Week 3: Discussion | The PICOT Question: A Building Block of the DNP Project PICOT Question

A well-crafted PICOT question can direct the creation of successful, evidence-based initiatives aimed at enhancing the standard of care in Critical Access Hospitals (CAHs). In order to improve patient outcomes, lower readmission rates, and shorten hospital stays, my suggested DNP practice change project focuses on improving the swing bed program by implementing a multidisciplinary care team approach.

How do patient outcomes, readmission rates, and length of stay (O) within six months (T) change when a multidisciplinary care team strategy (I) is used instead of the present standard care method (C) for patients enrolled in the swing bed program at Critical Access Hospitals (P)?

Addressing the Identified Practice Problem

For patients moving from acute care to rehabilitation prior to discharge, the swing bed program – which was created to offer post-acute care in CAHs—is essential. However, fragmented care coordination linked to longer hospital stays, greater readmission rates, and less than ideal patient outcomes presents a difficulty for many CAHs (Leung et al., 2020). Hospital resources are strained and care quality is impacted by these inefficiencies. To tackle these issues, the DNP project plans to use a multidisciplinary care team approach. To create individualized treatment plans that are in line with each patient's needs, this method brings together medical specialists from a variety of specialties, including doctors, nurses, physical therapists, case managers, and social workers (McGilton et al., 2021). Enhancing overall patient recovery, facilitating smooth care transfers, and improving coordination are the objectives. The team can evaluate patients holistically using this care paradigm, attending to their rehabilitative and social support needs in addition to their medical needs. Patients are therefore more ready for discharge, which lowers their chance of readmission and speeds up their recuperation (Han et al., 2022). The multidisciplinary team's utilization of standardized procedures guarantees that best practices are consistently implemented, which raises the standard of care even more.

Alignment of the Outcome with the Evidence-Based Intervention

The PICOT question's results—better patient outcomes, lower readmission rates, and shorter duration of stay—are in perfect agreement with the data demonstrating the effectiveness of multidisciplinary care team interventions. Better health results can result from a diverse team of healthcare experts providing patient care, according to numerous studies. According to a research by Leung et al. (2020), the swing bed program's employment of a multidisciplinary team dramatically decreased readmission rates and shortened hospital stays. The importance of coordinated and team-based care in enhancing patient outcomes was also noted by Han et al. (2022) and McGilton et al. (2021). The swing bed program's fundamental problems, which typically lack adequate care coordination, are addressed by the multidisciplinary care team approach. This strategy not only expedite scare but also enhances the promptness of interventions by guaranteeing that every team member contributes their area of expertise (Han et al., 2022). This is especially crucial for CAHs, where patient outcomes can be greatly impacted by care delays due to resource constraints. One important measure of this intervention's