

CONFERENCE ABSTRACT

Interrater Reliability of the COMHON Index To Assess Pressure Injury Risk In ICU

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Background: When using a pressure injury risk assessment tool, it is important to consider its interrater reliability (IRR), given that multiple raters may assess individual patients using the tool. For repeated measurements on a scale, intraclass correlation (ICC) is the most appropriate method to assess reliability (de Vet et al., 2006; Streiner & Kottner, 2014).

Aim: To summarise studies that have investigated interrater reliability of the COMHON Index using ICC.

Methods: Interrater reliability studies.

Results: Three studies have investigated interrater reliability (Fulbrook & Anderson, 2016; Uslu et al., 2024; Lovegrove et al., 2024) using English, Turkish and Chinese versions of the COMHON Index (https://wfccn.org/comhon-index). In the first study, ICC (2,1) .90 (95% CI .83-.95) was reported, and the COMHON Index was found to be superior to the Braden, Norton and Waterlow tools. In the two recent studies, ICC (1,1) .996 (95% CI .993-.998) and ICC (1,1) .973 (95% CI .949-.988). In the latter study, the COMHON Index was found to be superior to the Braden Scale.

Conclusions: The COMHON Index has demonstrated excellent inter-rater reliability in three studies. Measurement error of the COMHON RAS is small, and therefore it is sufficiently sensitive to detect minimally important changes in score. Further research needed to test the predictive validity of the COMHON Index.

References

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