

ICU Care on Mechanical Ventilated Clients: Quality Improvement

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Quality Improvement (QI) is beneficial for the clients and to all the healthcare workers who are involved in their care. QI is one of the competencies that was released by Quality and Safety Education for Nurses (QSEN) in order to reach the goal of preparing and equipping future nurses with knowledge, skills, and attitudes (KSA) that are essential for improving quality and safety of healthcare system they work in (QSEN Institute, 2020). QI is vital in intensive units in the hospital to improve and optimize care and prevent occurring and reoccurring unwanted errors in care. This paper addresses factors that can reduce Ventilator-Associated Events (VAE), such as more extended Intensive Care Unit (ICU) and hospital stays, more days on ventilation, and higher mortality rates. Assessment of the problem and knowing the factors of the events are the crucial and initial steps in solving the problem and following the path to quality improvement in the unit.

Article Summary

The article discusses nursing interventions that can potentially reduce Ventilator-Associated Events (VAE) in ventilated patients in ICU (Sherburne et al., 2022). The article utilized surveys and brainstorming sessions to yield intra and post-implementation data that resulted in staff's lack of awareness about VAE and its triggers, lack of review, and discussion about ventilator settings (Sherburne et al., 2022). Through this research article, quality improvement in the ICU can improve and help nurses reduce VAE through knowledge, skills, and a positive attitude.

Introduction

This article is a qualitative study on factors that cause VAE and nursing implementation and how they impact the quality of care in mechanically ventilated clients (Sherburne et al., 2022). The article highlights formulated implementations, such as education on nursing intervention and strategies that can potentially decrease VAE rates (Sherburne et al., 2022). The article's primary purpose is to address the ICU's increased VAE rates and what is causing the gap in the quality of care.

Overview

The QSEN's guideline of seeking information about projects and care outcomes through skills implementation is one of the main concepts related to this study (QSEN Institute, 2020). Information on nursing interventions, such as fluid management and its desired outcome, can improve the client's condition (Sherburne et al., 2022). Like QSEN's definition of Quality improvement, this study aims to ensure safety and quality of care by improving client outcomes through shorter hospitalization, clients not needing the mechanical ventilator, and increasing the client's mortality rate. The implemented interventions result in a decrease in the trend of nursing staff's stress level.

Quality Improvement

This research article discusses strategies and implementation to decrease VAE (Sherburne et al., 2022). The pre-implementation stage involves surveys that resulted in a lack of review and communication among nurses about ventilator settings. Intra-implementation consists of nursing interventions such as daily trials for spontaneous breathing and awakening, working on early mobilization, management of fluid, transfusion threshold, giving the clients minimal sedation, and utilizing low-tidal volume (Sherburne et al., 2022). Postimplementation data were collected

just like the intra-implementation data. This quality improvement project has a significant impact on clients and healthcare staff who are involved in their care. Implementing the nursing intervention can affect the institution financially because decreasing the events of mechanical ventilation on clients can lower their hospitalization costs. Client satisfaction will increase because they get optimal care and resolution of their symptoms and increase their comfort level. ICU nurses can have mixed perceptions of the implementation because of extra learning and training needed and the addition of more tasks on top of additional documentation. On the other hand, nurses can be satisfied with their goals of ensuring that clients get the care they need. Patient safety will increase because there will be a lesser chance of VAE if the interventions are correctly utilized, and nursing safety can increase because putting into practice the suggested improvements and strategies can prevent malpractice by adhering to needed guidelines that prevent their conditions from declining.

References

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