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25<sup>th</sup> World Congress on

# NURSING & HEALTHCARE

November 08-09, 2018 Sydney, Australia

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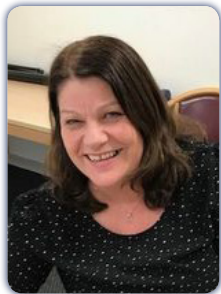
## Keynote Forum

### Day 1

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## Rosemarie Lockwood

University of Newcastle, Australia

### Evaluation of a nurse-led intervention to improve adherence to recommended guidelines for prevention of venous thromboembolism for hip and knee arthroplasty patients: A quasi-experimental study

**Background & Aim:** Venous thromboembolism morbidity and mortality of hospitalized patients is a major concern for health professionals. Venous thromboembolism prevention guidelines have been developed, however adherence to guidelines is variable. The aim of this study was to measure adherence to a nurse-led evidence based venous thromboembolism prevention program (intervention) compared to usual care in hip and knee arthroplasty patients and associated clinical outcomes.

**Method:** There were 410 potential participants who were adult patients' booked for elective hip or knee arthroplasty at the two study sites during a two-year period (2011-2013). Of these, 27 did not meet the inclusion criteria and the remaining were eligible for inclusion in the study (intervention site n=196 and control site n=187, total population n=383). This study adopted a quasi-experimental design, using an intervention and control study site, conducted in two private hospitals in a regional area in Australia.

**Result:** The intervention group had a mean compliance score of 11.09, higher than the control group score of 7.19. This is equivalent to a compliance rate of 85% and 55%, respectively and indicates that adherence at the study site was significantly higher. Patient adherence and outcomes in the post-discharge period were not significantly different between the study sites.

**Conclusion:** This study demonstrated a nurse-led intervention achieved high adherence with translating evidence-based guidelines into routine patient care for hip and knee arthroplasty patients. Nurses can be critical to implementing clinical practice guidelines and adopting preventive programs in acute care to improve patient outcomes and reduce postoperative VTE in arthroplasty patients.

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## Juliana Thompson

Northumbria University, United Kingdom

### Development of a workforce competency framework for older people with complex needs

Health and social services are challenged to meet the care needs of increasing numbers of older people who are highly dependent and have complex multi-morbidities. Providing quality care for older people requires a highly competent workforce. Researchers have reported that currently, the workforce is not adequately proficient. A multi-disciplinary, multi-sector Pathways of Care team was set up to identify competencies required for a skilled workforce. The team commissioned this study to develop understanding of required competencies of the workforce caring for older people, develop a workforce competency framework for Enhanced Care for Older people with Complex Needs (EnCOP) and develop understanding of priority areas for development by mapping staff against the EnCOP framework. A mixed methods study was undertaken. Thematic analysis of focus groups with staff working in health, social and voluntary sector services informed understanding of the required competencies. This, together with analyses of existing workforce competency research literature and discussions with the Pathways of Care team informed development of the EnCOP framework. Statistical analysis of surveys and practice observations and qualitative thematic analysis of stakeholder focus groups and workshops informed a competency gap analysis. A standardized, integrated competency framework working across sectors and professions is required. Gap analyses found competency development is required in teaching, learning and support across organizational and sector boundaries, if competency in clinical care is to be successfully developed. Agreement and support across all sectors, organizations and professions for adoption of an integrated competency framework is required.

### Biography

Juliana Thompson is currently working as a Senior Lecturer in Adult Nursing at Northumbria University, UK. She is a Scholar of the Florence Nightingale Foundation. Her academic and research activities focus on the development of a workforce skilled in the health and social care of older people, integrated health and social care, advanced clinical practice development in primary care and the involvement of older people in nurse education.

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## Jantra Keawpugdee

Mahidol University, Thailand

### Hospital readmission risk screening tools for older adults: A systematic review

**Background & Aim:** Hospital readmissions are defined as multiple inpatient stays within a specified time period by the same patient (Agency for Healthcare Research and Quality, 2013). Screening is the first step in identifying patients at risk for hospital readmissions and predicting readmission to the hospital. The study aims to identify, summarize and evaluate readmission screening tools for older adults.

**Method:** A systematic review of articles written in English and identified via CINAHL, MEDLINE/PubMed, Ovid UML and Cochrane Library was conducted. Additional studies were identified by through reference lists of the identified articles and by Google search. Search items included keywords for readmission, risk assessment, tools and the terms hospital settings and older adults. Reliability, validity and predictors of readmission tools were extracted independently by two authors and categorized by the authors classification tool.

**Result:** 14 studies using five screening tools were identified. Based on the author developed scale screening tools, ISAR, TRST and hospital score showed low to moderate validity and moderate to good reliability. The RRAT validity and reliability scores were low to moderate, and the LACE index validity score was low to moderate, but the reliability of the tool was not reported. Independent variables that were most often identified as predictors of hospital readmission were history of hospital admission, polypharmacy, cognitive and memory problems, the need for help as well as difficulties in walking, the length of stay and comorbid conditions.

**Conclusion:** No single older adult readmission tool stands out as the best hospital readmissions risk screening tool. Tools can be chosen based on ease of use, predictors and hospital needs. Future studies comparing tools with patients with different diagnosis should be conducted.

### Biography

Jantra Keawpugdee has completed her PhD in Public Health Nursing from Mahidol University. She is working as a Nursing Lecturer of Ramathibodi School of Nursing, Faculty of Medicine, Ramathibodi Hospital, Mahidol University. She has published two papers in reputed journals and has been training at the School of Nursing, University of Massachusetts Lowell, USA.

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## Noppawan Piaseu

*Mahidol University, Thailand*

### Effects of arm swing exercise program on nutritional status in female older adults at risk for metabolic syndrome

This quasi-experimental research with one-group self-control design aimed to investigate effects of arm swing exercise program on Body Mass Index (BMI) and Waist Circumference (WC) in female older adults at risk of metabolic syndrome. Sample included 55 female older adults with excessive WC, residing in an urban community in Bangkok. Data were collected using questionnaire and nutritional assessment at baseline, before (4-week control period) and after the program (4-week experimental period). Data were analyzed using descriptive statistics, Oneway ANOVA with repeated measures and multiple comparisons. Results revealed that after the program, mean BMI of the sample ( $27.0 \pm 3.2$  kg/m<sup>2</sup>) was less than the baseline ( $27.3 \pm 3.2$  kg/m<sup>2</sup>) and before the program ( $27.4 \pm 3.3$  kg/m<sup>2</sup>) with statistical significance ( $F=31.296$ ,  $p<0.001$ ). The mean WC ( $93.6 \pm 8.9$  cm) was less than the baseline ( $94.6 \pm 9.2$  cm) and after the program ( $94.7 \pm 9.2$  cm) with statistical significance ( $F=18.645$ ,  $p<0.001$ ). The results indicated that the arm swing exercise program was effective in reducing BMI and WC in female older adults. Community nurse practitioners and health team could apply the program for health promotion in female older adults residing in communities.

### Biography

Noppawan Piaseu is currently the Chair of Master Program in Community Nurse Practitioner, Ramathibodi School of Nursing.

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