



Time for Action!

**Put Canada's no. 1
Pressure Ulcer Prevention
Team in your facility**



Canadian Association
of Wound Care



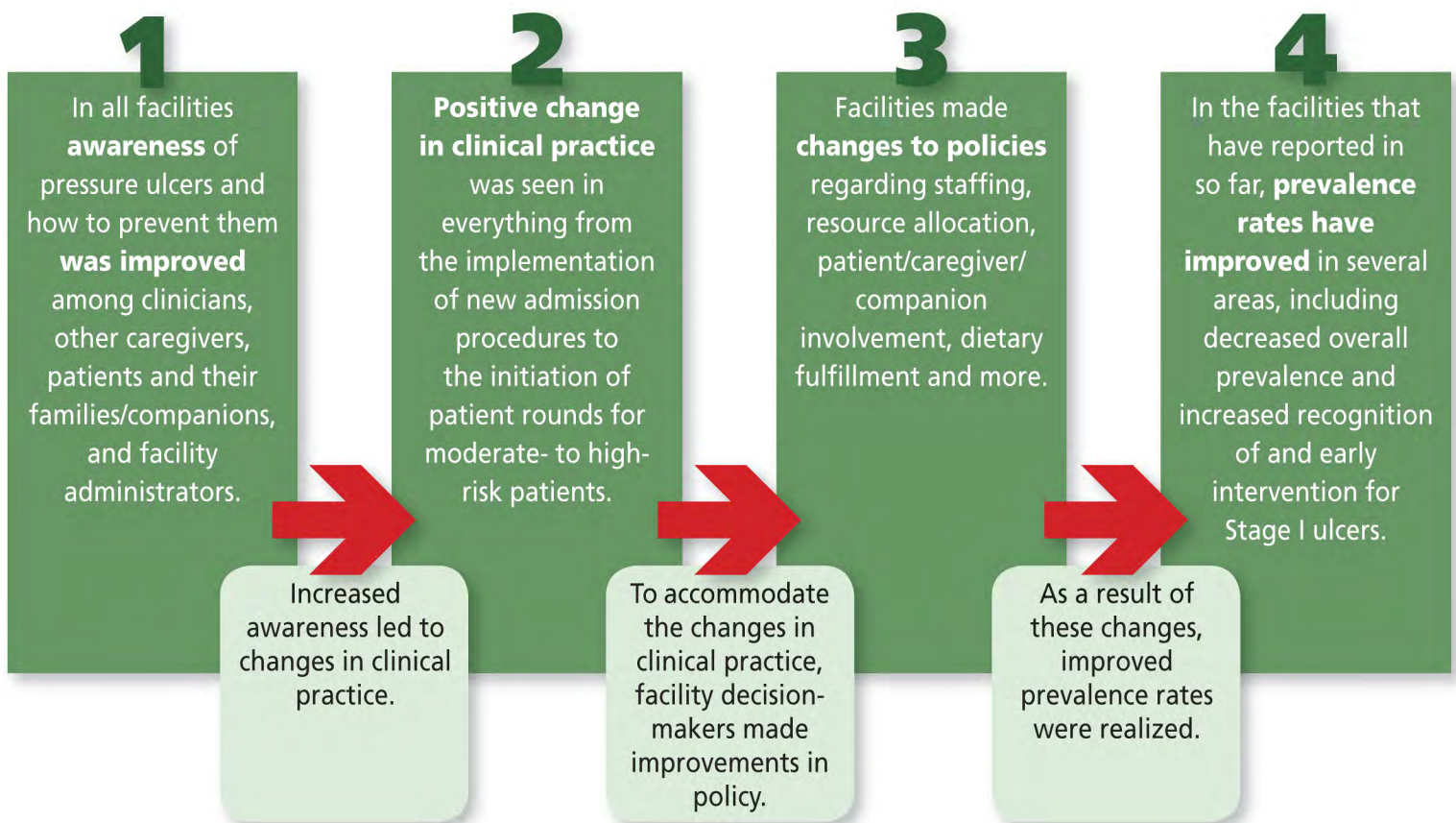
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“Approximately 70% of pressure ulcers are preventable, yet 1 in 4 people in health-care settings across Canada¹ are afflicted with a pressure ulcer at any given time,” says Dr. David Keast, (past) President of the Canadian Association of Wound Care. **“This translates into untold patient suffering, extra work for health-care providers and millions spent in health-care dollars that could be directed elsewhere. Clearly we have to take action.”**

And take action we have! To address this serious and increasing health-care problem the Canadian Association of Wound Care (CAWC) has developed an innovative and effective solution that is the most comprehensive Canadian pressure ulcer awareness and prevention program to date.

The program began in 2006 as a pilot that ran in five facilities across the country. The results from the evaluations of the pilot were stunning. Research conducted to measure outcomes from the program indicates success in four key areas: awareness, clinical practice, policy, and prevalence.



How Did We Do It?

The first step in the program was to improve awareness across the spectrum of everyone involved in patient/resident care.

Other types of interventions, or even whole programs, have not been particularly effective at producing the kinds of positive changes we've seen through the pilot², including the reduction of the prevalence of pressure ulcers. Why, then, has the CAWC program been so successful?

The program contains the types of core components necessary for success—such as relevant educational and implementation tools—but also has a number of features not normally seen in other quality improvement programs. For example,

- **Facility administrators** are required to **“sign on the dotted line”** regarding their commitment to the program, ensuring clinicians have the support they need to positively change practice and ensure sustainability.
- Each facility has a dedicated **“Champion”** to implement and drive the program.
- **Patients, family and caregivers/companions** are directly **involved**.
- The program provides unique sets of **materials** (shown below) to **address the specific needs** of each group involved in preventing pressure ulcers.
- Tools to **bridge the gap between** the identification of **pressure ulcer risk** and the **planning of care** based on that risk, both from admission of new patients to regular monitoring of high-risk patients, are integral components of the program.
- **Measurement and evaluation are primary drivers** for the program. Measuring change in awareness, practice and prevalence is built into the program and facilitated by tools provided by the CAWC.

Your Champion Becomes Part of Canada's No. 1 Pressure Ulcer Prevention Team

Each champion is part of a network of other facility champions created through regular conference calls, e-mails, a secure Web-based discussion forum and a “hotline” for one-on-one consultation with the Team Leader.

Plus direct, ongoing support is given to facility champions by a CAWC Team Leader.



Who Will Benefit From this Program?

It goes without saying that preventing pressure ulcers will save patients/residents from unnecessary pain and suffering, and even loss of life.

But facilities and the people who work in them can benefit as well—in significant ways.

1. Save Money

Reducing the prevalence of pressure ulcers in your facility can save you tens of thousands or, more likely, hundreds of thousands of dollars annually. In a large facility, your savings could be in the millions. Sounds like a wild claim, but let's examine the evidence.

One of the pilot sites reduced their prevalence by 35% in only one month (they went from 23.4% to 15.2%—see the chart on the following page). While the cost of treating pressure ulcers ranges considerably, a 100-bed facility, with a similar prevalence rate and reduction could expect to realize from \$239,000 to an astounding \$1.3 million in savings annually!³

Saving money in one area can lead to reallocation of funds to other areas. Depending on your needs, this reallocation might mean hiring additional staff or the purchase of needed equipment.

Having this program saves in another way as well. Our data clearly demonstrate that the purchase of specialty surfaces actually has little or no affect on pressure ulcer prevalence unless it is accompanied by appropriate education. If you have specialty surfaces, the program is the best way to make sure you are getting value for your money!

"I think this has been an exceptionally good program you've laid out. . . . Risk assessment is pretty widespread, but action related to that risk assessment is not. I want you to think about it this way: what if we did a mammogram and saw a tumour and nobody took it out?" . . .

"You really need a roadmap for success. Nobody needs to be reinventing all these educational materials on their own . . . It is important to have a network through the CAWC where you can stay up with improvement in the materials and they get shot out to those who are participating."

—Barbara Braden, RN, PhD, SAAN, co-developer of the Braden Scale for Predicting Pressure Sore Risk



2. Demonstrate Your Success with Pressure Ulcers as a Quality-of-care Indicator

Regardless of the type of facility you are in, public perception of the care you provide will be improved if you can demonstrate that you have an effective program for identifying risk and preventing pressure ulcers. Pressure ulcer prevalence is a visible indicator of quality of care, and as the public becomes more educated about health care, **demand for quality care will grow**. Are you ready?

3. Reduce Clinician Workload

Nurses are already overloaded with work, and the first reaction to a program of this type is “that’s just more work piled on to my already overloaded schedule.” But think about it: if pressure ulcers are prevented, workload will actually decrease.^{4,5}

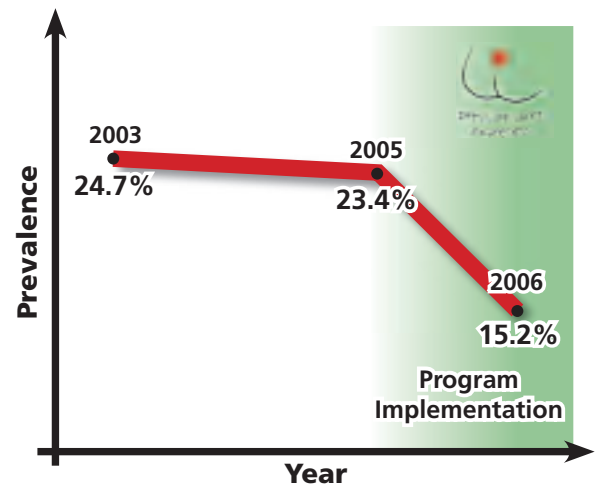
4. Know What’s Going On in Your Facility

The sites involved in the pilot made some significant discoveries about how they needed to improve care. Two facilities recognized their dietary resources were inadequate and made immediate improvements. Two facilities realized their policy of restricting the number of pillows to patients/residents was contributing to the development of pressure ulcers. They made changes. In all facilities the ongoing measurement and evaluation components led to awareness about inadequacies in other areas—which have now been addressed. Even small changes can make big differences.^{4,5}

As an administrator you are accountable for everything that goes on in your facility. But do you know what is going on? Get the tools you need to help you make the decisions that will lead to improved care, prudent financial management, and happier, healthier staff and patients.

References

1. Woodbury MG, Houghton PE. Prevalence of pressure ulcers in Canadian healthcare settings. *Ostomy/Wound Management*. 2004;50(10):22-38.
2. Kitson A, Harvey G, McCormack B. Enabling the implementation of evidence-based practice: A conceptual framework. *Quality in Health Care*. 1998;7:149-158.
3. Bennett G, Dealy C, Posnett J. The cost of pressure ulcers in the UK. *Age and Ageing*. 2004;33(3):230-235.
4. Registered Nurses’ Association of Ontario (RNAO). *Best Practice Guideline: Risk Assessment and Prevention of Pressure Ulcers – Revised 2005*. Toronto: RNAO. 2005
5. Keast DH, Parslow N, Houghton PE, Norton L, Fraser C. Best practice recommendations for the prevention and treatment of pressure ulcers: Update 2006. *Wound Care Canada*. 2006;4(1):31-43.



Watch Your Pressure Ulcer Prevalence Drop



“The impressive improvements in awareness, clinical best practices, policy making and pressure ulcer prevalence rates demonstrate the success of this program,” concludes Keast. **“Moving forward, our goal is to work with health-care organizations in encouraging them to adopt this program for the benefit of both their patients and their bottom lines.”**

Signing Up for the Program

Now that you know about the problem, and the solution, there's no turning back.

The first step for facilities interested in obtaining the program is to go to **www.preventpressureulcers.ca**. You'll see a link near the bottom of the home page that says "Information for Facilities." Clicking on this link will take you to an area that outlines the details for obtaining the program: how much it costs, who to contact, and most importantly, what you must have in place in order to get the program, because this program is not for everyone. Only facilities that agree to three essential prerequisites are eligible to receive it. These are:

- A firm commitment from management to fully support the program and all its requirements.
- The identification of a dedicated champion to implement and drive the program within the facility.
- A commitment to change.

The slogan for the CAWC's Pressure Ulcer Awareness Program is **"Pressure ulcer prevention begins with ADMISSION,"** a statement with a two-fold meaning: We must admit pressure ulcers are a problem, and we must deal with the problem right from admission of a patient into the health-care system.



Have you got what it takes? If so, go to www.preventpressureulcers.ca today. Neither you nor your patients can afford to wait another day.

About the CAWC

The Canadian Association of Wound Care (CAWC) is a non-profit organization of health-care professionals, industry participants, patients and caregivers that works to significantly improve patient care, clinical outcomes and the professional satisfaction of wound-care clinicians.

The Pressure Ulcer Awareness Program has been developed and is owned and administered by the CAWC. All proceeds from the program go back into the development of Canadian educational programs.

For more information visit www.cawc.net or e-mail us at info@cawc.net

