Preventing Pressure Ulcers

Are you on board with the ‘Save Our SKIN’ campaign?
— by Virginia Capasso, RN, clinical nurse specialist

Preventing hospital-acquired pressure ulcers is a top priority for healthcare organizations across the country. So important is it that the Patient Care Services Executive Committee included it as part of its 2011 strategic plan: “Create an evidenced-based, standardized approach to the prevention of hospital-acquired pressure ulcers and use of specialty beds.” This tactic was inspired partly by trends in MGH pressure-ulcer data reported to the National Database of Nursing Quality Indicators (NDNQI) and to Patient Care Link, the publicly reported state database formerly known as Patients First. This data showed an upward trend in the rate of pressure ulcers from 3.2% in March of 2009 to 3.5% in March of 2010. Pressure-ulcer prevalence rates were above the target goals in two Patient Care Link categories.

The Pressure Ulcer Strategic Initiative Task Force was created to address this part of the PCS strategic plan and to help educate staff throughout the hospital about best practices related to preventing hospital-acquired pressure ulcers.

The inter-disciplinary task force has met weekly since it was convened in November, 2010. The group has built on other successful initiatives implemented by the CNS Wound Care Task Force and the PCS Office of Quality & Safety, including the Skin Integrity Problem List, nursing care guidelines, and hourly safety rounds that incorporate the 7Ps. Members of the task force conducted an analysis of programs already in place at MGH and reviewed recommendations for prevention of pressure ulcers published by the National Pressure Ulcer Advisory Panel. The task force reviewed the literature and assessed the feasibility of other successful programs, including Ascension Health’s Safety for All initiative; the New Jersey Hospital Association’s Pressure Ulcer Collaborative; Minnesota Hospital Association’s Safe Skin Campaign; the NICHE program; and the Agency for Healthcare Research and Quality’s Preventing Pressure Ulcers in Hospitals Tool Kit.

After intensive deliberation, the Pressure Ulcer Task Force decided to adopt the Save Our SKIN (SOS) campaign, which deputizes all staff as SKIN Savers and employs the SKIN Bundle as a framework for safe SKIN practices. To help get the word out, the task force launched the Save Our SKIN (SOS) campaign on Thursday, May 26, 2011, at a Nursing Grand Rounds presented by the leadership of the Pressure Ulcer Strategic Initiative Task Force. Though the campaign will not roll out in earnest until mid-summer, the overall prevalence ulcer rate has already begun to decline with a rate of 2.8% in March, 2011, and 2.5% in June (preliminary results).

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Safe Skin Practices

- Conduct a skin assessment for risk of pressure ulcers using the Braden Scale upon admission and daily thereafter.
- Check surfaces: use standard pressure-relief mattresses and chair pads. Use specialty beds if consultation with clinical nurse specialist deems it is warranted.
- Use specialty chair pads per physical therapy.
- Turn or re-position patients in bed every two hours; assist as needed.
- Patients should move every 15 minutes while sitting in a chair; limit sitting in chair to two hours at a time.
- Assess need for toileting or incontinence-management every hour.
- Optimize nutrition: set up a tray or feed patient meals as needed and nutritional supplements as ordered.
- Conduct unit-based ‘SKIN huddles’ for patients with new pressure ulcers.
- Submit a safety report for stage II, III, and IV pressure ulcers.

For more information on the work of the Pressure Ulcer Strategic Initiative Task Force, call Virginia Capasso, RN, at 6-3836.