

# Reducing Heel Pressure Ulcers at Ashford & St. Peter's Hospitals NHS Foundation Trust

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## Introduction

Pressure ulcers (PU) remain a significant healthcare problem having an impact on health-related quality of life and costing the NHS more than £3.8 million every day<sup>1</sup>. It is widely acknowledged that the majority of PU's are avoidable<sup>2</sup> with prevention remaining a key quality improvement target<sup>3</sup>.

ASPHFT has an action plan to achieve a 50% reduction in Hospital Acquired Pressure Ulcers (HAPU) stage 2 and above between 2015-2018. The Trust did not meet the target for 2016/2017. A review of all HAPU by body location highlighted however, that predominantly heels were affected, with 67 stage 2 HAPUs occurring (Fig. 1). As the Tissue Viability Team (TVT), we needed to focus on this area as a matter of urgency to reduce harm to our patients and reach agreed reduction targets.

## Method

Root Cause Analysis of patients who developed heel HAPU showed staff were reactive rather than proactive in preventing pressure damage. In particular, heel offloading commenced only once damage had occurred. A strategy was developed to increase heel offloading practices for all patients at risk of developing pressure damage, thereby reducing heel HAPUs.

Using Trust Improvement methodology, we launched a 'Heel S.O.S.' 'Strictly off Surface' campaign in April 2017. The TVT wanted a mnemonic that was easy to remember and had an impact for both staff and patients. It was felt that S.O.S. was internationally recognised as a call for help and that patient's heels needed help to be 'Strictly Off Surface'.

The campaign included, for a period of 15 days, an online daily Trust based intranet bulletin with tips and photographs of heel offloading. A Heel S.O.S. poster (Fig. 2) was developed and distributed to all adult inpatient clinical areas, plus the introduction of the Repose Wedge in July 2017 as an additional heel offloading device to the Repose Foot Protector which was currently in use within the Trust. Repose Wedge was chosen as the properties of static air immersion provided by the Repose range are well understood across the Trust. Repose Wedge was implemented for its flexibility to provide offloading for patients in bed with larger lower limbs, prone to restless and fidgety legs or who find the it cooler to use than the Repose Foot Protector.

The Heel S.O.S. poster was felt to be the key communication tool to quickly and easily raise awareness of the campaign to all clinical staff, patients and the public. To enhance the message, a visual approach was adopted, pictorially demonstrating how to off load heels and reduce friction using the bed frame knee brace, slide sheets and heel off loading devices.

## Hospital Acquired PU ≥ Stage 2 by Body Location

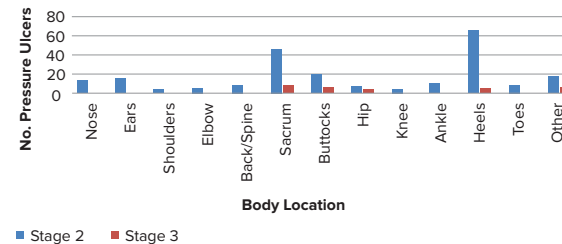


Figure 1. Hospital Acquired PUs by Body Location



Figure 2. Heel S.O.S. Campaign Poster

## Hospital Acquired Heel PU ≥ Stage 2

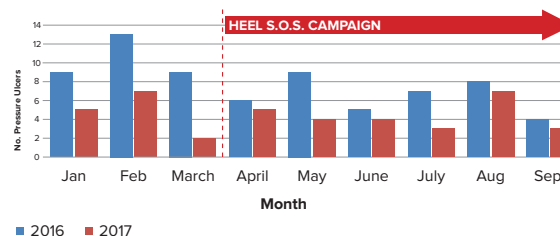


Figure 3. Hospital Acquired Heel PUs

The poster has been used across the Trust in many ways depending on the clinical areas, including in each patient bay and smaller versions for ward staff to have easy access and high visibility in clinical rooms. It has also been endorsed by the CCG who are highly supportive of the Heel S.O.S. campaign.

## Results

The poster has been very well received by all members of the MDT and has led to discussion at the patient's bedside to include patients and visitors. It has been used as a teaching aid by the TVT and link nurses as well as a reminder within the clinical areas.

Data review from incident reports since the launch of the 'S.O.S.' campaign indicates a reduction in heel HAPU ≥ stage 2 when compared with data from 2016. From April to June 2017 there was a 42% reduction in Heel HAPU (Fig. 3).

## Discussion

Whilst the campaign is in its early stages, there is initial evidence of improved practices in ward areas with notable use of bed frames and devices to offload heels as guided by the Heel S.O.S. poster.

There are further plans to maintain momentum with Heel S.O.S. flash cards as a teaching adjunct for ward based training. A social media campaign has accompanied this with the TVT tweeting wards that have heels 'S.O.S.'

## Conclusion

The Heel S.O.S. campaign and additional introduction of the Repose Wedge alongside the Repose Foot Protector has been successful in reducing heel HAPU ≥ stage 2. However, monitoring of practice and HAPU data analysis is required. This will be reviewed monthly to ensure the current trend continues and any areas of concern are highlighted quickly to be acted upon by the TVT.