

TOPIC: IN SUPPORT OF HOSPITALS ADOPTING PROGRAMS WHICH EDUCATE NURSES ABOUT THE IDENTIFICATION AND PREVENTION OF PRESSURE ULCERS

SUBMITTED BY: Maurine Church Coburn School of Nursing- Monterey Peninsula College

AUTHORS: Aaron M. Kellington, Yvonne Leavitt, Rosalyn Trapp, Bonnie Tucker

WHEREAS, The prevalence of pressure ulcers in various health care facilities is increasing—ranging from 0.4% to 38% in acute care, from 2.2% to 23.9% in long-term care, and from 0% to 17% in home care (Lyder, 2003, p. 223); and

WHEREAS, “In US acute care facilities alone, an estimated 2.5 million pressure ulcers are treated each year” (Reddy, Gill, & Rochon, 2006, p. 974); and

WHEREAS, In fiscal year 2007, there were 257,412 cases of stage III and IV ulcers, at a cost of \$43,180 per hospitalization (Kurtzman & Buerhaus, 2008, p. 32); and

WHEREAS, On October 1, 2008, the Centers for Medicare and Medicaid Services (CMS) will eliminate additional Medicare payments for eight preventable hospital-acquired conditions, of which pressure ulcers are the most common (Kurtzman & Buerhaus, 2008, p. 30); and

WHEREAS, “Pressure ulcers cause considerable harm to patients, hindering functional recovery, frequently causing pain and the development of serious infections. Pressure ulcers have also been associated with an extended length of stay and mortality” (5 Million Lives Campaign, 2008, p. 4); and

WHEREAS, Research shows that most pressure ulcers are preventable. Nursing leaders who have introduced effective prevention programs say that leadership, training, and relentless focus on making skin care a priority are all key (<http://www.ihl.org/IHI/Topics/PatientSafety/SafetyGeneral/ImprovementStories/FSRelievethethePressureandReduceHarm.htm>, 2007, p. 2); and

WHEREAS, “Hospitals’ comprehensive pressure ulcer prevention programs such as ‘Save our Skin,’ created by OSF St. Francis Medical Center in Peoria, Illinois, successfully reduced the incidence of hospital-acquired pressure ulcers from 9.4 percent in 2001 to 1.5 percent in December 2006” (Griffin, Copper, Horack, Klyber, & Schimmelpfenning, 2007, p. 30); therefore be it

RESOLVED, that the CNSA support and encourage its constituents to promote hospitals’ adoption of programs which educate nurses about the identification and prevention of pressure ulcers; and be it further

RESOLVED, that the CNSA encourage the inclusion of education about pressure ulcer prevention in nursing curricula, particularly educating nursing students about risk factors and specific preventative methods; and be it further

RESOLVED, that the CNSA encourage its constituents to write letters of support to the American Diabetes Association; Wound, Ostomy, and Continence Nurses Society; American Geriatrics Society; National Pressure Ulcer Advisory Panel; Agency for Health Care Policy and Research; Oncology Nursing Society; Emergency Nurses Association; American Association of Critical Care Nurses; American Heart Association; The Joint Orthopedic Nursing

Advisory Service; Association of Perioperative Registered Nurses; and all other pertinent agencies and organizations; and be it further

RESOLVED, that the CNSA publish articles regarding the importance of adopting programs to train nurses in identification and prevention of pressure ulcers in *Range Of Motion*; and be it further

RESOLVED, that CNSA support the research and development of new products and equipment to better prevent pressure ulcers, including but not limited to: specialty beds, skin care products, endotracheal tube holders and heel lifts.

RESOLVED, that the CNSA send a copy of this resolution to the Community Hospital of the Monterey Peninsula, Natividad Medical Center, Salinas Valley Memorial Healthcare System, National Student Nurses Association, American Nurses Association, National League for Nursing, American Organization of Nurse Executives, American Association of Colleges of Nursing, National Association of School Nurses, American Holistic Nurses Association, Hospice and Palliative Nurses Association, The Center for Nursing Advocacy, American Medical Association, American Hospital Association, California Hospital Association, Joint Commission on Accreditation of Healthcare Organizations, and any other organization deemed appropriate by the CNSA Board of Directors.

