Nursing System Development

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The healthcare system has significantly changed not only in the United States but also globally. This change has occurred due to several factors. At first, technology advancements have expanded the products of care in the system. More models have been introduced. The population has increased creating new demands for healthcare services and a change of patient needs towards new ones. These changes have transformed the system into the current state. Nursing care organizations have increased in number to meet the existing demand as well as provide the much-needed client needs (Masters, 2018). There has been an expansion in the system with more providers getting into the market.

For this reason, there are competing healthcare providers in the community. Patient needs have shifted from conventional quantity to quality. Clients are now looking for convenience and the quality of the services they are receiving at the providers. This shift in service needs has put the providers on the run to respond to the requirements with most of them advertising their services based on quality to reach out to more patients.

The current reimbursement models have fiscally tied healthcare providers together. For instance, new models of delivery, such as Accountable Care Organizations, link different providers based on reimbursement. For example, Medicaid coverage is paying various healthcare providers depending on the quality of services they offer to the clients. This means that the providers of different functions have to cooperate and share the payments (McWilliams, Hatfield, Chernew, Landon & Schwartz, 2016). This model and others currently being introduced compel providers to work in the delivery of the services.
Most healthcare clients currently prefer outpatient services other than inpatient service. For this reason, most providers have aligned their programs to provide outpatient services. For instance, most community clinics establish an office while all services are provided at the convenience of the patient’s home. Nurses move from home to home to check on their patients while coordination is done at the central points. This change has changed the resource structure of the provider facilities from large units with critical care and intensive care units to just coordination offices with mobile nurses. Most nursing leaders have embraced the shift from quantity to quality of nursing services. The federal government also enacted specific regulations that are focusing on offering variety. The Patient Protection and Affordable Care Act have contributed significantly to a focus on quality. The championing for quality by nursing leaders have added to a change in the compensation models for nursing (Patton, Zalon, & Ludwick, 2018). Conventionally used Fee for Service has been changed to quality-oriented reimbursement models. Due to the quest for quality services, most providers are putting more efforts to entice more patients providing better quality services. The marketing departments have established strategic programs to reach out to the communities with information about their services. Nursing leaders and the government have come out strongly to regulate healthcare marketing. Leaders in the healthcare system have become more of regulatory watchdogs championing for...
compliance. This has helped to eliminate the trading of quality of services over the competition.

One of the strategic methods being used by providers to entice clients is through community health promotion programs. For instance, some providers organize community cleaning programs and runs. During these events, they ensure their brand is visible and even give sessions about the quality of services they are offering. These enticements are convincing and helping healthcare organizations gain more clients. Standing out in the community is achieved through the delivery of the promised high quality of services.
References

