One Good Turn Deserves Another

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**IDENTIFICATION:**

According to national data, Heart Failure (HF) is a major medical condition associated with a higher risk for the development of pressure ulcers. At Peninsula Regional Medical Center (PRMC), 2 South is our dedicated HF Unit; HF is the primary admission diagnosis. The incidence of pressure ulcers continue to contribute to higher medical cost, increased length of hospital stay, and patient burden. In the 1st Quarter 2009, 2 South noted a 5.14% incidence of hospital acquired pressure ulcers, a rate that is above the national average of 3.5%. Consequently, a need was identified to change practice in order to assist with early detection and monitoring of high risk patients in an effort to decrease the number of hospital acquired pressure ulcers (HAPU). Early identification and assessment of high risk patients along with timely initiation of Prevention and Treatment measures is vital in reducing the incidence of HAPU.

**PROCESS:**

A Clinical Resource Nurse (CRN) of 2 South along with the unit’s Skin Champion made Skin Rounds on 5 patients weekly. The patient’s were selected at random. A study was conducted from June 1, 2009 thru October 31, 2009. A Skin Rounds Assessment Tool was utilized to assure consistency while conducting these rounds. Items assessed included Braden Score, incontinence, initiation and documentation of Pressure Ulcer Pathway order sets and patient’s positioning in comparison to a standardized Turn Clock. The Braden Score is placed on the patient information board and is required to be updated on each shift. Patients identified as having a Braden Score of 18 or less involved a chart analysis to determine if the prevention and treatment measures were initiated and measures implemented via a physical review.

**SOLUTION:**

A daily worksheet was developed for ancillary staff and the Turn Team that included the patient’s Braden Score and the need for an every 2 hour turn. The Pressure Ulcer Dashboard is accessed via Horizon Business Insight (HBI) available on the PRMC intranet, to quickly identify those patients with high risk factors that may lead to potential pressure ulcer related issues. Regular attendance by the Skin Champion and the Clinical Resource Nurse at the Pressure Ulcer
Committee meetings became key to staying abreast of clinical changes and data collection comparison from other units of PRMC.

**OUTCOMES:**

As a result of this study and implementation of identified process measures, there was a significant reduction in rate of HAPU on this unit. It also increased awareness around the need to implement prevention and treatment measures to help with the reduction of HAPU. 2 South met their goal of reducing their incidence of HAPU below the national average rate of 3.5%. Recently in the 3rd Quarter, the incidence rate has improved to 1.83%, which is considered best practice. 4th Quarter data is pending coding and Risk Management review. Skin Rounds will continue to be monitored regularly to ensure continued overall improvement. In addition to increasing patient safety and quality care, the communication and collaboration among the staff around pressure ulcer prevention and management translates to improved care.