

SE2EOb – PROFESSIONAL DEVELOPMENT

Using the required empirical outcomes (EO) format, provide one example of an improved outcome associated with the application of nursing standards of practice implemented due to a clinical nurse's(s') participation in a nursing professional organization.

Problem

The Wound, Ostomy, and Continence Nurses (WOCN) WOCNs-RN (606659) [WOCN] at NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) are committed to preventing pressure injuries. Brenda Richards, BSN, RN, CWOCN, CCRN, wound care nurse (clinical nurse), noticed that the hospital-acquired pressure injury (HAPI) Stage 2 and above (HAPI Stage 2+) rate per 1,000 patient days in the SICU (4HS-605152) [SICU] at NewYork-Presbyterian/ Columbia was elevated.

Pre-Intervention

May – June 2021:

- The HAPI Stage 2+ rate per 1,000 patient days in the SICU was 4.65 and 4.95 in May and June 2021, respectively.
- Ms. Richards planned to attend the WOCNext Virtual Conference organized by the WOCN Society, a nursing professional organization dedicated to advancing the practice and delivery of expert healthcare to individuals with wound, ostomy, and continence care needs. The conference afforded her the opportunity to learn more about the latest WOCN nursing standards of practice to bring back to the SICU. Ms. Richards received approval to attend from her supervisor, Vincent Silvestri, MSN, RN, CPHQ, Director of Nursing Quality (at the time).
- After attending the WOCNext Virtual Conference held by WOCN Society in June 2021, Ms. Richards introduced knowledge learned related to the WOCN nursing standards of practice for purposes of reducing the HAPI rate in the SICU. The WOCN clinical practice guideline 21.2 recommended multifaceted education, “21.2 At an organizational level, develop and implement a multi-faceted

education program for pressure injury prevention and treatment.” (EPUAP/NPIAP/PPPIA, 2019). A multifaceted education program is one in which education is delivered using more than one type of education delivery method. A multifaceted approach for adult learners strengthens a nurses level of confidence and skill required to recognize, assess, stage, document, and implement appropriate interventions to prevent and treat pressure injuries.

- Ms. Richards shared the WOCN clinical practice guideline 21.2 with Mr. Silvestri and Maxy Escalante, DNP, RN, CCRN, Patient Care Director (nurse manager), SICU. Ms. Richards, Mr. Silvestri, and Dr. Escalante agreed that the application of the WOCN clinical practice guideline 21.2 was appropriate for the critically ill and immobilized patient population in the SICU and supported the development of multifaceted clinical nurse education program related to pressure injuries. They agreed to translate the clinical practice guideline 21.2 into the education initiatives by designing a multifaceted HAPI prevention education program in the SICU:
 - Didactic presentation during huddles
 - Written education material
 - Hands-on bedside teaching during skin care rounds
 - Train the Trainer for Skin Care Team
 - Ongoing support from WOCN team

Goal Statement

To decrease the HAPI Stage 2+ rate per 1,000 patient days in the SICU

Participants

Name/Credentials	Discipline	Title	Department/Unit
Brenda Richards, BSN, RN, CWOCN, CCRN	Nursing	Wound Care Nurse (clinical nurse)	WOCN
Vincent Silvestri, MSN, RN, CPHQ	Nursing	Director of Nursing Quality (at the time)	WOCN
Lovie Marie D. Amolo, MSN, RN, ACCNS-AG, CCRN, SCRNP, CEN, NYSAFE	Nursing	Clinical Nurse Specialist	SICU
Janice Barbosa, BSN, RN, OCN	Nursing	Clinical Nurse	SICU
Maxy Escalante, DNP, RN, CCRN	Nursing	Patient Care Director (nurse manager)	SICU

Intervention

July 2021:

- Ms. Richards and Dr. Escalante began conducting didactic presentations during day and night shift huddles with SICU clinical nurses to promote HAPI prevention awareness that aligned with the WOCN clinical practice guidelines, recommending multifaceted education. During the huddles, Ms. Richards also gave out written education materials to the clinical nurses. The huddles focused on educating the clinical nurses on the following topics:
 - Patient skin assessment upon admission/transfer to the unit
 - Changes in the patient condition that could impact skin integrity, such as immobility
 - Patient skin assessment post long procedures, where the patient may have been immobile for a prolonged time
 - Preventative skin measures such as using foam dressings on bony prominences
 - Recognition and staging of pressure injuries
 - Basic wound treatment

Impact Statement: The huddles, which employed multiple methods to deliver education, were crucial for equipping nurses with the confidence and proficiency needed to identify, assess, document, stage, and implement appropriate interventions for the prevention of HAPI Stage 2.

- After completing education with 80 percent of the clinical nurses, Ms. Richards collaborated with Dr. Escalante to form a Skin Care Team. The purpose of the Skin Care Team was to perform weekly skin care rounds on SICU patients with the highest risk for pressure injury. By targeting and assessing the high-risk, critically ill patient population for pressure injuries, the nurses aligned their practice with the WOCN clinical practice guidelines using hands on teaching and skill development that Ms. Richards learned about in the WOCNNext Virtual Conference.

Upon Dr. Escalante's recommendation, Ms. Richards recruited Lovie Marie Amolo, MSN, RN, CSRN, CEN, ACCNS-AG, clinical nurse specialist, SICU, and Janice Barbosa, BSN, RN, OCN, clinical nurse, SICU, as the skin care resource nurses (and as trainers for delivering education to their peers) as both had shown interest in pressure injury prevention. Ms. Richards, Ms. Amolo, Ms. Barbosa, and Dr. Escalante met to discuss operationalizing the newly formed Skin Care

Team's weekly rounding. They all agreed that the Skin Care Team would focus on addressing the following during rounds:

- Head-to-toe skin assessments on stable patients in the SICU
- Turning and repositioning patients
- Applying barrier ointment to high-risk bony prominences
- Applying foam dressings to protruding bony prominences
- Diversion of urine when applicable
- Prevention and treatment of incontinence-associated dermatitis

Impact Statement: Skin care rounds led by a skin care team with expert training provided an opportunity to educate patients, caregivers, and colleagues about the importance of proper skin care as well as the chance to identify potential skin problems early on, allowing measures to be taken to prevent skin issues from advancing to HAPI Stage 2.

August 2021:

- By August 1, 2021, Ms. Richards and the Skin Care Team fully implemented a multifaceted education program. Based on the WOCN clinical practice guideline 21.2 recommending multifaceted education, the program consisted of didactic teaching; written education material; hands-on bedside teaching during weekly Skin Care Rounds; Train the Trainer sessions for the Skin Care Team; and ongoing support from the WOCN team. The implementation of a multifaceted education program in the SICU supported the evidence-based clinical practice guideline promoted when Ms. Richards participated in the WOCN Next Conference, organized by the WOCN Society, a nursing professional organization.

○ **Key references:**

Goodman, L., Khemani, E., Cacao, F., Yoon, J., Burkoski, V., Jarrett, S., Collins, B., & Hall, T. N. T. (2018). A comparison of hospital-acquired pressure injuries in intensive care and non-intensive care units: A multifaceted quality improvement initiative. *BMJ Open Quality*, 7(4), e000425. <https://doi.org/10.1136/bmjopen-2018-000425>

Mohamed, S. S., & Ibraheem, R. A. (2019). Effect of Preventive Bundle Care on Nurses' Knowledge, Compliance, and Patients' Outcome Regarding Pressure Ulcer in the Intensive Care Unit. *Evidence-Based Nursing Research*, 1(4), 5-12. <https://www.ajol.info/index.php/ebnr/article/view/219575>

European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel, and Pan Pacific Pressure Injury Alliance. (2019). Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. *The International Guideline*. Emily Haesler (Ed.). EPUAP/NPIAP/PPPIA.
<https://internationalguideline.com>

Outcome

