

Councillor Rebecca Lury  
Chair - Adult Health,  
Adult Social Care,  
Communities &  
Citizenship Scrutiny Sub-  
Committee  
Southwark Council  
(via email to Julie  
Timbrell)

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Dear Councillor Lury

**Follow up information relating to Pressure Sore Cases.**

At the meeting of the Southwark Adult Health, Adult Social Care, Communities & Citizenship Scrutiny Sub-Committee held 1 May 2013 the Committee requested follow up information relating to the following two issues:

- 1) Related new protocols being developed on community acquired Pressure Sore cases to ensure they are resolved and information is shared between Trusts, the CCG and Adult safeguarding, and
- 2) An analysis of why Pressure Sores are increasing , including data on where these are acquired

Attached is a briefing from Southwark CCG responding to the two follow up information requests. The paper has been produced by the CCG with data provided by the Trust as the analysis and presentation of community acquired pressure sores is the responsibility of Primary Care.

If you have any further queries please do not hesitate to contact me

Yours Sincerely,

*Kumal Rajpaul*

Mr Kumal Rajpaul  
Tissue Viability Nurse Specialist

## **Briefing Paper to the Southwark Adult Health, Adult Social Care, Communities & Citizenship Scrutiny Sub-Committee**

**15 July 2013**

### **1) New protocols being developed on community acquired Pressure Sore cases to ensure they are resolved and information is shared between Trusts, the CCG and Adult safeguarding.**

Kings College Hospital, SLAM and GST are working together to form a joint working group to reviewing the current 'Safeguarding Adults and Skin Damage Protocol' which is in use. Members of the group include Safeguarding leads and Tissue Viability Nurses and Trust Representatives. The aim of the group is to further develop the protocol and to identify the process of how information and communication takes place between Trusts relating to the patient care pathway and how this informs the initiation of a safeguarding alert. Southwark CCG will be involved in contributing to the protocol to ensure that pressure ulcers constituting as a Serious Incident are reported and managed through the correct route with relevant information relating to the patient care pathway.

KCH monitors all pressure ulcers via an online reporting system and the data is analysed on a weekly basis and reported monthly to the trust. It is scrutinised at the trust NMAS score card meeting. A root cause analysis is conducted for all hospital acquired grade 3 and 4 pressure ulcers and the outcome discussed at the SI committee meeting. A root cause analysis is also conducted on all admitted pressure ulcers that deteriorate in the trust.

All incidences of Grade 3 and 4 Pressure ulcers are reported by Kings on STEIS.

### **2) An analysis of why Pressure Ulcers are increasing, including data on where these are acquired**

Kings has experienced an increased rate of acuity and activity of patients due to the Trauma and Stroke centre resulting in an increase of dependency and increased patient throughput. The intensive care units are currently running at 140% capacity with high risk patient groups with multiple comorbidities. This increase in activity has resulted in an increase demand for pressure relieving equipment such as air mattresses. The trust has responded to this need by increasing the stock of systems to meet the demands

From 1<sup>st</sup> April Kings College Hospital has been reporting all Pressure Ulcers onto STEIS the national Serious Incident database held by NHS England. Recent guidance from NHS England requests that all cases of grade 3 and 4 PUs are reported regardless of whether these were acquired in hospital or were present on admission where the patient may have experienced a fall at home and was on the floor for several hours or may have previously resided in a care home. The comprehensive system of monitoring Pressure Ulcers ensures that the patients

previous provider of care upon where the Pressure Ulcer may have been acquired, is contacted to ensure the appropriate investigation and root cause analysis takes place. Kings Virtual Ward provider 'Medihome' who provides hospital at home nursing care is presently running at full capacity therefore increasing patient activity. The National Patient Safety Thermometer CQUIN which requires a measurement of four categories of condition includes the recording of Pressure Ulcer incidents this has alerted an increased number of Pressure Ulcers which qualify as a Serious Incident.

#### Where pressure Ulcers are acquired

Kings College Hospital – All grade 3 and 4 Pressure Ulcers which have been acquired at the hospital are reported on STEIS and undergo a thorough root cause investigation followed by review and scrutiny at the Serious Incident Committee which commissioners attend.

Training is provided to all staff as part of nursing and midwifery induction which consists of the classification, prevention and management of Pressure Ulcers. Kings Health Partners members (KCH, GST and Lambeth & Southwark PCT) provide regular Pressure Ulcer Prevention, treatment and management study days to nursing staff as well as provide regular ward based training with targeted training as part of Safety Express. The trust is constantly reviewing new ways of cascading information to the nursing and allied health care professional staff with the aid of pocket guides that help staff identify and categorise Pressure Ulcers. This is provided to all clinical staff and is further supplemented with an E-Learning package on pressure ulcer prevention, identification and treatment with a test to take at the end. More recently the trust is currently conducting a three month trial on a pressure ulcer pathway document which is at the patient's bedside giving nursing and allied health professional the information needed to identify and manage pressure damage at an early stage therefore preventing more severe pressure damage.