Site-wide HAPI Reduction Strategies

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Background
- Over 2.5 million patients are negatively impacted by Hospital Acquired Pressure Injuries (HAPI) each year in the United States (Gould et al., 2019).
- Research demonstrates that adherence to a pressure injury prevention bundle including nursing assessment, identification of high-risk patients, and repositioning can be effective in reducing HAPI (Alshahrani et al., 2021).
- Employing these strategies and reducing HAPI requires a collaborative effort among the care team (Gould et al., 2019).

Local Problem
- Throughout 2022, quarterly Prevalence Surveys were conducted on inpatient units. Results varied each quarter and showed inconsistency in HAPI prevention.
- In August 2022, there were 9 HAPI incidents identified during the quarterly Prevalence Survey which was a significant increase from previous quarters.

Methods
In January 2023, a quality improvement project lead by the Nursing Professional Development team, Wound Care Lead RN, and department HAPI champions to reduce HAPI was conducted. Monthly audits were completed, and results were utilized for action planning and education. Education was delivered to staff to reinforce basic reduction strategies, such as dual RN skin assessment upon admission, identification of high-risk patients, and use of pressure injury prevention tools in patient care (Gaspar et al., 2019). Additional surveillance and education included monthly audits of all patients by the department HAPI champions, communication of audit results, and a targeted “tip of the month” to all teammates.

Results
Incidence of HAPI on Prevalence Survey was reduced by 89% from Q3 2022 (9 in August 2022) to Q2 2023 (1 in April 2023). Continued surveillance in Q3 2023 demonstrates a maintained improvement from 2022.

Figure 1. Graph depicting 2022 Prevalence Survey Results by Quarter. Q1 (6), Q2 (4), Q3 (9), Q4 (3). Data demonstrated inconsistent pressure injury prevention.

Figure 2. Graph depicting 2023 Prevalence Survey Results by Quarter. Q1 (2), Q2 (1), Q3 (3). Data demonstrates improvement in pressure injury prevention.

Figure 3. Monthly audit results poster including audit results, dual skin assessment compliance data, nursing practice implications, and the “skin tip of the month.” Poster shared with all inpatient nursing teams and Wound Care team monthly.

Conclusions
- Identifying skin champions for each department is instrumental in influencing nursing practice. Including Wound Care as the subject matter expert and CNAs as supportive members of the champion team is an important consideration.
- Communicating audit results to all nursing teams helps increase situational awareness and engagement in HAPI prevention strategies. Utilizing multiple methods of communication increases the audience reached and overall staff awareness of the issues and interventions.
- HAPI prevalence can be reduced site-wide by leveraging the expertise of Wound Care RN, focusing on department-specific trends, and interventions and sharing ideas across departments.

Implications for Practice
Develop an ongoing multidisciplinary team that includes clinical nurses and wound care nurse to achieve buy-in and raise awareness. Consider the addition of support staff such as CNAs/Techs to the team. Once buy-in is established, the team can champion efforts to reinforce HAPI reduction strategies including dual RN assessments, identification of high-risk patients, monthly audits, and communication of results, opportunities, and practice tips to clinical team.

References