

Information Governance

Wrightington Hospital
Hall Lane
Appley Bridge
Lancashire
WN6 9EP

Tel: 01257 488271
Email: FOI@wwl.nhs.uk
Web: www.wwl.nhs.uk

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27th April 2018

Dear

INFORMATION REQUEST UNDER THE FREEDOM OF INFORMATION ACT 2000

We are now pleased to respond to your request for information under the FOI Act.

You asked

1. *How many times a day (24 hours) do you change a patient with a urinary incontinence pad/bed pad?*

On admission to a ward each patient receives a water-low assessment to assess tissue viability through a skin inspection. This is completed within 2 hours of admission and will provide a risk score in relation to a patient's risk of tissue damage or developing a pressure sore. If the score is greater than 10 a SKINN bundle flow chart is implemented which details actions required to prevent skin damage. There is an incontinence management section included in this SKINN bundle. SKINN inspection is undertaken as a minimum daily and documented on the SKINN bundle for patients with a water-low score of greater than 10. Each time a patient is repositioned as per their individual care plan (if immobile) they are checked for incontinence and the skin inspected, these observations and care interventions including changes of pads or applications of creams are documented.

In addition to following an individualised plan of care for each patient based on assessments that indicates how often a patient should be assessed for incontinence, each patient should have contact with a member of the nursing team every hour as per the hourly rounding system providing opportunities to review patient comfort, including providing assistance to change incontinence aids for patients that are mobile and providing repositioning and skin inspections for those who are not.

2. *What is the average length of time per patient to change a soiled urinary incontinence pad/bed pad?*

Please see response to question 1.

3. *Of those patients who have a urinary incontinence pad, what proportion do you estimate will develop incontinence associated dermatitis over time?*

We do not currently collect this data.

4. *How many patients today have incontinence associated dermatitis in your Trust?*

We do not currently collect this data.

5. *How many times a day (24 hours) do you assist a patient with incontinence associated dermatitis?*

We do not currently collect this data.

6. *What is the average length of time per patient to assist with incontinence associated dermatitis?*

We do not currently collect this data.

7. *How many incidences of incontinence related dermatitis or skin breakdown associated with pad use were there in your institution in the last 12 months? How many patients, what percentage of all patients in a body worn/non-body worn pad is this?*

We do not currently collect this data.

8. *What 3 main actions has the trust deployed or is planning to deploy to reduce incontinence related dermatitis?*

Incontinence Associated Dermatitis is discussed on clinical induction for all new starters' bands 1-7 within the organisation; this includes presentation, management and prevention.

Product awareness with regards to washing/ drying and cream application is arranged on regular basis – usually 2-4 times per year.

There will be a significant focus on the prevention and management of Incontinence Associated Dermatitis prevention and management within the link nurse education programme.

9. *What is the impact on increased length of stay for an average patient in your trust with incontinence related dermatitis?*

We do not currently collect this data.

10. *What is the increased per patient cost of a incontinence related dermatitis treatment (e.g. Cauti, extended hospital stay, nursing time, drug treatment, bed blocking etc.)*

We do not currently collect this data.

I trust that this information is helpful to you, however if you are not entirely satisfied with this response please do not hesitate to contact the Information Governance Department on 01257 488271. If we do not hear from you within 28 days we will assume that we have been able to accommodate your request under the Freedom of Information Act 2000.

Yours sincerely,



Andrew Foster
Chief Executive

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If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a decision. Generally the ICO cannot make a decision unless you have exhausted the complaints procedure at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF