Celebrating Nursing Science: The Research-Practice Link - Wound Care Panel

Linda Schakenbach, MSN, RN, CNS, CCRN, CWCN, APRN, BC
Clinical Nurse Specialist, Medical Cardiac Nursing
Inova Fairfax Hospital/Inova Heart and Vascular Institute
Falls Church, VA

How does research get to practice???

- Journals
- Conferences/seminars
- Poster presentations
- National standards
  - Professional organizations
  - Government standards
  - Public groups/organizations
- Research grants
- List serves

Answer to a question

- 1992 Clinical Nurse Specialists identified need for pressure ulcer prevention

Validated need with
- Staff
- WOCN
- Quality Department
- Administration
- Risk Management
- Physicians
- Annual Pressure Ulcer prevalence survey data
What should ‘we’ do???

• Brainstorm
• Benchmark
  – Professional organizations
  – National/proprietary databases
  – List serves
  – Phone calls/e-mails

• Review the literature
  – Are there current standards?
  – Do any research reports have questions relevant to our needs?

Current standards:

• Pressure Ulcers in Adults: Prediction and Prevention (Clinical Practice Guideline, May 1992, US Dept. HHS, AHCPR [now AHRQ])


Should we use the research literature we found???

• Research question relevant
• Literature review/reference list ‘current’
• Number of subjects and sampling procedure
• Characteristics of subjects
• Characteristics of facility
• Protocol logical for research question
• Tools reliable and valid
• Resources available
• Conclusions and discussion correlate with the data
• Results clinically significant (vs. statistically significant)
What did we learn from the literature??

- Perform systematic risk assessment and reassessment at periodic intervals
- Research determined validity and reliability of the Braden Scale
- Research identified the Braden Scale was:
  - best performed by RNs
  - easy to gather the data and complete the tool
  - quick (< 1 minute/patient)
  - easy math (user friendly)
- Braden Scale literature primarily long-term care

Question:

- Are the benefits of the change worth the costs to
  - patient
  - family
  - staff
  - expenditure on other resources (equipment, supplies, personnel)?

What has research demonstrated over time?


- Risk assessment with the Braden Scale good predictive value
- Braden Scale assists with identification of patient interventions
- Tertiary care facilities studied
- 100% sensitivity (!); 64-90% specificity
- Pressure ulcer distribution described
What has research demonstrated over time?

- Assess patients on admission
- Re-assess at 48-72 hours
- Best sensitivity of assessment: 48-72 hours after admission
- Validated score of 18 cutoff for patients at low risk for pressure ulcer development
- Identified pressure ulcer developed Day 11 (mean)
- Formal risk assessments → best use of resources

What has research demonstrated over time?

- Braden Scale score cutoff of 18 valid for both black and white patients

Translation into practice:
- Awareness of trends provides a preview of possible practice changes
- Access research reports
- Evaluate quality of research
- Evaluate “fit” of research to practice situation
- Develop co-champions
- Develop the plan: implement, evaluate, maintain, continue to improve & advance practice/patient care
- Keep asking WHY???
Thank you