
Methodist Hospital Pressure Ulcer Prevalence Survey

**Quality Improvement
Skin Care Task Force**



The following Prevalence Survey results have been printed with the permission of Methodist Hospital, Indianapolis, IN. Other than the sale of WAFFLE® brand products, EHOB did not participate in, nor fund this program.

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This survey is an extension of the original Methodist study published in 1993 and presented by Shelly Lancaster, RN, MSN at the Clinical Nurse Specialist Conference in San Francisco on February 10th and 11th, 1994. The original Methodist study is available upon request.



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Quality Improvement- Skin Care Task Force

The Skin Care Task Force was established to increase staff knowledge about skin care, and to promote risk assessment and prevention of pressure ulcers throughout the hospital. The goal was to decrease the incidence of nosocomial pressure ulcers.

Task Force meetings focused on education. Learning opportunities included in-services, educational events, and an annual Wound and Skin Care Fair. Several Skin Care Task Force members also participated in the Indiana Skin Care Consortium. This Consortium was developed to bring regional skin care experts together to share ideas.

The WAFFLE® brand products were implemented at Methodist Hospital starting in 1987. Regular Pressure Ulcer Prevalence Surveys were conducted at Methodist starting in April 1992. Since October 1992, an annual prevalence survey has been conducted. In addition to the number, stage, and location of pressure ulcers, the Task Force also gathered information on the patient diagnosis, type of intervention, nutritional status and laboratory values.

Staff input and interaction throughout the facility was extremely instrumental in achieving a reduction in both nosocomial pressure ulcers and costs associated with skin care. Significant events, such as the development and publication of the *Bed Book*, increased the knowledge level of the staff. The *Bed Book* continues to be an excellent

reference tool for appropriate product selection as it lists protocols for each specialty bed and mattress surface used at Methodist.

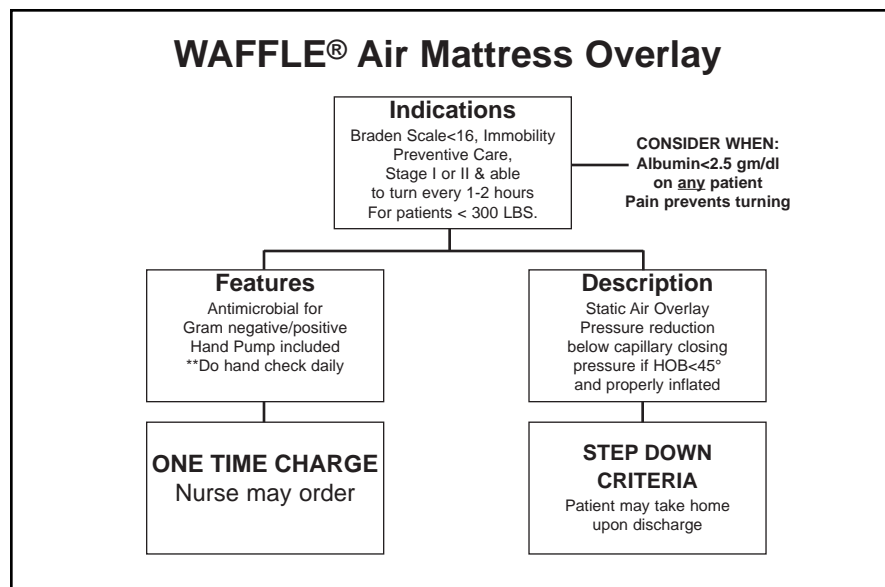
Despite the purchase of new critical care beds with dynamic sleep surfaces in Spring 1992 and the purchase of new pressure reducing mattress replacements in May 1995, Methodist Hospital still utilizes the WAFFLE® Mattress for their high risk patients or for those who will need protection post discharge. Implementation of the replacement mattresses did not change the indications for use of WAFFLE® brand products as listed in the *Bed Book* below. The WAFFLE® Cushion usage has been steady, while the use of the Foot WAFFLE® continues to increase. In addition, many patients who are on specialty beds utilize the WAFFLE® Mattress for their transportation needs off the patient care units to provide uninterrupted pressure reduction/relief.

Methodist has pioneered the use of static air overlays in the operating room. Patients undergoing long procedures, such as cardiac and neurological surgeries, are placed on the WAFFLE® Surgery Pads during their procedure and in the recovery room to prevent pressure ulcer development. The use of the Foot WAFFLE® for high risk patients is just beginning in the operating room on shorter procedures.

In the pediatric department at Methodist Hospital, high risk children are placed on the Little WAFFLE®. This product was developed by EHOB with the assistance of the nurses in the pediatric unit.

To the right is a copy of one page of the *Bed Book* as published in 1992.

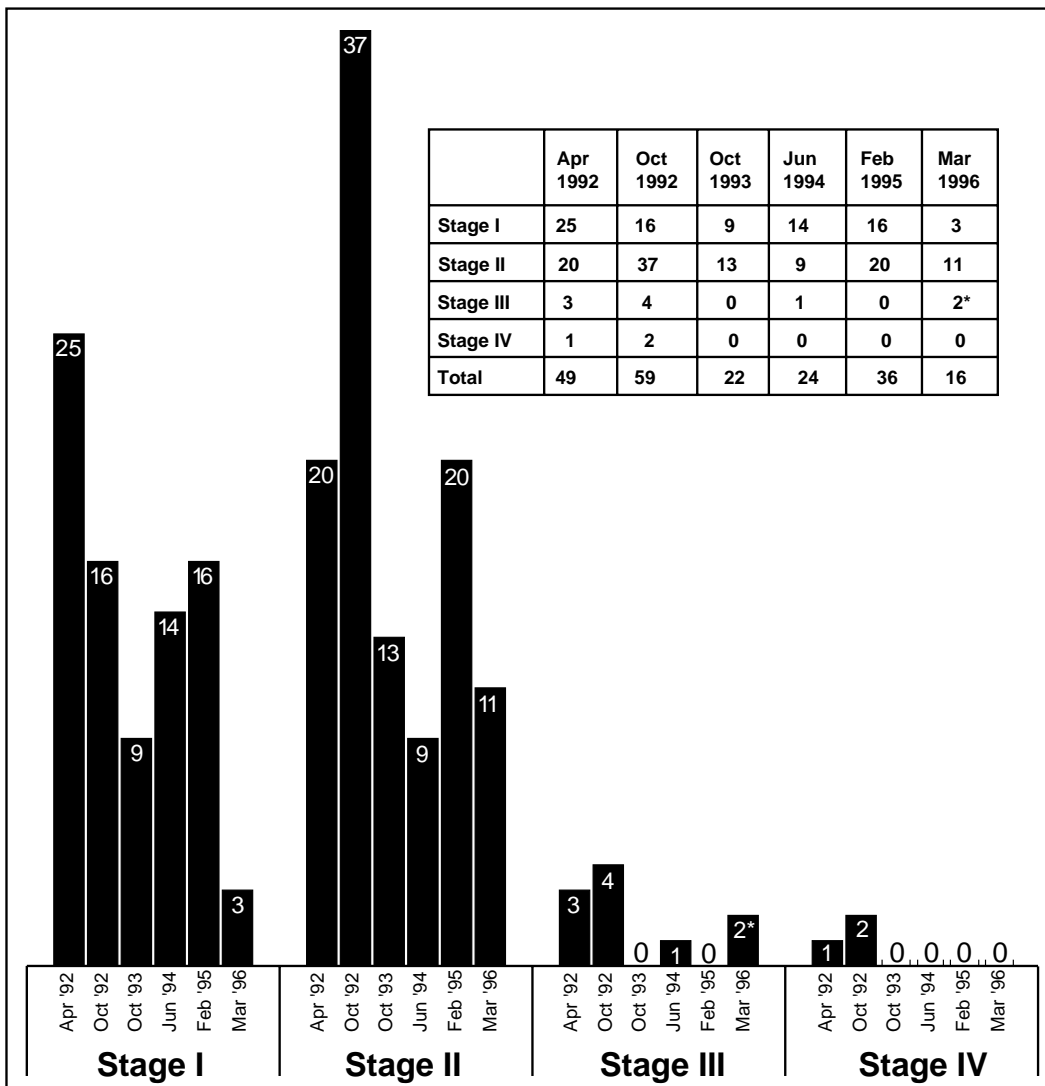
The *Bed Book*
Page 2 of 12 pages.
Others available
upon request.



Pressure Ulcer Prevalence

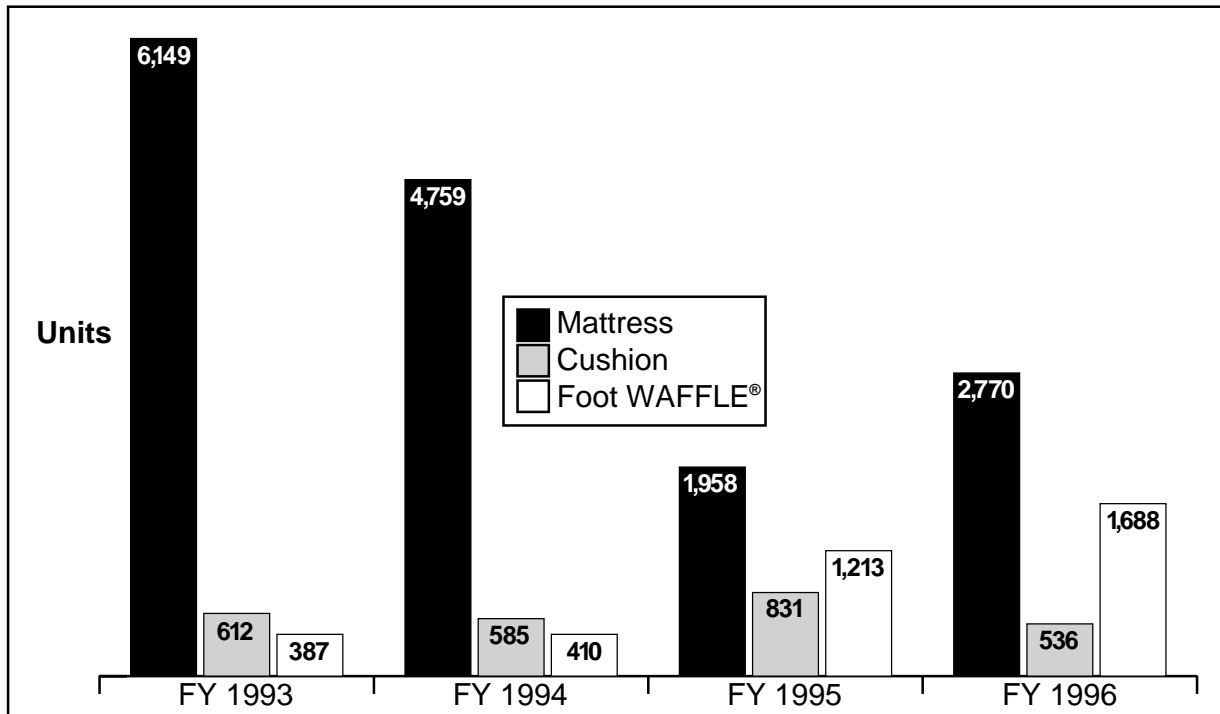
	<u>Apr '92</u>	<u>Oct '92</u>	<u>Oct '93</u>	<u>Jun '94</u>	<u>Feb '95</u>	<u>Mar '96</u>
Total Patients:	649	637	620	604	619	531
# Patients with ulcers:	69	65	59	38	53	26
Prevalence %:	10.6%	10.2%	9.5%	6.3%	8.6%	4.9%
# Patients with ulcers on Admission:	26	17	37	19	25	15
Nosocomial ulcers:	43	48	22	17	28	11
Nosocomial Prevalence %:	6.6%	7.5%	3.5%	2.8%	4.5%	2.1%
Survey Results:						
• Decrease in Prevalence from 10.6% to 4.9%						
• Decrease in Nosocomial Prevalence from 6.6% to 2.1%						

Nosocomial Pressure Ulcers By Stage

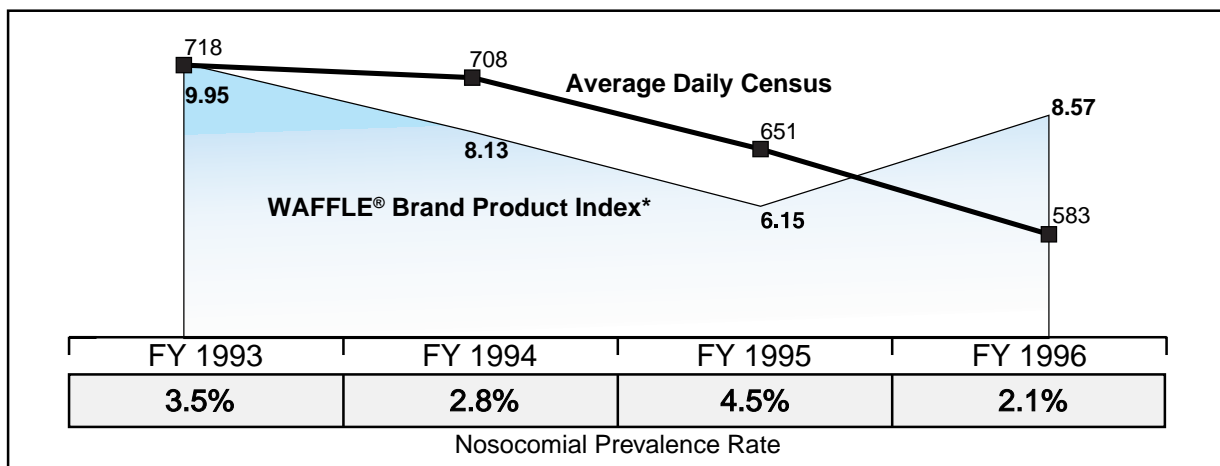


*Both located on the heels, both on the same patient.

Annual WAFFLE® Brand Product Use Over Time

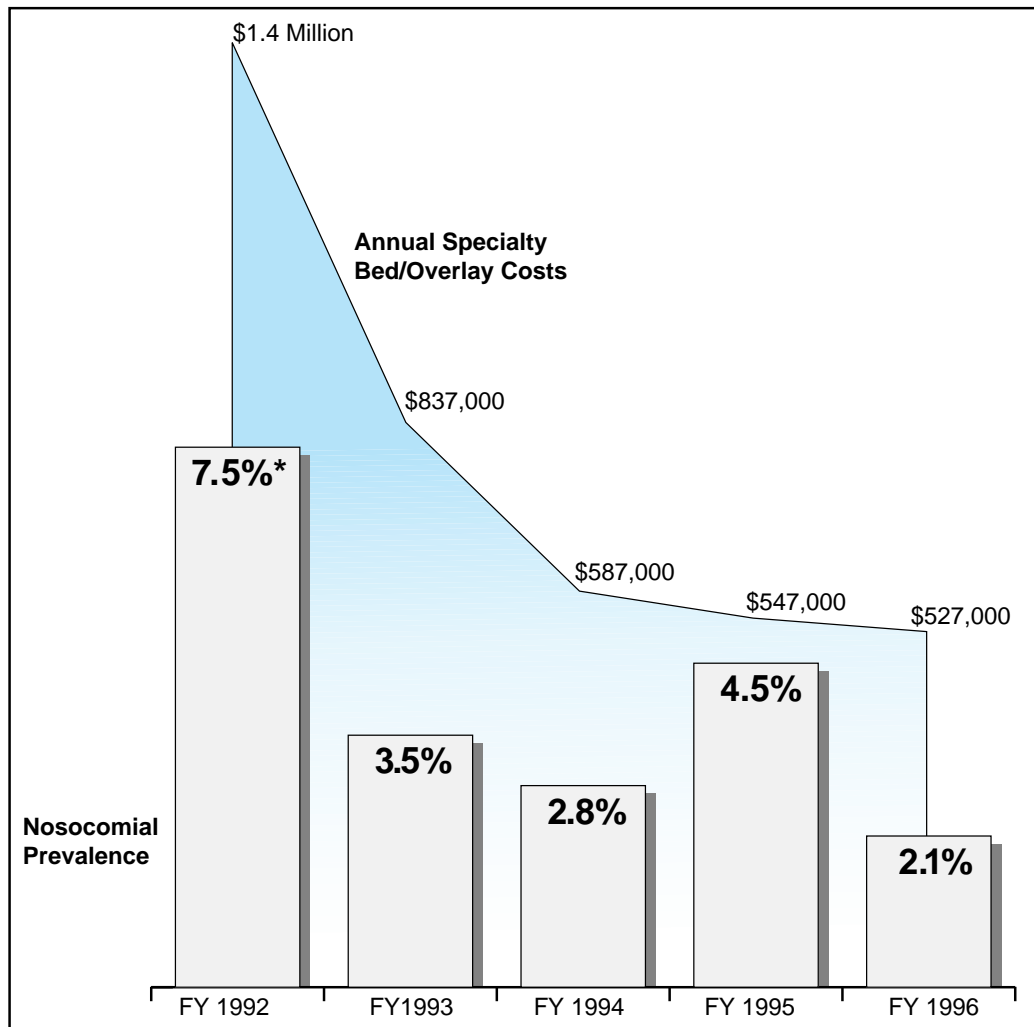


Notes:
 May 1992 - New critical care beds purchased.
 May 1995 - Mattress replacements purchased.



* WAFFLE® Brand Product Index = Total WAFFLE® Brand Units/Average Daily Census

Cost and Outcome Savings



*Based on 10/92 data.

Cumulative Survey Results

- Decrease in prevalence from 10.6% to 4.9%
- Decrease in nosocomial prevalence from 6.6% to 2.1%
- Total decrease in actual dollars spent
 - \$1,400,000 in FY 1992
 - \$837,000 in FY 1993
 - \$587,000 in FY 1994
 - \$547,000 in FY 1995
 - \$527,000 in FY 1996

Since FY 1992 a **Cumulative Savings** of **\$3,102,000** has been achieved.

The Bottom Line:

- Decreased Cost
- Increased Savings
- Decreased Nosocomial Prevalence

Summary of Findings

- Increased prevention pays off
- Improved documentation of community acquired ulcers
- Fewer nosocomial ulcers & more protection per dollar
- Development of a useful tool for staff decision making
(*The Bed Book*)
- Dramatic savings realized with improved patient care
- Economical skin care extended to more patients

In conclusion, this case study just goes to prove that it takes more than just a product to have positive outcomes. It is a combination of education, staff awareness, appropriate balance among different products, and a motivated Task Force to implement such a program. The consistent use of WAFFLE® brand products have helped Methodist Hospital decrease cost and demonstrate positive outcomes. The nosocomial prevalence rate at Methodist is at an all time low of 2.1% as of March, 1996.

Methodist is the fifth largest private hospital in the United States with 46,000 admissions annually. Methodist is licensed for 1,120 inpatient beds and has 5,700 employees. It is a Level 1 Trauma Center. Known for its leadership in health care innovation, teaching and research, Methodist's medical and leadership staffs were encouraged to enact programs, like the Skin Care Task Force, to continually evaluate and improve patient care.

About Methodist Hospital

Special Thanks to the Members of the Skin Care Task Force who participate in ongoing efforts to promote excellence in skin care for the patients of Methodist Hospital.



Note: Methodist Hospital is now a part of Clarian Health System, which includes Methodist Hospital, Indiana University Medical Center, and Riley Hospital.

