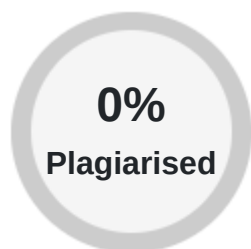


PLAGIARISM SCAN REPORT



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3 Nursing Leadership Name Institutional Affiliation One of the patient safety issues from the VCL experience is the idea is the misdiagnosis by the nurses. The availability of medication errors, misdiagnosis and miscommunication between patients and clinicians is currently affecting the delivery of quality outcomes. It is clear that a healthcare system that exposes its patients to misdiagnosis and medication errors should be examined in a critical manner. The failure to adopt patient centered approach can also contribute to patients being sent home too early before they have received care. It is evident that medication errors and misdiagnosis can also occur leading to a negative impact on how patients receive their care. The need to adopt a healthcare policy that puts patients' welfare first is key to improvements of the treatment mechanisms (Croskerry, 2020). In VCL the implementation of the patient centered care strategies would ensure that there is quality improvement to service provision according to the state, local and federal regulations. For instance, there would be improvements to clinical information systems that would help to ensure that high quality care has been provided. This would help to promote coordination of care, improved feedback and consultations, improvements to primary care, increased monitoring of patients and also improved follow up. In addition, there would be improvements to the diagnostic, availability of specialty care, and comprehensive smooth transfer to healthcare provision. Additionally, routine feedback to practice would be provided to improve the delivery of patient centered surveys, internet based feedback mechanisms so as to encourage improvement of services (Gagliardi, Dunn & Foster, A.M. et al., 2020). Transformational leadership in healthcare leads to communication improvement, patient identification and surgical developments. The implementation of strategies that advance patient centered policy can be affected by several environmental factors. It is clear that hospitals and physicians are regulated by public agencies at both the state and federal levels. These regulations can affect the implementation of this healthcare policy and practice. The pharmacists and physicians needs to be sensitized on the awareness that patients can say no especially in cases where they feel there was misdiagnosis. Taking a cultural shift is an essential approach that will improve the performance of these patients and the medical personnel. Quality outcomes can be achieved through administration of the right medicine that helps to improve patient's ability to provide quality outcomes. The other step is to ensure that the right documentation has been followed so as to improve quality outcomes. The reason is to ensure that sufficient response and right reasons have been adopted to improve care and quality outcomes. This will help to advance care and ensure that quality outcomes have been achieved (Croskerry, 2020). The surgeon can create ethical leadership by engaging in sportsmanship an improving the relationship of the sport to virtue based on the events that have occurred throughout the sports building levels. This will help to advance the way in which players act while at the same time encouraging the performance of the sport. The surgeon can create ethical leadership through the sport by defining and aligning team values that needs to be respected by everyone in the sport. This would encourage mutual engagement and interaction throughout the sporting activities. The other strategy for the surgeon to adopt is to create an open communication platform that would help players to engage on personal issues that affect them. The surgeon also needs to be the role model for the players in terms of promoting actions that improve equality and sportsmanship. Leading by examining gives the players the chance to evaluate their moral values, which is key to the improvement of their values and action References Croskerry, P. (2020). The cognitive autopsy: A root cause analysis of medical decision making. New York, NY John Wiley Gagliardi, A.R., Dunn, S., & Foster, A.M. et al. (2020). Is patient-centered care for women a priority for policy-makers? Content analysis of government policies. Health Res Policy Sys 18, 23 <https://doi.org/10.1186/s12961-020-0533-z> Santana, M. Quan, H., & Lu, M. et al. (2018). How to practice person-centred car. 21(2), 429–440. <https://doi.org/10.1111/hex.12640>

