

# Yoder-Wise: Leading and Managing in Nursing, 5th Edition

## Chapter 02: Patient Safety

### Test Bank

#### MULTIPLE CHOICE

1. In an effort to control costs and maximize revenues, the Rehabilitation Unit at Cross Hospital reduces the number of its managers and flattens its organizational structure. Within a year, the number of adverse events on the units has doubled. This may be attributable to:
  - a. The overload of staff nurses.
  - b. Inability of staff at the bedside to make good choices.
  - c. A change in reporting systems.
  - d. Fewer clinical leaders and advocates for necessary resources.

ANS: D

Flattening of the organizational structure has been shown to increase mistrust in organizations while removing clinical leaders who provide support, consultation, and leadership in securing resources and in inspiring standards of excellence.

REF: Page 28

TOP: AONE competency: Knowledge of the Healthcare Environment

2. Traditional approaches to ensuring patient safety have focused on:
  - a. Assigning blame.
  - b. Finding solutions to systems issues.
  - c. Instituting best practices in response to errors.
  - d. Hiding errors from potential litigation.

ANS: A

The IOM report (2004) identified that traditional practice focused on punishment of the person for errors as compared with a system view of responsibility for errors and solutions.

REF: Pages 26-28 TOP: AONE competency: Leadership

3. To increase safety in patient care areas of the Valley Hospital, the executive begins by:
  - a. Asking the community what the safety issues are.
  - b. Consulting with a management expert about staffing schedules.
  - c. Ensuring that the senior nursing officer attends the board meetings.
  - d. Instituting improved practices to reduce needle-stick injuries.

ANS: B

The IOM report (2004) highlighted the importance of the attendance of the senior nurse executive at board meetings to enhance understanding of issues and opportunities in the system that contribute to safe (or unsafe) nursing practice and patient care.

REF: Page 28

TOP: AONE competency: Communication and Relationship-Building

4. During review of back injuries, it is determined that mechanical lifts and transfer belts are not being properly used. In addressing this concern, the unit manager:
  - a. Meets individually with nurses who are observed to be using the lifts incorrectly to review the correct procedure.
  - b. After consultation with the staff about the review, orders new lifts to replace older ones that are malfunctioning.
  - c. Blames the system for inadequate funding for resources.
  - d. Reviews the system of reporting incidents to ensure that appropriate reporting is occurring.

ANS: B

The IOM report (2004) points to the need to involve nurses in decisions that affect them and the provision of care.

REF: Page 28

TOP: AONE competency: Communication and Relationship-Building

5. Before the IOM report was issued, “To err is human” adverse events were considered:
  - a. A normal risk.
  - b. Rare.
  - c. A reflection of some organizations.
  - d. Related to systems errors.

ANS: B

The IOM report (2004) highlighted deaths attributable to medical error as more common than was once thought.

REF: Pages 26, 27 TOP: AONE competency: Knowledge of Healthcare Environment

6. In complying with *Crossing the Quality Chasm*, you ensure that:
  - a. Patients are actively encouraged to make decisions related to care.
  - b. Rules and decisions are made through centralized processes.
  - c. You monitor the performance of each staff member closely.
  - d. Preference is given to increasing staff numbers rather than staff credentials.

ANS: A

Quality care is related to safer patient care, and autonomy in decision making is associated with the factors identified in the report.

REF: Pages 26, 27

TOP: AONE competency: Knowledge of the Healthcare Environment

7. After consulting with practice environments about quality and safety concerns in health care, the Dean of Health Programs at US University develops:
  - a. A nursing program that emphasizes the development of a strong disciplinary identity.
  - b. Programming that stresses discipline-based research.
  - c. Partnerships with health care to develop software for reporting of adverse events.
  - d. An interdisciplinary program for nurses, pharmacists, and medical practitioners that emphasizes collaborative learning teams.

ANS: D

Health Professions Education identified that education related to health disciplines in silos leads to compromised communication and inability to function as an integrated whole for patient-centered care.

REF: Pages 27, 28 TOP: AONE competency: Knowledge of Healthcare Environment

8. In designing a quality, safe healthcare environment, the primary emphasis needs to be on:
  - a. Evidence-based practice.
  - b. Informatics.
  - c. Staffing.
  - d. The patient.

ANS: D

Focusing on the patient moves care from concern about who controls care to a focus on what care is provided to and with patients, which was an aim identified in the IOM report, *Crossing the Quality Chasm*.

REF: Pages 26, 27

TOP: AONE competency: Knowledge of the Healthcare Environment

9. As a patient care advocate, you regularly coach patients as to how to stay safe in health care by educating them about:
  - a. The need to understand and record all medications being taken.
  - b. Bringing their own linens and other personal items to the hospital.
  - c. Washing hands frequently while in a healthcare environment and using a hand sanitizer.

d. Following closely the directions and orders of healthcare providers.

ANS: A

The five steps to safer health care for patients include keeping a list of medications that patients are taking.

REF: Page 29 TOP: AONE competency: Knowledge of Healthcare Environment

10. As a nurse manager on the West Surgery Unit, you are interested in increasing patient safety on your unit. Your initial focus is on the two encounters that the *Chasm* series identified as most likely to generate concerns about patient safety. As a result, you initiate which of the following?
- Questions on the pre-admission history that specifically explore details of substance use
  - Careful monitoring of all patients who are ambulating postoperatively
  - Rigorous patient teaching related to deep breathing and coughing
  - Systematic follow-up with patients to ensure that they understand details of surgery

ANS: A

The *Chasm* series identified two common occurrences that can compromise patient safety: (1) underlying mental health or substance-use conditions that complicate the basic intervention strategy and (2) medication errors. Awareness of substance use enables caregivers to anticipate potential complications and the need to modify interventions. Falls and respiratory complications arise out of the Nurse-Sensitive Care Standards; ensuring that patients have an understanding of what will happen when surgery is needed reflects the fifth step in *Five Steps to Safe Health Care*.

REF: Pages 27, 28 TOP: AONE competency: Knowledge of Healthcare Environment

11. Which philosophical statement would be MOST consistent with that of a learning organization?
- We believe that sustainable funding is a key factor in service.
  - Our staff members are valuable.
  - We believe in people.
  - We believe that change is essential to good service and quality patient care.

ANS: D

Learning organizations are committed to the probability of change, to the need to learn, and to maintaining competence to address change.

REF: Page 28  
TOP: AONE competency: Knowledge of the Healthcare Environment

12. To achieve nurse-sensitive care standards developed by the NQF, you advocate for which of the following in your health facility?
- Programming that builds individual nurse competency into smoking cessation
  - Implementation of informatics at the bedside
  - Staff-manager conferences to reviewed reporting of adverse events
  - Patient councils to review food, recreation, and nurse-patient relations

ANS: A

The NQF outlines nursing-centered intervention measures related to smoking cessation, which may require training and education for nurses.

REF: Pages 29, 30

TOP: AONE competency: Knowledge of the Healthcare Environment

13. You notice that Sally, a student on your unit, is giving information to an anxious young teen, who seems very uncertain about preparation for an upper GI series. After Sally leaves the room, you ask her how she thought her conversation went and:
- Encourage her to ask the patient if he has questions or concerns about the procedure.
  - Advise her to consider providing the patient with more information.
  - Suggest that she leave some brochures on the procedure with the patient.
  - Suggest that she also provide teaching to the adolescent's parents.

ANS: A

The Five Steps to Safe Health Care for Patients includes the step of asking questions if there are doubts or concerns. The nurse can encourage patients to take a larger role in care by taking these steps and by providing patients with coaching in the steps.

REF: Page 29

TOP: AONE competency: Communication and Relationship-Building

14. The NQF provides a model for advancement of healthcare quality that could be used in healthcare organizations. Using this model might involve councils or committees that dialogue openly regarding quality and:
- Consist of administrative and patient representatives.
  - Are interdisciplinary and intersectoral.
  - Are composed of senior executives and managers.
  - Are composed of patients and patients' families.

ANS: B

The NQF included various sectors (government, professional, consumer, business) and disciplines in discussions about quality in health care.

REF: Pages 29, 30 TOP: AONE competency: Knowledge of Healthcare

## Environment

15. A survey of safety practices and attitudes at hospital XYZ finds that staff members have concerns about their safety and that of patients. Results from the manager subgroup are likely to be:
- Similar to staff evaluations of safety.
  - More positive about safety than staff.
  - Less positive about safety than staff.
  - Less positive than senior executives about safety.

ANS: B

A study of long-term care facilities found that managers rated the safety culture more positively than staff.

REF: Pages 31-33

TOP: AONE competency: Knowledge of the Healthcare Environment

16. As a result of the Joint Commission assessment, a healthcare facility loses its accreditation. What is the primary consequence for this institution?
- Loss of funding
  - Organizational shift to profit status
  - Practices continue as usual
  - Staff morale and care standards remain high

ANS: A

The Joint Commission is a not-for-profit organization that has attained status from the Centers for Medicare and Medicaid. Failure to meet Joint Commission standards is deemed failure to meet CMS sets, which has funding implications.

REF: Pages 29-31 TOP: AONE competency: Knowledge of Healthcare Environment

17. How would you prepare your unit for a Joint Commission visit?
- Commit staff resources over a six-month period to updating procedure manuals.
  - Educate staff through meetings and training sessions regarding appropriate answers to questions.
  - Prepare a manual that outlines orientation procedures, and ensure that all safety issues are addressed.
  - Ensure that review of patient outcomes and of responses to outcome data is ongoing.

ANS: D

The Joint Commission conducts reviews on an ongoing basis that are directed toward outcomes (such as number of patient falls) and not processes (such as procedure manuals).

REF: Pages 30, 31

TOP: AONE competency: Knowledge of the Healthcare Environment

18. On the basis of a review of increased falls with injury and increased restraint use during evening hours, as the unit manager, you *most* likely would:
- Review daytime and evening staffing mixes.
  - Schedule continuing education for all staff members.
  - Review the safety of ambulation devices.
  - Continue your current practices and procedures.

ANS: A

As a nurse manager, it is your responsibility to challenge any act that is unsafe and to stop actions that are not performed in the patient's best interest. This includes, according to the Nurse-Sensitive Care Standards, ensuring that staffing mixes are appropriate for care provided on each shift.

REF: Pages 29-31, 34

TOP: AONE competency: Knowledge of Healthcare Environment

19. The STAR approach to patient safety encourages:
- Focus and reflection.
  - Continuing education.
  - Multidisciplinary approaches.
  - Patient feedback.

ANS: A

The STAR approach to patient safety emphasizes the following: Stop to concentrate on the task, think about the task, act to accomplish the task (focus activities), and review how well the task has been accomplished (reflection).

REF: Pages 31, 32 TOP: AONE competency: Professionalism

20. A logical response to the final step of the STAR Approach to Patient Safety might be to:
- Seek further learning.
  - Finish the care that was started.
  - Think about what needs to be done.
  - Concentrate on the task at hand.

ANS: A

The final step of the STAR approach is to review how well the task was accomplished. If the task did not meet established standards or did not meet patient needs satisfactorily, a next step might be to refine knowledge and skills.

REF: Pages 31, 32 TOP: AONE competency: Professionalism

21. The culture of blame and punishment of errors tends to encourage a culture of:

- a. Perfectionism.
- b. Learning.
- c. Safety.
- d. Trust.

ANS: A

Keeping Patients Safe: Transforming the Work Environment of Nurses points to the practice that many organizations have of blaming, thus setting up a culture in which mistakes are attributed solely to individuals, perfectionism is stressed, and the emphasis does not include systems and solutions.

REF: Page 28      TOP: AONE competency: Knowledge of Healthcare Environments

22. Mary, an 85-year-old patient with cognitive impairment and gross instability, wanders continuously. Lately, she has fallen twice, and the family demands that she be restrained. As the unit manager, you have initiated a least restraint practice. An appropriate action in this situation would be:
- a. Setting up a nursing team meeting to review practices.
  - b. Calling the family to inform them of the practice.
  - c. Initiating a multidisciplinary and family meeting to focus on Mary's needs.
  - d. Restraining Mary to satisfy the family's wishes.

ANS: C

*Crossing the Quality Chasm* emphasizes what care is provided and not who controls decisions, as well as the importance of rendering care *with* the client rather than *to* the client. In this situation, the patient includes family in discussions about quality needs, to take a team approach that involves healthcare professionals, the family, Mary's needs, and evidence associated with safe practice.

REF: Pages 27, 28

TOP: AONE competency: Knowledge of the Healthcare Environment

23. A client requires an appendectomy. The surgeon explains the procedure and asks the client to sign the consent. The patient speaks very little English and looks worried. As a nurse, you would:
- a. Suggest that an interpreter explain the procedure to the client and answer any questions.
  - b. Ask the client if he has any questions.
  - c. Draw a picture to show the incision.
  - d. Not intervene.

ANS: A

The Five Steps to Safer Patient Care identifies that encouraging patients to ask questions when there are doubts and concerns and ensuring understanding before surgery is performed are ways in which nurses can support patients in having



greater influence in their own care. In this situation, asking an interpreter to help enables access to information for the patient and active assessment of his understanding.

REF: Page 29      TOP: AONE competency: Knowledge of Healthcare Environment

24. As the case manager in a home health service, you are interested in trying the Institute for Healthcare Improvement TCAB project in your service. In considering this application, you need to particularly consider:
- Reliability of data gathered by the project.
  - Applicability of the project to your setting.
  - Lack of patient-centeredness in the project.
  - The focus of the project on resource issues.

ANS: B

The TCAB project addresses safety, reliability, patient-centeredness, and care team vitality in the accomplishment of patient goals. Currently, the project involves only inpatient medical-surgical units.

REF: Page 31      TOP: AONE competency: Knowledge of Healthcare Environment

### **MULTIPLE RESPONSE**

- Which of the following patients would be at *greatest* risk in a healthcare visit (select all that apply)?
  - Clyde requires an anticoagulant. He tells the nurse about his medications. He does not include an herbal supplement.
  - George is very shy and withdrawn. He asks the nurse to leave him alone.
  - Sarah is a new parent who finds that nurses on the children's unit are very helpful. She is eager to accept all suggestions, including those that she does not yet understand.
  - Claude is booked for bowel surgery. His doctor explains about the colostomy. Later, Claude tells his wife that he really doesn't know what the doctor meant by colostomy.

ANS: A, C, D

Safer health care involves the patient as an active consumer who keeps and brings a list of all medications, including natural remedies, and questions if there are doubts, concerns, or lack of understanding.

REF: Page 29      TOP: AONE competency: Knowledge of Healthcare Environment