

Addendum B

3M Award for Excellence in Skin Safety: 2021

Program Description, Abstract Submissions and Award Selection.

Description of award:

This award will recognize an individual or clinical team for creating and sustaining a program designed to prevent skin damage. The winning program will be broad in scope and address not only pressure ulcer prevention, but other types of skin injury such as: Incontinence-Associated Dermatitis (IAD) prevention, skin tear prevention, and/or adhesive trauma prevention.

This award was developed by 3M's Medical Solutions Division in cooperation with the WOCN® Society. The award is funded by an unrestricted educational grant from 3M to the WOCN® Society. The grant will provide financial support for an individual or a maximum of 4 members of a skin care team to attend the annual WOCN conference.

Award Selection: Submissions will be reviewed and evaluated by a team of 3 WOCN member judges selected by the WOCN Society. One award will be given annually to an individual or team.

Eligibility: The individual or team leader must be a CWOCN®, CWCN®, or CWON®. Members of the team may be licensed health care providers or members of the facility's management/leadership team.

Government employees and health care practitioners licensed in Massachusetts or Vermont are not eligible to participate*. Participation by employees is subject to employer's policies with regards to participation in trade promotions. Employees, officers, directors (and their respective immediate family (spouse, children, parents and siblings) or household members (whether or not related)) of the Wound, Ostomy and Continence Nurses Society (WOCN®) ("Sponsor"), its parents, subsidiaries, and affiliated companies, are ineligible. Void where prohibited and subject to all federal, state and local laws. The participation opportunities, elements and requirements of the overall contest may collectively be referred to through the rest of these rules as the "Contest". All eligible individuals as defined above are herein referred to as "Entrant".

Submission Requirements:

All submissions must be submitted electronically to a designated website.

- Full name,
- Corresponding address, phone, and email address of the person submitting the nomination
- Facility address
- Title of Program
- Name of individual nominee or names of the team leader and clinical team being nominated (please include credentials and position title(s))
- Program Summary: 150-word synopsis of program objectives, program approach and impact

*State restrictions are due to the adherence to AdvaMed Code of Ethics, on Interactions with Health Care Professionals

FULL ENTRY REQUIREMENTS

Address the following questions/statements in each section. When addressing each section make sure your submission provides details and examples. Please provide supporting documentation to further explain your program and its success.

Documentation/Supporting MATERIALS are provided to help with understanding the criteria. Please note examples are NOT inclusive. Supporting documentation/examples that are unique, creative and represent “out of the box” thinking is strongly encouraged.

PROGRAM ELEMENTS	QUESTIONS / DETAIL REQUIRED	DOCUMENTATION / SUPPORTING MATERIALS
1) Program Objective and Overview	a) What problem was observed? b) Provide insights to the root cause analysis that was conducted. c) What targets did your program set to accomplish? d) Provide a brief overview of your program (name, structure, ect.)	Measurable goals Documentation charts Charts, graphs, team materials, images, ect.,
2) Program Strategy	a) Who led the program charge (i.e., skin champion)? b) How did the clinical champion exhibit leadership of the program? c) Describe your interdisciplinary skin team, what allocation of time they dedicate to the program and how they work with front line and other facility staff. d) What role has your senior leadership played	CV/resume of program leader(s) Awards or recognition relevant to the program Org charts Team communications Reference/support letter from senior leadership, facility publications, etc.
3) Program Protocol	a) Describe the protocols you have put into place with your program. (Product manufacturer’s copyrighted program are not eligible for submission) b) Explain the comprehensiveness of your product formulary (please describe generically by product category).	Decision making tools to facilitate appropriate product Description of process for annual review of tools and formulary Policies and procedures (e.g., risk assessment, procedure for skin inspection) <i>If your formulary list includes both skin and wound care products, you can submit as is. There is no need to create a separate list of skin care products.</i>
4) Program Engagement and Education	a) What unique ways have you used to engage your facility team in your program? b) How do you deliver ongoing education to your team? c) How do you deliver patient education?	Education tools (i.e., videos, brochures, take home information for families) New employee orientation materials Staff communications Content/methods for educating other disciplines Results of post-tests or alternative evaluation method Patient case study –please ensure any sensitive or confidential information is removed
5) Program Effectiveness	a) Describe the sustained results your program has had for at least one-year post implementation.	Data that illustrates a decrease in nosocomial skin injury and maintenance of improvements Results of P&I Skin Damage surveys (i.e., incidence studies/surveys for pressure ulcers, IAD, skin tears, etc.)