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An Effective Educational Intervention on Antimicrobial Stewardship to Licensed Nurses in a Skilled Nursing Facility

This study examines the impact of an educational intervention on antimicrobial stewardship (AS) to licensed SNF nurses and is among the very first, if not the first, to examine the contribution of the different types of SNF licensed nurses. A 366-bed urban SNF served as the study site. Three methodologies were used: 1) an Educational Intervention to licensed nurses on the definition and need for AS, the use of the McGeer-Stone Criteria, and a new infection decision algorithm, 2) a post-educational intervention Nurse Survey, and 3) a retrospective pre- and post-educational intervention medical records audit measured antimicrobial use and adherence to the McGeer-Stone Criteria. Comparisons were made between units staffed largely by RNs and units staffed largely by LVNs, and between units where NPs were allowed to order medications and those where NPs were not allowed to write orders. This study received approval by the IRB Committee of the California State University at Fresno.

Prior to the educational intervention participating nurses were not aware of their role in AS. After the education intervention, all understood the importance of their role and antibiotic orders decreased. Stewardship efforts in SNFs: should involve all licensed nurses, enforce the McGeer-Stone Infection Criteria, be applied at the point of care, and the AS program managed by the facility nursing department. The various categories of nurses in long term care facilities should be differentiated in both research and practice.

Biography

Dr. Escalona has been an RN for over 40 years and has spent the past 20 years as an infection control consultant and staff educator for SNFs. For the past 6 years she has also been in private practice as a consultant, and mobile foot and wound care nurse serving the elderly in their home or facility, and teaching foot care nursing. She also volunteers at local homeless shelters providing foot and wound care to low income and unhoused populations.

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