

# Prevention and Management of Pressure Injuries

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- SAFETY
- QUALITY
- PATIENT EXPERIENCE
- PRODUCTIVITY
- COST

## Define Problem, Set Aim

### Problem/Opportunity for Improvement

There is an increasing number of Hospital Acquired Pressure Injury (HAPI) cases in Ward B9 Subsidised, which has not been reported due to staff knowledge deficit. Pressure injury occurred can affect patient's functional recovery, increase hospitalisation length of stay and decrease patient's and next-of-kin's hospital satisfaction rate (Nghiem et al., 2022).

### Aim

To achieve zero deterioration of Stage II Pressure Injury and below with full or partial recovery.

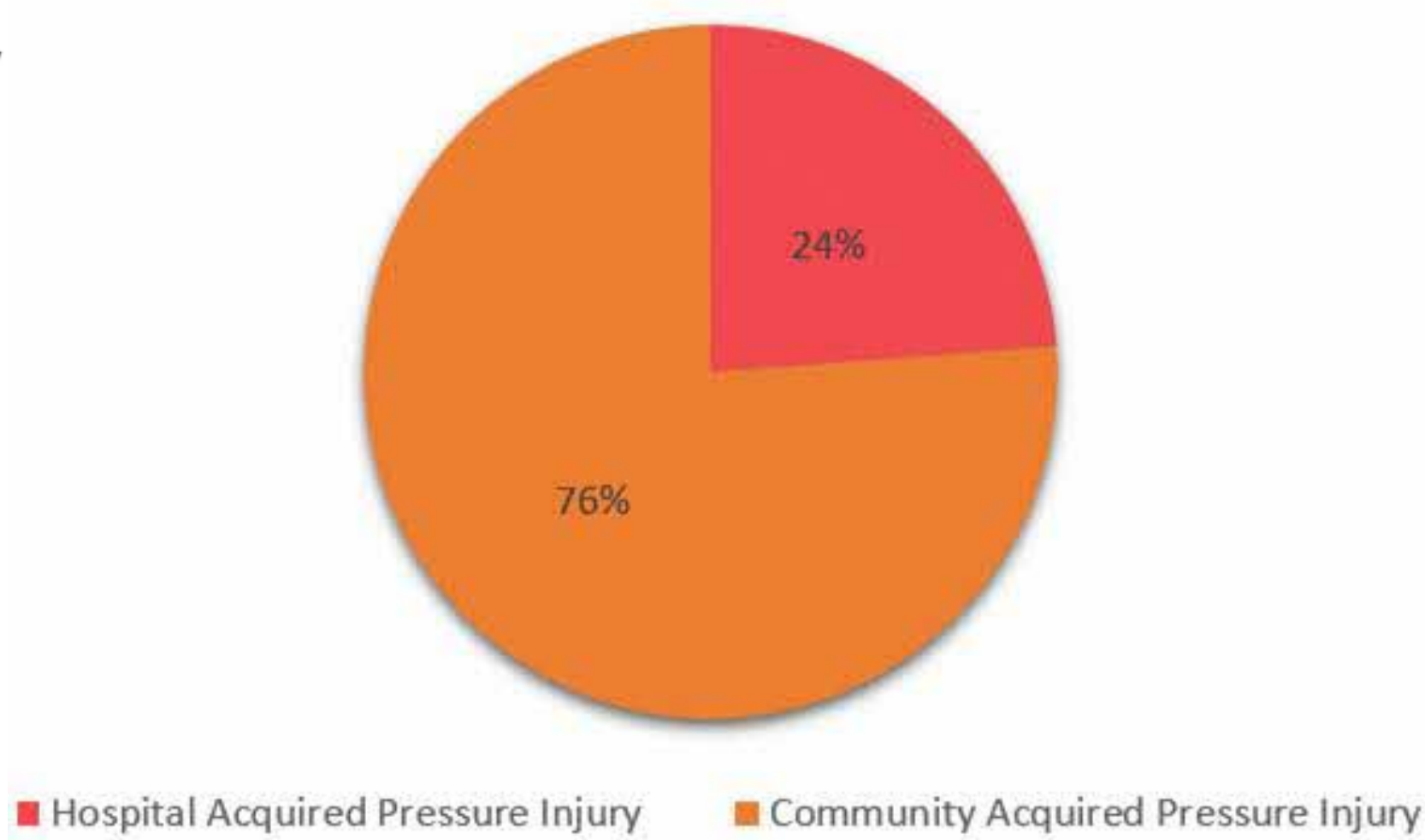
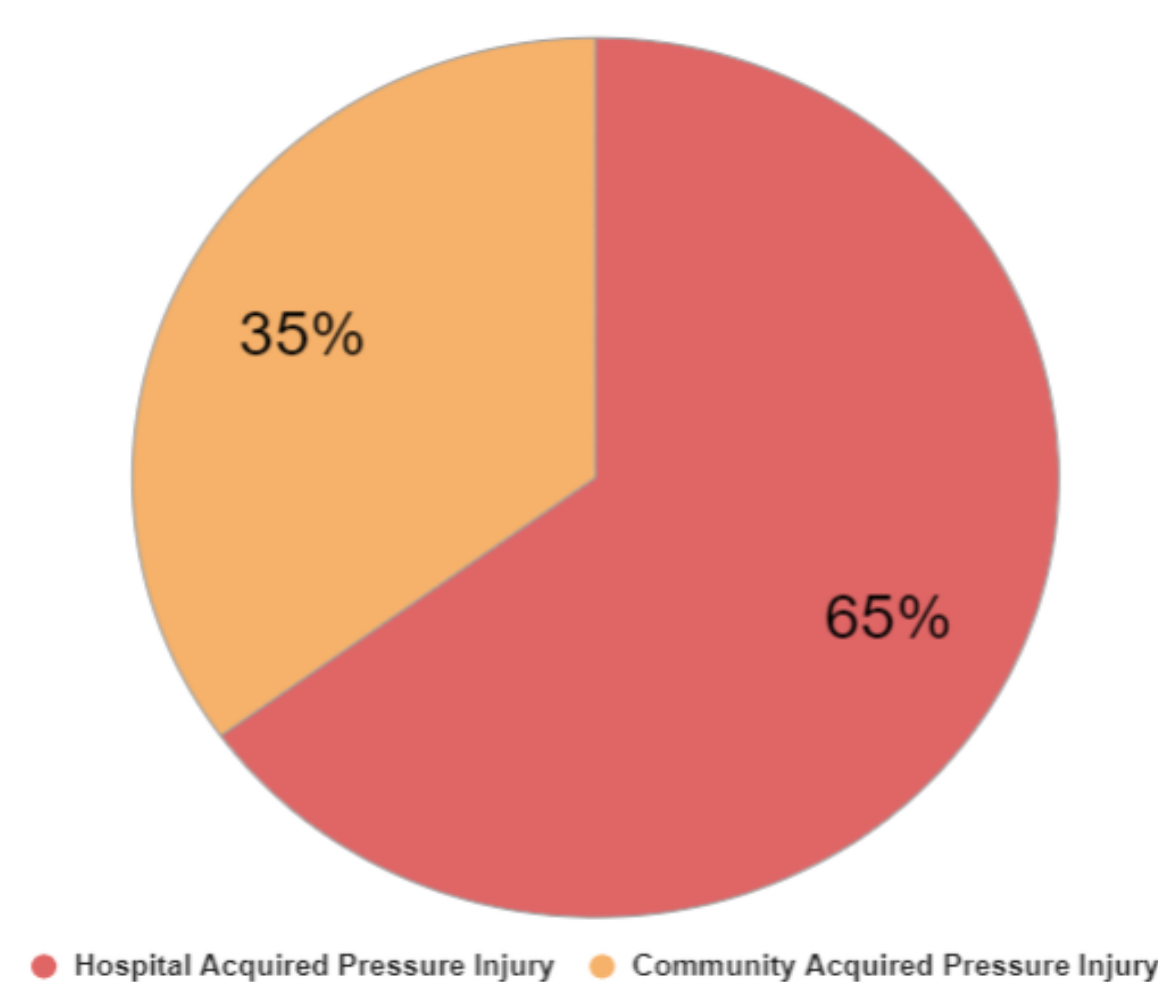
### References

Nghiem, S., Campbell, J., Walker, R. M., Byrnes, J., & Chaboyer, W. (2022). Pressure injuries in Australian Public Hospitals: A cost of illness study. *International Journal of Nursing Studies*, 130, 104191. <https://doi.org/10.1016/j.ijnurstu.2022.104191>

## Establish Measures

### What was your performance before interventions?

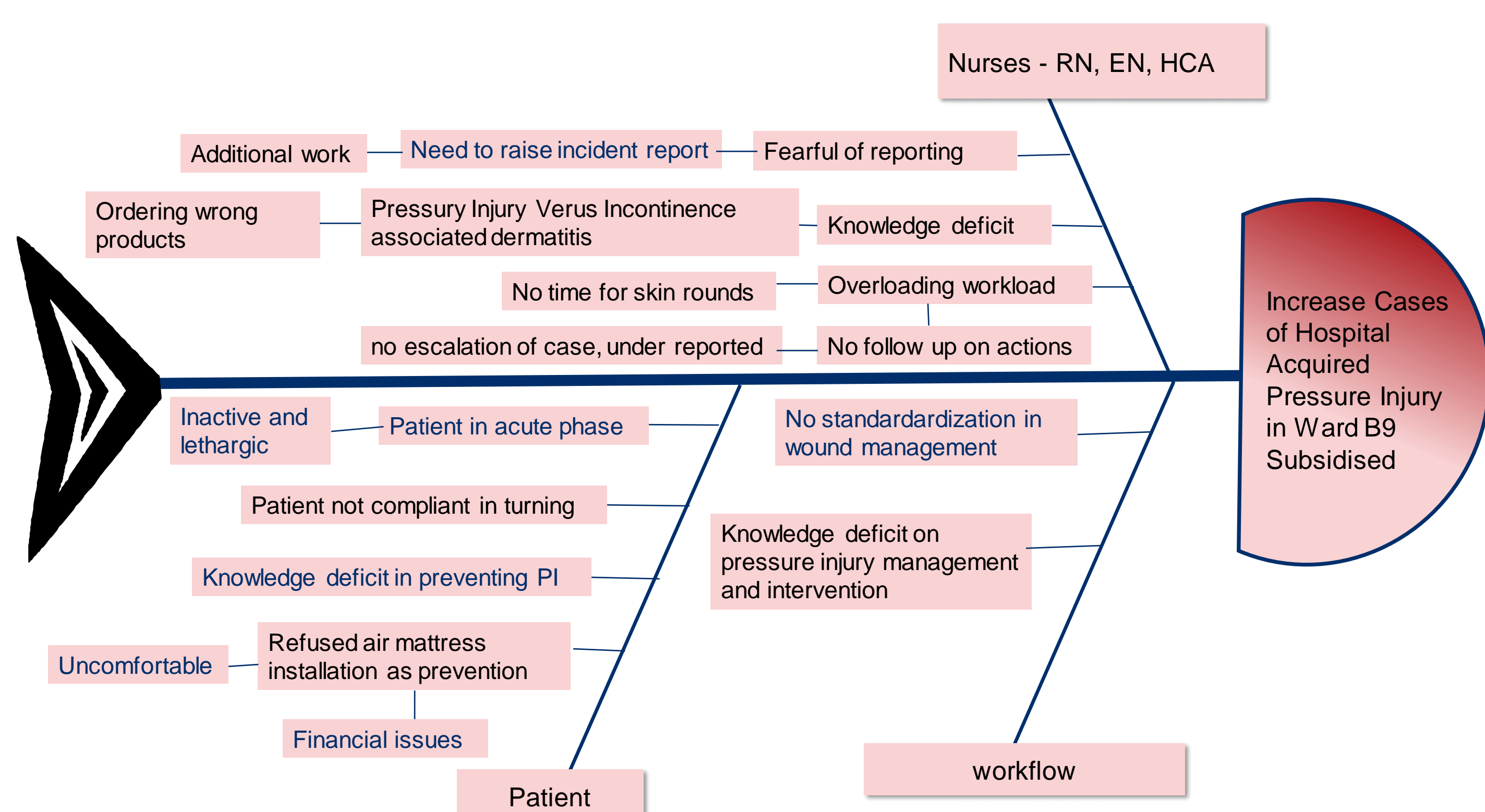
Process measure : Total Rate of HAPI cases in Ward B9 Subsidised does not deteriorate from Stage II Pressure Injury to Stage III Pressure Injury and above



Pressure Injury (PI)  
Pre-Project Audit Result

Pressure Injury (PI)  
Post implementation Audit Result

## Analyse Problem



## Select Changes

### Pre-Implementation phase

#### > Standardised workflow through identifying patients using our inclusion criteria

- Potential high risk patients
- Aged ≥ 60 years old and above
- Braden score < 16
- Pre-existing stage 1 pressure injury

### Implementation Phase

#### > Standardised workflow for admission and/or transfer case

- Initiate skin care bundle
- Upload baseline photo into EPIC
- Pressure injury preventive measures
- Standardised wound products used for pressure injury

#### > Standardised workflow for twice weekly routine monitoring

- Uploading of photo twice weekly
- Evaluate status of pressure injury
- Daily photo for worsening of pressure injury
- Escalation of worsening pressure injury cases
- Real time case learning and teaching for nurses

## Test & Implement Changes

### How do we pilot the changes? What are the initial results?

| CYCLE   | PLAN   | DO   | STUDY  | ACT   |
|---|--|--|--|---|
| 1<br>22nd April to 27th May 2022<br>(5 Weeks)             | Sharing of knowledge regarding stages of pressure injury and preventive measures.                        | Uploading and audit conducted twice weekly.                              | Baseline - 0% compliance rate.                                     | 80% compliance rate   |
| 2<br>31st May to 26th July 2022<br>(8 Weeks)              | Sharing of knowledge regarding preventive and management of pressure injuries.                           | Uploading and audit conducted twice weekly.                              | Baseline - 65% HAPI  | HAPI reduce to 20%  |
| 3<br>16th August to 9th October 2022<br>(8 Weeks)         | Constant sharing of pressure injuries cases and management measures for pressure injuries.               | Uploading and audit conducted twice weekly.                              | Baseline - 16% of Pressure injuries worsening                      | Worsening of pressure injuries reduce to 9%   |
| 4<br>4th October to 25th November 2022<br>(8 Weeks)       | Constant sharing and reminding of pressure injuries cases and management measures for pressure injuries. | Uploading and audit conducted twice weekly. Escalate cases to skin team. | Looking into recurrence rate of HAPI from partial or fully healed. | 47% of the HAPI cases are stage II and above.<br>0% of recurrence pressure injury from partial or fully healed. |
| 5<br>13th December 2022 to 3rd February 2023<br>(8 weeks) | Constant emphasizing of need to escalate if the pressure injuries is worsening.                          | Uploading and audit conducted twice weekly. Escalate cases to skin team. | Baseline - 47% HAPI Stage II and above                             | HAPI of Stage II and above reduces to 24%.<br>0% of recurrence pressure injuries from partial or fully healed.  |

## Spread Changes, Learning Points

### What are/were the strategies to spread change after implementation?

Project team members identified 3 skin champions to continue random skin rounds checks/audits. The nurses uses Tigertext as a platform to communicate any issue identified and for the team to continue evaluate for further improvement.

### What are the key learnings from this project?

There were many challenges faced as there were no common language used when discussing in-depth assessment in both pressure injuries and wound product with dealing real-time cases.

With the implementation in standardising the workflow, it allows the nurses to achieve a common goal by understanding that they played a crucial role in managing pressure injuries as a team. Through this change, the team have also witnessed that the nurses took pride in their work by taking up ownership and responsibility in delivering the best care for our patient. Therefore, with such empowerment, the nurses is able to provide right care right, first time and every time.