



**GOOD SAMARITAN
HOSPITAL
LOS ANGELES, CA.**

**DEBORAH ZARICOR RN
CWOCN**

GOOD SAMARITAN HOSPITAL



- 410 TERRITARY HOSPITAL
- LOCATED IN DOWNTOWN LOS ANGELES
- OUR PATIENT POPULATION IS HISPANIC, KOREAN, INDIGENT/HOMELESS AND THE NEW "DOWNTOWNER"



GOOD SAMARITAN HOSPITAL

- DECEMBER 2006 - HAPU RATE 9.14%
- JANUARY OF 2007 – ADMINISTRATION TOOK A LOOK AT WHY THE HAPU WAS SO HIGH



GOOD SAMARITAN HOSPITAL

- NO PROCESS IN PLACE
- NOT SURE WHEN TO ORDER A SPECIALITY MATTRESS AND WHO WAS SUPPOSE TO ORDER IT.
- NO POLICY ON PRESSURE ULCER PREVENTION

GOOD SAMARITAIN HOSPITAL

- **In the first quarter of 2007.**
- **The Critical Care director wrote a policy on prevention of pressure ulcers**
 - Braden Scale on admission and every shift
 - Nurses were to document and stage every pressure ulcer upon admission and/or upon discovery every shift.
 - Photographs and measurements are to be taken upon admission and then every Monday.
 - Nursing staff hospital wide had education classes in the Braden scale and identify and staging pressure ulcers.
 - Nurses were able to order specialty beds
 - Hospital went diaper less
 - Prevalon Boots were introduced

Good Samaritan Hospital

■ Second Quarter of 2007

Hired CWOCN

Developed Criteria for the placement of specialty mattress

Overlay mattress

Braden of 14 or below in critical care

Braden of 12 or below in med surg

Stage I pressure ulcer

Stage II pressure ulcer

Low air loss mattress replacement

Unstageable

Deep tissue injury

Stage III

Stage IV

GOOD SAMARITAN HOSPITAL

- Second Quarter of 2007

 - Hired CWOCN

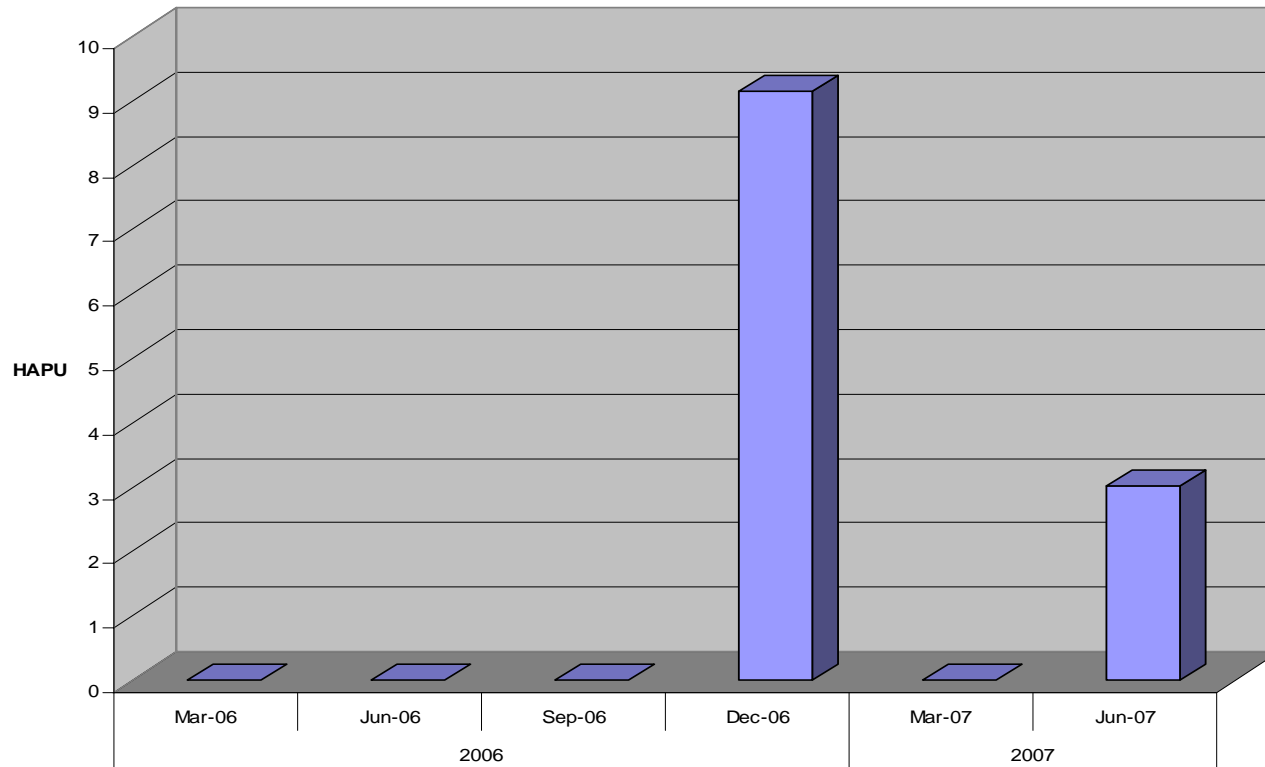
 - Developed Criteria for the placement of specialty mattress

 - Continue with education with the Braden scale and staging in skill fairs, new employee orientation and new grad program

 - Introduce a fecal management system**

 - If a patient has fecal incontinence they are 50 times more likely to develop a skin problem with over half of them being a pressure ulcer.

GOOD SAMARITAN HOSPITAL



Good Samaritan Hospital

- **In the third and fourth Quarter of 2007 we examined our soaps and lotions.**
 - We were still using bar soap and we were using powder
 - First we took out the powder
 - They we trialed several companies and went to a liquid soap with emollients because a well nourished skin is less likely to break down.

Good Samaritan Hospital

■ **Developed a bathing protocol:**

- Wash hands and apply gloves. Apply two squirts of Gentle Rain Extra Mild Body Wash and Shampoo in basin
- Fill basin with warm water (comfortable temperature setting 95-105F is recommended) to $\frac{3}{4}$ full
- Wash patient with Gentle Rain Extra Mild Body Wash diluted in water with wash cloth starting with face and neck.
- Rinsing is not required.
- Pat dry
- Apply Moisturizing Lotion to the arms
- Gently apply to the skin until the skin is dry to touch
- Repeat with legs, feet and back
- Do not massage any reddened area that has been caused by pressure.

Good Samaritan Hospital

■ **Developed an incontinence protocol**

- Wash hands and apply gloves
- To stop odors before starting the clean-up process, spray Bedside-Care cleanser directly onto feces or urine stained skin. Allow the cleanser to stay in contact with the waste for at least 30 seconds
- Gently remove as much feces as possible
- Spray 2-3 mists of Bedside-Care cleanser on a warm, moist washcloth.
- Gently cleanse the entire area from front to back.
- Turn the cloth to a clean side and gently wipe area again to assure all feces and urine has been removed. Gently pat dry. No need to rinse.
- Remove gloves and wash hands and apply new gloves
- Apply Critic Aid Clear ointment evenly over the entire area to be protected
- Place one under pad under patient
- Diapers are only used when the patient is going to ambulate or sit in the chair. Once the patient is back in bed the diaper is removed and an under pad is placed under the patient
- Dispose of gloves and linens as per policy
- Document procedures and report any changes in the patient's skin condition.

Good Samaritan Hospital

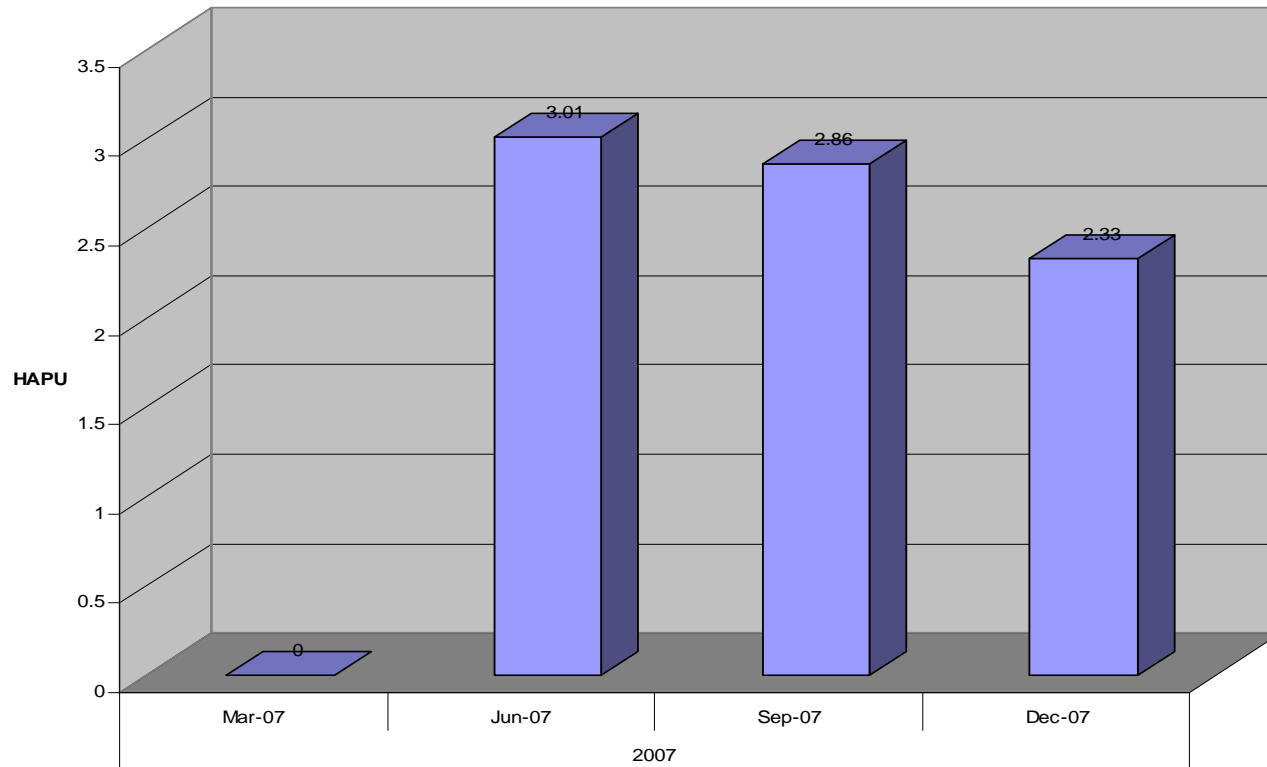
■ Reinforced the diaper policy

- No diapers when patient is in bed
- Diapers only when the patient is being walked with PT, going for procedures or sitting in chair.

■ Prevalon Boots

- For patients who mobility score is 2 or below.

GOOD SAMARITAN HOSPITAL



Good Samaritan Hospital

- In 2008:

- Replaced out pink cloth **under pads** with paper **under pads** which wick the moisture away from the patient and is dry within 10 minutes and holds 1000 cc of urine
- Developed **tracking device** to identify which units are developing pressure ulcers and stage.

Indicators Acute Care Patients Only	Benchmark	Goal	Qtr 1 08	Qtr 2 08	Qtr 3 08	Qtr 4 08	YTD
Number of patients seen			167	134	130	159	590
Number of pts with hospital acquired pressure ulcers			4	4	2	3	13
% pts with hospital acquired pressure ulcers	<5.54%*	2%**	2.40%	2.99%	1.54%	1.89%	2.20%
Hospital Acquired Ulcers by stage							
Stage I				0	0	0	0
Stage II				0	0	1	1
Stage III				0	0	0	0
Stage IV				0	0	0	0
Deep tissue injury				4	2	2	8
Unstageable				0	0	0	0

Hospital Acquired Ulcers by Unit							
4N				2	0	0	2
4S				0	0	0	0
5N				0	0	1	1
5S				0	0	0	0
7N				1	0	2	3
ICU				0	2	0	2
CCU				0	0	0	0
CSU				1	0	0	1

GOOD SAMARITAN HOSPITAL

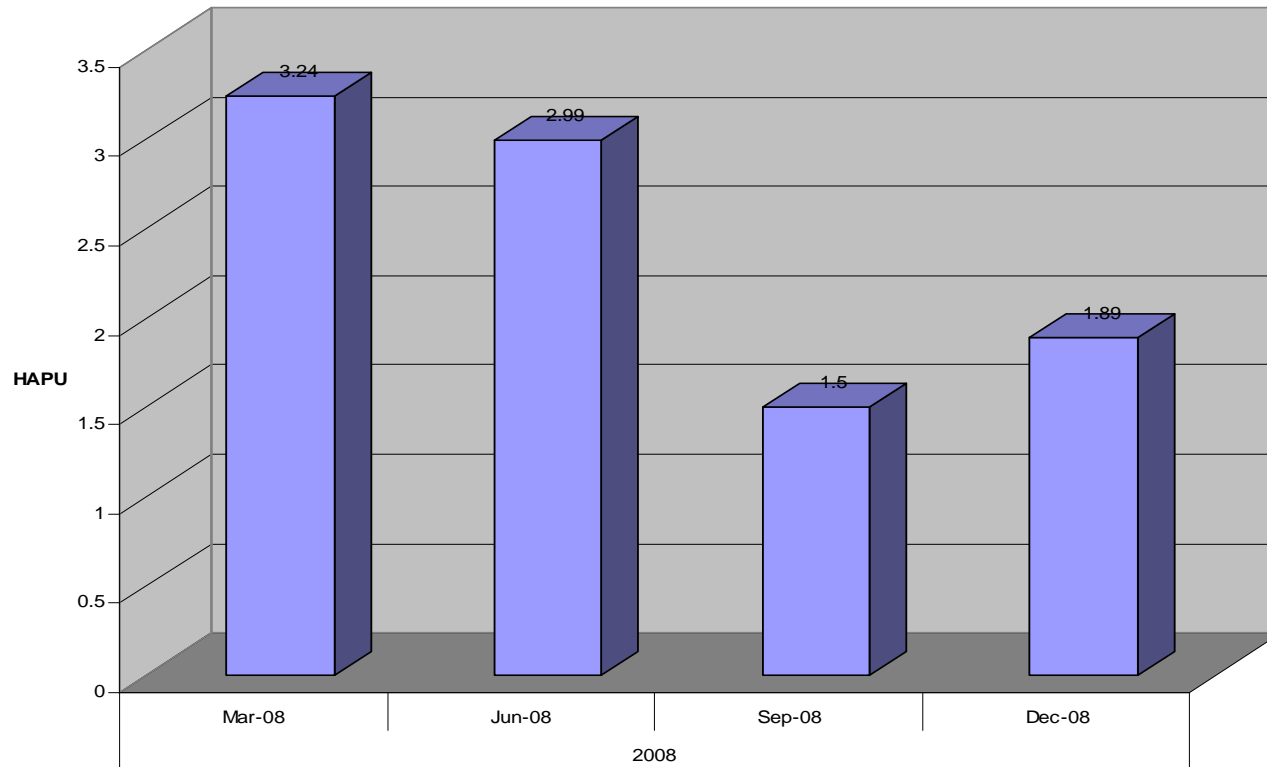
■ In 2008:

- Replaced out pink cloth under pads with paper under pads which wick the moisture away from the patient and is dry within 10 minutes and holds 1000 cc of urine
- Developed tracking device to identify which units are developing pressure ulcers and stage.
- **All critical care patients who are bed bound have a photograph taken upon admission**
- **Each HAPU is treated as a sufficient event and the managers do a root cause analysis.**

GOOD SAMARITAN HOSPITAL

- **Once the cause of the pressure ulcer is clear we develop an action plan**
- Education of the staff with a test and they then spend some time with me staging pressure ulcers
- From this tracking device and the root caused analysis we have discovered that we have had pressure ulcers started in surgery as well as the ER
- Some were because we did not get the specialty bed under the patient fast enough
- All of the HAPU and the results of the root cause analysis and action plan are reported to the V.P. of patient services.

GOOD SAMARITAN HOSPITAL



GOOD SAMARITAN HOSPITAL

- 2009
- PURCHASING PRESSURE RELIEVE MATTRESS FOR THE WHOLE HOSPITAL
- TRIALING OR PRESSURE RELIEVE OR PADS
- WILL BE LOOKING AT PRESSURE RELIEVE PADS IN THE ER
- BOTH THE OR AND ER ARE TAKING PICTURES OF ALL PRESSURE ULCERS.

GOOD SAMARITAN HOSPITAL

