Pressure ulcers as a health care quality indicator

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OBJECTIVE

The occurrence of pressure ulcers has been recognized as an indicator of health care quality and patient safety. There are no clinical guidelines or protocols for monitoring and supervision of pressure ulcers in Croatia, but the incidence of ulcers is as a rule monitored in all hospital departments.

Working Group of the Croatian Chamber of Nurses in 2005. initiated the development of nursing documentation, so called Sister’s list, in which one of its constituent parts is a List for monitoring pressure ulcers.

The required education on nursing management of documentation, methods of data collection has been conducted and education so far has been gone in 41 hospital health facility.

Nursing Act obliges the nurse to record keeping. Development of nursing documentation is the obligation of the Croatian Chamber of Nurses.

Recognition of nursing documentation is in process at the Ministry of Health. So still in Croatia there is no standardized monitoring of pressure ulcers or the ability to compare the incidence among the hospitals.

METHODS

By initiative of Croatian Society for quality improvement in health care, Croatian Medical Association and Croatian Nurses Association a Working Group of nurses in the frame of PATH program was appointed with the task to develop descriptive sheet of the pressure ulcers indicator and to collect data of pressure ulcers in practice.
Data collection was conducted by a questionnaire attached. The questionnaire was sent in 63 health institutions to address major nurses or nurses involved in the PATH program.

**QUALITY INDICATOR - DECUBITUS DATA QUESTIONNAIRE**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there in your institution a written recommendation for the preassure ulcers treatment ?</td>
<td>YES</td>
</tr>
<tr>
<td>Is there a protocol in your institution/facility for the preassure ulcers risk prevention?</td>
<td>YES .................</td>
</tr>
<tr>
<td>If YES write the scale used to assess the risk of preassure ulcers</td>
<td>NO</td>
</tr>
<tr>
<td>Is there in your institution protocol for monitoring the pressure ulcers treatment?</td>
<td>YES</td>
</tr>
<tr>
<td>Is there a person in your organization responsible for monitoring and evaluation of treatment of pressure ulcers?</td>
<td>YES</td>
</tr>
<tr>
<td>Is there in your institution organized mandatory continuing education for medical staff regarding the prevention and treatment of pressure ulcers?</td>
<td>YES</td>
</tr>
<tr>
<td>Your comments / suggestions</td>
<td></td>
</tr>
</tbody>
</table>

**RESULTS**

- Responses were obtained from 22 medical institutions.
- Written recommendations for the preassure ulcers treatment present in 18/22 (81.2%) institutions.
- Protocol for the prevention of the risk of ulcers present in 18/22 (81.2%) institutions. Knoll uses a scale of 7/22 (38.8%), Braden uses scale 10/22 (55.5%) and Norton uses scale 1/22 (5.5%).
- Protocol for monitoring the pressure ulcers treatment is present in 16/22 (72.7%) institutions.
- Persons responsible for monitoring and evaluation of pressure ulcers treatment present in 13/22 (59.1%).
- Organized mandatory continuing education for medical staff regarding the prevention and treatment of pressure ulcers is carried out in 17/22 (77.3%) institutions.

**MESSAGE TO GO HOME**

In all of inpatient health care facilities in Croatia are aware of the need for monitoring the incidence of pressure ulcers. Records and prevention is carried out in a high percentage. The person responsible for monitoring and evaluation has been structured in the smallest percentage. It is highly expressed education awareness. Standardized tool (indicator) is required to improve the quality of this area for assessment, improvement and comparison.