

Decreasing Hospital Acquired Pressure Injuries through Interdisciplinary Team Engagement

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Background

Part of the Institutional Goals for FY 21 is to reduce the number of Hospital Acquired Pressure Injuries (HAPIs) among patients. A HAPI may cause unnecessary discomfort, pain, psychological and emotional distress, infections, and may even be life-threatening to the patient. This injury may also result in a longer length of stay and increased hospitalization costs. Due to the complexity of our patient population, pressure injury prevention is key as there are many factors that can delay wound healing and total recovery from a HAPI.

Objective

The goal of our department is to reduce HAPIs in a 674-bed comprehensive cancer center by partnering with clinical nurses, unit leadership and the interdisciplinary team.

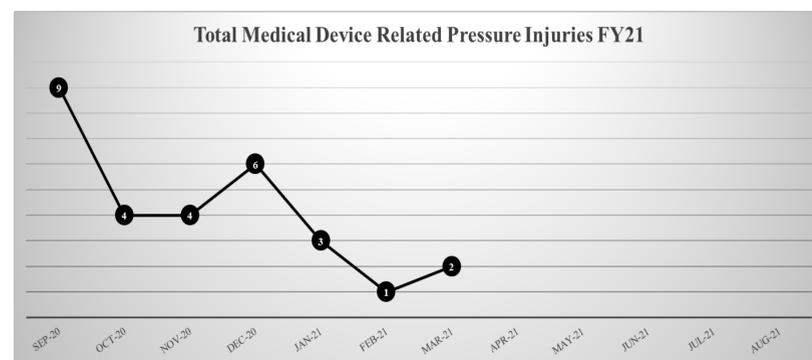
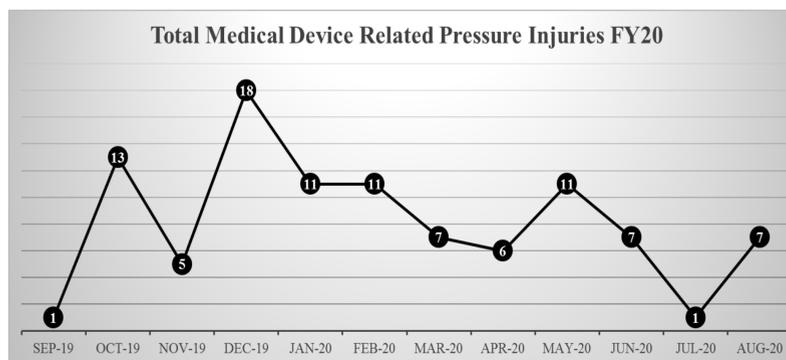
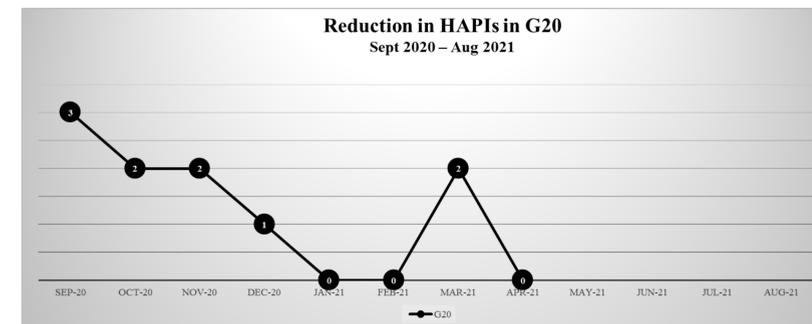
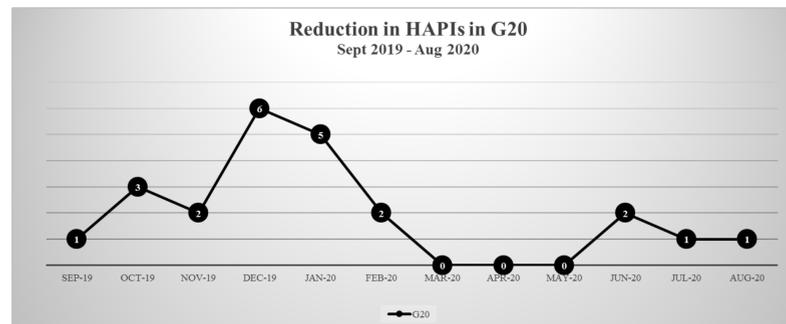
FY21 Hospital Acquired Pressure Injuries (HAPIs)



Implementation

The Wound, Ostomy, Continence (WOC) Nursing team collaborated with unit leadership teams to discuss best practices and opportunities for improvement (OFIs) and implemented the following interventions to enhance outcomes.

- Unit Collaborative Rounds – WOC was divided into teams and assigned to units cohorted based on HAPI incidence.
- Root Cause Analysis (RCA) – As of March 2020, RCAs for all hospital acquired Stage 3, 4, Unstageable, and Deep Tissue Pressure Injuries were completed and gaps in standard of care and documentation addressed.
- Virtual Education Series – Conducted monthly to address OFIs. Topics: pressure injury prevention bundle, support surfaces and wound care products, Medical Device Related Pressure Injuries, wound assessment and documentation, moisture associated skin damage, proper placement of respiratory devices, tumor care, etc.



Results

HAPIs have been on a downward trend. We currently have 81 HAPI incidences for FY2021 as compared to a baseline of 288 HAPIs FY2020. For areas with an uptick in HAPIs, the WOC team has partnered with these areas such as the ICU, G20, Pedi, OR, COVID, P4A, etc. and all teams have decreased incidences.

Conclusions

RCAs have helped identify focus areas and monthly educational series topics to equip staff with knowledge in preventing the next injury. Collaboration and partnership with the frontline staff and unit leadership are pivotal in reducing HAPIs.

References

Boyle, D.K., Bergquist-Beringer, S. & Cramer, E. (2017). Relationship of wound, ostomy, and continence certified nurses and healthcare-acquired conditions in acute hospitals. *Journal of Wound, Ostomy, Continence Nursing*, 44(3), 283-292. doi: 10.1097/WON.0000000000000327

