Objectives

1. Describe national trends in pressure injury rates.
3. Describe changes to the NDNQI Pressure Injury Indicator based on the new NPUAP Pressure Injury Staging System.
National Database of Nursing Quality Indicators (NDNQI®): Quick Facts

- Established by ANA in 1998
- Acquired by Press-Ganey® in 2014
- Largest nursing quality registry in US
  - 2,000 US hospitals participate
  - 300,000 nursing voices
- Satisfies CMS voluntary reporting standards
- Meets Magnet® application requirements
- HPI Press Ganey is a federally listed PSO.

NDNQI Strengths

- Tracks up to 19 nursing sensitive quality measures
- Unit-based reporting
- National benchmarking
- Free CE modules on pressure injuries
- Integrated approach to quality improvement
- Provides actionable insights for quality improvement based on structure, process and outcome data.
- Much more than pressure injuries!!!
### NDNQI: More than Pressure Injuries!

**Structure**
1. Nursing Care Hour Per Patient Day
2. Nursing Care Hours Per Patient Visit
3. Nursing Care Minutes per Surgical Minute
4. CLC Hours per 1,000 Live Births
5. Skill Mix
6. Patient Volume and Flow
7. RN Education
8. Nurse Turnover

**Process**
1. Care Coordination
2. Physical Restraints
3. Pediatric Pain
4. Pressure Injuries
5. Healthcare Associated Infections
   1. CAUTI
   2. CLABSI
   3. VAP
   4. VAE

**Outcome**
1. Patient Falls
2. Pressure Injuries
3. Physical/Sexual Assault
4. Pediatric Peripheral IV Infiltrations
5. Central Line Associated Blood Stream Infections
6. Catheter Associated Urinary Tract Infections
7. Ventilator Associated Pneumonias
8. Ventilator Associated Event

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### Press Ganey® Nursing Performance Solution

**NDNQI Quality Measures**

- Patient Experience
- Nurse Engagement
Lessons Learned from NDQI Pressure Ulcer Surveys
2011-2016

Prevalence and Hospital Acquired Pressure Injuries Rates – 2011-2016

Add graph

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<tr>
<th>Year</th>
<th>Prevalence</th>
<th>Hospital Acquired Rate</th>
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<td>2015</td>
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<td>2016</td>
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### Distribution of Hospital Acquired Pressure Injuries Rates by Hospital Characteristics

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<td>Academic Medical Center</td>
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### Distribution of Hospital Acquired Pressure Injuries Rates by Stage

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<td>sDTI*</td>
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<td>Indeterminable**</td>
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* Suspected Deep Tissue Injury → Deep Tissue Pressure Injury

** Indeterminable = under non-removable dressing & mucosal → Non-visible and Mucosal Membrane Pressure Injury
# 2015 Pressure Injury Prevention Interventions Among At-Risk Patients

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<th>Type of Preventive Intervention</th>
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<td>Nutrition support</td>
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<td>Moisture management</td>
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NDNQI Pressure Injury Indicator - 2017

Incorporating the 2016 NPUAP Pressure Injury Staging System
What Has Changed for 2017?

TERMINOLOGY

NDNQI updated the indicator to align with NPUAP changes

- “Pressure ulcer” was changed to “pressure injury”
- Stages I, II, III, and IV were changed to Stages 1, 2, 3, and 4
- “Suspected Deep Tissue Injury” (sDTI) was changed to “Deep Tissue Pressure Injury” (DTPI)
- “Indeterminable” category was retired
- “Mucosal Membrane Pressure Injury” category was introduced
- “Medical Device Related Pressure Injury” classification was added
- All definitions and descriptions were reviewed and refined

NDNQI-SPECIFIC CHANGES

“Non-Visible Pressure Injury” classification was added

- not a pressure injury stage within the NPUAP staging system
- category created by NDNQI to count a known pressure injury
  - that is located under a non-removal dressing or device
  - that cannot be visualized at the time of the skin inspection
  - whose stage is not documented in the patient’s record

Reporting interval was changed from quarterly to monthly

- units can submit data for one prevalence study per month for up to three months to receive a quarterly rate

“Date of survey” data field was added in the Pressure Injury and Restraint indicators

Previous permissions were removed

- All users who enter NDNQI data will need to retake the tutorials and quiz in order to be able to enter any Pressure Injury OR Pressure Ulcer data
- All survey team members are strongly encouraged to retake the CEU modules
**What Has Changed for 2017?**

**CHANGES TO RATES AND CALCULATIONS**

New measures for Hospital Acquired Pressure Injuries (HAPI) and Unit Acquired Pressure Injuries (UAPI) will be reported for:

- Mucosal Membrane Pressure Injuries
- Medical Device Related Pressure Injuries

Monthly reporting is now an option, but is *not required*

- Data from one survey per month can be submitted to NDNQI
  - Units may choose to conduct surveys more or less frequently
  - If more than one survey is conducted during a month, only submit data from the first survey
- Units may submit data for only one or two months per quarter
- Quarterly rates will be calculated based on the number of months of data submitted

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**Staging Algorithm**

**History of Pressure/Shear at Injury Site?**

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Medical Device Related Pressure Injuries

Medical device related pressure injuries result from the use of devices designed and applied for diagnostic or therapeutic purposes. The resultant pressure injury generally conforms to the pattern or shape of the device. The injury should be staged using the staging system.

- This describes an etiology. It is not a stage.
- Use the staging system to stage.
- Then note whether the injury is known to be related to a medical device.
- When assessing medical device related pressure injuries, remove only those devices that can be safely removed.

ADDITIONAL TRAINING MODULE CONTENT ON MDR PRESSURE INJURIES

- Module 1
  - Definition
  - List of common devices and locations
  - 13 Examples
  - New test questions

- Module 3
  - International Guideline Recommendations
  - MDR PI Prevention Strategies
# NDNQI Pressure Injury CE Modules

## Module 1: Staging
- Definition & Etiology
- NPUAP Staging System
- NPUAP Illustrations
- Common Anatomic Locations
- Medical Device Related
- Updated Evidence
- Test

## Module 2: Differential
- Staging Algorithm
- Disease Related: Arterial, Venous, Neuropathic
- Moisture Related: MASD, IAD, ID
- Trauma Related: Skin Tears, MARSI, Burns, Abrasions, Bruises
- Updated Evidence
- Test

## Module 3: Survey Guide
- Data collection methods to ensure reliability & validity
- Process measures: evidence based interventions from 2014 Guideline and systematic review through 2016
- Updated Evidence
- Test

## Module 4: Community vs. Hospital/Unit
- NDNQI methods for determining community vs. hospital/unit acquired pressure injury
- Evidence on pressure ulcer etiology reviewed
- Regulatory rules reviewed and reconciled as much as possible.

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https://members.nursingquality.org/ndnqipressureulcertraining
Thank you!

The NPUAP is very appreciative of Press Ganey, NDNQI's support and collaboration in implementing the new NPUAP Staging System into the new NDNQI Pressure Injury Indicator.