Adopting Braden Q in the NICU to Identify Neonates at Risk of Developing Pressure Injuries

Michelle Wacek, RN, MSN, CPN
Margaret Ecklund, MS, RN, CCRN-K, ACNP-BC

Objective
To implement a pressure injury prevention program in the NICUs that includes utilizing the Braden Q scale to identify neonates at risk of developing pressure injuries.

Background
- Neonates are at significant risk for developing pressure injuries in the hospital setting.
- The Neonatal Skin Condition Score (NSCS) was used to evaluate the overall skin condition of neonates; however, neonates at risk of developing pressure injuries (PIs) were not always properly identified.
- NSCS replaced with Braden Q risk assessment tool in an attempt to identify patients at risk.
- Braden Q flowsheet in EHR prompts nurse to select interventions based on Braden Q sub-scores.
- Early risk identification along with the implementation of appropriate interventions is critical to preventing PIs in the neonatal population.

Tissue Perfusion Oxygenation Scores

<table>
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<th>High Risk (1)</th>
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<tr>
<td>Reposition or micro-shift every hour and as needed</td>
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<tr>
<td>Rotate pulse oximeter &amp; TCM every 4 hours – avoid constriction of circulation</td>
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<tr>
<td>Skin assessment with device fit and padding every 4 hours</td>
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<tr>
<th>Compromised, Adequate and Normal (2, 3, 4)</th>
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<tr>
<td>Reposition with hands on schedule NICU &amp; PICU</td>
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<tr>
<td>Skin assessment with device fit and padding every 8 hours</td>
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<tr>
<td>ECG leads repositioned only as needed to avoid tissue trauma</td>
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<tr>
<td>Rotate pulse oximeter; temperature probes and TCM every 8 hours</td>
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Implementation
- HAPI Committee, skin care champions, and WOC nurses involved in implementation of program.
- Self-learning module (SLM) on Braden Q and HAPI BPB assigned to all NICU staff.
- EPIC enhancement training on Braden Q sub-scores.
- 1:1 support provided at go-live.
- Braden Q resource/FAQ developed and disseminated to NICU staff.
- Weekly audits to determine compliance to documenting Braden Q each shift and to assess interrater reliability.
- PDCA of resources to match practices in NICUs.

Outcomes
- Chart audits indicate high compliance to documenting a Braden Q score each shift and identifying appropriate interventions based on sub-scores.
- NICU nurses report satisfaction in utilizing the Braden Q and identifying interventions for high-risk patients.
- Use of Braden Q scale has resulted in earlier identification of neonates at risk of developing a pressure injury while in the hospital.
- During a recent skin prevalence study, no neonates scored at risk and no new pressure injuries identified in NICU.

References

Contact Information
mwacek@lhs.org

RANDALL CHILDREN’S HOSPITAL
LEGACY EMANUEL