Application of a pressure ulcer prevention and treatment protocol in the Fatebenefratelli and Ophthalmic Hospital in Milan.

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BACKGROUND

Pressure ulcers are very common in hospitalized patients and if not properly treated and prevented may increase the length of hospitalization, infections due to complications, and the state of suffering of patients. Prevention is thus relevant for assurance of high quality care.

PURPOSE

To improve the quality of care and to monitor the incidence of pressure ulcers, in our hospital a multidisciplinary team has been created in 2009, and a diagnostic and therapeutic pressure ulcers protocol was defined ("Percorso Diagnostico Terapeutico Assistenziale Lesioni da Pressione").

Here we described the verification, made by the multidisciplinary team, of the correct application of the protocol in the departments, using the quality indicators specified in the protocol itself.

MATERIALS AND METHODS

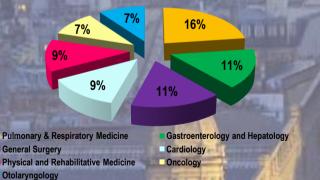
The protocol, created from the guidelines already in use in the hospital, has been implemented with the definition of the operational tools for the verification of its application: the adherence to the protocol ensures a proper prevention and treatment of the pressure ulcers, and furthermore, protect the operator during his activities.

Two analysis (one in 2010 and one in 2011) of the clinical charts of has been performed, in order to check the adherence of the health care professionals in the application of the procedure: this was evaluated based on nine criteria, each of which was assigned 1 point if 'correct', 0 if 'incorrect' (Fig. 1).

RESULTS

In 2010 a total of 214 clinical charts has been analyzed (Fig. 2): in general, a proper data collection was found (57% of cases).

Fig. 2: Clinical charts analyzed.



Pressure ulcers have been properly identified and prevented in 37% of cases: only some nurses follow the guidelines in the detection and treatment of injuries. Fig. 1: Check list form.

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Assends Ospodaliers FATERNEFRATELLI E OFTALMICO Ufficie Qualdh of Acercalisments	MODULO CHECK LIST LESIONI DA PRESSIONE	MDUQA 10 DATA: 08/06/2010 Rev. 0 Pag. J di J			
ANNO					
S.C./S.S.D. VERIFICATA:	Intervistati:	Data:			
Verifica condotta da:	Rpisodio ricovero: L04516 28705	22/05/20W			
ASPETTO VERIFICATO	ANNOTAZIONI	ESITO			
Raccolta dati (correttezza della rilevazione)				0	X
MDAO 61N scheda di necertamento nutrizionale			N.A.	K	,
MDAO 61B bisogno assister rischio di comprumissione integrità cutanea	nziule		N.A.	K	۱,
Presenza di richiesta presidi antidecubito (se presente in MDAO 61B)		İ	N.A.	0	ĸ
MDAO 61LDP truttamento compromissione integrità outanea: lesioni da pressione			ήλ.	0	1
MDAO 61P cambio postura mobilizzazione giornaliera	¢		N.A.	ĸ	,
MDFARM 84 Rev. 0 "Richie: medicazioni per lesioni da prossione"	sta		Ka.	•	1
Corretta individuzzione del rischio di LDP		\neg	N.A.		X
Corretto trattamento 1.DP		-!	w.f		1

0 = NON Correttamente compil 1 = Correttamente compilato

Riferimento PRAO 85 PDTA lesioni da decu

Among patients with pressure ulcers, 36% were properly treated. The departments that mainly detect and prevent the risk of pressure skin damage and follow the procedure for the treatment of lesions are Neurosurgery, Medicine, and Cardiology.

A further analysis on 62 clinical charts in 2011 showed that in 52% of cases, the pressure ulcer were correctly identified, but in only 5% of cases were then properly treated. A third analysis is ongoing, with the aim to identified and correct the errors in the treatment of the ulcers. A poster will also be distributed to departments, for a quick reference to the treatment protocol.

CONCLUSIONS

The protocol is a practical tool applicable in the various Units. The verification of the correct application showed low adhesion to the guidelines: it is fundamental continuing the training of the staff to achieve the required standard. Among the objectives for 2013, another audit with a modified checklist will be performed in the departments, involving a greater number of health care professionals.



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