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|  **Pressure Injury Prevention Committee Agenda** |
| Date: | Tuesday, February 20, 2024 | Next Meeting: | Tuesday, March 19, 2024 |
| Time: | 3:00 p.m. – 4:00 p.m. | Time: | 3:00 p.m. – 4:00 p.m.  |
| Location: | Microsoft Teams | Location: | Microsoft Teams |
| Co-chairs: | Candi Haggard & Charlotte Garwood | Question Submissions: |  |
|  **Agenda Item/Outcome**  | **Minutes/Actions** |
| Time | Presenter | Item and Outcomes | Goal Alignment(Pillar/Strategic) | Summary/Decisions |
| **10 min** | Candi Haggard, Charlotte Garwood & Laura Culwell | **Meeting Approval/Data Review*** Meeting Minutes approval
* Pressure Injury Data Review
* 4 Eyes on Admission
 |  | * January meeting minutes were approved.
* FYTD24 Hospital Acquired Pressure Injury Data reviewed.
* Laura asked the group if anyone is interested in joining a 4 eyes on admission jigsaw journal club. If you or anyone on your unit is interested, please reach out to Laura Culwell.
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| **5 min** | Group  | **Quarterly PI Survey Debrief** |  | * Kudos to 6MCE/8MCE and Neuro ICU survey teams for their teamwork during the survey!
* Kudos to Megan Graves for elevating her PIP Champions during the PI survey.
* Carli on the WOCN team gave kudos to the units that she rounded with last week.
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| **5 min** | Charlotte Garwood | **Patient Census List** |  | * Discussed developing a standardized unit census to use for monthly and quarterly PI surveys
* Essential column information included: Name, Room number or dept/bed, and MRN.
* Discussed other columns units would like to include. Will include PI documented and Isolation Status. Also, may want to crosswalk with HAPI review tool to include fields that make post-survey HAPI review easier.
* Please see slides for an example of patients lists and directions on how to create a new list & how to copy an existing list.
* A similar report type is used in Wilson County and it works very well according to Andrea Glover.
* Will work on developing template and share template id at upcoming PIPs Committee meeting.
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| **30 min** | Jess Williams & Andrew Ezzell  | **Report Out – 5N** |  | * Jess and Andrew reviewed recent improvement work on 5N. She started by reviewing CVICU’s PI data with increasing trend of HAPIs from FY23. 5N identified a clinical staff leader for each metric and then identified PI champions that were dedicated to improving 5N PI Prevention.
* They put together tools to use in the workstreams. This included: RACI Matrix, key driver diagram, Fishbone diagrams, progress report.
* Andrew talked to us about the groundwork – reviewing EBP, goals, reviewing internal data. His team chose to do a PDSA and he reviewed their process.
* Lastly, he discussed the lessons learned and barriers from using the PDSA process and included recommendations.
* See attached slides for additional details on 5N improvement work.
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| **5 min** | Candi Haggard & Charlotte Garwood | **Close:** * Open Discussion
* Future Topics
 |  | * The group gave their approval to switching all the beds to bariatric beds.
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| ***ACTION ITEMS / Future Agenda items***  |
| ***Action Item / Agenda items*** | ***Responsible:***  | ***Date:*** |
| *4 Eyes on Admission – Evidence Review* |  | *January?* |
| Pressure Injury Prevention SOP & Photographing PI’s |  | *Spring?*  |
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