NURS-FPX6212 Assessment 1: Quality and Safety Gap Analysis

Student Name

Program Name or Degree Name (e.g., Bachelor of Science in Psychology), University

COURSE XXX: Title of Course

Instructor Name

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Quality and Safe Gap Analysis

What is the nature and extent of the problem?

Hospital-acquired infections are some of the major contributors to adverse quality and safety within my practice setting. The Centers for Disease Control and Prevention (CDC) estimates that one in every thirty-one hospitalized patients acquire hospital-associated infections daily (Chang et al., 2019). Within my practice setting, we experience about three hospital-acquired infections each day, with the most common being catheter-associated infections and central line-associated infections.

How does this problem contribute to adverse quality and safety outcomes?

As Allen et al. (2018) note, hospital-acquired infections increase the likelihood of developing disability while prolonging hospital stay, significantly impacting patient safety. Prolonged hospital stay translates to increased workload for nurses and other healthcare practitioners, which translates to overburdened, resulting in reduced staff motivation and quality of care.

What are the consequences of not addressing the problem?

The increased cost of healthcare is one of the commonest consequences of not addressing hospital-acquired infections. The CDC estimates that patients incur costs of up to ten billion dollars annually related to hospital-acquired infections (Scott et al., 2019). Loss of wages is another major consequence. A prolonged hospital stay may lead to patients being fired and consequently losing wages. Death is another major consequence, with an estimated one hundred thousand people succumbing to hospital-acquired infections annually within the United States.

What is the performance gap? How does it relate to quality and safety concerns?

Performance gap means the difference between current trends, performance within any institution, and desired performance or outcomes (Bitton et al., 2019). Currently, we experience three new hospital-acquired infections each day. The target is to have one or no infections each day. The performance gap is, therefore, two. The performance gap allows setting goals and objectives to address quality and safety concerns.

Why will your proposed changes result in improved outcomes?

The proposed changes will result in improved outcomes because the changes will be discussed by all key stakeholders involved. This will ensure everyone is on board during the formulation and implementation of changes. The changes will also focus majorly on identified areas of weakness, which will increase the likelihood of success in improving outcomes.

Which changes are most important in relation to quality safety and organizational outcomes?

As Araki (2019) points out, various patient-centered strategies can improve an organization's quality and safety outcomes. Some key strategies include care of the hospital environment, creating a safe patient environment, and formulating a simple and timely appointment schedule that translates to timely patient care. In addition, encouraging engagement between caregivers or family and health care practitioners, providing access to health information, and reducing or preventing medical record misinformation are integral in guaranteeing quality and safety outcomes.

What are your reasons or criteria for determining the order of priority? How does your rationale relate to the organization's strategic plan?

The priority order when developing strategies to improve quality and safety outcomes includes impact, inclusiveness, and improvability. Impact assesses the extent of the adverse

event. On the other hand, inclusiveness highlights the relevance of an area to a broad range of people regarding various factors. Improvability assesses the performance gap and looks at the likelihood of bridging the gap through change (Taylor et al., 2020). The organization plans to reduce the performance gap regarding hospital-acquired infections. Therefore, these criteria are in line with the organization's strategic plan.

What effects will your proposed changes have on attitudes and behaviors within your practice setting?

Proposed changes may first be met with resistance from most healthcare professionals. The attitude primarily depends on the change process and how it is implemented. It is important to note that successful change is achieved through effective leadership, supportive, and well-managed processes. Taking this into account facilitates a smooth transition phase.

As you think about the current culture in the organization, what is most complex about initiating a change?

All organizations have a culture in place that dictates how this is done. Our organization is no different. Most healthcare practitioners have years of experience under their belt, so it may be challenging to convince them to leave their old ways and adopt newer alternatives. This may be the greatest hindrance to initiating and embracing change within our care setting.

What are the defining characteristics of the culture, hierarchy, and leadership?

The culture of any organization is defined as the shared beliefs, assumptions, and values that determine the behavior of individuals within an organization. Culture is characterized mainly by the institution's expectations and goals, experiences, and values dictating the organization's day-to-day running (Rider et al., 2018). The hierarchy and leadership of any

organization are defined by fairness, humility, effective communication, good teamwork, and a sense of vision guiding toward a goal or outcome.

How might the culture or hierarchy shape either positive or negative outcomes?

Culture may impact an institution both positively or negatively. Miscommunication, barrier formation, and dysfunctional adaptation tendencies are some adverse outcomes. Developing a sound knowledge base consequently facilitates the adoption of change in the institution's culture and hierarchy. A culture and hierarchy fostering teamwork and unity make achieving success as an organization easier.

Justify necessary changes concerning your organization's functions, processes, or behaviors.

Changes necessary in reducing hospital-acquired infections include the creation of an infection control policy, provision of education regarding infection control, employing the use of gloves and other personal protective equipment (PPEs) as well as disinfection of surfaces that people come into contact with frequently (Baller et al., 2020). Change is vital since it facilitates innovation and enhances staff motivation and morale, improving quality and safety outcomes.

What is theoretical or evidence-based information supports the proposed changes?

Proper handwashing has been identified as key to reducing hospital-acquired infections. For example, a study conducted in Pakistan demonstrated a 50% lower incidence of pneumonia in households that complied with proper handwashing techniques than in those that did not (Khan et al., 2022). Proper education regarding infection control is also crucial. During a SARS outbreak in Canada, healthcare workers who developed the infection were interviewed. Only nine had received formal infection prevention training. Thirteen were unaware of the proper

technique to put on and remove PPEs, with six reusing protective equipment due to lack of training (Brondani et al., 2021).

Why are these changes necessary?

Implementing these changes is important in reducing morbidity, disability, and mortality associated with hospital-acquired infections. This translates to improved quality and safety of care and, consequently, improved patient outcomes and satisfaction. Reduced stay in hospital due to improved quality of care means there is a reduced cost of healthcare, and patients are not financially overburdened.

How will each change correct or mitigate adverse quality and safety outcomes?

Effective hand hygiene reduces the transfer of pathogens from one person to another, especially a susceptible host, reducing the occurrence of hospital-acquired infections. PPEs are a barrier between infectious agents such as bacteria and viruses from contact with surfaces such as the skin. The provision of PPEs and consequent training of healthcare workers on how to use them is critical in infection prevention and control.

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