

## **Basics & Beyond**

## Mercy Medical Center, Springfield, MA, implements a program to decrease pressure ulcers.

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By Margaret-Ann Azzaro, MSN, RN

As the Centers for Medicare & Medicaid Services (CMS) continue to provide less payment for hospital acquired pressure ulcers, increased demands are placed on nurses to reduce the number of patients who acquire these conditions. As pressure-ulcer incidence rates continue to rise, more hospitals are implementing intervention and prevention programs in order to combat pressure ulcer occurrence and improve patient care.

To prevent potential pressure ulcers, Mercy Medical Center, Springfield, MA, decided to create and utilize a Pressure Ulcer Prevention Program (PUPP). The program was designed specifically for the hospital's respiratory unit, which was experiencing the highest pressure ulcer incidence rate of any unit throughout the acute care facility. The purpose of the PUPP was to decrease the number of hospital acquired pressure ulcers in patients with multiple comorbidities who were being treated here.

## **PUPP Champions**

To begin, the Pressure Ulcer Prevention Team utilized evidence-based research to design and implement a PUPP, a comprehensive program comprised of nursing interventions, state-of-the-art products and nursing staff education. The team also designated skin champions within the unit who would ultimately prove invaluable to the overall implementation and success of the

program.

The champions included the unit supervisor, clinical nurse specialist, members of the pressure ulcer prevention team and various nursing staff, including RNs and patient care technicians (PCTs). Each staff member on the unit was given a two-sided PUPP badge. One side listed the PUPP

PUPP badge. One side listed the PUPP interventions, while the other side displayed a specific turning schedule. Each Respiratory Unit patient was assessed utilizing the Braden Scale to determine their risk of developing a pressure ulcer. The patients with a Braden Scale of 14 or less were placed in the PUPP.

A signal device exclusive to the PUPP program was placed outside of the room and above the head of

the bed of every PUPP patient. The signal device not only identified each patient who was at risk for developing pressure ulcers, but it also helped to raise awareness for the entire hospital staff.

## **Reducing Pressure Ulcers**

A comprehensive approach to education was a key component to the PUPP's success. All RNs and PCTs on the unit were educated on the proper assessment of pressure-ulcer risk, pressure-relief measures, pressure-ulcer prevention strategies, proper product utilization and the staging of wounds.

Mercy Medical Center's PUPP began in October 2008 and still continues today. Seventeen months prior to implementing this initiative (May 2007-September 2008), the facility experienced eight hospital-acquired pressure ulcers in the respiratory unit.

Seventeen months after the program's inception, the facility identified only one hospital-acquired pressure ulcer, an 88 percent reduction in the number of hospital-acquired pressure ulcers for this 17-month period. The 26-bed pulmonary med/surg unit went from having the highest hospital acquired pressure ulcer incidence rate in Mercy Medical Center to the lowest. By having a comprehensive approach that combined pressure reduction devices, back-to-basics education, interventions, and a simple signal device, Mercy Medical Center was able to not only decrease their nosocomial pressure ulcer rate, but they were also able to raise nursing staff awareness in the promotion of best practices for their patients.

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