

Keeping on top of changes

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Tissue viability is a complex area, but the more we are able to offer simple guidance and an agreed system for data capture and outcomes measurement in specific areas, the better. This requires clear definitions and strategies set out by highly educated and motivated professionals in the field. To this end, there are many organisations in tissue viability that offer definitions and guidance.

I hope readers are aware of the work of the International Skin Tear Advisory Panel, set up to raise awareness of the prediction, assessment, prevention and management of skin tears (www.skintears.org). This has certainly been an area that we have focused on in Wound Care Alliance UK (WCAUK), annual conferences, annual skills events and in several publications (<https://www.wcauk.org/>).

Much has been written about non-healing wounds of the lower leg and guidance is available. Yet, in the UK, less than half the people with a lower leg wound receive a correct diagnosis. To support the provision of more appropriate care the Legs Matter Campaign (www.legsmatter.org) has been launched, offering help and information for patients, their families and friends, and health professionals, with an overview of the symptoms, treatments and recent research.

This year, the importance of surgical wound dehiscence grading was outlined in a World Union of Wound Healing Societies (WUWHS) consensus document (<https://tinyurl.com/yamnthht>).

Many of you will also be aware of the recent discussion of whether health professionals should refer to pressure ulcers or pressure injuries, with the term pressure injury being adopted by the Pan Pacific Pressure Injury Alliance (PPPIA). NHS Improvement has just published its guidance on pressure ulcers for the NHS in England: *Pressure Ulcers: Revised definition and measurement* (<https://tinyurl.com/yda3p5ha>). The term pressure injury is not adopted and these wounds will continue to be called pressure ulcers in England.

In the foreword, NHS Improvement's Executive Director of Nursing, Ruth May, acknowledges that pressure ulcers remain 'a concerning and mainly avoidable harm associated with health care delivery'. The importance of collecting data and a quality improvement method to make changes and improve outcomes for service users and patients with full implementation by 2019 is stressed.

The document includes 29 recommendations and there is great pressure to be aware of all these changes, to understand, embrace, implement and evaluate them. Yet, the lack of a nationally agreed reporting system has led to local interpretation, under-reporting and therefore variations in the data. The challenge is to have all the guidance, data capture and measurement of outcomes

in place when initiatives are launched. Interestingly, the Stop the Pressure programme pressure ulcer audit tool will not be available until autumn 2018.

The emphasis on avoidable or unavoidable wounds is to cease and while many will applaud this, this will now lead to all incidents being investigated and one can only hope that reporting will be consistent. The guidance also states that the term 'category' should be used to describe pressure ulcers, to consistently apply terminology in national reporting. Strangely, however, we will be recording 'unstageable' ulcers, which cannot be categorised.

However, positive strides are being made and by including a strategic approach to education with a pressure ulcer core curriculum, it is hoped that there will be a consistent approach clinically, managerially and academically.

What is really needed is nationally agreed patient pathways for all aspects of tissue viability, with the mandate for NHS trusts to monitor patient outcomes. Pathways need to be short, concise and easily available and staff will require education and training. While this will involve additional costs, it is only by making a truly concerted effort with a focus on clear definitions, strategies, pathways and monitored outcomes, that we will really make a difference to patients.

What you do in your clinical practice really makes a difference to patient outcomes. Keeping up to date is always challenging and WCAUK is able to support members with this. Members are invited to attend the forthcoming WCAUK conference in Cambridge on 11 October and a skills day in Worcester on 11 April 2019.

Finally can I remind you to complete the General Data Protection Regulation (GDPR) information for WCAUK so you can continue to receive all the benefits of membership.

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