

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

Review chapter 22 and place your answers to the following questions in the Z-Chapter 22 dropbox by 0800 on 2/10/2025.

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)
 - Improper aseptic technique (highest priority)
 - Poor handling of the central line (second priority)
 - Prolonged central line use (third priority)
2. Develop solutions for each problem or cause listed. (Provide at least 3)
 - Improper aseptic technique - Practice hand hygiene, wearing a mask during dressing changes, and using proper technique when applying sterile gloves and maintaining sterile field when doing a dressing change.
 - Poor handling - Regularly change dressings under sterile conditions, disinfecting hubs before access, and maintaining closed IV systems.
 - Prolonged use - Daily assessment of the central line, removing unnecessary lines promptly, using antimicrobial catheters when appropriate.
3. Identify why these problems might exist.
 - Improper Aseptic technique – due to lack of training or experience, time constraints, emergency situations, or non-compliance with protocols.

- Poor handling – Inconsistent adherence to hand hygiene and disinfection, high patient-to-nurse ratios, inadequate monitoring and education
 - Prolonged use – Failure to assess necessity, limited access to peripheral IV, hospital culture and protocol gaps.
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.
- Planning and training – develop and distribute central line checklists, and begin staff training on aseptic technique and best maintenance practices. The timeline for this should be 1-4 weeks.
 - Next would be to conduct random sit ins (patient allowing) in central line care. This allows for us to see any errors that a nurse may be making in regards to changing a central line dressing or performing care, and allows us to address the issue and correct it. This should be ongoing.
 - Lasting ensure timely central line removal. Central lines should be assessed daily during rounds. Encourage bedside nurses to initiate discussions about central line removal with the providers to help decrease the risk for infections. This should also be an ongoing thing that happens daily.
5. How will you monitor that your plan is effective?
- Tracking infection rates regarding central lines
 - Conduct compliance observations of the staff, to see if there have been changes.
 - Staff education and feedback to see how confident the staff is
 - Evaluate patient outcomes by checking the length of stay and mortality rates.

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.