

Organizational Commitment to Pressure Injury (PI) Prevention and Treatment Self-Assessment

Complete each field below to assess your organization's commitment to pressure injury prevention and treatment.

What are your program strengths?			
What areas need improvement?			
Question <i>(Check the "Y" and/or "NI" box(es) to designate Yes and if the area Needs Improvement)</i>	Y	NI	Comments
Has an evidence-based policy for PI prevention been developed and is it currently in use?			
Has accountability for monitoring prevention interventions been assigned?			
Are prevention interventions communicated to direct care staff consistently?			
Are evidence-based treatment protocols according to wound descriptions available?			
Has accountability for monitoring treatment compliance/documentation been assigned?			
Has accountability for weekly measurements and skin observations been assigned to a designated nurse?			
<i>If yes, does the designated nurse have expertise?</i>			
Has a process been implemented to validate clinical findings with documentation?			
Does the interdisciplinary team participate in weekly wound review?			
Is the wound meeting efficient?			

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Does weekly tracking take place?			
Does weekly trending take place?			
Are tracking and trending reports reviewed by the administrator/DON/MDS			
Is benchmarking without quality measures completed?			
Do direct care staff have a reporting mechanism with change of condition?			
Are prevention/Tx supplies readily available for direct care staff?			
Is a process in place to coordinate care with wound care professionals as needed (i.e., wound physician/certified wound nurse)?			
Is staff education scheduled at regular intervals on PI prevention/treatment and are resources available for staff where they work?			
Are PIs perceived as "never" events by staff?			
Is there an investigative process in place to drill down on why a PI occurred?			
<i>If yes, does it include consideration for resident characteristics as well as facility staff function/approach?</i>			
Is MDS coding completed accurately?			
Do MDS coordinators consider PI progress during the MDS scheduling process?			
Are concerns and oversight included in your QAPI process and meetings for recommendations?			

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