

# AHRQ’s Safety Program for Nursing Homes: On-Time Pressure Ulcer Healing

## ***Menu of Implementation Strategies***

The On-Time Menu of Process Improvement Strategies for using reports is a list of potential ways facility teams may choose to integrate the pressure ulcer healing reports into clinical practice. A menu of potential implementation strategies is an important component of the On-Time program. The menu provides possible uses for the reports with, in this case, a focus on pressure ulcer healing. In addition, the menu considers other possible uses of the reports.

The menu of implementation strategies is intended to be used after the Self-Assessment Worksheet for Pressure Ulcer Healing has been completed.

The menu of implementation strategies lists possible meetings, huddles, and other ways that staff may incorporate a discussion of one or more of the reports into their current processes. The menu is divided by suggested options for each report. The worksheet also includes columns to identify whether a given suggested meeting already occurs or whether it is a new option that would need to be added to the workflow.

For each option listed, the team can determine if an existing meeting would be enhanced if it included a discussion of any of the reports or if new meetings are needed. The team should also determine which staff to add to those meetings to encourage multidisciplinary input. The team is encouraged to add options that are not listed on the worksheet. Offering a menu of possible implementation strategies allows the change team to consider which strategies best fit their workflow and meet the unique needs of their facility.

Once particular meetings/huddles are identified, the expectation is that the change team and the facilitator will continue to work together to reengineer existing meetings or structure new meetings to incorporate the reports. Then they will pilot the use of the reports in these meetings. Key considerations for effectively using the reports in meetings include identifying staff responsibilities and roles during the meetings, designing ways to keep the discussion of the reports focused and efficient, and encouraging appropriate input to determine changes in care plans when needed. The team may pilot report use in one unit initially and then implement in all units or implement more broadly right away.

The Pressure Ulcer Healing Menu of Implementation Strategies table below summarizes potential uses for each report, as described in each report section. See Tables 4, 6, 8, 10, and 12 in the Electronic Reports.

**Table 1: Pressure Ulcer Healing Menu of Implementation Strategies**

	Existing	New
<b>On-Time Existing Pressure Ulcer Report</b>		
Care plan meetings		
MDS assessment documentation		
Nurse shift change report		
Nursing assistant shift report		
Quality improvement review		

	Existing	New
Rehab Department internal review		
Skin rounds		
Weekly nutrition risk huddle		
Weekly risk huddle of Nursing and Rehab		
Weekly wound review meetings		
Weekly risk meeting		
<b>On-Time Pressure Ulcers at Risk for Delayed Healing Report</b>		
Care plan meeting		
Dietary Department internal review		
MDS assessment documentation		
Nurse shift change report		
Rehab Department internal review		
Quality improvement review		
Risk management meeting		
Root cause analysis for new pressure ulcers or pressure ulcers at risk for delayed healing		
Skin rounds		
Weekly nutrition risk huddle		
Weekly risk huddle for Nursing and Rehab		
Weekly wound review meetings		
Weekly wound rounds		
Weekly risk meetings		
<b>On-Time Weekly Wound Rounds Report</b>		
MDS assessment documentation		
Rehab Department internal review		
Skin rounds		
Weekly wound rounds		
Weekly nutrition risk huddle		
Weekly risk meeting		
Weekly wound review meeting		
<b>On-Time Weekly Pressure Ulcer Treatment Report</b>		
Rehab Department internal review		
Root cause analysis for new pressure ulcers or delayed healing pressure ulcers		
Weekly risk meeting		
Weekly wound review meetings		
Weekly wound rounds		
Wound coordinator review with product representatives		
<b>On-Time Pressure Ulcer Counts by Month Report</b>		
Root cause analysis for new pressure ulcers or delayed healing pressure ulcers		
Risk management meetings		
Weekly risk meetings		
Weekly wound review meeting		
Weekly wound rounds		
Wound coordinator internal review or reporting to leadership		

Key: MDS = Minimum Data Set, a standardized screening and assessment tool developed by the Centers for Medicare & Medicaid Services