

## Long-Term Care Survey Alert

### QUALITY OF CARE: Keep Your Pressure Ulcer Prevention Plan From Breaking Down

**2 simple tips can spell success in assessing, preventing decubiti.**

To keep your pressure ulcer quality indicators and care plans on target--and your resident's skin intact--consider these expert strategies.

**1. Don't forget to do full body checks for pressure ulcers if a resident doesn't receive a shower for several days for some reason.** "Most nursing homes tie the full body check to a resident's shower schedule," noted **David Farrell, MSW, NHA**, with **Quality Partners of Rhode Island**, speaking on March 3 at the **American Association of Nurse Assessment Coordinators** conference in Las Vegas.

And in facilities where that's the case, a resident who doesn't receive a shower for several days may develop a stage 2 pressure ulcer without staff noticing it, Farrell cautions. Some facilities forego shower days when they are working short, he notes. Or a particular resident may opt for a sponge bath if she has an acute illness or flare-up of arthritis pain.

**2. Devise a turning and positioning care plan that's "realistic and do-able,"** says **Kathleen Thimsen**, a wound care nurse and specialist in Bella Vista, AR. "Incorporate turning times with toileting and feeding" and then add in the times that are outside that schedule, she suggests.

**Survey tip:** Setting up formats that require CNAs to record every time they turn someone may result in citations if staff fail to document consistently, warns **Julie Thurn-Favilla, RN**, a consultant with the Milwaukee office of **LarsonAllen**. But "if the facility chooses not to have CNAs document each time they turn a resident," make sure the care plan includes the intervention, she adds. As long as surveyors see staff following the individualized turning and repositioning, facilities don't get cited for not documenting it, in Thurn-Favilla's experience.