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Ascertaining pressure ulcer prevention practices in residential care homes

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Background

• There is a lack of information in residential care home settings in Sunderland on:
  – Pressure ulcer identification practices
  – Staff training
  – Tools used in practice

• Stakeholders across the City of Sunderland came together to address this issue to improve care through the PROACT project
Aim of study

• To engage with Managers of care homes to current practices, perceived confidence levels, tools used and knowledge gaps to establish a baseline for the PROACT project
Methods

• The rationale for PROACT was presented and discussed with care home managers prior to data collection to:
  – raise awareness / ensure buy-in for the project
  – Identify any issues/objections and address at outset

• The link to the anonymous, on-line survey was emailed to all Managers of residential care homes (n=48) in June 2017
  – Reminders were given via emails and face to face reminders
Methods

• Data collected between June – December 2017
• 47 residential care home Managers were approached
Results

• The survey elicited an 81% response rate (n=38)
• 37% (n=14) had worked as a Manager for >12 yrs
• 68% (n=32) stated their staff perceived prevention of pressure ulcers as an important aspect of care
Results

• 50% (n=19) stated their staff were confident in identifying signs and symptoms of pressure ulcers in residents
• Nearly half (n=15) reported time as the biggest constraint to staff engagement with training
• Half (n=19) of the homes used the Waterlow tool
Results

• 73% (n=27) stated that group education sessions and staff meetings were used to raise awareness of the need to identify signs and symptoms of pressure ulcers

• 75% (n=28) reported between 1-5 new admissions with pressure ulcer symptomology in the last 12 months
Discussion

• Findings show gaps in:
  – staff knowledge
  – training practice and provision
  – Variance in identification tools across the residential care homes in the City
Recommendations

• Need for standardised pressure ulcer tools to be implemented in residential care homes
• Address mechanisms of addressing resource and pragmatic issues with staff engagement with training
Thank you