Taking the Pressure Off in the Emergency Department

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TAKING THE PRESSURE OFF IN THE EMERGENCY DEPARTMENT

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Project Purpose:

- To identify and prevent pressure ulcers in at risk patients being admitted into the hospital from the Emergency Department

Let’s take the pressure off!
PICO QUESTION

- **PICO Question** – In all adult patients presenting in the Emergency department, does the implementation of a prompt skin assessment (initial skin assessment and reassessment prior to inpatient admission) result in an increase in reportable skin breakdown compared to standard protocol?

  - **P** - All adult patients presenting to the Emergency Department
  - **I** - Initial skin assessment and reassessment prior to inpatient admission
  - **C** - Standard protocol (assess within two hours of hospital admission)
  - **O** - Increase in reportable skin breakdown incidents
EVIDENCE

- Emergency Department duration of stay
- Populations at risk
- As per HBI, there is a total of 858 pressure ulcers reported in the past 24 months for CC and Muhlenberg
- As per RL solutions reporting system for the month of February 2015, 118 pressure ulcers were reported
  - 85/118 were reported present on admission (POA) or present when admitted from another facility
    - Of that 85, 49 were reported from the ED
      - 12-CC
      - 36-EDM
      - 1-ED 17TH
Current LVHN Policy

- No specific policy for LVHN Emergency Department
- What is currently being done in the ED
  - Skin inspection within two hours of admit
  - Submission ET/PT/Wound healing Team Consult
  - PSR
- Noted inconsistency with skin inspection documentation
BARRIERS & STRATEGIES

- **Barrier:**
  - ED overcapacity
  - Admission holds in the ED
  - Lack of reassessment
  - Lack of knowledge
  - Lack of time and resources for preventive measures

- **Strategy to Overcome:**
  - Prompt skin assessment
  - Identify at risk patients
  - Removal of pt clothing during ED visit
  - Reassessment of admitting patients
  - Proper hand off communication
Expected Outcomes

- Focused approach to pressure ulcer prevention
- Increase reportable skin breakdown
- Alleviate hospital financial cost
PROJECT PLANS

- Prompt skin assessment in EMR
- Formulating a more precise and feasible skin assessment protocol for Muhlenberg Emergency Department
- Communication tool to the Inpatient Units
Implementation

- Employee in-service
- Skin Champion recognition
- Pre-Intervention Survey
- Skin Assessment hand off sheet
Questionnaire for Skin Assessment Communication from the ED to the Admitting Unit

Are you aware that a skin assessment was completed on your patient admitted via the ED?

☐ Always  ☐ Sometimes  ☐ Never

Are you aware that a skin patient safety report was submitted if necessary on your patient admitted via the ED?

☐ Always  ☐ Sometimes  ☐ Never

Are you aware if protective skin barrier products have been utilized on your patient admitted via the ED?

☐ Always  ☐ Sometimes  ☐ Never
Respondents aware skin assessment completed by ED

Pre-Survey Results:
Skin Assessment Hand-Off Communication Form

- Always
- Sometimes
- Never

Respondents aware protective skin barrier product utilized

Respondents in favor of a skin assessment hand-off communication form

Respondents in favor of a skin assessment hand-off communication form
October 2013 - June 2014
384 Total Patient Safety Reports
42,091 Total ED Visits

October 2014 - June 2015
402 Total Patient Safety Reports
42,116 Total ED Visits
Results/Outcomes

▪ Missed Pressure Ulcers on Admission from Emergency Department Muhlenberg:
  
  - April – ZERO
  - May – ZERO
  - June - ZERO
Change in Practice

- Prompt skin assessment and reassessment
- Effective communication tool to inpatient unit
- Reposition every two hours and/or as needed
- Protective skin barrier products
References


Questions or Comments?

Did you turn me today?
Make It Happen

- Let's Save Some Skin!

STOP PRESSURE ULCERS