

NURSING DIGEST

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Message - National President

Capt. Ajitha Nair

Guidelines for Submitting Abstracts

Newsletter Media Committee (NLM), ANEI

Staying Safe

NLM Committee, ANEI

Safe Work Environment - CEA, India

NLM Committee, ANEI

Voice of the Patient

Cecilia Nantume, RN, Uganda

Forensic Nursing - A New Frontier in India's Healthcare Landscape

Ms Krishna Choudhary, Northeast Chapter, ANEI

Healing - QIP on Pressure Injury

Rajagiri Hospital, Kochi, Kerala

World Nursing Record

Tamil Nadu Chapter, ANEI

Upcoming Event

ANEI Annual Patient Safety Conference

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Message from the President



Capt Ajitha Nair
President, ANEI

Dear Esteemed Members,

As we approach the final quarter of 2024, I want to take a moment to address a matter of utmost importance—one that affects each of us profoundly: the increasing incidents of violence against healthcare workers in our hospitals. These troubling events have highlighted the vulnerabilities within our profession and underscore the urgent need for collective action to safeguard ourselves and our colleagues.

Nurses are often on the front lines, providing care in the most challenging environments. Yet, the alarming rise in violence against healthcare workers, particularly nurses, has created an atmosphere of fear and uncertainty. This is not just an issue of workplace safety; it is a matter of human dignity and professional integrity.

As we reflect on these incidents, it becomes clear that we cannot afford to remain silent or isolated in our efforts to combat this issue. Now, more than ever, we must come together as a united front. Our strength lies in our solidarity, in our ability to voice our concerns collectively, and in our commitment to protecting each other.

I urge each of you to speak up against unsafe environments—whether it be in our hospitals, our hostels, or during transportation to and from work. Silence in the face of danger only perpetuates the cycle of violence. By raising our voices, we not only protect ourselves but also pave the way for systemic changes that will ensure a safer working environment for all healthcare professionals.

Moreover, as teams, we must support one another. Our sense of community within the nursing profession is our greatest asset. Let us use it to foster a culture of vigilance, mutual respect, and unwavering support. Together, we can create a safer, more supportive environment where every nurse feels valued and protected.

Let us also engage with hospital administration and policymakers to advocate for stricter measures and policies that prioritize the safety and well-being of healthcare workers. By being proactive and working collaboratively, we can drive meaningful change that will benefit not just our profession, but the entire healthcare system.

As we move forward, let us carry with us the strength of our shared commitment to safety, respect, and professional solidarity. Together, we will continue to provide the highest standard of care to our patients while ensuring that our own safety and well-being are never compromised.

Thank you for your unwavering dedication to our profession and for standing together in these challenging times.

In solidarity,
Capt Ajitha Nair
President, ANEI



Guidelines for Submitting Abstracts

1. Title:

- **Choose a concise, descriptive title** that clearly reflects the content of the abstract. It should grab the reader's attention while providing an overview of the study.

2. Introduction:

- **State the purpose** of the study clearly. Explain the background of the study or topic, and why it is important in the nursing field.

- Include a **brief literature** review if applicable, highlighting key references that support the relevance of the topic and state delimitations if any.

3. Objective(s):

- **Clearly define the objectives** or research questions. What did you aim to achieve or discover? This section should be specific and concise.

4. Methods:

- Describe the **methodology** used to conduct the study or project. Include details about the design, setting, participants, tools used for data collection interventions and any data collection or analysis methods. Ensure the process is described clearly to allow others to understand the approach.

5. Results:

- **Summarize the findings** of your study or project. Present key results in a logical order. If applicable, use tables, charts, or figures to illustrate the data, but ensure they are brief and to the point.

6. Discussion:

- **Interpret the results** in the context of the study objectives. Discuss the significance of the findings and how they contribute to the nursing field. (Nursing practice, nursing education, and nursing administration) and how your study findings are similar or different from other studies)

- Address any **limitations** of the study or project and suggest areas for further research or improvement.

7. Conclusion:

- **Summarize the main findings** and their implications for nursing practice, policy, or education. Highlight any recommendations or actions that should be taken based on the results.

8. Keywords:

- Include **3-5 keywords** at the end of the abstract that reflect the main topics or themes. This will help in indexing and improve searchability.

9. Length:

- The abstract should be between **2-3 pages** in length. Ensure it is succinct but comprehensive, covering all essential elements without unnecessary detail.

10. Style and Formatting:

- **Use clear, professional language** that is easy to understand.
- Ensure the abstract is **well-organized** with headings and subheadings where appropriate.
- Follow any specific **formatting guidelines** provided**such as font size, margins, and spacing.

11. References:

- If applicable, include a brief reference list at the end. Use a consistent citation style.

12. Review and Revise:

- **Proofread** the abstract for any grammatical or typographical errors.
- Ensure the content is **cohesive** and flows logically from one section to the next.
- **Seek feedback** from colleagues if possible before finalizing.

These guidelines should help you craft a well-structured and informative nursing abstract that fits within the specified length for your newsletter.

Formatting Guidelines for Nursing Abstract

Font: Times New Roman

Font Size: 11 pt

Spacing: Single-spaced

Margins: 1 inch on all sides (top, bottom, left, and right)

Alignment: Left-aligned (except for the title, which should be centered)

Title:

- Centered, Bold, 14 pt
- One line space after the title before starting the introduction

Headings:

- Bold, 12 pt
- Leave one line space before and after each heading

Paragraphs:

- Indented 0.5 inches at the beginning of each paragraph
- No extra spacing between paragraphs

Tables/Figures:

- If included, should be numbered and titled (e.g., Table 1: Study Results)
- Titles should be in Times New Roman, 11 pt, centered
- Insert tables/figures as close as possible to where they are mentioned in the text

Keywords:

- Italicized, Times New Roman, 11 pt
- Leave one line space after the conclusion before listing keywords

References:

- Times New Roman, 10 pt, single-spaced
- Use a consistent citation style (e.g., APA, Vancouver)
- Hanging indent 0.5 inches for each reference

Staying Safe: How Nurses Can Protect Themselves from Violence in Hospitals

Human factors are universally applicable across all workplaces involving human activity, and they are recognized as the universal aspect of human fallibility across various contexts. Common human variables that contribute to compromised patient safety incidents, as observed by nurses, include failures in communication, insufficient training, a lack of collaboration, diversions, and personal life pressures that impact psychological well-being.

1. Be Aware of Your Surroundings:

- **Vigilance is Key:** Always be conscious of your surroundings. Recognizing potential risks before they escalate can prevent many incidents. This includes being aware of the patients' and visitors' behaviors, especially in high-stress areas like the emergency room.
- **Know Your Escape Routes:** Familiarize yourself with the layout of the hospital, including the locations of exits and security stations. In case of an emergency, quick action may be necessary.

2. Speak Up About Unsafe Conditions:

- **Report Unsafe Environments:** If you notice that certain areas of the hospital are not secure or that there are unsafe conditions, report them immediately. This includes poor lighting, broken locks, or a lack of security personnel.
- **Advocate for Safe Staffing Levels:** Understaffing can increase the risk of violence, as fewer staff may lead to longer wait times and higher stress levels. Speak up if you feel that staffing levels are insufficient to provide safe care.

3. Enhance Your Communication Skills:

- **Use De-escalation Techniques:** Training in de-escalation can help you manage situations before they become violent. Effective communication can calm agitated patients or visitors and prevent conflicts from escalating.
- **Establish Clear Boundaries:** Be assertive about your boundaries with patients and visitors. Politely but firmly letting them know what behavior is acceptable can help in maintaining control over potentially volatile situations.

4. Know When to Seek Help:

- **Don't Hesitate to Call Security:** If you feel threatened or unsafe, call for help immediately. Hospital security is there to protect staff as well as patients.
- **Teamwork is Essential:** If you find yourself in a potentially dangerous situation, notify your colleagues. Working in pairs or groups can deter aggressive behavior and ensure that help is close at hand.

5. Take Care of Your Personal Safety:

- **Secure Your Personal Belongings:** Always keep your personal items in a secure location, and avoid carrying valuables with you during your shift.
- **Consider Your Commute:** If you work late shifts, arrange safe transportation to and from the hospital. If hospital-provided transportation is not safe, advocate for better services, or consider carpooling with a trusted colleague.

6. Address Hostile Work Environments:

- **Raise Concerns About Workplace Culture:** If the culture in your department tolerates or ignores aggression, it is important to bring this to the attention of management. Everyone has the right to work in a safe environment.
- **Seek Support:** If you experience violence or threats, seek support from a trusted colleague, counselor, or your hospital's employee assistance program (EAP).

7. Utilize Training and Resources:

- **Attend Safety Training Programs:** Participate in any available training on workplace violence prevention. These programs provide valuable skills and knowledge to help you stay safe.
- **Know Your Rights:** Be aware of your rights as a healthcare worker. Understanding the policies in place to protect you can empower you to take the necessary steps if you feel unsafe.

Conclusion:

Nurses should not have to worry about their safety while caring for others, yet the reality of hospital violence means that precautions are necessary. By staying vigilant, advocating for safe working conditions, and utilizing available resources, nurses can protect themselves and foster a safer environment for everyone in the healthcare setting. Remember, your safety is as important as the care you provide—never hesitate to take action to protect it.



Safe Work Environment: What the Clinical Establishment Act of India Says

The Clinical Establishments Act, 2010, in India, focuses on establishing standards for clinical establishments, including aspects related to a safe work environment. Here are some key points related to a safe work environment under this Act:

- 1. Compliance with Safety Standards:** Clinical establishments must adhere to safety standards set by relevant authorities. This includes maintaining safe facilities, equipment, and procedures to ensure the well-being of both patients and healthcare workers.
- 2. Provision of Personal Protective Equipment (PPE):** Clinical establishments are required to provide appropriate PPE to their staff to protect them from exposure to hazardous materials and infections.
- 3. Workplace Safety Measures:** The Act mandates that clinical establishments implement measures to ensure a safe working environment. This includes safe handling and disposal of medical waste, maintaining cleanliness, and ensuring that equipment is in good working order.
- 4. Emergency Preparedness:** Clinical establishments must have protocols in place for emergencies, including fire safety, natural disasters, and chemical spills. Regular drills and training for staff on emergency procedures are essential.
- 5. Occupational Health and Safety Programs:** Establishments are encouraged to implement occupational health and safety programs. This includes regular health check-ups for staff, ergonomic assessments, and addressing workplace hazards.
- 6. Training and Education:** The Act emphasizes the importance of training and educating staff on safety procedures, infection control practices, and the proper use of medical equipment.
- 7. Reporting and Addressing Unsafe Conditions:** Clinical establishments are required to have mechanisms for staff to report unsafe conditions or incidents. There should be a process for addressing these concerns promptly and effectively.
- 8. Regulatory Inspections:** Regular inspections by regulatory authorities ensure that clinical establishments comply with safety standards and address any deficiencies in their work environment.
- 9. Support for Mental Health:** While not explicitly mentioned in the Act, creating a supportive work environment for mental health and managing stress is a recognized aspect of workplace safety in clinical settings.

References:

- **Clinical Establishments Act, 2010:** Clinical Establishments (Registration and Regulation) Act, 2010
- **Clinical Establishments (Central Government) Rules, 2012:** Rules for Clinical Establishments

These documents provide the legislative framework and detailed provisions related to safety and operational standards for clinical establishments in India. For more specific guidance on workplace safety, you might also want to consult relevant state regulations and guidelines that complement the central Act.

Patient's Voice



Cecilia Nantume Okiring
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Empowering Patients: The Importance of Asking Questions in Healthcare

A Near-Miss experience by a nurse midwife from Uganda

Every pregnant woman hopes for a smooth pregnancy and a healthy baby. For me, being a nurse-midwife brought both comfort and anxiety. While I understood the medical aspects of my pregnancy, I was still anxious, especially as I approached my due date.

At 38 weeks, I decided to switch hospitals due to financial constraints, choosing a faith-based hospital where a friend worked. Days before my appointment, I noticed increased fetal movements and a bloody discharge, signaling potential labor. Upon arrival at the hospital, my friend ensured I saw the obstetrician immediately. My baby's heart rate was abnormally high at 170 beats per minute, and the heartbeats were irregular. Previous antenatal records did not note such high rates, though my husband later recalled that my former obstetrician had occasionally mentioned elevated rates but dismissed them as non-concerning.

The obstetrician conducted several tests, including an ultrasound, which revealed no immediate cause for the high heart rate. Despite the concerning findings, the doctor suggested I return home and monitor the fetal heart rate at a nearby facility. Realizing the impracticality and risk of this plan, I questioned the frequency of these checks. This prompted the doctor to admit me for continuous monitoring, where the fetal heart rate remained dangerously high.

By evening, after thorough monitoring and multiple examinations, the medical team decided on an emergency C-section. My baby was delivered safely, although the situation could have been dire if not for the timely intervention. The doctors later confirmed that the high heart rate was due to cord presentation, where the umbilical cord was being compressed, potentially leading to fetal distress and death.

Reflecting on this experience, I recognized the critical role of patient advocacy and the importance of asking specific questions. My medical background enabled me to understand the risks and question the doctor's initial advice. However, many patients lack this knowledge and may feel intimidated to speak up.

As a nurse, I now accompany my relatives to their medical appointments, ensuring they ask questions and understand their care plans. I emphasize the importance of providing detailed medical histories, keeping all records, and actively participating in their healthcare decisions. Patients should not hesitate to challenge healthcare decisions if they have valid concerns and should always ensure their medical records are up-to-date and accurate.

In conclusion, this experience underscored the importance of patient advocacy and the need for clear communication with healthcare providers. Asking specific questions and being involved in one's care can significantly improve health outcomes. Empowering patients with knowledge and the confidence to speak up is crucial for ensuring the best possible care for themselves and their loved ones.

Forensic Nursing: A New Frontier in India's Healthcare Landscape



Krishna Choudhury
PhD. Scholar, M.Sc. (N)
Lactation & IYCF Counsellor

Forensic Nursing: A New Frontier in India's Healthcare Landscape

Forensic nursing, a specialized field that marries medical expertise with legal acumen, is still in its nascent stage in India. As the healthcare sector evolves to address complex societal needs, forensic nursing emerges as a crucial discipline that bridges the gap between healthcare and the legal system. Though well-established in many parts of the world, in India, the field is only beginning to gain recognition, with increasing awareness of its significance in the context of trauma, abuse, and criminal investigations.

Introduction to Forensic Nursing

Forensic nursing involves applying nursing practices in legal and public proceedings, particularly in cases of trauma, violence, and victimization. This branch of nursing is essential in the scientific examination of trauma and death, where forensic nurses play a pivotal role in evidence collection, providing expert testimony, and ensuring compassionate care for individuals impacted by crime or violence. The integration of medical and legal knowledge in forensic nursing enhances the reliability of legal investigations and contributes significantly to the pursuit of justice.

A forensic nurse is a Registered or Advanced Practice Nurse with specialized training to meet the unique needs of victims or perpetrators of violence. These professionals not only provide direct patient care but also offer consultation and expert opinions in civil and criminal cases. Importantly, forensic nursing care is not isolated; it is integrated into the overall healthcare framework, ensuring that the medical and legal needs of patients are comprehensively addressed.

Ethical Considerations in Forensic Nursing

Forensic nurses frequently encounter ethical dilemmas, particularly when dealing with victims of crime and violence. These dilemmas can significantly impact the health and well-being of patients. To navigate these complex situations, forensic nurses adhere to ethical guidelines that prioritize the patient's welfare, dignity, and rights. These guidelines are crucial in ensuring that forensic nursing practices are conducted with the highest standards of integrity, trust, and respect.

Ethical practice in forensic nursing is guided by several core principles:

- 1. Autonomy:** Respecting the patient's right to make informed decisions about their care is fundamental. Forensic nurses are committed to supporting patients' choices, even when these choices differ from the healthcare provider's recommendations.
- 2. Justice:** Forensic nurses are obligated to provide fair and equitable treatment to all patients, ensuring that resources are allocated impartially and that every individual receives the care they need without discrimination.
- 3. Beneficence and Non-maleficence:** These principles emphasize the importance of promoting the patient's well-being while avoiding any actions that could cause harm. Forensic nurses must carefully weigh the benefits of treatments against potential risks, ensuring patient safety and positive outcomes.
- 4. Fidelity to Patients:** Forensic nurses must deliver care with honesty and loyalty, maintaining the trust of their patients and upholding their professional responsibilities with integrity.
- 5. Obligation to Science:** Advancing scientific knowledge and incorporating evidence-based practices are central to forensic nursing. Nurses must stay informed about the latest developments in the field to ensure their practices are accurate and credible.
- 6. Duty to the Public:** Beyond individual patient care, forensic nurses have a broader commitment to public welfare, particularly in advocating for violence prevention and contributing to community health initiatives.
- 7. Commitment to Colleagues:** Forensic nurses are expected to work collaboratively with their colleagues, mentoring and supporting each other to maintain a high standard of professional practice.

Conclusion

In conclusion, forensic nursing is an emerging field in India that holds great potential for enhancing the healthcare and legal systems' response to crime and violence. By combining compassionate care with rigorous evidence collection and legal expertise, forensic nurses play a critical role in ensuring justice for victims of crime. As this specialty continues to develop, it will be essential for practitioners to stay informed about evolving legal standards and ethical guidelines, ensuring that their work remains at the forefront of both healthcare and legal practice.

Forensic nursing in India is poised to become a vital component of the healthcare landscape, offering a new avenue for nurses to contribute to public safety and justice. As the profession grows, it will undoubtedly play a crucial role in shaping the future of both healthcare and legal proceedings in the country.

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Healing Abstract - Quality Improvement Project

Rajagiri Hospital, Kochi, Kerala

Author: Ms K S Nitu¹, Sr. Sinciya Sebastian², Ms. Biny NY³

1. Nursing Superintendent, Rajagiri Hospital
2. Head Nurse Quality, Rajagiri Hospital
3. Tissue Viability Nurse, Rajagiri Hospital

ABSTRACT

Introduction

Pressure injuries cause pain and disability and compromise the quality of life. Individuals with limited mobility are at greater risk of pressure injuries, which result from prolonged pressure on the skin. In Rajagiri Hospital the concerns identified:

High Incidence Rate: High Incidence rates i.e., 0.67 per 1000 days due to long-duration surgeries, & prolonged bedridden high-risk patients.

Inappropriateness of documentation: Inappropriate documentation of Pressure Injury Risk assessment score in 55% of patient records.

Inadequate knowledge: Knowledge score awareness related to risk assessment & prevention of pressure injury was found to be 60%

Aim and Objectives

Aim:

The study intended to reduce the incidence of HAPI in OT due to long-hour surgeries, critical and non-critical areas due to high-risk patients, by improving nurses' knowledge and awareness.

Objectives:

1. Reduce the Incidence Rate of Pressure Injuries below the benchmark (0.36 per 1000 IP Days) (ref. MDPI).
2. Enhance the knowledge and awareness of nurses regarding pressure injury assessment, prevention, and management protocol by >90%.
3. Implement Pressure injury management protocol.

Materials and Methods

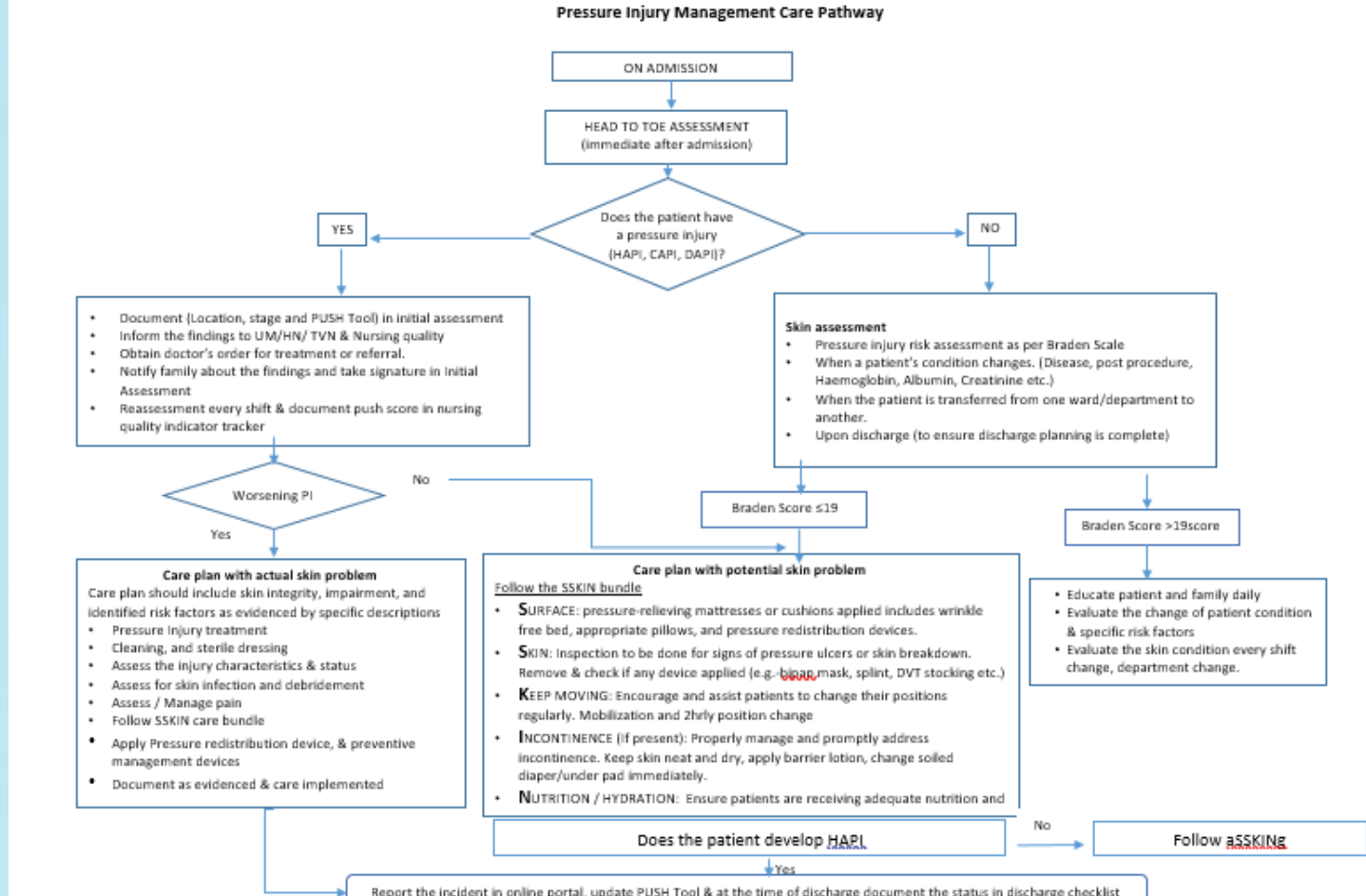
This study was done with Quantitative Research Design & retrospective data analysis. Overall, PI prevalence and HAPI rates were obtained and analyzed using the DMAIC Tool. For RCA utilised Fishbone analysis and implemented CAPA for improvement.

Project Introduction					Standards of Care	
In 1854, Florence Nightingale gained popularity as a precursor of measures to establish quality standards by implementing sanitary and care practices during the Crimean War that culminated in a drastic reduction of the mortality rate, from 40% to 2%, at the hospital in Scu-tari.					Assessment of HAPI rates is an important quality measure for healthcare because of potential negative impact on patient care. Hence all thorough checks are done as it leads to:	
In light of the current scenario of extensive globalization, nursing is faced with the dilemma of ensuring quality care through the improvement of scientific technical knowledge					a) Reduction in Cost of Poor Quality b) High customer satisfaction c) Proactive management of Pressure injury	
Plan for Project					Project Scope	
Metric	Phase 0	Phase 1	Phase 2	Status	In scope:	
Study periods	1 Jan-30 Jun '23	1 Jul'23-31 Dec '23	1 Jan '24 – 1 Mar '24	Completed	Phase 1: OT, 2MICU, 6T1, 6T2, 3T1 & 3T2 & Phase 2: Other IP Areas	
Project Plan					Team Selection	
Phase	Start	End	Remarks	Patron: Dr. Elizabeth David		
Define	Jul 2023	Jul 2023	Done	Champion :- Ms. Shina Sajimon & Ms. Simi Vijayan		
Measure	Aug 2023	Oct 2023	Done	SME:- Ms. Biny N Y & Sr. Sinciya Sebastian		
Analyze	Nov 2023	Dec 2023	Done	Project Leader : Ms. K S Nitu		
Improve	Jan 2024	Feb 2024	Done	Team Leads: Ms. Seenamma Augustine & Ms. Julie T John		
Control	Mar 2024	Mar 2024	Done	BB Mentor :- Ms. K S Nitu		
Team Member :- Nursing Team, Medical Admin Team, Service Excellence, Pharmacy						

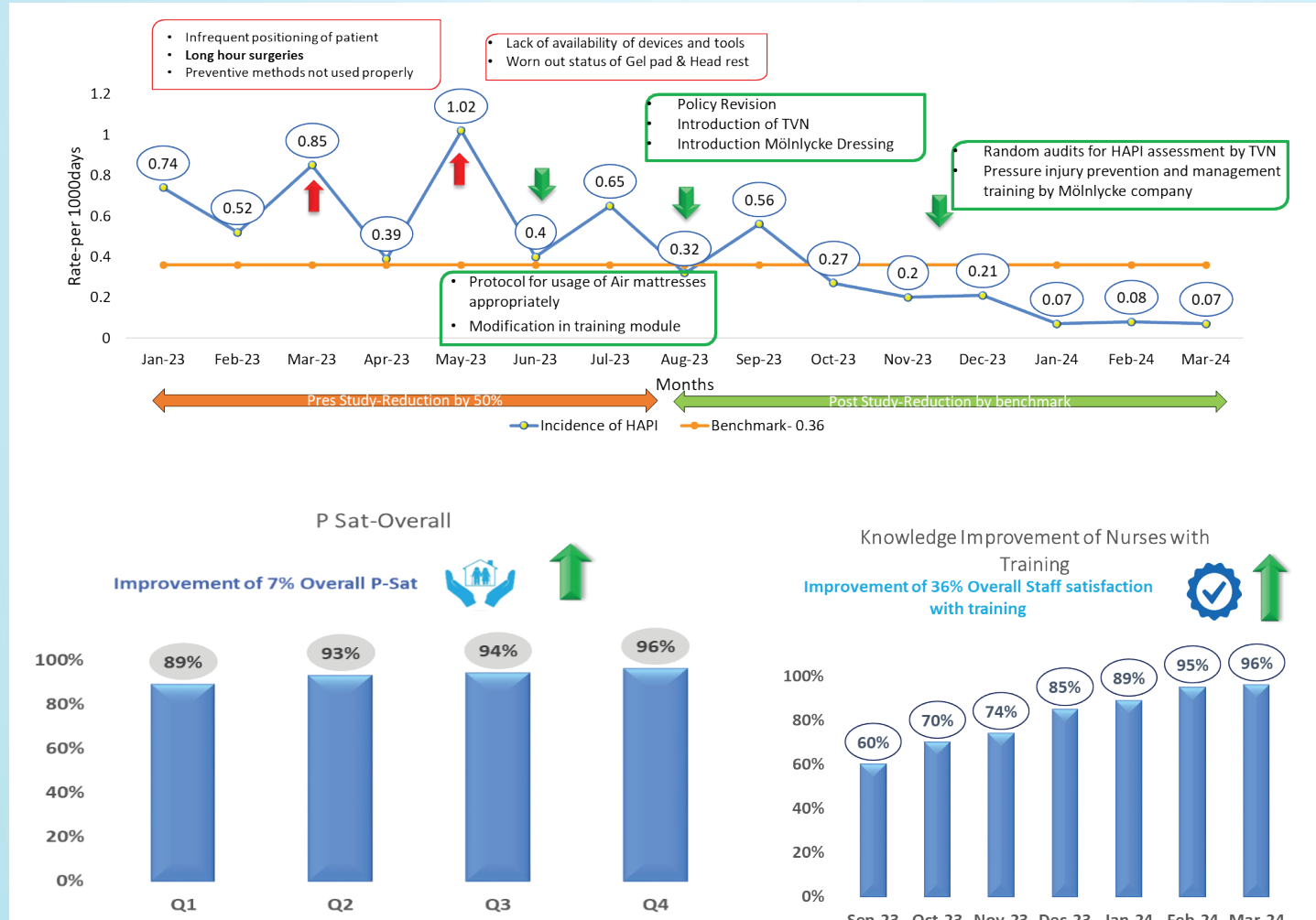
Preventive methods used



Pressure Injury Care Pathway:



Figures, Graphs & Results:



Result:

This QIP resulted in

Improvement in	Pre study	Post Study	% of Improvement
Rate of Pressure Injury	0.66 per 1000 IP Days	0.22 per 1000 IP Days	67% reduction
Documentation Compliance	50%	94%	44% increased
Knowledge of the nurses	60%	96%	36% improved
Impact on patient satisfaction	89%	96%	7% improved

Conclusion:

This project has illuminated our path forward in improving patient care and preventing pressure injury development among patients admitted to our hospital. The findings have paved the way for targeted interventions, underlining our commitment to raising the standard of care for our critically ill patients. The causes of hospital-acquired pressure injuries are primarily intrinsic and increase morbidity.

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World Nursing Record Report - TN Chapter

Association of Nurse Executives (India) Tamil Nadu Chapter and Gleneagles Health City, Chennai, Achieve World Record with 2500+ Nurses

Einstein World Record Institute Recognizes Historic Achievement



ANEI TN Chapter and Gleneagles Health City, Chennai, attempted a world record with 2500+ nurses, taking the nurses pledge while displaying themselves in nursing word art formation, on the International Nurses Day 2024 theme **“Our nurses. Our Future. The Economic Power of Care”** on 18, Aug, 2024 @ Gleneagles health city, Chennai.

The event was graced by esteemed guests, including Chief Guest Dr. J. Radhakrishnan, IAS, Additional Chief Secretary to the Government of Corporation, Food and Consumer Protection Department, Guest of Honour Dr. Nageshwar Rao, CEO, Gleneagles Health City, Dr. Jothi Clara Michael, Director of Nursing, Gleneagles Healthcare India, IHH Healthcare, Founder ANEI, Ms. Leena Chandrasekaran, President, ANEI TN Chapter and Dr. Rosaline Rachel, Vice President, ANEI TN Chapter.

Dr. Jothi Clara Michael led the event, where over 2,500+ nurses from 146+ different colleges and hospitals participated. The gathering highlighted the strength and unity of the nursing profession and reiterated the core professional values that guide these healthcare heroes daily. The Chief Guest, Dr. J. Radhakrishnan, IAS, applauded the nurses for their relentless dedication to delivering care and healing, acknowledging their invaluable contribution to the healthcare system.

This event paid tribute to the unwavering commitment and service of nurses, the backbone of healthcare systems worldwide. The nurse's word art formation was a powerful visual representation of the International Nurses Day 2024 theme, “Our Nurses. Our Future. The Economic Power of Care.” This year’s theme emphasizes the vital role nurses play in patient care and advancing healthcare economies. The program aimed to spotlight the economic and social contributions of nurses, underlining their pivotal role in ensuring community well-being.

This extraordinary event, was recognized by the Einstein World Record Institute, stands as a testament to the strength, unity, and dedication of the nursing profession.



Upcoming Events

ANEI Annual Patient Safety Conference

Our International Speakers



DR NEELAM DHINGRA

Vice President
Chief Patient Safety Officer
Joint Commission International



DR MICHAEL RAMSAY

CEO, Patient Safety Movement Foundation
USA



MR HOWARD CATTON

CEO, International Council of Nurses
Geneva, Switzerland

27 SEPTEMBER 2024

**MSR College of Nursing
Bangalore**

Track 1

➤ Inaugural Session

Track 2

➤ Panel Discussion on "Bridging the Gap: Nurse Interventions to Mitigate Diagnostic Errors in Healthcare Settings"

Track 3

➤ Implementation Of JCI Safety Recommendations to Address Diagnostic Safety- A Case Study

Track 4

➤ Diagnostic Patient Safety - Legal Aspects

Track 5

➤ QI Projects - ANEI Patient Safety Fellows -Cohort 3
Introduction of Cohort 4 of ANEI Patient Safety Fellows

Track 6

➤ Diagnostic Safety: Patient Perspectives

Track 7

➤ Panel Discussion on Minimizing System Related Factors Contributing to Diagnostic Error

Track 8

➤ Valedictory Session

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