

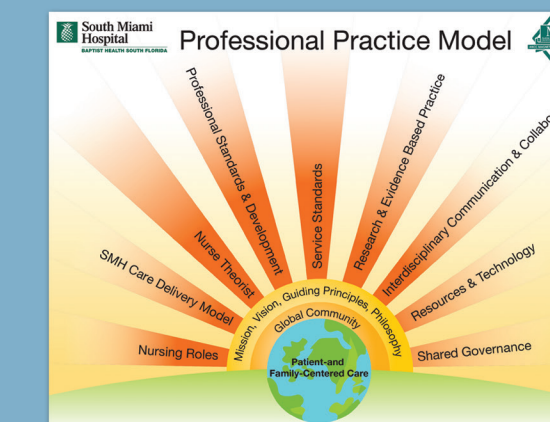


South Miami
Hospital

BAPTIST HEALTH SOUTH FLORIDA

Beyond the Braden Scale: Effectiveness of a Small Group Educational Program on Neuro-Nurses' Braden Risk Assessment Scores and Number of Preventative Nursing Interventions

Shakira Henderson, PhD(c), DNP(c), MS, MPH, RNC-NIC, IBCLC • Center for Research and Grants, Baptist Health South Florida, South Miami, FL
Lee Streater MSN, BSHSA, RN, CNOR, CNML • South Miami Hospital, Baptist Health South Florida, South Miami, FL



This study was sponsored by the Neuroscience Nursing Foundation.

Background

- Hospital-acquired pressure ulcers remain an utmost healthcare concern because of the significant emotional and physical toll on the patient and the large financial impact on hospitals.
- With an incidence rate of 38% and a total annual cost of approximately \$11 billion dollars in the United States, the Center for Medicare and Medicaid Service will not reimburse for these injuries.
- Neurological patients are even more susceptible to pressure ulcer formation than most patients.
- Consequently, neuro-nurses are charged with being implementation experts of preventative nursing interventions in response to their risk assessments.
- Yet research shows that there is a gap between risk assessment and application of nursing interventions.
- Nurses tend to either not apply preventative measures or are inconsistent despite having an "at risk" patient.

Purpose

The proposed study attempts to assist in bridging that gap by assessing the neuro-nurse's understanding of "at risk" and evaluating the impact of an educational intervention on improving the neuro-nurse's knowledge of pressure ulcer risk assessment and subsequent preventative nursing interventions.



Method

A descriptive, quasi-experimental design with a one-group, pre-intervention survey, educational intervention, and post-intervention survey method will be used.

Results

A paired t-test was conducted to evaluate the impact of the educational intervention on both Braden score choices and number of nursing interventions chosen by the nurse participants. There was no statistically significant difference in Braden scores post-education ($M = 13.41$, $SD = 5.38$) vs. pre-education ($M = 13.67$, $SD = 4.49$), $t(23) =$, $p < .465$ (two-tailed). However, there was a statistically significant increase in number of nursing interventions post-education ($M = 10.69$, $SD = 2.38$) vs. pre-education ($M = 10.11$, $SD = 4.83$), $t(23) =$, $p < .001$ (two-tailed).

Conclusion

Neuro-nurses are competent on assessing "risk" of pressure ulcers for neuro patients using the Braden Scale. However, there is variation on how to manage risk based on the Braden score assessed. Further research is needed to bridge the gap between risk assessment and nursing application of interventions. This gap may be a contributing factor to the incidence of pressure ulcers in the clinical setting.