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Test 1 - NEA BC

0.5 FTE - ANS a nurse who works part time through out the year is what FTE based on a 40 hour work week

accelerate rapid cycle change - ANS goal is to modify and accelerate methods in order to respond quickly

accommodation - ANS an approach to conflict in which a person gives in to other group members, even at the expense of his or her own goals

Accountable Care Organization (ACO) - ANS An organization of healthcare providers accountable for the quality, cost, and overall care of Medicare beneficiaries who are assigned and enrolled in the traditional fee-for-service program patients will have some health info shared to ensure coordination of care and prevent duplication of services if enrolled cannot participate in medicare advantage plans such as HMO/PPO

Act - ANS PDSA
identify necessary changes, adopt, and continue to monitor

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Nursing ANCC - Nurse Executive Advanced Certification (NEA-BC) Sample Questions (Q186-Q191):

NEW QUESTION # 186

An action plan based on a root cause analysis requires all except which of the following?

- A. Identify the process of analysis.
- B. Identify the individual responsible for implementing the action plan.
- C. Determine reported sentinel and critical events.
- D. Determine reported Failure Mode and Effects Analysis.

Answer: A

Explanation:

An action plan based on a root cause analysis is a structured approach to addressing and mitigating problems identified in various operational or project scenarios. The purpose of an action plan is to outline specific steps to prevent future occurrences of the identified issues. To construct an effective action plan, several key elements must be included:

1. **Identify the individual responsible for implementing the action plan.** It is crucial to specify who will be in charge of executing the action plan. This ensures accountability and clarity in roles and responsibilities. The designated individual will oversee the implementation process, manage resources, and ensure that the steps outlined in the action plan are executed within the set timelines. By clearly identifying this individual, organizations can avoid ambiguity and confusion, promoting a more efficient and effective response to the issues.

2. **Identify necessary changes and how these changes will be implemented.** The action plan should detail the specific changes required to address the root causes identified during the analysis. This includes outlining what needs to change, how these changes will be implemented, and the resources required. It is also beneficial to set clear goals and objectives for each change, which will help in measuring the effectiveness of the action plan post-implementation.

3. **Determine reported sentinel and critical events.** Understanding and documenting the incidents that triggered the root cause analysis is essential. These events, often referred to as sentinel or critical events, are the occurrences that highlighted underlying issues in the system or process. By clearly stating these events in the action plan, organizations can ensure that the measures implemented directly address these significant concerns.

4. **Determine reported Failure Mode and Effects Analysis (FMEA).** If an FMEA was conducted, the findings from this analysis should also be incorporated into the action plan. FMEA helps identify potential failures in processes and the possible effects of these failures. Including this analysis in the action plan ensures a comprehensive approach to tackling all possible angles of the problem and prevents future failures.

In conclusion, a robust action plan based on root cause analysis is not merely about identifying what went wrong; it also involves clearly defining the roles, responsibilities, and specific steps needed to make systemic improvements. By addressing these key areas, organizations can enhance their resilience, reduce risks, and improve overall efficiency.

NEW QUESTION # 187

Nursing practice acts are determined on which level?

- A. Local.
- B. City.
- C. Federal.
- D. State.

Answer: D

Explanation:

Nursing practice acts, which define the scope of nursing practice and establish the rules for the profession, are determined at the state level. This means that each state in the United States has its own set of laws and regulations that govern nursing practices within its jurisdiction. The reason for state-level determination is to allow customization and flexibility to address the specific healthcare needs and legal environments of each state.

The state-specific nature of these acts ensures that the nursing standards are tailored to the unique demographics, health challenges, and resources of the state. For example, a state with a large rural population might have different regulations concerning the distribution of medical resources or telehealth than a state with a predominantly urban population.

Each state has a Board of Nursing or a similar regulatory body responsible for creating and enforcing these laws. These boards set standards for safe nursing care, determine the requirements for obtaining and retaining a nursing license, and take disciplinary actions if necessary. They also oversee the educational standards for nursing programs within the state to ensure that the training meets the state's health care needs.

By having nursing practice acts determined at the state level rather than at a federal or local level, it ensures a more uniform and regulated approach within that state while still allowing for significant variation across different states. This system can adapt to local needs and changes in the healthcare environment more dynamically than if governed at a federal level. Furthermore, since healthcare

facilities often operate under state jurisdiction, aligning nursing regulations with state laws facilitates smoother management and compliance.

Thus, when considering the regulations that impact nursing practice, it is important for nurses and nursing students to be familiar with their specific state's nursing practice act. This knowledge is crucial not only for compliance but also for providing the best possible care within the legal framework of their respective states.

NEW QUESTION # 188

Which of the following is NOT an element of motivation?

- A. It is characterized by engagement.
- B. It is internally generated.
- C. Its gains are mutually advantageous.
- D. **It is inconsistent with personal values.**

Answer: D

Explanation:

Motivation is a critical psychological element that drives individuals to pursue and achieve their goals. An essential characteristic of motivation is that it should resonate with an individual's personal values. Personal values serve as foundational beliefs and principles that guide behavior and decision-making processes. When motivation aligns with these personal values, it tends to be more powerful and sustainable, thereby enhancing the likelihood of goal attainment.

To understand why the option "It is inconsistent with personal values" is NOT an element of motivation, it's important to consider the nature of personal values in the context of motivational forces. Personal values are deeply ingrained and often serve as a compass that directs an individual's actions and aspirations. When there is a mismatch between what motivates an individual and their personal values, the motivation may become ineffective or lead to internal conflict and dissatisfaction. This inconsistency can undermine motivation, making it less effective or leading to disengagement from the goal pursuit.

In contrast, when motivation is derived from or aligned with one's values, it not only propels individuals towards their goals but also ensures a sense of fulfillment and integrity throughout the process. This alignment helps in maintaining persistence and enthusiasm, even in the face of challenges or setbacks. For motivation to be truly effective and enduring, it must resonate with what the individual holds important and valuable.

Furthermore, motivation that is consistent with personal values often leads to outcomes that are mutually beneficial and positively perceived, both by the individual and by others. This is because actions taken under such motivation are more likely to be supported and encouraged by those who share similar values, thereby creating a supportive environment for success.

In conclusion, motivation that is inconsistent with personal values is not a characteristic of effective motivation. Instead, true motivation integrates these values, leveraging them to fuel the drive towards achieving personal and professional goals while ensuring personal integrity and satisfaction are maintained. The mechanics of motivation, therefore, must be thoughtfully aligned with personal values to ensure that initiatives are not only successful but also rewarding and congruent with one's deeper beliefs and principles.

NEW QUESTION # 189

Pre-Admission Testing requires orders from whom?

- A. The patient.
- B. Family members.
- C. Insurance company.
- D. **A physician.**

Answer: D

Explanation:

Pre-Admission Testing (PAT) is an essential step taken before a patient is admitted to a hospital or undergoes certain medical procedures. The purpose of PAT is to ensure that the patient is in suitable health for the procedure and to minimize the risk of complications during and after the procedure.

The core question here is about who is required to give orders for such testing. The answer is straightforward: a physician. A physician's order for PAT is mandatory because they are responsible for evaluating the patient's medical history, current health status, and the specific needs related to the upcoming hospital admission or procedure. This evaluation informs the physician about what specific pre-admission tests might be necessary.

During the PAT process, various tests may be conducted to assess the patient's health status. These can include, but are not limited to, blood tests, electrocardiograms (EKGs), chest X-rays, and blood pressure measurements. Each of these tests serves a specific purpose. For example, blood tests can assess organ function and detect infections, an EKG can evaluate heart health, and a chest

X-ray can examine the lungs and heart.

It is important to understand that the orders for these tests cannot come from just anyone. They must be ordered by a physician who is familiar with the patient's medical history and the demands of the upcoming procedure. This ensures that all tests are tailored to provide useful information regarding the patient's suitability and readiness for the procedure or the admission.

Insurance companies, family members, or patients themselves do not have the authority to order these tests. While insurance companies might be involved in the approval and coverage of these tests and family members may assist in communicating the patient's health history, they do not determine the medical necessity of specific tests. Similarly, while patients can share their concerns and preferences, they rely on their physician's expertise to make the final decision on what tests are necessary.

In summary, only a physician can order Pre-Admission Testing, as their expertise and understanding of the medical field guide them in making informed decisions about what is necessary to ensure the health and safety of the patient prior to a hospital admission or procedure.

NEW QUESTION # 190

A patient wishes to leave the hospital against the advice of his physician. The nurse detains the patient and will not allow him to leave. This is an example of which of the following?

- A. invasion of privacy
- B. fraud
- C. **false imprisonment**
- D. battery

Answer: C

Explanation:

False imprisonment occurs when a person is restrained or confined against their will without any legal justification. In the scenario described, the nurse detains the patient who wishes to leave the hospital against the advice of his physician. This act can be classified as false imprisonment because the nurse unlawfully restricts the patient's freedom of movement.

In legal terms, false imprisonment involves intentionally restricting another person's ability to move freely without any legal authority to do so. It is important to note that using physical force is not a necessary component of false imprisonment. The mere act of preventing someone from leaving by verbal threats, manipulation, or through physical barriers can constitute false imprisonment. Medical professionals, including nurses, do not have the authority to detain patients unless specific legal conditions are met, such as cases involving mental health holds where a patient poses a direct threat to themselves or others and certain infectious disease containment scenarios. In general healthcare settings, if a patient decides to leave the hospital against medical advice, they have the right to do so unless a legally mandated exception applies.

In this case, the nurse's action of detaining the patient without a legal basis or emergency justification directly infringes on the patient's right to decide about their own treatment and movement. This infringement therefore correctly categorizes the nurse's actions under false imprisonment. Patients have autonomy over their medical decisions, including the decision to discontinue treatment and leave the hospital, as long as they are competent to make such decisions and are fully informed about the potential consequences of their actions.

NEW QUESTION # 191

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