

Chapter 02: Patient Focus

MULTIPLE CHOICE

1. In an effort to control costs and maximize revenues, the Rehabilitation Unit at Cross Hospital reduces the number of its nursing managers. Within a year, the number of adverse events on the units has doubled. This may be attributable to
 - a. the overload of work for 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

Strong leadership across the nursing profession is essential to ensure the delivery of safe care. Reducing nursing managers who provide support, consultation, and leadership in securing resources and in inspiring standards of excellence may increase the number of adverse events related to lack of leadership.

DIF: Cognitive Level: Understand REF: Page 28 TOP: Nursing Process: Evaluation

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

When health care facilities create a culture of safety, their staff are more willing to report adverse events because the focus is on addressing issues in the system and not blaming individuals.

DIF: Cognitive Level: Understand REF: Page 28
TOP: Nursing Process: Assessment

3. What is the primary purpose of nursing standards?
 - a. To inform performance appraisals at the unit level
 - b. To identify the desired level of performance
 - c. To inform the courts in relation to negligence and malpractice cases
 - d. To educate other health care professionals about the role of the nurse

ANS: B

The primary purpose of standards is to identify for nurses, the public, government, and other stakeholders the desired and achievable level of performance expected of nurses in their practice, against which actual performance can be measured.

DIF: Cognitive Level: Understand REF: Page 24
TOP: Nursing Process: Assessment

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. consults with the staff about the review to determine how best to proceed.
 - c. blames the system for inadequate funding for resources.
 - d. reviews the system of reporting adverse events to ensure that appropriate reporting is occurring.

ANS: B

Consulting with the staff enables the nurse manager to ascertain the root of the problem, inasmuch as the equipment may be faulty or unsafe because of its age and needs to be replaced. Client-focused provision of care requires the nurse administrator to communicate, collaborate, and consult with nurses and other members of the health care team about the provision of health care services.

DIF: Cognitive Level: Apply REF: Page 25, Box 2-1
TOP: Nursing Process: Implementation

5. The nursing manager changed the current model of implementing nursing rounds of patients each day at 1200 hours to implementing interdisciplinary rounds of patients at 1000 hours. This change reflects
 - a. a patient-centred care initiative.
 - b. delegation of responsibility from nursing to other health care professionals.
 - c. lack of consultation among the nursing staff.
 - d. an inappropriate time to complete patient rounds and will probably not work.

ANS: A

Patient-centred care is a priority in two main roles for nursing managers: making policies and ensuring system accountability. A number of activities can be implemented to enact these two roles, and nurses can support or implement many of them. For example, nurses can lead changes that promote team-based and collaborative care, as demonstrated in this question.

DIF: Cognitive Level: Analyze REF: Page 26
TOP: Nursing Process: Implementation

6. Which of the following represents an activity that supports patient-centred care?
 - a. Posting of visiting hours on the entrance way to each hospital unit
 - b. Regular staff surveys to monitor organizational satisfaction
 - c. Reserved parking spots at the main hospital entrance for physicians
 - d. Creating e-health stations on each inpatient unit

ANS: D

Governance and management activities that support patient-centred care include e-health stations and other technologic devices that facilitate communication, efficiency, and convenience.

DIF: Cognitive Level: Analyze REF: Page 27, Box 2-4
TOP: Nursing Process: Assessment

7. After consulting with practice environments about quality and safety concerns in health care, the Dean of Health Programs at a Canadian 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 professionals 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

Working within interprofessional teams optimizes patient safety and quality of the care that patients receive.

DIF: Cognitive Level: Apply REF: Page 29, Box 2-6
TOP: Nursing Process: Implementation

8. In designing a high-quality, safe health care environment, the primary emphasis needs to be on
- a. evidence-informed practice.
 - b. informatics.
 - c. staffing.
 - d. the patient.

ANS: D

Patient-centred care contributes to a safer health care environment. Patient focus is integrated in the entry-level competencies for nurses that guide nursing education programs. These entry-level competencies are developed through collaboration among nursing regulatory bodies in Canada. The competencies are grounded in a standards-based conceptual framework in which the patient is central.

DIF: Cognitive Level: Understand REF: Page 24 TOP: Nursing Process: Planning

9. As a patient care advocate, you regularly coach patients in 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 health care environment and using a hand sanitizer.
 - d. following closely the directions and orders of health care providers.

ANS: A

One of the patient outcomes includes self-care: that is, the patients' perceptions and abilities to manage their care, including medication administration. It is important that a patient advocate educate patients about their medications and assess their ability to correctly take their own medications.

DIF: Cognitive Level: Apply REF: Page 30
TOP: Nursing Process: Implementation

10. What is the focus in a culture of safety?
- a. Employee safety
 - b. Investigating who is making health care errors
 - c. Effective systems and team work
 - d. Professional nursing standards and ethical codes

ANS: C

In a culture of safety, the focus is on effective systems and teamwork to accomplish the mutual goal of safe, high-quality performance. When something goes wrong, the focus is on what, rather than who, the problem is. The intent is to expose process failures and system issues and to solve them in a nonbiased, nonthreatening way.

DIF: Cognitive Level: Understand
TOP: Nursing Process: Assessment

REF: Page 27

11. Which attribute is a common feature of a culture of safety?
- Voluntary reporting of incidents
 - Organization behaviour
 - Individual-focused policies
 - A nonpunitive approach to adverse event reporting and analysis

ANS: D

Attributes of common features of a culture of safety include a nonpunitive approach to adverse event reporting and analysis; open communication; teamwork; organizational learning; shared belief in the importance of safety; and leadership commitment to safety.

DIF: Cognitive Level: Understand
TOP: Nursing Process: Assessment

REF: Page 28

12. Which of the following depicts a nursing-sensitive outcome?
- Programming that increases individual nurse competency to offer smoking cessation programs
 - Implementation of informatics at the patient's bedside
 - Staff-manager conferences to reviewed reporting of adverse events
 - Patient council meetings to review food, recreation, and nurse-patient relations

ANS: A

Nursing-sensitive outcome is the phrase used to describe patient outcomes that are sensitive to nursing practice or interventions; therefore, programming that incorporates individual nurse competency into smoking cessation programs is an example.

DIF: Cognitive Level: Apply
TOP: Nursing Process: Implementation

REF: Page 30

13. Having team "huddles" each day on the nursing unit is a reflection of
- nurses' need to socialize.
 - creating a culture of safety.
 - ensuring distribution of equal workloads.
 - the manager's need to talk with staff nurses on a daily basis.

ANS: B

Some examples of activities that health care organizations can implement to support a culture of safety include establishing Quality Improvement (QI) teams, having regular team "huddles" on the unit, debriefing with regard to adverse events, and requiring completion of a surgical safety checklist.

DIF: Cognitive Level: Apply
TOP: Nursing Process: Implementation

REF: Page 28

14. Approximately what percentage of Canadian hospital admissions can be expected to include an adverse event?
- 5
 - 7.5
 - 10
 - 12.5

ANS: B

The adverse events rate was found to be 7.5 per 100 Canadian hospital admissions. This means that an adverse event was experienced in 7.5% of hospital admissions.

DIF: Cognitive Level: Remember REF: Page 27 TOP: Nursing Process: Planning

15. Having access to information, evidence, and research is an important driver for quality and
- nurse safety.
 - patient safety.
 - organizational policy development.
 - patient-centred care.

ANS: B

The Canadian Patient Safety Institute's (CPSI's) *Effective Governance for Quality and Patient Safety: A Toolkit for Healthcare Board Members and Senior Leaders* provides information on the drivers of quality and patient safety, references (including Canadian studies), and stories from health care organizations. Important drivers of quality and patient safety include access to information, evidence and research, and relevant measures.

DIF: Cognitive Level: Understand REF: Page 29 TOP: Nursing Process: Planning

16. Which of the following represents a potential use of nurse-sensitive outcomes?
- Informing best practices
 - Accountability for nursing behaviours
 - Performance appraisals
 - Maintaining the status quo

ANS: A

Doran, Harrison, Laschinger, et al. (2004) suggested the following uses for nurse-sensitive outcomes:

- Develop treatment plans for individual patients.
- Evaluate different approaches to patient care.
- Inform best practices.
- Improve the quality of nursing care.
- Improve patient outcomes.
- Inform staffing policies and decisions.
- Assist organizations to balance the competing demands of access, cost, and quality (p. 3).

DIF: Cognitive Level: Understand REF: Page 31
TOP: Nursing Process: Assessment

17. Which of the following is a CPSI safety competency?
- Practise patient-centred care.
 - Optimize human and environmental factors.

- c. Analyze nurse-sensitive outcomes.
- d. Assess nurse staffing and skill mix.

ANS: B

One of the six CPSI competencies is to optimize human and environmental factors, managing the relationship between individual and environmental characteristics in order to optimize patient safety.

DIF: Cognitive Level: Remember REF: Page 28, Box 2-6
TOP: Nursing Process: Assessment

18. On the basis of a review of increased falls with injury and increased use of restraint during evening hours, you as the unit manager are *most* likely to
- a. review daytime and evening staffing mixes.
 - b. schedule continuing education for all staff members.
 - c. review the safety of ambulation devices.
 - d. continue your current practices and procedures.

ANS: A

It is the nurse manager's responsibility to challenge any action that is unsafe and to stop actions that are not performed in the patient's best interest. This includes ensuring that staffing mixes are appropriate for care provided on each shift.

DIF: Cognitive Level: Apply REF: Page 29, Box 2-5
TOP: Nursing Process: Evaluation

19. As the nurse was about to administer an oral medication, the patient states, "That pill is the wrong colour." The nurse goes back to the medication administration area to check the medication and realizes that it is indeed the wrong pill. Does this situation require the completion of an adverse event report?
- a. No; there was no actual error.
 - b. No; it was the patient who stopped an error from occurring.
 - c. Yes; an error almost occurred, and close calls are to be reported.
 - d. It is up to the nurse to decide whether to complete an adverse event report.

ANS: C

Recognizing the occurrence of an adverse event or close call and responding effectively help mitigate harm to the patient, ensure disclosure, and prevent recurrence. In this case, the error would have occurred if the patient had not questioned the colour of the medication.

DIF: Cognitive Level: Analyze REF: Page 29, Box 2-6
TOP: Nursing Process: Implementation

20. Which of the following is the CSPI's flagship program?
- a. Patients Are First
 - b. Safer Healthcare Now
 - c. Safe Healthcare for All
 - d. Patient Safety Culture Improvement

ANS: B

The CSPI's flagship program is Safer Healthcare Now, with its vision as safe health care for all Canadians.

DIF: Cognitive Level: Remember
TOP: Nursing Process: Assessment

REF: Page 29

21. Organizational changes that promote systems thinking, collective accountability, and team-based care are examples of
- activities that promote patient-centred care.
 - accreditation standards that hospitals must meet.
 - outdated practices that are not grounded in current evidence.
 - quality improvement initiatives.

ANS: A

Organizational changes that promote systems thinking, collective accountability, and team-based care are examples of activities that promote patient-centred care.

DIF: Cognitive Level: Understand
TOP: Nursing Process: Assessment

REF: Page 27, Box 2-4

MULTIPLE RESPONSE

1. Which of the following patients would be at *greatest* risk in a health care visit? (*Select all that apply.*)
- Bruno requires an anticoagulant. He tells the nurse about his medications. He does not include an herbal supplement.
 - Glen 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 scheduled for bowel surgery. His surgeon explains about the colostomy. Later, Claude tells his wife that he really does not know what the surgeon 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 asks questions if there are doubts, concerns, or lack of understanding.

DIF: Cognitive Level: Apply
TOP: Nursing Process: Assessment

REF: Page 30