

CLINICAL CASE

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Reducing pressure ulcer incidents and saving money in staff maintenance time, by using Vicair cushions

The Problem

In the sub-acute setting, inappropriate seating is the cause of many problems that ultimately result in poor quality of life as well as associated medical issues and misfortunes for the patient. In our facility 9% of the residents experienced pressure

injury incidences. Additionally, staff spends time maintaining and checking products daily. Resulting in a significant amount of time is being spend on maintenance on a weekly basis, taking time away that could be spent on patient care.



\$ 43.180

Average cost to treat a pressure injury

(Armstrong et al, 2008)



9% Residents
with pressure
injury incidence



5 Hours
Spent maintaining and
checking products

The Solution

We introduced the Vicair products to a group of residents as the standard offering in an attempt to save money in staff maintenance time, reduce pressure ulcer incidence, and ultimately build our facilities reputation as a quality facility when it comes to patient care. At first, this seemed to be a risky proposition as I

was making an investment of almost \$300 per patient for a total yearly investment of \$30,000. I felt confident from my previous experience with Vicair that the outcome of the trial would be positive, but I couldn't be 100% sure until the results were in.

The Outcome

I noticed that the Vicair cushions last much longer, saving me time and budget.

"Residents who had developed a pressure spot on their regular cushion, quickly healed up once they were changed to a Vicair"

Once I introduced the Vicair cushions to the nursing staff, they could quickly see the comfort, pressure relieving ability, and versatility of the cushion. The nurse unit manager was noticing that the residents who had developed a pressure injury on their regular cushion, quickly healed up once they were switched to a Vicair.

effective the cushions are in the healing process. The percentage of residents with pressure injury incidences decreased from the initial 9% to 1%. In every case, the patient loved the comfort of the cushion and the therapist love the ability to individually customize the cushions to the patient.

The switch to Vicair cushions helped our bottom line. Even though there was an initial investment, the nursing hourly rate, medication cost, and treatment supply cost all went down due to fewer pressure injuries. Also the fewer injuries there are to treat, the more time the nursing staff can spend on patient care.



1%

Residents with pressure
injury incidence

"It became obvious very quickly that the Vicair cushions remarkably increased the healing time"

10 Minutes
Spent checking
Vicair® cushions



**Increased
Patient Care**

All administrators know how much time, effort, and cost just one acquired pressure injury adds to the care of a patient. Not to mention the costs an acquired pressure injury causes in terms of time and effort when it has to be reported to ACHA, put on to a IDT Care Plan and IDT Risk Management report, and wound rounds.

At that point we started an informal observatory study of pressure sores with and without a Vicair cushion. It became obvious very quickly that the Vicair cushions remarkably increased the healing. At that point we put all patients with pressure areas on a Vicair, we did not need to see more to realize how much more



Decreased Cost

Lower hourly nursing rate, medications
cost, and treatment supplies

The Conclusion

Never in my 30+ years of experience have I seen the difference that one type of cushion can make on so many aspects of the patient and staff wellbeing. I cannot recommend Vicair cushions and all of their products highly enough. They are a company that I am grateful to depend on for the needs of my patients. I have personally experienced their commitment to the wellbeing of

the patient beyond just making a sale. They make my patients happy and when the patient is happy, everyone is happy.

"I cannot recommend Vicair cushions and all of their products highly enough"

- Darrin Brooks, MS, Director of Rehabilitation