

Quality Improvement Paper

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September 9, 2022

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Quality improvement is a framework used to standardize the process of improving clinical or medical treatment purposefully and methodically. Quality improvement aims to achieve projected results, eliminate medical mistakes, decrease variance, and enhance health outcomes (Backhouse & Ogunlayi, 2020, p. 13). The chosen article intends to enhance clinical methods for diagnostic testing.

The fourth QSEN capability is quality improvement, which involves implementing evidence-based techniques to analyze patient outcomes and create and develop improvements in the healthcare delivery model. QSEN competence monitoring requires the following abilities, attitudes, and knowledge: data collecting and manipulation, patient care, critical thinking skills, and the capacity to make informed decisions (Altmiller & Hopkins-Pepe, 2019). The selected nursing practice concern will impact the diagnostic strategies utilized by prominent nursing professionals and residents for easy UTFs, such as medical tests, antibiotic selection, and quality enhancement efforts. The significance is to draw attention to the possibilities for improving how residents and nurses who work in healthcare handle patients with urinary tract infections.

Article Summary

Introduction

The Pinkerton et al. (2020) study's goals are to comprehend how residents and primary care doctors address urinary tract infections (UTIs) clinically and to identify the potential for future antibiotic stewardship programs based on the kind of provider. In particular, this study aimed to describe how prescribers identify an uncomplicated UTI and evaluate recommended medications and intervention durations (Pinkerton et al., 2020). The Pinkerton et al. (2020) article is relevant to the topic at hand since it discusses easy approaches to improve clinical skills for practitioners in managing UTIs. The article explains how healthcare practitioners can improve treatment of patients with uncomplicated UTIs by using a variety of diagnostic tests, antibiotic selection, and

quality enhancement initiatives. The article equips nurses with knowledge on better managing patients with UTIs regarding diagnostic testing and antibiotic selection. The article addresses the issues and the nursing topic of addressing UTIs.

Overview

The Pinkerton et al. (2020) article delves into how primary care physicians and residents might refine their clinical strategies for managing uncomplicated UTIs. The authors evaluate the diagnostic procedures, antibiotic options, and quality assurance programs currently in use to treat these conditions qualitatively. Additionally, they discuss the pros and cons of using each method. Finally, the article teaches nurses how to treat urinary tract infections using strategies supported by evidence and quality assurance measures (Pinkerton et al., 2020). According to QSEN competency requirements, this article aims to reduce patient risk of injury and raise knowledge among nurses and residents regarding treating UTIs. The article tackles the management of the disease while equipping the nurses with the necessary knowledge relating to the nursing topic and competency.

Quality Improvement

Nurses can implement the quality improvement effort in the in-patient care setting. The nurses should supervise the patients, especially overnight, to monitor their situation. The resource required will be equipment for diagnosis and medications such as antibiotics. The suggested change could impact the institution financially by reducing the number of diagnostic tests and antibiotics prescribed for UTIs (Pinkerton et al., 2020). However, the change can also help enhance nurses' knowledge, avoid medical errors, reduce financial impacts, and improve patient health outcomes. It could also lead to increased patient satisfaction by reducing the length of hospital stays and the number of side effects experienced by patients. Additionally, this change could increase nursing satisfaction by freeing time to focus on other aspects of patient care. Finally, this change could increase patient safety by reducing the risk of overdiagnosis and over-

treatment. The article is, therefore, ideal for tackling the nursing topic of UTI treatment and equipping nurses with the necessary knowledge to manage it.

Application to Nursing

Practice

Currently used procedures include evaluating the symptoms and giving antibiotics, encouraging the patient to urinate often, and consuming acidic drinks to prevent the replication or reproduction of bacteria. Simply evaluating the symptoms and prescribing antibiotics may be sufficient for milder cases. However, more severe cases may require additional interventions, such as encouraging the patient to urinate often and consuming acidic drinks to prevent the replication or reproduction of bacteria. The goal of treatment is to relieve the symptoms and clear the infection. The specific intervention will vary depending on the individual case, but the aim is always to clear the infection and relieve the symptoms. With proper treatment, nurses and other medical practitioners will resolve most UTI issues without any lasting complications.

Education

Educating the patient on wiping and taking prescribed medicines is part of managing UTIs. Wiping from front to back after using the restroom is one of the best ways to prevent the spread of bacteria. In addition, patients prescribed antibiotics for a UTI should take the entire course of medication, even if they feel better before finishing. Stopping the medication too early can allow the bacteria to continue to thrive and lead to a relapse of the infection. There are several different ways to educate staff on these topics. Nurses should provide formal training sessions regularly and informally, like posting information in break rooms or other common areas (Jayalakshmi & Jayaram, 2018). No matter what method is used, it is essential to ensure that all staff members are adequately educated in the correct way to prevent and treat UTIs. Ultimately, this will help to ensure that the number of UTIs among the general population remains low.

Research

Future priorities involve community health education programs for the better prevention and management of UTIs. Additionally, there is a need for more research on the benefits and harms of screening for asymptomatic bacteriuria (Jayalakshmi & Jayaram, 2018). This research should focus on populations at risk for severe consequences of urinary tract infections, such as pregnant women and those with underlying renal disease. Additionally, research is needed to compare different screening strategies, such as urine culture versus urine dipstick, to determine the most effective and efficient approach. Additional research is necessary to improve the available treatment methods and gain the depth of other treatment strategies.

Conclusion

The Pinkerton et al. (2020) article fulfills all the requirements of QSEN Competency of Quality Improvement since it involves implementing evidence-based practice, providing patient-centered care, critically evaluating data, teamwork, and collaboration. It suggests that to enhance antibiotic prescription and diagnostic testing, multimodal nursing interventions that comprise provider education, the synthesis of recommendations, and practical clinical decision support tools are required; best measures to enhance UTI management. UTI management is vital because, if ignored, the infection might become severe and lead to irreversible kidney damage if it spreads to the kidneys.

References

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