Sustaining Pressure Ulcer Prevention Practices at Your Hospital

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Welcome!

Thank you for joining this webinar about how to sustain pressure ulcer prevention practices at your hospital.
A Little About Myself…

• Have clinical background in geriatrics
• Have done extensive research on the quality of pressure ulcer care
• Helped develop the AHRQ toolkit on pressure ulcer prevention
• Past president of the National Pressure Ulcer Advisory Panel
• Have advised numerous health care organizations on pressure ulcers
Today We Will Talk About

• Purpose and challenges of sustaining pressure ulcer prevention practices.
• Case study: VA.
• Who will sustain these practices?
• Support needed to sustain these practices.
• The role of measurement in sustaining best practices
• Other ways to sustain your program.

Please make a note of your questions. Your Quality Improvement (QI) Specialists will follow up with you after this webinar to address them.
Purpose of Sustaining Practices

• You will soon be implementing a Pressure Ulcer Prevention Program at your hospital.
• You’ll know you have successfully implemented this program when you’ve had 3 to 6 months of consistent improvement.
• Still, your hard work will not be over. To ensure that your new practices continue over the long term, you will need to take active steps to sustain them.
Challenges of Sustaining Practices

• Once the novelty has worn off, people may slowly go back to old approaches.
• Needed resources may no longer be available.
• Practices may become harder to perform.
• Staff may leave and be replaced by others who do things differently.
Risk-Adjusted Rates of Pressure Ulcer Development at VA

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New Pressure Ulcers at VA That Are Deep (Stage 3 or 4)

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Lessons Learned

• Changes can be sustained only with focused effort.
• This is true for hospitals and nursing homes.
Who Will Sustain Practices?

- Unit Champions
- Sustainability Team
Unit Champions

• Unit Champions (or staff members who serve as pressure ulcer prevention resources) are key to sustaining pressure ulcer prevention practices.

• Try to have multiple Unit Champions. That way, if one leaves, institutional memory will remain.
Unit Champions

Think about how to—

• Keep Unit Champions engaged
• Replace Unit Champions as needed
Sustainability Team Role

- Disseminate new information (staff bulletin, posters, flyers in staff bathrooms, staff education fairs, etc.).
- Hold meetings to discuss outcomes and update materials and policies.
- Keep staff enthusiastic about changes.
- Make sure data collection and reporting are fully integrated into routine work processes.
- Review literature to identify new best practices.
- Take up new challenges.
Sustainability Team Members

Team members can be drawn from the Implementation Team or Unit Champions.

If not, the Implementation Team should—

• Clearly assign roles to the new owners
• Hand off all facts about the project to the new owners
Support Needed To Sustain Practices

- What the Sustainability Team can do
- What hospital leadership can do
What Sustainability Team Can Do

• Make sure unit staff—
  – Appreciate the need for pressure ulcer prevention.
  – Know that pressure ulcer prevention is ongoing.
  – Understand their role in pressure ulcer prevention and how it relates to roles of other staff members.

• Provide feedback on the effectiveness of pressure ulcer prevention strategies, and celebrate successes.

• Provide needed training and retraining.

• Track performance routinely.
What Sustainability Team Can Do

• Design systems and prompts to ensure that care is carried out appropriately.
• Designate a sufficient number of Unit Champions.
• Integrate pressure ulcer prevention practices into existing organizational structures and routines.
• Monitor pressure ulcer rates and pressure ulcer prevention practices.
• Report to the hospital’s oversight committee.
• Request needed supplies and equipment.
What Hospital Leadership Can Do

- Fund needed supplies, equipment, training, and retraining.
- Keep abreast of pressure ulcer prevention efforts.
- Promptly fill staff vacancies.
- Support electronic data collection.
Measuring Pressure Ulcer Rates and Prevention Practices

• Purpose of measurement
• Examples of process measures
• Examples of outcome measures
• How to measure
• Plan how to assess data
Purpose of Measurement

Measuring pressure ulcer rates and prevention practices allows you to—

• Track progress in pressure ulcer rates over time
• Examine process measures and change practices, if pressure ulcer rates are not where they should be
• Keep your program on track
• Demonstrate the success of your program to leadership
Examples of Process Measures

Percentage of—

• Patients at risk for pressure ulcers with interventions in place
• Patients with a pressure ulcer risk assessment completed within 8 hours of admission
• Care plans addressing all risk factors identified

Process measures answer the question: “Are we doing the things we think will lead to improvement in outcome?”
Examples of Outcome Measures

- Pressure ulcer incidence rate
- Pressure ulcer prevalence rate
How To Measure

• Decide—
  – Who will measure pressure ulcer rates
  – Who will measure pressure ulcer prevention practices
  – Who will receive the data
  – What will be done with the data

• Set up a routine workflow for data collection.
Plan How To Assess Data

• Decide what changes in data represent a real success (or concern) for your hospital.

• This will keep you from reacting to temporary fluctuations.
Reinforcing Desired Results

• Celebrate successes
• Other ways to sustain your program
Celebrate Successes

• Recognizing the success of your Pressure Ulcer Prevention Program allows you to generate and maintain excitement about change.

• Rewards should be small, but regular. Examples include—
  – Gift certificates
  – Pizza parties
  – Plaques
Celebrate Successes

At unit level

• Find small successes early on.
  – For instance, reward unit staff the first time they complete a skin documentation form correctly.

• Raise the bar over time.
  – For instance, reward staff for no facility-acquired pressure ulcers in 3 months.

• Reward the unit with the greatest decrease in pressure ulcer incidence.

• Post results for each unit and for the hospital overall.
Celebrating Successes

At individual level

• Encourage and reward staff members who seek extra education on pressure ulcer prevention.

• Recognize one staff member each quarter for success in preventing pressure ulcers. Choose staff from a variety of disciplines.
Other Ways To Sustain Your Program

• Work with your hospital’s Quality Improvement (QI) Team to coordinate sustainability with other QI programs.

• Address staff turnover.
  – Train new staff in pressure ulcer prevention practices.
  – Integrate them into the unit’s Pressure Ulcer Prevention Program.

• Meet each month to address the root causes of pressure ulcers.
  – Hospital pressure ulcer committee cochairs, managers, and clinical staff should attend.

• Continue to celebrate successes and to measure pressure ulcer rates and prevention practices.
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Any Questions?

Thank you for being such great listeners. Please refer any questions you have to your QI Specialists.