Accreditation: ROP of the Week

Required Organizational Practice: Pressure Ulcer Prevention

WHAT IS PRESSURE ULCER PREVENTION?

- Each patient/client/resident's risk for developing a pressure ulcer (injury) is assessed and interventions to prevent pressure injuries are implemented.

- Early identification of risk factors and implementation of interventions to prevent pressure injury development is critical to maintain skin integrity.

> **A pressure injury may result in serious complications for a patient/client/resident**

AT HEALTH PEI:

- There is a *Pressure Ulcer Prevention Policy* and a Long Term Care (LTC) *Pressure Injury Risk Assessment and Prevention Policy* available on the *Policy Document Management System (PDMS/MedWorxx)*.
- The *Braden Assessment Scale* is used to provide early identification of individuals at risk of developing a pressure injury. A risk score is assigned based on the assessment.
- In acute care, a **Braden PowerPlan** is ordered based on the patient's risk score. The PowerPlan identifies which pressure injury prevention interventions to initiate for the patient's care.
- In LTC, an individual's care plan for each resident is developed based on their risk assessment.
- There are **Nurses Specialized in Wound Care (NSWOC)** who can be consulted for input into managing complex pressure injuries.
- **Incident reports** are completed whenever new skin breakdown/damage is noted. These incidents are documented in PSMS on the "Skin/Tissue" form.

> **Each policy stipulates when and how often to complete a Braden Assessment**

Questions Accreditation Canada Surveyors May Ask Staff:

How do you determine if your patient is at risk for developing a pressure injury?

How do you ensure that all team members are aware of a patient's risk for pressure ulcers and their individual care plan?

What education is provided to patients, families or caregivers regarding pressure ulcer prevention?