



The Department of Health Sciences NIHR Wounds Research for Patient Benefit Programme

Leeds Community Healthcare

# JLAPUP Final Priority Setting Workshop

# 28th March 2013, Shine, Leeds

### **Pre-workshop exercise**

Please complete this and bring it along with you to the final workshop meeting.

#### James Lind Alliance Pressure Ulcer Partnership

### PRE-WORKSHOP RANKING FORM

Please choose your top 10 from the questions listed below and rank them from

#### with 1 being the most important.

Bring this form with you to the workshop as we will be discussing your individu at the beginning of the priority setting process.

#### Thank you.

The thumbs up rankings are to let you know how important patients, carers and health professionals have questions so far. Please consider the full list in your choice.



Raised and ranked as very important by patients, carers and health professionals



Raised and ranked as important by patients, carers and health professionals



Raised by two groups and ranked as important (but lower) OR raised by one group but prioritised as important b in the integration phase.

ID	Rank your top 10 here	How patients, carers and health professionals have rated this so far	Question
Α		1 <sup>st</sup> among	How effective is <i>repositioning</i> in the prevention of pressure ulcers? Particular questions were raised about three affected groups: those in bed, those seated and those with

	health	contracted limbs. Key areas of uncertainty for those in
	professionals	bed were the most effective means of turning yourself,
	for prevention	being turned (or having your position changed) by
	for prevention	others and whether the impact on health and well-being
		of sleep disruption was taken into account. For those
		seated, the key area of uncertainty was the most
		effective means of repositioning yourself or being
		repositioned (by others) in a chair.
D		What is the relative effectiveness of the different types
B	η η η	of pressure relieving beds, mattresses, overlays and
		cushions (including cushions for electric and self-
		propelling wheelchairs) in preventing pressure ulcers?
	1 <sup>st</sup> among	
	carers for	There were uncertainties about whether devices were
	prevention	meeting the needs of the full range of patients at risk
		and how devices in use compared with conventional and
		other specialist surfaces. The needs of three affected
		groups were raised in particular: those who share a
		mattress with a partner, people with multiple sclerosis
		and those with contracted limbs.
~		How effective at preventing pressure ulcers is <i>involving</i>
C	0 0 0	patients, family and lay carers in patient care?
	a a a	putents, junity unu iug curers in patient care.
	8,8,8,8,	
	1 <sup>st</sup> among	
	patients for	
	prevention	This question includes uncertainties about the best
	Provension	means of informing, educating and motivating people.
D		Does improved diet (eating) and hydration (drinking)
	A A A	promote the prevention of pressure ulcers?

		There were particular uncertainties about the effectiveness of high protein diet, micronutrients and the effects of weight loss and gain. Also particular effects for people with multiple sclerosis, spina bifida or spinal cord injury.
E	l <sup>st</sup> among health professionals for treatment	Does <i>improving diet (eating) and hydration (drinking)</i> promote pressure ulcer healing?
F	1 <sup>st</sup> among carers for treatment	Do <i>pressure relieving support surfaces</i> , particularly mattresses help heal pressure ulcers? There were specific uncertainties about the design of devices used in the treatment of the frail and elderly and those with multiple sclerosis.
G		Does <i>regular turning of patients in bed</i> promote healing of pressure ulcers? There were particular uncertainties about how often it is best to turn people, the most effective means of

		repositioning for people who require a carer to help
		them move, and whether a "prompt of routine" tool
		which reminds people to reposition themselves would
		be helpful for people with limited memory as well as
		limited mobility.
TT		What are the best <i>service models</i> (and are they
H	a a a	sufficiently accessible) to ensure that patients with
	(هرهره	pressure ulcers receive the best treatment outcomes?
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		There were particular questions about whether
		awareness of and access to tissue viability nurses
		improved outcomes and whether people with specialist
		conditions (e.g. spinal cord injury) received the best
		pressure ulcer treatment at specialist centres compared
		to generalist services.
T		Does the <b>education of health and social care staff</b> in
L	AAA	prevention lead to a reduction in the incidence of
		pressure ulcers and, if so, which are the most effective
		education programmes (at organisational and
		Health/Social Care level)?
T		How effective are <i>surgical operations</i> to close pressure
J	nnn	ulcers?
		This included uncertainty about the most appropriate
	1 <sup>st</sup> among	surgical referral for people with MS and ulcers that
	patients for	won't heal.
	treatment	

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		There were particular uncertainties about the application of barrier creams or sprays (Sudocrem and Cavilon), methylated spirits and moisturisers; also whether the use of skin care regimes diminishes the likelihood of pressure ulcer occurrence. For example, for patients confined to bed, whether treating with washing, surgical spirit and/or talcum powder at all pressure areas would prevent the occurrence of pressure ulcers.
Q	Patients and carers	For people with limited mobility, does <i>exercise</i> coaching help in the prevention of pressure ulcers (for example, community physiotherapy interventions)?
R	Patients and Health Profs	Is using a <i>pressure ulcer risk rating scale/tool</i> better than clinical judgement in preventing pressure ulcers and is there a best scale?
S	Patients and Health Profs	What impact do different <i>service models</i> have on the incidence of pressure ulcers? There were particular uncertainties about whether, for people with Multiple Sclerosis or Spinal Cord Injury, working with specialist clinicians was more effective for prevention than working with generalists. Also whether access to a specialist wound prevention service improved pressure ulcer prevention.
Τ	Carers and Health Profs	How effective are <i>incontinence devices</i> in the prevention of pressure ulcers? There was a particular uncertainty about whether

			cheaper incontinence pads caused more irritation
			compared to expensive pads.
TT		A	Do staffing levels have an impact on the incidence of
U			pressure ulcers?
		Health Profs	
		and Mixed	
V		al l	For people in hospital, is the current <i>organisation of</i>
•			<i>nursing care</i> effective as best practice in the prevention
		Patients and	of pressure ulcers?
		Mixed	
		~	How does <i>continuity of care</i> (an on-going relationship
$ \mathbf{W} $		Ę)	with same staff members) impact on the prevention of
			pressure ulcers?
		Carers and	
		Mixed	
V		A	Does getting people with pressure ulcers and their carers
X			more involved in their own pressure ulcer management
		Carers and	improve ulcer healing and if so, what are the most
		Health Profs	effective models of engagement?
			There were particular uncertainties about the most
			effective way for family carers to be involved and the
			effectiveness of education strategies aimed at lay carers
			to ensure understanding and concordance to
			recommendations from health care professionals (like
			turning regimes, diet and fluids).
<b>X</b> 7		Λ	How does <i>continuity of care</i> (an on-going relationship
<b>Y</b>		5)	with same staff members) impact on treatment of
		Patients and	pressure ulcers
		Carers	
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Z	Patients and Carers	For people with pressure ulcers which <i>analgesics (pain relief)</i> are effective and safe for the treatment of pressure-ulcer related pain? There was a particular uncertainty about pressure ulcer pain relief for people with Multiple Sclerosis.
AA	Patients and Carers	What is the value of <i>topical agents</i> in promoting pressure ulcer healing? There were particular uncertainties about honey-based treatments and the application of sugar.
AB	Patients and Carers	How effective is <i>negative pressure wound therapy</i> as a treatment for pressure ulcers?
AC	Patients and Mixed	Is <i>staff training</i> effective in improving pressure ulcer healing?
AD	Health Profs and Mixed	How effective are pressure <i>ulcer grading systems</i> in determining the amount of skin damage and does the use of such scales improve ulcer healing?