**Performance Improvement Initiative on Insufficient Training and Communication**

Name

University

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**Milestone Two**

***Proposed Initiative***

Employing a strong workforce in numbers and capabilities and robust work processes significantly prevents and reduces errors critical to patient safety. However, no matter how strong and well-designed these measures are, they cannot independently safeguard patient safety (Ulrich et al., 2019). Consequently, patient safety improvement requires organizational vigilance and commitments toward continuous improvements of both its workforce and work processes. Notably, adequate training and good communication among healthcare practitioners also between care professionals and patients are key requirements for high-quality care delivery. Ulrich et al. (2019) posit that sufficient training and effective communication facilitates positive patient outcomes, while lack of these critical skills among care practitioners leads to avoidable adverse patient outcomes. Several initiatives can promote training and communication in organizations such as ABC Hospital of Texas, which suffers from insufficient training and communication among its staff members. In this case, the proposed quality improvement initiative is the use of simulation-based education (SBE) as a strategy for improving training and communication skills of the staff working in the Administration Department of the ABC Hospital of Texas.

Simulation-based education entails a training approach that amplifies real experiences of expertise or employees through guided experiences. According to Griswold et al. (2018), simulation techniques such as case studies, role plays, standardized patients, mock equipment, and high-fidelity simulation that involve the use of the full practice of the environment or scenario support quality improvement in healthcare. Simulation, in this case, will be used to help health care professionals in the administration department develop critical communication and care delivery skills. The simulation-based education will be experiential, allowing the participants to explore their feelings and thoughts regarding potential barriers to their communication and care delivery abilities and provide a safe environment and tool for practicing new skills (Blackmore et al., 2018). The simulation actors will help the healthcare professionals in the selected department identify and learn from practical issues with the participants’ role-playing in the chosen scenarios to understand and promote their skills. The simulation-based education will aim to equip the participants with key skills in key areas that require continuous training for effective patient care delivery and organizational performances. The SBE initiative will help improve the patient safety standard since it will equip the selected care professionals with relevant skills and knowledge to deliver high-quality care.

***Data Determinants of Success***

Employees working in the administrative department require various skills and knowledge to enhance the delivery of quality care and patient safety (Ross, 2014). These skills will be used in determining the success of simulation-based education. The data determinants include the participants’ relationship-building and leadership skills, ethical judgment abilities, critical and quick thinking, and adaptability. Additional areas that will be assessed will be communication and teamwork skills, problem-solving, and patient care. Regardless of the form of communication channels used, it is essential for healthcare administration staff to be clear and articulate in expressing their expectations. Some of the core data that will be used to determine the success of the simulation based education on communication skills are mindfulness and self-awareness since they show not just how the participants say but also how they say it (Slyter, 2019).

On the other hand, teamwork skills will be determined by the participants’ ability and willingness to go out of the way in helping others and working effectively with their colleagues. Additionally, the project’s success will also be assessed through the participants’ ability to solve problems especially in emergency situations. Notably, healthcare administrative staff require robust problem-solving skills since urgent situations such as clinical, medical or administrative differences are likely to arise in their course of practice (Slyter, 2019). Such situations require positive thinking, creative solutions and confidence in acting quickly. Accordingly, the participants will be assessed on their ability to solve problems based on their ability to sense when a problem is likely to arise and how well they address it. Data will also be collected on the employees' ability to exchange information with and learn from their colleagues, report adverse patient events, governance, uphold data security, management skills.

***Implementation of the Plan in the Organization***

The proposed SBE intervention will focus on individual skills training relevant to the administrative department of the ABC Hospital of Texas. Each of the healthcare professionals in this department will provide each participating employee with a significant role to play with well-developed intervention outcomes. Through the simulation activities, employees at the facility will be expected to perform tasks that are key to effective patient care such as teamwork, collaboration, care delivery among others to assess their strengths, weaknesses, and training needs., They will then be assigned role-playing on case scenarios that support the development of key skills to handle each of the selected patient needs and effective care delivery. The participants will be informed of the expected training outcomes. The simulation planners will develop training schedules that will run concurrently with other routine practices in the administration department. After each simulation training session, the participants will undergo an assessment to test their success for each trained skill before proceeding to the next training aspect.

***Interdepartmental Communication Channels***

Interdepartmental communication refers to the communication or information exchange between or across various departments in an organization. The administration department is critical to an organization's functioning and success, hence a core to the organization. Hence, the training needs of the department's staff go beyond the individual unit. To assess the success of the proposed intervention, the participating employees will engage with workers from other departments to strengthen their skills. These skills include teamwork, problem-solving, relationship building, and overall patient care abilities, which are all critical in enhancing the quality of care and patient safety. For the simulation-based education, below are the communication channels that will be used for the proposed simulation intervention;

***Emails*:** will help effectively distribute information between the administration department and other departments in the organization. The emails will also be used for asking and answering questions during and after the intervention.

***Instant messaging*:** will facilitate the quick questions and information sharing and updates. It is also a good way of communication since it is time-saving.

***One-on-one meetings*:** the department heads will hold face-to-face or online conferences to share and exchange important insights relating to the simulation training and key patient care skills relevant to the employees.

**Data Interpretation Strategy**

The control charts will be used to analyze and communicate the intervention findings after a successful implementation in the organizational department of the ABC Hospital of Texas. Raghunathan et al. (2011) explain that control charts enable healthcare systems to measure the procedures and processes and determine the scope and strategies for a quality improvement initiative. In this case, the control charts will help determine the focus of the simulation-based education in all the core areas, including planning, implementation, and evaluation. The control charts are selected for this case study since they help set control limits for the intervention and provide clear guidance on necessary adjustments during the intervention (Raghunathan et al., 2011). As a result, the project implementers will not necessarily wait for the project to be complete to adjust areas that need improvement. Still, they will instead be able to rectify such areas as the project progresses.

***Effects of the Intervention on Patient Care Outcomes***

The primary objective of the proposed intervention is to ensure adequate training and communication of the healthcare worker serving in the administrative department of the ABC Hospital of Texas. Therefore, by the end of the simulation-based education, the selected workers are expected to have adequate skills and knowledge on the key aspects of effective patient care delivery and adequately communicate with patients and colleagues. Accordingly, the intervention will significantly impact patient care outcomes since the employees will have the skills to deliver quality patient care, establish teamwork and problem-solving skills, enabling them to collaboratively work with other healthcare workers within the hospital, strengthening the quality of care. Additionally, the intervention aims at promoting the employees' communication skills which are critical in the treatment processes. With the right communication skills, the employees will adequately establish robust relationships with the patients leading to patient satisfaction and safety.

Health Information System entails a system that integrates the collection of data, processing, and reporting of information relevant for the improvement of the effectiveness and efficiency of healthcare services through better management and administration at all healthcare services levels (Lintern & Motavalli, 2018). In this case, the HIS will help in the collection of data on the training needs and communication weaknesses of the targeted healthcare professionals. It will also aid in planning and implementation, monitoring the proposed intervention, analysis, and reporting the findings of the intervention to establish its success. Some of the health information systems relevant to the proposed intervention are electronic health records and CPOE systems, decision support tools, and digital sources for medical evidence Lintern & Motavali, 2018).

***Impact of the Quality Improvement Initiative on the Organization's Safety Culture***

The proposed simulation-based education will help strengthen the staff's patient care and administrative skills and knowledge in the administration department of the ABC Hospital of Texas. As a result, the initiative will enhance the workforce's ability to provide quality care and equip them with skills that help reduce or prevent medical errors critical to patient safety. The simulation-based education will allow the organization's staff to transition their acquired academic knowledge and skills into practice. This will happen through role-plating for real-world problems affecting the safety of patients and efficiency of patient care delivery. In this case, the selected healthcare professionals will undergo instructional case scenarios where they will be placed in a patient care situation defined by the simulators (Astbury et al., 2021). During the simulations, the care professionals will interact to address scenarios that resemble those handled in real patient care delivery. Therefore, it will provide a form of healthy experiential learning where the participants will acquire not just the practical skills but also the confidence to deal with various healthcare scenarios, hence enabling them to deliver quality care in their assigned duties. In the end, workers in the ABC Hospital of Texas will be equipped with different skills in handling various patient care scenarios hence developing a culture that promotes safety.

**References**

Astbury, J., Ferguson, J., Silverthorne, J., Willis, S., & Schafheutle, E. (2021). High-fidelity simulation-based education in pre-registration healthcare programs: A systematic review to inform collaborative and interprofessional best practice. *Journal of Interprofessional Care*, *35*(4), 622-632. <https://doi.org/10.1080/13561820.2020.1762551>

Blackmore, A., Kasfiki, E. V., & Purva, M. (2018). Simulation-based education to improve communication skills: a systematic review and identification of current best practice. *BMJ Simulation and Technology Enhanced Learning*, *4*(4). <http://dx.doi.org/10.1136/bmjstel-2017-000220>

Griswold, S., Fralliccardi, A., Boulet, J., Moadel, T., Franzen, D., Auerbach, M., ... & Gordon, J. A. (2018). Simulation‐based education to ensure provider competency within the health care system. *Academic Emergency Medicine*, *25*(2), 168-176. <https://doi.org/10.1111/acem.13322>

Lintern, G., & Motavalli, A. (2018). Healthcare information systems: the cognitive challenge. *BMC Medical Informatics and Decision-making*, *18*(1), 1-10. <https://doi.org/10.1186/s12911-018-0584-z>

Raghunathan, K., Al-Najjar, H., & Snavely, A. (2011). Control charts and control limits. Anesthesia & Analgesia, 112(3), 736 –7. doi: 10.1213/ANE.0b013e31820685f0

Ross, T. K. (2014). Health care quality management: Tools and applications. Somerset, NJ: John Wiley & Sons, Inc.

Slyter, K. (2019). 10 Healthcare Administration Skills You'll Need in Order to Lead. Rasmussen University. <https://www.rasmussen.edu/degrees/health-sciences/blog/healthcare-administration-skills/>

Ulrich, B., Barden, C., Cassidy, L., & Varn-Davis, N. (2019). Critical care nurse work environments 2018: findings and implications. *Critical Care Nurse*, *39*(2), 67-84. <https://doi.org/10.4037/ccn2019605>