Enhanced Wound Care Program (EWCP): a collaborative electronic platform to provide effective and continuity care for hospitalized patient and in community care

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Introduction
Patients with wounds complication will require close monitoring of wound healing progress and thus lead to prolonged hospitalization. One of the solutions to shorten the length of stay is to discharge patients with Wound Nurse Clinic (WNC) follow up. However, due to limited quotas in WNC and Non-Emergency Ambulance Transfer Service (NEATS) for non-ambulatory patients, not all patients discharged could be followed up timely in WNC. Hence, community nursing service (CNS) for wound care was referred. However, there is lack of continuity of care and outcome evaluation of wound healing progress. As a result, Enhanced Wound Care Program (EWCP) was implemented.

Objectives
The aims of the program are to monitoring wound healing progress by Wound Care Nurses (WCN) for frail or non-ambulatory patients upon discharge; to maintain continuity of wound care from hospital to the community care; to reduce patient attendance in WNC; to arrange early WNC appointment for patient who requires intervention.

Methodology
A unique electronic platform was designed for case report between WCN and CNS. Patients with wound healing problems and require CNS care upon discharge will be recruited in the program. All cases will be followed up for 14 weeks or until wound healed. Community nurse will report patient wound healing progress regularly via the electronic platform, and then wound care nurse will update the dressing regime and management plan. Moreover, regular meeting for case discussion and workflow will be conducted. Furthermore, WNC appointment will be arranged if patient’s wound
condition requires intervention.

**Result**
From August 2014 to Jan 2015, 36 patients were recruited in the program. 44.4% were pressure ulcer, 41.6% were surgical wounds and 11% were leg ulcers. We have provided wound care consultation advice for 201 times via EWCP. 10 WNC appointments have been arranged for wound care intervention, including conservation sharp wound debridement, wound cauterization and so on. In conclusion, EWCP is a collaboration model to provide an effective approach to promote wound healing, maintain continuity of care, and address patient problem promptly in community setting. Furthermore, reduce the frail or non-ambulatory patients’ attendance in WNC. Most importantly, reduce admission rate due to wound problems.