

Implementing Stop the Pressure

A Practical Guide to

Eliminating Heel Pressure Ulcers

Friday 3 February 2017 De Vere West One Conference Centre, London

10% card payments discount*
15% Group booking discount**



Chair & Speakers Include:

Tina Chambers

Vice chair

Tissue Viability Society

Tissue Viability Consultant

Educator and Advisor

Tina Chambers Ltd

Jennie Hall

Senior Nursing Adviser

Nursing Directorate

NHS Improvement

Visiting Professor

Kings College University

Professor Mark Radford

Director of Nursing

NHS Improvement

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**"The Heel is the second most common site for pressure ulcer development"
Nursing Centre, 2015**

"700,000 are affected by Pressure Ulcers each year"

"Each Pressure Ulcer adds £4000 to the costs of care"

"186,617 people developed a Pressure Ulcer in hospital each year"

**"Research shows between 80% and 95% are avoidable"
Stop the Pressure Campaign, NHS England**

"Pressure ulcers will be priority areas for 2016/17 as the first part of our programme on patient safety initiatives" NHS Improvement, Business plan 2016/17, July 2016

This conference, chaired by Tina Chambers, Vice Chair of the Tissue Viability Society, focuses on a practical guide to eliminating heel pressure ulcers.

National updates and practical case studies will focus on:

- Reducing avoidable heel pressure ulcers
- Changing practice in the early detection of heel pressure ulcers
- Reducing the incidence of hospital acquired heel pressure ulcers in practice
- Undertaking effective Heel Checks
- React to Red: Communicating heel pressure ulcer prevention
- Vascular assessment of heel pressure ulcers
- Predictors of Healing in Heel Pressure Ulcers
- Multidisciplinary management of heel pressure ulcers
- Learning from RCA investigations relating to heel pressure ulcers
- Managing heel pressure ulcers in the community

"Pressure ulcers represent a major burden of sickness and reduced quality of life for people and their carers. They can be debilitating for the patient, with the most vulnerable people being those aged over 75. Pressure ulcers can be serious and lead to life-threatening complications such as blood poisoning or gangrene. Research suggests that between 80-95% are avoidable" NICE Draft Quality Standard for Pressure Ulcers January 2015

10.00 Chairman's Introduction

Tina Chambers

*Vice chair Tissue Viability Society
Tissue Viability Consultant, Educator and Advisor Tina Chambers Ltd*

10.10 Stop the Pressure: An update from NHS Improvement

Jennie Hall

*Senior Nursing Adviser Nursing Directorate
NHS Improvement
Visiting Professor Kings College University*

and Prof Mark Radford

*Director of Nursing
NHS Improvement*

- stop the pressure update

10.40 Reducing the incidence of hospital acquired heel pressure ulcers in practice

Deborah Gleeson

*Lead Nurse Service Manager, Tissue Viability
St Helens NHS Trust*

- a multifaceted approach to heel pressure ulcer reduction
- working with patients
- measuring improvement
- what works: our experience

11.10 Question and answers, followed by tea & coffee at 11.20

11.35 Changing practice in the early detection of heel pressure ulcers "Deal with Heel": Undertaking effective Heel Checks

Sarahjane Jones

Research Fellow Birmingham City University

With Viola Sidambe

*Tissue Viability Specialist Nurse
University Hospitals Coventry & Warwickshire NHS Trust*

- changing practice in the early detection of heel pressure ulcers
- deal with heel: collaborative approach with community and acute trusts
- enabling nurses to carry mirrors to undertake regular heel checks
- what have we learnt and how we have reduced heel pressure ulcers in Birmingham City University

12.05 Think Heels: Communicating heel pressure ulcer prevention

Judy Elliott

*Tissue Viability Nurse Specialist
East Kent Hospitals University NHS Foundation Trust*

- undertaking an RCA investigation of a heel pressure ulcer
- what we have learnt from RCA investigations in this area
- our experience: ensuring the equipment is available and rolling out "Heel Watch"

12.50 Question and answers, followed by lunch at 13.00

14.00 Learning from RCA investigations relating to heel pressure ulcers

Pauline Vyse

*Senior Tissue Viability Clinical Nurse Specialist
West Hertfordshire Hospitals NHS Trust*

- undertaking an RCA investigation of a heel pressure ulcer
- what we have learnt from RCA investigations in this area
- our experience: ensuring the equipment is available and rolling out "Heel Watch"

14.30 EXTENDED SESSION: Predictors of Healing in Heel Pressure Ulcers

Elizabeth McGinnis

*Nurse Consultant Tissue Viability & Honorary Clinical Associate Professor
University of Leeds*

- predictors of healing in heel pressure ulcers
- implications for management
- our experience in Leeds

15.15 Question and answers, followed by tea & coffee at 15.25

15.45 EXTENDED SESSION: Multidisciplinary management of heel pressure ulcers

Tina Chambers

*Vice chair
Tissue Viability Society
Tissue Viability Consultant
Educator and Advisor
Tina Chambers Ltd*

- effective management of heel pressure ulcers
- the role of the podiatry team
- what works? The evidence

16.30 Managing heel pressure ulcers in the community

Rosie Callaghan

*Tissue Viability Nurse
Worcestershire Health and Care NHS Trust*

- managing heel pressure ulcers in the community: what works?
- working with care homes and the community to eliminate pressure ulcers
- reducing the number of patients admitted with pressure ulcers

17.00 Question and answers, followed by close at 17.10

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Conference Registration

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For more information contact Healthcare Conferences UK on **01932 429933** or email jayne@hc-uk.org.uk

Venue

De Vere West One, 9-10 Portland Place, London, W1B 1PR.
A map of the venue will be sent with confirmation of your booking.

Date Friday 3 February 2017

Conference Fee

- ☐ £365 + VAT (£438.00) for NHS, Social care, private healthcare organisations and universities.
☐ £300 + VAT (£360.00) for voluntary sector / charities.
☐ £495 + VAT (£594.00) for commercial organisations.

The fee includes lunch, refreshments and a copy of the conference handbook. VAT at 20%.

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