



Project Name

Decrease Incidence of Adult Hospital Acquired Pressure Injury in Cardiac Surgery Intensive Care Unit to ZERO Harm.

Site

Jeddah

Department

Nursing Affairs/CSICU

Project Status

Completed

Project Start Date

03-13-2018

Project End Date

09-30-2018

Problem: Why the project was needed?

The current incidence of 6.7/1000 patient days for CSICU Hospital Acquired Pressure Injuries with Internal Trigger of 0.75 signaled to the initiation of this project. The current Risk Assessment tools for pediatric and adult population are validated tools. The current skin assessment tools in ICIS include all options as per latest evidence based practice. By improving documentation including risk assessment tools, it is hoped that patients can be accurately assessed, and the appropriate interventions provided to decrease the rate of hospital acquired pressure injuries

Benefits/Impact: What is the improvement outcome?

- Contained or reduced costs
- Improved productivity
- Improved work process
- Improved cycle time
- Increased customer satisfaction
- Other (please explain)
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Aims: What will the project achieve?

1. To improve the nursing quality of care and to decrease incidence of Adult Hospital Acquired Pressure Injury in Cardiac Surgery Intensive Care Unit from 6.7/1000 patient days to ZERO Harm

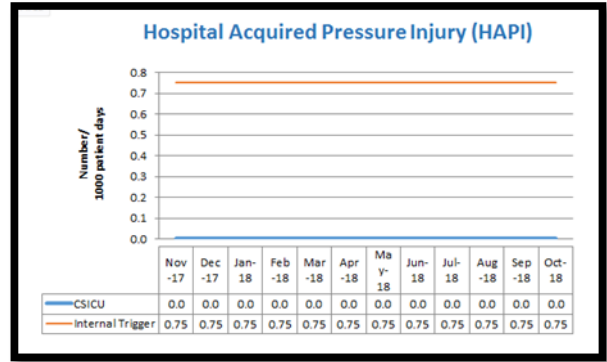
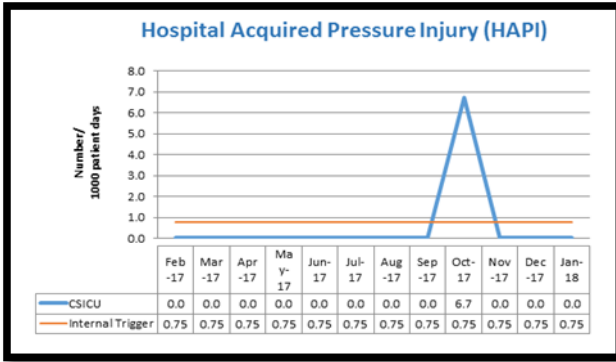
Quality Domain: Which of the domains of healthcare quality does this project support?

Patient Centred

Interventions: Overview of key steps/work completed

- Weekly Documentation Audits done by Nurse Clinician and HAPI-PI Core group. Over all Documentation Compliance result is 97%.
- At least two nursing staff will assess all pressure injuries; must be the primary nurse for the patient and/or charge nurse and/or Nurse Clinician. Prompt reporting to CSICU intensives on call and Head nurse. QIS should be generated.
- Staff Education through In-Services regarding the Stages of Pressure Injuries and Risk Assessment tools given by CSICU PI core group to all nursing staff.
- Review articles on Evidence-Based Practices – Pressure Injury Prevention Points includes Risk Assessment, Skin Care, Nutrition, Repositioning and Mobilization, Education and Documentation.
- Staff Privileging on Staging of Hospital Acquired Pressure Injuries.
- Collaborative Meeting with Unit Council.
- Head of Bed Elevation 15-30 degrees to all patients not unless contraindicated.
- The Glamorgan and Braden Risk Assessment tool for 0-18 and above 18 age group in ICIS documentation are followed. The use of these validated tools allowed for accurate risk assessment to take place and appropriate interventions based on risk assessment score of the patient are followed.
- Proper Treatment of Pressure Injuries according to hospital IPP's.
- The NPUAP has updated their guidelines and our hospital has adopted our education, assessments, and documentations accordingly.
- Continuous staff follow-up and education.
- The group identified the High Risk patients for HAPI and patients with Pressure Injury.
- Turning Sheets made available in our unit.
- 14. Turning Schedule followed. Strict compliance with changing of position Q 2 hours for high risk patients and patients with pressure injury.

Results: Insert relevant graphs and charts to illustrate improvement pre and post project



Project Lead

Name

Lorna Lynn Bumatay

Team Members

Names

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