

## Pressure Ulceration in Long Term Care: Lessons from a Four Year Health Service Evaluation

**Background:** Pressure ulcers cause pain, discomfort and reduced quality of life to the individual and are costly to the healthcare provider. Frail older adults are at increased risk of pressure ulcer development. Monitoring and evaluation of pressure ulceration is necessary to guide improvements in service and quality of care. The development of pressure ulcers can increase the length of stay in health care settings and the cost of treating pressure ulcers is estimated to range from €45 to €430 per day depending on the severity of the pressure ulcer.

**Methods:** This is a four year (2013-2016) retrospective health service evaluation of pressure ulceration data at a large long term care facility in Ireland. The aim of the study was to describe trends in total person time exposed to pressure ulceration over four years and to examine differences in pressure ulceration in persons admitted with a pressure ulcer compared to residents who acquired a pressure ulcer.

**Results:** 105 patients experienced pressure ulceration with 133 pressure ulcers identified over four years. Half of all new cases of pressure ulceration were acquired while resident and half were acquired prior to admission. A downward trend in total person days spent with pressure ulceration was observed from 2014 (n=3051 days) to 2016 (n=1803 days). A higher proportion of those admitted with pressure ulceration experienced sacral and heel ulceration and grade three and four ulcers compared to residents.

**Conclusions:** These findings provide evidence to support further development of clinical practice and education by the tissue viability clinical nurse specialist at this facility. The location of pressure ulceration in "non- traditional" sites in residents has implications for nurse education and equipment at the facility whilst the "traditional" locations found in those admitted with pressure ulceration will inform educational content for informal carers and formal home care staff.

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