

Background

- Barrier creams are used in the prevention of pressure ulcers by forming a protective layer that keeps away excessive moisture due to incontinence, perspiration, or wound drainage and aid in maintaining the integrity of the skin
- When there is partial or complete epidermal loss and the tissue is moist, applying a moisture barrier product is beneficial, such as zinc oxide ointments, or pastes
 - Pastes consist of ointment or cream with an absorbent powder that allows the paste to adhere to wet surfaces
 - Many products have a thick consistency that helps the barrier remain in place during ongoing exposure to liquid stool or urine

Practice Change

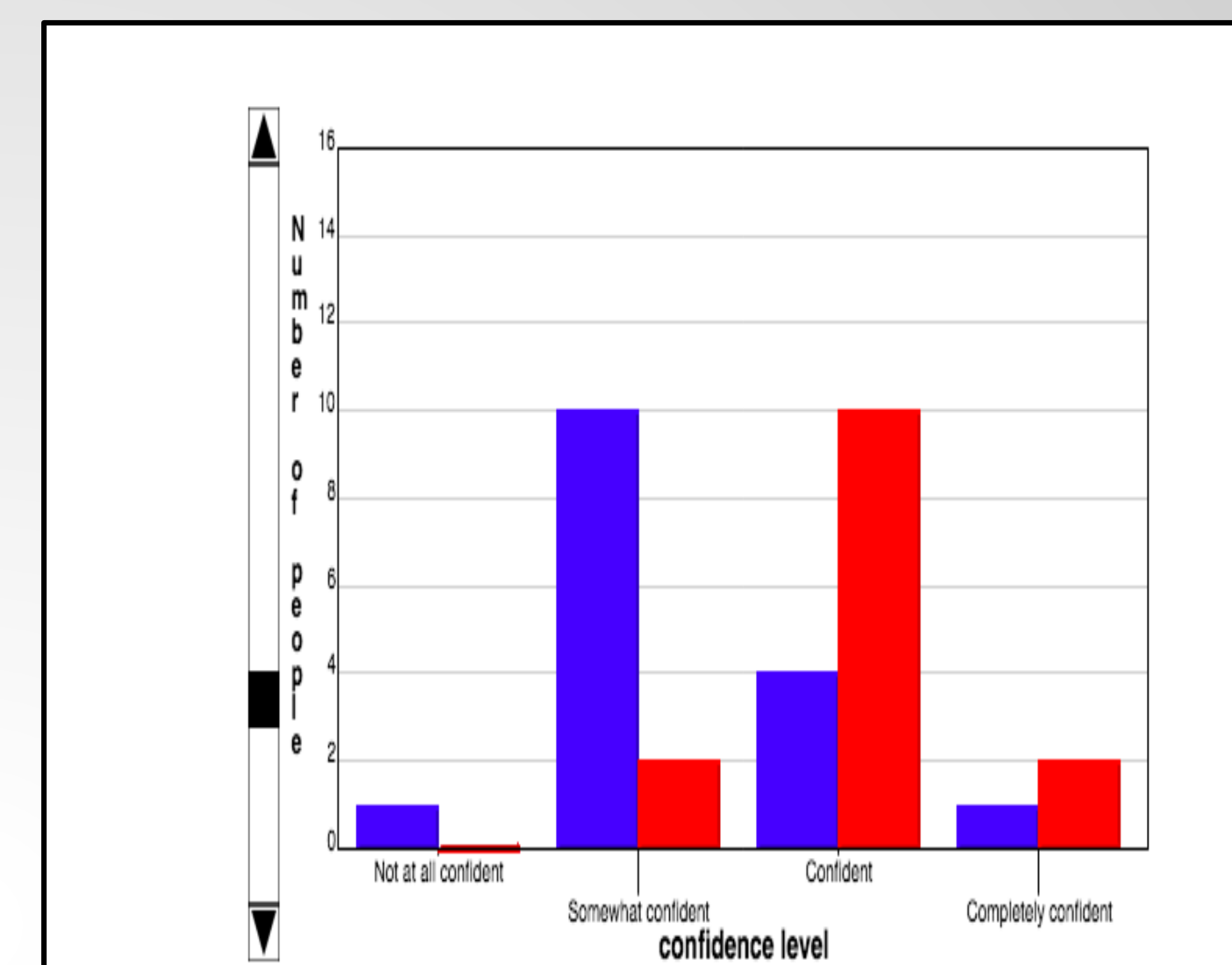
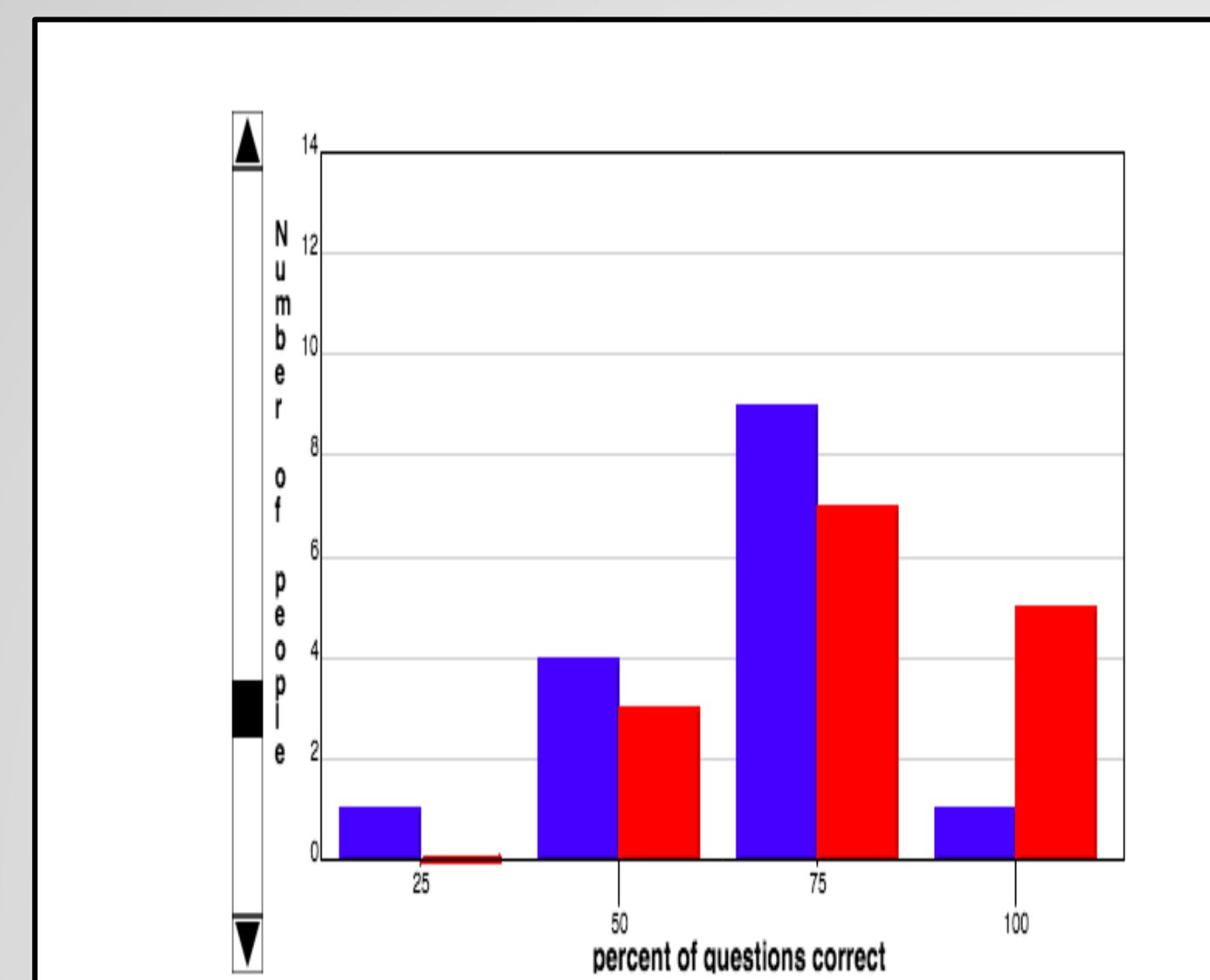
Increase registered nurses' (RNs') and certified nursing assistants (CNAs') knowledge of integrating skin protectant product use

Methods

- Administered anonymous paper pre-surveys to RNs and CNAs
- Presented educational posters for RNs and CNAs to review individually
- Anonymous post-surveys administered two weeks after education

Measures and Results

Pre-Survey Results (n=23)



Educational Pamphlet



- Zinc oxide based barrier cream guards fragile and sensitive skin to help manage and prevent irritation due to incontinence. Provides a barrier to protect skin.
- Moisturizes dry cracked skin due to frequent hand washing.
- Perineal Cleanser is used for washing incontinent patients. Provides a barrier to prevent skin break down that can be caused by frequent exposure to moisture.

Summary/Discussion

- Next Steps:**
 - Create and implement a skin care protocol
 - Follow and track patients who have developed pressure injuries to determine if skin care product use has been provided appropriately
 - Continue to provide education to RNs and CNAs working in the clinical setting
- Barriers of this Study:**
 - Lack of time to complete a post survey
 - Lack of means to provide alternative skin care products to complete skin care, including Nutrashield, Soothe & Cool or Z-Guard

Conclusion

- The knowledge of unit staff on the appropriate use of barrier creams and skin protectants has increased after the education.
- The largest barriers to skin protectant use was lack of supplies.
- Written education provided to staff has outlined what each product is used for and why they are important, proper use has increased.

References

- Brennan, M. R., Milne, C. T., Agrell-Kann, M., & Ekholm, B. P. (2017). Clinical Evaluation of a Skin Protectant for the Management of Incontinence-Associated Dermatitis: An Open-Label, randomized, Prospective Study. *Journal of wound, ostomy, and continence nursing* : official publication of The Wound, Ostomy and Continence Nurses Society, 44(2), 172-180. <https://doi.org/10.1097/WON.0000000000000307>
- National Clinical Guideline Centre (UK). The Prevention and Management of Pressure Ulcers in Primary and Secondary Care. London: National Institute for Health and Care Excellence (UK); 2015 Apr. (NICE Clinical Guidelines, No. 179.) 14. Barrier creams. Available from: <https://www.nice.org.uk/guidance/CG179/14>
- Truong, B., Grigson, E., Patel, M., & Liu, X. (2016). Pressure Ulcer Prevention in the Hospital Setting Using Silicone Foam Dressings. *Cureus*, 8(8), e730. <https://doi.org/10.7759/cureus.730>