

Improving the Process: Pressure Injury Prevalence Survey

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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

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.

2018- 2019

2020

2021

2023

RESULTS

Beginning in December 2023, the pressure injury prevalence survey process was revamped to increase time efficiency and reduce 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 team was assigned a specific timeline, detailing the time, unit and rooms they were tasked with surveying. This streamlined approach reduced the overall survey time by approximately 40% and manpower requirements by 50%. Additionally, the accuracy of the collected data improved significantly compared to previous methods.

CONCLUSION

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.

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. https://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1067&context=ichita_transactions

