

Sustaining Unit-Based Skin Champions to Improve Pressure Ulcer Outcome: “Champ Camp”

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Purpose & Rationale: The role of the unit-based skin champion is to provide expert knowledge, education, data collection and first-line peer consultation on pressure ulcers. At our 800-bed level-1 trauma teaching hospital, maintaining the 70 member unit-based skin champion team over the past decade has been challenging. Issues with turnover, scheduling, competing initiatives, staffing coverage, manager buy-in, skill preservation and enthusiasm have threatened the cohesiveness and function of the group. The establishment of quarterly “Champ Camp” over the past 3 years has provided a reliable framework for sustaining the group.

Research Questions: Does quarterly “Champ Camp” sustain the education, competency, skills and validation necessary for skin champion members?

Synthesis of Review of Literature: Best practice guidelines for hospital pressure ulcer prevention recommend unit based skin champions (IHI 2008, NDNQI 2009). As part of comprehensive pressure ulcer prevention programs, unit-based skin champions are a key factor in the success stories from institutions that have reduced hospital acquired pressure ulcers (Griffin B et al 2007; Duncan KD 2007, Armstrong DG et al 2008).

Methods / Procedures: Dates for the quarterly “Champ Camp” are established one year in advance. House-wide quarterly prevalence and incidence data collection is completed by champions in the morning and entered electronically. Team members enjoy lunch while sharing case studies, followed by a structured skill learning activity, validation exercise, product/procedure update and educational offering with CEUs /guest speaker. . Preliminary prevalence and incidence results are available for discussion by afternoon and strategies for quality processes are set for the coming quarter

Results: Satisfaction is high for the predictable structure of Champ Camp. Attendance is 100% per unit. Managers favor the Camp for coverage; off-shift champions can plan in advance to attend. Skin champions have been validated in 90% staging accuracy and 100% on knowledge post-tests. Hospital acquired pressure ulcer rates are declining.

Discussion / Application to Practice: Unit based experts are a valuable strategy for hospital safety and quality initiatives. However, the care and maintenance of such teams can be challenging. By combining the functions of streamlined data collection with education and team building in a predictable format, the benefits of the skin champion team can be sustained.

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