

Unit 4: Quality Patient Care
Z-Chapter 22
ONLINE CONTENT (1 H)

Unit Objectives:

- Discuss the use of key indicators to measure performance. (2,3,7)*
- Describe the nurse's role in quality and performance improvement. (3,4,7)*
- Identify tools and processes for continuous quality improvement. (2,3)*

*Course Objectives

Quality Improvement Project

Due February 12, 2024 @ 0800 in the Z-CH # 22 dropbox

Pick one topic from the following list:

1. Improving communication about individual patients during shift change. (shift report)
2. Preventing catheter related infections, urinary or central line.
3. Preventing falls and injuries for patients within healthcare facilities.
4. Preventing pressure ulcers for patients within healthcare facilities.
5. Reducing medication errors.
6. Reducing nurse turnover rates.

Answer the following questions as it relates to the topic pick from the list above.

1. Identify problem areas (or causes) associated with the topic and prioritize each identified problem area. (List at least 3)
 - Inadequate number of staff to check on patients and turn/reposition q2hrs (short staffing)
 - Proper education in departments about pressure ulcer development and prevention of them (ex. Preventing skin breakdown by following strict turn and reposition/hygiene schedules)
 - Multiple chronic health conditions affecting patients can increase the risk of pressure ulcers (ex. Diabetes)
2. Develop solutions for each problem or cause listed. (Provide at least 3)
 - For inadequate staffing, we can increase wages or include incentives such as sign on bonuses and vacation days, utilize flexible scheduling, encouraging staff to recruit other health care professionals to work at their facility, praise the current staff you have by uplifting them and providing staff encouragement
 - For inadequate education, provide information on pressure ulcers including pathophysiology, assessments, interventions, and patient education online for staff to use and utilize, try to incorporate in house education during staff hours to talk with staff about preventing pressure ulcers, and implement the latest equipment for preventing pressure ulcers in house so EBP is utilized

- With multiple chronic health conditions, this comes back down to education which staff should know, we should teach staff with certain health conditions such as diabetes, the risk of pressure ulcers increases, educate new staff (esp. UAPs) to follow strict q2hr turn and reposition, and I would also have online education for chronic health conditions and comorbidities associated with them

3. Identify why these problems might exist.

I think the major issue being staff shortages exist due to the COVID-19 pandemic and witnessing many nurses suffer from burnout and coping with the dangerous time by leaving their positions which I cannot blame them for. I also think that many of the baby boomers are retiring, and they took up a large percentage of jobs on the market which leaves those jobs open and unfulfilled, leading to short staffing because of the large percentage of baby boomers leaving nursing. With education, I do think many new nurses receive the up-to-date information on pressure ulcers and new devices to prevent them, but many nurses in the workforce who have been there for years may not know this knowledge yet and in house education for this would help. On that note, patients with comorbidities most likely will suffer more from pressure ulcers as they are more likely to get them based on those conditions.

4. Provide a plan to improve and how to implement the plan. The plan should provide steps for improvement. The implementation should provide a timeline.

The plan for decreasing the incidence of pressure ulcers will start with staff education which will include new devices that help prevent pressure injuries in patients with lower LOC, ICU patients, surgical patients which could include pressure reducing mattresses, theraworks wipes, skin protectant ointments, and other devices. By starting with current staff, we can implement the EBP measures to reduce the incidence so when we move to hire more staff, the older staff knows how to use the equipment and trains new staff appropriately. Also, during education, I would include pathophysiology behind pressure ulcers and highlight those high-risk individuals including patients with comorbidities such as diabetes.

- Phase one: reach out to current staff about their views of pressure injuries and what they know and believe would benefit their units (do over the course of 2/3 weeks, visiting all units)
- Phase two: block out times for staff education regarding ways to prevent pressure ulcers and who is at higher risk (do over the course of 2/3 months, requiring education for all staff)
- Phase three: put out more jobs and include the hourly pay, vacation days, incentive bonuses (start when reaching out to staff in phase one)

5. How will you monitor that your plan is effective?

I will monitor the plan by sending out staff surveys evaluating effectiveness of education and materials on the units. I would check in with unit directors, charge nurses, and other managers to evaluate the effectiveness of the units with using EBP skills.

Please be prepared to share and discuss your answers in class.

In order to receive full credit (1 H class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignments not completed in its entirety by the assigned due date and time will result in missed class time.