Title:" Striving for Perfect Care – Preventing skin breakdown in the community setting in the UK"

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Introduction:

"Mersey Care NHS Foundation Trust serves 11m people across 85 different clinical care sites in the North West of the UK. A key Trust goal is the continual improvement (CI) in quality of care under the theme of Striving for Perfect Care.

Two District Nurse (DN) bases identified a CI project to reduce skin breakdown in palliative care patients. Pressure Ulcers (PU) are a pernicious clinical issue: NHSi report that >1700 patients develop a PU per month: costing the NHS more than £3.8m per day.[1] Palliative care patients pose unique challenges in PU prevention as their care priorities are often focused on quality of life issues."

What did you do and how did you do it? Which actions and steps did you take?:

"Following the Plan; Do; Study; Act (PDSA) principles of Quality Improvement[2], a project was developed. It enabled the DN bases to evaluate the impact of including a hand held wireless device which gives objective, anatomically specific data highlighting increased risk of developing a PU, facilitating more informed clinical decision making. To enable the latter an Algorithm was developed to support clinicians with PU prevention strategies.

The 2 DN bases followed the PDSA process:

- 11-week project
- Data collection:
    - PU incidence rates – pre and during the project
    - Daily Heel and Sacral SEM delta readings
    - Analysis on impact on clinical decision making
    - Analysis on impact of choice of therapeutic equipment intervention"

What were the results? Which improvements did you see?:

- " Pre project PU Incidence rate 16%
- During project PU incidence rate 11.8%
- PU incidence reduction 26.9%
    - 17 patients
    - 58% SEM delta readings $\geq$0.6 – indicating increased risk for PU; 55% of which had no visible redness
    - 82% DN's stated that the SEM delta readings changed their clinical decision making
    - 94% cases additional prevention interventions were initiated such as heel gel pads"

Discussion and further steps: "This project has enabled the DN bases to reevaluate their approach to PU prevention in palliative care patients. Whilst recognising the challenges in this difficult group of patients the team believe that with the addition of the innovative technology providing additional, objective risk data; clinical decision making can be altered in order to achieve specific care objectives"

Clinical relevance: "Achieving PU Incidence reduction in such a challenging group of patients is an important quality achievement. However, the impact on the patient and their families in terms of reduction in pain and distress by avoidance of a PU at a difficult period of their lives should be considered a real success. "

References: "

1. NHS Improvement. Pressure Ulcer revised definition and measurement. Summary and Recommendations. June 2018.
2. Quality, Service Improvement and Redesign Tools: Plan, Do, Study, Act (PDSA) cycles and the model for improvement. ACT Academy for their Quality, Service Improvement and Redesign suite of programmes. Accessed March 2019."