Shared learning

Theme of the week

Wound Passports when Transferring Patients to Acute Care

Date

23/09/2024

Background and context

Patient with ongoing skin issues on malleoulus (since 2021) and excoriation on the surrounding site of gastrostomy tube due to gastric leakage (since 2020) which was dealt with by Multi-disciplinary team developed a scar on Baclofen pump site on January 2024 which required hospital admission to surgical stitch the dehiscence. During the hospital admission, the patient's other skin issues were raised as a safeguarding concern due to lack of nursing handover about the history of actions taken and current tissue viability management.

What happened?

Patient with ongoing skin issues on malleoulus (since 2021) and excoriation on the surrounding site of gastrostomy tube due to gastric leakage (since 2020) which was dealt with by Multi-disciplinary team developed a scar on Baclofen pump site on January 2024 which required hospital admission to surgically stitch the dehiscence.The existing skin issues were handed over by the staff nurse. The series of skin issues were screened as a safeguarding incident and was referred to local authority. No communications were made from the acute hospital to RHN to discuss this.

What should have happened?

Staff Nurse to deliver a clear handover about the skin issues and actions taken by the Multi-disciplinary team.

A complete body map should have been carried out and handed over to the receiving hospital including the positioning and tissue viability guidelines.

Photos of skin issues should have been taken before the patient was transferred to the hospital for reference.

What we will do differently next time

Ward staff to complete a body map and include this during the endorsement process when transferring patient to the acute hospital together with positioning and tissue viability guidelines.

Staff to take photos of skin issues prior to the transfer.

Tissue Viability Nurse to populate a wound passport to be provided for all residents with pressure ulcer and medically extensive wound concerns.

Ward staff to hand over the wound passport to the receiving hospital.

What have we learned?

Staff must hand over and practice the following actions:

-Complete a full body assessment, take photos of skin issues, and complete a body map
-Send positioning and tissue viability guidelines, body map,and wound passport
-Ward staff management to ensure that all residents with pressure ulcer and extensive wound concerns has a wound passport
-Ensure that residents with skin issues are reviewed by TVN and is evidenced by documentation

☑ I have read this

Name	Job role	Signature