

Amer Leadership for Quality and Safety, 1/E

Chapter 2

Question 1

Type: MCSA

The nurse manager is reviewing the incidence of hospital-acquired infections for a particular care area. Which single action would improve the incidence of infections in the hospital?

1. Frequent hand washing
2. Using paper towels
3. Using antibacterial soap
4. Wearing gloves

Correct Answer: 1

Rationale 1: The Centers for Disease Control and Prevention estimate that 1 out of every 20 hospitalized patients will contract a hospital-acquired infection. Hand hygiene is the key to providing safer and less expensive care. (See Page 18 The Ideal Work Environment)

Rationale 2: The Centers for Disease Control and Prevention estimate that 1 out of every 20 hospitalized patients will contract a hospital-acquired infection. Hand hygiene is the key to providing safer and less expensive care. The use of paper towels has not been proven to improve the incidence of infections in the hospital. (See Page 18 The Ideal Work Environment)

Rationale 3: The Centers for Disease Control and Prevention estimate that 1 out of every 20 hospitalized patients will contract a hospital-acquired infection. Hand hygiene is the key to providing safer and less expensive care. The use of antibacterial soap has not been proven to improve the incidence of infections in the hospital. (See Page 18 The Ideal Work Environment)

Rationale 4: The Centers for Disease Control and Prevention estimate that 1 out of every 20 hospitalized patients will contract a hospital-acquired infection. Hand hygiene is the key to providing safer and less expensive care. Wearing gloves has not been proven to improve the incidence of infections in the hospital. (See Page 18 The Ideal Work Environment)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-1

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Question 2

Type: MCMA

The nurse manager is identifying ways to improve the safety of patient care with documentation. On which areas would the manager focus these efforts?

Standard Text: Select all that apply.

1. Charting
2. Care plans
3. Report notes
4. Agency referrals
5. Procedure manuals

Correct Answer: 1,2,4,5

Rationale 1: To improve the safety of patient care with documentation, a focus would be placed on charting. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 2: To improve the safety of patient care with documentation, a focus would be placed on care plans. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 3: Report notes are not permanent parts of the patient's medical record and would not need to be an area of focus to improve the safety of patient care with documentation. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 4: To improve the safety of patient care with documentation, a focus would be placed on agency referrals. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 5: To improve the safety of patient care with documentation, a focus would be placed on procedure manuals. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-1

Question 3

Type: MCMA

The nurse manager is planning to increase the nurse–patient ratio on a care area. How will this change in staffing improve the quality of patient care?

Standard Text: Select all that apply.

1. Less use of restraints
2. Fewer pressure sores
3. Lower patient mortality rates
4. Less use of long-term catheters
5. Lower amounts of documentation

Correct Answer: 1,2,3,4

Rationale 1: Higher nurse staffing has been documented to improve outcomes such as less use of restraints. (See Page 25 The Evidence Is In)

Rationale 2: Higher nurse staffing has been documented to improve outcomes such as fewer pressure sores. (See Page 25 The Evidence Is In)

Rationale 3: Higher nurse staffing has been documented to improve outcomes such as lower patient mortality rates. (See Page 25 The Evidence Is In)

Rationale 4: Higher nurse staffing has been documented to improve outcomes such as less use of long-term catheters. (See Page 25 The Evidence Is In)

Rationale 5: Higher nurse staffing has been documented to improve outcomes however lower amounts of documentation is not an outcome. (See Page 25 The Evidence Is In)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-1

Question 4

Type: MCMA

The nurse desires to improve caring and relationship skills when providing patient care. On what will this nurse focus?

Standard Text: Select all that apply.

1. Patient advocacy
2. Decision making
3. Cultural respect
4. Morality
5. Ethics

Correct Answer: 1,3,4,5

Rationale 1: Patient advocacy is a human caring and relationship skill. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 2: Decision making is a critical thinking skill. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 3: Cultural respect is a human caring and relationship skill. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 4: Morality is a human caring and relationship skill. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 5: Ethics is a human caring and relationship skill. (See Page 21 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-1

Question 5

Type: MCSA

The director of nursing is reviewing the results of surveys conducted with discharged patients. One criterion, adequate preparation to care for self at home after discharge, has consistently received low marks. In which area would the nursing staff need to focus to improve this category of the survey?

1. Knowledge integration skills
2. Management skills

3. Leadership skills

4. Teaching skills

Correct Answer: 4

Rationale 1: Knowledge integration skills focus on the integration of nursing knowledge with the natural sciences and related disciplines. (See Page 22 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 2: Management skills focus on administration, planning, human resources utilization, and accountability. (See Page 22 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 3: Leadership skills focus on collaboration, creativity, planning, and professional accountability. (See Page 22 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Rationale 4: Teaching skills focus on health promotion and health restoration, which would be applicable to prepare the patients for self-care after discharge. (See Page 22 Box 2-1 The Competency Outcomes and Performance Assessment (COPA) Model)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: 2-2

Question 6

Type: MCMA

The hospital administration is meeting with nursing and medicine department heads to discuss the implementation of the Strategies and Tools to Enhance Performance and Patient Safety (STEPPS) program. What would be the goals for implementing this program?

Standard Text: Select all that apply.

1. Improve the fragmentation of patient care.
2. Reduce multiple initiatives for the same patient.
3. Support the implementation of electronic health records.
4. Placing care providers at the heart of a safe work culture.
5. Emphasize the importance of nurses providing safe patient care.

Correct Answer: 1,2,3,4

Rationale 1: One need for the implementation of STEPPS is to address fragmented care. (See Page 29 Strategies and Tools to Enhance Performance and Patient Safety (STEPPS))

Rationale 2: One need for the implementation of STEPPS is to reduce multiple initiatives for the same patient. (See Page 29 Strategies and Tools to Enhance Performance and Patient Safety (STEPPS))

Rationale 3: One need for the implementation of STEPPS is to support the implementation of electronic health records. (See Page 29 Strategies and Tools to Enhance Performance and Patient Safety (STEPPS))

Rationale 4: One need for the implementation of STEPPS is to place care providers at the heart of a safe work culture. (See Page 29 Strategies and Tools to Enhance Performance and Patient Safety (STEPPS))

Rationale 5: The program focuses on communication between nurses and physicians as well as ensuring that all team members, and not just nurses, focus on providing quality care. (See Page 29 Strategies and Tools to Enhance Performance and Patient Safety (STEPPS))

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-2

Question 7

Type: MCSA

The nurse manager is aware of a safety issue that continues to occur on a patient care area. Which action would help to identify this safety issue before it adversely affects a patient?

1. Ask physicians to report the safety issue when identified.
2. Reprimand nurses who permit this safety issue to occur.
3. Write a memo to the staff about the safety issue.
4. Create a red-flag to be used for the safety issue.

Correct Answer: 4

Rationale 1: It is not the responsibility of the physicians to report safety issues. Every care provider is responsible for identifying safety issues. (See Page 27 Rapid-Cycle Change and Continuous Quality Improvement)

Rationale 2: Reprimanding nurses who permit this safety issue to occur does not promote a culture of safety. (See Page 27 Rapid-Cycle Change and Continuous Quality Improvement)

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Rationale 3: Writing a memo to the staff about the safety issue does not ensure that the safety issue will be properly addressed. (See Page 27 Rapid-Cycle Change and Continuous Quality Improvement)

Rationale 4: Creating a red-flag to be used for the safety issue calls attention to the safety issue in advance in order to prevent it from occurring. (See Page 27 Rapid-Cycle Change and Continuous Quality Improvement)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-2

Question 8

Type: MCSA

The nurse identifies an issue with the labeling of a medication for a patient. What can the nurse do to prevent this situation from creating a medication error?

1. Write over the medication label.
2. Notify the nurse manager about the issue.
3. Contact the pharmacy and discuss ways to eliminate the issue.
4. Document the identification of the issue in the medical record.

Correct Answer: 3

Rationale 1: To create and support a culture of safety, writing over the medication label might not be sufficient to prevent the situation from creating a medication error in the future. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 2: Notifying the nurse manager about the issue may or may not help prevent the situation from causing a medication error in the future. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 3: Contacting the pharmacy and discussing ways to eliminate the issue demonstrates teamwork and collaboration to improve the quality and safety of patient care. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 4: Documenting the identification of the issue in the medical record will not prevent the situation from creating a medication error in the future. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Global Rationale:

Cognitive Level: Applying

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Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-2

Question 9

Type: MCSA

After reading a journal article about a patient care approach, the nurse implemented the actions, which resulted in safe quality care. Which of Smith's levels of change did this nurse implement?

1. Effective
2. Efficient
3. Different
4. Copying

Correct Answer: 4

Rationale 1: Being effective addresses doing the right things. (See Page 36 Change Theories)

Rationale 2: Being efficient addresses doing things right. (See Page 36 Change Theories)

Rationale 3: Being different addresses doing things that no one else is doing. (See Page 36 Change Theories)

Rationale 4: Copying is doing things that other people are doing. This is what the nurse did in this situation. (See Page 36 Change Theories)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-3

Question 10

Type: MCSA

The nursing staff on a patient care area is adamantly resisting changing a process that has resulted in multiple safety issues. What would be the nurse manager's first step to change this harmful patient care process?

1. Choose the solution.

2. Unfreeze the staff.
3. Do the right thing.
4. Do away with things.

Correct Answer: 2

Rationale 1: Choosing the solution would occur much later in the change process. (See Page 35 Change Theories)

Rationale 2: This is what the nurse manager needs to do first to change this process with the staff. (See Page 35 Change Theories)

Rationale 3: Doing the right thing would occur later in the change process. (See Page 35 Change Theories)

Rationale 4: Doing away with things would occur later in the change process. (See Page 35 Change Theories)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-3

Question 11

Type: SEQ

The nurse manager wants to make a major change for a patient care area that will affect the nursing staff and physicians. If following Havelock's steps to make this change, in which order will the nurse manager proceed? (Place in order the steps that the nurse manager will take starting with the first to the last.)

Standard Text: Click and drag the options below to move them up or down.

Choice 1. Stabilize

Choice 2. Gain acceptance

Choice 3. Choose a solution

Choice 4. Acquire resources

Choice 5. Build a relationship

Choice 6. Diagnose a problem

Correct Answer: 5,6,4,3,2,1

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Rationale 1: Stabilizing is the last step in Havelock's process. (See Page 35 Change Theories)

Rationale 2: Gaining acceptance is the fifth step in Havelock's process. (See Page 35 Change Theories)

Rationale 3: Choosing a solution would occur after building relationships, diagnosing the problem, and acquiring resources has occurred. (See Page 35 Change Theories)

Rationale 4: Acquiring resources occurs just before the solution is selected. (See Page 35 Change Theories)

Rationale 5: Building relationships is the first step that needs to be done. (See Page 35 Change Theories)

Rationale 6: Diagnosing the problem is the second step in the process. (See Page 35 Change Theories)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-3

Question 12

Type: MCSA

The director of nursing is considering using Amer's Hybrid Model of Change to improve the quality of patient care. When analyzing this model, what information will the director need to make an objective assessment of the current situation?

1. Number of nursing staff
2. Staffing budget
3. Current culture
4. Turn-over rates

Correct Answer: 3

Rationale 1: The number of nursing staff is not a part of Amer's Hybrid Model of Change. This model includes the elements of communication, culture, collaboration, common goals, and the ability to appreciate others' perspectives. (See Page 36 Change Theories)

Rationale 2: The staffing budget is not a part of Amer's Hybrid Model of Change. This model includes the elements of communication, culture, collaboration, common goals, and the ability to appreciate others' perspectives. (See Page 36 Change Theories)

Rationale 3: The current culture is a part of Amer's Hybrid Model of Change. This model includes the elements of communication, culture, collaboration, common goals, and the ability to appreciate others' perspectives. (See Page 36 Change Theories)

Rationale 4: Turn-over rates is not a part of Amer's Hybrid Model of Change. This model includes the elements of communication, culture, collaboration, common goals, and the ability to appreciate others' perspectives. (See Page 36 Change Theories)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-3

Question 13

Type: MCSA

A preceptor is helping a new staff nurse improve communication with physician staff members. What approach would the preceptor use to help the nurse develop consistency and objectivity when communicating patient care issues with physicians?

1. COPA
2. SBAR
3. Evidence-based practice
4. Continuous quality improvement

Correct Answer: 2

Rationale 1: COPA is a model to raise awareness about outcomes-focused education. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 2: SBAR is an objective communication tool used for nurse-to-physician communication that provides a simple solution to improve patient safety. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 3: Evidence-based practice is a process of identifying interventions to improve the quality of patient care. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Rationale 4: Continuous quality improvement is a process to improve patient care that does not necessarily include methods to improve communication. (See Page 19 Quality and Safety Education in Nursing (QSEN))

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-4

Question 14

Type: MCSA

The hospital administrator is determining the quality level of care provided to patients. Which quality indicator would be most applicable for the administrator to focus?

1. Caring nurses
2. No mistakes
3. Low staff turnover
4. No hospital-acquired infections

Correct Answer: 1

Rationale 1: A quality measure that a patient would use to measure quality care would be caring nurses. This is the quality indicator that the hospital administrator would focus. (See Table 2-1 Quality Measures from Various Perspectives)

Rationale 2: No mistakes is a quality indicator that physicians would focus. A quality measure that a patient would use to measure quality care would be caring nurses. This is the quality indicator that the hospital administrator would focus. (See Table 2-1 Quality Measures from Various Perspectives)

Rationale 3: Low staff turnover is a quality indicator that the hospital administrator would focus. A quality measure that a patient would use to measure quality care would be caring nurses. This is the quality indicator that the hospital administrator would focus. (See Table 2-1 Quality Measures from Various Perspectives)

Rationale 4: No hospital-acquired infections would be a quality indicator that the health insurance companies would focus. A quality measure that a patient would use to measure quality care would be caring nurses. This is the quality indicator that the hospital administrator would focus. (See Table 2-1 Quality Measures from Various Perspectives)

Global Rationale:

Cognitive Level: Analyzing

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: 2-4

Question 15

Type: MCSA

A Shared Governance committee is working on a project to improve the quality of patient care provided in a major city hospital. What would the committee use as the definition of quality?

1. Lack of errors
2. Lack of falls
3. No medication errors
4. Defined by the patient

Correct Answer: 4

Rationale 1: Quality care goes far beyond a lack of errors. (See Page 30 Theoretical Perspectives in Safety and Quality)

Rationale 2: Quality care goes far beyond a lack of falls. (See Page 30 Theoretical Perspectives in Safety and Quality)

Rationale 3: Quality care goes far beyond no medication errors. (See Page 30 Theoretical Perspectives in Safety and Quality)

Rationale 4: Quality care should be defined by the patient, family, and nurse. (See Page 30 Theoretical Perspectives in Safety and Quality)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 2-4

Question 16

Type: MCSA

A healthcare organization is striving to improve the quality of patient care; however, the medical director is opposed to making changes. What action could a nurse manager take to help improve quality on one patient care area?

1. Implement multidisciplinary meetings.
2. Encourage nursing staff to follow policies.

3. Remind care givers to thoroughly document.
4. Identify physician issues that are problematic.

Correct Answer: 1

Rationale 1: When regular multidisciplinary meetings are held, patient safety improves. (See Page 31 Theoretical Perspectives in Safety and Quality)

Rationale 2: Encouraging nursing staff to follow policies will not improve the quality of patient care. (See Page 31 Theoretical Perspectives in Safety and Quality)

Rationale 3: Reminding care givers to thoroughly document will not improve the quality of patient care. (See Page 31 Theoretical Perspectives in Safety and Quality)

Rationale 4: Identifying physician issues that are problematic will not improve the quality of patient care. (See Page 31 Theoretical Perspectives in Safety and Quality)

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2-4