The Effects of Sun Safety Awareness Implementation in a Pediatric Population Beginning at 6 Months of Age to Decrease Risky Behaviors and Increase Sun Exposure Knowledge
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Project Purpose
Survey current sun safety education practices at Greenvale Pediatrics—Alabaster
Implement USPSTF current guidelines for sun safety education beginning at 6 months of age through an effective sun safety tool
Establish a way for providers to quickly and efficiently document education in EMR
Evaluate effectiveness of educational tool with long-term implications

Methods
Step 1
• Pre-implementation survey of providers conducted (written)
  • Do you currently provide sun safety education as part of well child checkups?
  • If yes, approximately what percent of patients do you provide sun safety education?
  • Do you currently have a quick way to document sun safety education in your EMR when education is provided to patient?

Step 2
• Implement sun safety educational tool, “Play It Safe in the Sun” to 151 patients/parents

Step 3
• Gather patient/parental feedback (verbal):
  • Do you believe the education provided is beneficial and informative?
  • Do you think you or your child will be less likely to participate in risky behaviors in the future?

Step 4
• Post-implementation survey of providers:
  • With access to a sun safety educational tool and a faster way to document sun safety education in the EMR, would this increase the number of patients education is provided to?

Step 5
• Link to educational tool and step-by-step instructions for EMR documentation provided to practice

Results
Only an estimated 36% of patients receiving any kind of sun safety education.
Positive patient/parental feedback with implications to reduce future participation in risky behaviors, decreasing incidences of future skin cancers.
Unanimous agreement by providers to implement the education with the tool in place and easier EMR documentation.

Effectiveness of Education
- Beneficial and Informative: 99%
- Not Beneficial and Informative: 1%

Impact of Education
- Less Likely to Participate in Risky Behaviors: 97%
- No Change of Behavior: 3%

Local Problem
- Over 1,300 new cases of melanoma in Alabama in 2015
- 1 person dies hourly from melanoma
- Risky behaviors (ex. Use of tanning beds, not wearing sunscreen, etc.) increases chances of skin cancer
- No educational tool in place at pediatric office
- Inefficient documentation system for sun safety education

Pre-Implementation Survey of Providers
- Patients Receiving Education: 36%
- Patients Not Receiving Education: 64%

Implications for Practice
The response to implement the changes was overwhelmingly positive by the medical staff, administration, and providers. Additional data collection over a longer period would be needed to assess long-term patient outcomes and adherence to not participating in risky behaviors.