

# Dump NEA-BC Check - NEA-BC Valid Braindumps Questions

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## NEA BC Test 1 Exam Questions With 100% Correct Answers

**assertive communication - Correct Answer-**  
a communication style characterized by confidence and consideration for others

**Fogging - Correct Answer-**  
Assertive skill in which a person responds to a criticism by making noncommittal statements that cannot be argued against

**passive communication - Correct Answer-**  
A form of communication in which the individual fails to say what is meant

**cybernetic model - Correct Answer-**  
Nurse executive who wants to implement a program

1. needs assessment
2. program implementation
3. results assessment (program obj., costs, and impact are evaluated).

**Collegial Model - Correct Answer-Decision making model**  
involves collaboration and consensus of a group of peers and is often used in the education settings where professions share similar values and benefit from individual expertise

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## Nursing ANCC - Nurse Executive Advanced Certification (NEA-BC) Sample Questions (Q31-Q36):

### NEW QUESTION # 31

New goals are being set for a patient. Which of the following should be included in the collaboration?

- A. Team
- B. Patient.
- C. Provider.
- D. All of the above.

**Answer: D**

Explanation:

When setting new goals for a patient, it is crucial to involve all relevant parties to ensure that the goals are comprehensive and achievable. This collaborative approach is essential for several reasons:

**\*\*Patient\*\***: The patient is the central figure in care planning. Their needs, preferences, and personal goals must be considered when setting new objectives. Involving the patient in goal setting empowers them and enhances their motivation to engage with the treatment plan. This inclusion ensures that the goals are tailored to the patient's specific health conditions, lifestyle, and what they realistically feel they can achieve.

**\*\*Provider\*\***: Healthcare providers, including doctors, nurses, and specialists, bring professional expertise to the goal-setting process. They can offer insights into the medical feasibility of certain goals and outline the necessary steps to achieve them. Providers can also identify potential medical constraints or opportunities that might not be evident without their professional input.

**\*\*Care Team\*\***: This group may include a variety of professionals such as physical therapists, dietitians, social workers, and case managers. Each team member contributes a different perspective, ensuring that all aspects of the patient's health and well-being are considered. For instance, while a physical therapist might focus on mobility goals, a dietitian would be crucial in setting dietary targets.

**\*\*All of the Above\*\***: The phrase "All of the above" underscores the importance of a multidisciplinary approach to patient care.

When setting new goals, the collective input from the patient, providers, and care team fosters a holistic care plan. This collaboration helps in setting realistic, achievable goals that are supported by a comprehensive care strategy, addressing various facets of the patient's health and life.

Collaboration in healthcare, especially in the context of goal setting, is not just beneficial but necessary. It leads to better health outcomes by ensuring that goals are aligned with the best medical advice, patient desires, and practical considerations. This approach also minimizes the risks of conflicts between different care aspects and maximizes the use of available resources and expertise.

### NEW QUESTION # 32

Which of the following is NOT an element that must be proven by the plaintiff in a malpractice case?

- A. intentional action
- B. proximate cause
- C. actual harm or damage
- D. duty of care

**Answer: A**

Explanation:

In a malpractice case, the plaintiff must prove specific elements to establish that malpractice occurred. These elements form the basis of a typical negligence claim within the medical or professional context. Here is an explanation of the elements typically required and why "intentional action" is not among them:

**\*\*Duty of Care\*\***: The first element that must be proven is that there was a duty of care owed by the defendant to the plaintiff. In the context of medical malpractice, this means that there was a professional relationship between the healthcare provider (defendant) and the patient (plaintiff), establishing the healthcare provider's duty to act as a competent and prudent professional would under similar circumstances.

**\*\*Breach of Duty of Care\*\***: Once it is established that there was a duty of care, the plaintiff must then demonstrate that the

defendant breached this duty. This involves showing that the defendant's actions or omissions fell below the standard of care expected in their professional capacity. This could be through negligent actions, errors in treatment, or failure to act when action was required.

**\*\*Causation (Proximate Cause)\*\*:** The plaintiff must also prove causation, specifically that the breach of duty directly caused the injury or harm. This is often referred to as proximate cause. It connects the breach of duty to the resulting harm in a way that legally holds the defendant responsible for the damages.

**\*\*Actual Harm or Damage\*\*:** Finally, the plaintiff must demonstrate that they suffered actual harm or damage. This could be physical injury, mental anguish, additional medical costs, loss of income, or other forms of harm directly resulting from the defendant's breach of duty. Without proof of harm, even if there was a breach of duty, there can be no malpractice claim.

**\*\*Intentional Action\*\*:** This is NOT typically an element that needs to be proven in a malpractice case. Malpractice generally revolves around negligence, not intentional wrongdoing. "Intentional action" implies a deliberate act intended to cause harm, which falls under different legal categories such as assault or battery. In malpractice cases, the focus is on negligence or substandard care rather than intentional misconduct. Thus, proving an "intentional action" is not relevant to a standard malpractice claim, which distinguishes it from the other elements listed above.

### NEW QUESTION # 33

Which of the following is an advantage of unionization?

- A. accountability
- **B. all of the above**
- C. autonomy
- D. awareness

**Answer: B**

Explanation:

Unionization offers several advantages to workers across various industries. These benefits can significantly impact workers' rights, job security, and workplace conditions. Here, we will explore the specific advantages mentioned—accountability, autonomy, and awareness—and discuss additional benefits that unionization brings.

**\*\*Accountability\*\*:** One significant advantage of unionization is enhanced accountability within the workplace. Unions help ensure that employers adhere to labor laws and workplace regulations. They give a voice to employees, enabling them to raise concerns about workplace safety, wage issues, discrimination, or other unethical practices without fear of retaliation. By advocating for transparency and fairness, unions help create a more accountable work environment where management is more likely to address such issues promptly and appropriately.

**\*\*Autonomy\*\*:** Unionization also promotes greater autonomy for workers. By collectively bargaining, unions can negotiate terms that allow workers more control over their work schedules, job roles, and work conditions. This can lead to a better work-life balance and a more satisfying work environment. Furthermore, unions often fight for policies that empower employees to have a say in significant decisions that affect their jobs and future career paths, thus enhancing their professional autonomy.

**\*\*Awareness\*\*:** Another advantage of unionization is the increased awareness among workers about their rights and benefits. Unions educate their members about their legal rights, available benefits, and the resources they can access if their rights are being violated. This knowledge empowers workers to make informed decisions and engage actively in advocating for their interests. Awareness also fosters a sense of solidarity among employees, as they realize common challenges and goals, which can lead to more robust collective action.

**\*\*Additional Advantages\*\*:** Beyond the aforementioned benefits, unionization fosters multidisciplinary and interdisciplinary collaboration. This aspect can be particularly beneficial in diverse workplaces where different skill sets and perspectives can synergize to create innovative solutions and improve productivity. Moreover, unions advocate for a practice based on a sound and discipline-specific scholarly foundation, ensuring that professional standards are met and that workers are competent in their respective fields. Lastly, self-motivated professional development is another significant advantage. Unions often provide opportunities for continuous learning and career advancement, which not only benefits the individual worker but also enhances the overall quality of the workforce.

**\*\*Conclusion\*\*:** In conclusion, unionization brings myriad benefits, including but not limited to accountability, autonomy, and awareness. It also promotes interdisciplinary collaboration, adherence to professional standards, and ongoing professional development. The collective bargaining power of unions thus plays a crucial role in improving working conditions and employee satisfaction. The correct answer to the question about the advantages of unionization is, therefore, "all of the above," as each listed option contributes to the overall benefits that unions provide to their members.

### NEW QUESTION # 34

Major diagnostic categories (MDCs) are collections of

- A. Treatment options
- B. Nursing specialties
- C. Diagnosis related groups
- D. Patient outcomes

**Answer: C**

Explanation:

Major Diagnostic Categories (MDCs) are broad classifications used within the healthcare system, particularly in the context of the U.S. Medicare program, to organize hospital cases into groups that are similar clinically and in terms of the resources they require for treatment. Each MDC corresponds to a single organ system or etiology and in principle is associated with a particular medical specialty. This categorization system is an integral part of the Diagnosis-Related Groups (DRGs), which are used to determine how much Medicare pays the hospital for each "product," which in this case is the patient's stay.

There are over 400 different DRGs, each defined by a combination of diagnoses, procedures, age, sex, discharge status, and the presence of complications or comorbidities. These DRGs are then grouped into 25 Major Diagnostic Categories. Each MDC covers a specific type of medical condition. For example, one MDC might cover diseases of the respiratory system while another covers diseases of the circulatory system.

Like DRGs, MDCs serve mainly administrative and financial management purposes rather than clinical ones. Their primary use is in the management of hospital billing and healthcare policies, particularly relating to reimbursement under Medicare. Hospitals are reimbursed based on the DRG to which a patient's case is assigned, which in turn is grouped under an MDC. This system aims to standardize payments and encourage efficiency in healthcare delivery without compromising the quality of care.

The linkage of DRGs, and thus indirectly of MDCs, to Medicare reimbursements impacts various aspects of healthcare delivery. It influences hospital behavior, resource allocation, treatment decisions, and overall healthcare policy. Understanding the structure and function of MDCs and DRGs is essential for administrators, healthcare providers, and policymakers who navigate the complexities of healthcare financing and strive to improve patient outcomes while controlling costs.

#### **NEW QUESTION # 35**

The economic term that refers to a small or insignificant change in some variable is which of the following?

- A. efficiency
- B. marginal
- C. effectiveness
- D. minuscule

**Answer: B**

Explanation:

The correct answer is "marginal." In economics, the term "marginal" refers to a change due to an additional unit of some variable.

This concept is fundamental in understanding how decisions are made in the context of business and economics. A marginal change is essentially the impact of a small or incremental adjustment to an existing set of conditions.

For instance, consider the scenario of a factory producing widgets. If the factory decides to produce one additional widget, the cost of producing that specific widget is called the marginal cost. This is different from the average cost of producing all widgets, as it only considers the cost associated with the incremental unit. Similarly, marginal revenue refers to the additional income earned from selling one more unit of a product.

Marginal analysis is crucial because it helps businesses determine the optimal level of production. By understanding the costs and benefits associated with producing one more unit, a company can decide whether it is profitable to increase production. This decision-making process based on marginal changes helps ensure that resources are allocated efficiently to maximize profits.

Moreover, the concept of marginality is not limited to economics but can also be applied to various fields such as environmental policy, where analysts assess the marginal benefit of reducing pollution by a single unit, or in health economics, where the focus might be on the marginal effect of an additional treatment in a medical regimen.

In summary, the term "marginal" is a cornerstone of economic theory, emphasizing the importance of small or incremental changes and their impact on the larger system. Understanding these changes helps in making informed and effective decisions in both business and public policy.

#### **NEW QUESTION # 36**

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