

# **Pennsylvania Pressure Ulcer Partnership**

## **Action Goals and Objectives**

### **Overarching Program Goal:**

To reduce the incidence and severity of pressure ulcers in hospitals, health systems, longterm care facilities, hospices, home care and staffing agencies across the state of Pennsylvania.

**Action Goal 1:** Promote and cultivate an organizational commitment to preventing and treating early stage pressure ulcers.

#### **Objectives:**

- Demonstrated commitment of senior leadership
- Demonstrated commitment of medical leadership
- Demonstrated commitment of nursing leadership
- Organization-wide pressure ulcer awareness and commitment

**Action Goal 2:** Utilize a multidisciplinary team to lead pressure ulcer prevention and early stage treatment efforts

#### **Objectives:**

- Identification and participation of wound care experts, physicians, nursing, frontline staff, nutritionists, physical therapists/occupational therapists, etc.
- Development/review/revision of protocols related to pressure ulcer prevention and early stage treatment
- Identification of appropriate resources to support pressure ulcer prevention and early stage treatment within the organization
- Identification of unit-based staff champions

**Action Goal 3:** On admission, assess patients/residents for risk of pressure ulcers and conduct an initial skin inspection for skin abnormalities (e.g., non-blanchable erythema, signs of deep tissue injury, pressure ulcer).

#### **Objectives:**

- Delineation of responsibility and accountability to appropriate staff for risk assessment and initial skin inspection
- Designation of standard timeframe for completion of risk assessment
- Standardization within the organization of risk assessment processes and thresholds for identifying patients at risk
- Establishing a mechanism for incorporating clinical judgment to supplement standardized risk assessment scales
- Establishing communication mechanisms for collaboration between designated staff and physicians in identifying and staging pressure ulcers
- Establishing a mechanism for appropriate and timely intervention, if indicated (see Action Goal 6 for details)
- Standardized documentation of risk assessment
- Standardized documentation of observed wound assessment using a form that includes prompts for a thorough description (e.g., location, size, and coloration).

**Action Goal 4:** Inspect skin for all patients on a periodic basis.

**Objectives:**

- Delineation of responsibility and accountability to appropriate staff for skin inspection
- Designation of standard timeframe for completion of skin inspection
- Establishing a mechanism for appropriate and timely intervention, if indicated (see Action Goal 6 for details)
- Standardized documentation of observed wound assessment using a form that includes prompts for a thorough description (e.g., location, size, and coloration).

**Action Goal 5:** Reassess patients/residents for risk of pressure ulcers on a periodic basis.

**Objectives:**

- Delineation of responsibility and accountability to appropriate staff for reassessment
- Designation of standard timeframe for periodic reassessment
- Determination of triggers for reassessment (e.g., change in condition, intra- or inter-facility transfer)
- Establishing a mechanism for appropriate and timely intervention, if indicated (see Action Goal 6 for details)
- Standardized documentation of risk reassessment

**Action Goal 6:** Provide appropriate and timely interventions for patients/residents at risk for pressure ulcers.

**Objectives:**

- Delineation of responsibility and accountability to appropriate staff for providing interventions
- Providing basic interventions for all patients at risk including, but not limited to:
  - ✓ Providing pressure-reducing surfaces
  - ✓ Repositioning at appropriate time intervals
  - ✓ Managing moisture
  - ✓ Preventing shear injury by using appropriate repositioning techniques
  - ✓ Addressing nutrition and hydration needs
- Ensuring that equipment and supplies pertinent to pressure ulcer prevention are readily available
- Establishing triggers that indicate need for additional interventions.
- Requesting timely consultations, as appropriate. (e.g., wound care specialist, physical therapy, occupational therapy, nutritionist)
- Standardized documentation of interventions
- Evaluating interventions periodically for both appropriateness and effectiveness.

**Action Goal 7:** Establish mechanisms for effective communications between all members of the patient's care team and ancillary staff involved in patient handling, positioning, or transferring between surfaces (e.g., bed to chair, chair to toilet, stretcher to exam table) relative to patients at risk.

**Objectives:**

- Providing visual cues or identifiers for patients at risk for pressure ulcers
- Establishing mechanisms for effective communication with physicians to facilitate appropriate and timely orders for interventions
- Establishing mechanisms for effective communication with staff during shift hand-offs and transitions of care within the facility.

**Action Goal 8:** Establish mechanisms for effective communication between facilities upon transfer.

**Objectives:**

- Delineation of responsibility for transfer communication and follow-up
- Standardization of transfer documentation to include:
  - ✓ Standardized location of information
  - ✓ Current risk assessment
  - ✓ Skin and observed wound assessment
  - ✓ Current interventions (if applicable).
- Standardized methods of coordination between facilities with frequent inter-facility transfers

**Action Goal 9:** Educate pertinent staff on pressure ulcer prevention and early stage treatment strategies and continually reinforce their importance.

**Objectives:**

- Education of physicians and staff on the importance of pressure ulcer prevention
- Education on defined roles, responsibilities, and processes in pressure ulcer prevention
- Provision of follow-up education regarding accuracy of assessments, as warranted.
- Provision of follow-up education regarding appropriateness of interventions, as warranted.
- Provision of follow-up education regarding skin inspections and accuracy of in recognizing skin abnormalities and/or variations from last skin inspection, as warranted.

**Action Goal 10:** Implement a method for monitoring progress with pressure ulcer prevention and early stage treatment strategies and providing feedback to staff.

**Objectives:**

- Use of process measures data to design targeted educational interventions and improve resource allocation
- Use of outcomes data to assess impact of the skin care program
- Periodically monitoring risk assessments for accuracy
- Periodically monitoring skin inspections for accuracy in recognizing skin abnormalities (e.g., non-blanchable erythema, signs of deep tissue injury)
- Periodically monitoring interventions for both appropriateness and effectiveness.
- Use of feedback to acknowledge and celebrate success and identify areas that require further effort