

Dec paper

Health & Medicine, Nursing



DEC PAPER The health need of the populace always remain a key issue in ensuring the total wellbeing of people. But to do this well, it is important that there is the presence of a well equipped human resource and personnel to execute the basic requirements for refined healthcare provision. It is for this reason that there are always attempts to ensure that nursing officers become well trained with professional competences to go about their works. Currently, debates continue to be waged as to what the minimum requirement for a professional nurse should be. In the mean time, Associate Degree Nursing (ADN) and Bachelor of Science in Nursing (BSN) are all accepted as qualifications for people to be accepted as nursing personnel (Cravens and Zweig, 2000). But indeed because these two groups of person receive different training, it is expected that they would exhibit different characteristics in the application of Differentiated Essential Competencies (DEC). For the given situation, reference can be made to the Patient Safety Advocate as a component of the Differentiated Essential Competences to describe how an ADN nurse and BSN prepared nurse would have behaved or would have been expected to conduct themselves differently in the given event. Firstly, as part of the Patient Safety Advocate, the very first requirement for the nurse is to demonstrate knowledge of the nursing practice Act. Between ADN nurse and BSN prepared nurse therefore, it is expected that both would have foreknowledge of the Acts but in terms of its detail and scrutiny, the BSN prepared nurse would have an upper hand because it is part of the requirements of their curriculum to go beyond the introductory stages of knowledge of the Act (Moy and Wein, 2007).). Secondly, there is an endeavor for the nurses to put their knowledge into

practice by implementing environmentally friendly measures that enhance quality and safety for patients. In this context therefore, it is expected that the BSN prepared nurse would make material equipment available for the old patient to ensure that the patient does not have any doubt of having his safety secured. The BSN nurse would on the other hand be expected to take preventive measures by ensuring that materials available that could pose any safety threats are eliminated. Another critical area of the differentiated essential competences (DEC) has to do with the formulation of goals and outcomes that are not abstracted but are based on evidence and empirical data. For the given situation therefore, it is expected that the nurses involved, be they BSN prepared nurses or ADN nurses would have the cognizance to rely on previous experiences and happening as useful data for predicting what the next line of action was going to be. In most hospital scenarios as such as the one given in the situation, evidence-based data cannot be collected right at the hand of an event. To this end, it is always important to have the skills of using previous experiences as useful primary data for knowing what the effects of certain actions are going to be like. Comparing the BSN prepared nurse and ADN nurses in the situation therefore, it is expected that they would both have showed the same level of competence in relying on previous experiences to know that the elderly patient was going to be at further risk as a result of their negligence. Adding up to this, the differentiated essential competences (DEC) also touches on the delegation of powers. In the given situation, it is only best expected that as nurses, as considering the severity of the issue at hand, the nurses would not stick to the need to delegate their powers but would have continued to

carry out their mandatory roles all by themselves. On the need to obtain instructions, supervision and training, it is expected that the BSN prepared nurse would be able to work under more avenue of freedom and independence than the ADN nurse. The reason for making this assertion is against the backdrop that as part of their training segments, BSN prepared nurses are trained and expected to be mentors rather than mentees (Cravens and Zweig, 2000). Their colleague ADN nurses are on the other hand expected to use the hospital as a continual refresher facility in terms of the delivery of service and care. What this implies is that even at the hospital, the ADN is expected to receive maximum supervisor, training and instructions (Gardner, 2006). Consequently, the competence issue of mandatory reporting comes to play. For the BSN prepared nurse, he is expected to make a report on his own behave whiles the ADN nurse is expected to make the reports under the guidance of his supervisor. In conclusion, for the given scenario where a case of negligence of duty is identified, a BSN prepared nurse is expected to be held more accountable in terms of adherence to Differentiated Essential Competencies (DEC) as opposed to the ADN nurse even though the latter is still expected to display great sense of independence and mastery over his role as a qualified nurse.

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