

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)

The most common problems resulting in falls and injury include bed alarms not being activated, leaving patients unattended in bathrooms, and infrequent rounding on rooms.

2. Develop solutions for each problem or cause listed. (Provide at least 3)

Bed alarms- All bed alarms and chairs should be activated before RN/LPN/UAP leave the patient unattended. Their call light should be within reach, and they should be instructed on the proper use in case they need something.

Bathrooms- Patients should never be left unattended in the bathrooms while they are a high fall risk. Patients can lose consciousness, attempt to walk themselves back, or get up without assistance which would all result in injury to the patient.

Rounding- Most needs of patients can be met by frequent rounding by RN/LPNs. Meeting patients' needs before they become urgent reduces their chances of attempting to ambulate on their own or finding risks in room that could result in injury.

3. Identify why these problems might exist.

Staff frequently forget to reset the bed alarm after ambulating the patient or when the patient returns to the unit. The patient then attempts to get up unassisted and there is no bed alarm to alert staff. When the patient is using the bathroom, staff rely on the patient to pull the cord to notify them that the patient is finished using the restroom. However, the patient is often already standing or on the way back from the bathroom by the time staff make it to the room. Patient rounding is not communicated between RNs and LPNs effectively on the floor. All personnel are assuming that the patient has been recently seen, but the patient has not been seen by anyone in a couple of hours.

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.

Bed Alarms- Training on the use of bed alarms and how to properly set up a chair pad alarm to members of nursing , therapy, managers (At hire and then once a year) Identify which patients are high risk for falls by performing John Hopkins fall assessment tool (on admission and Q12) Set bed/chair alarms upon leaving patient's rooms (PRN) Check fall alarms to ensure they are functioning properly (Q3 months) Assign 1 coordinator per shift to round on high fall risk patients to ensure they have a bed/chair alarm set (Q6)

Bathrooms- Training on properly assisting patients to the bathroom (At hire and then once a year) Identify which patients are high risk for falls by performing John Hopkins fall assessment tool (on admission and Q12) Clear patient's room of any debris and have a clear path from the bed to the bathroom (Q4) Watch the patient sit down prior to closing the bathroom door (PRN) Wait in the patient's room for them to finish and ensure they do not stand up without assistance (PRN)

Rounding- Hourly rounding will be performed between the RN/LPN and the UAP. This will include pain assessment (when RN/LPN is rounding), personal needs such as hydrations, restroom, etc., repositioning if needed, and making sure belongings are within reach. This can be delegated by the RN/LPN to the UAP.

5. How will you monitor that your plan is effective?
Monitor for a decrease in Midas reports for injuries by using frequent rounding to meet needs and decrease in falls on the floor compared to prior months.

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.