

FACEBOOK LIVE

SELF-CARE IN THE CURRENT CLIMATE

PRESENTED BY ALISON SCHOFIELD



TUESDAY 7TH APRIL 2020
19:30

Self-care in the current climate

Alison Schofield

Key learning outcomes

- 1. Understand why the need for patient self-care is becoming more important**
- 2. Understand the challenges that it can present**
- 3. Understand the benefits to patients and clinicians**
- 4. Discuss ways to help achieve successful patient partnerships**
- 5. Be able to identify patients who are capable of self-management.**

Terminology

Self-care

- Used interchangeably with self-management, self-regulation, patient involvement/partnership, patient education and patient counselling

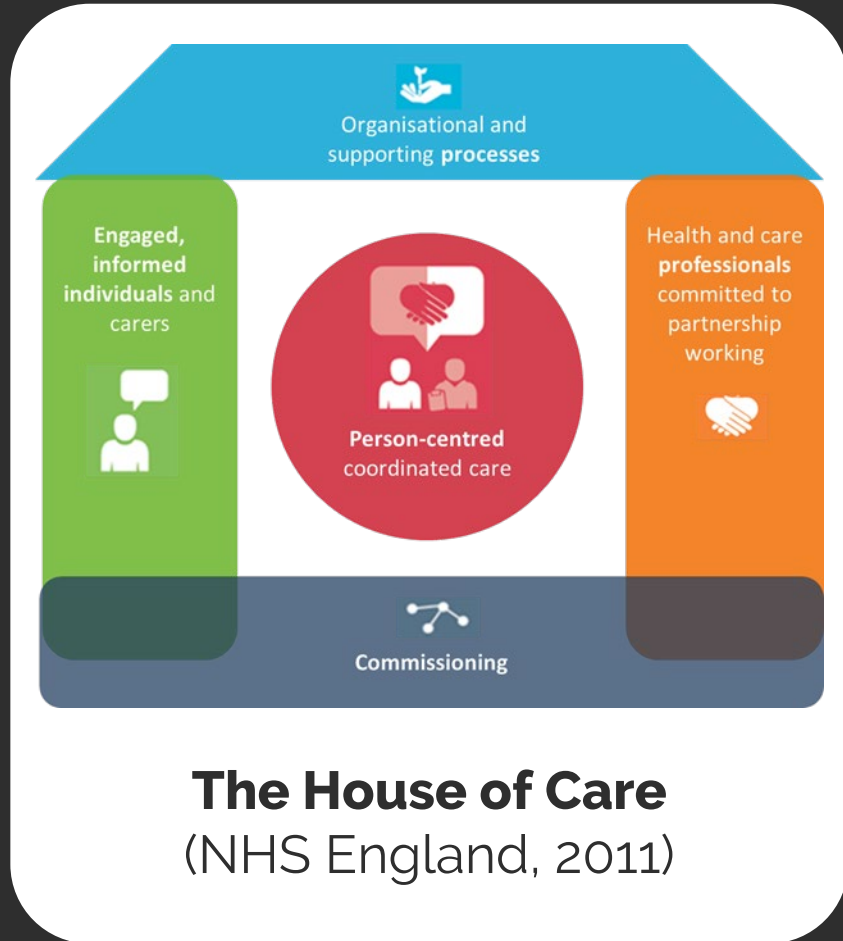
Self-management

- Developing beyond the practice of giving information and increasing patient knowledge (Grady and Gough, 2014)

Challenges in the current climate

- **Number of district nurses in 2018 for a population of 55.8 million (in England alone) estimated to be 4,000**
(NHS Confederation, 2017)
- **In the UK, since 2010 there has been a 46% reduction (7,055–4,031) in qualified district nurses** (Fanning, 2019)
- **Worst ever staff crisis** — shortage of 41,722 nurses in England
(Campbell, 2018)
- **Leaving the profession in 2017** — increased by 51% since 2013
(NHS Providers, 2018)

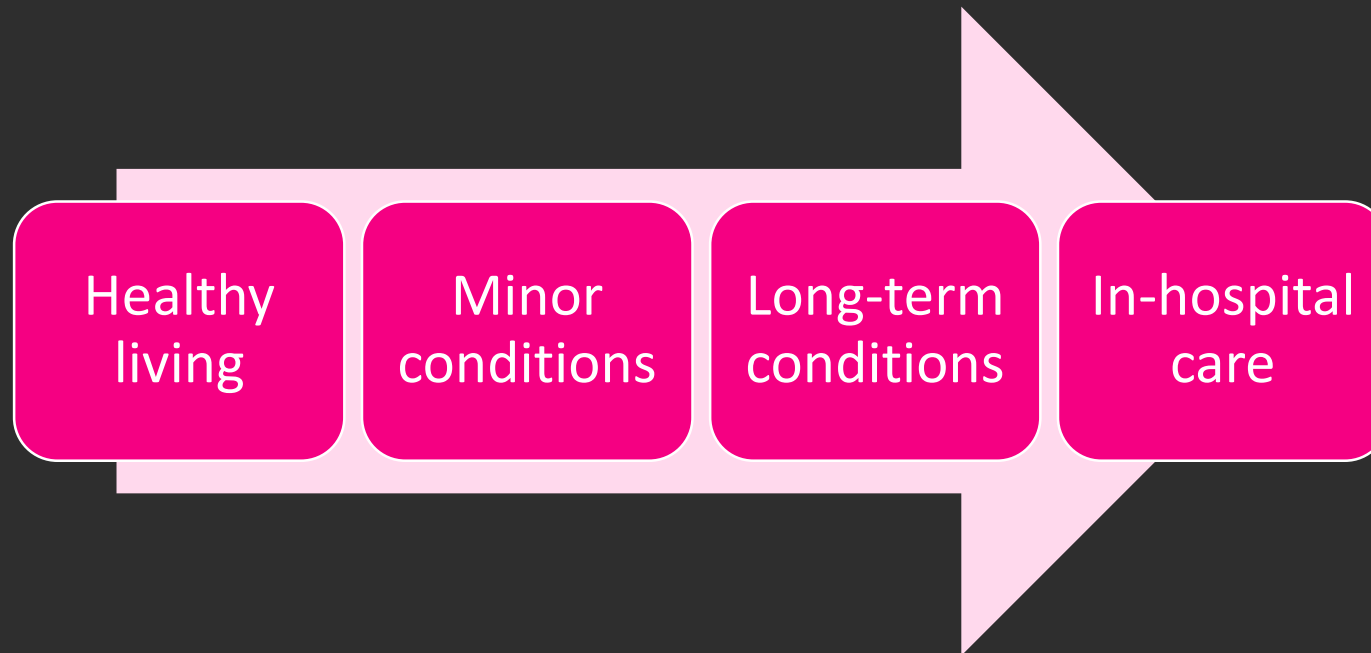
Challenges in the current climate



- **The *NHS Long Term Plan***
(NHS England, 2019)
 - Supporting people in the community with complex, long-term conditions
- **Chronic disease management** —
15 million people in England with long-term conditions
(NHS England, 2011)
- **We need to change how we deal with long-term conditions**

Self-management continuum

- **Self-management is a continuum** — from taking responsibility for diet and exercise to major trauma (McShane, 2014)



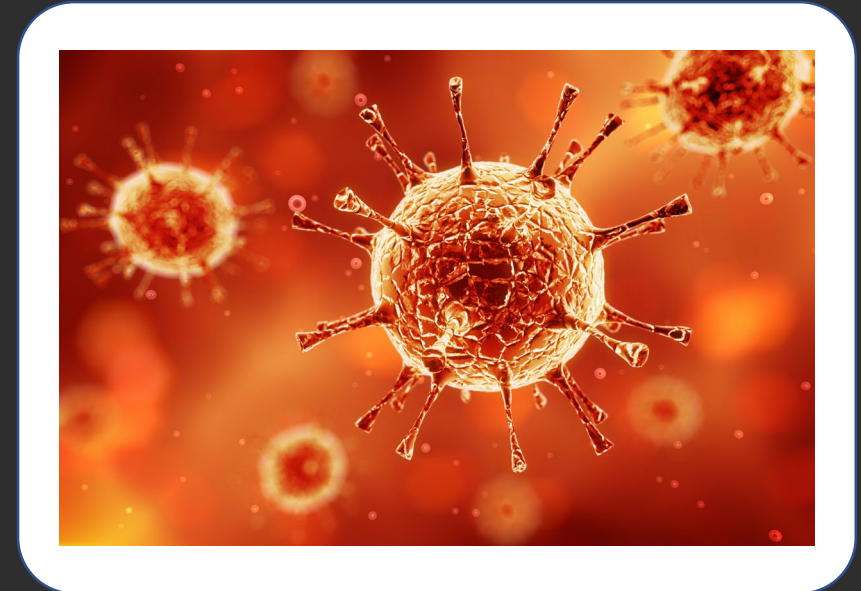
Challenges in the current climate

Current Covid-19 pandemic

- Fast forwarding the need and readiness to embrace self-management

Need for patients to engage and adopt a self-management routine is more important than ever due to:

- Limited nurse contact with patients
- Patients being unable to attend clinics
- Temporary closure of services (e.g. leg and wound clinics)
- Nurse time being diverted



National Wound Care Strategy Programme

The National Wound Care Strategy Programme (NWCSP) has been commissioned by NHS England and Improvement to improve the prevention and care of pressure, leg and foot ulcers and surgical wounds:

- There is written literature and videos to support self-management in wound care
- How to care for your wound; shared care for wounds; looking after your leg ulcer; advice for people with lymphoedema; how to manage skin tears and pressure ulcers

National Wound Care Strategy Programme

- For the lower limb, practical videos show how to wash your legs and change a dressing safely. Application of different compression systems, including hosiery and wrap systems
- The lower limb work-stream of the NW/CSP is fully supportive of a self-care pathway for patients and carers

The NW/CSP is supporting clinical staff, patients and carers with information available on the website: www.ahsnnetwork.com/about-academic-health-science-networks/national-programmes-priorities/national-wound-care-strategy-programme

Challenges within wound care

- **Traditionally, healthcare professionals have undertaken most aspects of chronic wound management**
- **Underlying aetiology — chronic disease management, e.g. venous disease, chronic oedema, diabetic lower limb wounds**
- **Increasing number of patients with wounds** (Guest et al, 2017)
 - An increase of 12% a year in chronic wounds (Guest et al, 2017)
- **Patient expectation as part of holistic wound assessment — ‘how involved would you like to be in the care of your wound?’** (Wounds UK, 2018)
- **Using technology for telecommunication** (Wounds UK, 2018)

Introduction to self-management

Self-management

A review of 550 high quality research articles (de Silva, 2011):

‘... it is worthwhile to support self-management, in particular through focusing on behaviour change and supporting self-efficiency’

‘Supporting self-management has the potential to alleviate the pressure of health and social services caused by workforce shortages, rising demand for services, population increases and budgetary constraints’

What does self-management mean?

- **The actions which individuals take to lead a healthy lifestyle; to meet their social, emotional and psychological needs; to care for their long-term condition; and to prevent further illness or accidents** (Kennedy, 2007)
- **The involvement of family and carers is crucial to its success** (Grady and Gough, 2014)
- **Although a simple concept, it is often overlooked**
- **Key to improved mood and reduced anxiety**
- **Potential benefits are substantial**

Who can self-manage?

Patients need to be (Wound Care People, 2019):



Willing



Health literate



**At the centre of
your decision
making and
care delivery**



Supported

Coping strategies

Scale	Definition
Active approach	Calm, can see things from all sides, works towards a solution
Palliative approach	Looks for a distraction and keeps busy, doesn't want to think about it
Avoidance	Lets the situation be and avoids the situation
Social support	Looks to others for comfort to share troubles, asks for help
Passive response	Completely involved with the situation, worries, becomes isolated
Expression of emotions	Expresses anger to release tension
Reassuring thoughts	Reassures themselves, 'worse things can happen', feels courageous

(Adapted from: Vermeiden et al, 2009)

Discussion tools (adapted from Wounds International, 2016)

Views and understanding

Why do they have a wound?

What would they like to learn about the wound?

How do they feel about the wound?

Fears or concerns

What worries them most?

Does the wound affect their life?

Affect their relationships?

What is important

Short-term goals?

Long-term goals?

Priority of wound healing?

Willingness to be involved

What do they need to know?

What can they do to help?

Their living conditions?

Who else do they have to help?

A simple tool (Wound Care People, 2019)

Is your patient able to self-manage?

For patients with chronic wounds, it is crucial, now more than ever, that they engage in their care. Self-care can offer a means to maintain or even improve the capacity to live well over time.

Patients need to be:



Willing



Health literate



At the centre of your decision making and care delivery



Supported



1. Physical and mental ability

Can the patient physically reach the wound to manage dressing changes?

Can they understand their treatment and care?

Are they mentally and physically able to self-care?

Will they be able to monitor for signs of infection and other problems?

2. Support/situation

Are they dependent on carers or family for care delivery?

Are there financial constraints which might form a barrier?

3. Motivation

Do they understand why self-care will help them?

Are they willing and ready to carry out self-care?

Have they had any negative experiences in the past which might influence how well they cope?

Promoting self-care can **empower patients** and **reduce nursing workloads**. Patients should never feel abandoned but should have support available as needed.

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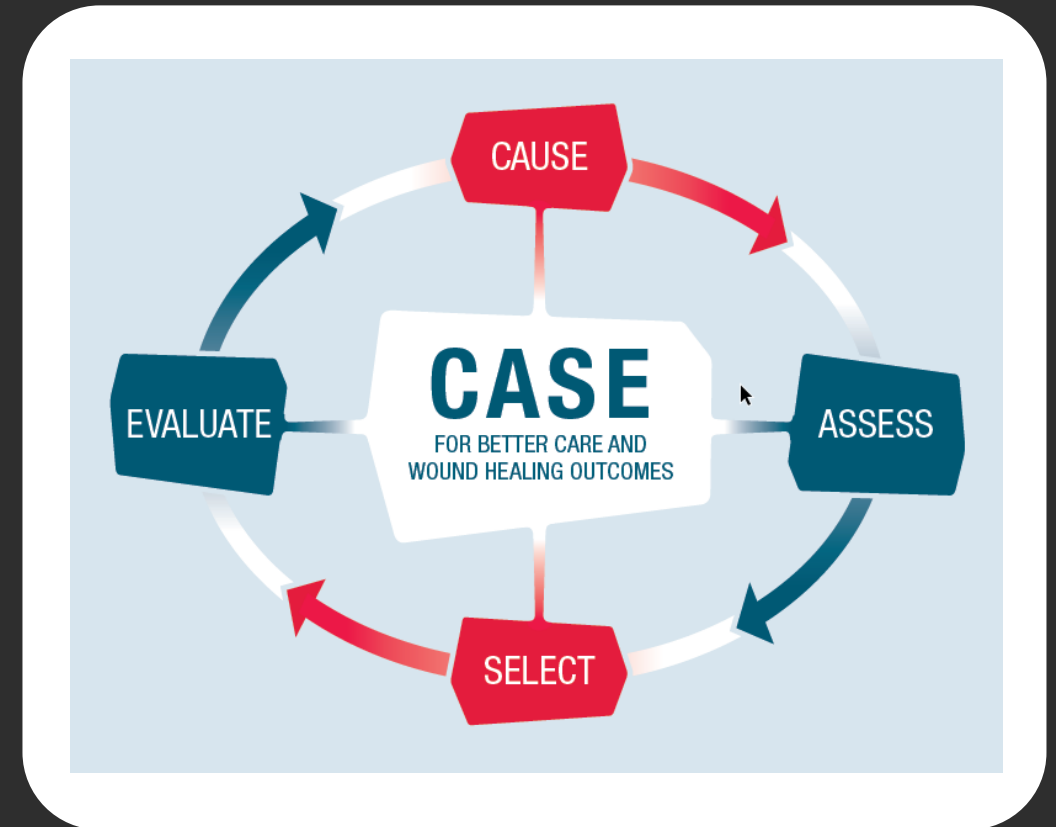
Self-Care Forum

General principles when supporting self-management (De Silva, 2011):

- Include patients in all decisions made
- Care plan development in partnership with patients and healthcare professionals
- Set goals and ensure follow-up on achievements
- Patients monitoring their symptoms and knowing when to take action in the event of red flags
- Motivating patients
- Advocating healthy lifestyles
- Educating patients on their condition and how to self-manage

Holistic assessment of the patient

- An assessment of the patient's ability to self-manage fits into the overall holistic assessment of the patient with a wound
- This can be achieved by using the CASE framework — and includes: 'wherever possible, involve the patient'



Introducing my self-management patients

Case study one

- **83-year-old gentleman**
- **2012 — presented to GP with lower limb pitting oedema which had been present for over eight weeks and non-healing traumatic laceration**
- **2013 — Varicose eczema diagnosed and prescribed steroid cream**
- **2014 — oedema continues, leg ulcers and GP prescribed diuretics and antibiotics**

Introducing my self-management patients

Case study one (cont.)

- **2014** — legs were a ‘different colour’, MRI of knee as had surgery three years previously
- **Continues to see GP over the next three years**
- **2017** — oedema increasing, struggling to walk, GP doubles diuretics and prescribes more antibiotics
- **2019** — practice nurse, who has undertaken leg ulcer training programme, refers to tissue viability nurse
- **Full lower limb assessment, diagnosis of venous leg ulcer, ABPI 1.0, hosiery kit prescribed as first-line treatment**

Case study one



Case study one

1. Physical and mental ability

Can the patient physically reach the wound to manage dressing changes?

Can they understand their treatment and care?

Are they mentally and physically able to self-care?

Will they be able to monitor for signs of infection and other problems?

- **The patient could reach and apply/remove the compression hosiery kit with the help of his daughter**
- **He understood the need for his treatment plan**



WOUND CARE TODAY

Case study one

2. Support/ situation

Are they dependent on carers or family for care delivery?

Are there financial constraints which might form a barrier?

- **The patient had help from his daughter**
- **There were no financial constraints that would be a barrier**



WOUND CARE TODAY

Case study one

3. Motivation

Do they understand why self-care will help them?

Are they willing and ready to carry out self-care?

Have they had any negative experiences in the past which might influence how well they cope?

- **The patient was willing and able to engage with self-management**
- **Struggled with compression hosiery — the feeling when he was wearing them**
- **JOBST® FarrowWrap® was discussed with him and his daughter, who performed wound care and applied wrap — (social distancing)**



WOUND CARE TODAY

Introducing my self-management patients

Case study two

- **57-year-old lady with diabetes who was on insulin, she had hypertension and was obese**
- **Leg ulcers first presented 1999, 20 years ago**
- **Attended practice nurse — dressings only, steroid cream and multiple courses of antibiotics for suspected cellulitis**
 - **25 courses of antibiotics**
- **2008 — practice nurse asked if she had ever had compression therapy, but she could not recall**

Introducing my self-management patients

Case study two (cont.)

- **2017** — referral to chronic wound clinic, full holistic assessment, ABPI 0.97, due to oedema a short-stretch bandage system was applied to reduce oedema and re-shape the leg



Introducing my self-management patients

Case study two (cont.)

- Due to bandage slippage, hosiery was prescribed for maintenance after leg ulcer healed
- But, this was uncomfortable and removed by the patient
- Rebound oedema — wrap system prescribed



Case study two

1. Physical and mental ability

Can the patient physically reach the wound to manage dressing changes?

Can they understand their treatment and care?

Are they mentally and physically able to self-care?

Will they be able to monitor for signs of infection and other problems?

- **The patient found wraps easier to apply than hosiery with help from her husband**
- **They understood the treatment and care needed, but product choice helped concordance**

Case study two

2. Support/ situation

Are they dependent on carers or family for care delivery?

Are there financial constraints which might form a barrier?

- **The patient could reach and apply/remove a compression wrap with the help of her husband**
- **They both understood the need for the treatment and treatment plan**
- **Support from clinical team, red flags and telephone number to call**
- **Importantly, they didn't feel abandoned**



Case study two

3. Motivation

Do they understand why self-care will help them?

Are they willing and ready to carry out self-care?

Have they had any negative experiences in the past which might influence how well they cope?

- **The patient was willing to actively self-manage**
- **This became vital during Covid-19 outbreak and wound care was included**
- **Negative experience with hosiery, but with good patient discussions this changed to a positive experience**

2-layer compression kit



JOBST® UlcerCARE™ 2-layer compression kit providing 40mmHg:

- Enables patients to self-care independently at home
- 2-layer kit:
 - Easy to put on and take off
 - Ideal for patients to manage their own dressing changes
 - Enables patients to shower/bathe and wear 'normal' shoes
- Suitable for leg ulcer management and to prevent recurrence

Wrap compression systems

- **Wrap compression systems:**

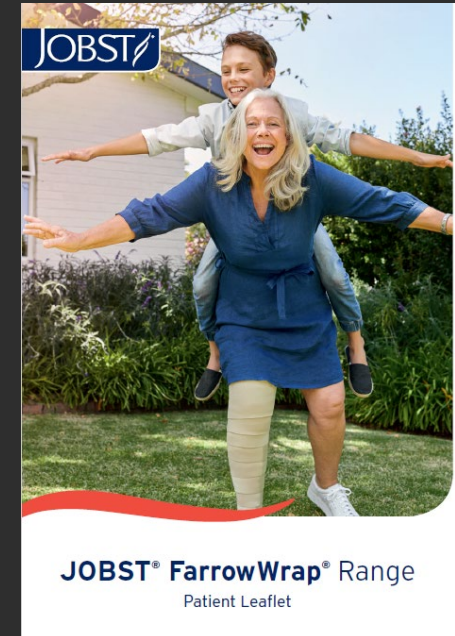
- Are easy to apply and adjust by patients to accommodate reducing oedema
- Enable patients to self-care and manage their condition at home
- Are ideal for patients to manage their own dressing changes
- Enable patients to shower/bathe as required
- Consist of bands that replicate short-stretch bandaging, providing effective graduated compression



Patient support information



JOBST® UlcerCARE™
Patient information leaflet



JOBST® FarrowWrap™ Range
Patient leaflet

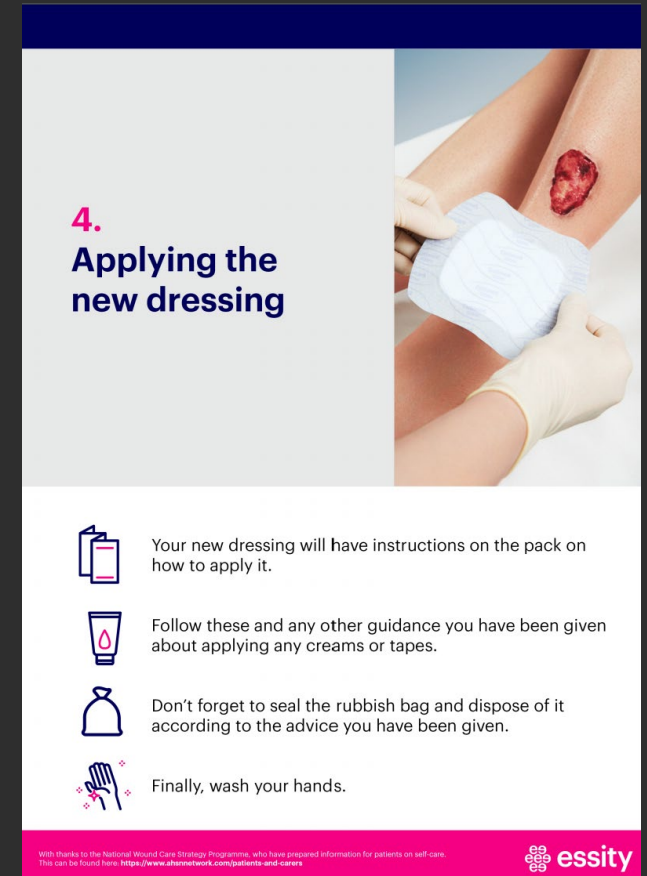
Cutimed® Sorbact®



- **Cutimed® Sorbact® :**
 - Bacteria binding dressing, manages infection effectively but passively (no chemically active agent)
 - Can stay in place for up to seven days
 - If appropriate, patients can change their secondary foam or superabsorbent dressing while leaving Cutimed Sorbact in place
 - Having no contraindications or known risk of allergic reaction, makes this a safe dressing to manage microbial load in wounds at risk of infection (prophylaxis) or with local infection

Resources and call to action

- To help nurses understand if their patients have the capacity to self-manage at the moment, Essity is offering:
 - Self-care guide for HCPs: free to download here: www.bsnmedical.co.uk/therapy/self-care.html
 - Self-care booklet for patients: available by opting in when you download your certificate
- Other tools are being developed and will be available shortly. Please ask your local account manager for more information



Conclusion

- **There are many terms used to describe self-management**
- **We need to learn from chronic disease management**
- **There are tools available that can help us decide if a patient is ready to self-manage**
- **Self-management is a component of holistic wound assessment**

Other resources and information

- **EWMA podcasts may be a useful resource:**
<https://ewma.org/covid-19/>
- **EWMA for patients and relatives:**
<https://ewma.org/resources/for-patients-and-relatives/available-resources-from-other-organisations/>
- **Other Facebook live events supported by Essity, available online:** www.jcn.co.uk
- **Self-care week 16th–22nd November, 2020**
- **Contact Essity for more details, email:**
concierge.uk@Essity.com

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