

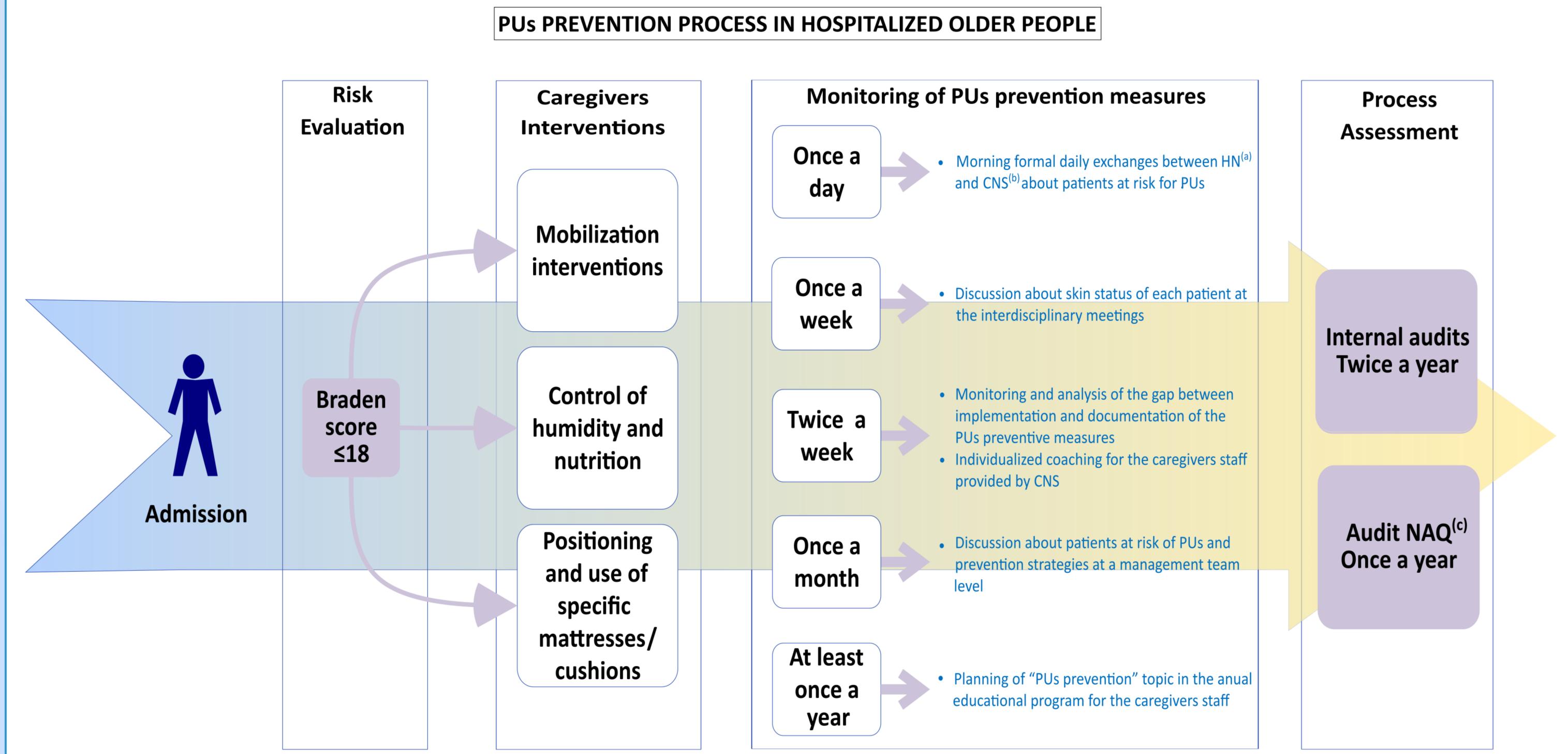
# PRESSURE ULCERS PREVENTION IN HOSPITALIZED OLDER PEOPLE: from risk detection to caregivers interventions

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Introduction: The occurrence of Pressure Ulcers (PUs) implies devastating consequences for geriatric patients such as low functional recovery, pain and infections, extended length of stay and mortality<sup>1,2</sup>. Since 2008 the University Hospital of Lausanne (CHUV) has set up a PUs prevention program called "Objectif Zéro Escarres" (OZE)3. According to the OZE recommendations, the prevention of PUs can be summarized by mobilization interventions, control of humidity and nutrition, the positioning and the use of specific mattresses and cushions for the relief of pressure points<sup>4</sup>.

Objective: To present the strategy of a successful implementation of a PUs prevention process in an acute geriatric care unit (AGCU).



(a): Head Nurse; (b): Clinical Nurse Specialist; (c): NAQ: Swiss National Association for Quality Development in Hospitals and Clinics

## **Results:**

|                                           | <u>July.16</u> | <u>April.17</u> | <u>Octo.17</u> | <u>May.18</u> | <u>Mar.19</u> |  |
|-------------------------------------------|----------------|-----------------|----------------|---------------|---------------|--|
| N                                         | 27             | 27              | 27             | 27            | 23            |  |
| Age                                       |                |                 |                |               |               |  |
| Mean (SD)                                 | 87 (7)         | 87 (4)          | 87 (6)         | 87 (4)        | 88 (6)        |  |
| Sex                                       |                |                 |                |               |               |  |
| Female (%)                                | 22 (81)        | 22 (78)         | 18 (64)        | 19 (70)       | 18 (72)       |  |
| Patients at risk for PUs (Braden <18) (%) | 16 (59)        | 12 (45)         | 13 (48)        | 15 (55)       | 10 (43)       |  |

Table 1: Sociodemographic characteristics of hospitalized older people

|                                                                       |                                                           | <u>July.16</u> | <u>April.17</u> | <u>Octo.17</u> | <u>May.18</u> | <u>Mar.19</u> |
|-----------------------------------------------------------------------|-----------------------------------------------------------|----------------|-----------------|----------------|---------------|---------------|
| N                                                                     |                                                           | 27             | 27              | 27             | 27            | 23            |
| Patients with a Braden assessment within 24 hours after admission (%) |                                                           | 16 (59)        | 24 (89)         | 23 (85)        | 27 (100)      | 20 (83)       |
| Documented skin assessment at admission (%)                           |                                                           | 9 (33)         | 23 (85)         | 18 (67)        | 27 (100)      | 20 (83)       |
| n (patients at risk for PUs)                                          |                                                           | 13             | 12              | 13             | 15            | 10            |
| Implemented prevention measures for patients at risk for PUs          | Mobilization interventions (%)                            | Χ              | 11 (92)         | 10 (77)        | 15 (100)      | 10 (100)      |
|                                                                       | Control of Humidity& Nutrition (%)                        | Χ              | 12 (100)        | 11 (84)        | 15 (100)      | 10 (100)      |
|                                                                       | Positioning and use of adequate mattresses & cushions (%) | Х              | 22 (92)         | 17 (65)        | 15 (100)      | 10 (100)      |
| Documented prevention measures for patients at risk for PUs           | Mobilization interventions (%)                            | 3 (23)         | 9 (75)          | 10 (77)        | 14 (93)       | 10 (100)      |
|                                                                       | Control of Humidity & Nutrition (%)                       | 5 (38)         | 12 (100)        | 10 (77)        | 7 (46)        | 6 (60)        |
|                                                                       | Positioning and use of adequate mattresses & cushions (%) | 7 (27)         | 17 (65)         | 17 (65)        | 15 (100)      | 10 (100)      |

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**Discussion:** The results of internal audits show an improvement in the implementation and documentation of PUs prevention measures. However, there is variability in the documentation of control of humidity and nutrition measures. This argues for the suboptimal caregivers documentation and potential consequences for quality of care<sup>5</sup>.

Conclusion: The implementation in the AGCU of the process in favour of PUs prevention led to a considerable improvement in performing and documenting the preventive measures for patients at risk. In the future, there is a need to focus on development of strategies to facilitate electronic documentation by caregivers when time is constrained.

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