

NURS FPX 8010 Assessment 1

Political Landscape Analysis

Coordination of stakeholder and agency interests forms the basis of political analysis of public health hospitals. Health policies and regulations at the local, state, and federal levels contribute to the health space, either directly or indirectly. Local governments and community leaders are usually in charge of even funding allocation and they attend as a way of gauging support. Physicians and their associations promote policies affecting capitalization, employee development, and patient care (Garcia et al., 2021). Knowing the workings of payers and insurance companies is an instrumental factor for financial stability as they hold key positions on reimbursement rates and regulatory policies (Brown, 2022). Keep in mind that cooperating with as well as rivaling with other providers for improving service and resource use must be done thoroughly (Miller and Wilson, 2023). The business values and return to investors are affected in terms of holding the capital or long-term and in handling media and public image. Ethical and legal considerations form the basis of all disciplines that ensure everybody complies with and foregrounds ethics in the healthcare system (Taylor, 2024). The political context is the key to comprehending and working with the public hospital system to solve problems, take opportunities, and provide health for the public.

Formal and Informal Lines of Power

The main scenes of the painting were shot with the chief medical officer (CMO), who much likely the best recruit of them who carried out their duties and was just a junior in rank, looked like a lieutenant in the picture. Under the chief physician, the Advanced Care Practitioner Manager (APRN) manager is responsible for directing the particular working area where a departmental application includes at least one station for its implementation (Johnson & Smith, 2020). To construct a great integration plan that conforms with all the department's policies and procedures, this must be considered. Specifically, about the RNAPH, one intention is to have the same fees for the medical personnel to support the execution of the organization's objectives. The scenario will develop the concept of what the party should be and what they would like to see at the end of the day. Medical commissioners would face an additional challenge, which is the autonomy of decisions in the clinical field as the trend goes to independence that is more patient and doctor autonomy during medical encounters the second role of the advanced practice registered nurses. On the other hand, the monitoring committee plays an important role in the organization that will only be mobilized at its headquarters. This case was like no other and was anticipated to be monitored alone however it led to the trend of reinventing advanced practice registered nurse (APRN) marketing. The government used or adopted the new regulations and required or enforced them in many fields. for example: If the proposal for the

chief nursing officer (CNO) is to be implemented people need to understand it and they need to be presented with the concept before they say anything negative about it.

Organizational Power Influences on Executive-Level Decision-Making for NURS FPX 8010 Assessment 1

This will have the most influence on the decision-making of the administration, especially in seeking the transfer of any of their Advanced Practice Nurses (APRNs) working under the nursing department, since this will be to a medical crew, then under the headship of the office of the Chief Medical Officer (CMO). The job of the Chief Medical Officer (CMO), together with a higher salary and social grade, has been put to a halt to act like a leader who is bound by duty (Smith & Johnson, 2020). Another tacit assumption underlying the group proposals is the goal of maintaining a base of Advanced Practice Nurses (APRN) leaders within the community, which could signal some assumptions about the nature of practice and professional excellence. Chief Medical Officers (CMOs) may believe that interfering with integrated or inculcated APRNs in physician-led teams would enhance teamwork and prove useful to patient care (Garcia et al., 2021). This leaves the issue of why such unique abilities and perspectives constitute a part of nursing leadership added to the large share of oversight among the caretakers undescribed.

Besides, APRN hospital privileges are also determined by membership in an available hospital support group and by the available hospital institutional grade. Easily, this rises to an overshooting amount if APRN gives the thought, and physician leaders are the same, who has to say on the nursing staff, however self-employed the APRNs are or have control over, including this power? (Chen and Patel, 2019.). An assumption and practice that will be corrected for the clinical integrity of the APRNs and organizational health of the new CNO will be to work near the APRNs, and nursing team, on advocacy, and communication, on increased pressure and collaboration for making decisions by the administrative leadership. Critical steps in the management of such complex situations include regulating agencies, legal experts in the process of protecting the rights of APRNs, and compliance with national laws (Williams et al., 2021). In this manner, the auditors may assist organizational leadership in making the practice of transparency and fairness, through valuing diversity, take a more ennobling front for unity by surfacing and contesting these assumptions located at the extreme nuclei of decision-making (Brown, 2022). In doing so, it would be keenly felt in the potential power of an organization to be a leader and to focus on setting out to achieve the goals of the organization, while at the same time, bringing happiness and growth to every employee.

The Impact of Power on Organizational Policy

The case demonstrates a strong power within the walls of public hospitals, related to policies within the institution. History of place displays the hospital system acting in the stead of the physician within the culture giving all key inputs for a physician to choose possible options, formulate a bespoke policy, and use the plan. This will be through the position of the Chief Medical Officer (CMO) and the respect he commands and shows to the community through hands-on collaboration of beneficial programs, e.g. participation in orthopedic programs (Smith & Johnson, 2020). The Chief Nursing Officer's (CNO) revenue and performance indicate there is deep proof of leadership in strong support of leadership in patient care. Meanwhile, over the years, conditions in the nursing profession are filled with numerous problems but are boosting their confidence. This may be seen in most hospitals as allowing and enabling most of the hospitals to acquire motivating formatting necessities. The new directions point out that all have to lead towards cooperative and all-inclusive health.

Recent living standards further explain the impact of energy on corporate policy. The proposal to transfer Advanced Practice Registered Nurses (APRNs) to a clinical team led by the Chief Medical Officer (CMO) reflects the consolidation of authority within the Department of Medicine. The proposal faced opposition from Advanced Practice Registered Nurses (APRNs) who expressed concerns about the potential loss of autonomy, practice, and outcomes of moving to the hospital group (Garcia et al., 2021). The Chief Medical Officer (CMO) proposed bonus models as both an incentive for Advanced Practice Registered Nurses (APRNs) to qualify for physician residencies and as an intervention to encourage (APRNs) to accept the change. Additionally, illegal claims to deny hospital Advanced Practice Registered Nurses (APRN) rights in hospital membership groups further demonstrate the influence of organizational power.

Sources of Power Importance of

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In the community hospital setting, with the given management policy, the Magnet re-election goals and promoting a more caring environment can be achieved through shared governance that helps support frontline providers, which includes nurse practitioners. Advanced Practice Registered Nurses (APRNs) in participation toward the processes of decision-making for patient care development, and policies and plans for quality improvement (Hess, 2020). End of content into bold. Coordinated, harmonized, woers, wonderful, available, End of content in bold. Corporate cleaning further interweaves ethical standards of promoting independence and transparency as well as accountability in corporate decision-making (Dyess and Sherman, 2019). Corporate governance in a hospital must also respect and value the experience and

contribution of a health professional independent of the position in the hierarchy and work towards the creation of an environment with partnership and collaboration.

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Research has shown that organizations with integrated health systems exhibit high levels of employee job satisfaction, engagement, and quality outcomes of care for patients (Hess, 2020). On this note, empowering and delegating decisions downward toward attending physicians or Advanced Practice Registered Nurses (APRNs) will take an organization's course toward the accomplishment of set objectives. In addition, the democratization of leadership in participative management denotes fairness, justice, and participation in decision-making by all members (Dyess and Sherman, 2019). In this model of management, people really guarantee the sharing of power equally such that it cannot be abused by relevant members or misapplied by individuals in power within the organization.

Conclusion

In NURS FPX 8010 Assessment 1, the transfer of Advanced Practice Registered Nurses (APRNs) from organizations to hospital teams has been associated with a development characterized by ethical and organizational turbulences related to the consignment. The offered incentives from Chief Medical Officers (CMOs) look catchy, but they do not capture the potential impacts the transferred Advanced Practice Registered Nurses (APRNs) will have on the Advanced Practice Registered Nurses (APRN) scope of practice and the balance of work-life. By supporting the interests of Advanced Practice Registered Nurses (APRNs) in advancing measures toward management characterized by cooperation, and having shown the existing strengths and ethical considerations, organizations will lead in this transformation devoid of forgoing dedication to patients or even exposure to freedom of action.

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