

WAR ON WOUNDS: WOW

Reducing Hospital Acquired Pressure Injuries after the Pandemic



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Introduction

- ➤ Pre-pandemic we were utilizing and building momentum with our WAR ON WOUNDS strategy (WOW) achieving significant reductions in hospital acquired pressure injuries in our 400- bed acute facility.
- > Unit-based skin champions attended monthly meetings, WOC RNs and vendors rounded to educate staff regarding PIP best practices.
- > Through COVID and 2022, meetings and vendor rounding were restricted resulting in alternative methods for education and information sharing.
- > Critical staffing shortages have resulted in fewer core staff & increase in travelers'
- > New grads were completing clinicals in a virtual simulated environment versus bedside hands-on nursing.
- ➤ Emergency charting was implemented to relieve nursing burden which is now having a significant negative impact on PIPI documentation.
- ➤ Raising PIPI awareness, maintaining pressure injury prevention (PIP) efforts & educating staff regarding the importance of essential documentation along with all other nursing priorities has never been more challenging through COVID 19 & beyond.
- ➤ Up to 3 million patients annually suffer with pressure injuries adding significant burden to an already stretched health care system.
- ➤ Increased severity increases length of stay and is associated with development of other hospital acquired conditions such as pneumonia, UTI and thromboembolism leading to higher costs in care.
- > Average cost of one HAPI has been estimated at around \$20,000 and preventing HAPIs reduce costs, prevents associated complications with better patient outcomes.

Methods

Through 2022 as COVID surges decreased, with leadership support we were able to refocus on our educational strategies and tools to coach nursing staff. DMAIC framework guided our process improvements:

Define, Measure, Analyze, improve, Control

- Ongoing HAPI data collection to monitor trends and areas for education.
- To develop existing strategies and tools used by the WOC nurses to increase access to learning opportunities through the pandemic to include but not limited to:
 - Monthly skin champion virtual meetings.
 - New hire/new grad WOC care small orientation classes.
 - > 4Hr shadow RN/LPN experience rounding with the WOC RN.
 - > Tip sheets to all facility nursing staff via email.
 - ICU rounding to determine compliance with heel pressure injury prevention.

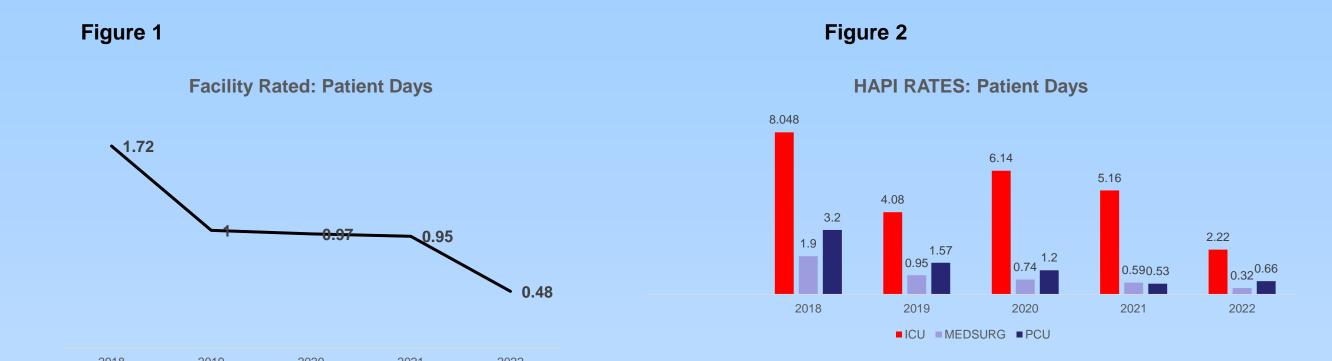
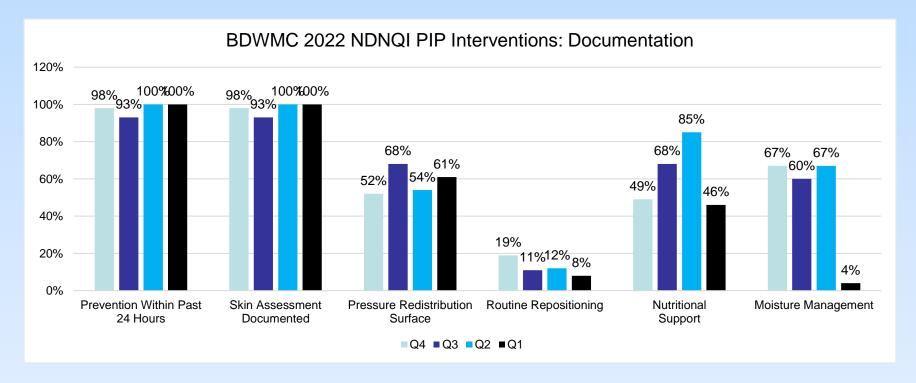
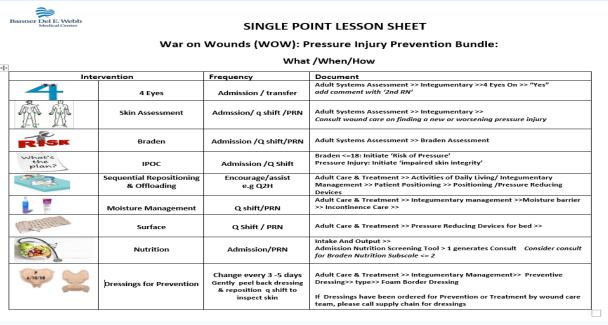


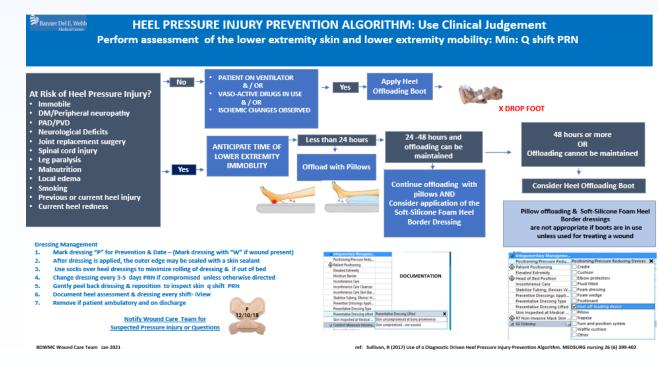
Figure 3



Examples of WOC RN Rounding & Email Tip Sheets







RESULTS

Comparing our 2021 thru 2022 data we had a 50% HAPI facility & ICU reduction with zero heel pressure injuries through 2022 in the ICU. We also had a reduction of 46 HAPIs through 2022 compared with 2021. Based on a conservative HAPI cost of 20K per HAPI, this resulted in a cost saving of more than 900K. We also noted improved staff engagement through our WOW educational offerings. (Fig 1 & 2)

- ICU saw a significant rise in sacral pressure injuries through 2021.
- Some sacral wounds were atypical and not classified as pressure injuries as guided by an NPIAP White Paper.
- Our facility saw a significant rise in patients admitted from long term care facilities and from home with stage 4 pressure injuries.
- Our most common HAPI was Deep Tissue Injury (DTI). One of our tip sheets focus specifically on helping staff to recognize this pressure injury.
- Although we saw a rise in CPAP nasal bridge pressure injuries through the pandemic, we had notable reductions of MDRPIs related to foley's, oxygen tubing, ted hose and Ortho devices.
- > We saw improvements regarding ICU heel PIP practices with ongoing education contributing to heel pressure injury reduction.

Conclusions

Although there is lots of room for improvement, we have learned the importance of continual data collection and education especially as we emerge from the pandemic. This has enabled us to make accurate comparisons to identify where we need to focus. Reducing HAPIs is paramount, but our data reveals our documentation remains our greatest liability. Moving forward this will be our key focus. (Fig 3)

References

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- COVID-19 Resources National Pressure Injury Advisory Panel (npiap.com)

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