

## St Luke's ElderCare Ltd

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### Introduction / Background

Pressure injuries (PIs) are a significant and preventable source of morbidity in nursing homes, with prevalence rates of 11-20%.<sup>1</sup> They result from prolonged shear and pressure forces, leading to complications like infection and increased healthcare utilization.<sup>2</sup> A literature review identified a gap in both knowledge and local data on PI management practices, which traditionally rely on isolated disciplinary approaches rather than collaboration.<sup>3</sup>

To address this, St Luke's ElderCare Residence@AMK established a multidisciplinary wound care team. This collaborative framework enables comprehensive, evidence-based decision-making and facilitates proactive interventions and preventive strategies. The initiative aims to bridge the identified knowledge gap and achieve excellence in PI management through a structured, team-based approach.

### Goal / Objectives

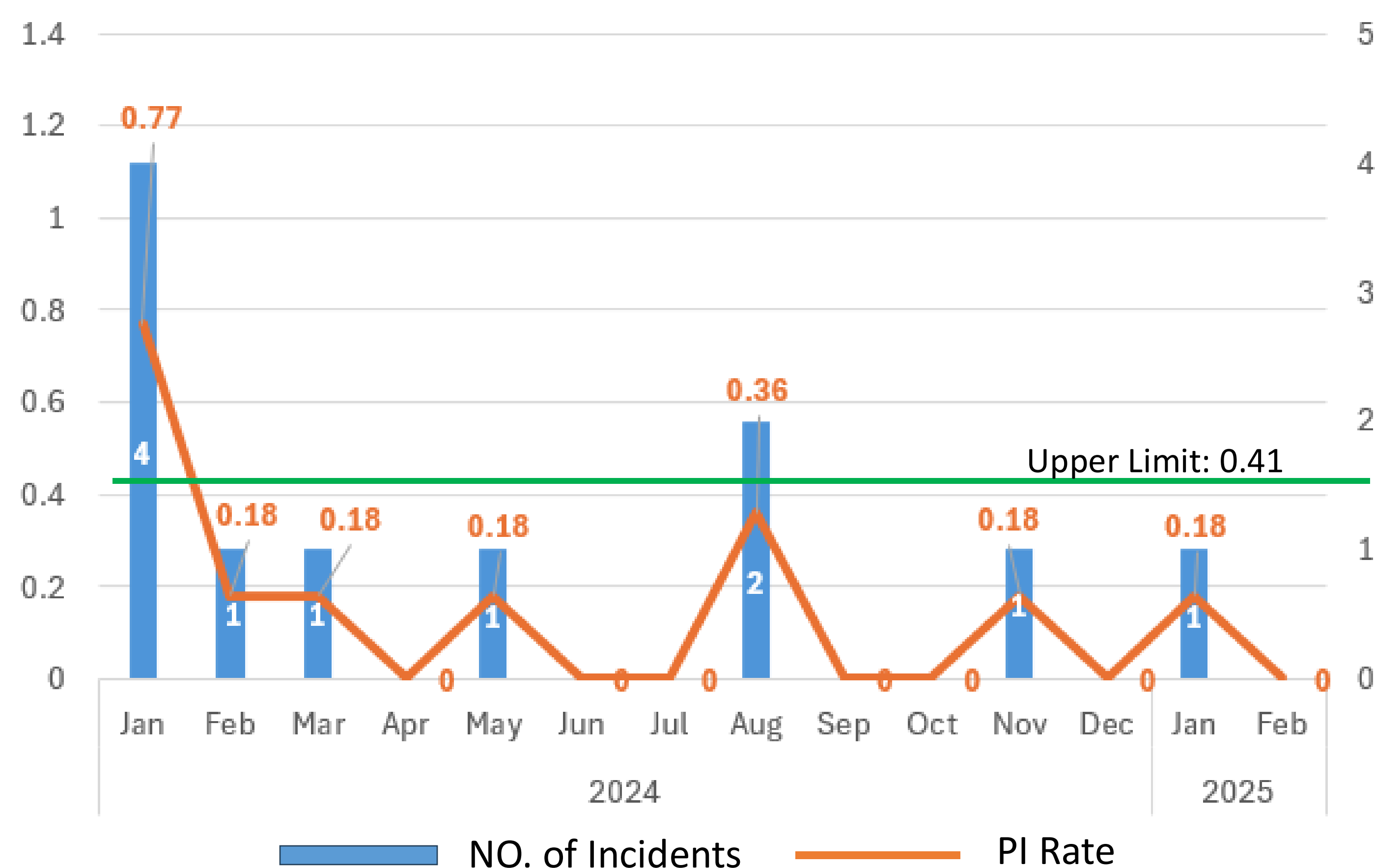
The initiative establishes a multidisciplinary wound care team to optimize treatment through evidence-based practices and a collaborative approach. The primary goal is to achieve a 100% healing rate for stage II and above PIs within 12 months while reducing the average healing time.

Objectives are threefold:

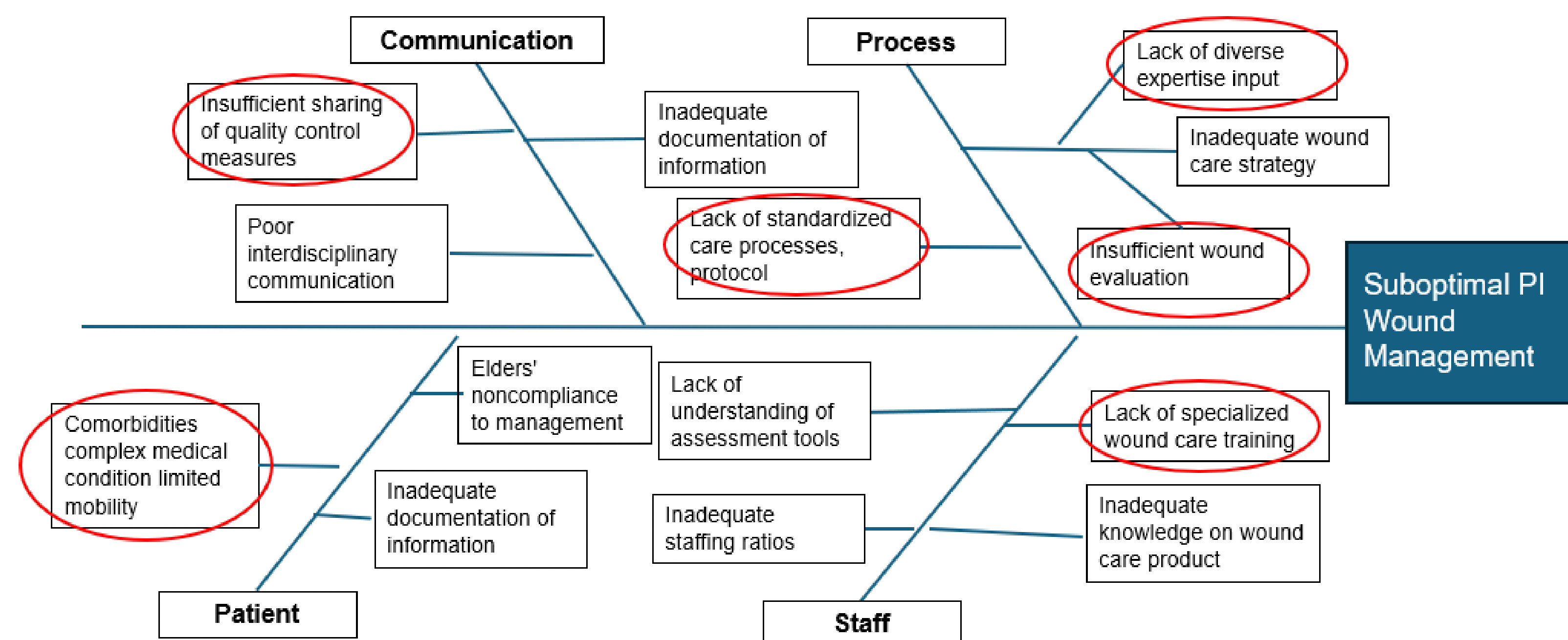
1. To reduce the prevalence of facility-acquired PIs by 25% within 12 months via standardized protocols
2. To achieve a 90% healing rate for existing injuries through a multidisciplinary care model
3. To ensure 100% of nursing and allied health staff complete competency-based training in prevention and management within the first year

### Problem Analysis

Prevalence of Pressure Injury from Jan 2024 to Feb 2025 in SLR@AMK



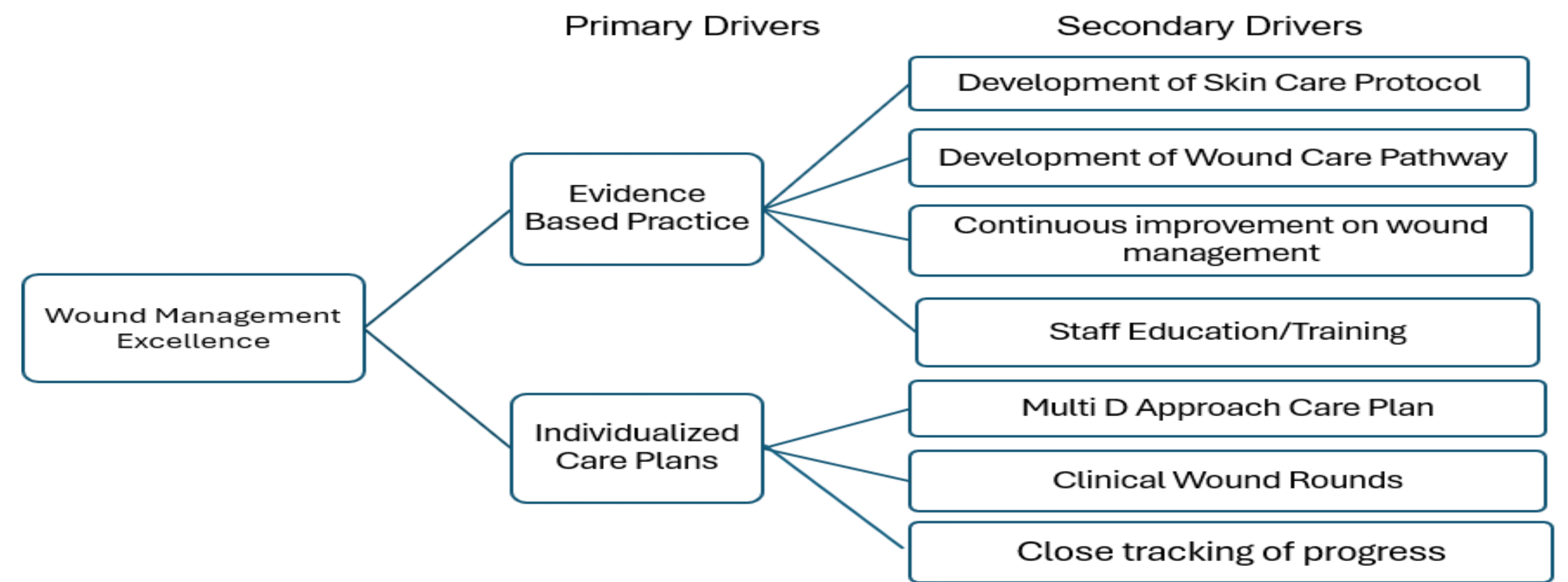
### Root Cause Analysis to Identify Underlying Barriers and Challenges



Key issues identified:

1. Absence of standardized protocols and pathways
2. Insufficient multidisciplinary collaboration
3. Inadequate quality control and incident learning processes
4. A lack of continuous training and education
5. Resident complexity due to comorbidities like malnutrition

### Implementation Plan



### Standardized Protocols

- Development of evidence-based skin care and wound care pathways to ensure consistent assessment, prevention, and treatment.

### Development of wound care pathway

- Developed a comprehensive wound care pathway, including guided wound assessment and staging, wound cleansing and offloading, dressing selection and application.

### Continuous improvement

- Conducted regular audits and reviews of practices to identify areas for improvement and share lessons learned across teams.

### Staff education and training

- A tailored education program was developed to address the diverse learning needs of all staff levels.

### Multidisciplinary approach

- Establishment of a dedicated team involving doctor, dietitian, wound nurse clinician, and trained wound champions to guide holistic care.

### Clinical wound rounds

- Conducted monthly clinical wound rounds to monitor wound progress and a tracking system with photographic documentation to monitor progress and facilitate timely interventions.

### Example of Wound Care Pathway

Week 1

Date initiated:

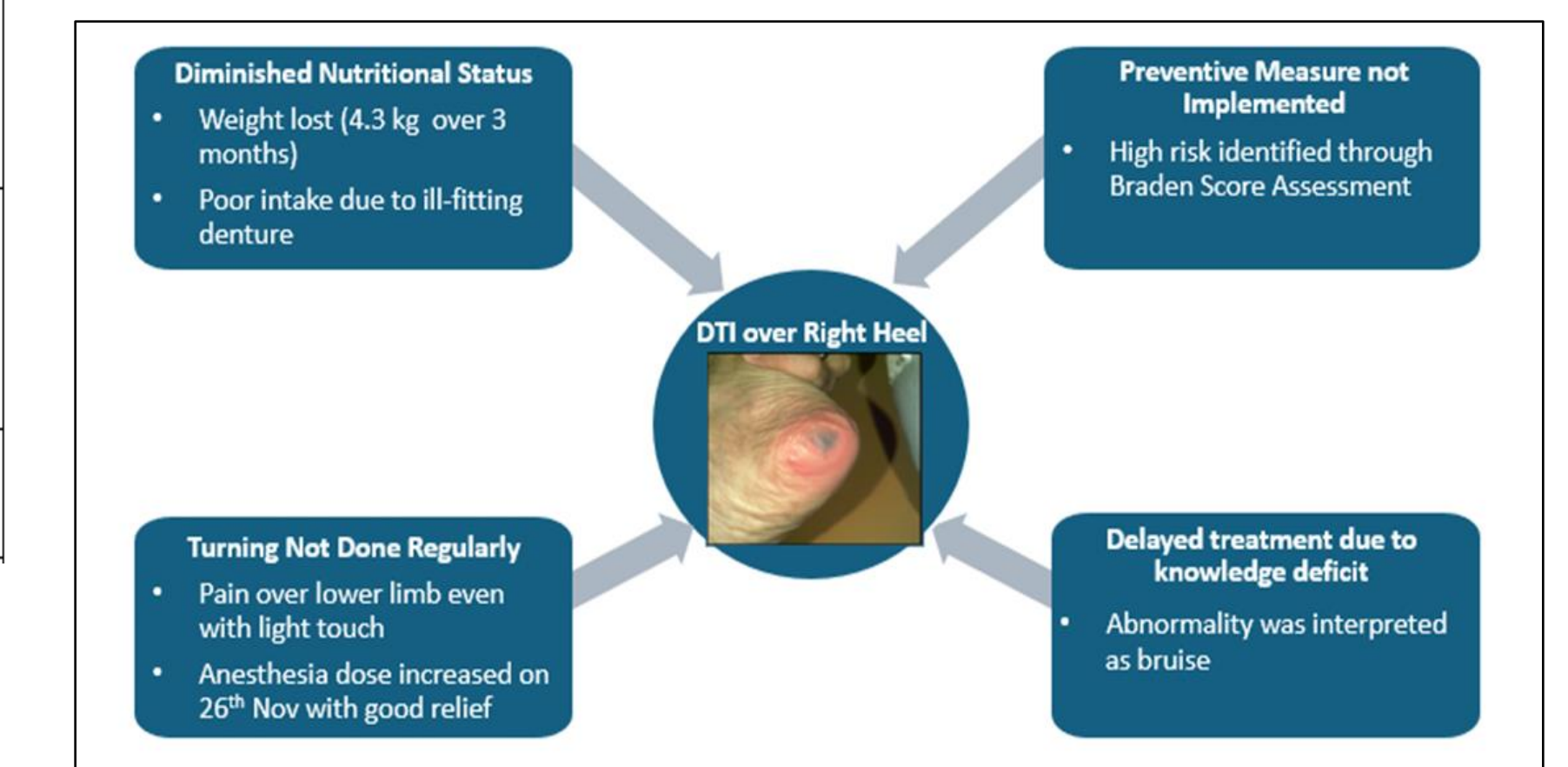
Tick once completed	Assessment	Completed Date	Done By	Remarks
	Wound Background <input type="checkbox"/> Admitted with Wound <input type="checkbox"/> Newly developed wound			
	Wound Assessment (wound chart in Lee Care and silhouette) <input type="checkbox"/> Stage 1 Pressure Injury <input type="checkbox"/> Stage 2 Pressure Injury <input type="checkbox"/> Stage 3 Pressure Injury <input type="checkbox"/> Stage 4 Pressure Injury <input type="checkbox"/> Deep Tissue Pressure Injury <input type="checkbox"/> Unstageable Pressure Injury			
	Skin Assessment (Lee Care) <input type="checkbox"/> Braden Score Assessment <input type="checkbox"/> High Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Low Risk			
	Pressure Relieving Devices <input type="checkbox"/> Alternating Air Mattress <input type="checkbox"/> Heel Lifter <input type="checkbox"/> Heel Protector <input type="checkbox"/> Elbow Protector			
	Prevention Measures • Offload Pressure Points • Hourly Turning			

### WHO – The Multidisciplinary Wound Team

- Wound Nurse Clinician – Provides expert guidance on wound management and ensures a holistic approach to wound prevention and treatment.
- Wound Champions – A team of three dedicated nurses trained in advanced wound care assigned to the nursing home, responsible for wound care and ongoing resident management.
- Doctor – Optimizes the resident's overall medical chronic condition for wound healing such as diabetic control, manages pain, and prescribes essential vitamins to support wound healing.
- Dietitian – Assesses nutritional status and recommends suitable products and supplements such as Arginaid, Abound and protein powder to aid in wound recovery.

This collaborative approach ensures comprehensive and consistent wound care, leading to improved healing outcomes and enhanced quality of life for residents.

Example of continuous learning: Identifying areas for improvement and close monitoring of wound progression



### Benefits/Results

The multidisciplinary wound care initiative achieved exceptional outcomes in 2024. It successfully healed 100% of its 18 PI cases, with an average healing duration of 19.6 days. The program also resulted in a 70% reduction in facility-acquired injuries (from 33 to 10 cases) compared to 2023. Furthermore, 100% of nursing and allied health staff completed the required training. These results establish a valuable benchmark for PI management in similar settings.

### Sustainability & Reflections

The program's sustainability is ensured by embedding excellence into organisational culture through standardised protocols, ongoing staff training, and the continuous integration of insights to refine best practices.

#### Reference

- (1) Aloweni, F., Lim, S. H., Gunasegaran, N., Ostbye, T., Ang, S. Y., & Siow, K. C. E. (2024). Community-Acquired Pressure Injuries: Prevalence, Risk Factors and Effect of Care Bundles—An Integrative Review. *Journal of Clinical Nursing*, 10(6), 1-11. <https://doi.org/10.1111/jocn.17431>
- (2) Fadhalah, T. A., Lari, M., Salem, G. A., Ali, S., Khariji, H. A., & Elamir, H. (2023). Prevalence of pressure injury on the medical wards of public general hospitals in Kuwait: A National Cross-sectional study. *BMC Health Services Research*, 9(4), 112-116. [https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-024-10615-x?utm\\_source=chatgpt.com](https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-024-10615-x?utm_source=chatgpt.com)
- (3) Dhingra, L., Schechter, C., DiFiglia, S., Lipson, K and Portenoy, R. (2023). Pressure Injuries in Nursing Homes: Investigating Racial/Ethnic Differences Using National Data. *Journal of Long-Term Care*, 13(1), 209-230. <https://doi.org/10.31389/jltc.185>