

Pressure Ulcer Networking day*

Tuesday 07 November 2017

Jo Matthews, Head of Improvement and Safety, Healthcare Improvement Scotland, got the day started with a reminder to delegates that reducing pressure ulcers continues to be at the heart of improvement work across all areas. Jo highlighted the work of Healthcare Improvement Scotland's Improvement Hub (ihub) in supporting health and social care services to **redesign** and **continuously improve**.



Leanne Connell, Practice Development Nurse, Community, NHS Greater Glasgow and Clyde, spoke about the work in **community nursing** to understand the incidence of acquired pressure ulcers and how to improve training in grading pressure ulcers.

The world café split delegates into smaller groups to discuss:

- **Data** – What are your successes and challenges in using Pressure Ulcer incidence/rate and process data to support your improvement?
- **Care processes** – What is your process for risk assessment and care planning? What has helped connect these?
- **Learning** – What is your experience of learning from Pressure Ulcer incidents? What has helped drive improvement?
- **Innovation** – What changes have you made to your system that have helped? For examples, education, equipment, peer review.



Heather Hodgson, Lead Nurse Tissue Viability, NHS Greater Glasgow and Clyde delivered a session on tissue viability education, which looked at [pressure ulcer](#) and [moisture lesion](#) diagnosis and grading.

Ruth Ropper, Lead Nurse Tissue Viability, NHS Lothian shared the story of their data. A breakdown of community data identified that 90% of pressure ulcer incidents were linked to patient deterioration. This has led to focused work on improved recognition and management of deteriorating patients and preventing hospital admissions.



*All presentations are available to view on mobile devices through Twitter #ihubpu2017