### ANNIE TAYLOR DEE in Oncology Patients Through Reducing Hospital-- SCHOOL OF Nurse Education **NURSING** Acquired Pressure Injuries Samantha Tietjen, BSN, RN, MSN Student



# BACKGROUND

Hospital-acquired pressure injuries can cause significant patient, family, and organization complications when not prevented (<sup>1</sup>). Oncology patients present an increased risk for pressure injuries (<sup>2</sup>). Nurses are essential in providing critical interventions for at-risk patients to prevent and reduce hospital-acquired pressure injuries  $(^{3,4})$ . However, a gap exists in pressure injury prevention education in many Medical/Oncology settings (<sup>5</sup>).

- Pressure injuries comprise over 60% of oncology patients' wounds
- Research suggests that only 26.9% of at-risk oncology patients are treated with appropriate pressure injury interventions (<sup>5</sup>).
- One pressure injury incident can cost an organization \$500-\$70,000 (<sup>6</sup>).

# METHODS

A literature review of various evidence types and databases was completed to support this MSN project. The following themes were identified:

- Oncology patients present specific barriers and risk factors contributing to altered skin integrity  $(^{2,3})$ .
- Skin care management strategies are specialized and unique to oncology patients  $(^{5,7})$ .
- Accessible, thorough education guides nurses in preventing hospital-acquired pressure injuries (<sup>1,8</sup>).

The Iowa Model Revised was used as the framework for this project. This framework was used for its multiphase evidence-based change process with frequent feedback loops to analyze, modify, and evaluate this process (<sup>9</sup>).

# REFERENCES

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## EVALUATION

An interdisciplinary team met to create a timeline (see graphic) and discussed the dissemination and application of the deliverables and the evaluation. The deliverables for dissemination included an educational module, reference booklet, preand post-test, and post-completion survey. This project will be measured and evaluated for effectiveness using several methods, including:

- An E-learning module pre-and post-test
- A post-completion survey
- A pre-and post-implementation chart audit

The evaluation of this project will determine its continuation or modification.

## DISCUSSION

Project success will be indicated by a 5% decrease in hospital-acquired pressure injury prevalence in the first quarter. After this project is evaluated and modified as necessary, it is expected that this project will expand for future use and enhance patient outcomes. The expansion of this project would include the following:

- Creating a "championship" program

### Project Implementation Timeline

Meet with Unit Manager and Educator to review project disseminat- ation and implement- ation chart ation chartDisseminate deliverables to nurses via email.E-learning module, pre-and post-test due.Nurses will continue to implement module outcomes into their practice.Nurses will will receive and complete a post- completionEvaluate and module outcomes into their practice.Nurses will module outcomes into their practice.Nurses will module outcomes into their practice.Nurses will will receive and completionEvaluate and module outcomes into their practice.Nurses will module outcomes into their practice.Nurses will module outcomes into their practice.Nurses will will receive and completionEvaluate and module outcomes into their practice.Nurses will module outcomes into their practice.Nurses module outcomes into their practice.Nurses module outcomes into their practice.Nurses will module completionEvaluate and module completion.Online deliverables ready to use.Disection and module completion.Post- implement and make necessary changes.Evaluate and module outcomes into their project and make necessary changes.Evaluate and module outcome into their project and make necessary changes.Evaluate and module outcome into their project and make necessary changes.Evaluate and	Week 1	Week 2	End of Month 1	Months 2-3	End of Month 3	Ongoing
	Meet with Unit Manager and Educator to review project disseminat- ion and implement- ation (1 hour). Online deliverables ready to use. Pre- implement- ation chart audit.	Disseminate deliverables to nurses via email.	E-learning module, pre-and post-test due. Nurses will implement module outcome into practice immediate- ly following module completion.	Nurses will continue to implement module outcomes into their practice.	Nurses will receive and complete a post- completion survey.Post- implemen- tation chart audit.Evaluate the project and make necessary changes.	Evaluate and make improve- ments to project as needed.

• Expanding to other Medical/Oncology units within the hospital system • Expanding this education beyond Registered Nurses • Creating an in-service program to augment the online curriculum

# CONCLUSIONS

- consent, and impartiality.







• This MSN project aims to enhance nurse education to prevent pressure injuries in oncology patients. This project examined various ethical considerations to mitigate personal bias and promote participant rights and diversity through anonymity,

• As this project expands, recommendations for future research are indicated for further improvement. The literature review illustrates that using an interprofessional team can improve patient outcomes; therefore, this project's prospective study and expanse will incorporate the interdisciplinary team (<sup>10</sup>).

• Hospital-acquired pressure injuries can cause complications for patients, families, and organizations (<sup>1</sup>). As nurses create a culture of pressure injury prevention by implementing the findings from this project's deliverables, hospital-acquired pressure injuries in oncology patients can be decreased.