

Implementing the InSPiRE Protocol to Reduce Pressure Injuries in a Cardiac Intensive Care Unit



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PURPOSE

The purpose of this quality improvement project was to decrease pressure injuries in the Cardiac Intensive Care Unit (CICU) by 20% using an evidence-based protocol.

BACKGROUND

Pressure injuries continue to impact patient outcomes negatively. Therefore, healthcare leaders must develop innovative methods to decrease pressure injuries in hospitalized patients. The project was implemented in an academic, not-for-profit hospital located in the Texas Medical Center.

METHODOLOGY

The InSPiRE protocol was implemented to decrease pressure injuries and improve prevention practices in the CICU. The project lead educated the nurses regarding the importance of conducting an accurate Braden Scale and a thorough skin assessment to capture pre-existing pressure injuries upon admission. A mobility technician ensured high-risk patients turned every two hours and frequently mobilized.

Additionally, the staff utilized a turn-assist device for patient repositioning and injury prevention.

RESULTS

The staff utilized the InSPiRE protocol for 91% of the new admissions. As a result, the pressure injury rate decreased from 8.82% to 5.56%, and the length of stay (LOS) decreased from 7.4 to 5.5 days.

IMPLICATIONS

Implementing a pressure injury prevention protocol can eliminate deviation in nursing care. Nurse leaders must continue to be catalysts that accelerate change and empower staff. As nurse leaders continue to implement evidence-based practice in clinical settings, prolonged hospitalizations will decrease, patient outcomes will improve, and costs associated with nurse-sensitive events will decrease.