In Medical Surgical Patients, will Conducting Multimodal Reminder Tools Increase Compliance of Documenting Pressure Injuries Present on Admission?

Caelyn Brown, BSN, RN; Zachary Hussey, BSN, RN; Lindsay Nutter, BSN, RN; Lauren St. Laurent, BSN, RN

Background/Significance

• Prevention of hospital acquired pressure injuries (HAPIs) is significant as each HAPI can increase patient acuity and costs a hospital approximately $20,900 to $151,700
• Identifying and documenting pressure injuries on admission to inpatient medical surgical units has been identified as effective strategies to prevent and manage HAPIs
• Women were identified as being more prone to developing pressure injuries than men
• Other risk factors found to increase incidence of pressure injuries were old age and underlying diseases such as diabetes, heart failure, musculoskeletal disorders, and lower Braden Scores
• By educating employees on the importance of accurate and prompt documentation of pressure injuries on admission using 4-eyed skin assessments and identifying patients at higher risk for developing pressure injuries, patients with pressure injuries can be identified and the hospital will benefit financially from reduced HAPIs

Practice Change

Increase completion of 4-eyed documentation by registered nurse’s (RN’s) at the time of admission in daily clinical practice to reduce undocumented pressure injuries and increase treatment and prevention of pressure injuries

Methods

• Incomplete rates of 4-eyed assessments
  ○ October and November indicate pre-intervention
  ○ May and June indicate post-intervention
• Presented information to staff; informational/educational materials based on pressure injury identification and documentation upon admission to staff via posters and huddles
• Distribute flyers in staff mailboxes
• Reminded staff to refer to skin assessment policy
• Undocumented pressure injuries rates from October and November indicate incidence rates of pressure injuries pre-intervention; May and June incident rates indicate Post-intervention results

Measures and Results

Multimodal Education Tools

DID YOU DO YOUR 4-EYED?

Results

Pre-intervention: October & November
Post-intervention: May & June

Summary/Discussion

• The purpose of this evidence-based practice (EBP) proposal was to identify the importance of accurately documenting pressure injuries on admission and identifying patients who were risk of developing hospital-acquired pressure injuries (HAPI)
• Educational tools such as posters, and staff huddles/meetings facilitated the increased documentation of pressure injuries on admission

Conclusion

• Findings indicate that implementing multimodal reminder tools does increase compliance with documenting 4-eyed skin assessments on admission. Documenting 4-eyed skin assessments on admission decreases the rate of undocumented pressure injuries acquired to inpatient units.
• After implementing the multimodal reminder tools on Merritt 3 Surgical, the number of 4-eyed skin assessments documented increased from October/November to May/June.
• After implementing the multimodal reminder tools on Merritt 3 Surgical, the incidence of undocumented pressure injuries present on admission decreased from October/November to May/June.
○ Limitations to this project would include not having the number of total admissions to Merritt 3 Surgical for each month. Because this data was unable to be obtained, percents of the data were not compared.

References