

BACKGROUND

Hospital-acquired pressure injuries (HAPIs) are a significant concern in acute care settings, impacting patient outcomes and healthcare costs. On 5 North, a 32-bed medical-surgical unit, a focused initiative was launched in Quarter 3 of 2023 to reduce the unit's HAPI rate, which was 7.69 per 1,000 patient days. The strategy involved creating a "Turn Team," a collaborative model involving all bedside clinical staff. The team was responsible for turning every patient with a Braden Score of 18 or below every two hours and ensuring all appropriate preventative measures were in place. These included the application of foam border dressings, heel protectors, and positioning wedges.

PURPOSE

This clinical project aimed to uplift nursing practice by utilizing available resources and reducing undesired consequences of HAPI's such as adverse patient outcomes, staff injuries and unnecessary costs.

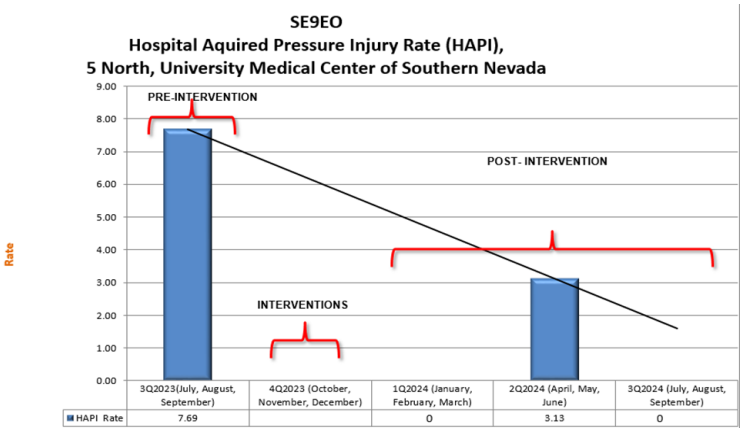


METHODS

Education and accountability were integral to the success of the initiative. Staff received targeted training on pressure injury prevention, Braden scoring interpretation, and use of preventative devices. Real-time reminders, documentation cues, and huddle-based communication supported sustained engagement. The initiative promoted shared ownership of patient safety and fostered a culture of teamwork and accountability.

The process is identified as follows:

- RN's update and document their Braden scores by 0900 (2100 for night shift).
- Braden Scores of 18 and below will be placed on the "turn team list".
- Staff is paired together at designated times to go turn all patients on the list to offload pressure on high-risk pressure areas and eliminating barriers that increase risk of HAPI'S such as: cleaning soiled patients, applying wedges if missing, elevating heels etc.
- Shift change both shift turn patients together.



RESULTS

As a result, the unit's HAPI rate steadily declined, reaching zero by Quarter 3 of 2024. This outcome reflects not only adherence to evidence-based practices but also the power of a unified team approach in driving quality outcomes.

CONCLUSIONS

The success of the 5 North Turn Team has sparked interest in replication across other units and care settings within the organization. This project highlights the effectiveness of nurse-led, unit-based initiatives in achieving sustainable improvements in patient care.

REFERENCES

