

Pressure Ulcers: Literature Review

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Pressure ulcers are localized injuries caused by pressure or shear to the skin and/or underlying tissue (Lavalée et al., 2019). In a point prevalence assessment of complex wounds in a northern UK city, pressure ulcers were found to be the most common type of lesion reported, with 26% of those who had them living in residential or nursing facilities. A person's age, immobility, and health are risk factors for pressure ulcer development. As a result, a large number of people in nursing homes will be at high risk, and prevention is crucial in this situation. Reviews of the literature give the researcher's claims about the significance of the subject under research greater credibility (Houser, 2023). The literature review has the potential to strengthen the existing body of knowledge regarding a certain topic or demonstrate a lack of expertise in that area. It can also be the foundation for further academic research and raise the possibility of publication.

Preventing Pressure Ulcers in Nursing Homes Using a Care Bundle: A Feasibility Study

Painful pressure ulcers can have a detrimental impact on healthcare expenses and the quality of life associated with health (Lavallée et al., 2019). A lot of residents in assisted living facilities run the danger of getting pressure ulcers. Researchers, tissue viability nurses, and nursing home personnel collaborated to create the first theory- and evidence-based care bundle exclusively for assisted living facilities. It consists of three preventive practices (skin inspection, support surfaces, and repositioning) and a variety of behavior change strategies to support these practices. The occurrence of pressure ulcers is believed to be a good indicator of the quality of care received because they are largely preventable. The goal of the SKIN bundle is to avoid pressure ulcers in hospital environments. It centers on five essential activities that are thought to

lower the incidence of pressure ulcers: surfaces, keeping moving, incontinence, nutrition, and hydration.

Key Points

Numerous bundles are created and executed with the implicit goal of optimizing the application of evidence-based procedures by altering the behavior of healthcare professionals (Lavallée et al., 2019). Participation was first agreed upon by two nursing facilities that offer 70–125 people a range of care services, including nursing, residential, and palliative care. All study components were completed by a single nursing unit at a single assisted living facility (n = 29 residents; n = 21 nurses and healthcare assistants). Out of the 21 staff members who took part, 12 went to the training and 9 went to the in-person interviews. The average number of years spent providing care to patients who could have a pressure ulcer was twelve. Five managers of nursing homes who had previously shown interest in this study were contacted. After agreeing to take part, two managers of nursing homes received the Participant Information Sheet and were instructed to deliver it to the employees at their facility. Before performing in-person interviews, they obtained each participant's informed consent. Using a multi-staged, theoretically driven methodology, they created the bundle for usage in nursing care settings. In the previous work, the research team held a four-hour workshop with tissue viability nurses and nursing home staff to build the bundle using the Nominal Group Technique. Three evidence-based components made up the bundle: repositioning, skin inspection, and support surfaces. In order to assist with the implementation, we also included interventions. At least one behavior modification approach from the Behavior Change Technique Taxonomy Version 1 was used in each implementation intervention. Each component required the nursing home staff to complete a number of steps. The resident's risk, as shown by their risk assessment score, dictated how frequently the

personnel completed the bundle pieces for each bedroom. As part of their routine, each resident's risk of getting a pressure ulcer was assessed monthly by the participants. They recorded 1,181 resident bed days of data collection, and no new pressure ulcers were found. There were no p-values, but other results were found. This study shows how nursing home personnel can accept a pressure ulcer prevention bundle and how it can enhance care delivery. By signing the documentation sheet, the participants said that it increased their motivation to give more thorough treatment. A document informing them of the anticipated procedures for preventing pressure ulcers, they also noted the bundle's worth. Sixty-three percent of the time, when a risk assessment score was recorded, the frequency of bundle delivery was adequate.

Assumptions

Prevention is crucial in this context since it puts a lot of residents of nursing homes at danger (Lavallée et al., 2019). An assumption on why the author looked more into this topic is because pressure injuries are very common in older adults. Apart from the psychological, emotional, and social consequences that come with having a pressure ulcer, there are also financial ramifications. Reducing the risks and improving the quality of care are important. The authors could have been assuming that if they use a bundle kit and put liability on the nurses, it will prevent and fix most issues when performing care for a pressure injury.

Deficit/Conclusion

I agree with the authors' line of reasoning due to the implication of limitations included in the article. They used self-reported behaviors in this small-scale study, and participants knew that their actions to prevent pressure ulcers were under observation (Lavallée et al., 2019). However, the qualitative data corroborated the quantitative results, indicating that the self-reports were accurate or perhaps even underestimated the degrees of bundle adherence. Positive attitudes

about bundles, effective communication, and greater knowledge of pressure ulcer prevention techniques are stated in the findings, which are consistent with prior research evaluating the use of pressure ulcer prevention bundles in hospital settings. As a result, it is believed the data they gathered and analyzed that each bedroom is sufficient for this feasibility study. A number of implementation problems, such as understaffing, disagreements with the bundle's content, and a lack of tissue viability nurse involvement in terms of education and training, may have contributed to the low adherence rates. More investigation is required to fully comprehend the challenges with recruiting and retention, data collection, and bundle adherence that was ran into during this study. Collectively, these results reinforce the justification for creating a more thorough assessment of the bundle before starting a cluster-randomized study. If one disagrees, it could create problems with liability issues.

Nurses' Knowledge and Attitudes Towards Prevention of Pressure Ulcers

Patients and clients of all ages suffer greatly from pressure ulcers, which can lead to problems with comfort, pain, and quality of life (Halász et al., 2021). For patients who are immobile, pressure ulcers (PU) continue to be a major consequence and a challenge for medical staff. Both the frequency and occurrence are still concerning. Nurses' attitudes and knowledge are crucial to prevention. The purpose of this study was to evaluate nurses' attitudes and knowledge on PU prevention in particular hospitals, as well as identify correlations and discrepancies between specific factors. Emphasizing general education, nursing practice, and continuous education is essential. The quality of care given can be significantly improved by creating more educational initiatives and measuring both of these indicators on a regular basis.

Key Points

The foundation for safe and high-quality healthcare delivery is knowledge (Halász et al., 2021). The majority of international research demonstrates that nurses lack sufficient knowledge and have unsuitable attitudes in this area of interest. There are notable differences between nurses who have had pressure ulcer training, university education, or tissue viability training. The majority of studies show similar barriers to providing patients and clients at risk of pressure ulcer development with appropriate preventive strategies. Both the PUKAT (Pressure Ulcer Knowledge Assessment Tool) and the APuP (Attitudes towards Pressure Ulcer Prevention tool) were used for the study. The PUKAT assessment tool, which was used to gauge participants' understanding of pressure ulcer prevention, comprised 26 questions divided into 6 domains. Nutrition, classification and observation, etiology and development, risk assessment, reduction of the magnitude of pressure and tearing, and reduction of the duration of pressure and shearing were all the categories. SPSS 20 was used to statistically analyze the collected data. The original data were presented as statistical means and descriptive frequencies. A Spearman ρ value correlation test was used to find links between the variables in order to assess the strength of the correlation and the significance, which was indicated as a p value < 0.05 . Tests of knowledge, attitudes, relationships, and differences between variables were conducted using five hypotheses. The findings indicated a deficiency in attitudes and knowledge regarding pressure ulcer prevention. This implies that most countries don't differ all that much from one another. Knowledge and attitudes in the study showed a statistically significant positive correlation. Other investigations came to the same conclusion. The findings showed that nurses had poor attitudes (67.9%) and inadequate knowledge (45.5%) about preventing pressure ulcers, with a high association between the two ($\rho = 0.300$; $p = 0.000$). There was also a substantial knowledge gap between work departments ($p = 0.048$) and educational levels ($p = 0.031$). In most research,

nurses with greater education levels performed better. Pressure ulcers continue to be a major global health concern. Pressure ulcers remain a major source of health complications and high mortality rates even with the development of preventive measures and modern technologies. The prevalence of pressure ulcers is a key sign of quality medical care from specialists. The information that is currently available indicates that Slovakia has relatively low incidence levels of pressure ulcers when compared to other countries.

Assumptions

Prior to beginning a complicated care treatment for pressure ulcers, the authors sought to ascertain the level of knowledge and attitudes regarding pressure ulcer prevention (Halász et al., 2021). They also compared the findings with those of previous studies in order to make recommendations for future studies pertaining to practice and education. An explanation for the author's decision to take on this research could be that nurses and other healthcare professionals lack the necessary expertise to provide patients with treatment that will improve their quality of life. Given the prevalence of pressure injuries, it is possible that the authors wanted to identify the underlying problem. Understanding the issue will facilitate the development of solutions to address it.

Deficit/Conclusion

I do accept the authors' line of reasoning due to the information provided within the article. The study offers useful information that enables you to draw a logical conclusion. The strategy used was logical and provided evidence to support the conclusions reached. The conclusions and information provided were comprehensible and made perfect sense. This study is intended to identify nurses' attitudes and levels of knowledge regarding PU prevention. If

nursing fails to accept this line of reasoning, education initiatives and independent research can enhance nurses' understanding of pressure ulcer prevention (Halász et al., 2021).

Students' Knowledge, Attitude and Practices Towards Pressure Ulcer Prevention and Management

All nurse managers should focus their training on preventing pressure ulcers as the main way to prevent persistent wounds that are challenging to manage and lead to greater issues (Abrahams et al., 2023). Patient safety depends on undergraduate nursing students' competence. During clinical assignments, student nurses deliver nursing care to patients, and the patients' quality of treatment may be impacted by their competency. Positive attitudes and well-informed understanding improve pressure ulcer early identification, prevention, and treatment. The objective was to assess the knowledge, attitudes, and behaviors (KAP) of undergraduate nursing students with regard to pressure ulcer therapy and prevention.

Key Points

The increasing incidence of pressure ulcers may be caused by inadequate knowledge and abilities, as well as negative perceptions regarding pressure ulcer prevention (Abrahams et al., 2023). The development of pressure ulcers may be caused by unfavorable views about pressure ulcers, unfavorable sentiments toward treating individuals who have pressure ulcers, as well as their preferences for managing their wounds. The authors also suggested that while treating pressure ulcers, a good attitude among nurses may result in improved wounds and a sense of fulfillment. Effective management of pressure ulcers mostly depends on early detection, prevention, and treatment. Pressure ulcers have a prolonging effect on morbidity and create delays in recovery. When proper examination, planning, and care are given, pressure ulcers can

be avoided. Pressure ulcer classification is essential for choosing the best course of action and accelerating healing. In order to avoid and manage pressure ulcers, it is essential that the curriculum be developed with the necessary information and application of knowledge regarding nutrition, assessment, the use of barrier creams, patient positioning, and patient and relative education. The precise goals were to evaluate and characterize undergraduate nursing students' knowledge, attitudes, and practices regarding wound healing treatment and prevention. At the main campus of the University of Namibia (UNAM), the study was carried out with fourth-year nursing students in the School of Nursing. Preventing and managing pressure ulcers is a crucial component of General Nursing I and II courses. As a result, fourth-year nursing students are expected to be knowledgeable about pressure injury medical care and prevention. The relationship between the demographic factors and the degrees of knowledge, attitudes, and practices was determined using Fisher's exact test. A two-sided $p < 0.05$ was seen as statistically significant evidence for the results. According to the results, 70% of respondents had high awareness regarding pressure ulcer causes and prevention, whereas only 30% had sufficient understanding. The results of this survey, which showed that 30% of respondents merely had satisfactory understanding, are concerning because they could endanger patients. A concern for patient risk resulting from a lack of understanding about pressure ulcers aligns with research that suggests ulcer development is linked to nurses' incapacity and ignorance in managing pressure ulcers. One is more likely to be knowledgeable about an issue the more educated they are. Positive findings were also found about the attitudes and practices of student nurses. The study's conclusions imply that student nurses have a high understanding of pressure ulcer prevention and care, as well as positive attitudes and actions in these areas.

Assumptions

It is possible to draw conclusions about this result and the reasons the author carried out the study in question. Despite the study's limitations, the findings make sense when it comes to understanding that student nurses have an impact on pressure ulcer management. As a fourth-year student nurse, you should naturally possess greater information, a more positive attitude, and better practices regarding pressure injuries. It does affect how you provide care for someone who might be dealing with this problem. It is possible that the authors wished to obtain more proof of the effect of one's level of skill in treating pressure injuries.

Deficit/Conclusion

I do agree with the authors' line of reasoning. The study's findings indicate that nursing students are capable of handling pressure ulcers that arise in a clinical context (Abrahams et al., 2023). It is advised to conduct observational research to evaluate clinical procedures. The results of this study will aid in filling up the gaps in the use of standard operating procedures for pressure ulcer management and prevention. Reiterating risk factors and management strategies for pressure ulcer formation and management in student curricula toward the end of the study is advised if one is not in agreement.

Conclusion

The three pieces effectively emphasize the significance of managing pressure injuries. When trying to manage or even stop the development of a pressure injury, understanding them and how to treat them is crucial. It all depends on how you approach the situation. These articles provide you with knowledge on pressure ulcers, including advice on how to prevent them as well as evidence regarding the effects of how your attitudes and practices will determine the care you give. There is always room for improvement in patient outcomes, nursing practice, evidence-based practice, quality improvement initiatives, and healthcare overall. The information in this

article influences how you care for patients and will lead to better patient outcomes. A pressure ulcer can only worsen if you don't perform the treatment the right way. Patients will not be receiving the high-quality care they deserve if you are not taking the proper steps to avoid pressure injuries from occurring. A solid evidence base supporting your reasoning for providing appropriate care to a patient suffering from a pressure ulcer will help your nursing practice. You will observe a decrease in the amount of pressure ulcer occurrences after you begin to apply your expertise and the supporting data when providing care for one. Knowing the significance of any issue in general will logically lead to improvements in quality improvement initiatives and healthcare as a whole. As soon as you begin to complete tasks accurately, you will notice an overall improvement in the standard of care.

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