

## Sigma Theta Tau International's 29th International Nursing Research Congress

### Evaluation of an Intimate Partner Violence Screening Competency Skills Check-Off for Maternity Nurses

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#### **Purpose:**

The purpose of this study was to investigate the effectiveness of an intimate partner violence (IPV) computer-based learning module (CBL), IPV screening competency skills training and check-off, and use of a new IPV screening protocol. This study also evaluated the knowledge and comfort level for conducting IPV screenings.

#### **Methods:**

This was a quasi-experimental study using a pre-post test design. Sample: The sample size included 16 maternity nurses employed at a large hospital in the United States on a Mother-Baby Unit and the Labor and Delivery Unit. Inclusion criteria included: Maternity nurses, male or female, 19 years of age and older, and all ethnicities. The sampling method was convenience sampling. Procedure: The computer-Based Learning Module was designed to prepare the participants to successfully complete skills check-off and increase knowledge and comfort level for IPV screening. Once the potential participants completed the consent form to participate the participants were asked to complete the demographics form that included questions about education, years of nursing experience, previous IPV training, knowledge and comfort level for IPV screening, and personal experience with IPV. Age, gender, and ethnicity were also included in the demographics. Each participant rated their current knowledge and comfort level for conducting IPV screenings using a 5 point Likert Scale. Once the demographics form was completed the IPV CBL module was made available via the hospital's intranet. Once participants completed the CBL module they registered for IPV training and the competency skills check off. Following successful completion of the IPV competency skills check off each participant completed the Post Assessment of the IPV Screening CBL Module questionnaire to evaluate the efficacy of the computer-based learning module in preparing them to successfully pass the skills check-off and rated their knowledge and comfort level. Each participant was then given a patient IPV screening log to complete. This IPV screening log required them to screen 20 patients and record the patients response to either a yes or no for disclosure of IPV, or record if they had no opportunity to screen the patient and report the reason for no opportunity, and list any barriers they encountered.

#### **Results:**

Demographics: Sample size included 16 participants. Participants' age range was 24-61, with a mean age of 41.56. All participants were female. Thirteen (81.3%) of the participants were white and three (18.8%). Participants reported highest degree obtained as follows: six (37.5%) associate's degrees, nine (56.3%) bachelor's degrees, and one (6.3%) master's degree. None reported having a DNP or PhD. Fifty percent (n= 8) reported over 10 years of nursing experience, three (18.8%) reported having from 5 to 10 years of nursing experience, and five (31.3%) reported having 1 to 4 years of nursing experience. None of the participants reported less than 1 year of experience in nursing. Participants were from various departments: 12.5% (n=2) from labor/delivery, 56.3% (n=9) from mother/baby, and 6.3% (n=1) from

antepartum. Six (37.5%) of the participants claimed to not have received any previous IPV education during their college curriculum. When asked if the participant had ever witnessed IPV in the clinical setting, 50% (n=8) reported they had witnessed IPV and 50% (n=8) had not.

The majority of participants strongly agreed the computer based learning module increased their knowledge level about IPV. The majority of participants agreed the computer based learning module increased their comfort level for screening and how to respond to "Yes" and "No" patient responses. The majority of participants agreed the computer based learning prepared them to pass the competency skills check-off for intimate partner violence screening.

A paired *t* test was conducted to evaluate participant's knowledge level of conducting IPV screenings before and after completing the CBL module. Alpha was set at  $p < .05$ . There was a statistical significant increase in IPV screening knowledge level from the pre-assessment ( $M=2.33$ ,  $SD .617$ ) to the post-assessment ( $M=4.20$ ,  $SD .676$ ),  $t (-7.897) = p < .000$  (two-tailed). The mean increase in knowledge level scores was 1.87 with a 95% confidence interval ranging from -2.374 to -1.360.

A paired *t* test was also conducted to evaluate participants comfort level of conducting IPV screenings before and after completing the CBL module. Alpha was set at  $p < .05$ . There was a statistical significant increase in comfort level in performing IPV screening from the pre-assessment ( $M=2.87$ ,  $SD .6060$ ) to the post-assessment ( $M=4.3.393$ ,  $SD .67.884$ ),  $t (-74.675) = p < .000$  (two-tailed). The mean increase in

Barriers most identified included time and patient not alone.

### **Conclusion:**

Training, competency skills check-off, and a well-defined IPV screening protocol was found to increase nurses' knowledge and comfort level. Implementing an IPV competency skills check-off and screening protocol is one solution to improve health outcomes of women who experience IPV.

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### **Keywords:**

Competency skills check-off, Intimate partner violence and Intimate partner violence screening

### **References:**

American College of Obstetricians and Gynecologists. (2012, February). Intimate partner violence, committee opinion number 518. Retrieved from <http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/Intimate-Partner-Violence#25a>

Beynon, C. E. Gutmanis, I. A., Tutty, L. M., Wathen, C. N., & MacMillan, H. L. (2012). Why physicians and nurses ask (or don't) about partner violence: A qualitative analysis. *BMC Public Health*, 12:473 doi: 10.1186/1471-2458-12-473 Retrieved from <http://www.biomedcentral.com/1471-2458/12/473>

Breiding, M. J., Basile, K. C., Smith, S. G., Black, M. C., & Mahendra, R. R. (2015). *Intimate partner violence surveillance: Uniform definitions and recommended data elements, Version 2.0*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. Retrieved from <http://www.cdc.gov/violenceprevention/pdf/intimatepartnerviolence.pdf>

Center for Disease Control and Prevention. (2013). Intimate partner violence during pregnancy: A guide for clinicians. Atlanta, GA: Authors. Retrieved from: [http://www.cdc.gov/reproductivehealth/violence/intimatepartnerviolence/slides/acogcdc\\_ipv.pps#256,1,Intimate Partner Violence During Pregnancy](http://www.cdc.gov/reproductivehealth/violence/intimatepartnerviolence/slides/acogcdc_ipv.pps#256,1,Intimate%20Partner%20Violence%20During%20Pregnancy)

Cronholm, P., Fogarty, C., Ambuel, B., & Harrison, S. (2011). Intimate Partner Violence. *American Family Physician*, 83(10), 1165-1172. Retrieved from: <http://www.aafp.org/afp/2011/0515/p1165.html>

Miller, E., McCaw, B., Humphreys, B. L., & Mitchell, C. (2015). Integrating intimate partner violence assessment into healthcare in the United States: A systems approach. *Journal of Women's Health*, 24(1), 92-99.

Paterno, M. T. & Draughon, J. E. (2016). Screening for intimate partner violence. *Journal of Midwifery and Women's Health*, 61(3), 370-375. doi: 10.1111/jmwh.12443

Spivak, H. R., Jenkins, E. L., VanAnderhove, K., Lee, D., Kelly, M., & Islander, J. (2014). CDC rounds: A public health approach to prevention of intimate partner violence. *Morbidity and Mortality Weekly Report*, 63(2), 38-41.

Sprague, S. Madden, K., Simunovic, N., Godin, K., Pham, N. K., Bhandari, M., & Goslings, J. C. (2012). Barriers to screening for intimate partner violence. *Women & Health*, 52(6), 587-605. doi: 10.1080/03630242.2012.6900840

Tjaden, P., & Thoennes, N. (2006). Extent, nature, and consequences of rape victimization: findings from the National Violence Against Women Survey. Washington D.C.: Department of Justice (US); 2006. Publication No. NCJ 210346.

US. Department of Health and Human Services. (2015). *HHS intimate partner violence screening and counseling: Research symposium*. Retrieved from: [https://sis.nlm.nih.gov/outreach/2013ipv/Report\\_IPVSymposium.pdf](https://sis.nlm.nih.gov/outreach/2013ipv/Report_IPVSymposium.pdf).

U.S. Preventive Services Task Force, Final Recommendation Statement. (2014). Intimate Partner Violence and Abuse of Elderly and Vulnerable Adults: Screening. Retrieved from <https://www.guideline.gov/summaries/summary/39425>

World Health Organization [WHO]. (2013) Global and regional estimates of violence against women: Prevalence and health effects of and non-partner sexual violence. World Health Organization: Geneva.

### **Abstract Summary:**

This presentation describes the development of an intimate partner violence (IPV) screening protocol for maternity nurses. A description of the training methods, IPV screening competency skills check off, development of a new IPV screening protocol for maternity nurses, and barriers are presented.

### **Content Outline:**

**Learning Objective #1: Examine the components of an IPV Computer-Based Learning Module and IPV training session.**

Content outline: 1. Access to the Computer-Based Learning Module. 2. Present topics included in the Computer-Based Learning Module and the IPV training session.

**Learning Objective 2: Describe the process for conducting the screening competency assessment skills check off**

Content Outline: 2. Describe steps involved in conducting the competency skills check off. 2. Describe the process for validating competency for IPV screening. 3. Discuss the process testing the IPV screening protocol

**Learning Objective 3: Summarize study results**

Content Outline 3: 1. Report demographics of participants. 2. Discuss effectiveness of training and competency skills check off. 3. Report findings related to knowledge and comfort level of maternity nurses who complete a computer based learning module, attend an IPV training session, and completes the competency. 4. Identified barriers

First Primary Presenting Author

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