

Ostomy Care Education for Acute Care Registered Nurses

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Introduction

Poudre Valley Hospital, a 235 bed acute care facility is fortunate in having good administrative support for Wound Ostomy Continence (WOC) services. We have 1.5 FTE in the department. While this allows time for complicated wound care and ostomy teaching, it does not provide specialized care for ostomy patients around the clock.

Problem

New and experienced ostomy patients were not getting the assistance needed from the staff RN to change their appliances in a timely manner. This led to decreased patient satisfaction with their stoma and hospital stay and to increased peristomal skin breakdown. RNs reported a low level of comfort with ostomy care.

Objectives

The WOC staff agreed that it was important to increase the nurses' comfort, knowledge and competence with ostomy appliance changes. We felt their improved knowledge of ostomy care would increase compliance with routine pouch changes when the CWOCN was not available.

Solution

To address the educational need quickly, the CNS attended staff meetings and demonstrated an appliance change (Figure 1), explaining the use of key ostomy care products that were part of our product formulary. The biggest need for education was on the surgical unit, since most of the ostomy patients were located there.

The next step was the development of a new educational program by the CNS. During this program which coincided with the surgical unit's annual mandatory competencies, every nurse used a stoma model to do an appliance application (Figure 2). Each nurse was also given a copy of a patient education booklet. There was also adequate time for questions.



Figure 1



Figure 2

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The last step in the educational process was the creation of a nine minute video showing a detailed appliance change and how to empty a pouch (Figure 3–7). This video shows the products currently being used at the hospital. It is short enough to be reviewed by staff as needed and it is used in employee orientation for nurses and nursing assistants. Each nursing unit has a copy of the video.



Figure 3



Figure 4

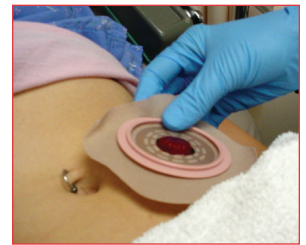


Figure 5



Figure 6



Figure 7

Outcomes

Complaints from patients about ostomy care have been nonexistent since this program was initiated. Nurses state they feel more confident in providing routine stoma care.

An unexpected outcome is how well received the video has been by the patients. We now show it routinely to new ostomy patients.



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