Improving the Process: Pressure Injury Prevalence Survey



Lorjane Palacio RN, WCC, OMS; Marisa Dela Rosa RN BSN, WCC,COCN,CCCN; Allen Del Mundo RN BSN, WCC, WTA-C; Tania Anderson RN, WCC, OMS;

David Tavera RN, BSN, WCC; Julie Constantino RN, BSN

BACKGROUND

Every 2 months the WOC Nurse Team conducts an NDNQI pressure injury prevalence survey throughout the entire hospital. This survey aims to monitor the prevalence of pressure injuries in the hospital, distinguishing between those present on admission (POA) and those acquired during hospitalization (HA). It also seeks to evaluate the effectiveness of interventions implemented to reduce the incidence of pressure injuries. This survey is carried out in a 1 day time period, encompassing a full body skin assessment, chart review and data entry of all admitted patients in 23 inpatient units. The number of patients seen during this survey averages approximately 436. The sheer amount of patients to be seen and the amount of data to be collected is a very daunting task. In previous years, conducting the prevalence survey was a labor-intensive process that involved 40-60 individuals and the WOC nurse team. The entire procedure spanned more than 10 hours, requiring considerable manpower to manage and execute the survey efficiently. This extensive effort was not limited to just the survey day; it also encompassed significant preparation time before the survey began and additional hours spent analyzing the data collected afterwards. The preparation involved organizing resources and training participants, while post-survey phase required thorough data analysis to ensure accuracy and completeness. Overall, the entire process was resource-heavy, reflecting the complexity and scale of the survey operation.

PURPOSE

The main goal of improving the pressure injury prevalence survey process was to boost efficiency and data accuracy while reducing manpower and eliminating time waste.

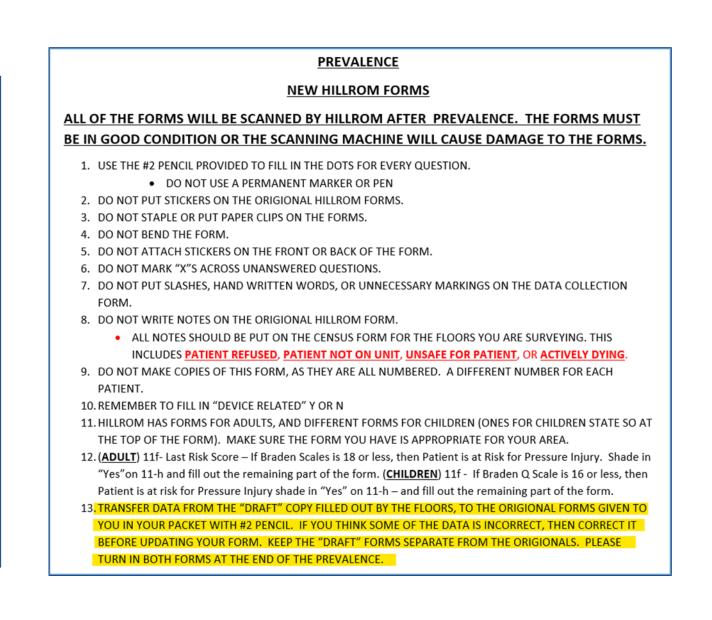
METHODS

2018-2019

UMC RESTRAINT & PRESSURE INJURY PREVALENCE SURVEY Attach Putient Sticker Here or Complete the Following:	UMC RESTRAINT & PRESSURE INJURY PREVALENCE	Name:
PRE-SURVEY CHECK LIST – September 19, 2019	SURVEY QUESTIONNAIRE – September 1	9,2019
Please complete this form in its entirety for each patient regardless of restraint or pressure injury status. Do not skip items unless stated to do so. THIS FORM IS NOT A PART OF PATIENTS AMERICAL RECORD MINU.	Please complete this form in its entirety for each patient regard or pressure injury status. Do not to skip items unless state THIS FORM IS NOT A PART OF PATIENT'S MEDICAL RE	d to do so.
NIT: Room/Bed #:	UNIT: Room/Bed #:	DOB:/_/ Admit Date:/_/
ENDER: AGE: SEATIONAL AGE AT BIRTH: I FEMALE MONTHS (Patients 1 year old and above) GESTATIONAL AGE AT BIRTH: I FEMALE MONTHS (Patients younger than 1 but older than 30 days) (For NICU Patients Only): I MALE DAY's (Patients younger than 30 days)	If patient excluded from the Survey, please identify the reas	
PRESSURE INJURY SKIN AND RISK ASSESSMENT	Restraint in use? Restraint T	
Vas SKIN ASSESSMENT documented within 24 HOURS Was PRESSURE INJURY RISK ASSESSMENT documented within 24	☐ Yes ☐ Limb ☐ Ves ☐ No – Skip to Pressure Injuries Section ☐ Other:	
Applission	Justification □ Prevent Falling out of Bed without Assistance □ Prevent Removing Equipment / Therapeutic Modalities	for Restraints: Reduce Harm to Self Other Reduce Harm to Others Unknown
DMISSION PRESSURE INJURY RISK ASSESSMENT SCALE:	PRESS	URE INJURIES
Braden □ Braden Q □ Other (If assessed risk using another scale or other patient risk & clinical factors):	Total # of pressure injuries (If none, enter 0 – the form is co	mplete. If 1 or more, complete information below):
DMISSION RISK ASSESSMENT SCORE: low long ago was LAST PRESSURE INJURY RISK ASSESSMENT Performed: >0 - 12 Hours	# "Location 1 2 3 4 USP! OTP! WMAP! MAPP! Yes 1 2 3 4 5 5 6 6 7 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Hand, Arm, Cillow, Shoulder, Anterior thorax, Posterior thorax, Scapula, Spice,
ased on the LAST assessment, is patient at risk for pressure injuries?	Sacrum/Cocoyx, Buttock, Ischium, Trochanter, Thigh, Knee, Lower leg, Ankle, Heel, F	HOSPITAL ACQUIRED (HAPI) UNIT ACQUIRED (U
Yes, based on Risk Assessment Score Yes, based on other patient risk & clinical factors	Please Enter Total Number of Pressure Injuries:	
ressure injury prevention in use within past 24 hours for at risk patient? Yes Pending (If admitted within last 24 hours) – Checklist Complete No – Checklist Complete	Please Enter Total Number Related to a MEDICAL DEVICE:	
	Please Enter Number of Pressure Injuries at each STAGE:	
TYPES OF PREVENTION INTERVENTIONS IN USE WITHIN PAST 24 HOURS FOR AT RISK PATIENTS	• Stage 1	
kin assessment documented? Number of Layers under the patient:	Stage 2	
	Stage 3	
outine repositioning as prescribed? Nutritional support? Yes No Contraindication Documented Yes No Contraindication Documented	Stage 4	
☐ Unnecessary of Patient Diet Type: ☐ Unnecessary of Patient ☐ Patient Refused Supplements: ☐ Patient Refused	Unstageable (USPI)	
ressure redistribution surface use? Moisture management?	Deep Tissue Pressure Injury (DTPI)	
Yes □ No □ Contraindication Documented □ Yes □ No □ Contraindication Documented	Mucosal Membrane Pressure Injury (MMPI)	
☐ Unnecessary of Patient Type: ☐ Unnecessary of Patient ☐ Patient Refused ☐ Patient Refused	Non-Visible Pressure Injury (NVPI)	

Patient Sticker Information	
Name	
HAR	
CSN	
MRN	
DOB	
Admit Date	
Pre-Survey Checklist	
Unit	
Bed#	
Gender	
Age (Number)	
Age (Years, Months, Days)	
Gestational Age at Birth (in Weeks) - For NICU Patients Only	
Pressure Injury Skin and Risk Assessments	
Was skin assessment documented within 24 hours of admission?	
Was pressure injury risk assessment documented within 24 hours of admission?	
Admission pressure injury risk assessment scale	
If Other, please specify	
Admission risk assessment score	
How long ago was last pressure injury risk assessment performed?	
Last pressure injury risk assessment scale	
If Other, please specify	
Last risk assessment score	
Based on the last assessment, is patient at risk for pressure injuries?	
Pressure injury prevention in use within past 24 hours for at risk patient?	
Types of Prevention Interventions in Use within past 24 hours for at Risk Patients	
Skin assessment documented?	
Number of Layers under the patient:	
Routine repositioning as prescribed?	
Nutritional support?	
If Yes, please enter diet type	
If Yes, please enter supplements	
Pressure redistribution surface use?	
Moisture management?	
If Yes, please enter type	
Survey Questionnaire	
Unit	
Bed #	
If patient excluded from the Survey, please identify the reason	
If patient excluded from the Survey, please identify the reason Restraint Information	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use?	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use? Restraint Type	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use? Restraint Type Restraint Category	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use? Restraint Type Restraint Category Justification for Restraints - 1	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use? Restraint Type Restraint Category Justification for Restraints - 1 Justification for Restraints - 2	
If patient excluded from the Survey, please identify the reason Restraint Information Restraint in use? Restraint Type Restraint Category Justification for Restraints - 1	

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CONCLUSION

RESULTS

manpower. Six teams were formed, each consisting of one WOC nurse

as team lead and skin assessor, one recorder responsible for entering

data into the web-based portal, and one or two pairs of turners. Each

reduced the overall survey time by approximately 40% and manpower

requirements by 50%. Additionally, the accuracy of the collected data

team was assigned a specific timeline, detailing the time, unit and

rooms they were tasked with surveying. This streamlined approach

improved significantly compared to previous methods.

Beginning in December 2023, the pressure injury prevalence survey

process was revamped to increase time efficiency and reduce

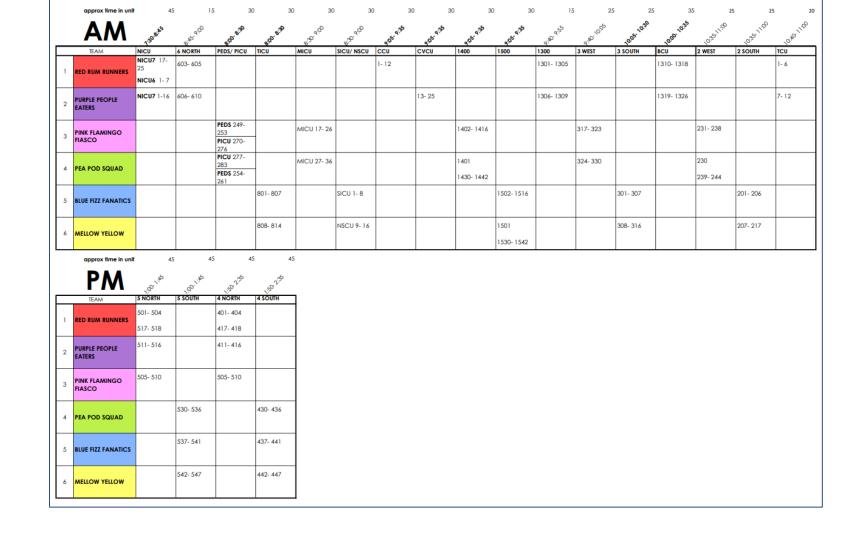
In conclusion, the December 2023 overhaul of the pressure injury prevalence process provided highly effective in achieving its goal. While the process is not without imperfections, it continues to be evaluated and refined for greater efficiency.

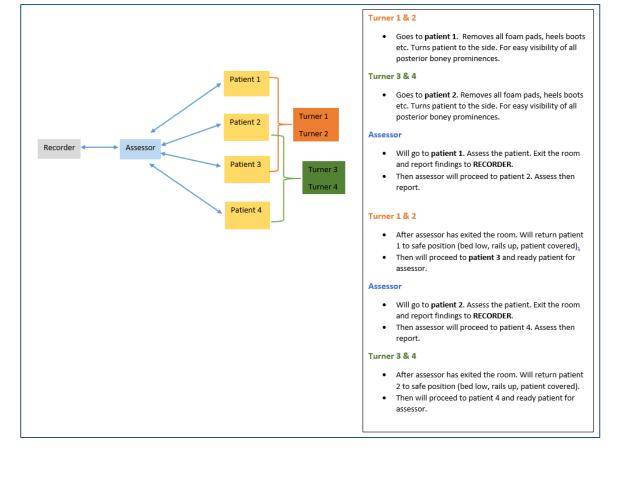
ETUODC

By analyzing the various processes, workflows and survey forms used from previous years, areas of time inefficiency was identified. To address these areas, process mapping was employed to visualize and streamline the workflow. Survey forms were eliminated, and only essential data required by NDNQI was collected. This data was then directly entered into a web-base portal after each patient. This approach helped reduce redundancies and unnecessary steps, enabling more efficient allocation of resource and time management during the prevalence survey.

2023

2021







REFERENCES

Knight, J., Miller, Jean Ann, Bush, S., Wagner, S., & Gevaart, M. (2019, November). Pressure Injury and Restraint Prevalence Surveys: Saving Time and Dollars for Patient Care by Automating Manual Chart abstraction.

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