Abstract

Background and Purpose: Hospital acquired pressure injuries (HAPIs) are a significant problem for hospitals worldwide, negatively affecting both patients and organizations by decreasing quality of life for patients and increasing cost of care for organizations. A common pressure injury prevention intervention is frequent turning, though compliance can be low. The purpose of this quality improvement project was to implement a turn dashboard on an adult, medical-surgical unit to increase compliance with the frequent turn protocol to decrease HAPIs.

Methods: This project used a pre-intervention post-intervention pilot design. The intervention was a turn dashboard that was implemented on a 20-bed adult medical-surgical unit in a large academic medical center. The sample included patients who are assessed to be at-risk for skin breakdown. Pre- and post-intervention turn compliance and HAPI counts were collected. A systems usability score (SUS) survey was used to assess staffs' perception of usability of the dashboard.

Results: During the pre-intervention phase, 6.56% of patients developed HAPIs while 0% of patients developed HAPIs in the post-intervention phase. Turn compliance had a median increase of 8.3% (pre-intervention 59.8%; post-intervention 68.1%); however, results were not statistically significant. The mean SUS rank percentile conversion was 58.3 (SD 14.6) which is interpreted as below average for usability; however, only three nurses completed the survey.

Conclusions: The addition of technology to pressure injury prevention intervention bundles can assist in decreasing HAPIs by increasing turn compliance. Dashboards that automatically track turns have been proven to significantly increase turn compliance compared to this project's intervention.

Implications: Incorporating innovation with auto-populating capabilities, such as wearable sensors, could significantly increase turn compliance and reduce HAPIs. Technologies, such as dashboards, have the potential to improve other nursing sensitive indicators, such as patients falls, and catheter associated urinary tract infections.

Keywords: *"hospital acquired pressure injury" "prevention" "medical-surgical" "inpatient" "dashboard"*