



23rd
HA National Forum

**SYNERGY
FOR SAFETY
AND
WELL-BEING**

Update Nursing Pressure Injury Indicator for Benchmarking

พว.วาสนา กิจพจน์ย์

Bumrungrad International Hospital

Pressure Injury Indicator

The purposes of the pressure injury survey

Determine the rate of hospital acquired pressure injury occurrence

Determine the rate of unit acquired pressure injury occurrence

Explore the relationship between nursing assessments performed, interventions used, and pressure injury development



National Database of
Nursing Quality
Indicators (NDNQI)

Pressure Injury Indicator

The development of hospital acquired pressure injuries (HAPI) places the patient at risk for other adverse events and increases resource consumption and healthcare costs. Recommendations from clinical practice guidelines on pressure injuries include the identification of individuals at risk and early implementation of prevention interventions to prevent pressure injury occurrence. In most at risk patients, interventions to reduce pressure, friction and shear, and to mitigate other patient risk factors (immobility, incontinence, impaired nutrition, etc.) will decrease pressure injury development and the worsening of existing pressure injuries.

Pressure Injury Occurrence Prevalence

Definition—A cross-sectional count of the number of cases in a population. It measures the total number of persons with a pressure injury in a hospital/hospital unit on the day of the pressure injury survey. It includes those admitted to the healthcare facility with a pressure injury and those who developed one between admission and the time of the survey. Calculation of this indicator requires documentation on all patients who are on the reporting unit(s) on the designated survey date.

Prevalence Rate (also called a point prevalence)

Total number of patients with a pressure injury at a particular point in time
Total number of patients in the population studied at a particular point in time

Multiply quotient by 100 to obtain a percent

Hospital Acquired Pressure Injury (HAPI) Rate

Definition—A count of the number of patient who acquired (developed) a new pressure injury after admission to the hospital. It is intended to differentiate hospital acquired pressure injuries from those acquired in the community. For patients with pressure injuries, the origin of the pressure injury also must be determined (hospital, hospital/unit or community acquired).

Calculation of the HAPI rate requires the record of any patient with a pressure injury at the time of the survey be examined for evidence of a pressure injury on admission. If a review of the patient record finds no evidence of the pressure injury on admission (present on admission), then the pressure injury is hospital acquired.

HAPI Rate

Number of patients who acquired a pressure injury after admission to the hospital

Total number of patients in the population studied

Multiply quotient by 100 to obtain a percent

Unit Acquired Pressure Injury (UAPI) Rate

Definition—A new pressure injury that developed after arrival to the unit. It is intended to differentiate HAPI that are acquired on the survey unit from HAPI acquired on other units.

Calculation of this rate requires the record of any patient with a pressure injury at the time of the survey be examined for evidence of a pressure injury on arrival to the unit. If there is no documentation that the pressure injury was present on arrival to the survey unit, then the pressure injury is counted as unit acquired.

UAPI Rate

Number of patients who acquired a pressure injury after arrival to the unit

Total number of patients in the population studied

Multiply quotient by 100 to obtain a percent

Pressure Injury Survey Procedures

Team

Each facility must identify persons to perform the survey assessments. Hospitals may have multiple teams with one person designated as the head team leader. This team leader should have a certification in wound care or have received additional education and training in pressure injury identification and staging.

Training

The team leader is responsible for training team members.

Organizing a Survey

Quarterly

Data Collection

Data collection steps

1. Generate a list of all patients assigned to the unit at the time the team is ready to begin data collection.
2. Patients who will be transferred or discharged should be examined first. On units where patients are expected to dress for the day schedule the skin inspection before they get dressed. Also prioritize patients based on infection control principles.
3. The survey process should be explained as a quality improvement study on skin breakdown from pressure. The skin inspection should not proceed if the patient or parent/guardian of a patient refuses.
4. Inspect all bony prominences and body surfaces subject to pressure or pressure in combination with shear.

5. Whenever possible, removes medical devices to assess the underlying skin.
6. Identify and stage pressure injuries.
7. Identify whether pressure injuries were known to be related to a medical device.
8. Conduct record review to abstract data on pressure injury risk and prevention.
9. Determine if pressure injury is community-, hospital- and/or unit acquired.

Data must be collected according to standards

Acceptable

Skin assessment and review of medical record of every patient surveyed

Survey all patients on unit

Unacceptable

Review of medical record/ chart audit only

Survey only patients with a specific length of stay

NDNQI_PU Survey in Y2019



เก็บข้อมูลทุกวันพุธที่ 2 ของเดือนก่อนสุดท้าย ในแต่ละ **Quarter**

By Quarterly	Date	Month	Remark
Q1	13	February	<ul style="list-style-type: none">❖ คิดเป็นชั่วโมงทำงานตามที่ทำจริง แต่ไม่เกิน 2 ชม./เคาน์เตอร์❖ อย่าลืม!!■ ถ้ามาเก็บข้อมูลในวันหยุดต้อง Time Stamp เข้า-ออก ด้วยนะคะ
Q2	15	May	
Q3	14	August	
Q4	13	November	

Pressure Injury Survey Report

Pressure Injury Survey - Monthly Report												
(For data collection purposes only)												
Date:												
NDNQI® Hospital Code:												
Unit Name:												
Month:												
Date of Survey												
Report for Year & Quarter:												
Unit Census:												
Number Surveyed: _____ Number Excluded: _____ Not on Unit _____ Refused _____ Unsafe for Pt. _____ Actively Dying _____												
Unit Acquired Injury Reporting: Yes _____ No _____												
Risk Assessment (RA*) Scale Used on This Unit: <input checked="" type="checkbox"/> Braden(B*) <input type="checkbox"/> NSRAS(NS*) <input type="checkbox"/> Multiple Scales <input checked="" type="checkbox"/> <input type="checkbox"/> BradenQ(BQ*) <input type="checkbox"/> Norton(N*) <input type="checkbox"/> Other(O*) <input type="checkbox"/> Clinical Factors (CL*)												
Pt. 1 Pt. 2 Pt. 3 Pt. 4 Pt. 5 Pt. 6 Pt. 7 Pt. 8 Pt. 9 Pt. 10												
1. Pressure Injury		Patient Number(HN)										
Patient Demographics	1.1. Age	List years, months, days, and/or gestational age at birth as appropriate										
	1.2. Gender	F=Female / M=Male										
Admission Assessment	1.3. Skin Assessment	Y=Yes /N=No /P=Pending										
	1.4. Risk Assessment	Y=Yes /N=No /P=Pending										
Last Assessment*	1.5. Scale & Score	Indicate RA* Scale or if O*/CL* used RA* Score (Only if used B*, BQ*, NS*, N*) ใช้คะแนนวันที่ admit	B	B	B	B	B	B	B	B	B	B
	1.6. Time Since Last Pressure Injury Risk Assessment (check one)	>0-12 Hours										
		>12-24 Hours										
		>24-48 Hours										
		>48-72 Hours										
		>72 Hours - 1 Week										
		> 1 Week										
	Never assessed for risk (avail. if adm. risk = No; skip to # of pressure injuries)											
	1.7. Scale & Score	Indicate RA* Scale or if O*/CL* used RA* Score (Only if used B*, BQ*, NS*, N*) ใช้คะแนนที่ประเมินครั้งแรก	B	B	B	B	B	B	B	B	B	B
	1.8. Patient at Risk	Y=Yes for RA* score/ YCL=Yes for CL*/ N=No										
Types of Prevention Interventions In Use Within Past 24 Hours for At Risk Patients only	1.9. Prevention in Use	Y=Yes/ N=No/ P=Pending										
	1.10. Skin Assessment	Y=Yes N=No D=Documented Contraindication										
	1.11. Pressure Redistribution Surface	Y=Yes N=No D=Documented Contraindication U=Unnecessary for Patient P=Pt. Refused										
	1.12. Repositioning	Y=Yes N=No D=Documented Contraindication U=Unnecessary for Patient P=Pt. Refused										
	1.13. Nutritional Support	Y=Yes N=No D=Documented Contraindication U=Unnecessary for Patient P=Pt. Refused										
	1.14. Moisture Management	Y=Yes N=No D=Documented Contraindication U=Unnecessary for Patient P=Pt. Refused										
# of Pressure Injuries*	1.15. Each Patient	Total										
	Hospital Acquired (this unit &/or other unit)	Total Number of Hospital Acquired Pressure Injuries for this Patient known to be related to a Medical Device										
		Unit Acquired (this unit only)	Total Number of Unit Acquired Pressure Injuries for this Patient known to be related to a Medical Device									
		1.16. At Each Stage of Hospital / Unit Acquired Injuries	Stage 1									
	Stage 2											
	Stage 3											
	Stage 4											
	Unstageable											
	DTPH (Deep Tissue Pressure Injury)											
	1.17. Medical Device related Pressure Injuries	Mucosal Membrane PI										
Non-Visible Pressure Injury												
		Total number of Hospital Acquired Pressure Injuries Related to a Medical Device										
		Total number of Unit Acquired Pressure Injuries Related to a Medical Device										

Date: _____

NDNQI® Hospital Code: _____

Unit Name: _____

Month: _____ Date of Survey: _____

Report for Year & Quarter: _____

Unit Census: _____

Number Surveyed: _____ Number Excluded: _____ Not on Unit _____ Refused _____ Unsafe for Pt. _____ Actively Dying _____

Unit Acquired Injury Reporting: Yes _____ No _____

Risk Assessment (RA*) Scale Used on This Unit: ☒ Braden(B*) ☐ NSRAS(NS*) ☐ Multiple Scales ☒ Clinical Factors (CL*)
☐ BradenQ(BQ*) ☐ Norton(N*) ☐ Other(O*)

1. Pressure Injury		Patient Number(HN)	PL 1	PL 2	PL 3	PL 4	PL 5	PL 6	PL 7	PL 8	PL 9	PL 10
Patient Demographics	1.1.Age	List years, months, days, and/or gestational age at birth as appropriate	12345678									
	1.2.Gender	F=Female / M=Male	F									
	1.3.Skin Assessment	Y=Yes / N=No / P=Pending	Y									
	1.4.Risk Assessment	Y=Yes / N=No / P=Pending	Y									
	1.5.Scale & Score	Indicate RA* Scale or if O/CL* used	B	B	B	B	B	B	B	B	B	B
Last Assessment*	1.6.Time Since Last Pressure Injury Risk Assessment (check one)	>0-12 Hours >12-24 Hours >24-48 Hours >48-72 Hours >72 Hours - 1 Week > 1 Week Never assessed for risk (avail. if adm. risk = No; skip to # of pressure injuries)	21									
	1.7.Scale & Score	Indicate RA* Scale or if O/CL* used	B	B	B	B	B	B	B	B	B	B
	1.8.Patient at Risk	YRA=Yes for RA* score/ YCL=Yes for CL* N=No	YRA									
	1.9.Prevention in Use	Y=Yes / N=No / P=Pending	Y									
	1.10.Skin Assessment	Y=Yes N=No D=Documented Contradication	Y									
Types of Prevention Interventions in Use Within Past 24 Hours for At Risk Patients only	1.11.Pressure Redistribution Surface	Y=Yes N=No D=Documented Contradication U=Unnecessary for Patient P=Pt. Refused	U									
	1.12.Repositioning	Y=Yes N=No D=Documented Contradication U=Unnecessary for Patient P=Pt. Refused	Y									
	1.13.Nutritional Support	Y=Yes N=No D=Documented Contradication U=Unnecessary for Patient P=Pt. Refused	U									
	1.14.Moisture Management	Y=Yes N=No D=Documented Contradication U=Unnecessary for Patient P=Pt. Refused	Y									
# of Pressure Injuries*	1.15.Each Patient	Total Hospital Acquired (this unit &/or other unit) Total Number of Hospital Acquired Pressure Injuries for this Patient known to be related to a Medical Device	3 1 1									
		Unit Acquired (this unit only) Total Number of Unit Acquired Pressure Injuries for this Patient known to be related to a Medical Device	0 0									
	1.16.At Each Stage of Hospital/Unit Acquired Injuries	Stage 1 Stage 2 Stage 3 Stage 4 Unstageable DTPI (Deep Tissue Pressure Injury) Mucosal Membrane PI Non-Visible Pressure Injury	1 /									
	1.17.Medical Device related Pressure Injuries	Total number of Hospital Acquired Pressure Injuries Related to a Medical Device Total number of Unit Acquired Pressure Injuries Related to a Medical Device	0 0									
	2. Restraint in Use	Y=Yes / N=No	Y									
2.1 Restraint Type (check all that apply) <small>ข้อควรระวัง</small>	Limb (แขน/ขา)											
	Vest (เสื้อ)											
	Other											
2.2 Restraint Category (check one) <small>เหตุผลที่ต้องใช้</small>	Acute Med/Surg (ผู้ป่วยมีอาการหรือโรคเฉียบพลัน)											
	Behavioral (Emotion/Behavioral disorder Ex/Violent/Aggressive)											
	Other											
	Unknown											
2.3 Clinical Justification for Restraint (check all that apply) <small>ความจำเป็น</small>	Prevent falling/getting out of bed											
	Prevent removing equipment/therapies											
	Reduce harm to self											
	Reduce harm to others											
	Other											
	Unknown											



NYL673 - Bumrungrad Hospital Public Company Limited » Coronary Care Unit (49322) » Pressure Injuries

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Documents

Tutorial

General Overview Tutorial

To begin data entry, first select the month, then one of 'Pressure Injuries,' 'Restraints' or 'Together' as appropriate.

January

February

March

Pressure Injuries

Pressure Injuries

Pressure Injuries

Pressure Injuries -
Separate Survey

Restraints

Restraints

Restraints

Restraints - Separate
Survey

Together

Together

Together

Restraints & Pressure
Injuries - Same Day

Pressure Injuries & Restraints

INSTRUCTIONS

MARCH ?

Summary

* Denotes Required Fields.

Unit census at start of survey *

35

Total number of patients included in the survey *

32

Date Of Survey *

03/07/2023

Patients Excluded from Survey Assessment:

Patients off unit *

3

Patients refused *

0

Unsafe for patient condition *

0

Patients actively dying *

0

Unit Acquired Pressure Injury Reporting *

Yes

Pressure Injury Risk Assessment Scale Used *

Braden

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Pressure Injuries & Restraints

INSTRUCTIONS

MARCH 0 / 32

Summary

Details

Details Records

new-record

* Denotes Required Fields.

Pressure Injury and Restraints Combo ID

Patient Age Years

50

Patient Gender

Female

Restraint in Use *

No

Skin Assessment on Admission

Yes

Patient Gender

Female

Restraint in Use *

No

Skin Assessment on Admission

Yes

Pressure Injury Risk Assessment on Admission

Yes

Risk Assessment Scale on Admission

Braden

Risk Assessment Score on Admission

14

Time Since Last Risk Assessment *

> 0 to 12 hours

Last Risk Assessment Scale

Braden

Last Recorded Risk Assessment Score

16

Patient At Risk Based on Last Assessment *

Yes - based on risk assessment score

Prevention Within Past 24 Hours *

Yes

Skin Assessment Documented

Yes

Pressure Redistribution Surface

Yes

Routine Repositioning

Yes

Total number of Pressure Injuries for this patient *

0

Hospital Acquired

Hospital: Number of
Hospital Acquired Pressure
Injuries for this Patient

0

Hospital: Number of Stage 1

0

Hospital: Number of Stage 2

0

Hospital: Number of Stage 3

0

Hospital: Number of Stage 4

0

Hospital: Number of
Unstageable Pressure Injury

0

Hospital: Number of DTPI

0

Hospital: Number of
Mucosal Membrane

0

Hospital: Number of Non-
visible Pressure Injury

0

Total Number of Pressure
Injuries for this Patient
Related to a Medical Device

0

Unit Acquired

0

0

0

0

0

0

0

0

0

0

Save

Cancel


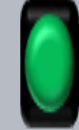
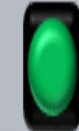
Delete

High Quality Nursing Service

Nursing Quality Indicators Outcome



NDNQI Benchmarking

Key performance measurement	Avg. Y 2017	Avg. Y 2018	Q1 Y2019	Q2 Y2019	Q3 Y2019	Average Status 2019
➤ Hospital Acquired Pressure Injuries  Target = Meet top 25 th %Tile						
1. Percent of Surveyed Patients with Hospital Acquired Pressure Injuries (Total HAPI)	0.92 < 25%tile	0.00 In 10%tile	0.61 < 25%tile	0.36 < 25%tile	0.31 < 25%tile	
2. Percent of Surveyed Patients with Hospital Acquired Pressure Injuries Stage II and Above	0.61 < 25%tile	0.00 In 10%tile	0.61 < 25%tile	0.00 In 10%tile	0.00 In 10%tile	

Thank you