegator leads to ineffective delegation.					
3:	Fear of overburdening to the delegator leads to deficient delegation.					
4:	Lack of confidence to the delegator leads to reduced delegation.					
5:	Over dependence of the delegate on others affect delegation.					
6:	Rigid chain of command do not facilitate delegation.					
7:	Potential barrier to effective delegation include delegate's inexperience.					
8:	Delegate of your work save time.					
9:	Delegation will give you more time for leadership task and develop your staff.					
10:	Financial constrain also can interfere with delegation.					
11:	Poor communication and interpersonal skills can also be a barrier to delegation.					
12:	The majority of the barriers to delegation arise from the					

	delegator.					
13:	Ineffective delegation results in missed or omitted routine care.					
14:	The delegator can boost the delegate's lack of self-assurance on simple tasks.					

IJSER