

Implementing an evidence-based program to prevent hospital acquired pressure ulcers

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Background

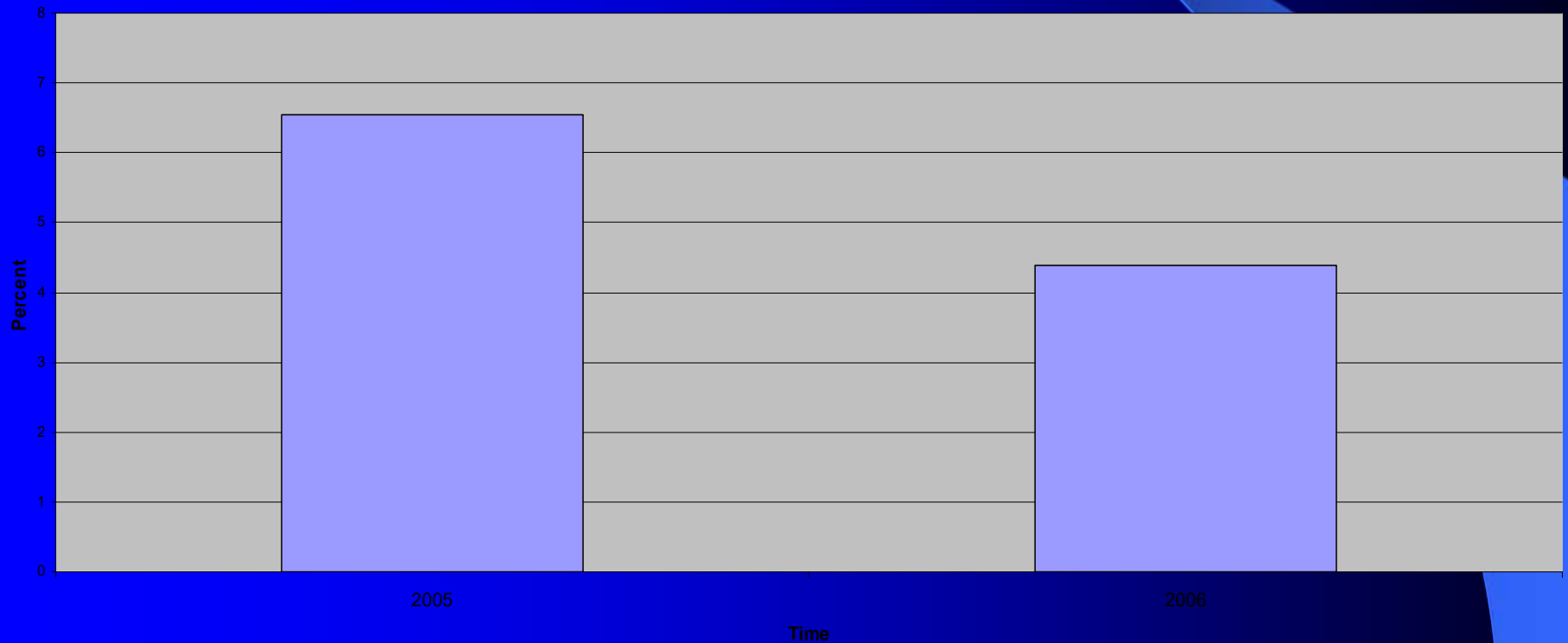
- Nursing sensitive indicators
- Payer reimbursement
- Healthcare changes
- Striving for excellence
- Regulatory demands

Background

- Reportable events → Unit changes
- Uncertain of extent of problems
- Leadership assessment of needs
- Assigned responsibilities

Initial Prevalence Data

Percent of Patients with Stage II+ Hospital-Acquired Ulcers
2005 - 2006



PICO Question

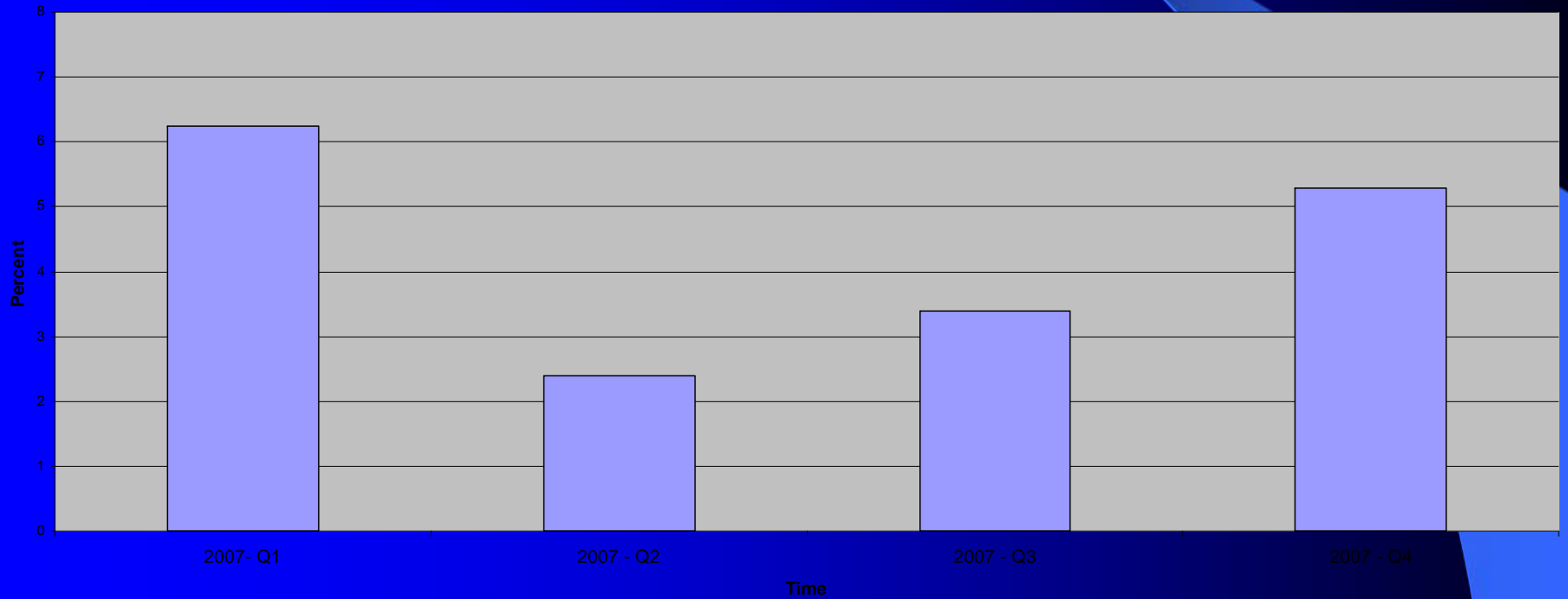
- At a multi-site academic medical center does implementation of a nurse-driven protocol using standardized products and education improve the rate of hospital acquired pressure ulcers?

Skin Program - Innovation

- Eliminate physician orders for prevention, Stage I and II
- Research and develop evidence based nursing standards of care
- Product standardization; skin carts
- Dissemination of information
- Improved variance reporting
- Quarterly prevalence studies

Prevalence Data

Percent of Patients with Stage II+ Hospital-Acquired Ulcers
2007

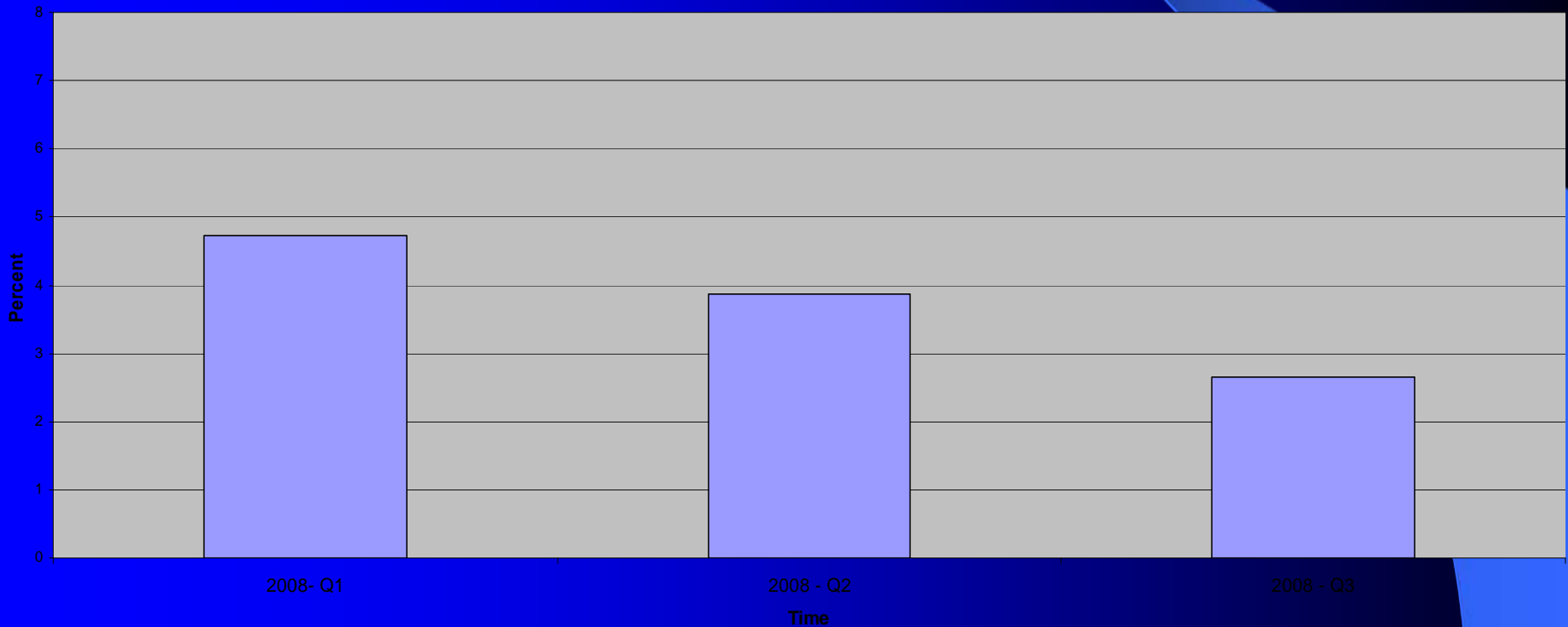


Program Changes

- Wound Wednesday
 - Leadership rounds
 - Ensure weekly documentation
- Documentation form – expanded use
- Cameras and printers on all units
- Housewide skin committee
- 1.2 FTEs WOCNs

Prevalence Data

Percent of Patients with Stage II+ Hospital-Acquired Ulcers
January - August 2008 (Q1 - Q3)



Further Program Changes

- Resource Manual
- Education opportunities:
 - Housewide
 - Nurse Residency
 - Orientation
- Form revised with resources
- More aggressive standards
- Daily reporting to CNO

Change Realized

- CalNOC rates overall achieving benchmark
 - Acute care 0%
 - 2 critical care units 0%
 - No reportable events

Implications/Significance

- Evident practice changes
- Culture change – housewide awareness of quality measures
- Resources – mattresses, collars
- Improved documentation
- Staff input and housewide collaboration
 - Staff governance structure
 - Multi disciplinary
- EPIC system
- Real time data from analyst

Recommendations

- Dissemination of results – staff and others
- Continued focus on internal and external best practices and research
- RESOURCES
- Multi-disciplinary efforts and support
- Contribute to nursing knowledge – publications, presentations, research
- Utilization of data – real time