Recognising and celebrating success: a way of improving patient care



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This editorial is inspired by a rather powerful statement that Jeanette Milne made at the Wounds UK Lower Limb Conference in Bristol earlier this year. As part of her lecture on Promoting Self-care and Meeting Patient Expectations, she spoke about "Celebrating your successes — those differences you've made to a patient. Look for your glimmers of brilliance" (Milne, 2019). This made me think about how we recognise and share achievements and successes in clinical practice. Does your place of work facilitate reflection on patient cases with positive outcomes or does it only focus on when a problem or clinical incident arises? Are there regular opportunities to showcase your and your team's achievements or any behind-the-scenes work? As an example of celebrating success, I was pleased to see a new category for Wound Prevention and Treatment at this year's RCNi Nurse Awards (RCNi, 2019). This category recognises individual nurses or nurse teams in any setting who protect and maintain skin integrity or improve wound care through their skill, innovation and commitment.

RCNI NURSE AWARDS 2019

The winner of the award this year was **Emma Williamson**, a Practice Nurse Manager. She made a business case for a new Doppler machine and training nurses on leg ulcer management. The implementation of this has transformed her practice by increasing the number of healed wounds, improving patient experiences, as well as freeing up nursing time. In Emma's weekly clinic, patients get their blood taken, leg washed and dressed, undergo Doppler exams and are referred to weight loss and smoking cessation services if required. The reduction in active leg ulcers has been estimated to have saved 16 hours of nursing time per week and the cost of supplies has fallen.

Finalists for the award included **Alison Williams**, a Lead Tissue Viability Nurse Specialist at Kingston Hospital NHS Foundation Trust, who devised, wrote and implemented a pressure ulcer strategy to reduce the number of avoidable pressure ulcers at her Trust. At-risk patients are now discussed at a daily medical therapies session and the completion

of skin condition documentation has become routine, improving handovers to community teams. As a result, the number of trust-acquired avoidable pressure ulcers has fallen by almost 50% .

Julie Mullings is a Community Matron for Tissue Viability who designed and implemented a community leg ulcer pathway to improve clinical outcomes and patient experience at her Trust. The holistic assessment at Manchester University NHS Foundation Trust includes leg ulcer and wound assessment charts as well as a treatment algorithm. Julie ran the launch and pilot, trained district nursing teams and collected healing data. Healing rates have improved from 123 to 69 days, with treatment costs down by almost half. Her pathway is now being adopted across the North-West of England.

The Wound Care Service In-Reach Team at Bristol Community Health devised a training model whereby specialist tissue viability nurses share their expertise with clinicians and patients. The initiative has improved the assessment and treatment of wounds and reduced pressure ulcers. Community nurses have reported that the closer working arrangement has increased their wound care knowledge and confidence. Other improvements are evident, with a 80% reduction in patients waiting for Doppler assessments.

A research study by **Dr Jemell Geraghty** from the Royal Free London NHS Foundation Trust examined the experiences of people who inject drugs who have leg ulcers, causing them long-term, chronic pain. The patients reported negative experiences with clinicians and one of study's recommendations is more training to ensure that these patients can access appropriate treatment in a caring environment.

By sharing the successes of these nurses, I hope to encourage you to reflect on your own clinical practice and consider sharing your successes, however small they may seem. What are your 'glimmers of brilliance' — those differences you or your team make to a patient? We would like to hear about those so please consider sharing your experiences, so we can disseminate your successes.

REFERENCES

Milne J (2019) Promoting Self-care and Meeting Patient Expectations. Wounds UK Lower Limb Conference, Bristol

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