

## Background

- Patients with Hospital Acquired Pressure Ulcers (HAPUs) have a mortality 2-6 times greater than patients with intact skin (Gray & Hampton, 2015).
- HAPUs in patients 65 years and older can increase the risk of mortality by 400% (Gray & Hampton, 2015).
- Healthgrades, Inc. (2011) reported 368,261 Pressure Ulcers in approximately 14 million Medicare patients hospitalized from 2007-2009 (2.7% incidence) (Waugh, 2014).
- Our Geriatric Resource Nurse (GRN) cohort group met at the Spring 2015 NICHE training program and decided to implement a unit based quality improvement initiative focused on patients  $\geq 65$  years old with geriatric syndromes.
- Geriatric syndromes are defined in the literature as the unique features of common health conditions in older people that do not fit into discrete disease categories. These conditions include delirium, falls, incontinence, and frailty (Inouye et al., 2007).
- Our GRN cohort consists of the following nurse specialists: Clinical Resource Nurse, Ambulatory Outpatient Surgery Nurse Manager, Nurse Administrator, and Nurse Clinician in Psychiatry.
- We chose 17 West, a 35 bed medical surgical unit as our pilot unit because it was where one of our GRN cohort team members worked. She was also the Clinical Resource Nurse (CRN).

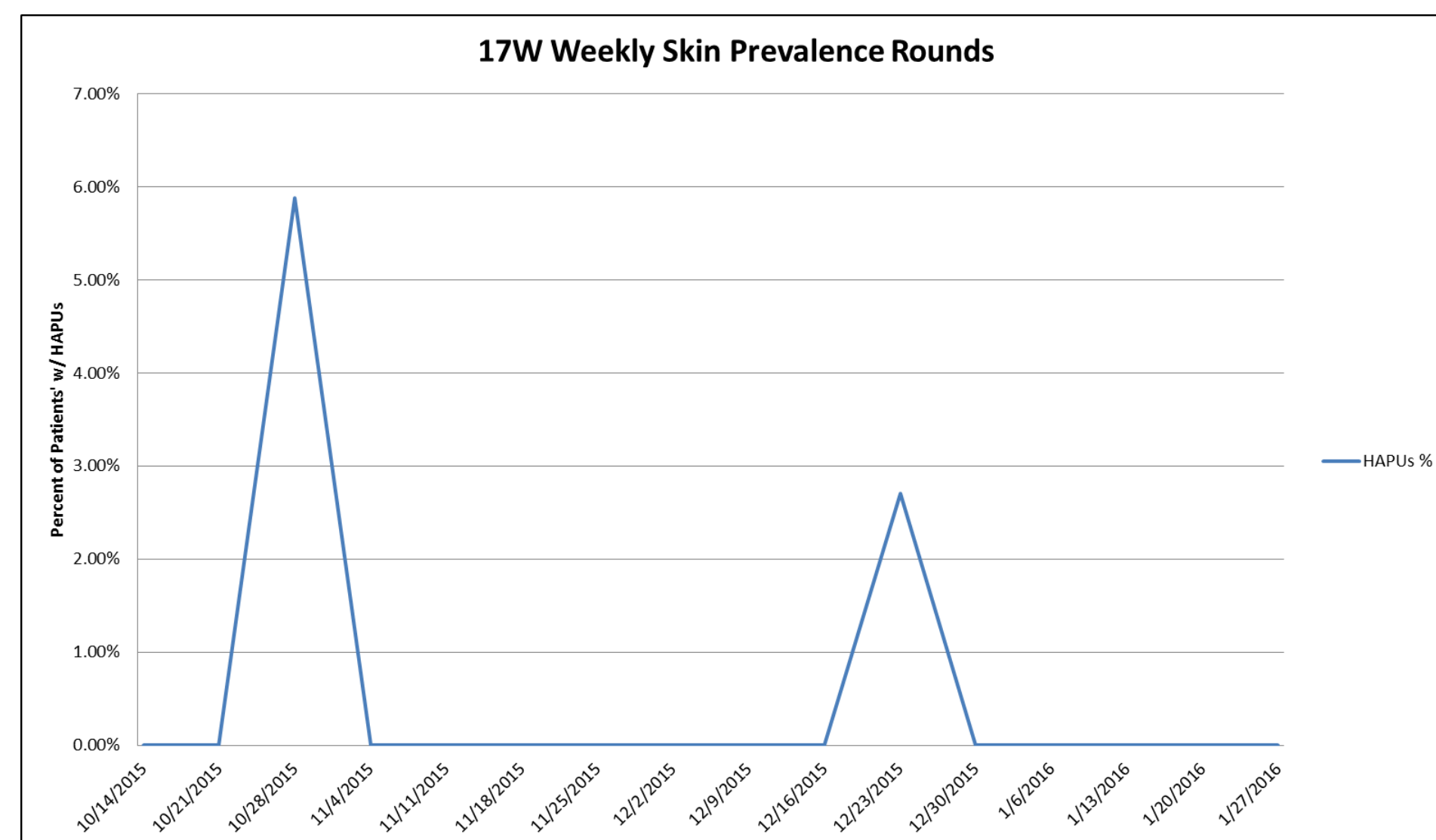
## Project Goals

Specific to HAPUs in the  $\geq 65$  years old patient population on 17 West:

- To increase staff knowledge (RNs and PCTs) of common Geriatric Syndromes with a focus on skin integrity and use of Braden Scale for predicting pressure sore risk.
- To foster an interdisciplinary team approach in devising a plan of care to prevent HAPUs.
- To decrease the prevalence of HAPUs.

Specific to knowledge and relationships on 17 West:

- To determine whether the interdisciplinary team approach of the HAPU project positively influences RN and PCT working relationships.



## References

- S. M. Waugh. Attitudes of nurses toward pressure ulcer prevention: a literature review. *MedSurg Nursing*, 2014; 23, 5, 350-357.
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## Project Description

- It was decided that the lead GRN for conducting in-services, huddles , and wound prevalence rounds on all patients would be the unit CRN.
- Weekly skin prevalence rounds were launched on 17 West on the same day as the hospital wide quarterly rounds.
- Weekly in-services on common Geriatric Syndromes started the following day using the online NICHE knowledge center GRN curriculum modules, with a focus on HAPU case studies. They were targeted to RNs and PCTs. They were given by the GRN team, wound care RN, and unit nutritionist.
- Evaluation of HAPU reduction will be conducted six months after the project start using metrics collected on the unit Quality Improvement score card.
- Evaluation of knowledge and relationships between RNs and PCTs will be conducted through an analysis of focus groups.

## Challenges

- Due to patient care demands, competing in-services, hospital councils, and outside regulatory visits, staff attendance at weekly in-services was sparse.
- In-services were switched to a biweekly schedule, which resulted in better attendance for both RNs and PCTs.
- As a result of increased frequency in skin prevalence rounds, the physical demands on staff, in particular on the CRN, also increased.
- Unit staffing was restructured to meet the increased physical demands.

## Next Steps

- Tailor Geriatric Syndromes to the medical surgical unit and incorporate them on interdisciplinary rounds on all similar units.
- Investigate opportunities for GRNs to provide education.
- Promote use of electronic documentation in prevention of HAPUs.
- Incorporate earlier screening for Geriatric Syndromes on team rounds to facilitate further focused geriatric assessments.

June 25, 2015  
GRN Training Ends /  
Project Conceived

October 14, 2015 Start  
Weekly Skin Prevalence  
Rounds

October 15, 2015 Start  
Weekly In-services

November 12, 2015  
Switch to Biweekly In-  
services

January 14, 2016  
Evaluate Project  
Midpoint HAPU  
Prevalence

January 21, 2016  
Start Focus Groups RNs  
and PCTs

April 14, 2016  
Evaluate Project  
Endpoint HAPU  
Prevalence

April 21, 2016  
Evaluate RN and PCT  
Knowledge and  
Relationships