

Award Application

1	Project Title	Turning the Tide of Pressure Injury Prevention Using a Team Based Approach
2	Clinical or Operational Area	2F&G Short Stay Telemetry Inpatient Unit
3	Healthcare System	Baptist Health System
4	Hospital or Entity Name	Baptist Health Lexington
5	Applicant Name	Whitney Heet and Amanda Davis
6	Applicant Title	Executive Director, Inpatient Nursing Services and Director of Nursing, 2F&G
7	E-mail Address	Whitney.heet@bhsi.com ; Amanda.davis3@bhsi.com
8	Telephone	859-260-6394; 859-260-5406
9	Mailing Address, City, State, Zip Code	1740 Nicholasville RD Lexington, KY
10	Please list the names and titles/roles of the additional members of the project team:	
	Name:	Title/Role:
11	Name of Senior Risk Management or Corporate Insurance Representative	Lynn Kolokowsky, Vice President Risk Management & Insurance Services
12	Mailing Address, City, State, Zip Code	1901 Campus Place Louisville, KY 40299

13. The best practice/improvement submitted for consideration is a: *(Check all that apply)*

- Clinical Policy
- Performance Improvement Strategy *(Six Sigma, etc.)*
- Communication Strategy *(Briefing before surgical procedure, senior management rounds, etc.)*
- Other *(Please specify)*

Prevention Practice Change Implementation

14. Can the project be duplicated to support patient safety/risk mitigation strategies at other organizations? Yes

No

15. Briefly describe the project: *(two paragraphs maximum, please attach any supporting documentation)*

The concern addressed in this project, was the lack of consistent turning of patients deemed high risk for skin breakdown. Staff members and department leadership discussed the concern during a monthly professional governance unit-based council meeting to identify various reasons that contribute to missed turn opportunities. These reasons included: perceived lack of staffing support, communication breakdowns amongst the disciplines, priority of another patient's care, time spent discharging patients,

admissions, and procedures. The practice change created was a team-based approach with defined employees and turning schedule to decrease potential missed opportunities. This proactive approach highlights the importance of collaborative efforts in healthcare settings. By distributing the responsibility of patient turning among the entire team, it ensures that patient needs are met without overburdening individual staff members. This not only aids in the effective prevention of Hospitals Accruing Pressure Injuries (HAPIs) but also supports the well-being of the healthcare staff, creating a more sustainable and efficient work environment promoting improved patient outcomes.

The unit-based council developed a "Turn Team" method approach through utilization of staff scheduled to work that shift without increasing FTE or having a negative effect on productivity. Implementing a team approach to address workflow challenges can be highly effective, as it fosters collaboration. Such a system not only helps in managing the immediate responsibilities but also contributes to a cohesive work environment where staff members can rely on each other, ultimately leading to improved patient care and staff satisfaction. The project design includes the follow steps: 1. health unit coordinator (HUC) assigns two staff members to a specific even hour during their shift, 2. HUC sends out reminder text to proactively maintain efficiency, 3. one of the turn team members charts the turns made and any other charting needs, ie: changing of the patient. Unforeseen circumstances preventing the team member from fulfilling their role default to the HUC or charge nurse to complete.

16. Describe how this project has reduced the potential for liability and improved patient safety. (one paragraph maximum)

Decreasing hospital-acquired pressure injuries through the Turn Team project implementation has significantly reduced the potential for liability and improved patient safety by minimizing the occurrence of preventable harm to patients. These injuries, often resulting from prolonged immobility, can lead to severe complications, extended hospital stays, and increased medical costs. A patient who develops a HAPI has an additional \$20K healthcare cost that are non-reimbursable by insurance companies. By implementing this structured team-based turning schedule and increased usage of pressure-relieving devices, hospitals can reduce the incidence of these injuries. This proactive approach not only enhances patient outcomes and satisfaction but also diminishes the risk of legal actions and associated financial penalties, fostering a safer and more reliable healthcare environment.

17. What metric(s) have been used to measure and/or sustain success? (one paragraph maximum)

The implementation of this project played a pivotal role in maintaining low HAPI rates. The team-based approach has led to an increase in consistency of HAPI prevention measures used on high-risk patients, as well as knowledge amongst the care team. Since implementation of Turn Team practice change, there has not been an identified sacral HAPI within the department. The reduction of stress among staff members is equally commendable, as it not only enhances the work environment but also contributes to better patient care. The team-driven approach has fostered a sense of unity and purpose, which is essential in healthcare settings. Moreover, the boost in morale through collaborative efforts indicates a positive shift in workplace dynamics, leading to a more engaged and motivated staff. This staff-driven resolution showcases the power of collective effort and shared responsibility in addressing and resolving critical issues within the healthcare system. Such initiatives are invaluable, as they not only improve clinical outcomes but also enrich the work culture. A tertiary outcome has shown in increase in patient satisfaction and perception of nursing support through hourly rounding scores increasing from 76% (collective rating 6 months prior to implementation) to 92% (collective rating post implementation).

18. Are you willing to share this project with other members of AEIX? Yes No

19. Was this project an original concept created by the project team? Yes No

20. Was this project based on successful practices evaluated from literature or other healthcare providers? Yes No

21. Is this project being implemented in your health system for the first time? Yes No

22. Do you have plans to publish the project results in a professional publication or networking forum? Yes No

23. Is there anything else you'd like to share about this project?

The increase in staff and patient satisfaction has been a huge driving for point for other departments to duplicate this project in their areas. The reduction in pressure injuries is an accomplishment that everyone can be proud of and celebrate.

Thank you for completing the application. Please follow these next steps.

- Please save this document in Word format and gather your supporting documentation.
- Forward the application and documentation to your senior risk management leader or corporate insurance representative. *They will need to complete and sign the Evaluation of Awards Application Form on the final page of the application before submitting it to American Excess Insurance by Friday August 16, 2024.*

Evaluation of Award Application

The evaluation must be completed and signed by the senior risk manager or corporate insurance representative. Please evaluate the Award Application by indicating the best answer to the question.

1. How will this project improve safety and/or reduce liability?

- Little effect on safety and liability (1)
- Some improvement but metrics are not defined and/or it is not clear that measurable effect can be sustained (2)
- Strong effect with clearly defined metrics (3)

2. What is the potential to share this project or practice with other AEIX members?

- Little potential – i.e. *implementation requires major budgetary commitment, topic is highly specialized, and/or metrics are not clearly defined* (1)
- Some potential but process may be hard for another organization to implement, and/or its application may be limited - i.e. *major budgetary commitment, topic is highly specialized, and/or metrics are not clearly defined* (2)
- Strong potential for producing best practices (3)

3. What level of impact will this project or practice have on the severity of risk exposure?

- Little chance of impacting severity of risk but could address other issues (1)
- Some potential to impact risk exposure (2)
- Strong ability to impact severe malpractice exposure caused by significant risk events (3)

4. What level of innovation best describes this project?

- Project/practice is new to this organization and is based primarily on firmly established best practices (1)
- Project/practice was created primarily by applicants with some assistance from an outside vendor and contains well-established best practices with additional innovative features (2)
- Project/practice was created solely by applicants and could be included in established literature or industry best practices (3)

5. Share your comments or recommendations.

Lynn Rikhoff Kolokowsky	VP, Risk Management & Insurance Services	8/16/2024
E-Signature	Title	Date
502-253-5979	lynn.kolokowsky@bhsi.com	
Phone	Email	

Send the completed application in Word format, supporting documentation, and signed evaluation to ana_taylor@premierinc.com by *Friday August 16, 2024*.

Thank you for your submission. In continued pursuit of our mission and vision to partner with forward-thinking healthcare leaders, inspire innovation, and provide the leading pathway for managing risk, we may share your project with other members of American Excess. However, this project will not be shared outside of the American Excess Insurance membership without your prior consent.