

Professional Accountability

Theories lay the foundation of the nursing profession. They offer fundamental principles and concepts providing scientific evidence applicable in nursing. The theories expand the comprehension of the meanings and values of the nursing profession. Also, they assist in understanding the position and function of nurses in a medical environment. Nursing theories assist nurses in improving care delivery, promote decision-making, and critical thinking (Arif et al., 2019). The essay will identify a theory that influences my professional values and goals. Also, it will discuss other aspects of theory application in nursing, historical nursing figures, and organizations playing a role in ensuring the delivery of safe and quality care by the nurses.

Nursing Theory

The systems theory by Martha Rogers influences my professional values and goals. The theorist perceives human beings and their environment as inseparable components. The two are one unit that should be evaluated together to understand the challenges facing a patient. Rogers presumed that both the environment and human beings change, transform, and develop simultaneously. She noted that the changes leave a lasting impact, and the entity cannot regain its former position (Aranha, 2018). Roger's systems theory identifies openness, energy fields, pan dimensionality, and pattern as the building blocks. She believed that the universe is an open system in which people interact with the environment all the time. The energy fields encompass the environment and human beings, and openness describes the exchange between the two independent entities. The pattern defines the field while pan dimensionality defines imaginary dynamic boundaries (Aranha, 2018).

Roger's systems theory concepts influence my perception and values about patients and health. I perceive patients as a wave pattern with different rhythms comprising the hormonal

levels, changing emotional states, and wake rhythms (Aranha, 2018). Also, the patient's life moves in a specific direction from birth to the point of expanded diversity. Therefore, I recognize the patient's developmental stages and associated health challenges. From a personal perspective, every patient is unique and portrays a distinct response to medication and therapy. The theory motivates me to develop goals that help patients achieve beneficial interaction with the environment. For instance, I develop care plans and patient education, empowering individuals with the know-how to survive after an illness.

Excellent Nursing Practices

Nurses provide care to a patient with diverse illnesses and from different backgrounds. The professionals apply Roger's systems theory to identify how individuals interact with the environment (Phillips, 2016). The understanding enables nurses to make effective care plans. For example, obesity is a lifestyle disorder associated with poor diet and lack of physical activity. Nurses working with obese patients apply Roger's theory to comprehend how they interact with the environment. Mostly, individuals living a sedentary lifestyle and eat processed foods are at increased risk of developing the disorder. Accordingly, nurses propose care plans that increase the consumption of healthy foods and increase physical activity to improve patient health outcomes (Phillips, 2016). Therefore, nurses apply Roger's systems theory to comprehend the role of the environment in the development of illness.

Professional Practice Nursing Theory

As a nurse caring for diverse patient populations, I develop different care plans addressing the presenting conditions. Creating effective plans requires a thorough assessment of the patient and environmental aspects that contribute to the illness. I apply Roger's systems theory to understand the exchange between the patient and his environment. Comprehension of the pattern

enables me to identify modifiable factors to enhance patient health. Subsequently, I develop interventions that promote healthy living by changing the environment. For example, I advocate for the reduction of socio-economic health inequities to promote the health of all persons.

Contributions of 19th or 20th Century historical Nursing Figures

Dorothea Dix and Virginia Avenel Henderson are the 19th and 20th-century historical nursing figures selected for this discussion. Dorothea Dix advocated for healthcare for indigenous and mentally ill populations. Her work challenged the 19th-century ideas of illness and reform. Besides, she played a critical role in recruiting nurses for the Union army during the civil war. She served as the Superintendent of Army Nurses and set standards of practice that ensured successful care delivery of the injured Union and Confederate soldiers (Norwood, 2017).

Virginia Avenel Henderson is a 20th-century nurse known to make a significant contribution in the nursing field. She created a nursing theory and described the nurses' role in healthcare. Virginia developed the Henderson Model employed as a standard for nursing practice. She worked as a public health nurse at the Henry Street Settlement in New York. She was the first full-time nursing instructor working with the Norfolk Protestant School of Nursing (Wolters Kluwer Health, Inc., 2021).

Differences in Contributions

Dorothea Dix directed her efforts towards the reform of mental health care in the United States. She advocated for states to care for the less privileged. Despite opposition by the politicians, Dorothea established asylums in Illinois, North Carolina, and New Jersey. She developed federal legislation to create a national asylum, but the bill did not pass. Dix also set the recruitment standards for nurses, having appointed more than 3000, making up 15% of the Union Army nurses (Norwood, 2017).

On the other hand, Virginia Avenel Henderson influenced the nursing process by developing the Need Theory. The theory emphasizes the role of a nurse, which is to help patients execute functions that enhance recovery and health. Her work advances the nursing process by underpinning the importance of patient independence and the provision of support when deficiencies are present (Ahtisham & Jacoline, 2015).

Description of Historical Figures

The contribution of Virginia Avenel Henderson influences my role as a nurse in various ways. First, the Need Theory impacts the care I offer to patients. For instance, I plan care depending on the individual needs of the patient. I always aim at helping the patient execute daily activities regardless of the impairment he faces. Also, I provide information to patients and families that promotes health and quick recovery during an illness.

Conversely, the work of Dorothea Dix challenges me to learn more about mental health and the challenges patients face in accessing care. Resultantly, I am very keen when performing a thorough assessment to identify cues that suggest the patient may be facing a mental problem. I make the necessary referral to ensure the client gets appropriate medical intervention and care in such a case.

State Board of Nursing versus ANA

The State Board of Nursing is an organization that regulates the nursing practice within its jurisdiction. The Boards of nursing represent individual entities that constitute the National Council of State Boards of Nursing (NurseJournal.org, 2021). On the contrary, the ANA is a body that improves the nursing profession by ensuring high standards for application in the field. Also, the organization ensures the nurses work in an ethical and safe work environment. Besides, it advances the health and well-being of the nurses (ANA, 2021).

Roles of Organizations

The State Board of Nursing roles includes initiating disciplinary action against nurses guilty of violating nursing regulations and laws. The organization initiates an investigation and issues the appropriate disciplinary action, such as losing the nursing license or a reprimand. The Board of Nursing also issues and renews licenses. Furthermore, it assesses the licensure applications to ensure the nurses have the proper education and conduct complete background checks (NurseJournal.org, 2021). The ANA advances the interests of the nurses by presenting their grievances to lawmakers for consideration in policymaking. Besides, the organizations avail the necessary resources for career development. For instance, it secures federal funding for nurse training and education (ANA, 2021).

Influence of the State Board of Nursing and ANA

The State Board of Nursing has had a significant impact on my nursing practice. The organization implements the nursing license requirements that I need to practice as a nurse. Also, it enforces the regulations that direct my scope of practice and establishes the standards that I must follow in care delivery (NurseJournal.org, 2021). Conversely, the ANA influences my practice by providing an approach to voice my concerns about the profession. The organization provides an opportunity of becoming a member of a nursing body (ANA, 2021).

Requirements for Professional License Renewal

The Nevada State Board requires all nurses to fulfill the renewal requirements for professional license renewal. An LPN/RNs must have evidence of practicing in the past five years. Also, a nurse must complete 30 hours of continuing education credits. Additionally, the professional must attend a one-time four-hour bioterrorism training. The renewal requirements differ for a CNA certificate. A professional renewing the CNA license must complete at least 40

hours of education credits in two years. Also, he is expected to complete 24 hours of continuing education credits (Nevada State Board of Nursing, 2020).

Failure to maintain License Requirements

A nurse practicing in Nevada State is at risk of prosecution because it is a criminal offense to work without a valid license. Also, it is illegal for nurses to associate with the profession without a Nevada license. The law applies to nurses performing medical procedures and inactive professionals. A nurse without a license is subject to a penalty of up to \$5,000 and one to four years in Nevada State Prison (Las Vegas Defense Group, LLC, 2021).

Compact versus non-compact State

Nurses working in a compact state require one license that enables them to practice in different states. The professionals are issued a multistate license enabling them to work in their home state and other compact states. The license covers the provision of nursing care through electronic and physical approaches. However, a nurse must be practicing as a member of the Nurse Licensure Compact (NLC) to obtain the license (National Council of State Boards of Nursing, 2016). On the other hand, nurses practicing in non-compact states must obtain different licenses for individual states. If the professional has a valid license, she only needs an endorsement to practice in another state by providing license verification from the home state. However, some states require verification from every jurisdiction a nurse has practiced (Nursinglicensure.org, 2021).

Agencies functional differences

The Food and Drug Administration (FDA) and Center for Medicare and Medicaid Services (CMS) play an essential role in ensuring the efficacy and safety of medical devices, pharmaceuticals, and healthcare services. However, they have distinct functions. The FDA

regulates the marketing and utilization of medical products in health care. The FDA requests the medical product developer to provide evidence about its efficacy and safety before it is introduced in the market. The body makes approval judgments depending on the information submitted to the marketing applications to establish the degree of effectiveness and safety of a product. The FDA also directs the design of studies focusing on the use of regulated products. Moreover, it monitors the utilization of medical products for their entire lifespan (Roginiel et al., 2018).

On the other hand, the CMS regulates payments for healthcare services and products for Medicaid and Medicare. The organization's functions entail the execution of pay-for-payment systems that enhance efficiency and quality care. Besides, the CMS encourages healthcare organizations to adopt technology such as personal health records and electronic health records to enhance prescription and disease management. The organization also promotes drug and health plan sponsors to enhance coordinated care and use advanced strategies to improve the care delivered to its beneficiaries (Roginiel et al., 2018).

Influence on Professional Practice

The FDA influences my professional practice by approving certain substances and devices employed in nursing interventions. From this perspective, I only use the approved medical substances and equipment to guarantee patient safety. Besides, it provides information I share with the patients to create awareness of the drug's adverse effects. The CMS affects my nursing profession by determining the type of medication and devices for use in treatment. It specifies payments for different services accessible to Medicaid and Medicare beneficiaries. The CMS requires healthcare professionals to recommend drugs and devices that are critical in diagnosing and treating an injury or disease. Therefore, I make treatment decisions based on whether the

patient is covered by Medicaid or Medicare or is paying for services using out-of-pocket (Roginiel et al., 2018).

Nurse's role as a Patient Advocate

Nurses play a critical role in defending patient's interests and rights. Also, the role of patient advocate includes assuring safety for vulnerable populations like illiterate, unconscious, fearful, and mentally ill patients. As an advocate, I must ensure that patient's self-determination and autonomy are upheld. In this case, the role of patient advocate when requesting alternative therapy involves providing information about the option. It is paramount for the patient to know if the alternative treatment is approved by the FDA or covered by the CMS. Also, an evaluation of the benefits and risks involved with its use will ensure patient's health is not in danger (Gerber, 2018).

Purpose of the Nurse Practice Act

The Nurse Practice Act in Nevada State provides a model for the regulation of nursing. It comprises the Nevada Administrative Codes (NAC) and Nevada Revised Statutes (NRS). The NRS statutes encompass laws implemented by the state legislator to regulate the nursing profession. The legislature gives the Board of Nursing the right to develop regulatory codes of the NAC. The codes offer specific laws about the nurse practice. The NRS specifies the scope of practice for different nurses in the state, such as nursing assistants, licensed practical nurses, and registered nurses (Havens, 2016).

Scope of Practice

The scope of practice for an RN in Nevada State entails the provision of direct patient care. The professionals report to the nurse managers. They act in different positions like a consultant, manager, staff nurse, advanced practitioner, and faculty. Other RNs' duties encompass

the provision of patient support during the transition from one setting to another, case management, care coordination, and care management (Nursinglicensure.org, 2021a).

Rules for Effective Delegation

Delegation involves transferring the role of performing a task from one professional to another while being accountable for the outcome. However, Nevada State defines delegation as the act of entrusting the execution of nursing duty to a competent and qualified professional. The state identifies the persons permitted by the law to participate in the delegation. The person must be a professional with knowledge in the area of delegation. Also, the law requires the delegation of simple tasks that do not require intensive supervision (Nevada State Board of Nursing, n.d).

Application of Nursing Roles

As a nurse taking part in various activities to enhance the well-being of patients, I assume the role of a scientist, a detective, and a manager of the healing environment in different contexts.

Detective

I execute the role of a detective by conducting investigations to discover obstacles that may hinder improved health outcomes. Also, the role of a detective expands to clinical assessments to identify concealed issues affecting a patient's health status. The role is significant when dealing with abused patients because they hide critical details about the perpetrators. It is vital to establish the reasons for keeping such a secret. Further investigations enable me to identify the proper intervention and valuable resources.

Scientist

I use the outcomes of an inquiry to advance the role of a scientist by collecting information, analyzing, and interpreting it to develop effective care interventions. I incorporate clinical judgment and evidence-based information to assess variances from the expected outcome

to manage or prevent adverse responses. I also employ evidence from the most recent research to improve patient care.

Manager of the healing environment

I perform the role of a manager of the healing environment by establishing factors that trigger stress among staff and patients. I design measures to eliminate the elements to ensure the nurses work in a conducive and supportive setting that increases performance and employee retention. The elimination of stress factors improves patient outcomes because the clients receive quality and safe care from motivated personnel.

ANA Code of Ethics Provisions

The identified code of ethics includes provision 1 and provision 3. Provision 1 mandates nurses to offer care with compassion. Also, it requires the professionals to respect the unique characteristics of patients, their worth, and dignity. Provision 3 expects nurses to advocate for and promote patients' rights, safety, and health (Gaines, 2021).

Analysis of Provisions

Provision 1 impacts my professional nursing practice by directing the way I interact with patients. In particular, I perceive each patient as an individual and try to align care goals with an individuals' cultural and spiritual beliefs. Besides, I respect a client's right to express himself to uphold his dignity and worth. Provision 3 affects the role of a patient advocate. I always make sure I advocate for interventions that will benefit the patient and cause no harm. Subsequently, the patient's right to safe care is realized to achieve improved health outcomes.

Clinical practice Error

The medical error is an example of a nursing error that could happen in clinical practice. The error involves cases of commission or omission. For instance, the first error may happen

when a nurse administers a drug that causes an allergic response in a patient. The latter occurs when a nurse fails to engage in the right action, for example, failure to limit movement in an immobile patient using safety equipment. In such an event, a patient may experience a fall resulting in extra treatment charges and deteriorating health (Rodziewicz et al., 2021).

Application of ANA Provisions

The application of provision 1 in care settings would mitigate medical error involving adverse reaction by ensuring the nurse evaluates the patient's characteristics suggesting the response. Also, provision 3 would prevent medical errors of commission and omission by ensuring the nurse's advocate for patient safety. Actions of advocacy include the satisfaction of patient demands, ensuring equitable distribution of healthcare resources, and improving patient health outcomes (Nsiah et al., 2019). In this case, the provision would have ensured that the nurses identify possible omissions or areas they fail to implement necessary interventions putting the patient at risk of harm.

Leadership Qualities or Traits

Four leadership qualities that represent excellence in nursing include effective communication, critical thinking, respect, and emotional intelligence.

Demonstration of nursing leadership qualities or traits

A leader at the bedside

Emotional intelligence is critical for a leader at the bedside because it enables the nurse to comprehend the patient's emotions. The quality enables healthcare providers to respond and control emotions by overcoming their feelings to maintain good conduct and cognition. Besides, the attribute helps a leader at the bedside to respond to the patients' emotional needs. Nurses

achieve the goal by demonstrating empathy that enhances care quality and patient satisfaction (Adams & Iseler, 2014).

Effective communication enables a leader at the bedside to share information with patients, family, friends, and other healthcare professionals. Patient care requires the collaboration of different specialists. Therefore, the bedside nurse must have communication competencies to ensure she passes clear information to other professionals and patients (Jankelová & Joniaková, 2021). Written communication is fundamental because it facilitates the transition of care from one shift to another.

Respect is a fundamental value when caring for patients as a bedside nurse (Jankelová & Joniaková, 2021). A bedside nurse demonstrates respect by following courtesy protocols such as knocking before entering a patient's room and using the correct name when addressing the client. Besides, the professionals care for different patients at the same time. In such a case, respect is portrayed by ensuring fair treatment and equality in service delivery.

Critical thinking is an essential leadership attribute that enables bedside nurses to make rational clinical decisions when facing care challenges (Jankelová & Joniaková, 2021). Also, the element enables the professional to solve problems through evidence-based approaches to enhance quality and safe care.

Within a nursing team or interdisciplinary team

Effective communication is critical within an interdisciplinary team because it promotes safe and quality care delivery. Miscommunication causes adverse effects on patients associated with faulty procedures. Effective communication ensures the group performs a thorough assessment of a patient, which discovers factors that put him at risk of developing complications during care delivery (Joseph & Huber, 2015).

Emotional intelligence facilitates teamwork as the members of the interdisciplinary team comprehend each other's feelings. Besides, the quality promotes cohesion as individuals understand how to manage emotions. Also, it enhances patient safety because the team members address conflict and focus on the task until they achieve the projected outcomes (Joseph & Huber, 2015).

The interdisciplinary team works in a dynamic environment and manages complex patient cases. Therefore, critical thinking enables professionals to handle unexpected events by making clinical decisions quickly to ensure the patient is safe. Competence is practical when a patient is not in a good state of mind to consent to treatment (Joseph & Huber, 2015). For instance, a COPD patient with exacerbation needs immediate care and a quick response from the medical team. The swift response is necessary because of the increased risk of hypercarbia and hypoxia that causes deterioration of the mental status and eventual demise without proper management.

Respect maintains a good relationship between the team members. The attribute enables professionals to act within their scope of practice. Resultantly, it prevents conflict of interest, enhances specialization, and improves patient care (Joseph & Huber, 2015).

Work Environment

Nursing leadership

My organization enhances nursing leadership through a culture of collaboration. The setting encourages all nurses to assume a leadership role in various duties. The nurse manager believes in creating future leaders and encourages everyone to excel in leading change and care. A lot of work is delegated to ensure people learn to be accountable and responsible for patient care. The transformational leadership style is dominant because most nurses participate in teamwork and contribute ideas about care planning and goal setting.

Decision making

The organization adopts centralized and decentralized methods of decision-making. The administration makes decisions about resource allocations. However, the nursing unit adopts a decentralized approach to decision making in which several leaders are responsible for making judgments concerning nursing assignments. For instance, nurse managers make decisions about a unit while nurses make decisions about individual patient care.

Professional development

The organization enhances professional development through continuous training programs. Nurses enroll in the programs to gain insight into ethical practice. Also, the organization collaborates with learning institutions to get concessions for nurses aspiring to further their education.

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