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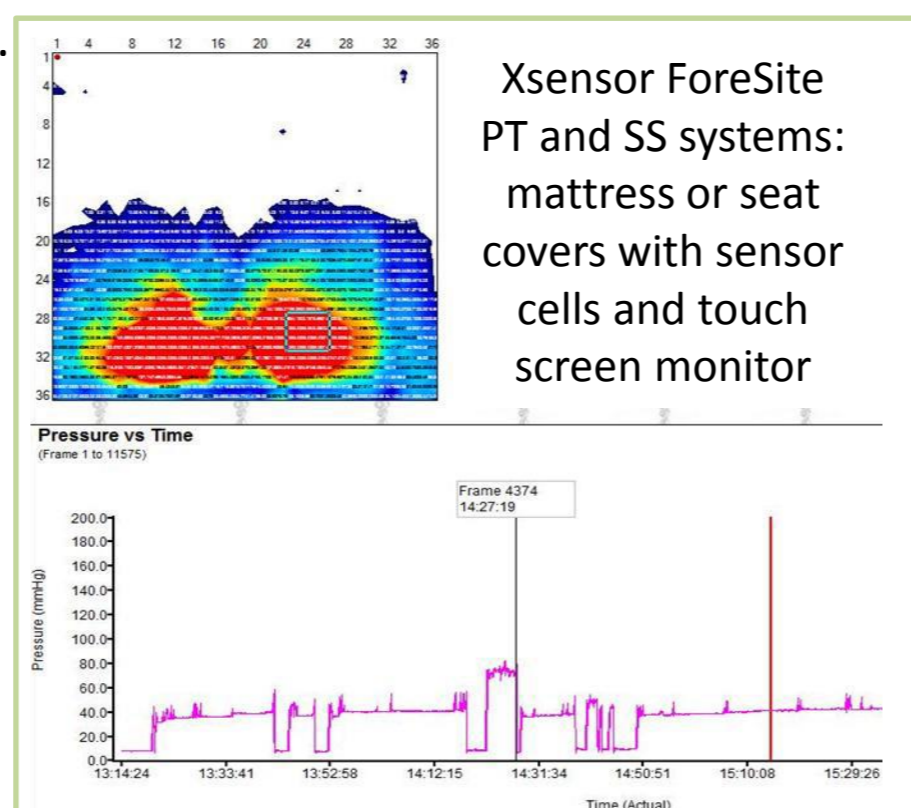
**Abstract:** Pressure ulcers remain a significant concern to the NHS; approximately half a million people in the UK will develop at least one pressure ulcer in any given year, with many developing in community settings. For a number of people, pressure ulcers can be very long term and hard to heal. The PROMISE quality improvement study will build on existing work to explore the impact of continuous pressure monitoring in different community settings, and understand the barriers and facilitators to further spreading of the project.

## PROMISE: Continuous pressure monitoring (CPM)

- Pressure mapping for short periods of time (20 min) has been used routinely to assess seating solutions, often in a seating clinic.
- Continuous pressure monitoring (CPM) has been used in hospitals, as an alert for when patients should be turned.
- CPM in the community is used to identify posture and positions that are compatible with healing, whilst enabling a patient to lead a 'normal' life.
  - ❖ Monitor is left in place with patient for 24-72 hours, in their own home.
  - ❖ Health care professional removes the equipment, downloads and analyses data.
  - ❖ Health care professional returns to patient to discuss data and changes to equipment or behaviour
  - ❖ Shared decision on equipment and advice.

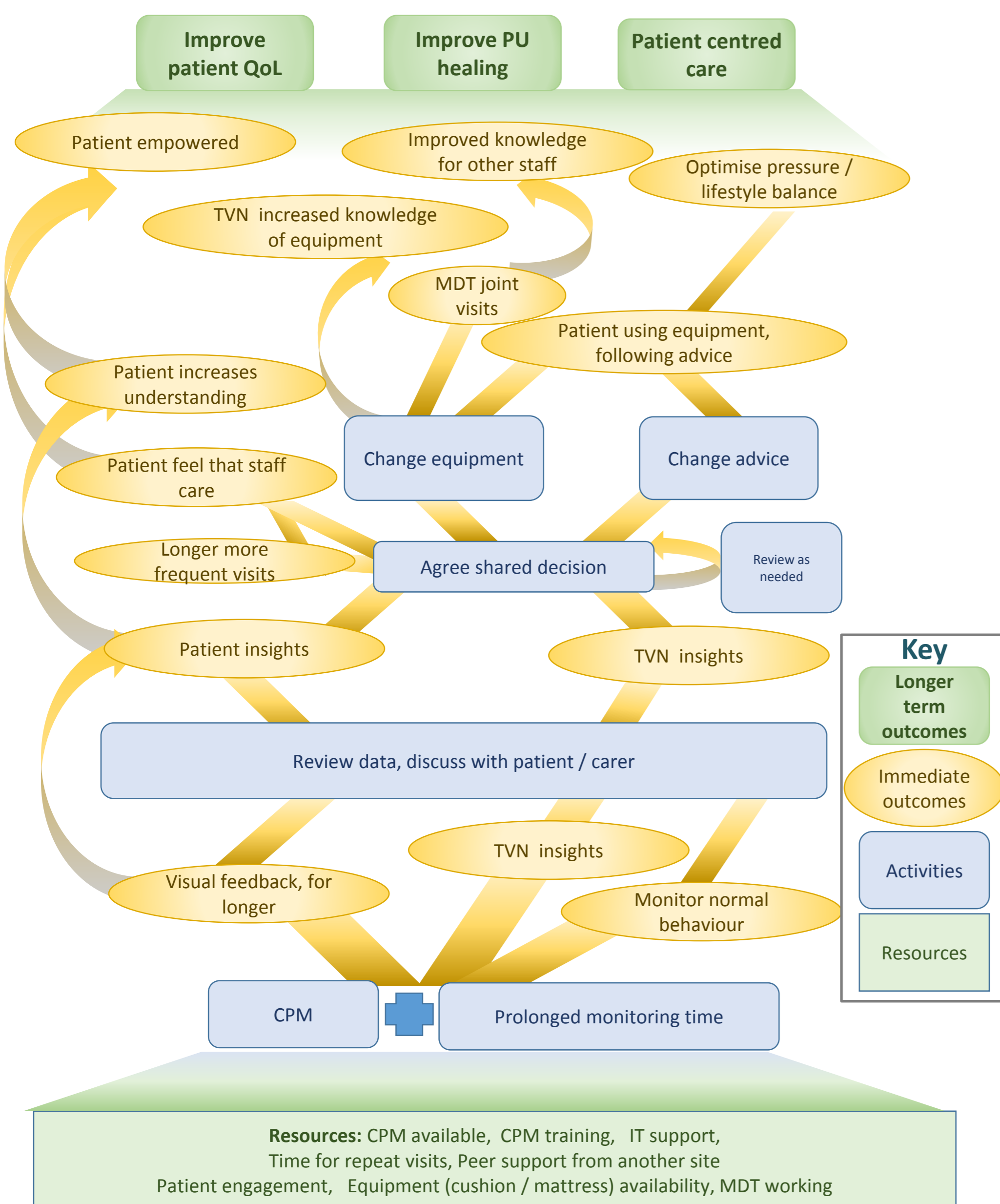
### Key intervention components

- **Pressure monitoring** equipment and training
- Monitoring over **extended time period**
- **Sharing information** from monitoring with patients and carers
- **Holistic** approach to find an appropriate solution
- Extended **follow-up** to monitor progress
- Processes to provide **required equipment**



## PROMISE: Theory of Change, or how we think it works

**More than a new bit of equipment:** The introduction of CPM for a prolonged time in the patient's home leads to many changes for both patients and staff. Patients and carers see how pressure changes with their activity (biofeedback). Health care professionals gain more knowledge of the patient's lifestyle and requirements.



## PROMISE: Implementation

A Health Foundation Scaling Up project (2017-2020) led by Nicci Aylward-Wotton, Cornwall Partnership NHS Foundation Trust.

Recruitment of patients started in November 2018, and will finish in March 2020.

### Project objectives

- To **implement CPM** across **multiple community** clinical sites
- To create a **supportive network** for sharing learning during the implementation of the technology
- **Evaluate the clinical impact** of the CPM intervention on patients, carers and clinicians
- **Identify differences** in the translation of the CPM intervention across the adopter sites
- Evaluate the **economic and societal impact** of the CPM technology.

**61** Patients recruited to date

**46** Patients mapped to date

**3** Tissue viability teams

**1** District nursing team

### PROMISE has been implemented by:

- Livewell South West, Plymouth (Nov 2018)
- South Devon and Torbay NHS Foundation Trust (May 2019)
- Somerset Partnership NHS Foundation Trust (July 2019)
- Redruth District Nursing team, Cornwall Partnership NHS Foundation Trust (Nov 2018)

The project team have created training resources, which have been adapted following feedback from sites. Staff found mentoring from the project lead and peer support have been very important in implementing promise. Stakeholder meetings have involved key staff from other areas, increased joint working and support from equipment providers has been essential.



## PROMISE: Evaluation

Healthcare scientists in Cedar, (Cardiff and Value UHB) are carrying out independent evaluation for PROMISE using a pragmatic mixed methods approach and looking at the impact of PROMISE on both patients and staff. In addition to clinical outcomes we are studying the implementation process and how PROMISE is adapted by the different sites. Cedar will also use the data collected to model the resource requirements of CPM in the community.

### Formative evaluation

- Monthly Whatsapp poll to staff
- Monthly data summary
- Evaluation meetings
- Interim report

### Summative evaluation

- Final report (October 2020)
- Peer reviewed publication

This is the 2nd grade 4 sore.....The treatment this time is much, much better [patient]

**Patients and carers:** most found mapping comfortable and helpful. Some used the monitoring to identify better posture or to understand the advice given.

**Staff** have reported changes in how they think about treating patients with pressure ulcers, and a greater understanding of equipment availability and suitability. In one poll 6 out of 7 staff said they had also changed how they work with patients who are not part of PROMISE.

...[its] making me reflect more and making me not so reliant on pieces of equipment so much, but looking outside the box and thinking about things as well. [staff]

