



Providing oral care in haematological oncology patients: Nurses' knowledge and skills

Carin M.J. Potting^{a,*}, Arno Mank^b, Nicole M.A. Blijlevens^a,
J. Peter Donnelly^a, Theo van Achterberg^c

^aDepartment of Haematology, Radboud University Nijmegen Medical Centre, Nijmegen, The Netherlands

^bDepartment of Oncology/Haematology, Academic Medical, Amsterdam, The Netherlands

^cCentre for Quality of Care Research, Nursing Science Section,
Radboud University Nijmegen Medical Centre, Nijmegen, The Netherlands

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Summary

In the international literature, the most commonly recommended intervention for managing oral mucositis is good oral care, assuming that nurses have sufficient knowledge and skills to perform oral care correctly. The aim of the present study was to investigate if knowledge and skills about oral care improve when education in oral care is provided to nurses in charge of patients who are at risk of oral mucositis. This intervention study consists of a baseline test on the knowledge and skills of nurses of the haematology wards of two different hospitals. Oral care education sessions were given in one hospital and follow-up tests were performed in both hospitals. Nursing records were examined and observations of nurses performing oral care were made at baseline as well as at follow-up. The results show significant differences in the scores for knowledge and skills before and after the education, whereas there was no difference in scores at the two points in time for the comparison hospital, where no education had taken place. The records test showed no differences at baseline or follow-up for the two groups. Observations showed that nurses who followed the education session implemented the oral care protocol considerably better than those who did not attend. Education in oral care has a positive influence on the knowledge and skills of nurses who care for patient at risk of oral mucositis, but not on the quality of oral care documentation.

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Introduction

Patients who receive chemotherapy to treat malignant disease, often experience oral mucositis as the most debilitating side effect (Stiff, 2001; Bellm et al., 2000). As a result of oral mucositis, patients' quality of life can be

affected by pain, infection, altered nutrition and impaired oral function (Sonis et al., 2001; Vera-Llonch et al., 2007). Oral mucositis is one of the most common causes of treatment delay and dosage reductions in cancer therapy (Cawley and Benson, 2005).

Prevention and treatment of oral mucositis is as important as care directed to fatigue, nausea and vomiting and many other side effects affecting patients with cancer.

Nurses play a central role in preventing and managing oral mucositis and reducing its debilitating effects on patients.

*Corresponding author. Tel.: +31 24 3618873; fax: +31 24 3614277.
E-mail address: c.potting@cis.umcn.nl (C.M.J. Potting).

In fact, they have three main responsibilities in managing oral mucositis: (1) effective assessment and monitoring of the oral cavity; (2) using appropriate oral care interventions; and (3) patient education (Stone et al., 2005). Nurses give oral care for patients with cancer a high priority (Southern, 2007), but very little is known on their performance (Ohrn, 2000).

In the international literature, regular oral care is the most commonly mentioned intervention for managing oral mucositis (Eilers, 2004; McGuire et al., 2006; Rubenstein et al., 2004). Yet, the standards for oral care are not consistently implemented and advice on oral care frequency varies from 'once every shift' to 'only if patient requests it'.

Furthermore, obstacles in performing oral care have been little investigated. McGuire (2003) outlined barriers to implementing oral care standards and proposed strategies to overcome them. In a study by Wallace et al. (1997), attitudes and subjective norms predicted 39% of the behaviour of nurses in providing oral care. A major barrier is a lack of knowledge about oral care which prevents optimal oral care from being provided (McGuire, 2003). A first and necessary step in the process of change is to identify the educational needs that exist in order to be able to offer adequate education and support, both theoretically and practically. However, knowledge deficits are not the only barriers. To manage oral care effectively, nurses require more and continuing education (Ohrn, 2000; Southern, 2007).

An important part of daily oral care is to assess the oral cavity of patients at risk for oral mucositis. To standardise

this assessment, nurses should be trained in the application of a standardised tools for screening and assessment (Quinn et al., 2007) in order to be proficient in using such instruments (Quinn et al., 2008). Besides this, training increases the inter-observer reliability of the oral assessment and improves the outcome of mucositis evaluations (Stokman et al., 2005).

The aim of the present study was to investigate if knowledge and skills regarding oral care improve when education in oral care is provided to nurses caring for patients who are at risk for oral mucositis.

Methods

Study design

This intervention study involved baseline tests on the knowledge and skills of nurses in haematology wards of two different hospitals. Oral care education sessions were given in one hospital and follow-up tests were performed for both hospitals (Figure 1).

The baseline and follow-up consisted of performance observations as well as the nursing record tests. Also, a knowledge test was employed to investigate nurses' familiarity with key principles of oral care. Oral care education sessions offered to the nurses at the intervention hospital were tailored to their baseline scores. The follow-up tests were performed at 1 month after the last education session in the intervention hospital.

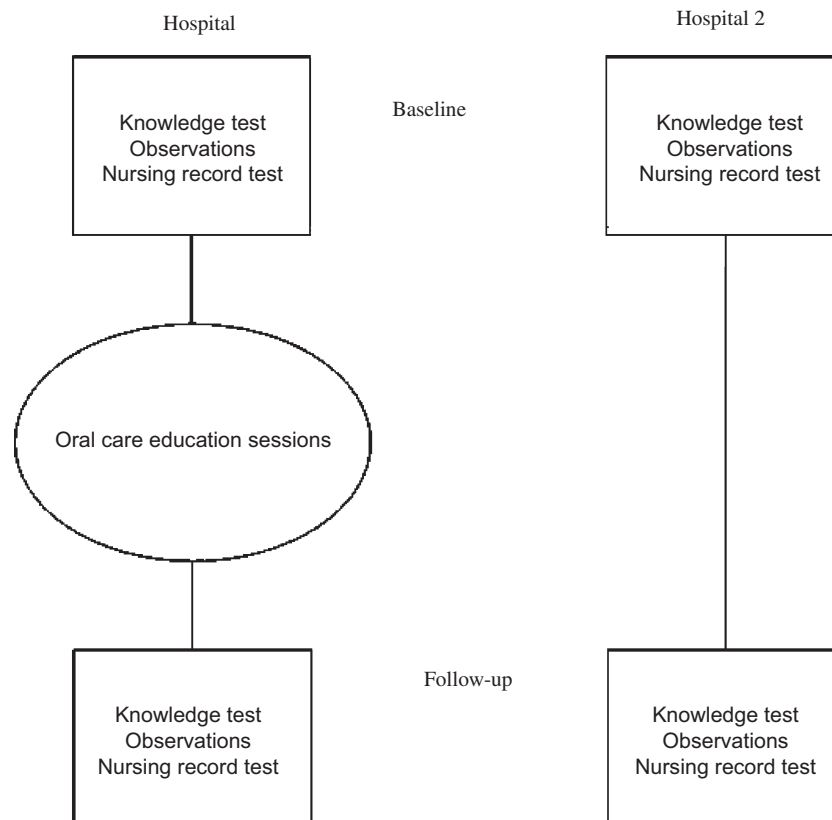


Figure 1 Study plan.

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