Written Assignment 3

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Author Note

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The present healthcare system is changing at an extremely rapid pace, which makes it essential for the healthcare facilities across the country to adapt itself and achieve the goals of excellence with regard to patient safety, quality care, and performance at a fraction of the costs than before. Thus, healthcare facilities are mandated to not only achieve the desired standards of healthcare, but also deliver the standard of care promised by the system (Huber, 2014). The nurse leader that I frequently collaborate with was kind enough to share the organization quality program that she works for, along with its goals, objectives, as well as structures in an effort to improve the quality of services being offered to the masses.

# The Structure, Goals, and Quality Program at Healthcare Facility

The healthcare facility that I was working on was dedicated to quality improvement. For this purpose, it had a quality improvement department in place to aid with the matter. According to Woldegebrial, Kitaw & Beshah (2014), quality departments have existed in the system for a while at this point. However, it was only recently that the changes in the system have allowed for quality improvement, changing healthcare system for the better. The minds behind the quality improvement department are tasked with the analysis of data and report on the relevant indicators and the outcomes. The process continuously repeats itself in an effort to evaluate the required changes. The goal of these programs is to improve the quality of patient care so that patients may have access to better care.

# Methodology of Quality Care

Most quality improvement projects that are undertaken by the healthcare facility aim to improve the healthcare facility in terms of the standards maintained in the facility, the indicators of safety, the needs for opportunity and the input from the relevant staff through the performance improvement committees in place. According to Zrelak et al. (2013), nurses have a key role to play regarding both the prevention and the recognition of poor outcomes leading to improved care.

Here, the PDCA could prove to be ideal, as it is used by the healthcare facility under discussion. The “Plan, Do, Check, Act” (PDCA) model is rather effective with regards to identifying areas for improvement by coming up with an action plan and redefining the details of the plan at hand. This is followed by a process of retrieval and analysis, creation of a proposal for change and evaluation of the results corresponding with the required change at hand (Taylor et al., 2014). This is a rather effective method used for the provision of quality healthcare and aids with the provision of the required health plan for improvement of the healthcare facility.

# Nursing Input and Quality Improvement Training

Given their place in healthcare programs, it is rather common for nurses to have an input on the measures for quality improvement, which paves the way towards clinical achievements. Thus, whenever an opportunity presents itself, identified staff are most often updated in a staff meeting, computer-based education is required, reinforcement of concepts and skills training is done in a yearly eight-hour education class on unit updates, new employees are trained in a one week session (Kellogg et al., 2017). To evaluate outcomes and effectiveness the QI team member uses informatics to analyze data related to the quality indicators in question to determine whether the improvements have had an effect. This shows how effective the measures were in the first place and enables a keen understanding of the system.

# Examples of Quality Improvement Initiatives

Catheter-Associated Urinary Tract Infections (CAUTI), along with Central Line-Associated Blood Stream Infections (CLBSI) are two areas in healthcare that have been improved as a result of hospital-wide quality improvement initiatives. This quality improvement was effective in decreasing the number of admissions related to opioid-induced constipation and impaction. Furthermore, it also resulted in the generation of special NCCN guidelines to educate both the nurses and the doctors on the matter and how compliance was necessary to ensure that the system turned out to be as effective as anticipated.

Ultimately, the goal of the system is to provide quality care and continuous improvement of quality, which could possibly make the system a whole lot better than it is at present.

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