

Pressure ulcer prevention needs assessment survey

Facility name

of beds

Facility Trauma Level

I II III IV V

Pressure ulcer prevention strategy

What is your role in your hospital's PUP strategy/program?

Which of these departments have a PUP strategy? OR ED ICU Other

Which departments currently participate in your HAPU or skin teams?

Wound Care ED OR ICU Purchasing CNO Quality Other

What are the components of your PUP bundle? Skin assessment Risk assessment Dressings

Heel offloading Q2 Turns/patient positioning Support surfaces Skin care/IAD Staff education

How do you monitor the execution of the PUP bundle?

PUP quality improvement opportunity and HAPU data management

How do you collect your HAPU data? Incidence Prevalence Other

How often do you collect HAPU data?

Who reviews the data?

Is the data segmented by unit, stage, anatomical location (sacrum, heel) or by OR procedure?

Does a HAPU incidence always require a root cause analysis (RCA)? Yes No

Do you look at the OR, ED or by surgical procedure during your RCA's?

Is the PUP bundle triggered through the EMR for high risk patients?

Do you review the financial impact of your PUP program with the hospital?

Do you use HAPU data or trends to initiate new quality improvement projects?

Pressure ulcer prevention quality improvement projects

Is your hospital currently tasked to do a QI project? Yes No

Can we help you develop a PUP QI project? Yes No

Are you interested in turning your QI project into a poster/publication?

How is your quality outcome director involved in evidence based QI programs?

Are your HAPU rates linked to your hospital's patient satisfaction score?

Are there any initiatives focused on the reduction of caregiver injuries?

Educational needs

Please attach any customized guides/protocols that have been completed for this facility

Inservicing: Please list dates/topic/unit of most recent in-services

Needs:

Live CEU On line professional education program Customized guides

Webinars Guest speakers

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Key contacts Please check and attach contact info on next page

- CWOCN/WOC nurse
 Chief nurse officer
 Director of nursing
 MD champion
 Education quality/patient safety
 Outcomes coordinator
 Infection control
 Risk management
 Materials/supply chain

Key contacts information

Title:	Title:
Name:	Name:
Email:	Email:

Mölnlycke products in the PUP care bundle

	Mepilex® Border Sacrum	Mepilex® Border Heel	Mepilex® Lite	Mepilex® Border	Tortoise® Positioning System	Z Flex® Heel Boots	Fluidized Positioners
ICU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OR CV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OR Ortho	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PACU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SICU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trauma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Device Related PU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prone Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are your goals for your PUP program? What are the barriers to achieving them? Who will champion this effort?

Find out more at www.molnlycke.com

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