

# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Selected best practices and suggestions for improvement for clinicians

## Hospital-Acquired Complication **1**

# PRESSURE INJURY

HOSPITAL-ACQUIRED COMPLICATION	RATE <sup>a</sup>
1 Pressure injury	10
2 Falls resulting in fracture or intracranial injury	4
3 Healthcare-associated infections	135
4 Surgical complications requiring unplanned return to theatre	20
5 Unplanned intensive care unit admission	na <sup>b</sup>
6 Respiratory complications	24
7 Venous thromboembolism	8
8 Renal Failure	2
9 Gastrointestinal bleeding	14
10 Medication complications	30
11 Delirium	51
12 Persistent incontinence	8
13 Malnutrition	12
14 Cardiac complications	69
15 Third and fourth degree perineal laceration during delivery (per 10,000 vaginal births)	358
16 Neonatal birth trauma (per 10,000 births)	49

a per 10,000 hospitalisations except where indicated

b na = national data not available

A pressure injury is a localised injury to the skin and/or underlying tissue, usually over a bony prominence, as a result of pressure, or pressure in combination with shear and/or friction. This hospital-acquired complication (HAC) includes the diagnoses\* of:

- Stage III ulcer
- Stage IV ulcer
- Unspecified decubitus ulcer and pressure area.



Pressure injuries take a long time to heal, which has consequences for patients' quality of life, as such injuries can cause severe pain, and can involve sleep and mood disturbance as well as susceptibility to infection. They also adversely affect rehabilitation, mobility and long-term quality of life.

## Why focus on pressure injuries?



**Around 4,300**  
**hospital-acquired pressure**  
**injuries** occur each year in  
Australian hospitals<sup>#</sup>



Patients with  
this HAC require **23.9 extra**  
**days** in hospital compared to  
those who don't



Each episode of care  
for this HAC could cost the  
hospital an **additional \$49,569**

**28.9**

Highest rate of this HAC at  
Principal Referral Hospitals<sup>†</sup>



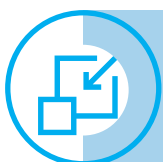
**9.8**

Aggregate rate of this HAC at  
Principal Referral Hospitals

Per 10,000 hospitalisations



If all hospitals reduced their rate  
of this HAC to less than 9.8 per 10,000  
hospitalisations it would prevent at least  
**727 pressure injuries**



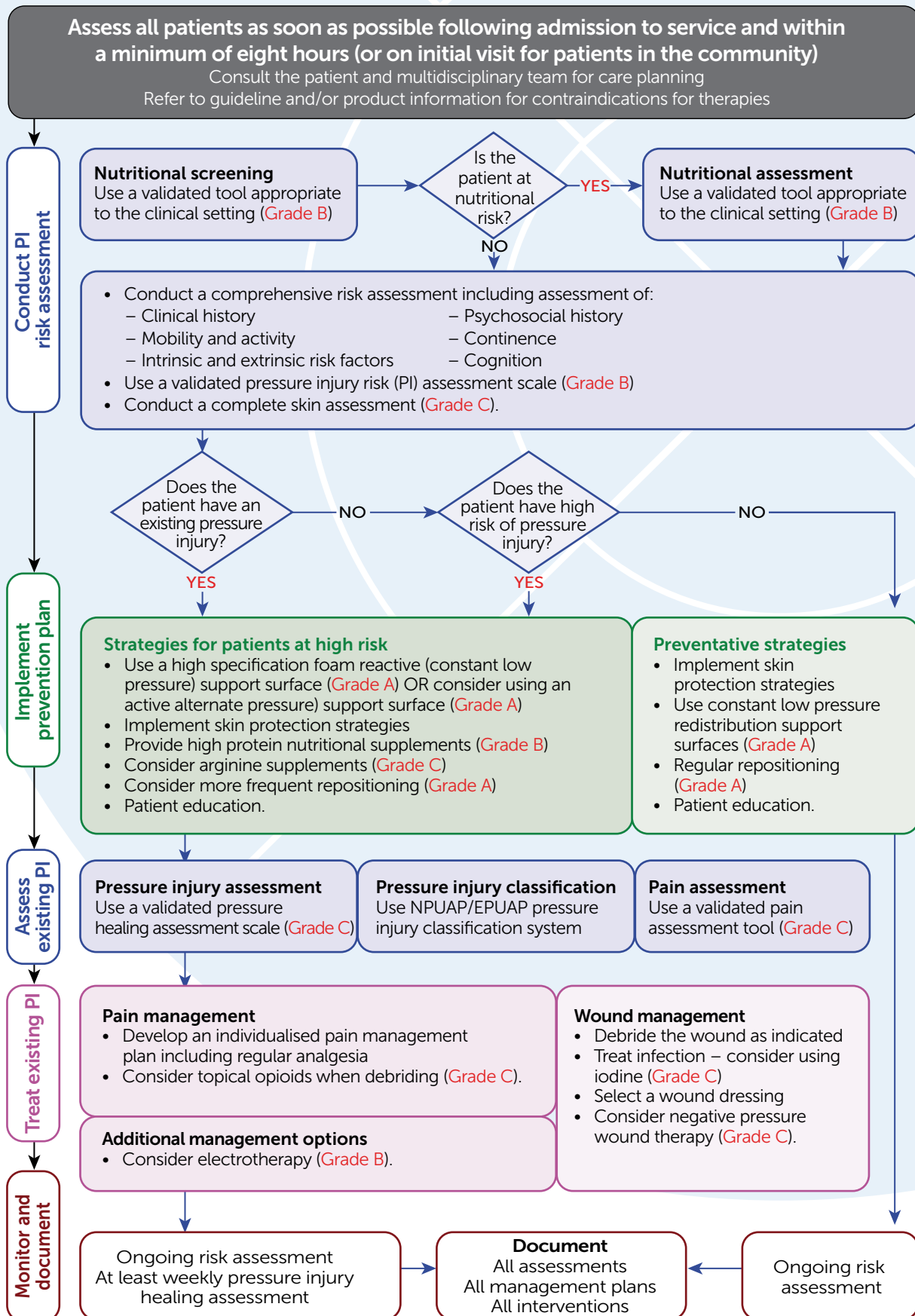
**All facilities should be working to reduce their rates of pressure injuries.**

\* The specifications for the hospital-acquired complications list providing the codes, inclusions and exclusions required to calculate rates is available on the Commission's website: [www.safetyandquality.gov.au/our-work/indicators/hospital-acquired-complications/](http://www.safetyandquality.gov.au/our-work/indicators/hospital-acquired-complications/)

<sup>#</sup> The data used in this sheet are for hospital-acquired complications recorded during overnight acute episodes of care (excluding same day admissions) in Australian public hospitals in 2015–16. Sourced from: Independent Hospital Pricing Authority (IHPA). Activity Based Funding Admitted Patient Care 2015–16.

<sup>†</sup> Hospitals were classified in the Principal Referral Hospitals peer group for these purposes according to the Australian Institute of Health and Welfare's former definition of major city hospitals with more than 20,000 acute weighted separations and regional hospitals with more than 16,000 acute weighted separations.

# Prevention and management of pressure injury



Recommendation grades: Evidence based recommendations

**Grade A** = Excellent evidence - body of evidence can be trusted to guide practice

**Grade B** = Good evidence - body of evidence can be trusted to guide practice in most situations

**Grade C** = Some evidence - body of evidence provides some support for recommendation(s) but care should be taken in its application

**Grade D** = Weak evidence - body of evidence is weak and recommendation must be applied with caution

Source: Reproduced with the permission of the Australian Wound Management Association from the Pan Pacific Clinical Practice Guideline for the Prevention and Management of Pressure Injury (2012). Available from: [http://www.woundsaustralia.com.au/publications/2012\\_AWMA\\_Pan\\_Pacific\\_Guidelines.pdf](http://www.woundsaustralia.com.au/publications/2012_AWMA_Pan_Pacific_Guidelines.pdf)