



SAVING MONEY AND PREVENTING PRESSURE INJURIES

DECREASING COST OF PRESSURE ULCER (PU) PREVENTION AND TREATMENT IN A COMMUNITY LIVING CENTER BY PURCHASING ALTERNATING PRESSURE MATTRESSES RATHER THAN RENTING.

Ruth Iliuta APRN, CNS BC, CWON, VAMHCS, Perry Point, Md

THE GOAL WAS TO REDUCE THE NEED TO RENT EQUIPMENT BY 90%.

BACKGROUND AND SIGNIFICANCE

In October 2013, the cost for rental mattress/bedframes (92) for one year was \$455,073.00 for the 155 bed Community Living Center (CLC). It was determined that the cost and usage of specialty mattresses could be managed by replacing rental product with facility owned items. This would allow each resident to be placed on a pressure redistribution mattress upon admission or when their condition changed. The new process would also prevent a delay in care, as requests for rental equipment could only be made Monday-Friday. Other factors considered were bedframes that were low to the floor, had built in exit alarms and scales.

Initially, 85 rental mattresses (with or without bedframes) were in use to prevent/treat pressure ulcers, extra long beds and Bariatric residents at Perry Point. The census at that time was 145 for a total capacity of 155.

GOALS OF THE PROJECT

1. Purchase 90 mattresses for the prevention and treatment of pressure ulcers.
2. The purchase was intended to reduce the cost of renting long term equipment for the residents of the CLC's at Perry Point. The goal was to reduce the need to rent equipment by 90%.
3. The remaining 10% rental budget would be used for powered alternating wheelchair cushions and alternating chair overlays, and residents of extreme weight and height.

METHODS

1. A team was developed consisting of Nursing, Biomedical & Engineering, Environmental Management, and Acquisitions Management
2. A Bed Fair was held, open to all staff & services, products were displayed, evaluations completed, collected, tabulated and discussed with the Team
 - A delivery plan was developed
 - Bedframes & mattresses would be delivered over 3 months, 1 delivery per building per month
 - Nursing to have residents up and out of beds early
 - EMS stripped, cleaned and made up new beds
 - Damaged mattresses and rental equipment were removed
3. Each of the 6 units received 15 bed frames and mattresses including 13 alternating pumps. Two of the 15 were "true" bariatric beds.

RESULTS

	FACILITY ACQUIRED PRESSURE ULCER				
	JAN-DEC 2013	JAN-APRIL 2014 <i>(during delivery)</i>	MAY-DEC 2014 <i>(after new beds)</i>	JAN-DEC 2015	JAN-MARCH 2016
Total Torso Area	20	6	12	16	2
Stage II	9	3	8	12	3
Stage III	1	1	1	3	0
Stage IV	0	0	0	0	0
sDTI	7	0	1	0	0
unstageable	3	2	2	0	1

RESULTS

CHANGE IN PRACTICE FOR NURSING STAFF

The nursing staff's responsibility to appropriately place residents on the correct bed/mattress, based on the individuals needs, Braden score or other factors. Residents not at risk may need to be moved to accommodate new admissions. The Bariatric beds may be used for standard residents, but understand if a Bariatric resident is admitted, the other resident will need to be moved.

LESSONS LEARNED

Jan-April 2014. During this period, the new beds/mattresses were delivered to the 6 units. The learning curve included:

- Incorrect thinking, that residents did not need frequent turning
- Staff were used to putting beds flush against wall, especially in 2 person rooms due to space, bedframes expand & retract when raised & lowered, causing damage to plugs
- An increased number of FAPU due to staff/resident turning off pump or forgetting to turn back on after discharge/re-admission

CLINICAL OUTCOMES

In 2013 the number of FAPU in the sacral/torso area was 20. For 2014 the number of FAPU in these same areas numbered 12. Slight increase in 2016 to 16 FAPU but less severe stage.

CONCLUSIONS

- While no single product alone can reduce PU's, as part of a total program, specialty surfaces do play a significant role. The cost savings with purchase over renting is significant. This new process engages and empowers the nursing staff to match the product to the specific needs of the resident.
- Rental costs can be excessive for CLC residents due to the longer length of stay
- Facility of 155 beds, 90 specialty mattresses was able to accommodate residents at risk or with pressure ulcers for the majority. Occasional renting of more advanced products for residents with multiple stage IV pressure ulcers due to insufficient turning surfaces

ABOUT THE AUTHOR

Ruth W. Iliuta is Board Certified Adult health Clinical Nurse Specialist and Certified Wound/Ostomy Nurse. Her clinical experience has included Trauma Centers, Community hospitals, Long Term Care and teaching. She has been with the Veterans Administration in Perry Point, Maryland for 3 years. She has two research articles related to teaching nursing staff about pressure ulcers; and staging pressure ulcers using photography.

THERE WAS A 90% REDUCTION IN FAPU'S. FROM 20 TO 2