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Own Your Outcomes: Driving Down HAPIs in the Cardiac Surgery Intensive Care Unit

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ABSTRACT

Intro:
• In 2012, the Cardiac Surgery Intensive Care Unit was accountable for 23 pressure injuries over 12 monthly surveys with 12 being medical device related (MDR)
• The annual prevalence rate was 17% higher than the NDNQI benchmark

Methods:
• Bedside RN driven education  
• Changing products & practices  
• Nursing leadership engagement  
• Engaging providers  
• Real time drill down and solutions

Results:
• To date since intervention: 47 of 64 months with zero PI, on day of survey  
• From 2012-2013:  
  - 52% reduction in all PI  
  - 83% reduction in MDRPI  
  - $84,000 cost savings  
• Sustained culture change despite attrition  
• Initial outcomes published in Critical Care Nurse, Oct. 2015.

Culture change including:
• Redefining practice expectations  
• Challenging perceived barriers  
• Pivoting to preventive care  
• Accountability to practice led to zero HAPI in a cardiac surgery ICU.