

Pressure Ulcer Prevention Program

The Problem

Patients who develop pressure ulcers while in the hospital are at greater risk for other medical problems, including infection, and can stay in the hospital longer than otherwise expected. We monitor the prevalence of pressure ulcers by conducting quarterly pressure ulcer prevalence rounds. During these rounds, all inpatients' skin is assessed from head to toe for the presence of skin breakdown. When skin breakdown is present, charts are reviewed to determine if the pressure ulcer was hospital acquired. In 2006 we joined NDNQI (National Database for Nursing Quality Indicators). By reporting this data to NDNQI, we are able to benchmark ourselves against other 500+ bed hospitals by unit type (medical units, surgical unit).

Aim/Goal

Our goal is to be in the lowest quartile of hospital acquired pressure ulcers in hospitals with > 500 beds which translates to 0% of our patients developing pressure ulcers in our hospital.

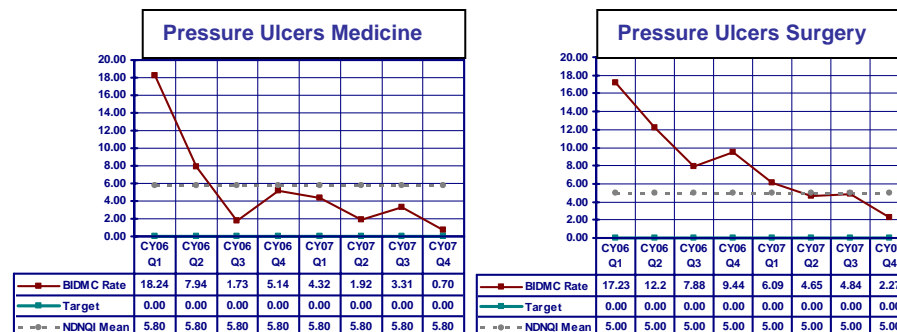
The Team

- Nursing Leadership
- Skin and Wound Care Specialists
- Skin and Wound Task Force
- SWAT Team
- Nursing Shared Governance Councils
- Healthcare Quality

The Interventions

- Revision of nursing documentation tool to:
 - Include a daily Braden Score to assess patient's risk for skin breakdown
 - Cue staff into appropriate preventative interventions based upon patient's risk factors
 - Improve day-to-day documentation of wound status
- Education of all nursing staff to new practices

The Results/Progress to Date



Lessons Learned

Pressure Ulcer prevention requires extreme vigilance. Skin must be reassessed on a continual basis to assure that early stage pressure ulcers do not advance to more advanced pressure ulcers.

Nurses need quick access to appropriate preventative measures such as therapeutic mattresses, cushions and ointments. The Wound and Skin Care Specialists have made recommendations around frequently used skin care supplies that should be stocked on all units.

It was recognized that quick, easy reference material is frequently needed on the units so in February 2008, the Wound and Skin Care Specialists rolled-out Wound Care Manuals to all clinical areas. These manuals are an excellent resource around Pressure Ulcer Prevention and Treatment.

Next Steps/What Should Happen Next:

For ongoing education, the Wound and Skin Care Specialists are conducting monthly unit-based inservices around the skin assessment, documentation and treatment of wounds. Some units are piloting programs which we anticipate will further reduce our pressure ulcer prevalence rate.

