

**Clinical Work - (Week 4) March 31, April 1 and 2 7.5 total hours**

**The Leader  
hours**

**3 total**

- **Case 4** (Quality Improvement)

**1.5 hrs**

*Stage 1*

- What do you know about quality improvement and the audit process?

Quality improvement is a systematic approach to the analysis of practice performance and efforts to improve performance. Audit process consists of planning, fieldwork, reporting and follow-up.

*Stage 2*

- What are some examples of nursing-sensitive outcomes?  
Patient satisfaction with pain management, pressure ulcers, nurse job satisfaction, patient falls
- Why is it important for staff nurses to be part of teams looking at quality improvement?  
It is important to be involved in quality improvement to understand what is going on at the unit, what areas need improvement and what behaviors need to be changed to achieve the established goals.
- Would you find a meeting like this intimidating?  
I feel like I might be confused by the lingo being used in this meeting and I don't think I would understand everything that is being discussed. I may be afraid to ask questions because I would not want to look uninformed.

*Stage 3*

- What other information do you think would be important when analyzing data about client falls?  
It would be important to include the cost that was a result of injuries related to falls. This would help illustrate the importance of reducing the risk of falls.
- What is root cause analysis?  
It is a way to determine the origin of a problem.
- Have you participated in any meetings of this kind? Discuss.  
I have participated in huddle meetings in the ED that address different issues every shift. We talked about patient satisfaction scores, falls and how well is the department doing.

*Stage 4*

- What factors do you think might contribute to an increased fall rate on a unit?  
Higher census, higher nurse-to-patient ratio, higher acuity of patients, new nurses on orientation, presence of volunteers or students on the unit

- What are some suggestions you can think of for reducing the rate on any unit?  
I think that reducing the nurse-to-patient, hiring more staff and being fully staffed at all times would greatly decrease the risk of falls.