

Analyzing a Current Health Care Problem

Analyzes a current health care problem by describing the setting and context, explaining why it is important, and identifying populations affected by the issue. Uses scholarly information to support the analysis.

Explores the health care topic or [nhs fpx 4000 assessment 3 analyzing a current health care problem](#) that you selected for Assessment 2. Use the first four steps of the Socratic Problem-Solving Approach to aid your critical thinking.

Assessment 3

The aim of a health care analysis is to compare the existing health care situation with a normative standard. This can be done on different levels, such as the distribution or frequency of diseases (epidemiological area), structures and processes or the results of health care treatment/services (functional areas). Regional variations (disparities) and international comparisons are also possible in the context of a health care analysis.

Medication errors affect patient safety, cost [nhs fpx 6004 policy proposal](#) money and increase the workload for nurses, who already have a low nurse-to-patient ratio. This issue can be addressed by implementing electronic health records that reduce the number of mistakes and improving training for new nurses.

Administrative inefficiencies are a big problem in the healthcare industry. They include billing issues such as “upcoding” a procedure to receive more money from insurance providers, resulting in a tug-of-war between the provider and the insurer with consumers caught in the middle. Another major issue is medical malpractice lawsuits, which can be expensive and demoralizing for both doctors and their staff.

Assessment 4

A policy solution to a health care problem requires an understanding of the causes and consequences of the issue. This is not easy, as the industry is rife with issues that affect access to care and quality of treatment. These include an aging population that needs more medical services; localized health care provider shortages where a region lacks enough doctors or nurses to meet the need; and burnout among staff members, which reduces their ability to provide high-quality patient care.

Other problems are rooted in systemic [nhs fpx 6008 developing a business case](#) that disproportionately affect marginalized patient populations. For example, Black patients are 2.5 times more likely to have their patient behavior and history characterized negatively in EHR notes compared with White patients. Administrative inefficiencies are also problematic. For example, insurance companies may deny claims for procedures that providers “upcode,” creating a tug-of-war between the two with consumers stuck in the middle. This erodes patient trust and slows down the flow of information between the physician and the health care consumer.

Assessment 6

Health care organizations have long rested on a set of self-reinforcing elements that have produced erratic quality and unsustainable costs. These include [NR 351 Week 2 Time Management Plan Assignment](#) by specialty with independent private-practice physicians; fee-for-service payments with rampant cross-subsidies; measurement of quality that focuses on process compliance; fragmented delivery systems around medical specialties; and payment mechanisms that reward growth in volumes rather than reducing costs.

Taking on the challenge of improving value will require that these organizations abandon some of their current assumptions, particularly with regard to financial flows and incentives. This will require a radical departure from the current pursuit of narrow goals such as access to poor-quality care and maximizing profits, which are misaligned with patients' interests. Developing a business case will be [NR 393 Week 2 Milestone](#) to make sure that planned changes in care are financially viable.