# **Driving Change from the Bedside** A staff nurse initiative to reduce hospital acquired pressure ulcers

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### PURPOSE

n today's volatile healthcare environment nursing leadership must ensure that the best care is delivered in a fiscally responsible manner.

At Hudson Valley Hospital Center (HVHC) we embarked or a journey to decrease our hospital acquired pressure ulcer rate though evidence-based initiatives and staff engagement in problem-solving, guided by our Chief Nursing Officer (CNO)

### INNOVATION IN PRACTICE

Challenges in pressure ulcer assessment and care emerged. Corrective actions were implemented in the form of new processes, protocols and a new model of care delivery created by our staff nurses:

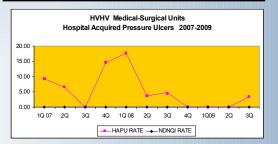
**TURNING TEAM ROUNDS** 

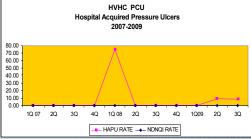
## HVHC NURSING STAFF DEDICATED **DELIVERING QUALITY CARE**



### Efforts are carefully documented in **Performance Improvement data**

RESULTS





# HVHC ICU **Hospital Acquired Pressure Ulcers** 2007-2009

# 30.00 20.00 15.00 10.00 - HAPU RATE → NDNQI RATE

Action Plan to be Implemented: Education, Trial new products

### HOLISTIC EVIDENCE-BASED PRACTICES TO IMPROVE CARE

### Strategies that were implemented:

- Pressure Ulcer Prevention Protocol (PUPP)
- Pressure ulcer education for all patient care disciplines: Staff RNs, CNMs, UAPs, Physicians & Registered Dieticians
- Wound Care carts have been created for all patient units
- Wound & Skin Product Guide av ailable on the hospital intranet
- Turning Team Rounds Q2HRS
- Weekly skin/wound rounds, conducted by our wound certified staff nurses

### CONCLUSION

This standard of care initiative has been well received by our nurses. Feedback from staff continues to improve outcomes, as nursing leadership and bedside RNs work together to develop and evaluate evidence-based processes. The driving force has been our CNO, ensuring organizational viability and empowering her nurses to deliver the best evidenced-based care possible.