

Background: Patient safety is one of the major priorities in acute care hospitals. A large number of patient experience adverse events. Root cause analysis demonstrates that aspects of human factors such as incorrect teamwork and ineffective communication are one of the underlying characteristics of adverse events¹. Human factor research focuses on improving the work environment and the interactions between people within that particular work environment¹. Specific interventions within human factor research are aimed at improving the system. Due to pathology without a clear diagnosis, uncertain treatment and unambiguous procedures medical wards are highly complex. Therefore, to face these complex work environments clear nursing ward organizational structures, processes and collaboration between nurses and physicians are a necessary precondition for achieving high-quality patient care². In this study we used the SEIPS 2.0 model to conceptualize the intervention. Which was based on three pillars: the principles of Lean The Productive Ward, concepts of TeamsSTEPPS and Evidence Based Best Practices³⁻⁵. To evaluate patient outcomes and process statistical process control charts were used⁶.

Aim(s): The aim of this study was to evaluate nurse sensitive outcomes and serious adverse events after implementing the hospital quality improvement program.

Methods: Quantitative observational descriptive design with retrospective data-analysis. Statistical Process Control Charts were used to analyze the data. Implementation of the hospital improvement program at a medical ward took place in March and April 2018.

Results: 4884 patient records were evaluated. No statistical differences were established at the level of nurse sensitive outcomes, unexpected death and cardiac arrest. Significant improvement was found at the level of unplanned ICU admissions.

Discussion: Optimizing the organizational structure of the nursing ward shows a positive effect on unplanned ICU admissions. Due to the study design and sample size caution must be taken into account to generalize the results.

Implications and future perspectives: Further research is recommended to study the causal effect of the quality improvement program within the context medical and surgical nursing wards.

References:

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