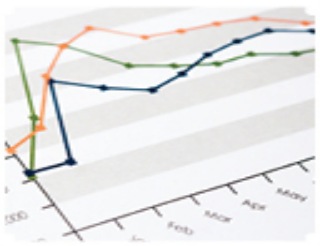
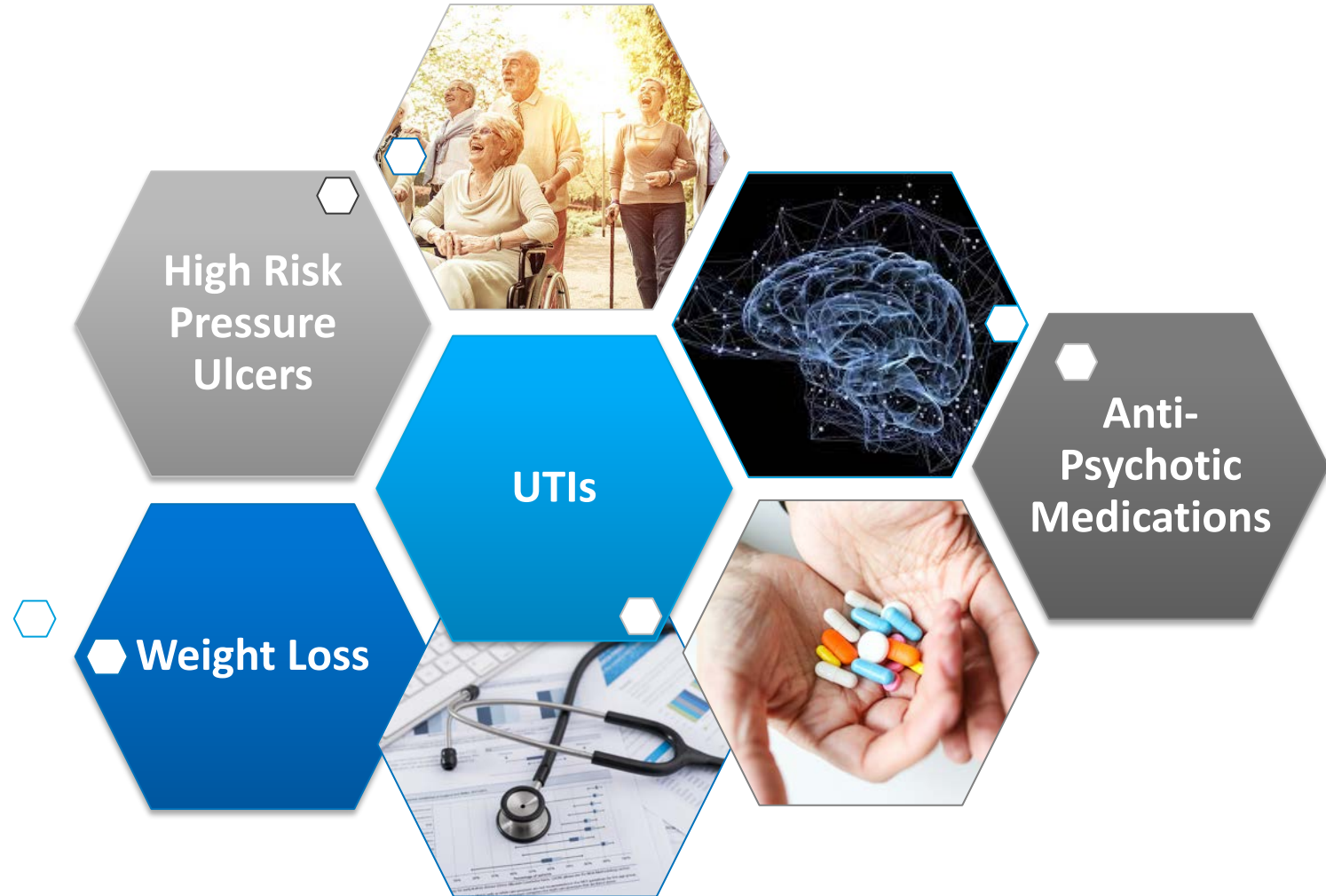


QI -

# High Risk Pressure Ulcers Quality Measure



# Age-Friendly Homes



# Facility Level Quality Measure Report



## CASPER Report MDS 3.0 Facility Level Quality Measure Report

Page 1 of 1

Facility ID: NH5531  
 CCN: 375256  
 Facility Name: **check facility name**  
 City/State: OKLAHOMA CITY, OK

Report Period: **check the report period**  
 Comparison Group: 05/01/2019 - 10/31/2019  
 Report Run Date: 01/03/2020  
 Data Calculation Date: 12/30/2019  
 Report Version Number: 3.02

Note: Dashes represent a value that could not be computed

Note: S = short stay, L = long stay

Note: C = complete; data available for all days selected, I = incomplete; data not available for all days selected

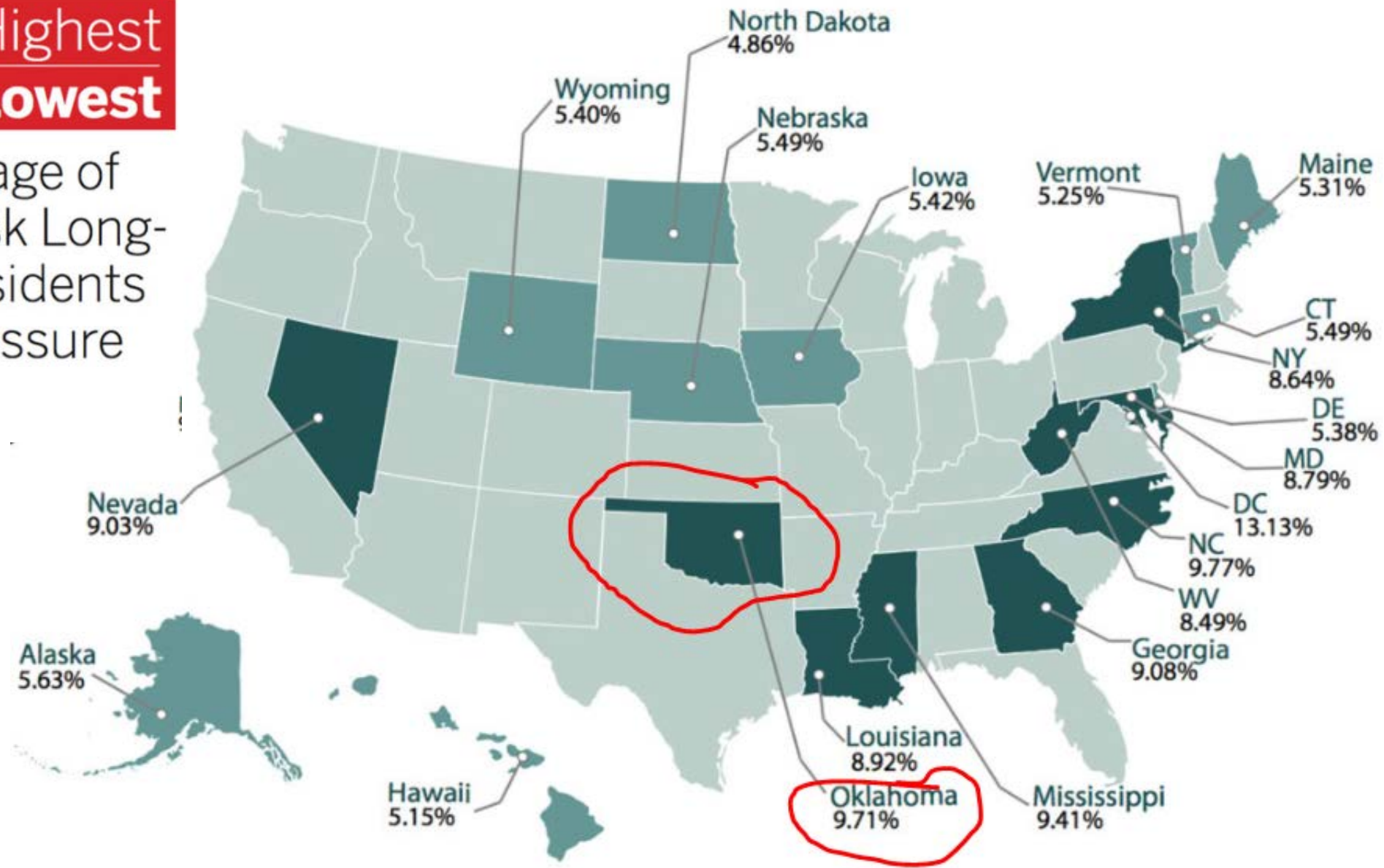
Note: \* is an indicator used to identify that the measure is flagged

Note: For the Improvement in Function (S) Measure, a single \* indicates a Percentile of 25 or less (higher Percentile values are better)

Measure Description	CMS ID	Data	Num	Denom	Facility Observed Percent	Facility Adjusted Percent	Comparison Group State Average	Comparison Group National Average	Comparison Group National Percentile
Hi-risk/Unstageable Pres Ulcer (L)	N015.03	C	8	62	12.9%	12.9%	9.8%	8.1%	81 *
Phys restraints (L)	N027.02	C	1	117	0.9%	0.9%	0.2%	0.2%	92 *
Falls (L)	N032.02	C	70	117	59.8%	59.8%	52.0%	45.4%	86 *
Falls w/Maj Injury (L)	N013.02	C	12	117	10.3%	10.3%	4.9%	3.5%	97 *
Antipsych Med (S)	N011.02	C	4	129	3.1%	3.1%	2.2%	2.0%	81 *
Antipsych Med (L)	N031.03	C	19	116	16.4%	16.4%	17.4%	14.2%	66
Antianxiety/Hypnotic Prev (L)	N033.02	C	4	78	5.1%	5.1%	9.4%	6.5%	51
Antianxiety/Hypnotic % (L)	N036.02	C	31	89	34.8%	34.8%	25.9%	19.7%	90 *
Behav Sx affect Others (L)	N034.02	C	3	100	3.0%	3.0%	18.2%	20.8%	8
Depress Sx (L)	N030.02	C	0	108	0.0%	0.0%	4.0%	5.5%	0
UTI (L)	N024.02	C	2	112	1.8%	1.8%	4.8%	2.8%	48
Cath Insert/Left Bladder (L)	N026.03	C	4	111	3.6%	3.6%	2.9%	2.2%	75 *
Lo-Risk Lose B/B Con (L)	N025.02	C	8	39	20.5%	20.5%	37.8%	48.2%	7
Excess Wt Loss (L)	N029.02	C	10	84	11.9%	11.9%	5.3%	5.7%	89 *
Incr ADL Help (L)	N028.02	C	9	82	11.0%	11.0%	14.4%	14.9%	32

# 10 Highest Lowest

Percentage of High-Risk Long-Stay Residents With Pressure Ulcers



### Performance Improvement Project (PIP) Documentation

Nursing Home Name: \_\_\_\_\_ Start Date: \_\_\_\_\_

#### PIP Team Members:

Staff Name	Title		
	ADM		
	DON		
	MA		
	Wound Care Nurse		

#### PIP Team Project:

Quality Measure of Focus	Baseline Rate of QM	Improvement Goal for QM	Goal Rate	Date to reach the goal rate
H-Risk Pressure Ulcers	22%	Below State Average	8.7%	June 2022

#### Goal Monitoring:

Current Date	Current Rate	Current Date	Current Rate	Current Date	Current Rate
Feb 2022	22%				
Apr 2022	15%				
May 2022	10%				

#### Interventions: The following are the interventions Implemented:

Start Date	Intervention Description	Intervention Notes	Outcome/Results
Feb 2022	Identify PIP Team		
Feb 2022	Run MDS CASPER Resident Level Quality Measure Report		
Feb 2022	Identify residents trigger for HR PU		
Mar 2022	Wound Care Nurse- In-Service Education on Rotation		
Apr 2022	Educational In-Service- Save our Skin prepared and presented by OFMQ and OU		

**Outcomes:** Use the table below to document what has worked, what has not worked, or lessons learned.

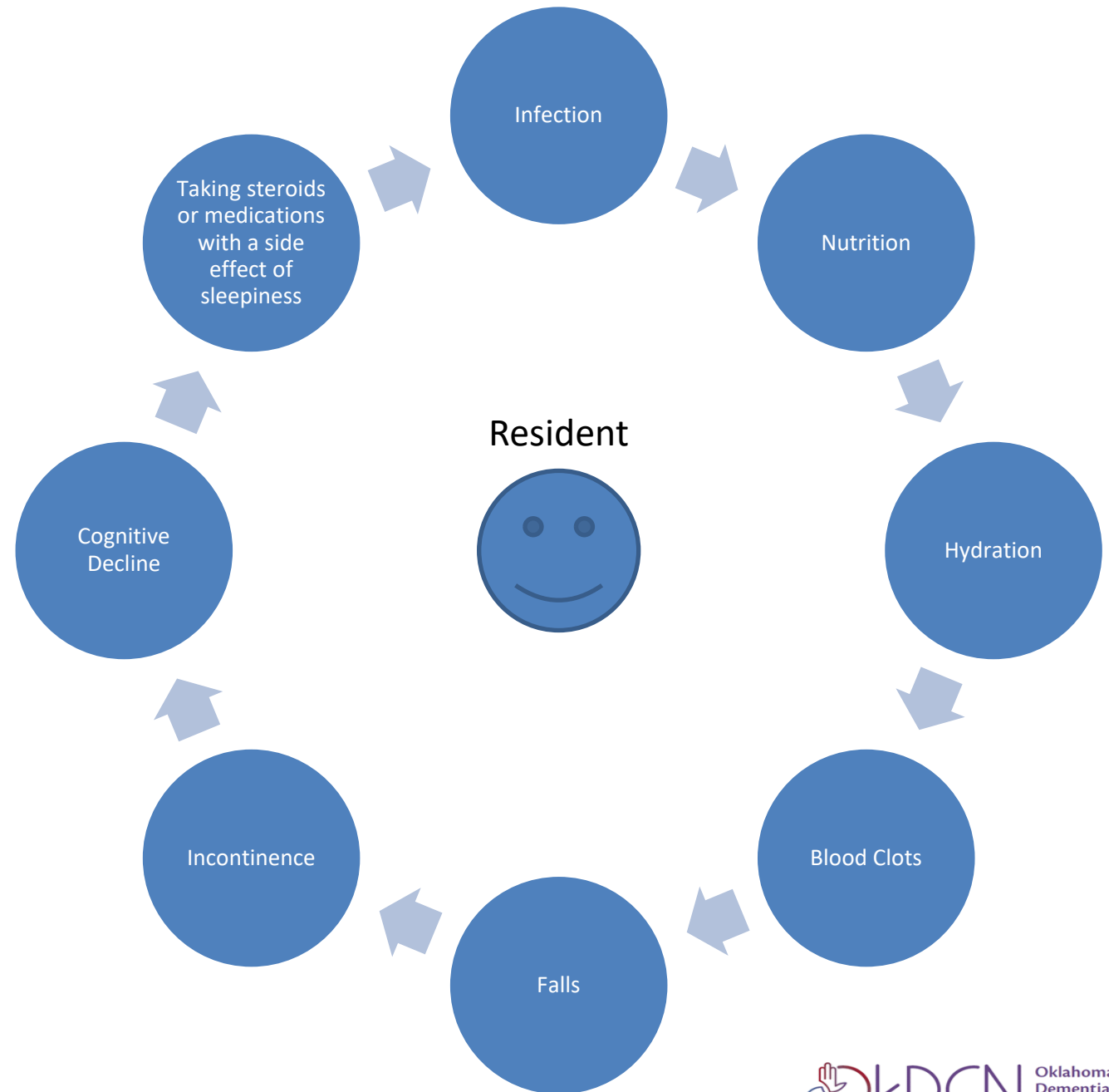
Intervention Successes	Intervention Barriers	Lessons learned
Communication with sign and EHR reminders for rotation and wound care.	Shift Change- Education, Turnover	Signage and Communication for residents at greater risk works

- Team Members
- Project Focus
- Goal Monitoring
- Interventions
- Outcomes

# PIP IT: High-Risk Pressure Ulcers

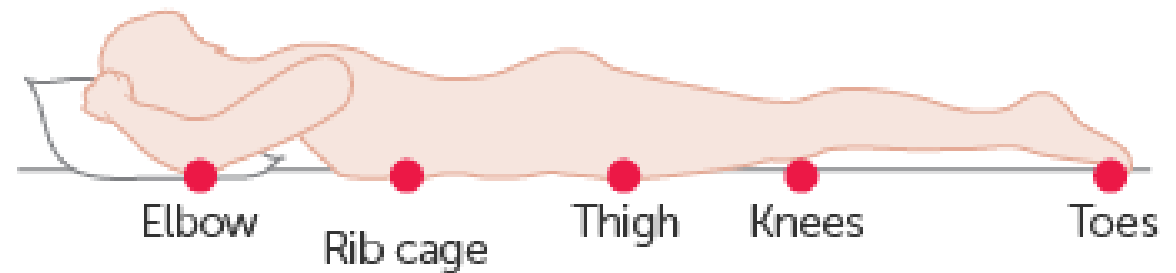
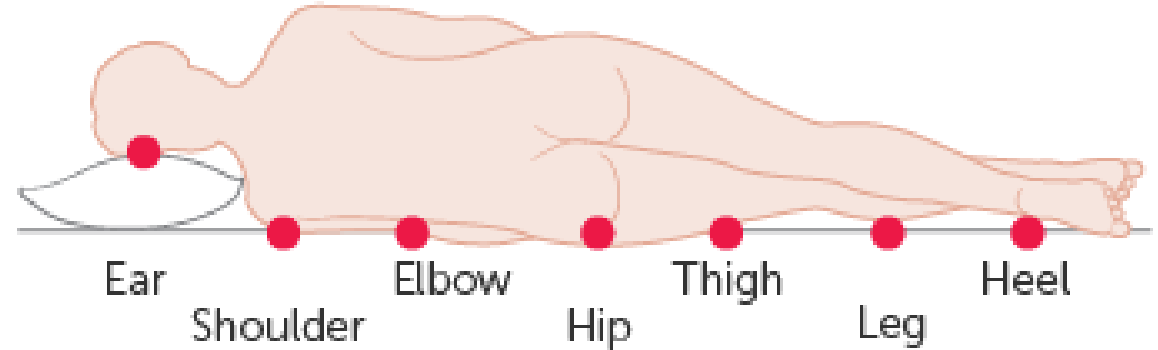
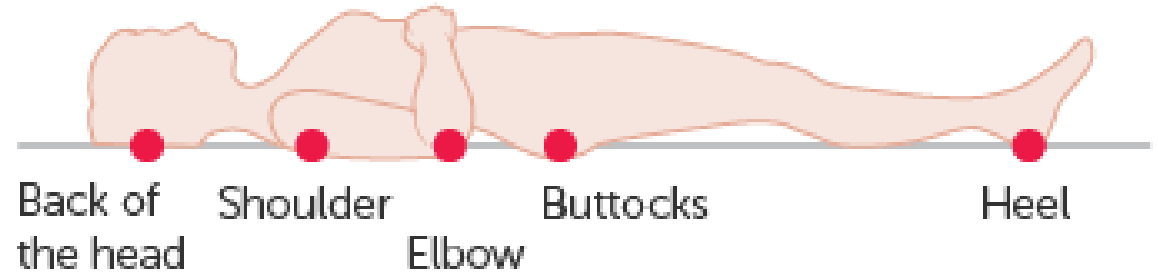
### Break the Cycle: Eliminate avoidable Pressure Ulcers

1. Motivate and Inspire through Education and Training
2. Skin Inspections
3. Assess Individual Risk
4. Plan and implement preventative care
5. Use pressure relieving equipment
6. Provide education to resident and family members
7. Implement an intentional rounding chart
8. Timely reassessment
9. Report
10. Result Residents receive quality intentional care



## WHERE DO PRESSURE ULCERS BEGIN?

- Tail bone
- Hip bones
- Spine
- Ears
- Back of head
- Heels
- Ankles
- Elbows
- Anywhere!



# Interventions for Prevention

Signage

Timers

- Every 2 hours- bed bound
- Every hour- chair bound
- Encourage shifting weight every 15 minutes

Pocket Cards for repositioning technique

Training, Retraining and Testing

Pillows, cushions, wedges

Nutrition- Hydration = warning signs such as weight loss to trigger staff

Moisture Barriers- First Line of defense = Must be applied and applied correctly

Moisturizer frequently = proceed with caution

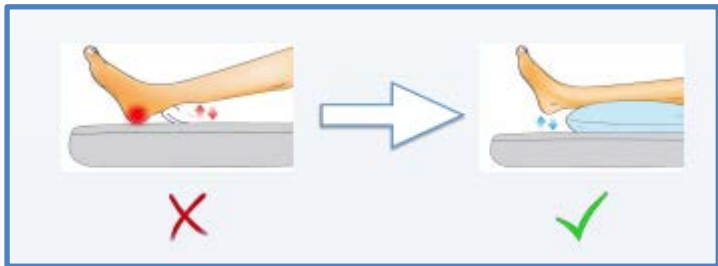
Long Sleeves and Pants to add layer of protection

Wound Care Bandages –Change Procedures

Lighting to avoid bumping into items







## WE WANT YOU!

### TO HELP WITH PRESSURE ULCER PREVENTION

Pressure ulcer prevention is everyone's job. We need to work together as a **TEAM** to make sure our patients have enough supplies, nutrition, and the proper help to prevent pressure ulcers. Thank you for joining this journey with us.

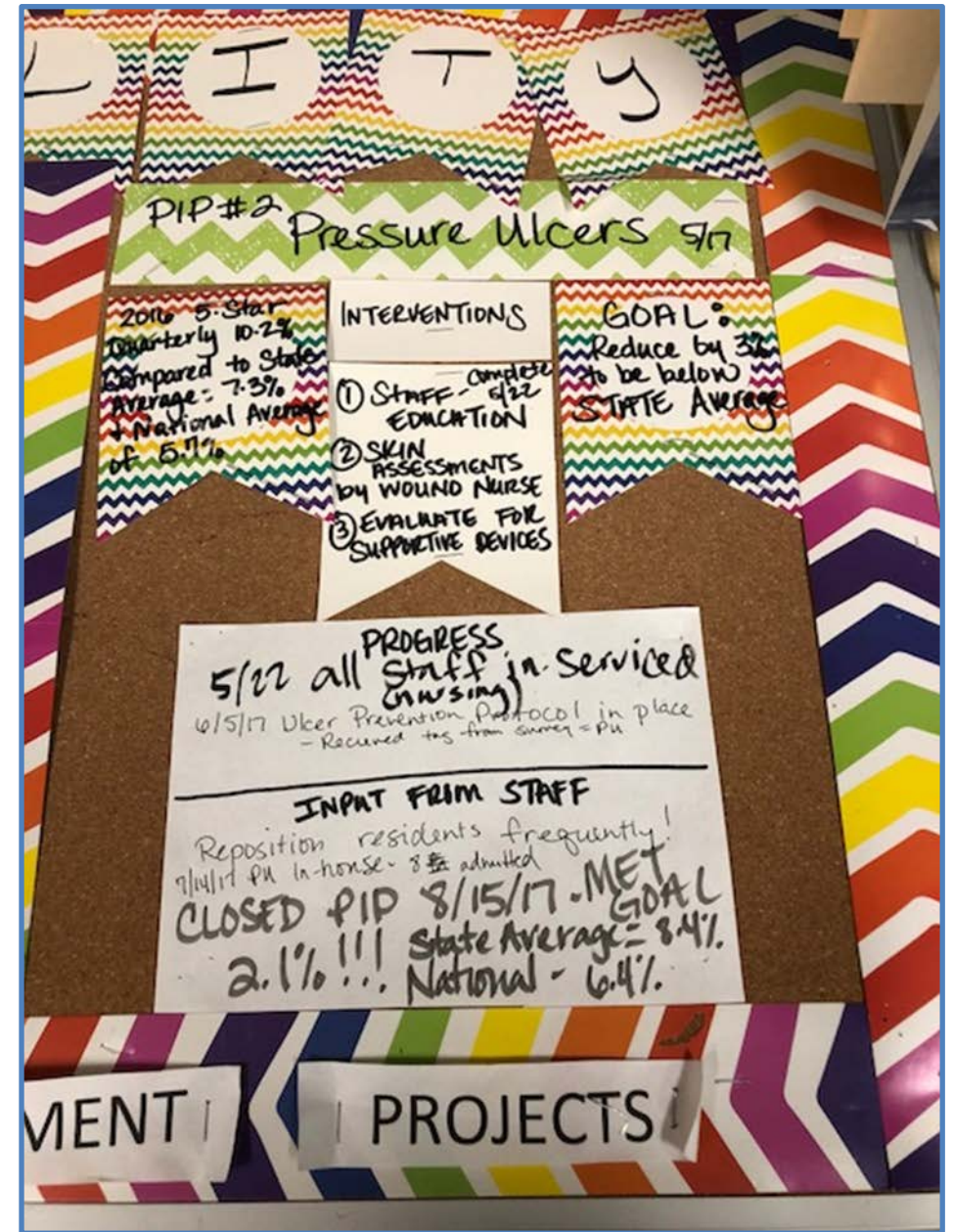
Together, **We can Take the Pressure off!**

Please Complete the following quiz and return it to the Manager's office in 1 week.  
Thank you!



Story Boards- Team Initiatives- Team Commitment- Team Goals

# Team Accomplishment



- What effective prevention techniques do you use in your homes?



# Dawn Jelinek

## Age-Friendly Clinics and LTC

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