Introduction

Hospital-acquired pressure ulcers (HAPUs) can complicate the recovery of hospitalized patients and impose a huge financial burden on hospitals.

Early identification of skin breakdown allows for prompt intervention and treatment to optimize patient care. The primary nurse is responsible for performing and documenting the initial skin assessment. Skin breakdown identified after the first 48 hours of admission is considered a HAPU.

On a 32-bed medical telemetry unit, investigation into each HAPU revealed the opportunity to improve nursing practice in early identification and documentation of skin breakdown by having two RNs perform admission skin assessments on patients transferred from other units and/or skilled nursing facilities.

Background

- A drill down of each HAPU in 2013 indicated that the majority of HAPU occurrences were not actually acquired on the unit they were ultimately attributed to. Evaluation of each ulcer and the course of hospitalization for the patient determined the ulcers were unlikely to occur in the time between the patient’s arrival to that unit and the time of identification because they were in advanced stages.

- The drill down process of the 4 HAPUs attributed to the medical telemetry unit up to the third quarter in 2013 illustrated the opportunity to improve nursing practice and patient outcomes with early identification and documentation of skin breakdown.

Conclusion

- The practice of having two RNs perform the initial skin assessment for all patients admitted from other units and skilled nursing facilities greatly improves the accuracy of the assessment.
- Patient care is improved by early identification and intervention of pressure related skin breakdown.
- By identifying pressure related skin breakdown immediately, the hospital avoids the fiscal impact of treating the ulcer.

METHODS

- Staff nurses on the skin and wound care resource team worked in collaboration with the unit-based council to implement practice change.
- Beginning in the fourth quarter of 2013, initial skin assessment on every patient admitted from another unit within the hospital or from a skilled nursing facility had the initial skin assessment performed by two registered nurses.
- The unit staff was educated on the change in practice in December 2013 and the change was put in place immediately.

Results

- As a result of this innovative practice change, the number of HAPU occurrences decreased from four in third quarter 2013 to zero for the entire year of 2014.
- Since implementation of this project over 18 months ago, the unit has had only one HAPU.