Braden Scale Research to Practice

Barbara Fuller, RN, BSN, CWOCN National Institutes of Health Bethesda, Maryland

Role of WOCN

- Certified Wound, Ostomy, Continence
- Expert resource for pressure ulcer prevention & management
- Consultant for patients with complicated wounds and ostomies
- Consultant for patients with urinary and fecal incontinence.
- Empower nursing staff through education

Evidence-Based Practice

Definition

Definition
Evidence-based practice is "a total process beginning with knowing what clinical questions to ask, how to find the best practice, and how to critically appraise the evidence for validity and applicability to the particular care situation. The best evidence then must be applied by a clinician with expertise in considering the patient's unique values and needs. The final aspect of the process is evaluation of the effectiveness of care and the continual improvement of the process" (DePalma, 2000).

Evidence-Based Practice Vs. Research Utilization

Definition

Research Utilization is " a process of using findings from conducting research to guide practice" (<u>Titler, Mentes, Rake, Abbott, and Baumler, 1999</u>). "The process by which scientifically produced knowledge is transferred to practice" (<u>Brown, 1999</u>).

Selecting a Risk Assessment Tool

AHCPR Panel: Pressure Ulcer Prevention Guidelines (1992):

- Norton Scale (Doreen Norton, 1962)
- Braden Scale (Barbara Braden & Nancy Bergstrom, 1987)

Why The Braden Scale ?

- Good sensitivity and specificity data
- Subjected to the most complete validation
- High Inter-rater reliability
- Studies from diverse practice settings
- Easy to use and understand by RNs
- Perform rating in less than 1 minute
- Best fit for Clinical Center RN Staff

Implementation of Standard of Practice

- Request made through Nursing Practice Council
- March 2002 draft of pressure ulcer SOP completed
- April 2002 comments received from units
- May 2002 approved by Nursing Practice Council
- June 2002 SOP implemented

Staff Response

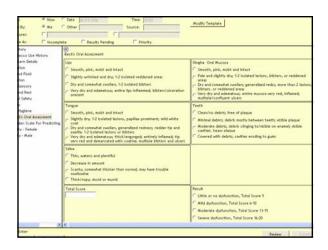
- "I feel we have too many things to document now when we admit and too much required documentation."
- "Can we get more transfer boards?"
- "Don't use too much lotion & do not leave lotion between fingers and toes."
- "Is this for everyone?"

Educational Program

- Etiology & risk factors predisposing to pressure ulcer
- Braden Scale Risk Assessment Tool
- Skin assessment/staging pressure ulcers
- Selection and use of support surfaces
- Demonstration of proper positioning
- Documentation

_





Challenges

- New research protocols and treatment.
- Trends in pressure ulcer development on units through data collection/occurrences
- Diverse patient population
- Care of uninsured after discharge

Rewards	
 Valued as part of interdisciplinary team Available resources Staff empowerment Positive outcomes 	
Conclusion	
Why do we do what we do?	
Because I said so	
-Mama	
Not the answer.	
Thank You!	