



12.7. Pressure ulcers (grade II-IV) in the elderly (ELD-8)

12.7.1. Documentation sheet

Description	Prevalence of pressure ulcers in residential care (prevalence on one day)
Calculation	Numerator: number of residents with a pressure ulcer of category 2, 3, 4 or undetermined on the reference day Denominator: total number of residents in the home for the elderly present on the reference day
Rationale	The occurrence of pressure ulcers, also known as bedsores, in a patient (hospitalized or in residential care) has a serious negative impact on the individual's health. Pressure ulcers can be prevented with good quality nursing care. The occurrence of pressure ulcers is one of the quality indicators measured in the Flemish project on quality indicators in homes for the elderly. ^{1, 2} In the future, the BelRAI will be nationally rolled out and this indicator will be recorded in the Long-term Care Facilities and Home Care modules. (http://wiki.belrai.org/nl/)
Data source	One-day measurements within the Flemish project on quality indicators in homes for the elderly. ^{1, 2}
Technical definitions	The severity of pressure ulcer can be categorized in: <ul style="list-style-type: none"> • Category 1: non-blanchable erythema • Category 2: partial thickness skin loss (blister/abrasion) • Category 3: full thickness skin loss (superficial pressure ulcer) • Category 4: full thickness tissue loss (deep pressure ulcer)
International comparability	This indicator is measured by many countries, however definitions vary as to included severity levels. ³
Related indicators	Incidence of pressure ulcers in hospitals.
Dimensions	Quality (Safety); (Long-term) Care for the Elderly

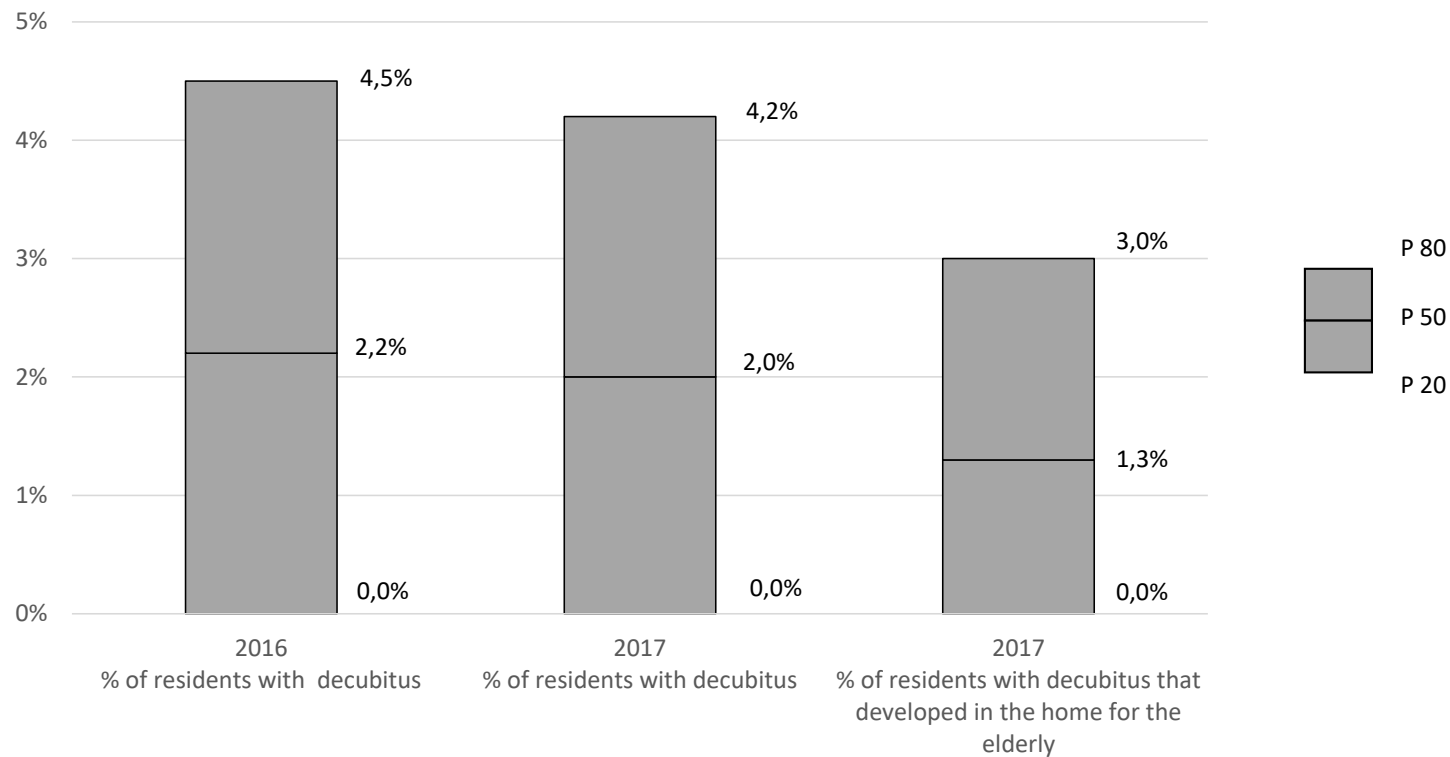


12.7.2. Results

Recent data on decubitus in long-term care for the elderly are only available for the Flemish community, where they are measured in the context of the

Flemish Indicator Project in the homes for the elderly. The data are presented in Figure 180. Pressure ulcers of category 1 are excluded.

Figure 180 – Percentage of residents with a pressure ulcer of category 2, 3, 4 or undetermined



Source: *Vlaams Indicatorenproject Woonzorgcentra (Vlaams Agentschap voor Zorg en Gezondheid)*



2017 data show that in 2.0% of the residents a pressure ulcer of category 2, 3, 4 or undetermined was found. Only in 1.3% of the residents the decubitus developed in the home for the elderly. Prevalence data of 2016 are somewhat higher, however as there is only data over 2 years, no meaningful time analysis can yet be performed.

Key points

- **Flemish data show that in 2.0% of the residents of a home for the elderly a pressure ulcer of category 2, 3, 4 or undetermined was found.**
- **Only in 1.3% of the residents the decubitus developed in the home for the elderly.**

References

1. Vlaams Agentschap voor Zorg en Gezondheid. Vlaams Indicatorenproject Woonzorgcentra: Kwaliteitsindicatoren 2016 Deel 1. Sectorrapport. Available from: <https://www.zorg-en-gezondheid.be/sites/default/files/atoms/files/Resultaten%20kwaliteitsindicatoren%20woonzorgcentra%20-%202016%20deel%201.pdf>
2. Vlaams Agentschap voor Zorg en Gezondheid. Vlaams Indicatorenproject Woonzorgcentra: Kwaliteitsindicatoren 2017 Deel 1. Sectorrapport. Available from: <https://www.zorg-en-gezondheid.be/sites/default/files/atoms/files/Rapport%20VIP%20WZC%202017deel1.pdf>
3. OECD/European Commission. A Good Life in Old Age? Monitoring and Improving Quality in Long-Term Care. 2013. OECD Health Policy Studies

12.8. Prevalence of MRSA carriage in long-term care facilities (ELD-9)

12.8.1. Documentation sheet

Description	Prevalence of MRSA (Methicillin-resistant <i>Staphylococcus aureus</i>) colonisation in a sample of Belgian nursing homes (NH). ¹
Calculation	Weighted prevalence referred to the prevalence adjusted for the participation rate in each NH. Weighted mean MRSA prevalence: % MRSA carriers / screened residents.
Rationale	Considering the important proportion of MRSA present at admission in acute-care facilities, especially among admitted NH residents, it is important to investigate the extent and the evolution of the reservoir of MRSA carriers in long-term care facilities. The better understanding of the MRSA reservoir in nursing homes should allow the readjustment of the MRSA control policies in Belgian hospitals and in long-term care facilities.
Primary data source	Sciensano, Service healthcare-associated infections & antimicrobial resistance (www.nsih.be) National Reference Centre for <i>Staphylococcus aureus</i> , ULB-Hospital Erasme, Brussels, Belgium
Source of results	National prevalence study of carriage of antibiotic-resistant bacteria among residents of 29 nursing homes in Belgium in 2015. ¹ National prevalence study of carriage of antibiotic-resistant bacteria among residents of 60 nursing homes in Belgium in 2011. ² National prevalence study of carriage of antibiotic-resistant bacteria among residents of 60 nursing homes in Belgium in 2005. ³
Technical definitions	Dry screening swabs from anterior nares, throat, perineum and wounds were collected and sent for analysis to the National Reference Center. The swab collection in each nursing home was performed in one day.