

Patient Safety: Decreasing Pressure Ulcers in Acute Care

Judee L. Gozzard, RN, MSN

Bay Pines VA Healthcare System

Cheryl Ann Howard

Problem: In 2004 a Process Action Team was formed to investigate reports of an increased number of acquired pressure ulcers in the acute care units. The facility lacked an organized and accountable skin care program that provided clinicians with the appropriate resources, tools, and guidelines to deliver optimal pressure ulcer care and prevention.

Evidence: Recent national pressure ulcer incidence rates range from 4% to 9% and length of stay for these patients increased 63% in a ten year period. Comprehensive skin care strategies that focus on pressure ulcer prevention result in decreased acquired pressure ulcers. Pressure ulcer management teams composed of interdisciplinary health care professionals is a best practice strategy.

Strategy: A comprehensive skin care program was developed to enhance staff education, improve evaluation methods, include interdisciplinary partners, and improve staff performance to decrease acquired pressure ulcers in acute care.

Nursing Practice Changes Implemented:

- Manager facilitates monthly Skin Care Committee meetings
- Additional skin care rounds in acute care
- Expanded skin care team to include unit nurses and interdisciplinary professionals
- Staff resource manual development
- Trained skin care nurses to educate peers
- OWCN certified nurse monitors care of all pressure ulcer patients
- Unit level pressure ulcer tracking
- Created computerized visual wound care catalog
- Revised pressure ulcer prevention/treatment protocols

Evaluation:

- Examine data monthly for protocol compliance
- Integrate VA Nursing Outcomes Data Base
- External Peer Review Program
- National Database of Nursing Quality Indicators participation

Results: Acute care pressure ulcer incidence decreased 48.7% from 2005-2008. The interdisciplinary skin care team was featured in *Advance for Nurses* in May 2007.

Recommendations: Bay Pines will maintain their successful momentum in pressure ulcer prevention and expand interventions system-wide. Continued strategies include ongoing education, frequent evaluations, and implementing evidence based practices.

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