

*CQI Program  
On enhancing pressure ulcer  
assessment and prevention for  
hospice & palliative in-patients*

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11.5.2010

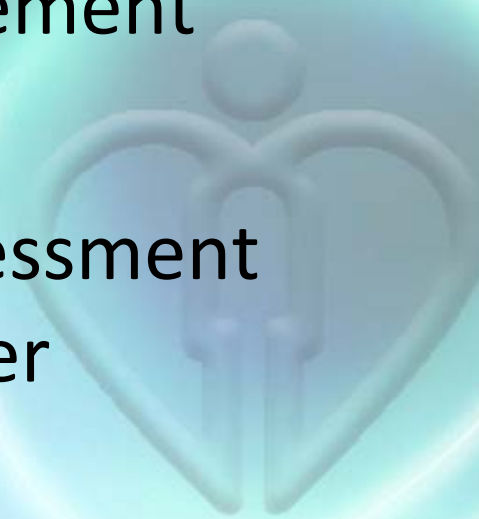


# Introduction

- Pressure Ulcer is common and contributes major cost in hospitals
- Adds burden to patients & relatives and undermines their quality of life
- Incident rate was used clinical indicator (KPI)

# Objectives

- Standardize in prevention of pressure ulcer in accordance to hospital requirement
- Enhance staff compliance in assessment and intervention of pressure ulcer



# Plan

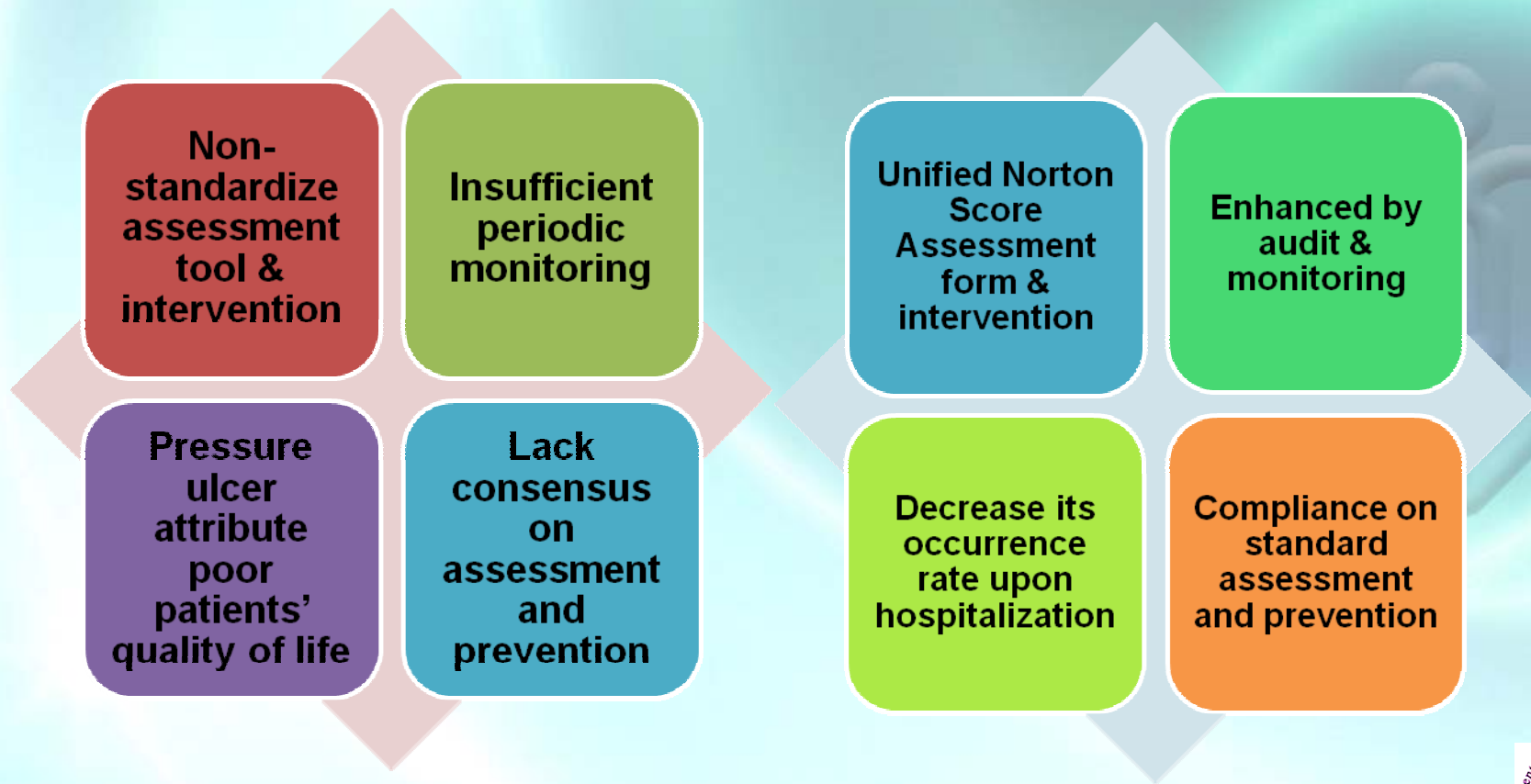
- Identification the problem of pressure ulcer assessment and intervention
- Staff compliance factor



# ANALYSIS

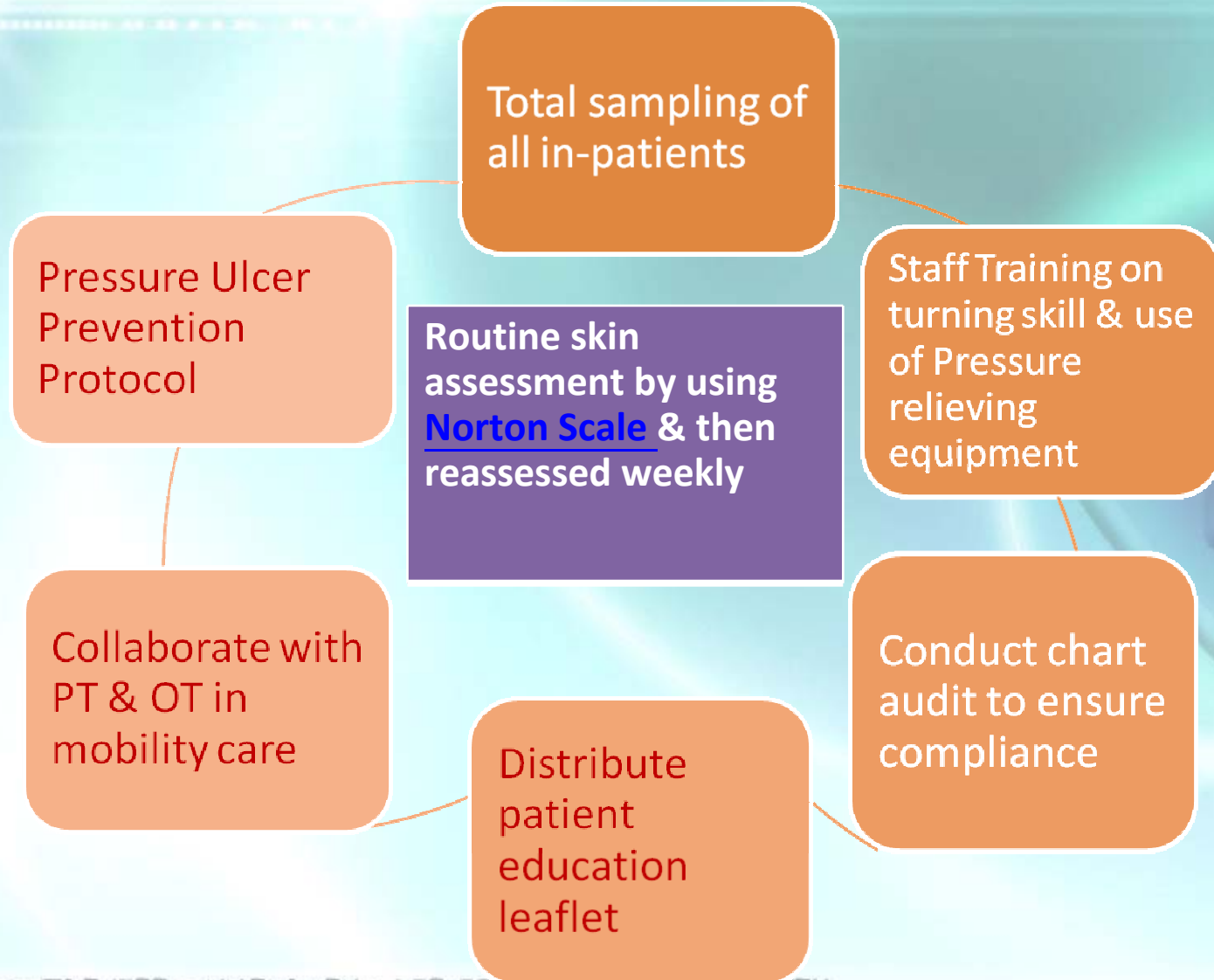
## Root Causes

## Expected Situation







# Methodology



# Implementation Plan

- 
- Set up working team
  - Review pressure ulcer journals & set up prevention protocol

- 
- Formulate the standardized workflow for pressure ulcer assessment & education
  - Conduct staff training and launch staff audit

- 
- Sustain staff compliance on Norton Scale assessment & intervention
  - Data collection and analysis

# EXECUTE

- Time frame of study: 5 months (July/09 – Nov/09)
- Distribute Pressure ulcer education leaflet
- Formulate Intervention checklist
- Pressure ulcer audit form
- Record Turning Chart



# Multidisciplinary Approach



# Pressure Relieving Device

Anti-Decubitus Mattress



# Pressure Relieving Device

Jelly Pad



Heel Protectors



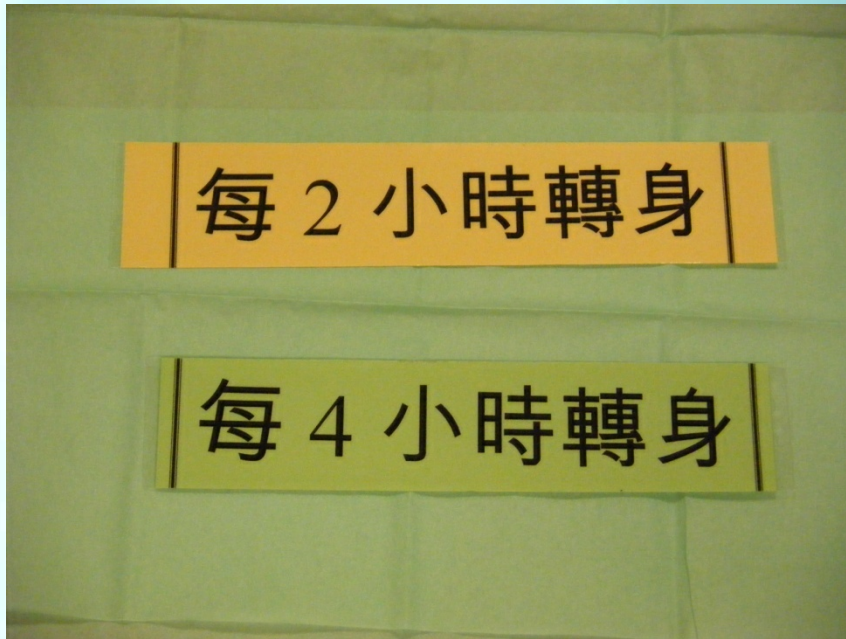
# Pressure Relieving Device

## Seat Cushion



# Pressure Relieving Device

## Signage



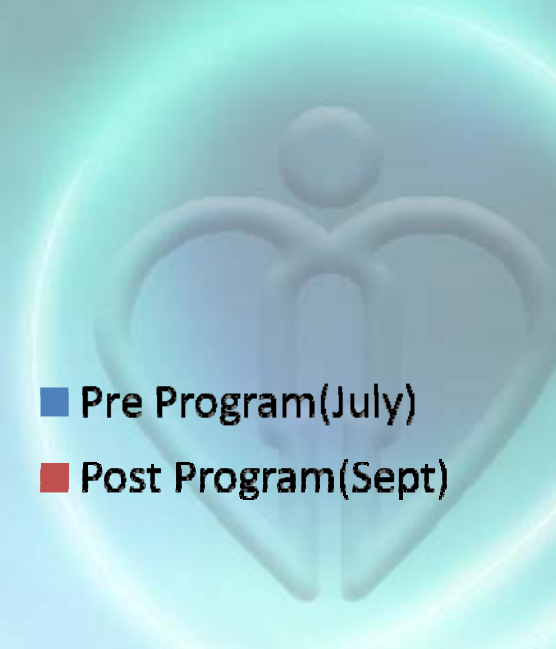
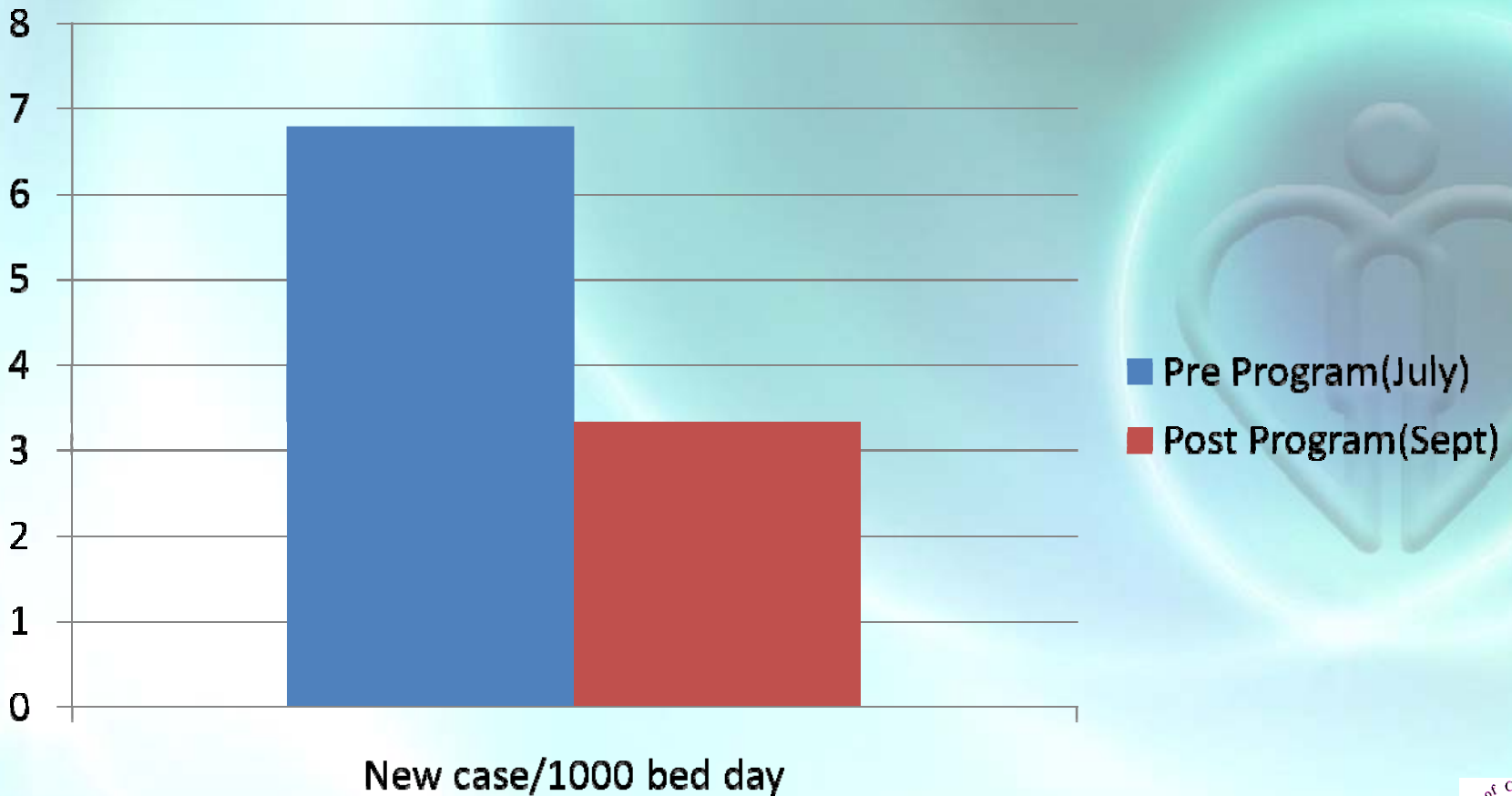
# EVALUATION

- Finally statistical data was drawn from the pre and post program comparison.
- The SPSS statistical method ANOVA test was used
- The pre and post new pressure ulcer occurrence rate were recorded.

# Findings & Discussion:

ANOVA test	Pre-program	Post-program
Sample size	381	392
Mean Scores of Norton Scale for all sample size	15.99	16.25
Norton Score categories <10	8.1%	6.6%
11-14	25.2%	24.5%
>10	66.7%	68.9%
New case/1000 bed day	6.78	3.34

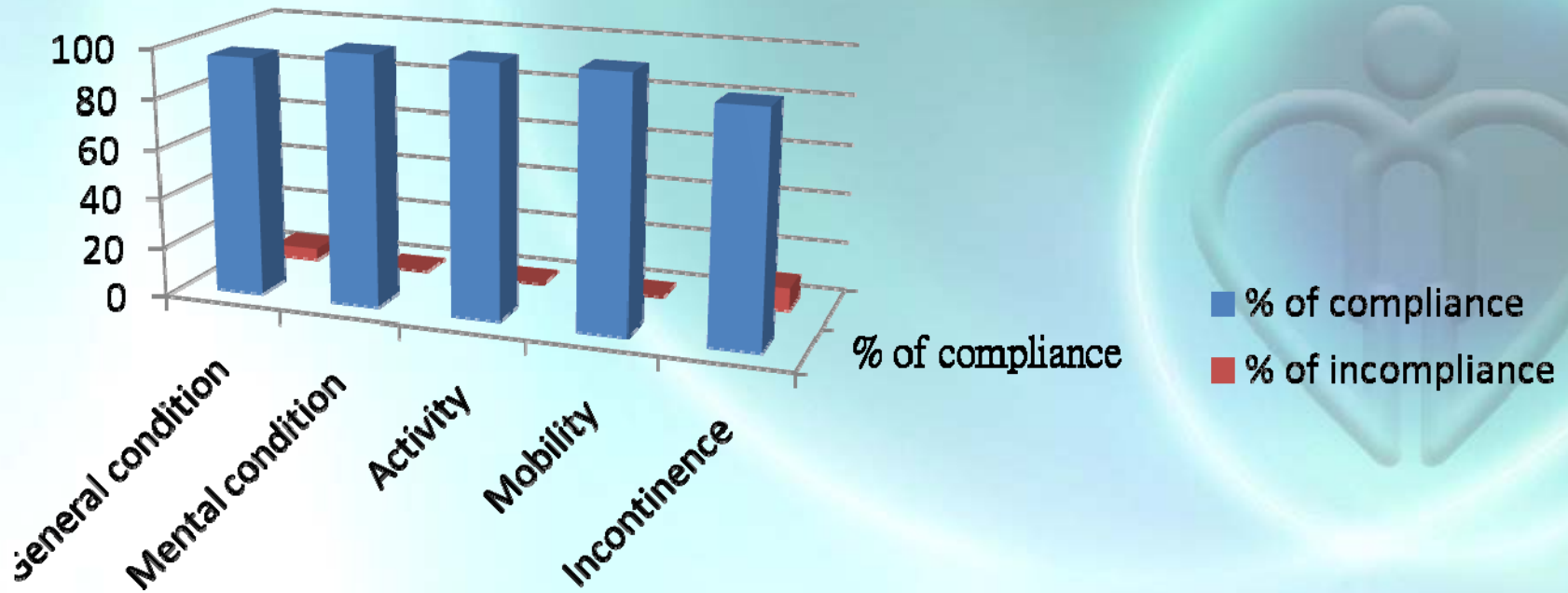
# Pressure Ulcer Occurrence Rate per thousand bed day







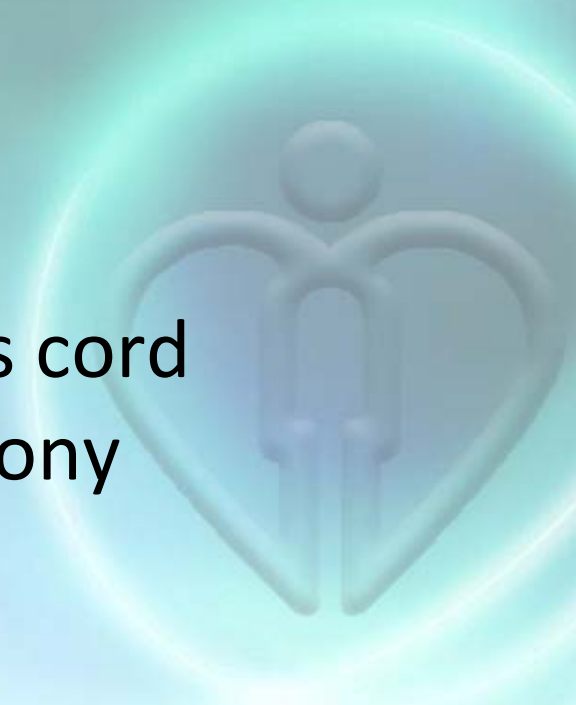
# Staff Chart audit result for Assessment Vs Intervention using Norton Scale





## **Limitation:**

- Inadequate time for samples recruitment
- Fragile physical status such as cord compression case, multiple bony prominence weak case



# Conclusion & Recommendation

- Achieved expected outcome
- Pressure ulcer is better to prevent than to manage
- How to sustain? On going training & audit
- Pressure care training to NGO health care worker & main carer

# Our Team: TMH H1 Ward



# PT & OT Team

**Paul & Brian & Marine**



**Margaret & Anne**





*Thank You*  
*Especially Hospital*  
*committee on Norton*  
*Scale Assessment*