

Reducing Incidence of Pressure Ulcers in a Small Community Hospital

Amy Krushell RN MS, Nurse Educator and Wound Specialist; Kathy Davidson RN MS MBA, CNO/COO Heidi Alpert RN MS Sr. Director of Nursing Albert Santos RN,MS, Director of Inpatient Nursing

BID-Needham

Introduction/Problem

Prevention, early detection, and successful management of pressure ulcers in acutely ill patients is a principal clinical goal in hospitals nationwide. BID-N is a small community hospital whose patient population average age is > 75 years, with many patients admitted whose ages are over 85 with very limited mobility and very fragile skin. Preventing skin breakdown and early aggressive management of skin irritation is a challenge in the acutely ill frail elderly. It is reported that 2.5 million people in the US develop pressure ulcers yearly (AHRQ "Preventing Pressure Ulcers in Hospitals", A toolkit for Improving Quality of Care) and accounts for increased morbidity and length of hospitalizations.

The nursing department at BID-N implemented a vigorous program of nurse interventions to prevent and treat skin breakdown. In 2015, after two incidents of reportable skin breakdown related to respiratory equipment in the ICU, the skin and wound care experts at BID-N set out to revise and update the program of wound prevention and management for all inpatients.

Aim/Goal

- Reduce to zero the incidence of skin breakdown in patients hospitalized at BID-N
 - Eliminate reportable skin breakdown
- Educate clinical nursing staff in current evidence based practice for wound prevention, classification of skin breakdown, and management of skin integrity alterations

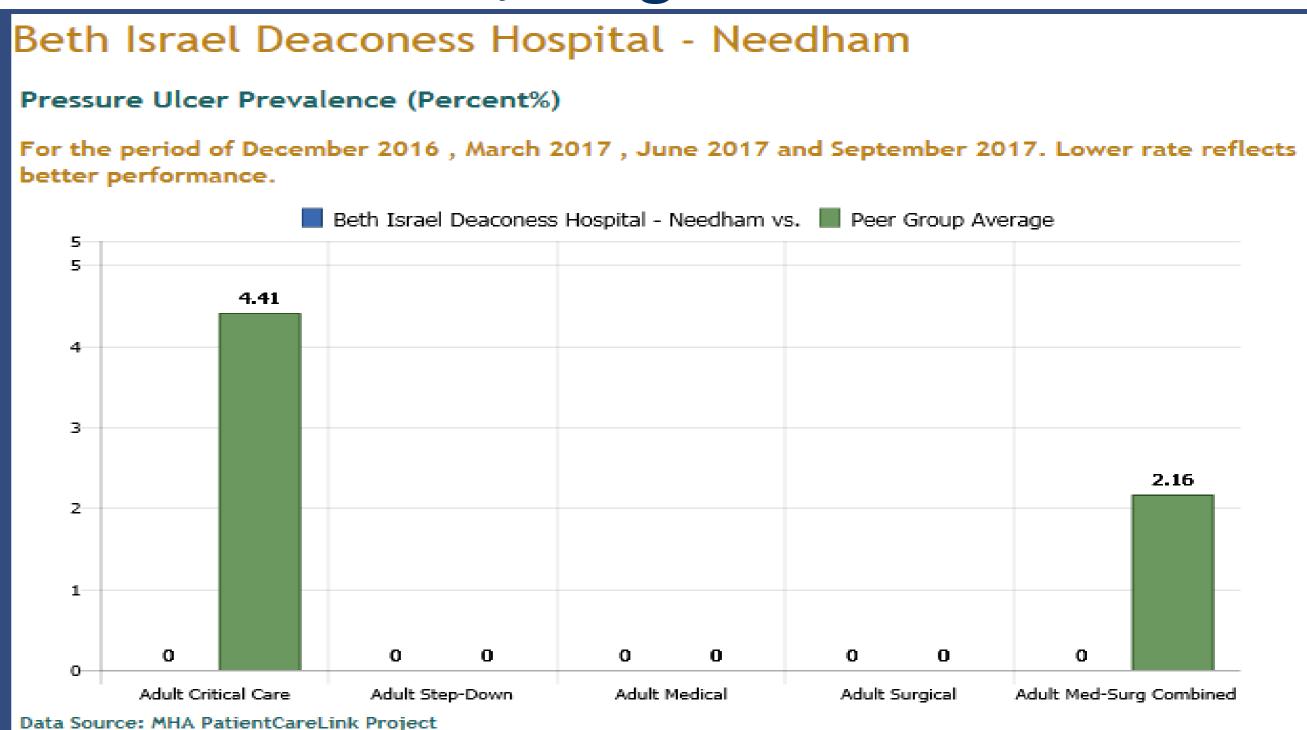
The Team

- Amy Krushell RN MS, Nurse Educator and Wound Specialist;
- Kathy Davidson RN MS MBA, CNO/COO
- Heidi Alpert RN MS Sr. Director of Nursing
- Albert Santos RN,MS, Director of Inpatient Nursing

The Interventions

- > Nursing orientation and continuing education program updated to ensure current evidence based practice
- > Ongoing education of nursing staff to identify and implement best practices in prevention of wound care, including mobility, skin care management and use of products to maintain skin integrity
- > Re-education of nursing and respiratory therapy staff in preventing skin breakdown due to use of respiratory equipment
 - Purchase of new respiratory equipment and masks that reduce pressure areas
- Nurse initiated consults for skin assessments
- Real-time (bedside) teaching and coaching by nursing educator regarding identification and management of skin

Results/Progress to Date



Since February 2016, no DPH reportable cases of skin pressure ulcers. For periods December through September 2017, no (o) incidence of pressure ulcers