



Performance improvement in critical care nursing to improve outcomes

Welcome to this special nursing edition of the *JECM*. This issue will focus on “Performance Improvement in Critical Care Nursing to Improve Outcomes”. I wish to express my sincere gratitude to Dr. James Gregory for the recommendation to be guest editor, it has been an honor. I wish to also thank the entire team at *JECM* for easing the process, it has been my privilege to work with this outstanding group of individuals. I would also like to thank each and every one of the authors who have contributed to this special edition. Their dedication to the project has gone above and beyond in writing, editing, and submitting their works highlighting efforts to improve outcomes in our trauma and critical care patients. The intention of this edition is to connect and share processes from across the globe, with submissions from the USA, Brazil, Mexico, and Germany. It is my hope that we can gain knowledge from each other, mentor one another, learn from our failures, and build upon our successes.

Performance Improvement in itself has been an obstacle for many institutions failing to become accredited as a Trauma Center or at least has been identified as a significant issue leading to a lesser than full accreditation status. We understand that an optimal performance improvement program involves identifying an issue, measuring the issue with concrete data, analyzing the statistics, developing a plan to improve the issue, and re-evaluating the results. But, performance improvement is a dynamic, systematic process that is ever changing in the way we interpret data, report data, implement changes, and sustain results. The question remains, how do we know we really made a difference? One way is through quality benchmark reports that reflect how a hospital is performing in comparison to other “like” hospitals. Each year we are held to higher standards as requirements change and the benchmarks are raised. This edition showcases examples of Performance Improvement initiatives that have perfected the treatment of the most severely injured patients. This special edition highlights the progression of performance improvement; where we started, where we are now, what the future holds, and how some are leading the way in identifying unique solutions. This issue explores opportunities in all populations, pediatric and adult, utilizing not only process or system changes in individual settings, but also at regional and national levels. An overview of how trauma performance improvement has evolved through the years is discussed in depth in an effort to better understand the nuances involved in an inclusive trauma performance improvement program. Some innovative practices stemming from issue identification have led to outstanding results that we can investigate and perhaps implement at our own facilities. Many of these articles also show how nursing fosters education and embraces teaching to create an environment of quality and patient safety.

Our hopes are that these articles will stimulate creativity in your own areas on how to implement novel strategies to improve the outcomes of the severely injured patient.

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