

Baptist Health South Florida

Scholarly Commons @ Baptist Health South Florida

All Publications

6-15-2018

An Interdisciplinary Team Approach to Reducing HAPIs

Jessenia Menendez

Miami Cancer Institute, jesseniam@baptisthealth.net

Isabel Madrigal

Doctors Hospital, Isabelmad@baptisthealth.net

Jennifer Agudelo-Doval

Doctors Hospital, jena@baptisthealth.net

Follow this and additional works at: <https://scholarlycommons.baptisthealth.net/se-all-publications>

Citation

Menendez, Jessenia; Madrigal, Isabel; and Agudelo-Doval, Jennifer, "An Interdisciplinary Team Approach to Reducing HAPIs" (2018). *All Publications*. 2830.

<https://scholarlycommons.baptisthealth.net/se-all-publications/2830>

This Conference Poster -- Open Access is brought to you for free and open access by Scholarly Commons @ Baptist Health South Florida. It has been accepted for inclusion in All Publications by an authorized administrator of Scholarly Commons @ Baptist Health South Florida. For more information, please contact Carrief@baptisthealth.net.

An Interdisciplinary Team Approach to Reducing HAPIs

Jessenia Menendez, BSN, RN, CCRN
Patient Care Supervisor

Jennifer Agudelo-Doval, BSN, RN
Patient Care Supervisor

Isabel Madrigal, MSN, RN, CCRN
Patient Care Manager

Background

Patients in the Intensive Care Unit (ICU) are at high risk for Hospital Acquired Pressure Injuries (HAPI) due to their comorbidity. Each year, more than 2.5 million people in the US reportedly develop pressure injuries which results in 29,000 deaths (Naghavi et al., 2014). Development of a HAPI affects the patient's quality of life, morbidity, mortality, hospital reimbursement, and the hospital's quality reporting indicators (Montague, 2017). Patients that remain in the same position for an extended period of time, have an increased chance of developing skin breakdown.



Purpose

- Use an interdisciplinary approach to reposition patients in the ICU with a Braden Scale score of 18 or less
- Implement Evidence Based Practice (EBP) to improve patient outcomes
- Improve job performance and enhance teamwork
- Decrease adverse events / complications related to not repositioning patients in a timely manner.

Methods of Implementation

- Used Clinical Excellence Through Evidence-Based Practice (CETEP) model to guide the turn team project
- Audits on patient repositioning performed in July 2016
- Discussed results of audits and proposed the interdisciplinary turn team during shift huddles in August 2016
- Educated all ICU staff during the August 2016 monthly staff meetings
- Implemented the interdisciplinary turn team in September 2016
- Designated a white board with time slots every two hours
- Two staff members sign up for every time slot
- Performed daily audits for the first month after implementation to ensure staff compliance with repositioning patients.

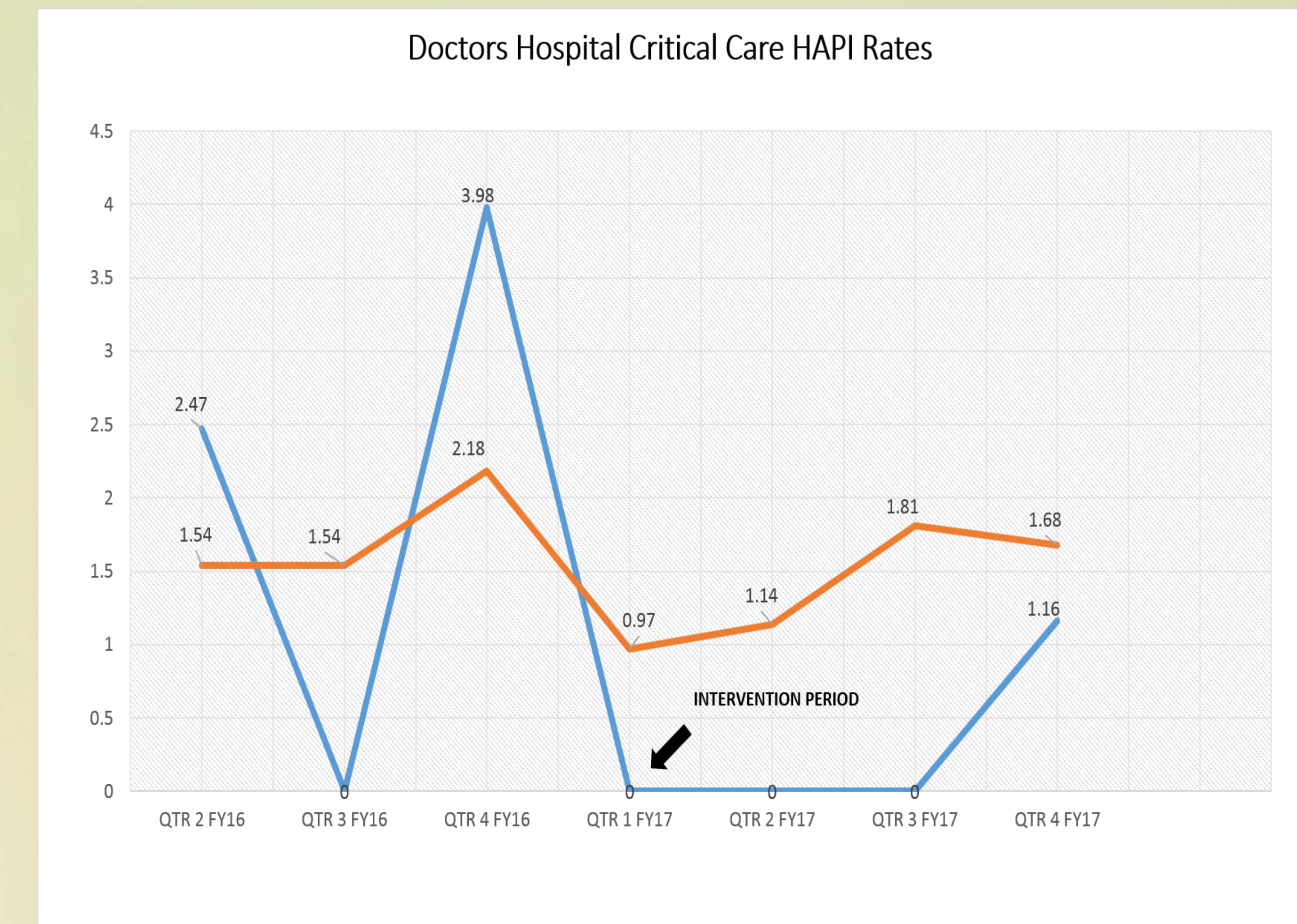
Turn Team

Time	Name	Name
0900	Griselle	Roger
1100	Dollys	Isabel
1300	Jennifer	Iris
1500	Jillian	Olga
1700	Gladys	Miguel

Time	Name	Name
2100		
2300		
0100		
0300		
0500		

Braden Score	Room #
11	801
	802
9	803
	804
	805
12	806
10	807
	808
5	809
10	810
	811
	812

Results



Discussion

ICU implemented evidence based practice to create the interdisciplinary turn team. Members that participate in the turn team are direct care nurses, clinical partners, respiratory therapists, patient care supervisors and the patient care manager which have created a team approach in reducing HAPIs. The success of the ICU's interdisciplinary turn team demonstrates the need to take a collaborate approach to improving patient outcomes.

References

Montague, M. (2017). Clinical trial of silk-like bed linens for prevention of unit-acquired pressure ulcers. WOCN Society's 49th Annual Conference, Salt Lake City, Utah, May 19-23, 2017. Journal of Wound, Ostomy & Continence Nursing, 44S11-S12. doi:10.1097/WON.0000000000000331

Naghavi M, et al. (2014). Global, regional, and national age-sex specific all-cause and cause-specific mortality for 240 causes of death, 1990–2013: A systematic analysis for the Global Burden of Disease Study 2013. Lancet, 385, 117–171.



Doctors Hospital

BAPTIST HEALTH SOUTH FLORIDA