**Case Study Analysis**

**What was the nature of building a stakeholders network?**

 A precise identification of the interested parties in any organization is very crucial. This is because they aid in ensuring that activities run smoothly and can easily deal with challenges as they arise. The medical problems experienced by the Arkansan citizens and nursing committee warranted for a stakeholder network to be established. This is because the county ranked in the bottom four when it came to the medical resources available in the region. Hence, an increased number of patients do not have the standard medical care provided for them (Robertson & Middaugh, 2014).

 The fact that other counties' had a single medical professional caring for the entire state also ensured to the need of establishing or creating a stakeholders network. The speakers’ network would make sure that the challenges encountered from various medical fields would be addressed and dealt with efficiently ensuring a recommendation to address similar challenges that could arise in other areas (Robertson & Middaugh, 2014).

Who were the crucial first players in this movement and why was their involvement essential?

  The players who first started the movement were the ArNA (Arkansan Nurses Association) who fought for the worth of the advanced practice nurses to be recognized by the organization. This is because they need to fully exercise their medical knowledge acquired during training to be health care givers. Another reason for lobbying the APN (Advanced Practice Nurses) case, is that it would lead to an increase in the number of medical professions needed to ensure that the Arkansan citizens are adequately catered for (Robertson & Middaugh, 2014).

 The standard, access, and finance of health care are of critical global concerns. A distinctive definition for the APRN (Advanced Practice Registered Nurses), roles and responsibilities are required for the clients to receive their deserved quality of medical care. This would aid in dealing with the low number of professionals to address the patients, instead of countless legislation meetings being held to no end while the sick in the community continue to suffer (Newhouse, Stanik-Hutt, White, Johantgen, Bass, Zangaro & Weiner, 2011).

**Which other experienced groups were involved? Why were those parties and not others involved?**

 Other experts that took part in the process include APNs with master degrees, members of ASBN (Arkansas State Board of Nursing), registered nurses, agents from other nursing institutions, faculty from educational centers training in APN, certified anesthetists registered nurse, midwives, clinical nursing professionals as well as nurse practitioners. These specific groups of people were critical of the program and not others because it was centered on the betterment of a particular county (Robertson & Middaugh, 2014).

**Do you see why some professions were the logical next parts of the coalition for adopting change?**

 The medical field integrates with some professions including pharmacy association, AMS (Arkansas Medical Society) and the AMB (Arkansas Medical Board). This is because all parties play a part in ensuring the welfare of the Arkansan citizens. Also taking into consideration other medical professionals opinions can lead to an establishment of new techniques and protocols ensuring that objectives of the program are achieved (Robertson & Middaugh, 2014).

**Who was most likely to oppose advanced practice nursing and why?**

 The individuals not in favor of the campaign would be the external stakeholders that would be integrated into making sure the citizens received the required medical quality standards. This is because they did not comprehend why increasing the tasks and number of APN professionals was important. Hence, they were made aware of the legislations objective ensuring they understood the severity of the problem (Robertson & Middaugh, 2014).

**How did the partnership eventually succeed through this comprehensive network?**

 By including all the systems needed by the legislation the advanced practice nurses would then be under nursing, they would be certified, and their education acknowledged nationally. This makes it possible for the APN to order selected scheduled medication to give to the patient. Hence, patients would no longer have to live in pain from a lack of drugs.

**What would you have done differently in a different practice arena?**

 In a different circumstance would have included the external shareholders in the preliminary meetings since they are also part of the solution. By doing this, all parties would understand their roles and capabilities would be utilized to the maximum in ensuring only the best care was provided for the clients.

**What does this case study tell you about building stakeholders for advancing practice?**

 The case study indicates that including different professionals in the medical field when formulating a strategy to deal with an individual problem crucial. This is because varying opinions can be addressed to come up with the best solution that creates the desired outcome, which is to ensure the patient's safety and well-being.

**What would you need to do to apply this policy to advancing roles in your healthcare setting?**

 I would ensure that a training of all medical professionals is undertaken to ensure that all practitioners understand the value of incorporating the policy to our organization. This is due to the hypocritic oath taken to ensure all clients receive a standard quality of medical care.

**Summary**

 The case study outlines the benefits of having a health legislation that fully incorporates the capabilities as well as responsibility towards the patient. It also signifies that many positive things can be achieved when individuals come together for the common good of those in society because together we stand but divided we fall.

**References**

Newhouse, R. P., Stanik-Hutt, J., White, K. M., Johantgen, M., Bass, E. B., Zangaro, G., ... & Weiner, J. P. (2011). Advanced practice nurse outcomes 1990-2008: a systematic review. *Nursing Economics*, *29*(5), 230.

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