

SPSP Acute Adult Programme

Pressure Ulcer

Change Package

2023

Pressure Ulcer Driver Diagram 2023



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What are we trying to achieve...

We need to ensure...

Which requires...

**Reduce the number of
acquired pressure ulcers
developed in
[add *care setting*]**

*By [locally agreed aim]
By [locally agreed date]*

Pressure ulcers graded ≥ 2 ,
including: combination
lesions, device related,
mucosal
suspected deep tissue injury,
and ungradable

****Essentials of Safe Care***

Prevention and identification
of pressure damage

Person centred, evidence
based care

Multidisciplinary Team
communication*

Leadership to support a
culture of safety at all levels*

Evidence based risk assessment

Person, family, and carer involvement* in prevention

Accurate pressure ulcer grading

Shared decision making

Person centred care planning*

Multidisciplinary evidence-based interventions

Timely review

Equitable access to clearly defined care pathways

Transitions in care setting

Use of standardised communication tools*

Management of communication in different situations*

Workforce with skills in prevention and management of pressure
ulcers

Staff wellbeing and psychological safety*

Safe Staffing*

System for learning*

Primary Driver:

Prevention and identification of pressure damage



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Secondary Driver	Change ideas			
Evidence based risk assessment	Completion of pressure ulcer risk assessment	Locally agreed time frames for initial and repeat risk assessments to identify pressure damage	Standardised process for accessing pressure redistributing equipment	Timely detailed skin inspection to identify any areas of pressure damage
Person, family, and carer involvement in prevention	Provision of person centred visiting as an opportunity to discuss concerns	Local process to engage person, family and carers in prevention of pressure ulcers	Promotion of public information on pressure ulcer prevention available in accessible formats	Process to identify and mitigate barriers to following pressure ulcer prevention guidance
Accurate pressure ulcer grading	Implementation of Nationally agreed pressure ulcer grading tool	Evidence of locally agreed documentation within person's care record	Provision of evidence-based pressure ulcer grading of all skin tones	

Primary Driver:

Person centred, evidence based care



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Secondary Driver	Change ideas			
Shared decision making	What matters to you conversations to inform decision making	Use of realistic medicine approach to inform decision making	Provision of accessible treatment information to facilitate shared decision making	Non-concordance documented in line with locally defined process
Person centred care planning	Evidence of person centred care planning / Individualised care agreement	Collaborative care planning involving person, family and carer	Testing of tools to communicate person's physical and cognitive ability	Locally agreed use of what matters to you conversations
Multidisciplinary evidence-based interventions	Use of evidence-based interventions	Delivery of evidence-based wound management	Appropriate and timely use of pressure redistributing equipment	Locally defined criteria & process for pressure ulcer photography to inform wound management
Timely review	Timely reassessment of skin	Regular collaborative review of person centred care plan	Standardised care rounding process	
Equitable access to clearly defined care pathways	Locally defined criteria & process for specialist review and intervention	Standardised process for accessing pressure redistributing equipment	Locally agreed process to include skin assessment in handover between care settings	Clear process for people, families, and carers to access healthcare for PU related concerns

Primary Driver:

Multidisciplinary team communication



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Secondary Driver	Change ideas			
Transitions in care	Locally agreed process to include skin assessment in handover between care settings	Process to include pressure ulcer information in immediate discharge letter	Reliable process for timely access to pressure redistributing equipment in new care setting	Locally agreed process to involve carers in planning for transitions in care
Use of standardised communication tools	Use of locally agreed communication tools such as SBAR	Evidence of locally agreed pressure ulcer documentation		
Management of communication in different situations	Locally agreed process to identify people with a pressure ulcer + NEWS2≥ at organisational huddles	Identification of people at risk of, or currently with pressure ulcers at team safety briefs / hand overs	Use of structured multidisciplinary meetings which include skin related concerns	Locally agreed process for sharing information between services

Primary Driver:

Leadership to support a culture of safety at all levels



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Secondary Driver

Change ideas

Workforce with skills in prevention and management of pressure ulcers

Completion of mandatory role specific staff education

Locally defined process to develop staff knowledge and areas of competence

Access to local expertise to support workforce development

Staff wellbeing and psychological safety

Mechanisms for staff to discuss safe delivery of care

Celebrate success in pressure ulcer improvement work

Process to access senior support and discussion

Safe Staffing

Mechanism for effective rostering

Process for mitigation of staffing shortfalls

Process to escalate staffing shortfalls which impact on safe delivery of care

System for learning

Process for people, families and carers to raise safety issues

Local and organisational level reporting for learning

Standardised PU investigation tool & process to share learning

Accessing shared learning through formal and informal networks

Contact details



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