

## Evaluation of AHRQ's On-Time Pressure Ulcer Program

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<b>Contract Number:</b>	290-06-0011-8
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<b>Summary Status as of:</b>	December 2010

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### Target Population: Elderly\*

**Summary:** Pressure ulcers and injurious falls have serious health and economic consequences for elderly residents in nursing homes. Substantial research has documented that prevention of pressure ulcers and falls is possible, yet these problems persist across health care settings. Many initiatives to improve quality of pressure ulcer care in nursing homes have been undertaken in the last decade, including the Agency for Healthcare Research and Quality (AHRQ) funded On-Time Pressure Ulcer (PrU) Healing Project which helps nursing homes implement best practice guidelines in PrU care through workflow redesign and process improvements. While the On-Time program has unique characteristics, it has not yet been formally evaluated and thus is not ready for wide dissemination.

The evaluation of the On-Time PrU Program will help make guidelines available to other practices. Lessons learned from the PrU program will also serve to inform the development of an On-Time Fall Prevention Module, which will use documentation data elements, actionable reports, and tracking tools on risk factors from the On-Time PrU program. These resources will allow nursing home staff to intervene in a timely manner with at-risk residents to reduce the incidence of injurious falls. The project team will work with facilities to develop a feasible implementation plan to integrate these tools into daily practice.

A yearlong process of workgroup meetings informed the standardization of fall documentation and the development of tools to guide clinical decisionmaking for fall prevention. In addition, six to eight facilities are participating in a series of teleconference calls to develop health information technology (IT) specifications based on the final set of fall prevention tools. Since December 2009, the scope of work has also been expanded to include two additional tasks including: 1) a review of literature and analysis of national data to identify residents in nursing homes who should be targeted for prevention protocols to reduce hospital and emergency department (ED) visits, and 2) development and testing of a training curriculum for the On-Time Pressure Ulcer Prevention Program and modification of the Team Strategies and Tools to Enhance Performance & Patient Safety (TeamSTEPPS) program for nursing homes.

### Project Objectives:

- Evaluate the effect of the On-Time PrU by comparing 15 New York nursing homes that have implemented the program with 12 to 15 control nursing homes. Information on pressure ulcer incidence provided by the facilities for a 12-month period and adjusted for resident risk factors using minimum data set data will provide the data needed to assess the effectiveness of the On-Time program for reducing pressure ulcers. **(Ongoing)**
- Design the tools and establish the foundation for a fall prevention implementation effort using

an approach similar to the On-Time PrU prevention, including standardized documentation data elements that can be integrated into everyday practice, actionable reports of resident fall risk factors, and tracking tools. **(Ongoing)**

- Develop an evidence-based systems approach for identifying, managing, and monitoring multiple risk factors for hospitalizations and ED visits. **(Ongoing)**
- Develop the On-Time Train-the-Trainer and TeamSTEPPS for long-term care Curricula. **(Upcoming)**

**2010 Activities:** Many project-related activities were achieved throughout the year. Thirteen control facilities were selected based on their similarity to the intervention facilities. Site visits were scheduled with each control facility and four site visits were completed by the end of the year. The project team also continued to work with the intervention facilities throughout the year, assisting them with submitting their patient census and pressure ulcer data. A majority of the facilities have submitted all the required data and the remaining facilities have submitted at least a portion of the required data.

The draft fall prevention tools were reviewed with members of the Advisory Panel in September and October to get their feedback and input. A preliminary draft of health IT specifications was developed as part of these materials. The Advisory Panel provided recommendations on the tools and the final versions were delivered to AHRQ in December. Included in the tools were:

- Standardized set of documentation data elements and definitions
- Clinical Reports and Tracking Tools
- Falls Prevention: High Risk Report
- Falls Quality Improvement Monitor Reports

The avoidable hospitalization literature review was completed in August and revisions to the summary are in progress. Data collection of the nursing home stay information was delayed because the initial files had been copied onto cartridges, which the project team was not able to read. Subsequent negotiation with the Centers for Medicare and Medicaid Services allowed for the data to be provided in another format and was received by the project team in November. During the delay, the project team focused on defining diagnosis codes for identifying hospitalizations and ED visits.

In addition to having an Advisory Panel, a Technical Expert Panel is in the process of being established and AHRQ has approved the list of potential candidates. The analysis plan is also being finalized as the analytic files and variable definitions are developed.

**Preliminary Impact and Findings:** The project has no findings to date.

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**Strategic Goal:** Develop and disseminate health IT evidence and evidence-based tools to improve health care decisionmaking through the use of integrated data and knowledge management.

**Business Goal:** Knowledge Creation

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\* *AHRQ Priority Population*