



# Camp Zero: The Power of Education and Prevention Interventions to Achieve Zero Pressure Ulcers



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## Abstract

Nurses and nursing assistants are partners in care, engaging in the journey of exemplary professional practice to achieve the ultimate in skin quality - achievement of zero pressure ulcers. Nurses and nursing assistants are empowered as frontline caregivers to impact the maintenance of skin health and pressure ulcer prevention. Education by the Certified Wound Ostomy Nurse (CWON) to know the difference between normal and abnormal elevates staff confidence to report observations. Education influences accountability of nurses and nursing assistants to collaborate with the CWON when early signs of an impending pressure ulcer is detected. Care coordination results in timely initiation of prevention interventions. Prevention is key to achieving zero pressure ulcers. Camp Zero is named for education attended by staff to gain a deeper understanding of pressure ulcer prevention, with the goal of achieving zero pressure ulcers in the acute care population. Chasing zero starts at the bedside with engaged, empowered, educated staff nurses and nursing assistants, the two health care team members who see the patient the most. Attending “Camp” is an annual course designed to educate, understand the power of prevention, and to protect healthy skin. Poster presentation will illustrate the effectiveness of the program’s success, reaching the goal of zero pressure ulcers within less than six months, and the sustainability of pressure ulcer quality data that outperforms the national mean.

## Background

Patient Safety and comfort is compromised in the presence of a pressure ulcer. Pressure ulcers occur over bony prominences such as the occiput, sacrum, coccyx and heels, where unrelieved pressure damages underlying tissue. They can occur under medical devices in the presence of pressure, in combination with moisture and/or friction. Individuals with co-morbid conditions relevant to perfusion, nutrition and sensation magnify the risk of pressure ulcer formation. Hospital acquired pressure ulcers (HAPUs) continue to occur with evidence-based prevention in place, is considered a nurse sensitive outcome, and a reflection of the quality of care provided.

Barriers identified among novice nursing staff and nursing assistants, who are partners in care, included limited knowledge of identification of risk beyond the Braden Score. Accessibility of prevention products on inpatient units, and knowledge of how and when to use them, was lacking. Autonomy initiating prevention measures by non-licensed caregivers was non-existent. The need for frontline enhanced education became apparent.

Based on Pressure Ulcer Incidence data trends, the need to elevate frontline staff accountability and knowledge concerning prevention and accurate identification of wound etiology through competency was identified. Accurate wound etiology upon initial assessment is mandatory for data integrity, reflecting the quality of care in our 317 bed tertiary care Magnet® Hospital providing comprehensive clinical services for neonates through geriatrics.

The need was immediately apparent for a clinician led team to fulfill our commitment to safe, quality and effective patient care. We knew up front everything possible was needed to identify risk, implement timely comprehensive preventive care and continuously monitor the patient response to demonstrate positive outcomes.

Note: Data reflects actual HAPUs acquired on a unit, stage 3, 4 and unstaged excluding medical device related injuries.

## Goal Statement

The goal of *Camp Zero* is to actively engage and empower frontline nursing staff in safe patient care to achieve and sustain ZERO hospital-acquired pressure ulcers (HAPUs) for West Penn Hospital patients.

## Interventions

### January - June 2013

- Recruit RN Skin Health Resource Champions
- NDNQI Pressure Ulcer Training Modules Assigned to Skin Champions
- Skin and Wound Care Guidelines revised to reflect EBP and posted at bedside
- Patient and family Pressure Ulcer Prevention Guidelines approved by Shared Governance Patient and Family Education Council
- Wound Ostomy Continence Nurse presents unit-based live education
- New product education unit to unit on Silver Textile

### July – December 2013

- Evidence-based Pressure Ulcer Prevention Guidelines for Critical Care approved by governing bodies and posted in critical care areas
- Clinical Practice Shared Governance Council and Chief Nursing Officer approves Skin Health and Prevention Policy
- Camp Zero Education for nursing assistants
- Wound Ostomy Continence Nurse and Intensive Care Unit Skin Champion present unit based education to critical care staff regarding Support Surfaces.

### January - June 2014

- Camp Zero online education assigned to all newly hired nursing assistants
- Wound Ostomy Continence Nurse and vendor representative *present “Win With Skin: Products for Prevention”* to staff unit to unit
- Moisture Associated Skin Damage education presented unit to unit
- Wound Ostomy Continence Nurse presents *“Prevention of Heel Pressure Ulcers: Case Study Skin Health Resource Council”*
- Wound Ostomy Continence Nurse and vendor representative present *“Medical Adhesive Related Skin Injury”* education unit to unit
- Wound Ostomy Continence Nurse and vendor representative present *“Use of Air Filled Seating Cushion and Pressure Mapping”* education unit to unit

### July - December 2014

- “Bed Ahead Program” consignment beds on site for in time patient use
- Wound Ostomy Continence Nurse and vendor representative present *“Advanced Wound Care Dressings for Pressure Ulcer Prevention”*

### January – June 2015

- Skin Safe Tips news circulated bi-monthly to unit managers to share with staff
- Collaboration with Respiratory Therapy regarding prevention of device injury
- Camp Zero revisited and live presentations given for nursing assistants
- Air filled seating cushions accessible to Interventional Radiology for positioning high risk patients
- Immersion therapy mattress replacement available to address pressure ulcer risk related to prolonged immobility when transporting patients for procedures.

## Educational Presentations by External Experts 2013 – 2015

**Susan Creehan, MSN, RN, CWON**

*Pressure Ulcer Prevention: Digging Deeper towards an Irreducible Minimum*  
Virginia Commonwealth University Health System  
October 2013

**Justeen Keahey, MSN, RN, CWOCN**

*Emerging Trends: Pressure Ulcer Prevention in the OR; Molnlycke Health Care*  
April 2014 and November 2014

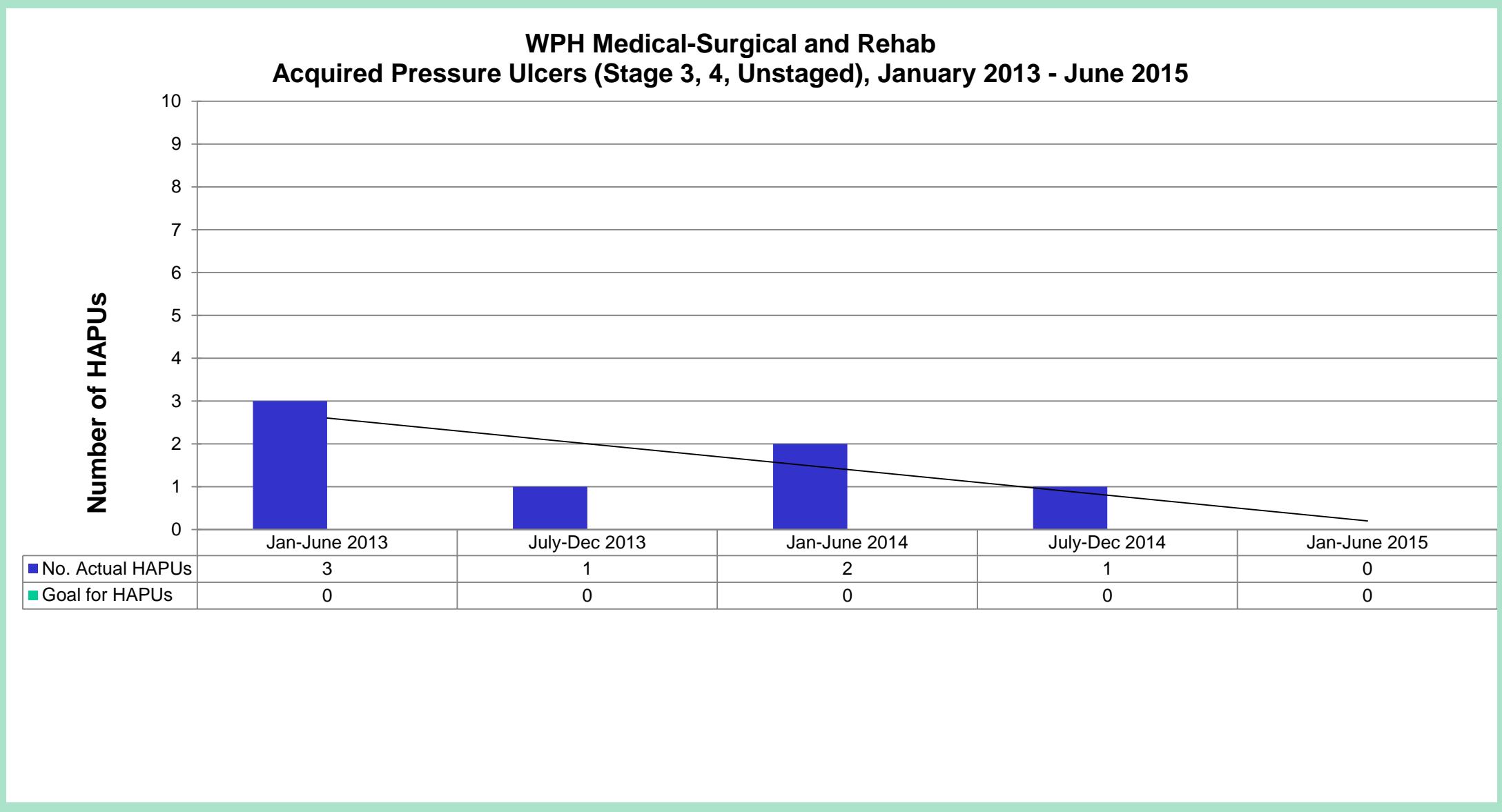
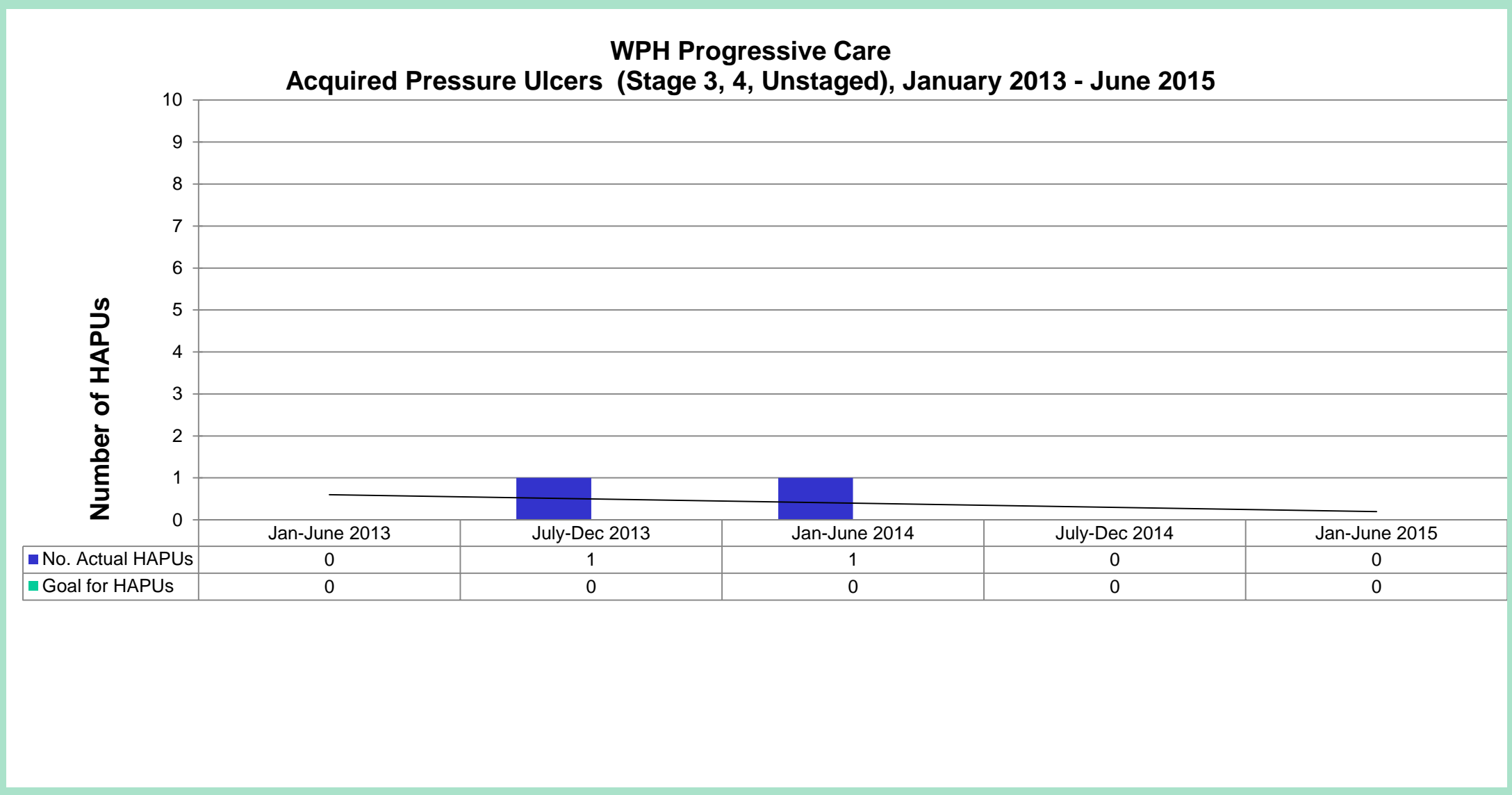
**C. Tod Brindle, MSN, RN, ET, CWOCN**

*Nurses Leading the Charge Toward Mutual Accountability in the Fight Against Hospital Acquired Pressure Ulcers: What Your Chief Executives Need to Know*  
Virginia Commonwealth University Health System;  
May 2014

**Patricia Turner, BSN, RN, CWOCN, CWS**

*P.R.E.S.S.U.R.E. - Strategies for Handling It; Medline Industries*  
May 2015

## Outcomes



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## Challenges and Lessons Learned

- Nursing assistant representation on Quality Council



- Continue to offer *“live”* unit based education for all staff

- Inter-professional education by department, including Peri-op, Emergency Department and all procedure areas

- Engage nursing staff in design of creative methods to sustain change and continued quest for zero pressure ulcers



- Enhance Skin Health Program thru Inter-Professional Membership

- Bi-annual Skin Health Workshop presenting recent EBP

- System conversion to new EMR documentation in progress



- Camp Zero** adopted System Wide roll out September 2015

- Expand WOCN services beyond five day work week utilizing skin champions, nursing assistants, and nurse techs

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## References

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Borris-Hale, Kathy (2013). Getting to zero. *Healthy Skin*, June edition, 10-14. Accessed from www.medline.com July 15, 2015.

Duncan KD. (2007). Preventing pressure ulcers: The goal is zero. Joint Commission on Quality and Patient Safety. 33 (10):605-610.

Sharkey, S. et al (2011). Leveraging certified nursing assistant documentation and knowledge to improve clinical decision making: The On-Time Quality Improvement Program to prevent pressure ulcers. *Advances in Skin & Wound Care* 24(4), 182-188.

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