Impact of Multidisciplinary Wound Care Program on Patient Outcomes in Wound Healing

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Introduction

Through quality improvement initiatives, it is estimated that 40-50% of all patients admitted to acute rehabilitation care at HealthSouth rehabilitation hospitals have a diagnosis of skin integrity.

The prevalence and complexity of the wounds include various areas of skin, pressure, and avulsion wounds, skin tears and incisional and post-operative wounds. While addressing the continued demand for evidence-based and cost-effective wound care management, positive patient outcomes have been achieved. A multidisciplinary professional clinical team approach was developed for the purpose of establishing clinical guidelines using current research findings.

The systematic team approach focuses on prevention and treatment of pressure ulcers, comprehensive wound documentation, skin risk-assessment scoring, staff education and enhancing multidisciplinary team communication including hand-off communication. Through aggregation of wound data, the outcomes revealed a decrease in wound infection rate and an increase in wound healing with the implementation of the multidisciplinary wound care program.

Objectives

The purpose of developing a multidisciplinary clinical Wound Team is to impact the internal demand for evidence-based, cost-effective wound care management that leads to consistent positive patient outcomes.

Six areas to focus on when shaping a successful multidisciplinary wound care program:

• Coordinate a multidisciplinary skin care team.
• Interdepartmental communication.
• A Wound Medication Administration Record (Wound MAR).
• Equipment and supplies process.
• Resources and education for staff and patients.

Use the Braden Scale to determine risks of patients developing a pressure ulcer.

Methods

Wound MAR

The Wound MAR is a patient record that is developed as an individualized wound MAR specific to documenting treatments completed by the nursing staff. The Wound MAR provides a concise, real-time document for the clinical team to review the implemented wound care interventions. The focus on the development of the individualized Wound MAR consisted of the following:

• Streamlined documentation of prevention and treatments associated with wounds.
• Provided consistent nursing documentation of wound treatments using the wound MAR.

Increased efficiency for clinicians review of medications and skin care treatments for all clinical departments.

Facilitated consistent updates to the plan of care.

Equipment and Supplies

• Wound care carts stocked with basic dressings for daily use.
• Specialty wound care supplies are available in the wound care education office centrally located to each nursing unit.
• Photographing wounds for accurate documentation.
• A weekend handoff is communicated to the wound team, supervisory staff and charge nurses.
• Wound care hotline is provided for direct communication to the wound care coordinator.

Positive Impacts

• There was a total of approximately 4,023 patient admissions in four years. Of those patients admitted, 53.7% had wounds. Of those 53.7%, 52% had surgical wounds and 18.1% were admitted with other skin breakdown.
• 3,885 wounds were treated in four years. 1,543 showed improvement at discharge and 840 were healed at discharge.
• 70.4% of patients admitted with wounds had improved or were healed at discharge.
• Wounds Improved and Healed at Discharge

Results

Wound Incident Rate (WIR)


References


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