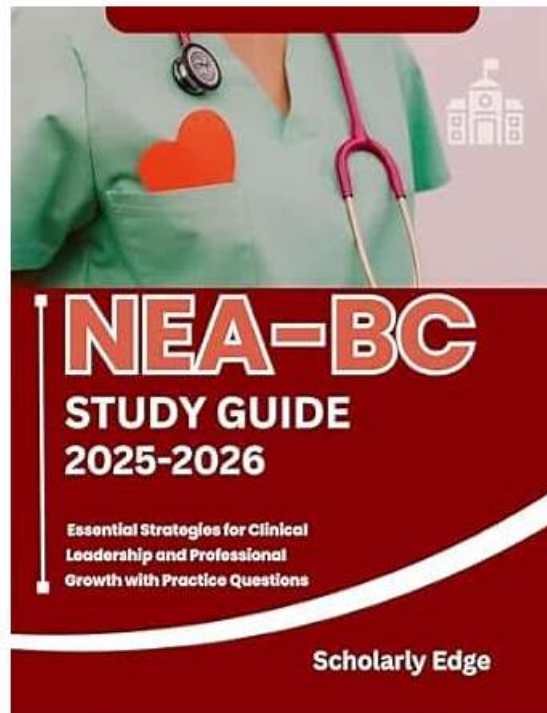


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Nursing ANCC - Nurse Executive Advanced Certification (NEA-BC) Sample Questions (Q225-Q230):

NEW QUESTION # 225

Which model allows nurses to collaborate between units and departments?

- A. Shared governance.
- B. Matrix.
- C. Team care.
- D. Primary Care.

Answer: A

Explanation:

The correct answer to the question of which model allows nurses to collaborate between units and departments is "Shared Governance." Shared governance is an organizational model that empowers nurses by involving them in decision-making processes that affect their work and the care of their patients. This model is particularly effective in fostering collaboration across different units and departments within healthcare facilities.

Shared governance operates on the principle of distributive leadership, which means that leadership responsibilities are spread across various levels within the organization, rather than being centralized in a traditional management hierarchy. In a shared governance structure, nurses at all levels have the opportunity to participate in committees and councils that make policy, procedure, and practice decisions.

This inclusive approach ensures that the staff who are directly involved with patient care have a significant voice in how that care is delivered, which can lead to more effective and efficient practices. It also helps to align the goals and actions across different departments, enhancing teamwork and reducing inter-departmental conflicts. By collaborating in such a structured way, nurses from various specialties and units can share insights and innovations, thus improving patient outcomes and staff satisfaction.

Moreover, shared governance models help to foster professional growth and development. Nurses engaged in this model are often more motivated, as they feel their opinions are valued and they have a tangible impact on their work environment and patient care standards. This sense of ownership and accountability can lead to higher job satisfaction and lower turnover rates.

In summary, shared governance is a transformative model for nursing practice. It promotes collaboration, enhances professional development, and improves the quality of patient care by involving nurses in the decision-making processes that affect their daily work and interactions across different units and departments.

NEW QUESTION # 226

A feature of nursing specialty certification is what?

- A. It's mandatory for practicing nurses.
- B. Certification is formal recognition of specialized knowledge and skills.
- C. It's only applicable to doctoral level nurses.
- D. Candidates are not required to hold a US license.

Answer: B

Explanation:

Nursing certification, often referred to as specialty certification, is essentially a formal recognition of specialized knowledge, skills, and experience in nursing. It serves as a validation that a nurse has met predetermined and standardized criteria for proficiency and competence in a specific area of nursing practice. This type of certification is provided by various professional bodies and is recognized nationally or internationally.

The primary goal of nursing certification is to promote optimal health outcomes by ensuring that certified nurses are competent in their specialty areas. This process helps to advance the nursing profession by maintaining high standards of practice and encouraging continuous professional development. Nurses who pursue certification demonstrate a commitment to their profession and a dedication to maintaining excellence in patient care.

It's important to note that obtaining a nursing certification is generally not mandatory for all nursing roles. However, some employers might require certification for specific positions, especially those involving specialized clinical skills or leadership roles in nursing.

Certification is often seen as a mark of professionalism and a way to advance one's career. For patients and employers, it provides reassurance about the nurse's ability to provide high-quality care based on current evidence and best practices.

To achieve certification, nurses typically need to meet specific educational and practice requirements. This usually includes having a certain number of years of clinical experience and a valid RN (Registered Nurse) license in the U.S. Nurses must also pass a certification examination that tests their knowledge and skills in their specialty area.

Contrary to some misconceptions, nursing certification is not only applicable to nurses at the doctoral level. Nurses at various levels of education, from diploma to doctoral degrees, can seek certification in areas relevant to their practice and expertise.

In summary, while nursing certification is a significant professional achievement and a formal recognition of specialized expertise, it is not universally mandatory for all nursing practices. It is, however, highly regarded in the nursing community and often sought after for the many benefits it offers both to the nurses and the patients they serve.

NEW QUESTION # 227

Which of the following is of the lowest reporting priority for OSHA?

- A. imminent dangers
- B. follow-up inspections
- C. targeted inspections
- D. referrals from other government agencies

Answer: B

Explanation:

The question asks which category of issue reported to the Occupational Safety and Health Administration (OSHA) has the lowest priority. To answer this, it's important to understand how OSHA prioritizes different types of reports and inspections.

OSHA categorizes reports and inspection priorities into several levels. At the top of the priority list are imminent dangers - situations that could cause death or serious physical harm. These require immediate response to prevent potential injuries or fatalities.

Next in priority are incidents involving fatalities or serious accidents that result in hospitalization of three or more employees. OSHA places a high priority on these cases to investigate the causes and prevent future occurrences.

Following these are complaints by employees, which can include a variety of issues ranging from minor safety concerns to more significant hazards. OSHA takes these complaints seriously as they often indicate underlying safety issues that need to be addressed.

Referrals from other government agencies also rank above follow-up inspections. These referrals can come from local, state, or other federal organizations and typically indicate potential safety issues that might not have been directly reported to OSHA.

Targeted inspections are planned based on particular criteria, such as industries with high rates of accidents or violations. These are part of OSHA's proactive approach to enforce safety regulations in workplaces known for higher risks.

Finally, the lowest priority is given to follow-up inspections. These are conducted to ensure that previously cited violations have been corrected. While important, they are ranked lower because they typically do not involve immediate threats to worker safety, as the initial hazardous conditions should have been addressed following the first inspection.

Therefore, based on the ranking provided, "follow-up inspections" are of the lowest reporting priority for OSHA. This category is primarily focused on verifying compliance with previous citations rather than responding to new or imminent safety threats.

NEW QUESTION # 228

What does Emergency Medical Treatment and Active Labor Law (EMTALA) require?

- A. Hospitals to provide emergency care to indigent and uninsured patients.
- B. Overloaded hospitals to discharge indigent patients in order to make room for patients who have the means to pay.
- C. A lower standard of care for indigent patients requiring emergency treatment.
- D. Hospitals unwilling to treat patients to send them to other hospitals for emergency care.

Answer: A

Explanation:

The Emergency Medical Treatment and Active Labor Act (EMTALA) is a federal law in the United States that requires hospitals to provide care to anyone needing emergency healthcare treatment regardless of citizenship, legal status, or ability to pay. Passed in 1986, its intent is to prevent hospitals from rejecting patients, delaying treatment, or engaging in patient "dumping" - the practice of refusing to treat indigent or uninsured patients by either denying care or transferring them to another hospital when they have emergency medical conditions.

Under EMTALA, the obligations of the hospitals are clear: 1. When a patient comes to an emergency department, they must be provided with an appropriate medical screening to determine if an emergency medical condition exists. This screening must be done without delay and cannot be contingent on the individual's insurance status or ability to pay. 2. If the screening reveals that an

emergency medical condition exists, the hospital is mandated to either provide treatment until the condition is resolved or stabilized, or, if the hospital does not have the necessary capability, arrange for a transfer to another hospital that can provide the appropriate care.

The law applies to all hospitals in the United States that participate in the Medicare program and have an emergency department. This ensures that the provisions of the law cover a broad range of institutions and protect individuals across different states and communities.

EMTALA's requirements are crucial for protecting the rights and health of the most vulnerable populations, including the indigent and uninsured. By doing so, the law upholds a fundamental principle of healthcare equity, ensuring that no individual is denied emergency services based on their financial capacity. Moreover, the law prohibits hospitals from engaging in practices that prioritize financial considerations over patient care needs during emergency situations.

Violation of EMTALA can result in significant penalties for hospitals and physicians, including fines and possible exclusion from participation in Medicare and Medicaid programs. These strict penalties underline the importance of compliance and ensure that hospitals adhere to the guidelines set forth by the law, thus safeguarding patient rights and access to necessary medical care in emergency situations.

NEW QUESTION # 229

Leaders in the information age live in the potential. This includes all of the following characteristics EXCEPT:

- A. focusing on good process
- B. reading signposts of change
- C. inclusion of coming events
- D. seeing the work as a journey

Answer: A

Explanation:

In the context of leadership in the information age, the question addresses the characteristics that define such leaders. The question lists several attributes and asks which one does not apply. The correct answer is "focusing on good process." To understand why "focusing on good process" is the correct answer, it's important to delineate what differentiates leadership in the information age from other periods. The information age is characterized by rapid technological advancements, digitalization, and a high volume of accessible data. This environment requires leaders who can swiftly adapt, innovate, and make decisions that capitalize on emerging opportunities.

Leaders in this era are expected to focus primarily on outcomes and results. The dynamic and fast-paced nature of the information age means that traditional, rigid processes may not always yield the best outcomes. Instead, leaders need to be flexible, adaptable, and ready to pivot strategies as new information becomes available. This outcome-driven approach is crucial for staying competitive and relevant.

The other characteristics listed - inclusion of coming events, seeing the work as a journey, and reading signposts of change - are all aligned with leadership in the information age. Leaders must be forward-thinking, constantly anticipating future trends and changes. They should view their work and the work of their organizations as a continuous journey of improvement and adaptation. Additionally, being alert to signs of change enables them to adjust their strategies proactively rather than reactively.

In contrast, a primary focus on good process, while important in certain contexts, does not singularly define the leadership approach needed in the information age. While processes are necessary for consistency and quality, an overemphasis on them can hinder the flexibility and responsiveness required in a rapidly changing digital landscape.

Therefore, the correct answer, "focusing on good process," highlights the shift from process orientation to an outcome and agility-focused leadership style, which is essential for success in the information age. Leaders must balance the need for good processes with the imperative to achieve the right results quickly and effectively.

NEW QUESTION # 230

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