

The Hospice UK audit will be repeated in Spring 2018 in order to monitor progress.

P-157 IMPROVING THE PATIENT EXPERIENCE OF WOUND/PRESSURE ULCER CARE IN A HOSPICE SETTING

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Background Holistic patient-centred care is an essential part of palliative care, and wound and pressure ulcer management is no exception. Previously, patients were kept waiting for a competent nurse to assess and treat their wound/pressure ulcer. This practice resulted in delayed healing and exacerbation of disease symptoms. Relatives' visits were interrupted, which reduced the valuable time spent with loved ones. Nurses lacked knowledge and confidence to assess and treat complex wounds/pressure ulcers, and felt that their practice was not evidence based and current.

Aim To improve the patient and relative experience, by introducing a training programme which would ensure that all staff were competent and confident to implement evidence based and current best practice.

Methods We reviewed the old system of provision of wound/pressure ulcer prevention and management, and discussed how it could be improved. We designed a new strategy of wound/pressure ulcer provision, which included an education and ward-based training programme for all staff, which we felt would resolve those issues which staff felt did not facilitate the best patient and relative experience. The programme consisted of a full day mandatory training educational day for all registered nurses and healthcare assistants, mandatory ward based competencies, and annual updates. The results of this strategy have been evaluated through a research study which has formed the dissertation of one of the authors MSc in wound healing and tissue repair.

Results

- Staff of all grades are now able to provide a gold standard wound/pressure ulcer service
- Patient experience has improved
- Relatives' experience has improved
- Documentation has improved
- Efficiency on the ward has improved.

Conclusions We believe that the implementation of this new strategy has improved the patient and relative experience, and improved service provision. We also believe that this strategy could be tested and duplicated in other settings.

P-158 COLLABORATIVE WORKING WITH HEALTH AND SOCIAL CARE AGENCIES TO REDUCE AVOIDABLE PRESSURE ULCERS

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Background Patients being cared for palliatively are at increased risk of developing pressure ulcers due to multiple intrinsic and extrinsic risk factors, therefore a robust process for preventing pressure ulcers is a crucial aspect of providing safe patient care to this patient group.

Aim To work collaboratively with local partners in health and social care and commissioners to increase the profile of pressure ulcer prevention to health and social care staff, patients, carers and the general public.

Method A strategic group including Clinical Leaders and Tissue Viability Nurses from each sector met monthly to discuss how to empower health and social care staff, patients, carers and the general public to reduce the risk of pressure ulcer development. This resulted in the development and implementation of the following;

The development of a standardised education package regarding identifying, preventing and treating pressure ulcers which was delivered to social and healthcare staff throughout Leicestershire. This package was supplied to all local nursing agencies and delivered face to face to the agency used by the Unit.

Monthly figures for each organisation were shared at each meeting and geographical areas of concern noted, with action plans made to address these.

A leaflet was developed to alert patients and carers to early signs of pressure damage to encourage them to seek help. This was used to educate patients and carers throughout the organisations.

Results Positive working relationships have been developed between the sectors. This has enhanced care for patients as they now receive more consistent care between the settings as the staff are receiving the same training and share appropriate information. For LOROS the incidence of hospice acquired pressure ulcers has reduced by 19% in comparison with the last financial year and sharing good practice has facilitated the development of robust assessment, implementation and documentation of pressure ulcer prevention, identification and treatment strategies.

P-159 USING APPRECIATIVE INQUIRY TO EXPLORE AND FACILITATE CONVERSATIONS OF ACQUIRED GRADE 2 PRESSURE ULCERS

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Background Appreciative Inquiry (AI) is a way of looking at organisational change which focuses on identifying and doing more of what is already working, rather than looking for problems and trying to fix them. AI may be used to facilitate workforce engagement, and promote organisational learning and positive organisational change in the health care context (Trajkovski et al., 2013). Pressure ulcers were seen as a way of exploring the use of AI and its potential impact in culture change.

Aims

- To provide a safe space and facilitate engagement with teams when exploring case studies
- To explore learning from the case studies and how this was being shared/disseminated
- To develop a culture of honesty, openness and trust ensuring Duty of Candour.

Methods Grade 2 pressure ulcers were flagged on our reporting systems and the Director of Nursing was notified. The team was then extended an invitation to present this case study to the Director and her team to explore this scenario and any learning that has come from it.