

## ACTION PERIOD THREE: September 2017 – February 2018

Pressure Ulcer prevention is everybody's business and the opportunity to develop knowledge and skills extends to all staff and is not limited to staff participating on the collaborative. It is expected that following each learning session, **each** team member will continue to link with a **ward buddy** to share learning and actions. This is particularly important as teams prepare to spread the initiative to other wards. Team members participating in specialist clinics at the learning sessions are expected to share the discussion and learning from their sessions with team members and work colleagues also.

### Action period 3 Activities

#### 1. **Pressure Ulcer Prevention** –webinars and YouTube videos

##### 1.1. **E-integrity: Preventing Pressure Ulcers**

E integrity online course takes 15-20 minutes to complete and covers the key steps in pressure ulcer prevention. No login is required to access the 28 slide programme. Some self-assessment multiple choice questions are threaded throughout the session. The open access (please click this programme) session can be accessed at:

<http://www.e-lfh.org.uk/programmes/preventing-pressure-ulcers/>

##### 1.2. **YouTube video: Introduction to the SSKIN care bundle**

<https://www.youtube.com/watch?v=5OQgegj1Hc8>

##### 1.3. **YouTube video: The five key messages to prevent pressure ulcers**

<https://www.youtube.com/watch?v=Syc-hByVGf0>

#### 2. **Measuring for improvement**

**2.1. Safety Cross** - Continue to record the number of pressure ulcers on the safety cross and the date and grade of ward acquired pressure ulcers on the table.

**Red:** Newly acquired

**Yellow:** External transfer to ward

**Blue:** Internal transfer to ward

**Green:** No pressure ulcer

Return the completed cross monthly (before 10<sup>th</sup> of following month please) to

[pressureulcerstozero@hse.ie](mailto:pressureulcerstozero@hse.ie) up to and including February 2018.

**SPREAD:** Support other units to start and maintain safety crosses. Guidance and answers to frequently asked safety cross questions can be accessed on the PUTZ Webinar Safety Cross available at:

<https://www.youtube.com/watch?v=KTI5a5Dr1M8>

<http://www.hse.ie/eng/about/Who/qualityandpatientsafety/safepatientcare/PressureUlcers/PressureUlcerInformation/>

## 2.2. Visible Safety Cross

Continue to display the safety cross in a general public area on the ward so that it is a visible to staff, patients and members of the general public.

- A visible safety cross will encourage conversations about pressure ulcer prevention
- Perhaps test having your PUTZ team meetings or safety pauses standing around the safety cross

## 2.3. Measuring for Improvement: Creating and interpreting Run Charts

Continue to develop run charts for the family of measures (days since last pressure ulcer / number of ward acquired pressure ulcers / process measures)

- Access the “*Building run charts to understand improvement*” hosted by Dr Michael Carton, Measurement for Improvement Team, Quality Improvement Division.

<http://www.hse.ie/eng/about/Who/QID/nationalsafetyprogrammes/pressureulcerstozero/PUTZ.html>

#### **2.4. Process measure:**

- Measure the reliability of SSKIN bundle processes e.g. Increase allocation of mattresses so that 100% patients on St Mary's ward will be allocated the correct by 31<sup>st</sup> January 2018.

### **3. Use of Improvement Methods**

#### **3.1. Model for Improvement & PDSA Webinar**

Dr John Fitzsimons, Clinical Advisor to the Quality Improvement Division, hosts a Webinar introducing the Model for Improvement and & PDSA testing available at:

**Shortened version:**

<http://bit.ly/2sxaQUj>

or at:

[https://hse-  
ie.webex.com/ec3000/eventcenter/recording/recordAction.do?theAction=poprecord&siteurl=hse-  
ie&entappname=url3000&internalRecordTicket=4832534b00000004514b12d76f99b1abf9c3714ece  
0c19e54ecbdd192274c4779ab2b16f5fe1bce2&renewticket=0&isurlact=true&format=short&rnd=08  
64156885&RCID=30b058c5fd844c2d6b103285282e86ce&rID=58650792&needFilter=false&recordID  
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ngURL.do&actname=%2Feventcenter%2Fframe%2Fg.do](https://hse-ie.webex.com/ec3000/eventcenter/recording/recordAction.do?theAction=poprecord&siteurl=hse-ie&entappname=url3000&internalRecordTicket=4832534b00000004514b12d76f99b1abf9c3714ece0c19e54ecbdd192274c4779ab2b16f5fe1bce2&renewticket=0&isurlact=true&format=short&rnd=0864156885&RCID=30b058c5fd844c2d6b103285282e86ce&rID=58650792&needFilter=false&recordID=58650792&apiname=lsr.php&AT=pb&actappname=ec3000&SP=EC&entactname=%2FnbrRecordingURL.do&actname=%2Feventcenter%2Fframe%2Fg.do)

#### **3.2. Project Planning**

Effective project planning supports the workflow of tasks, activities (to include PDSAs) and expectations necessary to achieve an agreed goal. Each team leader supported by the site coordinator is encouraged to meet with the local PUTZ team to agree the series of steps, responsibility charting and timelines to guide the team and ward colleagues in this initiative.

**A project plan template is available at:**

[http://hse.ie/eng/about/Who/QID/nationalsafetyprogrammes/pressureulcerszer  
o/Project-Charter-Template.pdf](http://hse.ie/eng/about/Who/QID/nationalsafetyprogrammes/pressureulcerszero/Project-Charter-Template.pdf)

### 3.3. PDSA testing

Continue to use PDSA to test changes to build reliability into the SSKIN bundle processes

- Use PDSA template to record the PDSA process
- Annotate run charts to display PDSA tests to help interpret what changes have had an impact

PDSA Template is available at:

<http://hse.ie/eng/about/Who/QID/nationalsafetyprogrammes/pressureulcerszero/PDSA-PUTZ.pdf>

## 4. Staff Engagement

4.1. Continue the buddy system to promote and sustain staff engagement.

4.1.1. Buddy with a colleague on the 'spread' ward.

4.2. Continue to log the successes and challenges surrounding the engagement of colleague's in this initiative. This detail will inform future initiatives and help to guide staff engagement throughout the spread of the collaborative to other wards and units.

### 4.3. Sustain and continue to build momentum

- Include Pressure Ulcer status update into daily routine (e.g. today we are testing ..... Use SBAR)
- Celebrate, recognise, reward champions
- Continue to invite questions

4.4. A PUTZ Information Leaflet for staff is currently under development and will be available at the *PUTZ Collaborative: A Celebration* Event.

## 5. Patient Engagement

Continue to seek opportunities to engage patients and families in this initiative. This may be through training and education or to develop a process or resource or might simply be to aid understanding of living with a pressure ulcer through conversation.

### 5.1 Patient information, education, participation

- Leaflets, brochures, links to websites
- Conversations – Listening Sessions
- Promote enquiry and decision making – Patient/family involvement on safety/quality teams
- Think about including Pressure Ulcers updates and prevention information in discharge packs to home and community

## 6. Poster for Celebration Event

Develop and present a poster to share your team's story of PUTZ. (See hand-out on Poster/Abstract Preparation for specifications etc.)

### 6.1. Submit Poster with a 300-500 word abstract

Please submit an abstract and a copy of your poster with a 300-500 word abstract to [pressureulcerstozero@hse.ie](mailto:pressureulcerstozero@hse.ie) before Wednesday **Oct 25<sup>th</sup> 2017**

### 6.2. Display Poster

Nominate a team member to collect and hang the poster on morning of National Event **Nov 16<sup>th</sup> 2017** and to collect at the close of the event

### 6.3. Present Poster

Nominate a team member to present the poster on the day (3 minutes)

## ACTION PERIOD THREE CHECKLIST

	ACTION/ACTIVITY	DATE OF COMPLETION	COMPLETED BY
<b>1</b>	<b>Pressure Ulcer Prevention</b>		
	E-integrity: Online Course		
	YouTube video: Introduction to the SSKIN care bundle		
	YouTube video: The five key messages to prevent pressure ulcers		
<b>2</b>	<b>Measuring for improvement</b>		
	Daily Safety Cross		
	Monthly Run chart		
	Run Charts Webinar		
	Process Measure		
<b>3</b>	<b>Use of Improvement Methods</b>		
	Model for Improvement & PDSA Webinar		
	Project Planning		
	PDSA Testing		
<b>4</b>	<b>Staff Engagement</b>		
	Continue Buddy System		
	Introduce Buddy System to Spread Wards		
<b>5</b>	<b>Patient Engagement</b>		
	Patient Information Leaflet / Listening sessions / Patient participation on groups, committees etc.		
<b>6</b>	<b>Poster for National Event</b>		
	Develop and Submit Poster		

**COMMENTS:**