Interpersonal Relationships 9th edition Boggs Test Bank

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Chapter 02: Clarity and Safety in Communication
Boggs: Interpersonal Relationships, 9th Edition

MULTIPLE CHOICE

1. A nurse manager is teaching a group of nurses about patient safety. The nurse manager teaches the nurses that patient safety is defined as "the prevention of errors and adverse effects to patients associated with health care." What is the source of this definition?
   a. Hippocratic oath
   b. World Health Organization
   c. American Association of Colleges of Nursing
   d. American Nurses Association's Code of Ethics

   ANS: B
   The World Health Organization (WHO) defines patient safety as "the prevention of errors and adverse effects to patients associated with health care."

   DIF: Cognitive Level: Remembering TOP: Step of the Nursing Process: All Phases
   MSC: Client Needs: Management of Care

2. When conducting an in-service on serious medical errors, the nurse teaches that nearly 70% of sentinel events are related to which staff-related issue?
   a. Lack of education
   b. Inadequate resources
   c. Minimal rest periods
   d. Miscommunication

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   ANS: D
   Multiple studies have pinpointed miscommunication as a major causative agent in sentinel events, that is, errors resulting in unnecessary death and serious injury. Miscommunication is the root cause in nearly 70% of sentinel events. While the other options are error related none are as significant as miscommunication.

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3. When working on a nursing unit, the nurse recognizes that incomplete communication errors most often occur during which activity?
   a. Staff meetings
   b. The night shift
   c. A handoff procedure
   d. Medication administration

   ANS: C
   The most common cause of error is incomplete communication during the very many "handoffs" transferring responsibility for patient care to another care provider, another unit, or agency. While incomplete communication can be noted at other times, the most significant incidences occur during handoffs.

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4. A student nurse is learning about how to reduce errors and increase safety. The nursing instructor recognizes that further teaching is warranted when the student nurse makes which statement concerning standardized communication?
   a. "When communicating with patients, I will be clear."
   b. "I will be timely in my communication with patients."
   c. "I will promote communication with patients that is ambiguous."
   d. "When communicating with patients, I will ensure the patient understood."

   ANS: C
   Standardization of communication is an effective tool to avoid incomplete or misleading messages. Standardization needs to be institutionalized at the system level and implemented consistently at the staff level. Safe communication about patient care matters needs to be clear, unambiguous, timely, accurate, complete, open, and understood by the recipient to reduce errors.

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5. The nurse manager recognizes that establishing a new safety culture involves which action?
   a. Having support of effective health care teamwork
   b. Providing encouragement for the development of individualism
   c. Avoiding the discouragement of new concepts
   d. Promoting the presence of a hierarchical system

   ANS: A
   A major international effort is underway to prioritize safety goals by improving communication about patients among his or her various providers. The aim is to reduce patient mortality, decrease medical errors, and promote effective health care teamwork.

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6. A nurse attending an in-service aimed to educate staff about reporting hospital errors learns that which action should be avoided when creating a culture of safety?
   a. Creating a way to advise and compensate harmed patients
   b. Supporting care providers after adverse events
   c. Ensuring the negative consequences of disclosing errors serve as a guide
   d. Installing a nonpunitive reporting system

   ANS: C
   Many health care providers express concern about reporting errors or near miss incidents. The system needs to be redesigned to be nonpunitive if we are to create a culture of safety. A culture of safety is characterized by installing a strong, nonpunitive reporting system; supporting care providers after adverse events; and developing a method to inform and compensate patients who were harmed.

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7. When educating a newly diagnosed patient about management of diabetes mellitus, the nurse understands the importance of providing clear instructions in order to avoid which issue?

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a. Errors among the hospital staff
b. Problems with reimbursement
c. Lapses in patient care
d. Patient misunderstanding

ANS: D
It is important to make verbal and written information as simple as possible. To avoid misunderstanding on the part of the patient, it is important for information be presented information in its most simple form followed by clarification and validation.

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8. A nurse manager reminds staff that if an adverse event occurs, everyone's focus needs to be on distinguishing which of the following?
a. How industry would handle things
b. Correcting system flaws to avoid future events
c. The fact that only a tiny fraction of unsafe care incidents is reported
d. Determining what staff member(s) made the error

ANS: B
Create a new climate of safety in which agencies, policies, and employees maintain a vigilant, proactive attitude toward adverse events. Recognizing that human error occurs, everyone's focus needs to be on correcting system flaws to avoid future adverse events, rather than finding the one to blame. None of the remaining options serve to correct the problem that caused the adverse event to occur.

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9. When educating a student nurse about safety communication improvement solutions, the nursing instructor recognizes that additional teaching is warranted when the student nurse lists which of the following as a safety communication improvement solution?
a. Adopting technology-oriented tools
b. Using standardized verbal and electronic communication tools
c. Disempowering patients to be partners in safer care
d. Participating in team training communication seminars

ANS: C
Communication that promotes patient safety needs to include both communication of concise critical information and active listening. The patient should always be a part of care planning in order to assure their needs are being met. While a nurse's clinical judgment remains a valid, essential aspect of communication, other safety communication improvement solutions include using standardized verbal and electronic communications tools, participating in team-training communication seminars, adopting technology-oriented tools, and empowering patients to be partners in safer care.

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10. The nurse is teaching the student nurse about how to use SBAR when calling a primary care provider. The student nurse verbalizes a correct understanding of SBAR when making which statement?
    a. "It is used as a situational briefing."
    b. "It is utilized strictly within the hospital setting."
    c. "It is not used in e-mails due to HIPAA rules."
    d. "It is never recorded within the patient's chart.

    ANS: A
    SBAR is used as a situational briefing, so the team is "on the same page." It is used across all types of agencies, groups, and even in e-mails. SBAR simplifies verbal communication between nurses and physicians because content is presented in an expected format. Some hospitals use laminated SBAR guidelines at the telephones for nurses to use when calling physicians about changes in patient status and requests for new orders. Documenting the new order is the only part of SBAR that gets recorded.

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11. A nurse recognizes that strategies for clear, accurate communication to promote patient safety include which concept?
    a. Establishing a safe environment
    b. Maintaining a climate of closed communication
    c. Using unique interdisciplinary communication tools
    d. Using communication tools that promote vague communication

    ANS: A
    Clear, accurate communication is the bedrock of safe care. Accurate, clear communication and best practice are indicators of quality of care and serve to maintain a safe environment. None of the remaining options are accurate actions to promote patient safety.

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12. Which tool for safer care is designed to increase cognitive decision-making skills, increase technical proficiency, and enhance teamwork, including communication skills?
    a. Clinical situation simulations
    b. SBAR
    c. Checklists
    d. Team training models

    ANS: A
    The development and refinement of communication and practice skills are provided with clinical situation simulations. Students learn in a safe low-stakes simulation lab. The simulations can be low fidelity with model patients or high fidelity with computerized human patient simulators. The students can practice their communication, critical thinking and clinical judgment skills. Since the instructor is present with several students in the lab, there is a more dynamic experience than the one-on-one in clinical settings. Students should feel free to attempt assessments, get feedback and improve over time.

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13. When calling a healthcare provider, the nurse provides their name, the unit and hospital the call is being made from, the patient's name, and that the patient is having trouble breathing. The nurse is demonstrating which step in the SBAR format for communicating with a patient's primary care provider (PCP)?
    a. Situation
    b. Assessment
    c. Background
    d. Recommendation

    ANS: A
    An example of the situation component of SBAR reporting is: "Dr. Preston, this is Wendy Obi, evening nurse on 4G at St. Simeon Hospital, calling about Mr. Lakewood, who's having trouble breathing." An example of the assessment component of SBAR reporting is: "I don't hear any breath sounds in his right chest. I think he has a pneumothorax." An example of the background component of SBAR reporting is: "Kyle Lakewood, DOB 7/1/60, a 53-year-old man with chronic lung disease, admitted 12/25, who has been sliding downhill × 2 hours. Now he's acutely worse: VS heart rate 92, respiratory rate 40 with gasping, B/P 138/94, oxygenation down to 72%." An example of the recommendation component of SBAR reporting is: "I need you to see him right now. I think he needs a chest tube."

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14. The nurse is caring for a patient who is becoming increasingly short of breath. The nurse decides to call the primary care provider (PCP). What should the nurse initially do when speaking with the PCP?
    a. State the problem.
    b. Tell what is needed.
    c. State the patient's allergies.
    d. Relate the patient's background.

    ANS: A
    During the situation component of SBAR, the nurse identifies herself, the patient, and the problem. During the recommendation component of SBAR, the nurse tells what is needed. During the background component of SBAR, the nurse relates the patient's background.

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15. When communicating with a patient's primary care provider (PCP), the nurse suggests ordering a STAT chest X-ray for a patient who is experiencing dyspnea. This is an example of which component of the SBAR format for communicating with the patient's physician?
    a. Situation
    b. Assessment
    c. Background
    d. Recommendation

    ANS: D

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During the recommendation component of SBAR, the nurse states an informed suggestion for the continued care of the patient by proposing an action and stating what is needed and in what time frame it needs to be completed. During the situation component of SBAR, the nurse identifies herself, the patient, and the problem. During the assessment component of SBAR, the nurse states a conclusion that is based on what she thinks is wrong. During the background component of SBAR, the nurse relates the patient's background.

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16. When beginning the night report, the night shift nurse introduces themselves and states their role, states the patient's name, identifiers, age, sex, and location. What action should the nurse initiate next?
    a. State critical lab reports, allergies, and alerts.
    b. List current medications and the patient's family history.
    c. Talk about any anticipated changes in the plan of care.
    d. Relate the patient's chief complaint, vital signs, symptoms, and diagnosis.

    ANS: D
    According to the acronym "I PASS the BATON," the nurse should next go over the patient's assessment, including the chief complaint, vital signs, symptoms, and diagnosis. The remaining options occur later in this process.

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17. When using the acronym "I PASS the BATON," the nurse demonstrates understanding by beginning with an introduction; then stating the patient's name, identifiers, age, sex, and location; then discussing the assessment of the patient; and then talking about what information?
    a. Safety concerns related to the patient
    b. The situation, including current status
    c. A summary of the patient's medications
    d. A synopsis of the patient's psychosocial needs

    ANS: B
    After assessment, the next step using the acronym "I PASS the BATON" is situation, which includes current status, level of certainty, recent changes, and response to treatment. When using the acronym "I PASS the BATON," safety concerns come immediately after situation. A summary of the patient's current medications occurs during the background step when using the acronym "I PASS the BATON." A synopsis of the patient's psychosocial needs is not part of the acronym "I PASS the BATON."

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MULTIPLE RESPONSE

1. When educating staff about how to reduce errors and increase safety, the nurse manager emphasizes the importance of which communication characteristics? (*Select all that apply.*)
    a. Clarity

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b. Vagueness
c. Timeliness
d. Accuracy
e. Completeness

ANS: A, C, D, E
Changes in communication to reduce errors and increase safety need to be institutionalized at the system level and implemented consistently at the staff level. Safe communication about patient care matters needs to be clear, unambiguous, timely, accurate, complete, open, and understood by the recipient to reduce errors. Safe communication about patient matters should be clear, not vague.

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2. The nurse manager is educating the unit staff about ways to promote safer clinical practice. The nurse manager emphasizes that this can be done through the incorporation of which concepts? (*Select all that apply.*)
a. Correlation
b. Cooperation
c. Collaboration
d. Cultural sensitivity
e. Communication clarity

ANS: B, C
Beyond individual changes to create safer climates for our patients, we need to advocate for organizational system changes. Leadership is needed to incorporate the "3 Cs," which promote safer clinical practice through communication clarity, collaboration, and cooperation.

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