BACKGROUND

The Aged Care Rapid Response Team (ARRT) was overwhelmed with referrals for residents for chronic wound advice and received fewer management, and referrals for acutely unwell deteriorating residents at risk of hospitalisation.

50% of residents in Residential Aged Care Facilities (RACF) have one or more wounds (Edwards et al. 2015).

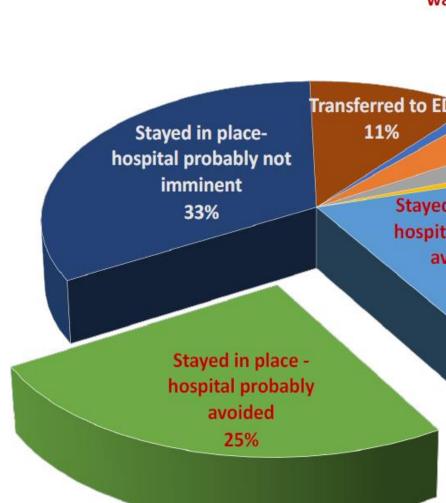
The older person has complex wound care needs often requiring transfer to hospital for intervention.

The Community Home Nurses do not provide wound care in RACF's and there is no alternative service available.

"The nurse was able to come to mum's nursing home, whilst there, she was able to treat my mother, and give advice to the nursing staff who attend her on a daily basis. My mum has now healed and we have a protocol in place to prevent the wound recurring. We are very grateful for the care provided by this service"

- Tandi .

Service Type	Count	
On-site visit	103	
Phone call	55	
Email	33	
In-hospital visit	1	
Other	2	
Grand Total	194	



Complex wound assessment & management

Education & mentoring of RACF staff

RESIDENTIAL AGED CARE FACILITY WOUND SERVICE/

Hospital avoidance

Providing expertise in wound management to residents in care facilities

Lower North Shore, Ryde, Hunters Hill Emma Floyd ARRT CNC & Therese Jepson ARRT CNC

Liaison with hospital based specialties

Expert clinical advice

Wound severity, by Wound Severity Tool Score

WST <20 WST >40 9% WST 30-40 53% **Bates-Jensen Wound Assessment Tool Severity** Scale •< 20 low severity • 20 – 30 moderate severity •30 – 40 Moderate to High severity

Aged Care Rapid Response Team



Health

Outcome after Occasion of Service

Admitted directly to ward (including MAU) [%] Patient currently in hospital (predischarge visit) 5% Patient currently in hospital-early Stayed in place discharge expedited hospital possibly avoided Service Inappropriate-21% **Referred to other** provider 1%

RACF WOUND SERVICE

Working in partnership with families GPs and RACF

> Person centred goals of care

A Ministry of Health Winter Strategy Funding to develop a temporary 12 week RACF Wound Service from July – Oct 2018, to increase ARRT's capacity to reduce avoidable hospital presentations, while still providing wound management services to RACF residents.

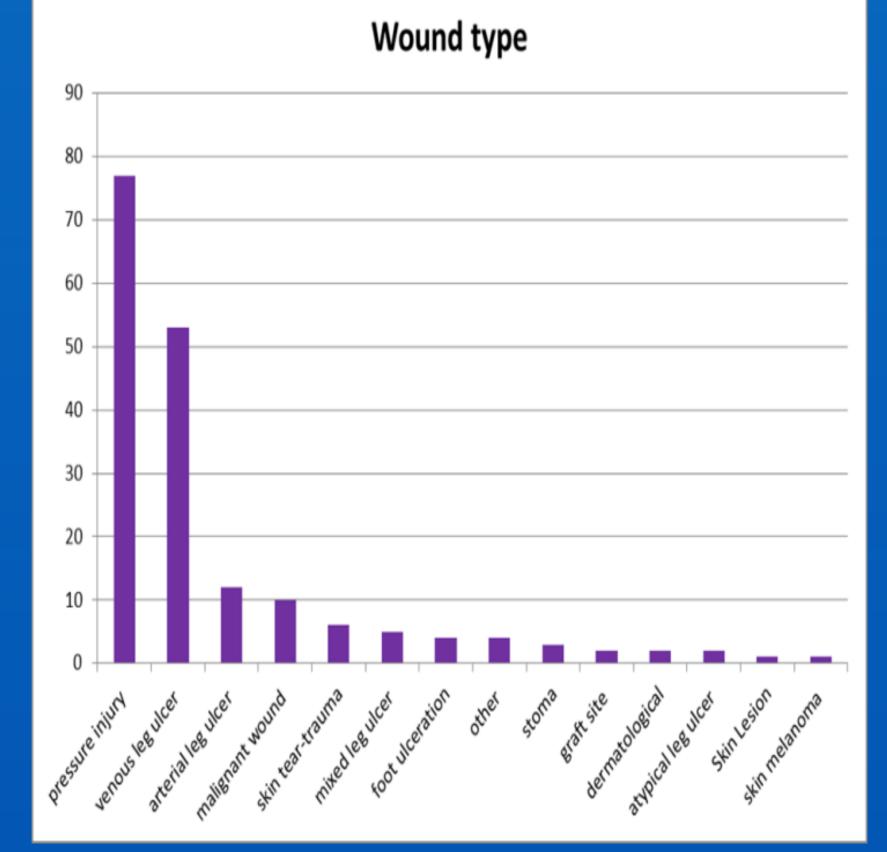
It was a collaborative project between the ARRT and Northern Sydney Home Nursing Service (NSHNS).

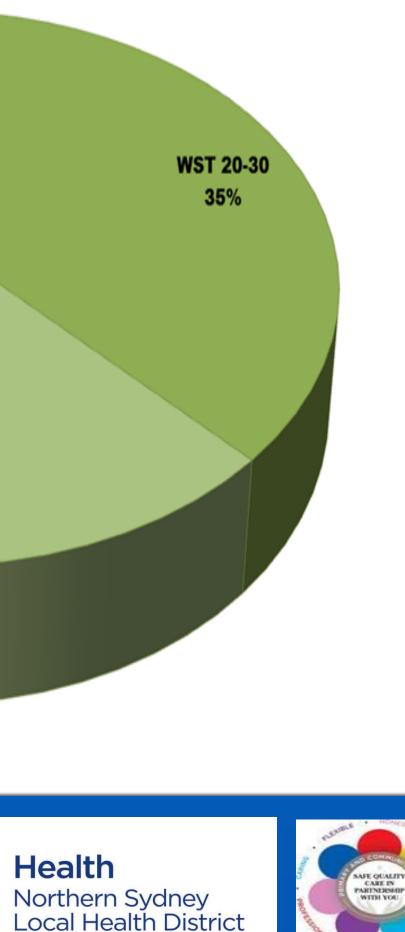
Two Clinical Nurse Specialists were seconded to form a new temporary wound outreach team to RACFs.

Cost effective product selection

• The top 10 reasons for referral to ARRT no longer include chronic wound care • ARRT referrals are now primarily for infections , functional/cognitive decline and delirium • We received positive feedback from the RACFs regarding ARRT and the wound service • RACF staff reported increased skill and confidence

- in wound care
- Improved resident comfort





OUTCOMES

• Implementation of evidence based practice

Education type provided	Number of episodes
Bedside teaching	97
Resident or Family education	10
Group education	5
Resources provided	19
Grand Total	131