POLICY STATEMENT

The skin is the largest multi-functional organ on the body and is also the most visible. It is important to keep the skin healthy. The skin must be intact and the barrier function of the skin is not to be compromised.

Promoting healthy skin will have an impact on a service user's quality of life and their wellbeing.

Homecare D & D Ltd believes that adherence to strict guidelines on tissue viability is of paramount importance in ensuring the safety of both service users and staff.

Homecare D&D Ltd also believes that the policies care and practice must be focused on good skin care for our service users to enable us to prevent any skin break down – this should be based on evidence and current best practice.

Pressure ulcer prevention – the best outcome is to adopt a preventative approach – we should ensure that service users are risk assessed against their Nutrition, Mobility and Continence at the initial care plan visit and from this staff should deliver the appropriate pressure area care to ensure skin integrity is maintained. Staff are expected to monitor the three areas (Nutrition, Mobility & Continence) then a professional must be contacted to discuss the changes and what intervention is in place and what intervention can be put in place.

Risk Assessments must take place yearly at a minimum – if any changes are identified, then the risk assessment will take place sooner.

The goals of the organisation are to ensure that:

- a) Service user's skin remains intact
- b) Any breakdown in the skin is reported to the district nursing team as soon as practicably possible and any treatment is adhered to monitored.

The organisation will adhere to tissue viability legislation.

- a) Safeguarding Vulnerable groups Act 2006
- b) The Care Standards Act 2000
- c) Health & Care Professions Council HCPC
- d) National Institute for Health and Clinical Excellence (N.I.C.E) Guidelines
- e) Health and Safety at Work Act
- f) Human Rights Act 1998 implemented 2000

In Homecare D & D Ltd the following points should be adhered to:

- 1. Staff are to follow the care plan and risk assessment in place individual to the service user.
- 2. Staff are to monitor Nutrition, Mobility and Continence any changes are to be reported as a matter of urgency to the office/oncall team and the district nursing team.
- 3. Staff are to check at each call the service user's pressure areas.
- 4. Staff are to encourage service users to relieve their own pressure areas if possible.
- 5. Staff are to relieve a service users pressure areas where appropriate.
- 6. If a service user has been discharged from Hospital or a Care home with a reddened area or a pressure ulcer then this must be reported immediately to the office/on call team and the district nursing team staff must complete a pressure area monitoring form.
- 7. Staff must adhere to any intervention prescribed by the district nursing team.
- 8. Staff are to check that any equipment is fit for purpose and also in date for maintenance checks.
- 9. Staff are to attend regular update training.

REPORTING

Any incident of a reddened area or a breakdown of skin is to be reported immediately to the district Nursing Team and the office/on call team. A log should be made in the communication logs with the date and the description of the pressure area and any time a district nurse attends the property and any time the district nursing team/G.P are called.

TRAINING

All new staff should be encouraged to read the policy on tissue viability as part of their induction process. Through Supervision and competence based assessment we can ensure that all appropriate staff are aware of the policy and procedure. Existing staff will be offered training to **National Occupational Standards** covering basic information about tissue viability. In-house sessions should be conducted at least 3 yearly and all relevant staff should attend.