

Good potential liability for the advanced practice nurse essay example

[Experience](#), [Failure](#)



Introduction

Nurse practitioners are following the higher professional standards. It indicates that all nurse practitioners are responsible for their actions and are accountable for malpractice. Legislation that regulates the practice of nurse practitioners varies from different states. It differs in opinions among nurses, physicians, or legislators account for the inconsistencies. The core objectives of the health care professions especially the nurse practitioners are to deliver safety of the patients, effective health care, and cost-efficient health care. Nurse practitioners play a vital role in achieving the objectives. Failures of delivering the proper health care to the clients result to accountability or liability.

Failure to follow standards of care

The standards of care to many nurse-focused or patient-focused actions are changing yearly or even monthly. Nurses are aware that things happened in the workplace such as the failure to institute a fall protocol; failure to follow the proper procedure for a specific skill by providing medications. In addition, the failure to apply or use equipment in a responsible way existed. The failure to use the equipment is a breach, however, not always a clear cut. For example, a nurse decides to use equipment that is not completely familiar with or has not been trained to use adequately, if misused and harmed the patient, the nurse is in legal jeopardy.

Failure to communicate

A poor communication existed between a physician and a nurse or other healthcare providers and a nurse, or a patient and a nurse. For example, a nurse failed to communicate to the physician all the important data of the patient, the important discharge information to the patient, and the assessment findings to the nurse for the oncoming shift. The act of failure to communicate contributes or causes to failure to rescue that result to the death of the patient. If the information or conversation is not well-documented, communication failure is not easy to discover in the discovery processes in gathering evidences both the defendant and the plaintiff or others involved in the case. For proper protection, a nurse should document everything in a patient chart especially the conversation related to the patient care. However, in some cases like disagreement about care, the documentation should be in the reporting system chain of command and not in the patient chart.

Failure to document

If information has no documentation, it means that it is no actions, and this kind of statement is the stand in the court. It is difficult to formulate things or facts of an undocumented event related to the patient care. The lack of documentation results to nursing intervention. For example, a nurse administered a medication dose but failed to document the act and a co-nurse administered the same dose properly. The failure to document results to the risk of the patient such as injury from an excessive dose. Nurses should document all the information of the patient, the findings of the

evaluation, and some interventions. Proper documentation promotes excellent care and substantial care for any legal actions.

Failure to provide a safe environment

It is necessary to provide the patient a safe environment for extended safety. It commonly happened when the condition of the patient is very vulnerable to environment distraction in the area. The failure to perform this simple but sensitive condition results to serious attention. A nurse is responsible for providing extensive care for the patients; every patient has a fundamental right to stay in a safe environment or area. Traumatic or fatal accidents may occur if the place where the patient stays is unsafe. There should be important safety measure for the safety of the patients. One of the legal requirements of the facility is to provide the patients the suitable environment to avoid injury or accidents to happen anytime, anywhere.

Failure to report change in patient condition

A nurse who works at night shift is responsible for reporting all the findings in the change-of-shift report to the nurse who works at day shift and vice versa. The condition of the patient should be well-monitored and reported properly. It is the duty of the nurses to the patient to provide care, and they are required to report any changes in the condition of the patient to the physician. If any conditions or changes of the patient anytime of the day reported immediately, an immediate intervention or preventive care is immediately performed, and serious conditions that may harm the patient is prevented.

Failure to assess and monitor

The proper frequencies to determine the patients' assessment and proper monitoring is one of the things nurses are being judged. It could be the policy of a facility or the standard written documents that specify how often to assess the patient. Commonly, the failure to assess and to monitor a patient demonstrates critical opinions from nursing experts. There is a standard for a reasonable care, at times ordinary; however, prudent nurses performed similarly in the same situation. For example, how long a nurse waits to check the patient's heart beat if the previous heart rate assessment was 160 bpm? Is it necessary for the attending nurse to check the vital signs and the heart rate? Are there other assessments necessary to determine the cause and effect of the rapid heart rate? These are only few of the nursing judgments a nurse should perform based on training, understanding of nursing care, and experience. To simply follow the protocol or order from a physician to assess or obtain the vital sign every-after 4 hours is not enough to do. If the condition of the patient needs frequent monitoring or assessment, the attending nurse is responsible to provide extra care, report some abnormalities, and document the findings.

Failure to act as a patient advocate

In malpractice suits, the failure to act as a patient advocate is common. The advocacy toward the patients relates to challenging the order of a physician. The physician challenges involve respiratory management, medications, discharge decisions, and other aspects of the patient care. In addition, it involves a request to move the patient to other unit or another facility that

the patient would be able to receive optimal care accordingly. If a nurse thinks that the order harms the patient, the best thing a nurse do is to discuss the matter with the physician properly. If the discussion is not being resolved the nurse's concern, the chain of command will deal on the issue as the nursing hierarchy facility. In addition, the charge nurse or unit manager handles the issue beforehand.

Conclusion

The role of the advance practice nurse has developed strongly for years in terms of standard implementation and it grows and expands continually on its autonomy in the professional arena. Every decision made among nurse practitioners were associated with care rendered to patients regardless any changes involved. The nurse practitioners offered many services to different areas covered by the organization. It delivers free standing clinic, primary care in malls, or in association of group of physicians, or making rounds in the nursing homes or hospitals. Quality services are offered to keep the current practice areas to a continued education, research, and clinical involvement in the respective specialties of advanced nurse practitioners. A thorough study of the standards of care is necessary for the nurse practitioners to understand every detail to avoid serious liabilities. The regulatory and legal obligations of their practice area are well-monitored to continually deliver quality services and health care to the patients.

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