

DERBY CITY WOUND HUB

September 3, 2021

INITIATIVES

- Promote knowledge and critical thinking
 - Bedside stakeholder rounds
 - Wound Champion
- Platforms to deliver consistent care
 - Facility product availability
 - Pressure redistribution surfaces
- Programs for stakeholder engagement
 - Bedside stakeholder rounds
- Support patient/family education
 - Promote engagement in care
- Improve documentation

READ THEM!

KNOW THEM!

- State Operations Manual- Guidance to Surveyors for Long Term Care Facilities November 22, 2017
https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107a_p_pp_guidelines_ltcf.pdf
- CMS Long-Term Care Facility Resident Assessment Instrument 3.0 Users Manual, Section M Skin Conditions, October 2018
<https://downloads.cms.gov/files/1-MDS-30-RAI-Manual-v1-16-October-1-2018.pdf>

UNAVOIDABLE???

WHICH WOULD NOT BE INCLUDED AS “UNAVOIDABLE” FROM A REGULATORY STANDPOINT?

1. An initial patient assessment was completed
2. A plan of care was instituted based on the patient’s assessment and wishes
3. The patient was incontinent of stool and urine
4. Reassessment of the patient and interventions were performed
5. The plan was modified based on the patient’s needs

BIG PICTURE!

- HEALABLE VS NON-HEALABLE
- Patient and family goals for management
- Modifiable vs. non-modifiable factors
- Assessment at presentation (general and wound)
- Skin is an organ system
- Organ systems fail



LONG TERM CARE PATIENT FOCUSED MANAGEMENT

- Making the APPROPRIATE DECISION at the APPROPRIATE TIME for the APPROPRIATE PATIENT
- Know the patient and family wishes for wound management, as well as, their overall goals regarding medical management including aggressive treatment, conservative measures, or palliative measures

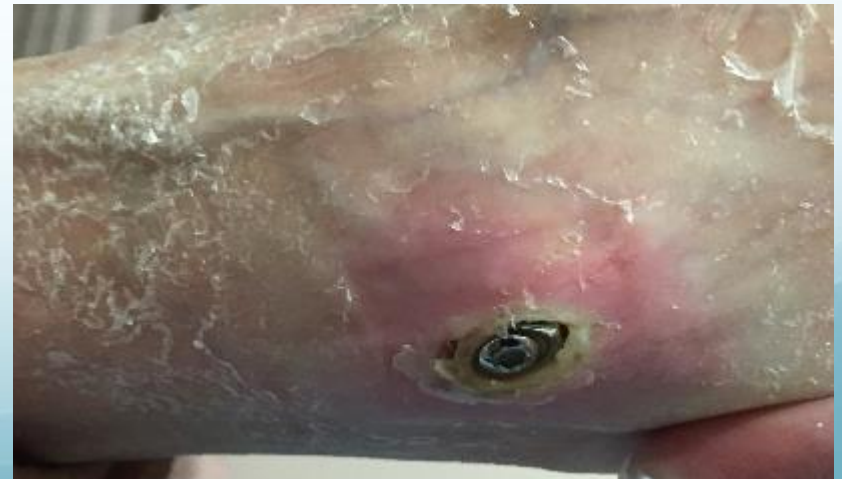


REGULATION VS CLINICAL

- “Unavoidable” means that the resident developed a pressure injury even though the facility had evaluated the resident’s clinical condition and risk factors;
- Defined and implemented interventions that are consistent with resident needs, goals, and professional standards of practice;
- Monitored and evaluated the impact of the interventions;
- Revised the approaches as appropriate
- State Operations Manual Appendix PP - Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17)

REALITY CHECK FOR THE LTC FACILITY

- Modifiable factors
- Non-modifiable factors
- Deterioration- result of patient inherent disease
- Complication- untoward event as a result of an action or absences of an action



ALERT!

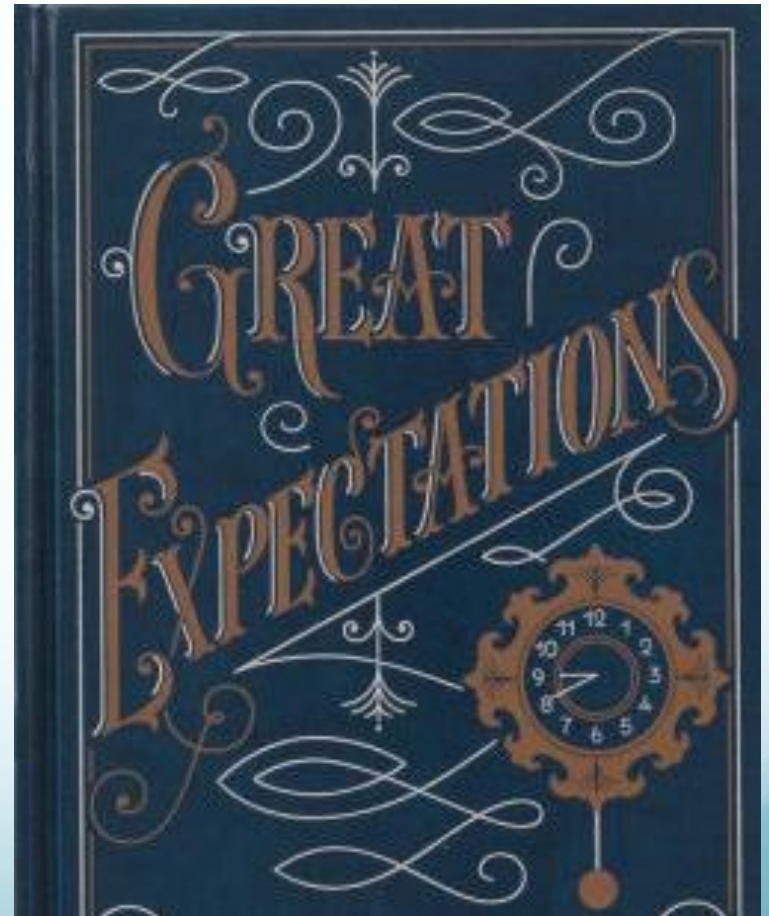
- 80 percent of PU/PIs develop within two weeks of admission and 96 percent develop within three weeks of admission.



- (Reference: Lyder CH, Ayello EA. Pressure Ulcers: A Patient Safety Issue. In: Hughes RG, editor. Patient Safety and Quality: An Evidence-Based Handbook for Nurses. Rockville (MD): Agency for Healthcare Research and Quality (US); 2008 Apr. Chapter 12.)

GOALS OF CARE

- REALISTIC EXPECTATIONS
- Bryce Schuster, MD
- Optimization
- Modifiable
- Documentation of discussion
- Empathetic vs. apologetic



KEEP IT GOING

- What programs have you put in place at your facility that have led to improved:
 - Patient/family satisfaction
 - Stakeholder engagement
 - Improved outcomes

BRAINSTORM

