A HOLISTIC APPROACH TO PRESSURE ULCER PREVENTION

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Introduction

Preventing pressure ulcers occurring within NHS care is an ongoing target. In addition to this, Lord Carter of Coles’ report** requires organisations to revisit and review the processes of care delivery, acknowledging the need to do more with less money, fewer staff and reduced physical resources. It was first put forward in Five Year Forward View (NHSEngland et al, 2014) that high-quality care is intimately related to the better use of resources (including staff and equipment), resulting in a better patient experience and ultimately better outcomes.

South Tees Hospitals NHS Foundation Trust is the largest hospital trust in the Tees Valley, with two acute hospitals and services in a number of community hospitals. Reviewing the approach to PU prevention, particularly with consideration to strategic imperatives, the Trust adopted a holistic approach to pressure ulcer prevention, developing and implementing a new pressure care protocol supported by a comprehensive education campaign and the installation of innovative, clinically proven pressure care equipment.

Method

A new protocol was developed and implemented, the A.S.K.I.N bundle. The simultaneous consideration of the component parts of A.S.K.I.N ensured a shift away from a less comprehensive and systematic approach to an holistic approach designed to improve patient outcomes and ensure best use of the key resource of nursing time.

ASSess RISK & SKIN

PRESsure ULcer PREVENTION

Using a Holistic Approach

Support surface (standardised the process to have the MA hybrid mattress across all patient areas).

Keep moving.

Incontinence / moisture.

Nutrition / hydration.

A new hybrid mattress (Dyna-Form® Mercury Advance, Direct Healthcare Services) was introduced on the wards alongside targeted education, including flashcard training on the A.S.K.I.N bundle (See figure 1) and mattress management. Leaflets and posters were produced for patients in order to develop their understanding and awareness of their role in pressure ulcer prevention effective pressure redistribution.

Results

In the 10 months following the introduction of hybrid mattresses, there was a 29.77% reduction in the rate of pressure ulcer occurrence; a drop from 86.69 pressure ulcers per month to 60.88 per month (See figure 3).

There was a particularly marked reduction in the occurrence of category 1 and 2 pressure ulcers. Tissue Viability nurses observed that there was a significant reduction in category 2 ulcers. The 29.77% reduction in avoidable pressure ulcers equates to a 27% reduction in pressure ulcer incidence (See figure 3). Put into the context of patient numbers, before implementation for every 10,000 patients admitted 119 would develop a pressure ulcer; after implementation, this number dropped to 86. This change is not only significant but, as can be seen from the data, has been sustained.

Alongside the main patient benefits – reduction in pressure ulcers equates to a 27% reduction in pressure ulcer incidence (See figure 3) – there was a particularly marked reduction in the occurrence of category 1 and 2 pressure ulcers. Tissue Viability nurses observed that there was a significant reduction in category 2 ulcers. The 29.77% reduction in avoidable pressure ulcers equates to a 27% reduction in pressure ulcer incidence (See figure 3). Put into the context of patient numbers, before implementation for every 10,000 patients admitted 119 would develop a pressure ulcer; after implementation, this number dropped to 86. This change is not only significant but, as can be seen from the data, has been sustained.

Discussion

To achieve the aims and objectives clearly laid out at both a strategic and Trust level, it is necessary to adopt a holistic approach to both reviewing and improving pressure care delivery. South Tees NHS Foundation Trust has demonstrated that it is possible to achieve a significant measurable difference in pressure ulcer targets with an approach that comprises the adoption of innovation alongside raising awareness and education in both staff and patient groups.

Conclusion

Alongside the main patient benefits – reduction in pressure ulcers with the associated reduction in pain, distress and impact on length of stay and quality of life – the implementation of a consistent and holistic pressure care protocol resulted in clear benefits for staff as increased time could be spent providing high quality care.

References

*NHSEngland (Department of Health, 2014)
**Operational productivity and performance in English NHS acute hospital (wave four evaluations) (Carter, 2015)