

SINI 2015 Nursing Informatics Outstanding Practice Poster Award Winner

Phase One: Optimization of Pressure Ulcer Documentation and Data Compilation

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Problem Statement: The Pressure Ulcer Project was prioritized as part of a focus on quality of care and improving patient outcomes related to pressure ulcer prevention and intervention. The goals of the project included reducing the incidence of hospital-acquired pressure ulcers, improving the identification of pressure ulcers present on admission, optimizing nursing workflow efficiency and effectiveness, and documenting and capturing key data elements for performance reporting. The project focused on integrating the evidence-based Pressure Ulcer Prevention and Intervention guideline into the clinical documentation, streamlining the workflow to decrease the cognitive load of the bedside nurse, and improving EHR usability and end-user satisfaction. **Methods:** A design team was created, including informatics nurses, EHR builders, key bedside nurses, wound care clinicians, and dietitians. EHR builders included members with a key focus on clinical documentation, orders, reports, and MLMs functionality. Members met and created a working prototype to validate with all affected groups. When the design was complete, prototype review and shadow charting sessions were conducted, and feedback was incorporated into the final product. With new functionality within the product, an electronic lesson, documents, and open house sessions were created to educate all nurses throughout the system. **Results:** The product gives the bedside nurse access to the Braden scale definitions and interventions as reference material from within the EHR. Depending on the Braden score, a plan of care and appropriate interventions are added to the chart automatically, decreasing the workload of the nurse. Additionally, if the patient enters the facility with or develops a pressure ulcer during hospitalization, the nurse will enter the Pressure Ulcer Assessment order set empowering the nurse to initiate the evidence-based policy interventions, immediately beginning documented care of the patient. With the entry of the order set, a parameter and a plan of care are added to the flowsheets. In addition, screening orders are automatically sent to the wound care and nutrition departments, thereby increasing multidisciplinary communication and initiating a team approach to care. The parameter added to the flowsheet includes vital information concerning the pressure ulcer, such as whether the ulcer was present on admission and initial stage and location of the pressure ulcer, thus facilitating communication across all disciplines. Furthermore, the policy information is easily available as reference material to the nurse to validate appropriate interventions to initiate. The product facilitates pulling together the documentation and orders for reporting, internal auditing, and quality improvement measures. Users can gather data for discharged or currently admitted patients, enterprise-wide or patient and unit level views, view present on admission or hospital acquired status, as well as documentation of interventions and preventative measures performed. **Significance:** The work done to improve functionality during the product optimization phase improved nursing workflow, provided clinical decision support, and maximized communication across disciplines. Additionally, electronic compilation of documentation and orders enables achievement of quality improvement goals and required regulatory reporting.