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Improving Burn Nursing Skills and Knowledge with Burn Specific Competencies

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Improving Burn Nursing Skills and Knowledge with Burn Specific Competencies

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BACKGROUND

- LVHN's Regional Burn Center is accredited by the American Burn Association (ABA).
- New 2015 ABA guidelines require all burn centers to develop burn-specific competencies.
- LVHN does not currently hold Education Days that focus on validation of burn-specific knowledge/skills.
- Varying levels of burn care skill and knowledge exist among nursing staff.
- Re-education and development of burn competencies are needed to correct gaps in knowledge deficits and meet ABA reverification criteria.

PICO QUESTION

In burn nursing, does the implementation of a unit-based educational program with annual competencies, when compared to centers that do not utilize annual competencies, improve the knowledge and skill of the staff and meet criteria for ABA reverification?

EVIDENCE

- Information obtained in the simulated environment is valid and appropriate for use in judging nurse competency... A skills recredentialing program provides a valid assessment of nurse competence (Jones, Cason, & Mancini, 2002).
- There is a critical need for nursing-led evidence-based education. Education programs for post resuscitative and intensive care unit phase of a burn patient are limited. Having a standardized education resource improved staff knowledge related to burn nursing care (Olszewski et al, 2015).
- Major strides in understanding the principles of burn care over the last half century have resulted in improved survival rates, shorter hospital stays, and decreases in morbidity and mortality rates due to the development of resuscitation protocols, improved respiratory support, support of the hypermetabolic response, infection control, early burn wound closure, and early enteral nutrition. Critical care of the burn patient requires the participation of every discipline in the hospital (Latenser, 2010).

METHODS

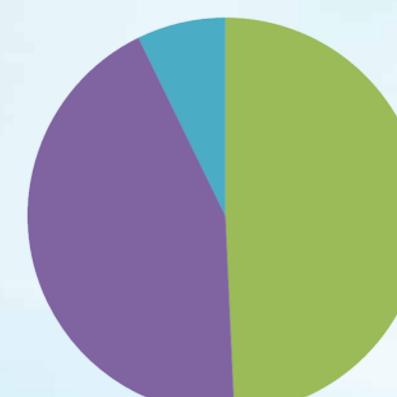
• A needs assessment and pre-survey to gather RN burn care skills/knowledge baseline.

Burn Education Days were provided over a 2 day period to accommodate RN schedules; Included hands-on skill/ competency stations:

- Burn Education Days were provided over a 2 day period to accommodate RN
- Elastic tubular support bandage sizing & application
- Central line redress
- Self-adhering elastic support wrap & elastic bandage application.
- Post-surveys to determine if education was beneficial and/or increased knowledge of burn care.

RESULTS

Pre-assessment Perception: Sufficient Burn Education is Provided



- Strongly disagree
- Disagree 0%
- Neutral 34%
- Agree 30%
- Strongly agree 5%

Pre-assessment: Annual Competencies Improve Burn Nursing Education and Patient Care

- Strongly disagree 0%
- Disagree 0%
- Neutral 19%
- Agree 33%
- Strongly agree 48%

- the project.
- staff knowledge and comfort level.
- burn specific competency evaluations.

- improves overall competency of staff.
- therefore decreasing the knowledge gap.

Post-assessment Perception: Sufficient Burn Education is Provided

- Strongly disagree
- Disagree 0%
- Neutral 24%
- Agree 43%
- Strongly agree 33%

Post-assessment: Annual Competencies Improve Nursing Education and Patient Care

- Strongly disagree 0%
- Neutral 9%

Disagree 0%

- Agree 38%
- Strongly agree 52%

References:

- 1391-1392.
- Journal of Burn Care & Research, 37(1), 20-24.

OUTCOMES

• Of 23 clinical nurses employed on the burn unit, 21 participated in

Pre-assessment surveys indicated knowledge level of burn care and comfort level of performing burn-specific care varied.

Post-assessment surveys showed marked improvement of clinical

Pre- and post-assessment surveys reiterate the need for annual

CONCLUSIONS

The results of this study show that burn specific education

All staff were provided the same education on topics covered,

LVHN Regional Burn Center will continue to host annual Burn Education Days to meet ABA re-verification criteria.

Jones, T., Cason, C. L., & Mancini, M. E. (2002). Evaluating nurse competency: Evidence of validity for a skills recredentialing program. Journal of Professional Nursing, 18(1), 22-28. 2. Latenser, B. A. (2010). Critical care of the burn patient: The first 48 hours. *Critical Care Medicine*, 38(5),

3. Olszewski, A., Yanes, A., Stafford, J., Greenhalgh, D. G., Palmieri, T. L., Sen, S., & Tran, N. (2016). Development and Implementation of an Innovative Burn Nursing Handbook for Quality Improvement.

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