

SHARPENING THE EDGE

IN PRESSURE INJURY
PREVENTION AND TREATMENT

NPIAP 2021 ANNUAL CONFERENCE

MARCH 10-12 | VIRTUAL EVENT

AGENDA

Conference Objectives

- 1. Describe skin/wound characteristics and variations due to lifespan and disease.*
- 2. Describe innovative PI prevention, treatment and concepts.*
- 3. Explore healthcare environment related to pressure injury- healthcare, outcome measurement, legal issues*

**PRE-SYMPOSIUM
SMARTER SUPPORT SURFACE SELECTION: THE UNDERCOVER STORY**

Kristen Thurman, PT, CWS, FACCWS
Cindy Sylvia, D NURS, MSc, MA, RN, CWCN
Susan Morello, BSN RN CWOCN, CBN Clinical Consultant
Frank Sauser, PMP
David Brienza, PhD
Evan Call, MSN, CSM-NRM
Rachel Moseley, MS, BSN, RN, CWON, APHN
Stephanie Slayton, PT, DPT, CWS, CLT-LANA
Ann Tescher, APRN, CNS, Ph.D.

10:00 AM -
1:00 PM

Published Support Surface Standards can assist healthcare professionals in matching support surface characteristics to needs of individuals and various patient populations. This event will explain the published standards and how they can be applied to assist bedside clinicians as well as procurement professionals in selecting support surfaces for their patients, patient populations and institutions.

Objectives:

- Describe the rationale for implementing standardized terms and definitions associated with support surfaces
- Discuss the clinical relevance of the standardized tests
- Recognize how product features are linked to clinical needs
- Outline the process of how standards facilitate support surface selection

PRE-SYMPOSIUM ROOT CAUSE ANALYSIS: FINDING YOUR WHY

Michelle Deppisch, PT, CWS, FACCWS
Joyce Black, PhD, RN

10:00 AM
– 1:00 PM

When and where did the pressure injury start? If this is a common question for you, root cause analysis will guide your decisions. This program will use cases to demonstrate how to perform RCAs. Operating room acquired pressure injury will be one of the foci for this program.

1. Describe the steps to root cause analysis for pressure injury.
2. Examine medical records to determine the timing of a pressure injury.
3. Use a root cause analysis system to plan for system change.

WEDNESDAY - MARCH 10 – NPIAP 2021 ANNUAL CONFERENCE (*All times listed in EST.)

12:00 –
1:00 PM

FAMILIARIZE YOURSELF AND CONNECT!

1. Be sure to familiarize yourself with what NPIAP Annual Conference has to offer!
2. Say hello to our exhibitors and sponsors

NPIAP IN 2020: SHARPENING YOUR CLINICAL EDGE

Janet Cuddigan, PhD, RN, FAAN

Bill Padula, PhD, MS

1:30 –
2:00 PM

While tumultuous 2020 is in the rear-view mirror, the year was productive for NPIAP. This session will celebrate the accomplishments of the Panel.

1. Describe the work of NPIAP in 2020 especially in relation to the COVID-19 pandemic.
2. Explore possible projects for 2021-22

2:00 –
2:45 PM

RESEARCH AND PUBLIC POLICY WITH NPIAP

Bill Padula, PhD, MS

Barbara Delmore, PhD, RN, CWCN, MAPWCA, IIMCC-NYU

NPIAP AWARDS

Bill Padula, PhD, MS

2:45 –
3:00 PM

See your colleagues be presented with the following prestigious awards that are only given out every other year: President's Award, Roberta S. Abruzzese Award; Kosiak Award, JoAnn Maklebust Lifetime Achievement Award and Thomas Stewart Founder's Award

3:00 –
4:00 PM

POSTER SESSION AND NETWORKING IN EXHIBIT HALL

HAPI HOUR

4:00 –
5:00 PM

Meet the NPIAP Board of Directors, Award winners and Sponsors at this exciting virtual networking event where you can video chat in groups of 6 people and change tables by the click of your mouse! Reconnect with all of your colleagues from past conferences.

SKIN THROUGH THE FLIGHT OF LIFE

Ann Marie Nie, MSN, FNP-BC, CWOCN

Rob Kirsner, MD, PhD

Jeff Levine, MD, AGSF, CMD, CWS-P

10:00-
11:30 AM

Moderator: Lee Ruotsi, MD, ABWMS, CWSP, UHM

Skin changes as people age, but wrinkles are not the only problem. This session will examine the changes in skin structure and function over time and the clinical impact of these changes.

1. Identify the changes in appearance of the skin from in the neonate to the elder.
2. Describe the clinical significance of the changes in structure and function of the skin over time.

TECHNOLOGY TO SHARPEN YOUR PI DETECTION SKILLS

Joyce Black, PhD, RN

Zena Moore, PhD, MSc

Deanna Vargo, BSN, RN, CWS, FACCWS, CWOCN

11:30 AM-
12:30 PM

Moderator: Joyce Pittman, PhD, RN, ANP-BC, FNP-BC, CWOCN, FAAN

The sooner a pressure injury can be detected, the more likely it is to be treated and hopefully heal. Technology can assist with early identification of pressure injury not yet visible to the naked eye. This session will identify the science and practical implication of some of the technologies.

1. Identify the clinical relevance to the measure of fluid in the subepidermal space and perfusion in tissues.
2. Examine the clinical efficacy of noninvasive early detection of pressure related skin changes

12:30 -
1:30 PM

POSTER SESSION AND NETWORKING IN EXHIBIT HALL

SMITH+NEPHEW SYMPOSIUM

Robin Gasparini, DNP, RN, ACNS-BC, Clinical Nurse Specialist, Mayo Clinic, Jacksonville, FL

REDUCING PRESSURE INJURY INCIDENCE IN CRITICAL CARE WITH TURN CUEING

12:40 -
1:30 PM

While all other hospital-acquired conditions are down, AHRQ reports that hospital-acquired pressure injuries are still on the rise. This symposium discusses a novel technology for pressure injury prevention and how it can be used to support implementation of the 2019 International Guidelines.



REFINE PIP SKILLS IN PRESENCE OF VASOPRESSORS

Jill Cox, PhD, RN, APN-c, CWOCN

Moderator: Ann Tescher, APRN, CNS, PhD

1:30 –
2:30 PM

Vasopressors are associated with pressure injury development in the critically ill. This session will address wounds from vasopressor-induced ischemia, their identification and prevention.

1. Describe the frequency of vasopressor associated peripheral ischemia
2. Identify methods to differentiate wounds from vasopressors and pressure
3. Discuss methods to maintain skin integrity in patients on vasopressors

IMPLEMENTING PRESSURE INJURY GUIDELINES IN RESOURCE-POOR POPULATIONS

Kerlyn Carville, PhD, RN

Moderator: Janet Cuddigan, PhD, RN, FAAN

1:30 –
2:30 PM

Implementation of guideline recommendations in resource-poor populations is challenging because resource poverty requires novel solutions to ensure that research results are translated into routine practice and benefit the largest possible number of people. This session will provide both tested and novel ideas for all practitioners working with patients with wounds.

1. Identify novel methods to adapt evidence-based practice to local or personal constraints
2. Examine methods to design the implementation process to account for local or personal constraints.

GET TO THE POINT: WHY WON'T THIS WOUND HEAL?

Lee Ruotsi, MD, ABWMS, CWSP, UHM

Mary Litchford, PhD, RDN, LDN

Ginger Capasso, PhD, ANP-BC, ACNS-BC, CWS RN

1:30 - 3:30
PM

The US alone spent 26.8 Billion dollars last year treating pressure injury, yet not all of them heal. Reasons for nonhealing are varied and plans of care must address more than just the wound itself. This session will provide a multidisciplinary team approach to wound healing.

1. Describe the importance of reducing pressure on the pressure injury.
2. Identify methods to increase intake of protein and calories in patients with pressure injury.
3. Discuss the benefit to debridement and topical wound care to reduce risk for infection and stalled healing.
4. Explain reasons for nonadherence with treatment plans and approaches to improving congruence between the health care team and patient.

THE FINE EDGE OF PEDIATRIC PI AT END OF LIFE

Ann Marie Nie, MSN, FNP-BC, CWOCN

Moderator: Barbara Delmore, PhD, RN, CWCN, MAPWCA, IIMCC-NYU

2:30 -
3:30 PM

While few children die, those who do die can develop pressure injury near the end of life. This session will address the risk factors, prevention, and treatment of pressure injury in terminally ill children.

1. Compare and contrast risk factors for pressure injury development in terminally ill children to those in adults.
2. Identify prevention techniques for terminally ill children at risk for pressure injury.
3. Describe techniques to treat pressure injury in terminally ill children.

SHARPEN THE FOCUS OF DTI TIMELINE

Joyce Black, PhD, RN

Chris Berke, APRN-NP

Moderator: David Brienza, PhD

2:30 -
3:30 PM

Deep tissue pressure injury was first described in 2005 and yet remains poorly understood. This session will present an analysis of the natural history of deep tissue pressure injury.

1. Identify the etiology of deep tissue pressure injury as cellular distortion.
2. Discuss natural history of deep tissue pressure injury including evolution over time.
3. Describe the efficacy of treatment for deep tissue pressure injury.

3:30 -
4:30 PM

POSTER SESSION AND NETWORKING IN EXHIBIT HALL

PRONETECT PROJECT

Dimitri Beeckman, BSc, MSc, PGDip (Ed), PhD

Anika Fourie, RN, MSc, PhD candidate

Moderator: Bill Padula, PhD, MS

4:30 -
5:30 PM

The use of the prone position for critically ill patients with acute respiratory distress syndrome is associated with a high rate of pressure injury. This session will address the current work being done to have a greater understanding of methods to reduce pressure injury risk.

1. Discuss the techniques used to analyze the gaps in information about proning and pressure injury risk
2. Describe the unique risk factors for the development of pressure injury while in the prone position
3. Identify planned processes to fill the gaps in knowledge and a summary of clinical guidance to safely manage the critically ill patient in the prone position



ORAL POSTER PRESENTATIONS AND AWARDS

Amit Gefen, PhD

Robin Gasparini, DNP, APRN, ACNS-BC

Alaina Tellson, PhD, RN, NPD-BC, NE-BC

Kath Bogie

4:30 -

Moderator: Barbara Delmore, PhD, RN, CWCN, MAPWCA, IIMCC-NYU

5:30 PM

Watch the top four selected abstracts be presented orally. These posters were chosen through a blind review and received the highest scores with the least variance by 2 abstract evaluators.

After the oral poster presentations - join us to see your peers win awards in the following categories: Student, Young Investigator, Best Overall Contribution to the Field of Pressure Injury Prevention and Treatment, and the Charlie Lachenbruch Award. These awards are voted on by a NPIAP Research Committee sub-committee who reviews all posters (not blind) prior to the start of the conference.

4:30 -

NPIAP BOARD MEMBER NEW RESEARCH PRESENTATIONS

5:30 PM

HAPI HOUR

5:30 PM -

Meet the NPIAP Panel Members, Speakers, and the oral poster presenter award winners at this virtual

6:30

networking event. Video chat in groups of 6 people and change tables by the click of your mouse! Reconnect with all of your colleagues from past conferences.

SHARPEN YOUR UNDERSTANDING OF COVID-19 SKIN AND WOUNDS

Joyce Black, PhD, RN

Ginger Capasso, PhD, ANP-BC, ACNS-BC, CWS RN

Danielle Kroshinsky, MD, MPH

Moderator: Jill Cox, PhD, RN, APN-c, CWOCN

10:00-
11:00 AM

COVID-19 is linked to the development of unique skin wounds, sometimes called “COVID toes” and “purpuric lesions”. The critical illness of the patient is also associated with pressure injury. This session will review the pathophysiologic links between the virus and the skin, the multiple presentations in the skin and soft tissue and one hospital system’s approach to reducing risk.

1. Describe the pathogenesis of COVID-19 and clotting.
2. Identify the multiple presentations seen in the skin of COVID-19.
3. Examine methods used to successfully prevent pressure injury in the critically ill patient with COVID-19.

BIOFILM AND BEYOND: WOUND INFECTION (IWII)

Greg Schultz, PhD

Trish Idensohn, MSc, IWCC, PGPN, RN, RM

Moderator: Aimee Garcia, MD, CWS, FACCWS

11:00 AM -
12:00 PM

Bacterial biofilm deters wound healing. However, it is not easy to detect and often only assumed to be present. Treatments to retard biofilms are important aspects of pressure injury healing. This presentation will provide the latest information on biofilms, detecting them, retarding their growth and their link to wound infections. Information from the International Wound Infection Institute’s work will be included.

1. Describe the usual biofilms in pressure injury and their presentation
2. Identify methods to retard the growth of biofilm in pressure injury
3. Discuss the link between biofilm and frank wound infection.

12:00 -
1:00 PM

POSTER SESSION AND NETWORKING IN EXHIBIT HALL

12:10 -
1:00 PM

MOLNLYCKE SYMPOSIUM

ON THE EDGE: WHY WON'T MY PATIENT EAT?

Nancy Munoz, DCN, MHA, RDN, FAND

Liz Friedrich, MPH, RD, CSG, LDN, FAND, NWCC

Moderator: Sharon Sonenblum, PhD

1:00 - 2:00
PM

Nutritional goals for patients with pressure injury include optimizing nutrient and protein intake. However, malnutrition remains a common problem in patients with nonhealing pressure injury. This session will address practical tips to improve intake, monitor progress and

1. Identify common reasons for poor oral intake in elders
2. Describe the important linkages between nonhealing and malnutrition.
3. Discuss practical methods to improve oral intake or nutrients to promote healing.

SHARPEN YOUR PIP SKILLS IN A COVID SURGE

David Marshall, JD, DNP, RN, FAAN, FAONL

David Mastrianni, MD

Moderators: Bill Padula, PhD, MS

Lee Ruotsi, MD, ABWMS, CWSP, UHM

1:00 - 2:00
PM

During hospital surges for COVID, pressure injury rates rose in part due to the serious illness and in part due to other factors. Join these hospital administrators for an inside look at how they guided their staff to manage competing priorities.

1. Identify methods to maintain gains in hospital pressure injury rates during competing issues
2. Examine a future for acute care hospitals with future public health issues

WOUND HYGIENE: CLEAN IT LIKE YOU MEAN IT!

Dot Weir, RN, RN, CWON, CWS

Moderator: Ann Marie Nie, MSN, FNP-BC, CWOCN

1:00 - 2:00
PM

Still using respiratory twist-off vials to irrigate pressure injuries? It is time to "clean it like you mean it"! This session will address the value of providing thorough wound cleansing.

1. Explain the efficacy of thorough wound hygiene that can be safely undertaken by both specialist and generalist healthcare practitioners in any setting
2. Describe the components of wound hygiene that include cleansing of the wound and periwound, wound debridement, refashioning of the wound edges and application of an antimicrobial dressing.
3. Identify methods needed to change the culture of current wound cleansing.

2:00 -
3:00 PM

POSTER SESSION AND NETWORKING IN EXHIBIT HALL

INVESTIGATIVE RESEARCH: PRESSURE INJURY PREVENTION

Joyce Pittman, PhD, RN, ANP-BC, FNP-BC, CWOCN, FAAN

Moderator: Barbara Delmore, PhD, RN, CWCN, MAPWCA, IIMCC-NYU

3:00 -
4:00 PM

Why are our prevention initiatives often not sustained? This session will provide and standardized approach and evidence-based gap analysis methodology to identify priorities and gaps in pressure injury care across an organization.

1. Explain challenges in sustaining pressure injury prevention improvement.
2. Discuss gap analysis methodology.
3. Identify the gap between best practice, actual care and priorities.

IMPROVE YOUR COMPETITIVE EDGE: IT'S ALL ABOUT THE NUMBERS

Janet Cuddigan, RN, PhD, RN, FAAN

Jill Cox, PhD, RN, APN-c, CWOCN

Moderator: Dave Brienza, PhD

3:00 -
4:00 PM

When trying to improve outcomes, reliable and valid data must be used. Prevalence and incidence studies are the cornerstone of quality improvement, yet they are often not done consistently. This session will describe methods to conduct studies in all settings, both with in person assessments and using electronic data.

1. Describe the significance of reliable and valid data in any quality improvement program
2. Explain methods to assure the processes of studying pressure injury outcomes over time
3. Discuss the use of outcome data to benchmark progress internally and externally

SHARPEN YOUR UNDERSTANDING OF THE SURGICAL RECONSTRUCTION FOR COMPLEX PRESSURE INJURY

Aamir Siddiqui, MD

Moderator: Ginger Capasso, PhD, ANP-BC, ACNS-BC, CWS RN

3:00 -
4:00 PM

When full-thickness pressure injuries heal secondarily, the resultant scar is intolerant of pressure and shear. Surgical reconstruction replaces missing tissue, but flaps can fail, leading to more significant wounds. This session will address the process of selecting candidates for surgery, preparing patients for surgery and the needed care following the operation.

1. Describe the benefits and risk of surgical reconstruction of pressure injuries
2. Discuss the process of selecting and preparing patients for surgery
3. Identify care following surgery to maintain the viability of the flap

PRESSURE INJURY PREVENTION: USING TECHNOLOGY TO ADDRESS AN ARCHAIC PROBLEM

Tracey Yap, PhD, RN, WCC, CNE, FGSA, FAAN

Bill Padula, PhD, MS

Moderator: Yi-Ting Tzen, PhD, PT

4:00 -
5:00 PM

Repositioning patients has been a part of practice for decades, yet little is known about how effective the practice is for prevention of pressure injury. This program will present clinical trial results on pressure injury prevention using technology in a long-term care settings.

1. Review the history of using repositioning to offload tissue for pressure injury prevention
2. Describe the outcome of a research study that used technological to cue care delivery for care providers in long term care with intervals of 2,3 &4-hours.
3. Discuss the economic impact of pressure injury prevention in long-term care

WHEN PRESSURE INJURIES GO TO COURT

Kathryn Cheadle, JD

William A. Dean, JD

Moderator: Joyce Black, PhD, RN

4:00 -
5:00 PM

More than 17,000 lawsuits are related to pressure injuries annually. It is the second most common claim after wrongful death and greater than claims for falls. This session will explore legal claims from the plaintiff and defense view.

1. Describe the process attorneys use to evaluate if a pressure injury should proceed to a malpractice claim.
2. Examine the common pitfalls in documentation used by plaintiff attorneys to bolster claims.
3. Examine the common approaches used by defense attorneys to provide explanations for pressure injury development.

SHARPEN YOUR SKILLS TO MANAGE A NONHEALING WOUND

Diane Langemo, PhD, RN, FAAN

Aimee Garcia, MD, CWS, FACCWS

Moderator: Nancy Munoz, DCN, MHA, RDN, FAND

4:00 -
5:00 PM

Our goal is for the patient to die with the wound, not from the wound. But keeping a wound from becoming infected or deteriorating is not easy. This session will explore methods to manage wounds with little to no likelihood of healing.

1. Identify the importance of developing reasonable goals for pressure ulcer that cannot heal.
2. Describe methods of controlling the problematic symptoms in a nonhealing pressure injury.
3. Discuss how the practice pearls in caring for other nonhealing wounds can be applied to pressure injury.