

Healthcare organization: strategy for pressure ulcers



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Pressure Ulcers

Abstract

This paper will identify a QI/Ethical issue (pressure ulcer) and what facility this issue has been found. This paper will talk about the organization, aspects of that organization and the effect it has on pressure ulcers. This paper will also talk about how this issue relates to the mission, vision and values of this organization. This paper will identify one solution that can help resolve the issue.

Healthcare Organization: Strategy for Pressure Ulcers

There is an issue in the health care field that needs to be addressed and looked at closely to remedy the situation. There are many patients that are not able to move around like they should. Patients do not always reposition themselves as often as they should either. When a patient is lying or sitting in the same position for too long this puts pressure on the tissues that are being compressed. The pressure from not repositioning results in less oxygen and nutrients to that part of the body. The cells will not be able to properly get rid of the waste from those cells and this results in damaged cells. If a patient is admitted with a pre-existing pressure ulcer, it is vital that the patient is repositioned to promote blood flow to those tissues and the removal of wastes from the tissue. If this is not done the pressure ulcer will get worse. This is important because some patients are not able to move themselves and need others to make sure they are repositioned to prevent this issue.

Hospital-acquired development of pressure ulcers has shown that there is a correlation with patients coming back to the hospital a month after discharge (Guzman, J. L., McClanahan, R., & Vaughn, S. (2018). Pressure ulcers are showing up more in long term facilities. Pressure ulcers need to be in the mind of every healthcare professional. There is also a correlation in hospital mortality rates and in patients a month after discharge (Guzman, J. L., McClanahan, R., & Vaughn, S. (2018). Pressure ulcers can cost two hundred dollars or one hundred thousand depending on how bad it is (Guzman, J. L., McClanahan, R., & Vaughn, S. (2018). A Hill Rom International Pressure Ulcer Prevalence survey was used and found that many patients had a low Braden Scale Score on admission and even after they developed pressure ulcers (Guzman, J. L., McClanahan, R., & Vaughn, S. (2018). The survey also found that facilities with air mattresses were not using them properly. Skin care and nutrition play a big role in the development of pressure ulcers as well.

Good Samaritan Society

The facility that we went to was Good Samaritan Society in Inver Grove Heights. The facility was very clean and looked very nice. When looking up this nursing home in a nursing home comparison site, this nursing home has a rating of four stars out of five. This is a good rating from a site that is governed by the government. This facility does a full body assessment of new admits within fourteen days of admission (a skin assessment is done within the first two hours). Then another at thirty, sixty and ninety days. They also have annual assessments. The Braden Scale is done in those assessment and if certain criteria are not met in the assessment this triggers a care area in their computer system like bed mobility is low, for example.

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When a care area is triggered (like bed mobility is low), they will have a meeting with the healthcare team to figure out a plan of action to correct the area. This includes the floor nurse, a wound nurse, nutritionist and nurse manager. They will look over what needs to be done to correct the care area. This may include adding more protein to the patient's diet or make sure the resident is being repositioned at the appropriate times. This facility has special air mattresses that will help prevent pressure ulcers and cushions for wheelchairs or recliners.

One drawback at this time would be charting on a stage one ulcer must be done in a different section as stage two, three, or four pressure ulcers. This opens a door to errors. The charting on any pressure ulcers should all be in the same section. This makes more sense because they will not have to look in a different area to see the potential pressure ulcer getting worse. This facility is going to switch over to a new system in September of this year, that should fix this issue. This facility does a great job in preventing pressure ulcers, but there is always room for improvement.

How this issue relates to the mission, vision and values of the facility

The Good Samaritan Societies mission is to share God's love in word and deed by giving shelter, services to older people and others in need. This facility treats every patient with respect, dignity and compassion. This facility has forty-six total beds and three to four aides to help with care on each shift. Pressure ulcers relate to the mission, values in the fact that they want to prevent them and heal ulcers that are present with new admissions. They are giving shelter and helping those that come to them. Looking at the facility and how they interact with their patients, they take appropriate

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measure to heal and prevent pressure ulcers and that fulfills their mission statement. This facility does not have a specialized wound nurse yet but have someone being trained to ensure positive outcomes for their patients. Stated earlier they use repositioning air mattresses to help decrease the incidence of pressure ulcers in their patient population. This is one aspect of the holistic care and how this organization is providing care to cure the whole person, not just one aspect. When a resident refuse's to be repositioned, the staff will respect the patient's right to refuse, but will re-approach patient in a little while after. Nurses at this facility check and follow up with the CNA's to make sure that repositioning is occurring at appropriate times and charting is done to reflect the reposition. This is very important in the healing and prevention of pressure ulcers. The staff has a briefing before every shift to collaborate on the best plan of care for each resident.

The fourth quarter review of this year manifested that no pressure ulcer in the long-term care had gotten worse or any resident develop a new pressure ulcer. Every bed in the facility has an air mattress on it, that is the standard for this facility. One resident had a pressure ulcer which was manifested before admission. Reflecting on the fourth quarter review, it is apparent that this facility is backing up its mission statement and taking very good care of their residents.

Solution to the problem

One way to make sure that pressure ulcers do not occur or get any worse if there is a pre-existing ulcer is to educate the CNA's on pressure ulcers so that they can alert the nurse to come and assess the patient as needed. It is

very important that all staff, even healthcare supportive staff, be educated about pressure ulcers and what to watch out for (REECE, R. (2017). Pressure ulcers can be prevented and need the help of the entire healthcare team (REECE, R. (2017). Pressure ulcers are caused by many factors so everyone on the team must be looking out for risks of pressure ulcers. My solution would be education, even down to the healthcare supportive staff. We need to make sure that they understand the importance of why patients need to be repositioned and what signs to watch for. They could write the time of repositioning on the white board in the patient's room and the time the next repositioning should take place. When they understand this, they will be better equipped to notice a spot on the skin and notify the nurse that she needs to assess that area. Early detection can be the difference between a few hundred dollars a few hundred thousand. This article collected data and determined that patients that have developed pressure ulcers passed after eight weeks of development (WHITE, K. (2017). This is an issue that needs to be investigated and prevented to better serve our patient's needs. There is evidence of a correlation between pressure ulcers, use of more drugs and longer hospital stays (Magri Bernardes, R., & Larcher Caliri, M. H. (2016). Educating all the healthcare team on this issue could possibly save patients, hospitals and long-term care facilities hundreds of thousands of dollars.

Conclusion

Pressure ulcers are very important and can be prevented. The Good Samaritan Society does a great job preventing and healing pre-existing pressure ulcers. There is room for improvement like having stage one, two, three and four pressure ulcers charted in the same place. This discrepancy <https://assignbuster.com/healthcare-organization-strategy-for-pressure-ulcers/>

should be taken care of in September when this organization changes their charting system. This would help in tracking if an ulcer is getting better or worse and the plan of care needed to heal them. The prevention of pressure ulcers could cut costs to patients, organizations and cut down on the length of hospital stays. One solution to prevent a pressure ulcer is educating the healthcare assistive personal and implementing a plan to write the time of repositioning on the whiteboard in the patient's room. I would recommend writing the time of the next repositioning as well. Assistive personal can become very busy, it can be very easy to forget what time to reposition a resident.

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