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Submitting author: Miss Mei Yee TONG

Post title: Registered Nurse, United Christian Hospital

Enhancement Program on Wound Management in Acute Geriatric Setting

*Tong MY, Lam YK, Lo YS, Lui KY, Woo KM, Chan HS
Department of Medicine and Geriatrics, United Christian Hospital*

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Introduction

Wound prevention and management is an important part of nursing care. In Geriatric settings, old age patients often have a high risk of wound development due to a number of factors, such as declined mobility, poor nutrition status and reduced self-care ability. With the insufficient of skin care, 3 types of wounds, Pressure Ulcer, Incontinence Associated Dermatitis (IAD) and Skin Tear are commonly resulted among these patients.

Understanding the wound development mechanism and differentiation between these 3 types of wounds are important in early prevention and wound management. Thus an enhancement program focus on this area is launched for nursing staff.

Objectives

1. To reinforce staff's knowledge on wound classification, prevention and management according to the updated guideline.
2. To facilitate nursing care on wound prevention and management by handy instruments.

Methodology

A wound care enhancement program is carried out since 11/2016 by:

- 1) Training sessions

Training sessions to nursing staff are provided base on 3 common types of wound in geriatric wound (pressure sore, IAD and skin tear). International grading, preventive measures and updated wound management methods for different types of wound are introduced.

- 2) Skin care and Dressing materials arrangement

A wound material shelf is introduced to arrange available skin care and dressing materials in a systematic way. Different materials are grouped and relocated

according to their properties and indications.

3) Cue cards of dressing materials

A set of cue cards is developed with key information of each dressing material available in ward (property, indication and cautions). Nursing staff can refer these cue cards as a quick reference guide on choosing the appropriate wound dressing materials.

Result

The enhancement program is carried out since November 2016 till present. Positive feedbacks received from nursing staff. Staff reported with better understanding and increased confidence on handling these 3 types of common wound on geriatric patients. With the introduced tools (wound material shelf and cue cards), staff agreed that facilitated them to choose the most appropriate skin care and wound products. Nurse staff is observed with an increased awareness on wound prevention, which reflected by an increased adaption of the skin care materials on high risk patients.

Conclusions:

The enhancement program on wound management is able to prompt nursing staff in providing a high quality of wound care in both prevention and management aspect. The wound material shelf and cue cards are good adjuncts to facilitate nurses in wound management.