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Chamberlain University

NR 703 Week 3 Assignment on DNP Practice Change Project

Date Submitted

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Introduction

Insufficient staffing in healthcare environments has long been acknowledged as an impediment to attaining optimal patient outcomes. Staffing shortages frequently lead to the omission of tasks, including critical preventative measures like hourly rounding. Hourly rounding is a proactive strategy in patient care that addresses prevalent requirements such as pain management, toileting, and repositioning, therefore mitigating fall risks and improving overall satisfaction. The failure to do hourly rounding regularly owing to insufficient staffing elevates the occurrence of patient falls, which continues to be a significant safety issue.

The systematic assessment and evaluation to identify gaps in current care delivery in any healthcare setting compared to the best evidence-based practice is crucial in selecting a DNP change project. A care needs assessment tool of a healthcare establishment is employed to gather the required information carefully, and to identify the impact of the population, the resources, culture, structure, and the key stakeholders of that establishment. (Zaccagnini et al., 2019). To identify weaknesses and strengths of care setting, the internal threads or gaps, and external influences considered as threads or opportunities, a need assessment tool such as a SWOT analysis tool can greatly assist the DNP project. This need assessment process will assist in identifying how attached to the establishment's culture the strengths identified, and the

weaknesses or gaps are addressed to improve the quality of care and to ensure patient care outcomes. With the accepted evidence-based practices nationally recognized by the Magnet Nursing accredited Organization and the Joint Commission known for high-quality care outcomes with national ranking in multiple services, the DNP Nurse will use the internal cultural strengths of the care setting to address the weakness identified therein.

The purpose of this simulated project change practice is to present a pragmatic and evidence-based solution to the issue of patient falls resulting from inadequate hourly rounding attributable to staffing deficiencies in a medical-surgical acute care hospital unit. The paper will examine the context of the problem, delineate the practice gap, and formulate a practice question to direct the intervention, underscoring the need to integrate healthcare practices with evidence-based standards to enhance patient safety and quality care results.

Problem

The clinical issue of patient falls arises in a medical-surgical unit of an unspecified hospital. The medical-surgical unit often oversees a varied patient demographic, comprising persons recuperating from surgical procedures, managing chronic conditions, or receiving acute interventions. This environment needs constant oversight and frequent interventions to minimize fall risks, guarantee safety, and avoid injuries and difficulties. The insufficient staffing in this unit has resulted in an inability to regularly conduct hourly rounding, a vital technique demonstrated to reduce the risk of falls.