The meso level leadership: care clinic improvement project



Providing high quality healthcare mirrors, the systems or processes a health organization has in place. Delivering quality health care is a combination of factors such as ensuring the needs of the patient are being satisfied in a safe environment, at the time the patient need arises and in an efficient manner. The satisfaction/quality benchmark selected for this care clinic assignment is: Decrease in the quality nursing care related to interventions provided to clients at the clinic. There were several quality care issues consistent with decreasing client satisfaction scores the past twelve months within

presented case scenarios. Concerns such as patient safety, lack of empathy, and ethical considerations were noted in each scenario throughout. In the case of safety, quality care lacked in essential steps such as basic handwashing that is key to avoid transmission of disease and as well as medication falling onto the floor and becoming contaminated and the nurse still wanting to proceed and administer. Lack of empathy was demonstrated in several instances such as the diabetic patient and his dietary concerns and the nurse becoming harsh with her comments regarding his current dietary management and then becoming dismissive by stating next time she will address further since she was so busy. The ethical deficiencies were very concerning as well since all healthcare professionals always have a duty and obligation within profession to act in an honest and ethical fashion. This assignment will include an introduction, leadership dynamics; change model; course of action; and a conclusion with a self-reflection.

Leadership Dynamics

Understanding leadership and its dynamics is essential in yielding avenues that will guide to more successful outcomes. As per Woods, there are six https://assignbuster.com/the-meso-level-leadership-care-clinic-improvementproject/

values that are essential factors that lead to quality culture within an organization. These six standards are: all members of the collaborative healthcare teams have equal value and generate techniques to change as a whole together; equilibrium amongst all staff members regardless of rank or title; Communication is essential to deliver clear, concise and specific, it must be open and honest and delivered to all members within the team equally; All parties must have equal access to data and actions; emphasize on the process of change and creating processes; highlight the importance of it is a tool to acquire knowledge and experience with the approach of team success not winnings and failures. Strategic leadership refers to a manger /leader's ability to have a vision and relay it back to others with influence. Leaders need to take on an active role. (Coursey 2013) Leadership is the foundation of strategies being successful. Leaders must have the ability effectively communicate by relaying clear and concise ideas. This ability is essential in managing a successful situation, solution, or vision. Strategic process is the planning of strategies that enable an organization to reach its goal or vision. (Paterson 2016) If the audience is not familiar with specific terms or conditions that listener would not be able to identify with or relate to the intended message and the idea is to have staff buy into the future vision of the organization. A specific strategy that is very successful in implementing change is the concept of shared governance. When staff is being heard they feel empowered, and when people feel empowered there is will take ownership of their actions and expect more from themselves and peers. Another strategy is prevention training and education (Rainford 2015)Education is an essential part of the development of staff.

The relation-based care model (RBC), was developed in 2004, with its focus on the importance of the concept of caring in the healthcare professions. It is a delivery model that stems from the idea that positive human interaction aids in better healing outcomes. According to Heering & Schub 2018, it is a six-dimensional model composed of: 1. leadership-and the ability to provide care proper to the needs as well as the ability of prioritizing the needs of patients, families, and staff; 2. teamwork- staff feel there are options and not enforcement, there is a true sense of shared governance; 3. professional nursing practice- delivering safe practices at all times based on evidence based results with concept of care in nursing being considered as the basic principal of nursing practice; 4. care delivery- putting the needs of the patient and families first at all times; 5. resources driven care-ensuring all available resources are being used to their maximum potential such as time, financial, staffing, environment and equipment; 6. outcome measure-there is consistent data taken on treatments and the outcomes which will be used to continue improving patient care. (Heering, & Schub, 2018)

Change Model

Thechange model solution/change is Edward Deming's PDSA cycle. 2 The focus of the PDSA cycle is to model for learning and change management. (Donnelly, Peter, & Kirk 2015)This PDSA model is composed of four elements. The four parts: P- plan; D-do; S-study; and A- act. 1. Plan- there are key questions to ask such as what It is also necessary to understand the base of the problem. 2. Do-in this phase the intervention is applied, and data is extrapolated to later use for evaluation. 3. Study- is the step where the data is taken reviewed and analyzed for results. 4. Act- This is the final stage https://assignbuster.com/the-meso-level-leadership-care-clinic-improvement-project/

Page 4

where the change is implemented successfully. This change model is applicable to the selected benchmark since it gives a clear structure on how to set up changes to work towards improving performance that has a direct impact on others and generate guidelines that can improve patient outcomes and satisfaction. The role of the leader to facilitate the change process is primarily to ensure successful engaging and collaborating with others. Leadership's role is to also to be proactive in forcing a broader perspective and more inclusive approach to both policy and procedure, so others feel included. Leaders must also have the ability be persuasive in subtle manner, so it is approached as options not enforcement. A specific strategy that is very successful in implementing change by leaders is the concept of shared governance and having employees help determine, implement, and take ownership of the changes that need to be made. A second successful strategy is providing training and education. Providing inservices and workshops on communication and techniques staff can learn to better support each other and relay to each other ideas that although may be different at times we can come together to negotiate a happy medium.

Course of Action

project/

The key stakeholders are the patients. The priority is patient satisfaction and how to provide improved quality care. The results are used as a tool to measure the overall quality the facility is providing since evidence-based research has proven that patient satisfaction reflects the quality of services provided. Patient satisfaction is linked to all areas of patient care such as clinical outcomes, treatments and interventions, staffing, and timely and efficient patient quality centered care. The following is the implementation of https://assignbuster.com/the-meso-level-leadership-care-clinic-improvement-

The meso level leadership: care clinic i... – Paper Example

the PDSA model for the selected benchmark of decrease in the quality nursing care related to interventions provided to clients at the clinic. 1. Plan-The first phase is to assign roles and put a team together. It includes assessing what resources are available, what more might be required, and establish a strategy and time line to begin the study. 2. D0- The do is to have team members complete tasks assigned. 3. Study- The study would be gathering the surveys collected and analyzing for trends, look for those who are not responding, and assess if the information coming back is valid and complete. 4. Act- Based on results to know if the message is resonating or is not. If it is not, go back to the drawing board and refine according to the needs of the results. What worked, what did not, and why. The change model is reflected or pertinent in the course of action for the selected benchmark since it is a clear structure to establish a plan of action and concise pathway to implementation. Another key factor is the PDSA model is based for implementation of evidence-based nursing practice solution/change because utilizing evidence-based practice models.

Conclusion

The satisfaction/quality benchmark selected for this care clinic assignment is: Decrease in the quality nursing care related to interventions provided to clients at the clinic. Two essential leadership strategies are implementing the changes with by practicing shared governance; and providing prevention training and education, A change model of solution/change that can successfully assist an organization to achieve their objective is the Edward Deming's PDSA cycle. The action plan pertaining to this is: Step one to planassessing all pertinent resources and assign roles to a team; Second, to Dohttps://assignbuster.com/the-meso-level-leadership-care-clinic-improvementproject/ assign members of the team to different tasks and bring back data and efforts to the team; third, to study- analyze results and look for patterns, trends, and establish validity of reports; and fourth, to act- implement the changes and assess if there is improvement and/or successful outcomes, and if there is no positive feedback establish further changes according to the need. Regarding self-reflection I have gained new such as keeping your staff involved and motivated takes quality leadership and the knowledge of strategic skills to ensure a pathway to enable the leader to manage to reach people and most importantly relate to them. I have also gained further insight and understanding that patient satisfaction is a direct reflection of the quality of healthcare that is delivered in an organization and nurses are essential to the coordination that delivers better patient outcomes.

References

- Coursey, J. H., Rodriguez, R. E., Dieckmann, L. S., & Austin, P. N. (2013)
). Successful implementation of policies addressing lateral violence. AORN Journal, 97(1), 101-109. doi: 10. 1016/j. aorn. 2012. 09. 010
- Donnelly, P., & Kirk, P. (2015). Use the PDSA model for effective change management. *Education For Primary Care: An Official Publication Of The Association Of Course Organisers, National Association Of GP Tutors, World Organisation Of Family Doctors , 26* (4), 279–281. Retrieved from https://chamberlainuniversity. idm. oclc. org/login? url= https://search. ebscohost. com/login. aspx? direct= true&db= mdc&AN= 26253069&site= eds-live&scope= site
- Heering, H. R. C., & Schub, T. B. (2018). Relationship-Based Caring. *CINAHL Nursing Guide*. Retrieved fromhttps://chamberlainuniversity.

idm. oclc. org/login? url= https://search. ebscohost. com/login. aspx? direct= true&db= nup&AN= T707728&site= eds-live&scope= site

- PATTERSON, A. (2016). 3D LEADERSHIP. (cover story). *TD: Talent Development*, *70* (4), 56. Retrieved fromhttps://chamberlainuniversity.
 idm. oclc. org/login? url= https://search. ebscohost. com/login. aspx?
 direct= true&db= f5h&AN= 114250769&site= eds-live&scope= site
- Rainford, W. C., Wood, S., McMullen, P. C., & Philipsen, N. D. (2015). The Disruptive Force of Lateral Violence in the Health Care Setting. Journal For Nurse Practitioners, 11(2), 157-164. doi: 10. 1016/j. nurpra. 2014. 10. 010
- Woods, J. (1998). The six values of a quality culture. Retrieved fromhttp://my. execpc. com/~jwoods/6values. htm