

**Missed Infection Controlled Care: Quality Improvement**

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10/01/2021

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Quality improvement is an essential part of the healthcare profession. Quality improvement is defined as a systematic approach to monitoring and evaluating data with the end goal of continuous improvement in the quality and safety of health care systems (Houser, 2018). Quality improvement connects to the Quality and Safety Education for Nurses (QSEN) competency of quality improvement through knowledge, skills, and attitudes/behaviors that can be of use in nursing pre-licensure programs. The topic of the article selected for the quality improvement pertains to patient safety regarding the lack of infection control in the hospital setting due to individual and system errors. The subject is significant because this is an area of nursing practice that is of concern for quality healthcare and patient safety.

### **Article Summary**

*Missed infection control care and healthcare associated infections: A qualitative study* aims to dive deeper into the perceptions of missed infection control in the healthcare setting. The design of the study is a series of qualitative in-depth interviews with 11 infection control nurse experts. The findings show that nurses fail to perform standard precautions and basic care activities that limit the risk of infection. Also, institutional and cultural factors contribute to healthcare-associated infections (Bail et al., 2020). Some factors that do not limit the risk of infection are outside the nurse's control, including environmental cleanliness, ward culture, resourcing, staffing, action following audit results, and the amount of review of protocols.

### **Introduction**

The purpose of this article is to map out where missed infection control care may occur in nursing practice that could potentially lead to a hospital-acquired infection. The article is specific to patient safety because it continues to look into areas of nursing practice that could harm the patient rather than benefit them. The research began due to revealing individual and systemic failure areas related to patient safety from infection (Bail et al., 2020). Missed infection control is one of many areas of nursing that brings forth concern for patient safety.

### **Overview**

The article on missed infection control is related to the QSEN competency of quality improvement in many ways. The use of tools such as control charts and run charts are throughout the article, which is a skill in the QSEN competency of quality improvement. Also, the recognition that nursing and other health professions are part of the care of the patients aligns with the details of the article, such as nurses not being the sole performer in the creation of quality infection control (Bail et al., 2020). Lastly, the article describes approaches for changing care processes by presenting the need for teams and organizations to work together to create health standards that are to be in act.

### **Quality Improvement**

The type of care settings the quality improvement effort can be of use in includes long-term care settings, short-term care settings, and home health care settings. The study suggests stopping the attempt to blame an individual and moving towards blaming the organization. There is a need for healthcare teams and organizations to come together and build obtainable healthcare standards (Bail et al., 2020). In the pre-implementation stage, there is a need for leaders of the organization to come together to make decisions. In the intra-implementation stage, there is a need for specific guidelines put in place. In the post-implementation stage, there is a need for

more leaders to hold healthcare professionals accountable. The institution will not go through drastic financial changes related to the guidelines enforced. Patient satisfaction rates will likely increase due to the decrease in length of stay if they do not obtain an infection. Nursing satisfaction rates will likely increase due to seeing their patients improve rather than worsen. Patient and nursing safety will drastically increase due to the decreased risk for infection when staff follows all infection control care methods.

### **Application to Nursing**

The Centers for Disease Control and Prevention (CDC) offers multiple resources to prevent hospital-acquired infections. There are assessment tools and guidelines set in place to lower the rate of hospital-acquired infection. The CDC also provides information on topics that healthcare workers may need training in to provide infection control. There is information within the CDC that applies to the article discussed above.

### **Practice**

The best practice for preventing hospital-acquired infection is to perform hand hygiene. Healthcare workers may wash their hands over 100 times in a 12-hour shift, depending on their patient load (*Hand Hygiene*, 2019). Hand hygiene needs to last for at least 15 seconds after every encounter with patient contact. Hand hygiene allows for bacteria to be killed and prevents the spread of infection. Since bacteria live on our skin, nurses need to wash their hands to avoid spreading that bacteria to their patients.

### **Education**

Nurses undergo training that their employers require to prevent the transmission of disease. The CDC provides assessment tools to use when preventing infection, including handwashing, personal protective equipment, and injection safety. Training for nurses is done annually and decreases the risk for infection when taken seriously.

### **Research**

To develop better practices in preventing infection, statistics of those who develop hospital-acquired infections need to be taken. Among those who developed a hospital-acquired infection, the nurses who cared for them need to take a survey. The surveys can provide better information about modes of transmission for the infection.

### **Conclusion**

Quality Improvement improves knowledge, skills, and attitudes by using data to monitor outcomes of care processes to continuously improve the quality and safety of healthcare (QSEN, 2020). Hand hygiene is crucial in preventing hospital-acquired infection and should not be overseen as the role of the nurse. Missed care related to infection control indicates that teams and organizations need to work together to improve the quality of patient care.

## References

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