

NEA-BC Testking & NEA-BC Lerntipps

NEA-BC Exam

3 criteria for exempt status (FLSA) - ANS Employee pay, how they will be paid, what type of work the employee will do

An FTE equivalent = - ANS 2,080

Before doing a PDSA, staff need to be taught - ANS To use flow and cause-and-effect charts

Bundled payments - ANS Episode-based payment; for Medicare beneficiaries

Bundled pilot program - ANS Will evaluate alternative Medicare payment methodologies: episodes of care beginning 3 days prior to admit and ends 30 days after care

Charge Description Master - ANS includes charges, HCPCS/CPT codes and narrative descriptions

Deontological Ethics - ANS system of decision-making that focuses on the moral principles of duty and rules

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Nursing NEA-BC Exam Syllabus Topics:

Section	Weight	Objectives

Topic 1: Health Care Delivery	27%	- Information management and technology • 1. Technology implementation • 2. Information governance and privacy • 3. Health informatics and data use - Health care systems and policy • 1. Continuum of care models • 2. Health policy and advocacy • 3. Regulatory and legal frameworks - Care coordination and integration • 1. Care transition management • 2. Patient-centered care design • 3. Population health management
Topic 2: Human Capital Management	14%	- Work environment and well-being • 1. Organizational culture • 2. Health and safety standards - Employment and labor relations • 1. Performance management systems • 2. Workforce engagement and retention • 3. Labor laws and regulations - Workforce planning and development • 1. Staffing and workforce models • 2. Competency management • 3. Professional development and succession planning
Topic 3: Leadership	34%	- Organizational leadership and governance • 1. Ethics and professional standards • 2. Strategic planning and alignment • 3. Change management and innovation - Communication and relationship management • 1. Cultural competence and inclusivity • 2. Conflict resolution and negotiation • 3. Interprofessional collaboration - Fiscal and resource management • 1. Business principles and economics • 2. Resource allocation and optimization • 3. Budgeting and financial planning

Topic 4: Quality and Safety	24%	- Patient safety and risk management • 1. Risk assessment and mitigation • 2. Safety culture and reporting systems • 3. Regulatory compliance and accreditation - Outcomes management • 1. Benchmarking and best practices • 2. Clinical and operational outcomes - Quality improvement science and methods • 1. Performance measurement and metrics • 2. Process improvement models • 3. Evidence-based practice integration
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>> NEA-BC Testking <<

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Nursing ANCC - Nurse Executive Advanced Certification (NEA-BC) NEA-BC Prüfungsfragen mit Lösungen (Q77-Q82):

77. Frage

A nurse executive is speaking at a public forum. A member of the audience asks a long question related to his own health. How should the nurse executive respond?

- A. Answer the question as fully as possible based on what the individual has said
- **B. Give a general response and offer to discuss the topic in private after the meeting**
- C. Inform the individual that it is not possible to discuss personal health issues in public
- D. Dismiss the question quickly and ask move on to other questions

Antwort: B

Begründung:

When a nurse executive is presented with a personal health-related question at a public forum, the response must be carefully considered. It is important to remember that discussing specific personal health details in a public setting is not appropriate due to privacy concerns and the sensitive nature of medical information. Moreover, the nurse executive may not have all the necessary information to provide a comprehensive answer, as a proper medical consultation requires a private setting and possibly access to the individual's medical history and other relevant data.

However, it would also be inappropriate and unprofessional for the nurse executive to ignore or dismiss the question outright. Such an approach could be perceived as rude or uncaring. Therefore, the most suitable response involves a balance between respect for the individual's concerns and adherence to professional and ethical standards.

The recommended approach is for the nurse executive to provide a general response that addresses the topic broadly, without delving into specifics that would typically require confidentiality. For example, if asked about a specific condition or treatment, the nurse might briefly describe common practices or general advice concerning the condition but avoid any personalized medical advice.

Following the general response, the nurse executive should offer to discuss the matter privately after the forum. This allows the individual to receive the attention they need in a setting that respects their privacy. Additionally, it ensures that the audience's time is respected, keeping the forum focused on its general agenda.

This strategy not only protects the privacy and dignity of the individual asking the question but also maintains the professionalism and focus of the public forum. It demonstrates the nurse executive's commitment to both public engagement and individual patient care,

upholding the standards of the nursing profession in a public leadership role.

78. Frage

Which of the following statements best describes the expectancy theory of performance

- A. People believe they can achieve certain levels of performance and, if they do, they will be rewarded.
- B. People want to be treated equally and fairly by employers.
- C. none of the above
- D. Behavior will be rewarded when repeated.

Antwort: A

Begründung:

The correct answer, "People believe they can achieve certain levels of performance and, if they do, they will be rewarded," encapsulates the core principle of the expectancy theory of motivation. This theory, primarily developed by Victor Vroom in the 1960s, posits that individual motivation to engage in a task is influenced by the expectation that the effort will lead to a desired performance level, and in turn, result in a desirable reward.

Expectancy theory is built on three key components: expectancy, instrumentality, and valence. Expectancy is the belief that one's effort (e.g., working hard) will result in achievement of desired performance goals (e.g., meeting a sales target). This aspect is clearly reflected in the statement where individuals believe they can achieve certain levels of performance.

Instrumentality is the belief that if one achieves the performance expectations, they will be rewarded. This underscores the second part of the statement, which links achieving these targets to subsequent rewards. These rewards can be intrinsic (such as personal satisfaction or achievement) or extrinsic (such as pay raises, bonuses, or promotions).

Valence refers to the value individuals place on the rewards of an outcome, which means the rewards must be both desired and valued by the employee to motivate higher performance levels. This ensures that the rewards provided align with what employees value, thereby maximizing motivation to perform.

In summary, the expectancy theory details how the relationship between expected performance and rewards influences motivation levels in individuals. The statement accurately reflects this theory by emphasizing that performance levels believed to be achievable are linked to anticipated rewards, thereby motivating individuals to perform according to those expectations. This theory is distinct from others like equity theory (which focuses on fairness in comparison to others) or the law of effect (which involves learning through rewards and punishments), but may align with broader pay-for-performance strategies where performance directly impacts compensation.

79. Frage

What criteria is used to determine the Magnet status of The American Nurses Credentialing Center's Magnet Recognition Program?

- A. Quality Indicators of the ANA
- B. both A and B
- C. Standards of Practice as defined by the ANA
- D. neither A nor B

Antwort: B

Begründung:

The American Nurses Credentialing Center's Magnet Recognition Program is a prestigious designation that recognizes healthcare organizations for quality patient care, nursing excellence, and innovations in professional nursing practice. To determine whether a healthcare institution is eligible for Magnet status, specific criteria are utilized during the evaluation process. These criteria are based on the following components:

****Quality Indicators of the ANA**:** This refers to the performance measures and benchmarks that reflect the American Nurses Association's (ANA) standards for high-quality nursing. These indicators are crucial in assessing the effectiveness and efficiency of the nursing services within the institution. They include patient outcomes, safety measures, staff satisfaction, and overall quality of care.

****Standards of Practice as Defined by the ANA**:** These standards outline the responsibilities of nurses and the level of professional performance expected of them as defined in the ANA's "Nursing Administration: Scope and Standards for Practice." They cover various aspects of nursing practice, including assessment, diagnosis, outcomes identification, planning, implementation, and evaluation. The standards ensure that nursing practice is consistent, effective, and aligned with the latest evidence-based research.

To achieve Magnet status, institutions must demonstrate excellence in both of these areas. The rigorous evaluation process includes a thorough review of documentation, on-site visits, and assessments to verify that the institution meets or exceeds the set benchmarks.

and standards. This dual focus ensures that only the top healthcare organizations, which excel in both managing nursing services and delivering high-quality patient care, are awarded the Magnet designation.

Therefore, the correct answer to the question regarding the criteria used to determine the Magnet status is "both A and B" - encompassing both the Quality Indicators of the ANA and the Standards of Practice as defined by the ANA. This comprehensive approach helps in maintaining the integrity and prestige of the Magnet Recognition Program.

80. Frage

The one dramatic moment when everything can change all at once that the nurse leader seeks during the implementation phase of change is known as which of the following?

- A. tipping point
- B. point of no return
- C. break-even point
- D. leveraged point

Antwort: A

Begründung:

The concept of the "tipping point" is pivotal in various fields, including healthcare management, particularly during the implementation phase of change initiatives. The term "tipping point" refers to a critical juncture or threshold at which a small input can lead to a significant and often irreversible change. In the context of nursing and healthcare leadership, the tipping point is eagerly sought after by nurse leaders as it represents the moment when the momentum for change becomes strong enough to drive the change process forward across the whole organization.

For nurse leaders, reaching the tipping point is essential as it means that the change initiative has gained sufficient support and acceptance among staff to ensure its successful implementation and sustainability. This moment is crucial because it signifies a shift in the organization's culture, practices, or operations towards the new desired state. The change, at this point, has gathered enough support to "tip" the balance from the old ways of doing things to new, improved practices.

The dynamics leading to a tipping point in healthcare can be influenced by various factors. These include effective communication, the influence of key stakeholders, the alignment of the change with organizational values, and the visible benefits of the change. Nurse leaders play a critical role in orchestrating these dynamics by engaging with staff, addressing concerns, and harnessing the energy and knowledge of influential individuals within the team who can advocate for the change. These individuals are often seen as connectors, mavens, or salespeople who can persuasively spread the idea and importance of the change through their networks, thereby accelerating its acceptance.

Understanding and identifying the tipping point in the process of change management allows nurse leaders to strategically plan their actions and interventions to capitalize on this momentum. This might involve intensifying communication efforts, providing additional training or resources, or publicly recognizing the contributions of early adopters of the change. The ultimate goal is to ensure that the change becomes deeply embedded within the organization, thus becoming the new norm.

In summary, the tipping point is not just a moment but a culmination of concerted efforts and strategic leadership. For nurse leaders, recognizing and leveraging this tipping point can significantly enhance the success of implementing crucial changes that can improve patient care, enhance operational efficiency, and foster a positive work environment within healthcare settings.

81. Frage

Which of the following would NOT be a defense to a malpractice claim?

- A. res ipsa loquitur
- B. contributory negligence
- C. unavoidable accident
- D. assumption of the risk

Antwort: A

Begründung:

The legal doctrine of res ipsa loquitur is often mentioned in discussions of negligence, particularly in personal injury and malpractice cases. However, contrary to some of the options presented in the original question, res ipsa loquitur is not a defense mechanism that can be used by defendants in such cases. Instead, it is a principle used by plaintiffs to establish evidence of negligence.

Res ipsa loquitur, a Latin term meaning "the thing speaks for itself," applies when the nature of the accident is such that it would not ordinarily occur without negligence and the instrumentality causing the injury was under the exclusive control of the defendant. When invoked successfully, this doctrine shifts the burden of proof from the plaintiff to the defendant, compelling the defendant to provide evidence that the injury was not due to their negligence.

For example, in a surgical malpractice case where a patient suffers burns from a piece of medical equipment that should have been under the exclusive control of the surgical team, the principle of *res ipsa loquitur* can help establish that such an incident typically arises from negligence. The patient (plaintiff) would not need to prove exactly how the negligence occurred, merely that the accident itself is evidence of negligence.

In contrast, other options listed in the question, such as contributory negligence, assumption of the risk, and unavoidable accident, are indeed defenses that can be used by defendants. Contributory negligence involves a situation where the plaintiff may have also been negligent and contributed to their harm. Assumption of the risk is a defense when the plaintiff knowingly and voluntarily assumes a risk inherent to a dangerous activity they chose to undertake. Unavoidable accident refers to incidents that occur without negligence from any party.

Therefore, *res ipsa loquitur* stands out among the listed options as it does not serve as a defense for the defendant but rather a tool for the plaintiff to facilitate proving a claim of negligence. This distinction is crucial for both legal practitioners and those involved in or studying cases of negligence and malpractice.

82. Frage

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