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Implementing an evidence-based heel protection program using hydrophilic foam in an acute care facility

Carol McGregor, ARNP, MSN, MBA, Ed.D. Wound /Ostomy Nurse Practitioners

Background

Heels are the second most common pressure ulcer site with 43% of pressure ulcer developed in hospitals occurring on the heels (Walsh, DeOcampo & Waggoner 2006). This poses a constant challenge to hospitals in their quest to prevent the development of hospital acquired pressure ulcer (HAPU) on the heel which is a well acknowledged problem (Donnelly, 2001). At WKBH, in our quest to achieve zero heel/malleolus ulcer we eliminated the use of conventional bunny boots and incorporated a program with offloading on pillows

and protecting the heel/malleolus with

Hydrocellular foams for all ICU patients and all patients with Braden score of 18 or less who are at high risk for HAPU's.

Purpose

To assess whether a hospital-acquired heel/mallelous ulcer rate will reduce through prevention focused program.

Method

This was an observational pre-post design study of the effectiveness of hydropholic foam heel dressing in the prevention of acquired heel pressure ulcer using the Risk Management monthly report of heel acquired pressure ulcers data and NDNQI database patient number of hospital days.



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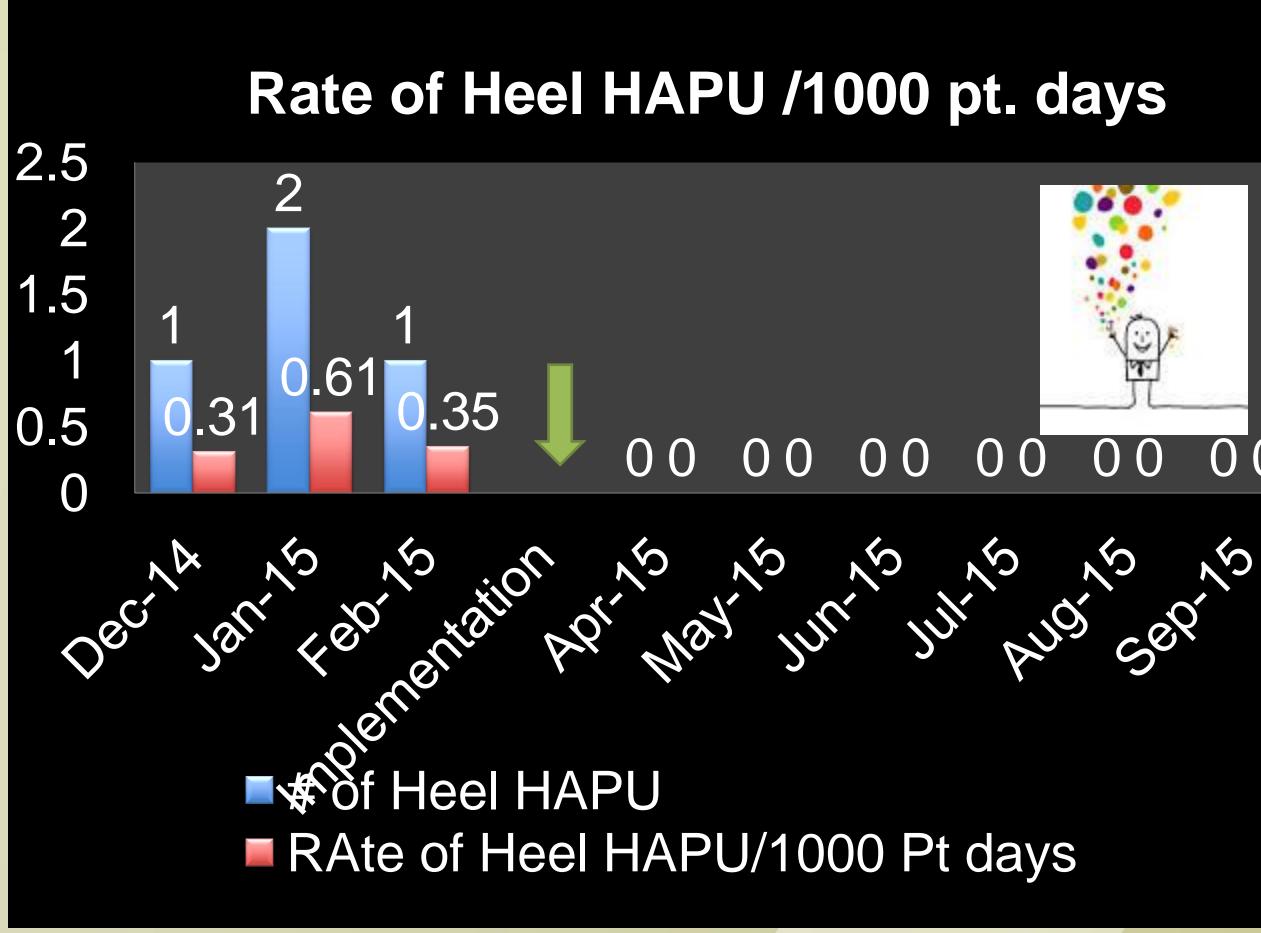
Program

The ICU and medical surgical nurses were in-serviced on the replacement product; using a hydrocellular foam dressing with silicone adhesive which covers the heel and mallelous then floating the heels on pillows. This was done for all ICU patients and for medical surgical patients with a Braden Scale of 18 or less, whether they are ambulatory or not since non-slip socks are easily applied over this dressing. The silicone adhesive allows daily inspection of the heel and mallelous with easy reapplication of the same dressing which is effective for up seven (7) days.



Eva Mitra BSN, RN Nursing Standards and Improvement Coordinator

Findings



Implications for Practice

The study result demonstrated that after discontinuing the use of conventional "Bunny Boots" and implementing evidence-based heel hydro cellular foam dressing for this project showed a decrease of heel pressure ulcer. The study warrants an implementation of the best practice of replacing bunny boots with hydrocellular foam dressings and offloading among other entities to prevent hospital acquired heel ulcer.

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