Innovations to Stop Pressure Ulcers among Patients at Critically High Risk for Pressure Ulcer Development - a Multidisciplinary Approach

JANUARY 14, 2016

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Objectives

► Identify three best practices to prevent pressure ulcers in patients at highest risk.

► Describe one strategy for involving various interdisciplinary team members in a pressure ulcer prevention collaboration.

► Recognize innovative pressure ulcer prevention actions which can be replicated in different settings.
Speakers

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About Magee

96 Bed Inpatient
Acute Rehab Hospital

Outpatient Satellite
Clinics
How we got started

Baseline efforts
- Strong collaboration - wound care and nutrition
- High quality tube-feeding supplements
- Advanced seating capabilities
- Everyone turned and shifted

Nursing-Specific Actions
- Head to toe assessment by RN, WOCN, MD
- Head of bed
- Weekly full body assessment with photos
- Shift of WOCN hours

WOC Team
Barriers for Skin Protection

- Foam
- Ointments
- pH balanced skin cleanser

Supplies

- Bed Sheet
- Sling
- Chux
- Draw Sheet

- Liberal use of barriers - protect intact skin exposed to stool
- Elimination of plastic from bed pads and briefs

Nursing-Specific Communication

- Staff education
- Wound care formulary
- Supply guidelines
Equipment

Nutrition

- Assess for malnutrition on admission and initiate support
- Meet at least 80% of protein needs
- Use tube feeding formulas with liquid modular proteins as needed
- WOCNs and RDs communicate throughout the day

Poop in a Group

WOCN
Nursing supervisor
General Rehab
Nutrition
Nurse manager - SCI
Therapy Seating Specialist
Physician
Pharmacy Director
Front-line nurse - BI/Stroke
Physician-Specific Actions

- Physician champion
- Assess skin at admission
- Engage nursing assistants
- Work with WOCN to identify and stage ulcers

Therapy Innovations

Therapy Innovations
Leadership

Collaboration with other providers
- Bracelets for transported patients
- Brain-storming with providers from a cardio-thoracic ICU
- PA Hospital Engagement Network
  3-year collaborative

Protect my skin. Turn every 2 hours.

Culture Change
- Moisture dermatitis as “stage 0”
- Sense of urgency related to prevention of skin breakdown
- Principles of Just Culture applied
Results to Date

Why did it take so long?

The Challenge of Wicked Problems

- New challenges with devices
- Staff turn-over
- New patient challenges
Replication of Process

- Interdisciplinary work
- Iterative process
- Innovation - creating solutions
- Not accepting failure

Lessons We Learn Again and Again

- Leadership and accountability matter
- Without these -> much work and no improvement
- Things get “unfixed” without constant vigilance.
- “Over-communication” is a necessity.

Having Fun While Raising Awareness
References


References (continued)

- Pressure Ulcer Prevention and Treatment Following Spinal Cord Injury: A Clinical Practice Guideline for Health-Care Professionals. SECOND EDITION: Administrative and financial support provided by Paralyzed Veterans of America.

THANK YOU!

BELIEVE

MAGEE Rehabilitation Hospital
if there's a will
there's a way back

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