**NK7EO-12 PROCESS IMPROVEMENT TEAM**

**Pressure Ulcer Prevention in ED**

**Date initiated: 7/2011**

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| **F** | **Find A Process To Improve:** Nosocomial pressure ulcers continue to occur at PSF. Patients stay in ED on poor gurney mattresses. Patients arrive to nursing units with undocumented pressure ulcer. |
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| **O** | **Organize A Team:** ED Unit Practice Council, (C Imlay, C Tumanis, L Montijo), Wound Clinical Manager (R Salmore). |
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| **C** | **Clarify Knowledge of the Current Process**:* approximately 35% of patients are admitted from the ED
* Patients stay in ED long periods of time on poor mattresses
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| **U** | **Understand Variation:** Unsure if ED staff are aware of methods to prevent PU. Admission assessment should include looking at back and heels. Patients arrive to nursing unit with undocumented PU |
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| **S** | **Select An Improvement Strategy** |
|  | Investigate correlation between ED stay and subsequent development of PU on nursing unitsInvestigate pressure redistribution mattress overlay that is affordableDefine criteria for use: * Any patient from LTC/SNF
* Any patient with very poor skin – cachectic, “prednisone” skin
* Any patient with anticipated stay in ED > 2 hours
* Any patient with mobility impairment-Paraplegic, Quadplegic, MS, ALS etc.
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| **P** | **Plan The Pilot Improvement And The Data Collection** |
|  | * Select mattress overlay (sample obtained and presented to staff for review 8/11) – Request product approval from SMAT (RSalmore)
* Educate staff on PU prevention (RSalmore)
* Educate staff on use of mattress overlay (C Imlay and UPC)
* Develop data collection tool to monitor mattress overlay use (C Imlay and UPC)
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| **D** | **Do The Pilot Improvement And Collect The Data** |
| **C** | **Check The Results Of The Implementation** |
| **A** | **Act To Hold The Gain And Continue Improvement** |