



Utilising the Signapps™ within a multi-disciplinary setting improves secure communication, collaboration and workflow.

**Conclusions:**

By using the Signapps™ App as a team we were able to demonstrate that secure messaging, reporting and the mobile forms collaboration between health professionals improve overall workflow.

PO455 – ID 834

**A DECADE OF POST-GRADUATED UNIVERSITY TEACHING IN ADVANCED WOUND INTERVENTION: E-HEALTH AND DATABASES RESEARCH - NEW BORDERS FOR KNOWLEDGE DEVELOPMENT**

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**References**

1. Aromataris, E. et al. (2015). Summarizing systematic reviews: methodological development, conduct and reporting of an Umbrella review approach. *Int J Evid Based Healthc*, pp. 13(3):132-40.
2. Aromataris, E. & Munn, Z. (2017). *Joanna Briggs Institute Reviewer's Manual*. The Joanna Briggs Institute.

**Background and Aims**

Evidence-based practice and the database research are fundamental in order to provide high standards of wound care. We aim to evaluate the use of e-health resources, mainly electronic databases in order to identify the major categories of study interest in post-graduate students in this area.

**Methods**

An overview of 28 systematic literature reviews (SLR) developed during this course credited by European Wound Management Association was developed. For the structuration of each RSL students were instructed to apply the Joanna Briggs Institute (JBI) SLR Model. For this poster we performed an Umbrella review also according JBI guidelines. More than 110 RN were involved on these SLR.

**Results**

Main categories of interest and focus identified were (number of RSL): Devices & Intervention (11); Dressings (9); Leg Ulcer (7); Infection (6); Pressure Ulcer (3); Prevention (3); Quality of life (3); Wound Assessment (4); Chronic wounds (3); Health Economics & Outcome (2); Negative Pressure Wound Therapy (2); Antimicrobials (2); Acute Wounds (1); Burns (1); Education (1); Nutrition (1).

**Conclusions**

Electronic databases use provides RN the development of skills on e-health and evidence-based practice. Systematic literature reviews developed in academic courses give us a clear focus of student's interests helping to address post-graduated teaching to fulfill self-reported knowledge gaps, promoting best practices.

PO456 – ID 88

**THE PREVALENCE, TRENDS, AND ECONOMICS OF THE BURDEN OF WOUNDS IN CANADA**

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To estimate the prevalence of wounds in Canada and the annual level of healthcare resources for the management of wounds.

In 2013, the Canadian Institute of Health Information (CIHI) estimated the prevalence of chronic wounds in Canada at 4 - 7%. This prevalence estimate underestimates the scope of the problem, as it is obtained from administrative data; it also makes it difficult to design a business case for wound care improvements. There is a lack of well designed, hands on, head to toe, full facility prevalence studies for a variety of chronic wounds in Canada and world wide. Preliminary literature search suggests that there are at present no current, reliable estimates on the total prevalence and incidence of chronic wounds for different settings and categories of chronic wounds in Canada.

This presentation will report on Canadian wound prevalence across sectors using a standardized, systematic approach to assessment, visual inspection and data collection. The data collection for the prevalence of wounds was guided by a standardized data collection tool, all wounds have a photo(s) and approximately 40 meta – data patient and wound care characteristics as part of the data collection. The authors have examined one of the largest wound care databases in Canada and will discuss trends, opportunities for the future, and the economics of the burden of wounds in Canada.

PO457– ID 212

**THE DIRECT DISPENSE OF THE PHARMACY TO THE PATIENT: STATE OF THE ART OF THE ASL BARI**

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**Background and Aims:**

The note of the Puglia Region, February 14, 2017 provides for the adoption of the operating protocol for the implementation of the Direct distribution activities of the First Cycle of Therapy. This activity makes it possible to deliver drugs directly to patients in hospital discharge or after an outpatient specialist visit. The ASL Drug Management Department Bari has informed and trained, through refresher/training courses, doctors and hospital pharmacists in order to carry out prescription and dispensation activities in a computerized manner. The aims of This activity is the distribution exercise of the First Therapy Cycle, the progress of the prescriptions of the ASL of Bari with the relative economic impact on the regional health system.

**Methods:**

Through the Health Information System of the Puglia Region Edotto, the progress of the prescriptions to the first cycle of therapy on discharge from hospitalization and after a specialist outpatient visit for both the year 2017 (dispensed n.3945) and 2018 (dispensed n.15088), the most impacting and representative pharmaceutical classes on discharge, as well as the savings for the regional health system resulting from this activity.

**Results:**

The number of prescriptions for the first cycle of therapy after discharge and outpatient visit dispensed in 2018, were 15,088 for a value of 308,000 euros against 1,185,030 euros sustained in the absence of this.

**Conclusions:**

The Puglia Region with this project supports the hospital-territory assistance continuity, it is a saving on the pharmaceutical expenditure called, considering that the purchase price is reserved for public health facilities is far lower than that repaid to the affiliated pharmacies. The ASL Bari has been realized a saving of 876.300,22 euros.

PO458 - ID 245

**PRE-HABILITATION AND NUTRITION SUPPORT TO PROMOTE WOUND HEALING**

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**Background & Aims:**

Malnutrition and frailty increase risk for pressure injuries (PI), delayed healing, increased length of stay (LOS), increased readmission, mortality, and higher healthcare costs.1-2 Assessing for malnutrition identifies individuals who would benefit from pre-habilitation and supports positive clinical outcomes.3

**Methods:**

Literature review of benefits of implementing nutrition care recommendations for individuals at risk for/or with PI was conducted. Nutrition care recommendations support the implementation of nutrition interventions i.e. oral nutritional supplements (ONS), enteral and/or parenteral nutrition, to promote positive clinical and economic outcomes.4

**Results:**

Meta-analysis reports three out of four RCT support use of ONS to significantly decrease LOS (-3.77 days; P=.040), reduce hospital admissions (OR 0.59 [95% CI 0.41-0.84] days; P=.004), and reduce comorbidities. The use of ONS can significantly decrease the incidence of PI. In undernourished individuals, ONS reduces mortality rate.4 Hospitalized patients receiving ONS had 21.6% decrease in hospitalization cost. For every \$1 (US) spent on ONS, \$52.63 was saved in hospital costs.5

**Conclusions:**

Implementing pre-habilitation and nutrition interventions for those at risk for or severe malnutrition and PI helps improve nutrition status, muscle mass, and reduce comorbidities, mortality, and costs. Malnutrition screening identifies individuals likely to benefit from ONS and other nutrition support.

**References:**

1. Fry D. Patient characteristics & occurrence of never events. *Arch Surg* 2010;145
2. Mrdutt M. Preoperative frailty & surgical outcomes. *JAm Col Surg*. 2019;228:482.
3. West M. Prehabilitation & nutritional support to improve perioperative outcomes. *Curr Anes Rpt*. 2017;7:3407.
4. Cawood A. Systematic review & meta-analysis of effects of high protein ONS. *Age Res Rev*. 2012;11:278.
5. Philipson T. Impact of ONS on hospital outcomes. *Am J Manag Care* 2013;19:121.

PO459 – ID 268

**THE USE OF COLLAGEN OXIDIZED REGENERATED CELLULOSE WITH SILVER WOUND BALANCING MATRIX TO REDUCE THE BURDEN OF WOUND CARE FOR DIABETIC FOOT ULCERS**

**Hargreaves Judith**