Negligence and the Duty of Care

This is a case that happened in a hospital in Australia. Mrs. Jones a substantial (BMI 30) 75-year-old lady had been already hospitalized a couple of months earlier as a after effect of right sided haemorrhagic stroke. Her current hospitalization is the after effect of a infected sacral decubitus ulcer, optional to one side sided hemiparesis, caused by the stroke. The moving and taking care of appraisal in Mrs. Jones' nursing care design expected a few staff to help with exchanges from bed to seat, utilizing a walk belt also, the 'stand and turn' move. Mrs. Jones was being exchanged from her bed to a shower seat for her morning shower. This was at first finished with Mrs. Jones' nurse Robert Lane, a second year nursing student with the help of one more second year nursing students, Lisa Road, and Lisa's clinical preceptor, Jane Road (Registered Attendant; RN). Robert was then left to exchange Mrs. Jones to the restroom. While in the restroom Mrs. Jones asked that she remain to correct herself all the more easily on the shower seat, and soon thereafter she slipped and fell; resultingin superficial injuries but more importantly she sustained a fractured left hip (Staunton & Chiarella, 2008).

Corporate negligence happens when an organization neglects to play out those obligations it owes straightforwardly to a patient or to any other individual to whom an obligation may expand. On the off chance that such an obligation is ruptured and a patient is harmed because of that break, the company (e.g., doctor's facility) can be at risk for a patient's wounds under the hypothesis of corporate carelessness.

The main purpose is to determine whether there was a breach in this duty; that the standard of care of Robert, Lisa and RN Road, fell below the standard of care expected. The Bolam v Friern Hospital Management Committee (1957) (as cited in Fullbrook, 2005) case provides the test of which identifies the standard for professionals. This test was refined in the case of Rogers v Whitaker (1992) (as cited in Forrester & Griffiths, 2010) in that the appropriate standard is one that is considered proper, reasonable and proficient practice as determined by a reasonable body of medical opinion, of which applies to the provision of patient care and is determined by the level of knowledge and skill of the individual surrounding the event in question. Applying this principle to avoid a finding of negligence, it must be proven that the actions of Robert, as a second year nursing student, and Jane, were acceptable and reasonable to a body of professional opinion.

In this case, it was purely corporate negligence since, Robert knew about Mrs. Jones' mobility care plan, with the necessity being a few people were to help. Because of Mrs. Jones' left sided hemiparesis, which causes shortfalls in muscle quality, perseverance and capacity to produce torque against a heap for expanded timeframes (Signal, 2014); combined with her Body Mass Index (BMI) of 30, which is probably going to have caused adjust control requirements (Handrigan, Corbeil, Simoneau, and Teasdale, 2010), along these lines adding to the probability of a fall. Where it is realized that a man has an inability, it is normal without question that a more elevated amount of care is required (Savage, 2011). In this way, due to non-compliance of the mobility care plan and failure to call for assistance prior to mobilisation, Robert has breached his obligation of care to Mrs. Jones.

Few of Important Ethical Principles to be followed by Nursing Practitioners for providing better care to the patients are:

Conclusion:

In the above case Robert had not sought clarification of his responsibilities prior to assisting Mrs. Jones, nor would it appear that an assessment of outcomes related to decision making was considered. If Robert felt that he may not have had the required experience or education to assist Mrs. Jones alone, he would be required to consult Jane, or at the very least another RN, in order to achieve optimal care and prevent harm; thus, there was failure to demonstrate an awareness of legal consequences related to his nursing practice (NMBA, 2006; NMBA, 2008). Jane and Robert may also be negligent. RN's have a responsibility to enhance the safety of not only their patient, but the patient's family, extended network and nursing colleagues (NMBA, 2008)

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