Leading Practices in Geriatric Care: Building a Dermal Defense Team Makes a Difference!

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Geriatric Excellence with Dermal Defense

• Objectives:
  • 1. Discuss methods of adult learning
  • 2. Describe ways to engage stakeholders
  • 3. Engage system administration
  • 4. Encourage staff to be a team member
Types of Adult Learning

• Knowledge-based
  • Intellectual skills and knowledge retention

• Skills-based
  • Physical movement, coordination and motor skills

• Attitude- motivation
  • Motivation and values

Models of Adult Learning: SMART and ABCD

- S-Specific
  M-Measurable
    A- Achievable
    R- Relevant
    T- Time
- A- Audience: Who am I teaching?
  B. Behavior: What type of behavior is expected?
  C. Condition: Where will this behavior occur?
  D- Degree: How engaged will the learner become?

- Northwest Center for Public Health Practice (www.nwephp.org)
Staff Expectations When Asked to Learn Something New

- Is this going to be something I will be able to use in my practice now?
- Can you hold my interest?
- Are you being respectful of my time?
- Is there a good reason for the training?
- Will this affect my patients?
- Will this give me a job skill that improves my outcomes?
- Does this affect my value in doing my job?
Dermal Defense Building Better Geriatric Awareness

- Levels of Staff Engagement
  - Senior Management
  - Unit management
  - Staff RN, Patient care technicians (PCTS)
- Needs Assessment- Hospital-Acquired Pressure Ulcer (HAPU) prevalence with achievable outcomes
- HCAPS scores
- Gap Analysis- perform to assess learning needed of staff
  - Validates adding training costs
  - Add NDNQI training
  - Add Braden Scale Competency
Process of Engagement

• Beginning with Nursing VP agreement of staff time
• Engaging Managers
• Getting Staff Engaged
  • Continued presence of geriatric nurse practitioner on all units
  • Rounding with nurses caring for patients
  • Monitoring patient care needs
  • Assessment of beds
    • Use of bed rentals
    • Buy in of hospital for capital spending for new beds
Ancillary Staff Engagement

- Physical Therapy/ Occupational Therapy-direct pressure relief
- Registered Dietitian- Nutrition needs
- Respiratory Therapist- Bipap and device-related pressure ulcers
- Patient Transporters- Gentle handling of precious elders
- Supply Chain Management- Best and/or improved products
- Industry Partners- Technology advancements
  - Beds
  - Tools for Offloading Patient
  - Devices used in direct patient care
Ancillary Staff Teaming with Nurses

- Added value with PCT members on dermal defense team
  - Discuss needs of seniors- RN with PCT
  - What interferes with ambulation
  - Sacral pressure ulcer prevention offloading with air cushions
  - Heel ulcer prevention- neuropathy?

Wound care education and certification for dermal team members
Partners in Patient Care

- PCT and RN working together:
- Commitment to inspecting skin every day
- Engage PCTs in skin checks
- Appreciate PCT input
- Respect role of PCT
- Partner in prevention with physicians
Tools Added to Increase Staff Engagement

• Hospital intranet web page for all wound, ostomy, and continence (WOC) education
  • Procedures related to WOC nursing
• Skills competency and spring dermal fair
  • CE poster presentations given by dermal team
• Vendor Fair
  • Updates in all wound, ostomy, and continence products used in hospital
Keeping Hospital-Acquired Pressure ulcers (HAPUs) to a Minimum

- Prevalence studies: results reported to management/NVP
- Drilldown on HAPUs
- Emails by unit champions to staff after studies are complete
- Dermal defense monthly unit education
- Rounding with all new hires for 4 hours
  - Competency checklist
  - WOC intranet webpage
Research and Evidence-Based Practice

- Study of residual bacteria in bath basins
- Results of study prove need to make a change
- Agreement of all staff to make the change
- Basins removed - resistance of staff addressed
- Buy-in?
  - Added no rinse soap with very pleasant fragrance
  - Staff like new product
  - Accept change and continue to check on resistance
System Dermal Defense Team Planning

- Hospital Wound Ostomy Continence (WOC) Team Leader
- Unit dermal defense team member
  - Listed by hospital name of each member and unit assignment
- Unit team member responsible for engaging new team member
- New team member educated by outgoing team member
- System dermal team meetings monthly
- System dermal defense conference half day CE education
- Research planning for system dermal defense
  - Education and mentoring by WOCN
Geriatric Nursing Excellence Summary

• Dermal defense champions teach specific skin care for seniors
• Patient care with hourly rounding for continence care
• Eliminate plastic diapering and use briefs
• Maintain all bedside methods of care are consistent in all units
• Continuity of care with prevention methods
• Drilldown at dermal monthly meetings and sharing of ideas
Next Steps

- Senior Services in Community
- Education in best practices in community nursing homes
- Ongoing commitment to successful transfer back to community
- Communication with long-term acute care facilities (LTACS)
- Opportunities to share ideas and spotlight dermal team members
- System-wide dermal conference