

CONFERENCE ABSTRACT

Patient and family/carer experiences of their involvement in a regional quality improvement collaborative utilizing the SSKIN care bundle

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Introduction: In Ireland, a regional quality improvement collaborative was established within the Health Service Executive (HSE) entitled 'Pressure Ulcers to Zero', utilizing the SSKIN care bundle¹. As the involvement of patient and family/carer is a central component of health care delivery, this study set out to explore the patient and family/carer experiences and involvement within the collaborative including use of the SSKIN care bundle.

Methods: A qualitative descriptive approach was adopted. Three main healthcare settings were involved in the collaborative (acute /specialist, residential and primary care). One unit from each of these settings was purposively selected to participate. Following ethical approval and written informed consent, data were collected over a 6 week period using semi-structured, one to one interviews with patients, and focus group interviews with family members/carers. Twenty-five persons agreed to participate; 16 patients, with varying levels of dependency, and 9 family members/carers.

Results: Data were analysed using Colaizzi's Framework², 5 main themes with corresponding subthemes emerged from the analysis: awareness, patient and family/carer involvement, 'prevention is better than cure', 'communication is key' and resources in prevention.

Discussions: Both patients and family/carer had limited involvement in PU prevention within the collaborative. Further, a general lack of awareness of the SSKIN care bundle was identified. Participants expressed the desire to be more involved in PU prevention, henceforth, empowering patients and family/carers through education and communication may increase their level of involvement.

Conclusion: Educating patients and families/carers on PU prevention through utilization of the SSKIN care bundle may facilitate a greater willingness of the patient and family/carer to participate in PU prevention.

Lessons Learned: The unique findings of this research study have significant meaning for future collaboratives, where collaborative techniques adopted such as acronyms and activities, require a patient as well as a professional focus.

Fleming; Patient and family/carer experiences of their involvement in a regional quality improvement collaborative utilizing the SSKIN care bundle

Limitations: The data obtained reflects the perceptions of a small number of representatives across 3 sites within the regional collaborative, where overall there were 21 participating sites. Furthermore, there was some confusion among study participants surrounding the acronym 'SSKIN' which necessitated the interview question scheduling to be adapted to allow for a discussion on each element of 'SSKIN'.

Suggestions for Future Research: Exploring health care professionals experiences of the collaborative may determine their perceptions of involving patients and family/carers in PU prevention. Also, with much confusion surrounding the acronym 'SSKIN', there is a need to explore patients and family/carers understanding and preferences on the use of an acronym compared to a word process care bundle. Performing research on the appropriate timing of providing PU information to patients and family/carers could prove beneficial in earlier, timely PU prevention interventions.

References:

1. Gibbons, W., Shanks, H., et al. Eliminating facility-acquired pressure ulcers at Ascension Health. *Journal of Quality and Patient Safety* 2006;32:488-96.
2. Colaizzi, P. F. Psychological research as the phenomenologist views it. In R. S. Valle & M. King (Eds.), *Existential phenomenological alternatives for psychology* (pp. 48-71). New York: Plenum. 1978

Keywords: pressure ulcer prevention; quality improvement; collaboratives; skin care bundle; patient&family participation
