Implementing the Glamorgan Pressure Injury Risk Assessment Scale at Starship Children's Hospital

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Background

Pressure injuries are a common, serious, and significant healthcare occurrence. They cause pain and disfigurement, slow recovery, interfere with activities of daily living, and are strongly associated with longer hospital stays and mortality. However, processes and products to prevent and treat pressure injury among adults are not directly transferrable to infants and children.

All acutely ill and immobilised infants, children and young people are at risk for pressure injuries. The reported prevalence rate of pressure injury in infants, children and young people in acute care settings ranges from 7% to 17% (2) which increases to 27% for critically ill infants, children and young people. (3) In addition to tissue damage associated with immobility, about 50% of pressure injuries in infants, children and young people are associated with medical devices pressing or rubbing on their skin (4).

The majority of pressure injuries are preventable with careful management. Reducing patient harm from pressure injuries is an international concern. Since 2006, the Institute for Healthcare Improvement has included the prevention of pressure injuries as one focus of the 5 Million Lives Campaign. An international collaboration has developed and published evidence based guidelines (5). Consistent with international trends, reducing harm from pressure injury is a key Health Safety and Quality Council (Open for Better Care) and Northern Region DHB (First Do No Harm) and Auckland District Health Board (ADHB) improvement target.

Problem

On exploring nursing practice (talking with nurses and reviewing clinical records) it was evident that the majority of children in Starship Child Health were not being risk assessed and care planning related to pressure injury prevention and management was inconsistent. As children’s risk factors differ from adults (6) it was necessary to explore and implement a paediatric specific assessment tool and care recommendations.

In addition it was noted there was great variability in nurses’ knowledge of:

- Use of risk assessment tools
- Application of pressure injury prevention measures
- Selection and use of appropriate pressure injury equipment
- Identification and grading of pressure injuries
- Management of pressure injury wounds
- Documentation of risk assessment, prevention and pressure injury management

Intervention

A steering group of senior nurses was formed who developed a paediatric pressure injury prevention and management guideline. The guideline included risk assessment, prevention and management. A working party representing all clinical areas and levels of nursing staff developed an education plan to increase staff knowledge related to the identified knowledge gaps and implement the guideline.

In October 2014 all nurses in Child Health received education in using the Glamorgan paediatric pressure ulcer risk assessment scale (6) and the newly developed Starship bundle of care. Education sessions were timetabled across all wards in Starship, facilitated by members of the working group and supported clinically by ward pressure injury prevention champions.

The scoring tool was incorporated into the daily observation chart and a copy of the Starship bundle of care was inserted into every clinical record folder.

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References: