

**Workplace Issues
and Trends
Quality Patient Care
Health Care Delivery**

Work Place Issues: Improve Quality of Care

To improve health care quality, care must be

- Safe
- Effective
- Patient-centered
- Timely
- Efficient
- Equitable

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**Work Place Issues:
Ergonomic Hazards
for Health Care Workers**

Major safety concern for employees

- Nurses at risk for musculoskeletal injuries—most common
 - Shoulder
 - Back
 - Tasks are repetitive
 - Done manually
 - Injuries associated with lifting, transferring, repositioning, and reaching
 - Rooms not set up ergonomically
 - Reduce risk of serious back injury
 - Assess patient's dependency needs/abilities
 - Decide appropriate assistive devices needed and use them correctly
 - Keep yourself fit
 - Report any injury
- Medication Systems to prevent errors

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Work Place Issues: Violence

- Being harmed by someone else at work
 - Co-workers
 - Patients
 - Families
 - Visitors
- Violence—intentional use of physical force with likelihood of causing injury or even death
- Sexual Harassment-look for policy in your hospital
- “Code White” and “Dr Strong”
 - Potentially violent situation
 - Summons trained resources

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Work Place Issues:

- Underserved Populations
 - AIDS
 - Women
 - Children
 - Elderly
 - Disabled across the life span
- Emergent Care versus Preventative Care
- Technology Advances
- On-line Resources
- National Patient Safety Goals (We will address later)

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Work Place Issues: MORE

- Impaired Nurses (Discuss more in 4th semester)
- Latex allergies
- TB exposure
- Needlestick injuries
- Disaster Plans
- Bioterrorism

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**Work Place Issues:
Impact Nurses--California
Legislature**

- Nurse-to-Patient Ratios
- BRN regulations
 - Laser
 - Botox

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Work Place Issues: Shortage of Nurses

- The most recent shortage began in 1998
- Nurses are retiring
- Wider range of career options now available to young people
- A survey found that the average RN turnover rate in U.S. hospitals was 15.5% and the vacancy rate was 13.9%

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**Work Place Issues:
Staffing Shortages**

Nurses.....

- have more options for employment
- making/receiving higher salaries, benefits, sign-on bonuses, and tuition repayment
- looking for autonomy, low nurse-patient ratios, and collaborative relationships

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**Work Place Issues:
Nursing Shortage--Solutions**

- Interactive Advertising
- Recruitment distributed to hospitals, high schools, nursing schools
- Overseas recruitment
- Improve the work environment

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**Work Place Issues: Hospital Census
Fluctuation and Staffing**

- High census/patient load
- What is the staffing? RNs? CNAs? Charge Nurse? Break Nurse?
- Patient acuity fluctuates dramatically from day to day and from season to season

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**Impact of Staffing
Patterns on the Quality of Care**

An observation:

- Patients in hospitals today ar more acutely ill than in the past, yet skill levels of nursing staff have declined leading to a rise in adverse outcomes
- Higher acuity patients have added responsibilities increasing nurse workload

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**Impact of Staffing
Patterns on the Quality of Care?**

FACT:

- Avoidable adverse outcomes such as pneumonia can raise treatment costs by up to \$28,000
- Hiring more RNs does not decrease profit
- Higher levels of nurse staffing could have positive impact on both quality of care and nurse satisfaction (AHRQ, 2004)

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Work Place Issues: Scheduling

- Possible creative solutions to prevent scheduling problems:
 - Allow nurses to self schedule (coverage)
 - On-call system
 - Policies limiting mandatory overtime and ensuring rotation
 - Incentives to encourage part-time staff to pick extra shifts
 - Develop creative shifts for high activity
 - Reward nurses for extra effort

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Work Place Issues: Scheduling

- 8 hour days 5 days a week
- 10 hour days 4 days a week
- Two 12 hour weekend shifts for 36 hours of pay

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**Challenges Facing
Healthcare**

**Challenges Facing Healthcare:
Nursing Care Delivery**

- Challenges facing health care that affect the delivery of nursing care are:
 - Reduction of costs
 - Evidence-based care
 - Shortage of health care professionals
 - Patient/workplace safety
- Consider ways to structure nursing services to improve care while reducing costs

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**CHALLENGES FACING HEALTHCARE—
Health Care Costs: How Does Managed
Care Change Reimbursement Patterns?**

- Managed Care— right care, in the right amount, by the right provider, in the right setting.
- Fee for Service
- Health Maintenance Organization (HMO)
- Preferred Provider Organization (PPO)
- Medicare
- Medical (Medicaid)

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**CHALLENGES FACING HEALTHCARE—
Strategies used to Reduce Cost: Integrated
Health Care Delivery Systems**

- An example is: Kaiser Permanente



**CHALLENGES FACING HEALTHCARE—
Strategies used to Reduce Cost:
Case Management**

- Ensures coordination of care while reducing costs
- By assessing, planning, implementing, coordinating, monitoring, and evaluating options and services to meet person’s health needs
- Effective in providing care, but not all patients need this intensity of interaction

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**CHALLENGES FACING HEALTHCARE—
Strategies used to Reduce Cost:
Case Management**

Clinical pathways

- Also known as Care Maps
- Timeline outlining when specific care given
- Categories of care/activities and interventions
- Intermediate and long-term outcomes to be achieved

Disease management

- Supports physician/patient relationship and plan of care
- Emphasizes prevention; uses evidence-based practice guidelines; empowers patients
- Evaluates clinical, humanistic, and economic outcomes—goal to improve overall health

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**CHALLENGES FACING HEALTHCARE—
Do Critical Pathways and Disease-
Management Protocols Reflect the latest and
Best Practice?**

- Replicated studies take a long time to validate
- Best Practice—teaching it and doing it

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**Models of
Health Care Delivery
or
Nursing Care Delivery**

Total Patient Care

- In 1920's, 1930's and again in 1980s--When one nurse assumes responsibilities for the complete care of a group of patients on a 1:1 basis, providing total patient care during the shift

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Team Nursing

- Groups of patients are assigned to team headed by a team leader (usually RN)
- Success of team nursing centers on good communication among team members
- Giving report is vital!

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Primary Nursing

- Nurse plans and directs care of patient over 24 hour period
- Relationship-based practice is new name for primary nursing—RN manages and coordinates patient’s care in hospital and the patient’s discharge plan

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Patient-Focused Care

- Traditional nursing interventions handled by ancillary workers under direction of RN
- Moves RNs to higher level of functioning

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Nursing Care Delivery Systems: Today

- Elevated RN role
- Client-Directed
- More awareness of assessment, teaching and expectations at various levels of care
- Technology
- Various “indicators” that drive change

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Quality Patient Care is Quality Health Care

Quality in Health Care

Quality Control is:

- Edward Deming—father of quality improvement
- Control processes by inspection to prevent errors
- Proactive approaches to prevent errors
- Monitoring processes to control errors
- Everyone’s responsibility

Standards of Quality

- Standards of nursing care (ANA)
- Accrediting group standards (JCAHO)
- Clinical practice treatment guidelines (AHRQ)
- Standards of practice (each health care agency)
- Methods to monitor quality
 - QI department receives data, analyzes trends, and recommends actions to facilitate improvement

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Quality in Health Care

- Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
 - Primary agency for hospital accreditation
 - Must meet certain quality standards to pass inspection
 - Address patient safety issues
 - Mandated continuous quality improvement

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Quality in Health Care: JCAHO

- National Patient Safety Goals?
 - Improve accuracy of patient identification
 - Improve the effectiveness of communication among caregivers
 - Improve the safety of using medications
 - Improve the safety of using infusion pumps
 - Reduce the risk of health care–associated infections
 - Accurately and completely reconcile medications across the continuum of care
 - Reduce the risk of patient harm resulting from falls

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Quality in Health Care: JCAHO

National Patient Safety Goals (NPSG)

- <http://www.jointcommission.org/patientsafety/nationalpatient-safetygoals/>

There are safety standards for many areas:
ambulatory care, assisted living, disease-specific care, hospitals, long term care etc

Examples of NPSGs that you are now aware of:

1. Improve the accuracy of patient identification
2. Improve communication among caregivers
3. Improve the safety of using medications
4. Reduce risk of falls

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Quality in Health Care: JCAHO

Publishes a Sentinel event alert monthly

- An unexpected occurrence involving death or loss of limb or function
- Sounds a warning of the need for immediate investigation and response

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**Quality in Health Care:
Monitoring Quality**

- Key indicators?
 - JCAHO mandates certain key indicators to monitor
 - Advance directives, autopsy rates, AMAs and elopement rates, blood product utilization rates, blood transfusion reaction rates, code blue rates, conscious sedation complication rates, fall rates, medication error rates, mortality rates, pain management effectiveness, restraint use, and surgical site infection rates

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**Quality in Health Care:
Monitoring Quality**

- Risk Management?
 - Investigate and categorize the root causes of events that occur in the hospital
 - Identifies all factors leading up to the error
 - Results directly impact Quality Improvement

When we write up a plan for improvement on a RN student, this is a form of “risk management”

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**Quality in Health Care:
Monitoring Quality**

Core Measures

- Acute myocardial Infarction
- Heart Failure
- Pneumonia
- Pregnancy and related conditions
- Surgical Care Improvement Project
 - Infection
 - Cardiac
 - Venous Thromboembolism Prophylaxis

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**Quality Improvement :
Monitoring Quality**

YOU
and a thoughtful days work

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