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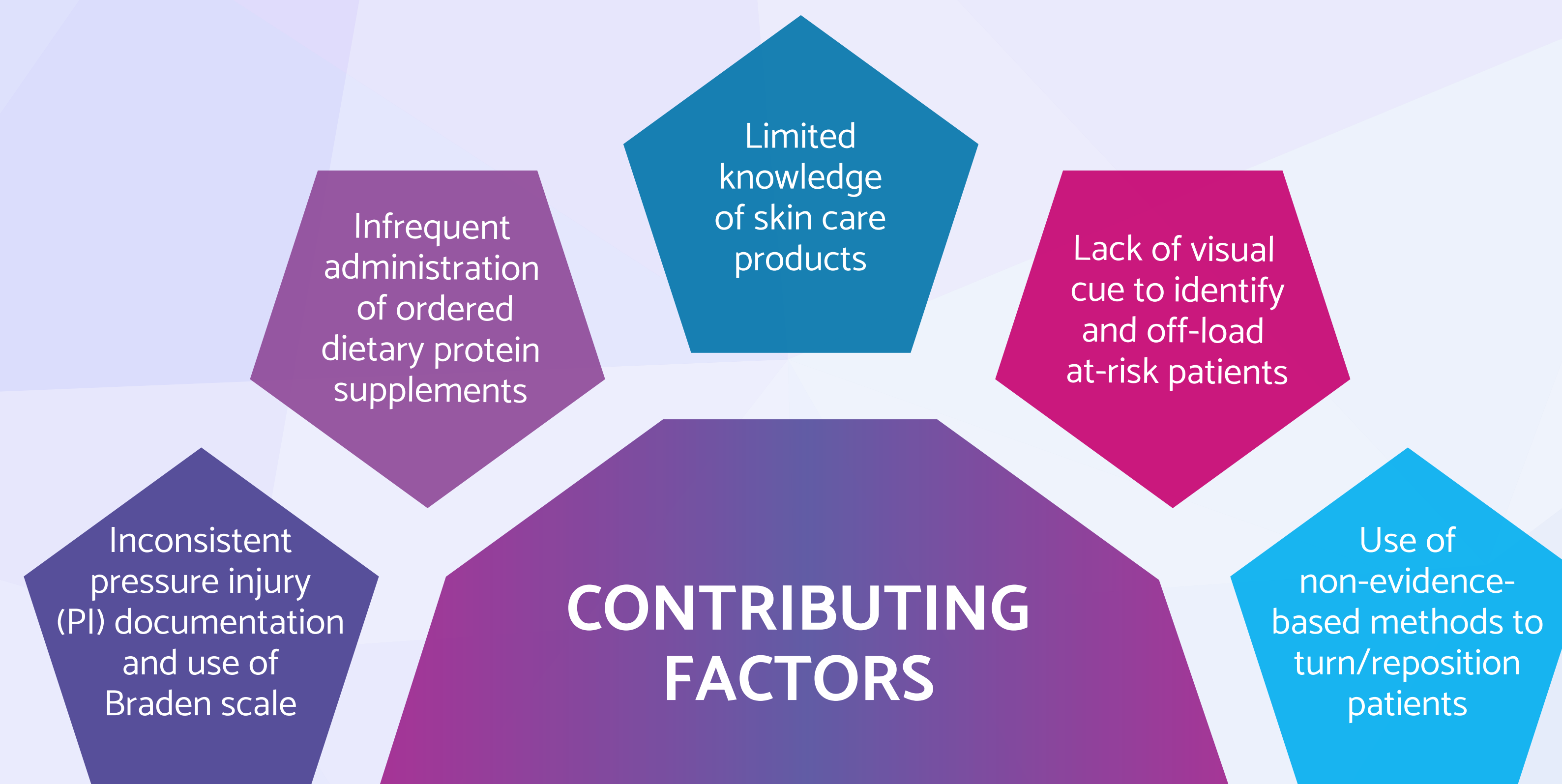
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Nurse-Driven Skin Bundle to Reduce Hospital-Acquired Pressure Injuries (HAPIs)

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Background

- Hospital-acquired pressure injuries (HAPIs) are a serious problem in “at-risk” inpatient populations
- Pre-intervention (January–November 2018) the average HAPI point prevalence survey rate at a 192-bed acute care community hospital in northeastern PA was 1.96 (exceeded the HAPI rate national benchmark of 1.73)



Objective

- At the conclusion of the offering the learner will be able to:
 - Discuss three evidence-based tactics, implemented as part of a nurse-driven skin bundle (NDSB), designed to prevent and decrease the incidence of acquiring a HAPI.

Evidence

- Several evidence-based studies show that the use of skin bundle tools significantly reduces the HAPI rate (Nursing Quality, 2016).
 - 30% reduction in HAPIs noted when a skin bundle is implemented in care (Coyer, et al., 2015).
- Increased awareness of pressure injury (PI) prevention, and PI recognition by nurses, is demonstrated through education and training as part of a skin bundle (Tayyib et al., 2015).

Methods

Preparing for Success

- **December 2018** – Certified Wound Ostomy Nurse (CWON) and the skin team (RNs and nurses’ aides) collaborated to strategize and standardize nurse-driven HAPI mitigation methodologies:
 - Conducted literature review
 - Identified evidence-based PI prevention products – stocked par levels
 - Interviewed RNs to determine needs and potential barriers
 - Educated RNs on Braden scale and identifying and staging PIs

Creating the NDSB

- Implemented the NDSB – patients with Braden score ≤ 18
- Developed an order set of PI prevention products and interventions in the electronic health record (EHR):
 - Heel boots
 - Wedge and chair cushions
 - Silicone foam dressing (if continent)
 - Barrier cream and absorbent pad (if incontinent)
 - Body moisturizer
 - Turn clock on patient’s door
 - Skin risk bracelet/skin risk patient education brochure
 - Nutritional assessment

Implementing the NDSB

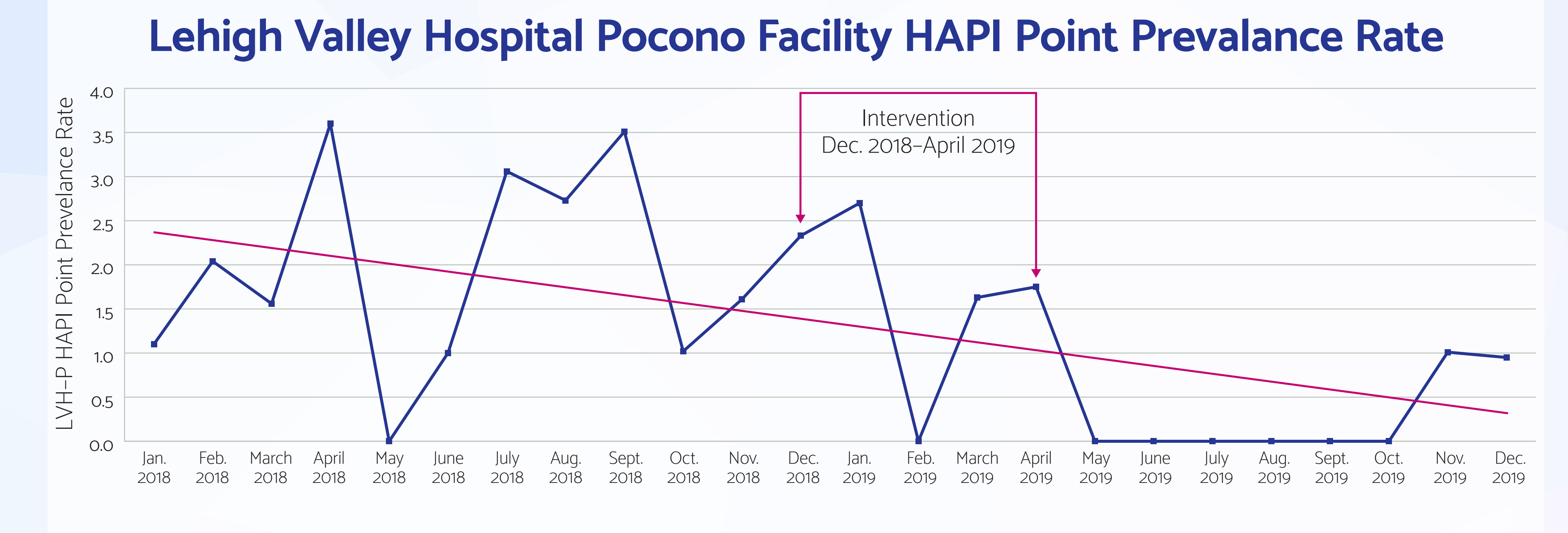
- **March 2019** – Trialed the NDSB on a 32-bed progressive care unit
- **May 2019** – Implemented the NDSB house-wide

REFERENCES

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- ² Nursing Quality. (2016, September 27). Retrieved from NDNQI a Press Ganey Solution: <http://members.nursingquality.org>
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Outcomes

- Post-intervention (May–December 2019), the average HAPI point prevalence survey rate in the institution was 0.23 – an 88% reduction in the HAPI rate



Key Learnings

- The nurse-driven skin bundle:
 - Engaged nurses to independently streamline protocols
 - Initiated immediate responses
 - Empowered bedside clinicians in the use of QI methodologies

Next Steps

- Incorporate NDSB into EHR order panel
- Place NDSB into the facility’s electronic education platform as a mandatory education tool
- Implement the skin bundle throughout all eight network campuses



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