Comfort-Focused Wound Care: Development of a Standardized Protocol for Wound Care at the End of Life
Traci Lambert Brackin, DNP, APRN, FNP-BC, CWOCN, CFCN

Introduction
Successful wound management in the palliative care and hospice care arenas is a challenging process that requires progressive clinical knowledge, explicit goal communication, and creativity to provide comfort and symptom control. While most acute and chronic wounds encountered by a provider can be healed effectively if the appropriate treatment is employed, there are some recalcitrant wounds and many comorbidities that prevent wound healing, especially at the end of life. This circumstance causes providers to evaluate appropriate interventions for wound maintenance. Providers should be able to utilize protocols with symptom control in mind when providing palliative, or comfort-focused wound care (CFWC). A specific protocol and detailed education could equip the nurses with the tools, education, confidence, and supplies needed to teach the patient and adequately provide symptom control in the wound that are usually quite difficult to manage.

Methods
This was a two fold project. The first step was to review the evidence-based literature and make a standardized palliative wound care protocol based upon the AGREE II Protocol Development Model. The second step of the project included obtaining content validity from field experts to determine the usefulness of the protocol.

Procedures

Literature Review: A literature review is conducted by utilizing the Cumulative Index to Nursing and Allied Health Literature (CINAHL) with full text database, UpToDate, and PubMed. Articles are populated and reviewed by applying the search terms “wound care”, “palliative wound care”, “wound care protocol”, “perception of benefit”, and “quality of life” for each of the databases.

Protocol Development: Please see handout

Content Validity: Experts rated on a Content Validity Scale to obtain Content Validity Index (CVI).

<table>
<thead>
<tr>
<th>Item</th>
<th>Very difficult</th>
<th>Difficult</th>
<th>Easy</th>
<th>Very easy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>20.0%</td>
<td>40.0%</td>
<td>40.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Odor</td>
<td>60.0%</td>
<td>40.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Drainage</td>
<td>20.0%</td>
<td>60.0%</td>
<td>40.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Bleeding</td>
<td>0.0%</td>
<td>40.0%</td>
<td>60.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Nurse Education: An education session was done and nurses completed voluntary survey:

<table>
<thead>
<tr>
<th>Source of palliative care protocols</th>
<th>0.0%</th>
<th>20.0%</th>
<th>40.0%</th>
<th>60.0%</th>
<th>80.0%</th>
<th>100.0%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Products for advanced practice care and comfort</td>
<td>20.0%</td>
<td>60.0%</td>
<td>40.0%</td>
<td>20.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Knowledge of how to incorporate care and comfort</td>
<td>20.0%</td>
<td>60.0%</td>
<td>40.0%</td>
<td>20.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Confidence in comfort and palliative care practices supported by the protocol</td>
<td>0.0%</td>
<td>40.0%</td>
<td>60.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Results
Please see handout for Comfort-Focused Wound Care Protocol. This protocol was created based upon evidence-based literature review.

The researcher obtained content validity for each item on the protocol and assigned a content validity index (CVI). Any item on the protocol with a CVI less than 0.75 was removed from the protocol (2 items).

Nurse education was performed and a voluntary survey was completed after the education session. The nurses noted:

- Pain and odor were the most difficult symptoms to control
- Many nurses came in contact with wounds requiring palliative focus up to 5 times weekly
- Few nurses felt competent or proficient in the treatment of wounds requiring palliative/comfort focus
- The education session was easy to understand

Conclusion
The literature reviewed by the researcher revealed a plethora of information regarding the need to control the elements of wound care at the end of life that could be problematic, such as pain, odor, drainage, bleeding, and bacterial bioburden. However, there was a paucity of information regarding a standardized protocol that contained mechanisms for successful interventions to control these troublesome symptoms. The palliative wound care protocol has been developed based upon evidence-based practice, detailed literature review, and researcher clinical experience. This protocol was then refined and modified based on expert review and feedback from nursing staff. The implications for future study regarding the implementation of this protocol have been reviewed and can be initiated in many settings where healthcare is provided. The Palliative (Comfort-Focused) Wound Care Protocol is a vital component of wound care practice in many settings, and the protocol can be used to empower healthcare providers with confidence in making an appropriate intervention regarding wound care symptomatology at this very difficult time in the life of a patient and family.

References
Please see reference list provided by researcher/presenter.


See full reference list provided by researcher/presenter.