



CLAHRCBITE

Brokering Innovation Through Evidence

May 2019

Identifying and prioritising uncertainties in the delivery of community-focused wound care in Greater Manchester



The National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC) Greater Manchester is a partnership between providers and commissioners from the NHS, industry, the third sector and the University of Manchester.

We aim to improve the health of people in Greater Manchester and beyond through carrying out research and putting it into practice.

What was the aim of the project?

To collaborate with health care professionals from across GM in a rapid priority setting process which would identify and rank research and implementation topics in wound care.

What did we do?

We recruited local healthcare professionals who regularly cared for patients with complex wounds, were wound care specialists or managed wound care services. Those recruited were asked to submit up to five wound care uncertainties ('unanswered questions') in consultation with their colleagues and asked to attend a single day priority setting workshop.

Why was it important?

To develop a future wound care research and implementation agenda to meet local needs, it is essential to work with local stakeholders. The use of collaborative processes (like joint priority setting) is known to improve the quality and relevance of research, and can help foster local ownership of research findings, supporting their meaningful translation into clinical practice and service delivery.



What did we find?

Stakeholders offered a total of 159 uncertainties of which 25 were included in the final prioritised list. The uncertainties varied in focus, but could be broadly categorised into three themes: service

delivery and organisation, patient centred care and treatment options.

The top five priorities identified were:

- 1) Does patient involvement in their dressing changes improve outcomes or increase negative outcomes?
- 2) What is the most reliable and valid method of grading pressure ulcers?
- 3) Would standardising wound assessments and tools across NHS settings improve staff productivity and patient outcomes?
- 4) How does nursing and/or professional skill mix influence wound outcomes in community settings?
- 5) Does continuing professional development in wound care improve the quality of care and patient outcomes compared with no annual update?

Who did we work with?

Central Manchester University Hospitals
NHS Foundation Trust
Pennine Care NHS Foundation Trust
Salford Royal NHS Foundation Trust
University Hospital of South Manchester
NHS Foundation Trust

What next?

We mapped the 25 priorities against current evidence summarised in rigorous systematic reviews or identified the need for a review where there was none. Where reviews were available we either confirmed a priority as a true uncertainty (existing research had not answered the question) or as a potential implementation priority (valid research had closed the uncertainty and could be considered for implementation into practice). This exercise has informed the prioritisation of new systematic reviews, new primary research and implementation.

What is NIHR CLAHRC GM?

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Find out more

www.clahrc-gm.nihr.ac.uk/projects/wound-care-priority-setting

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