

Commission for Prevention and Treatment of Skin Injuries Implantation in a Public Hospital

Implantação da Comissão de Prevenção e Tratamento de Lesões na Pele em um Hospital Público

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Abstract

Care for individuals with skin lesions is a multiprofessional challenge, but with greater responsibility for the nursing team, for having responsibility for the dressings execution. This study aimed to report the experience of the Commission for the Prevention and Treatment of Skin Injuries (CPTLP) implementation in a public hospital in the state of Sergipe. This is a descriptive study, of the experience report type, carried out from the professional experience in the CPTLP of a public hospital in Sergipe. To systematize assistance to wound patients and those at risk of developing them, the CPTLP team was created and organized to prevent and treat injuries to the patients' skin. The CPTLP has the nurse as a reference professional for such care in view of this professional role in this scenario. Thus, the CPTLP team has managed to minimize the complex lesions occurrence, in addition to effectively treating existing ones through the individualized care and the care teams' education.

Keywords: Wounds and Injuries; Nursing Care; Patient Safety.

Resumo

O cuidado aos indivíduos com lesões na pele é um desafio multiprofissional, porém com maior responsabilidade para a equipe de enfermagem, por ter a responsabilidade da execução dos curativos. Este estudo objetivou relatar a experiência de implantação da Comissão de Prevenção e Tratamento de Lesões na Pele (CPTLP) em um hospital público do estado de Sergipe. Trata-se de um estudo descritivo, do tipo relato de experiência, realizado a partir da vivência profissional na CPTLP de um hospital público de Sergipe. Com o intuito de sistematizar a assistência aos portadores de feridas e aqueles com risco de desenvolvê-las, a equipe da CPTLP foi criada e organizada com a finalidade de prevenir e tratar lesões na pele dos pacientes internados. A CPTLP tem o enfermeiro como profissional de referência para esses cuidados tendo em vista o protagonismo desse profissional nesse cenário. Assim, a equipe da CPTLP tem conseguido minimizar o surgimento de lesões complexas, além de tratar de forma efetiva as existentes através do atendimento individualizado e educação das equipes assistenciais.

Palavras-chave: Ferimentos e lesões; Cuidados de Enfermagem; Segurança do Paciente.

Introduction

Skin lesions are considered a health problem that can lead to difficulties in the lives of those who have them, as well as requiring a greater work time of the nursing team during the care and increase the time of the patient's stay in the hospital unit, which contributes to an increase in expenditures on materials and inputs⁽¹⁾.

Caring for individuals with skin lesions is a multiprofessional challenge, but with greater responsibility for the nursing team, since it is the one who is in direct contact with the patient for a longer period of time and who is usually in charge of performing the dressings, it is important to highlight that for this, the nursing team must be equipped with specific knowledge, based on scientific evidence, that can provide the correct injury evaluation, the proper dressing technique execution and with this, a quality assistance⁽²⁾.

However, this care must be carried out in an integral way, to approach the individual as a biopsychosocial being, surpassing the mere execution of the dressing technique⁽³⁾. Thus, nursing care for skin lesions should seek to promote self-esteem, autonomy and self-care, through interventions that seek to attend to human needs integrally, without restricting themselves to injury⁽⁴⁾.

Skin lesions' care, more specifically these lesions appearance prevention is inserted in the patient safety context, which in turn, aims at reducing harm to patients resulting from inadequate care, by preventing the occurrence of errors and adverse events, thus ensuring patient integrity and quality care⁽⁵⁾.

The patient safety is a worldwide debated topic and has gained prominence and support from the various studies carried out, but what can be observed is that even with all existing knowledge on the subject, there are factors that hinder the full realization of a safe care as observed in a study carried out in intensive care units in Southeastern Brazil, which highlighted the relationship between the adverse events occurrence and the nursing team reassignment, justifying that the greatest number of adverse events was due to inadequate professionals reallocation, because in some cases the professional did not have the necessary experience to deal with critical patients⁽⁶⁾.

Among the adverse events considered as a priority in patient safety are Pressure Lesions (PL), which affect the hospitalized patients who are bedridden, that is, that present some change in mobility, being of paramount importance that for the patient in that condition, in addition to preventive measures, be taken into account the nutritional status and comorbidities presented by it, factors that may interfere in the lesions evolution⁽⁵⁾. Therefore, the prevention and treatment of these lesions is one of the skin care committees' focuses existing in the hospital units.

Thus, aiming at patient safety and systematized assistance for patients with skin lesions, it was necessary to implement a Commission for Prevention and Treatment of Skin Injuries (CPTSI) at a public hospital in Sergipe, to minimize the injuries' occurrence and provide assistance to all patients already affected by some type of injury, considering the assessment risk for lesion development, as well as the appropriate treatment use and follow-up of the existing ones.

Therefore, the present study relevance is justified when it aims to disclose the importance of the multidisciplinary team existence for the skin injuries systematized care within a health institution, to improve the patient's life quality.

This study aims to report on the experience of the Commission for Prevention and Treatment of Skin Injuries (CPTSI) implementation in a public hospital in the State of Sergipe.

Method

This is a descriptive, experience report study based on the professional experience of one of the authors as a Commission for the Prevention and Treatment of Skin Injuries' (CPTSI) nurse of a public hospital in the State of Sergipe between 2016 and 2017.

The state of Sergipe, located in the Northeast, is the smallest of the Brazilian states sheltering an estimated population of 2,288,116 inhabitants, composed of 75 municipalities⁽⁷⁾, and is divided into seven health regions⁽⁸⁾.

The hospital network consists of 58 hospitals and 3596 beds distributed in regional health, of which 31 are private, of which 10 are for-profit and 21 private non-profit; 27 publics, two

federal, eight state and 17 municipals. The Aracaju region, because it is the most populous and concentrates a large part of highly complex equipment and services, is considered as a reference for other⁽⁸⁾.

Results e Discussion

Sociocultural context of the institution

The Urgency Hospital of Sergipe (UHSE) is located in the state capital, Aracaju, which is located on the coast, occupies an area of 181,8km², has a population of 650,106 inhabitants⁽⁷⁾.

UHSE has 596 beds, and because it is a high complexity hospital, specialized in urgent and emergency care that is a reference in trauma, it receives patients with the most varied types of skin lesions. Not only patients with traumatic but also clinical conditions are attended, which leads to a variety of wounds, from the simplest to the most complex.

Faced with this complexity, in 2012 came the need to have a specialized team to monitor the injuries evolution, and the Wound Commission emerged. In the state hospital network is the pioneer institution to have a team specialized in wound treatment, besides this, the state maternity also has a team.

Caring for the person with skin lesions

At the beginning this committee consisted of only one nurse and one nursing technician who were responsible for evaluating and accompanying the wounds of greater complexity, by spontaneous demand, as requested by the medical team.

In view of the work carried out, the increase in demand and the need to reinforce actions related to patient safety, with the improving care objective, especially with regard to the prevention of PLs, the Commission for the Prevention and Treatment of Skin Injuries (CPTSI) in 2015.

This Committee is composed of a multidisciplinary team (physiotherapist, nurses, technicians and nursing assistants) that acts by performing active daily search of patients at skin lesions developing risks and lesions, whatever the etiology.

In addition to this active search, the CPTSI nurse accompanies the more complex injuries by

performing the dressing daily, to support the care teams in this type of care. The nurse is responsible for the daily assessment and suggestion of the best coverage for each wound type and skin nursing care prescription.

For this purpose, the nurse's role must be founded on nursing evidence-based, as it assists the planning and execution of adequate and quality care. It requires the constant professional search for knowledge through research, studies and new technologies use to be able to decide, together with the patient and the team, what is the best treatment for a certain injury⁽⁹⁾.

Initially, the CPTSI team consisted of evaluations of patients with complex lesions who did not evolve. These evaluations were performed through informal requests from the nursing and medical teams.

With the intention of systematizing care for wounded patients and those at risk of developing them, the CPTSI team sought to organize itself by structuring its actions based on a regiment and the tool elaboration that would assist the follow-up of these patients in a systematic way, based on the recommendations found in national and international literature.

This regiment was prepared by the CPTSI team in conjunction with the Nursing Directorate from the model of institution other regiments, and regulates the purposes, CPTSI composition and its members' attributions.

Commission for the Prevention and Treatment of Skin Injuries Action

Bearing in mind to implement actions aimed at patient safety, priority was given to the skin lesions prevention (in particular pressure injuries) and the in-service education of care teams to optimize care and improve life quality.

It was then determined that the wounded patients' evaluations and follow-up would be made based on requests recorded in medical records by the medical team and communicated to the CPTSI by the nursing team of each production unit.

The CPTSI has promoted several capacities for its members, as well as for the care team through specific courses on debridement, dressings and coverages, skin lesions prevention, among others, through scientific meetings held

quarterly, and bi-monthly actions of continuing education. Has also sought to develop research in the area and publication of cases to publicize the work developed and provide knowledge to professionals.

Every year the CPTSI holds a large event open to the public in reference to the World Day of Prevention of Injury by Pressure, which addresses prevention actions and strategies, as well as the presentation of indicators and cases accompanied by the CPTSI. Since the CPTSI creation, there has been an improvement in nursing care with regard to adequate dressing and PL prevention techniques.

Among the difficulties faced by the CPTSI team, the coverage supply is what most affects the provided assistance. Sometimes there is shortage, which generates treatment discontinuation and prolongs hospitalization time, besides increasing hospital expenses.

In addition, the lack of a unique surgeon (plastic and/or general) in the CPTSI team sometimes makes it difficult to plan multiprofessional care, since on-callers prioritize care according to the institution's demands, and sometimes when requested by the CPTSI are slow to evaluate the patients.

Conclusion

The performance of a complete, multi and interdisciplinary team in the skin lesions treatment is necessary and brings excellent results. Optimizing the care of patients with wounds and avoiding them during hospital treatment reduces the time spent in the unit and provides a better life quality for the patients.

The search for assistance to the human being in an integral way, as recommended by the Unified Health System, requires professionals to welcome the person permanently so that, despite living with the injuries, they can maintain their life quality.

The CPTSI still does not count on professionals of extreme importance in the care process to the lesion holders as the nutritionist and the surgeon (plastic and/or general). Nowadays, when it is necessary to evaluate these professionals, it is done to the day's attendant, which generates a certain discontinuity of care.

Thus, the nurse has a fundamental role in this process because it is the professional that accompanies the patient's evolution on a daily basis, since it establishes a precious bond for care, being responsible for the therapy suggestion and follow-up, which has strengthened and given autonomy category within the institution.

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