Redesign of workflow in Lymphedema Nurse Clinic (CLTC) in Tseung Kwan O Hospital

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Introduction
In the Special Advisory Group (SAG) Forum held in September 2012, the captioned pilot scheme had been proposed by Enterostomal Therapist SAG: To establish the lymphedema nursing service in TKOH and CMC for treating the wound with lymphedema patients. At present, only few patients with wound and lymphedema had been received the best conservative treatment (i.e. Complex Lymphatic Therapy (CLT). Their wound were healed and the symptoms of the lymphedema were well controlled after the application of CLT. In general, the CLT needed over one hour for completing the whole treatment process per clinic session. Many hand skills were needed. In order to shorten the waiting time and reviewed more patients, the present workflow had to be redesigned.

Objectives
1/. To provide short waiting time for the lymphedema patients. 2/. To deliver CLT to more patients under the limited resources and same clinic sessions. 3/. To prevent the drop-out in the process of CLT.

Methodology
New cases should be reviewed 1-4 weeks. In the first visit, aims of CLT and treatment plan were explained fully and gained patients’ consensus and compliance of bandaging. Measurement of the limbs circumference, skin care with shower, removal and re-roll the bandages should be done at home. Patient’s relatives, maid, community staff or nurses had been educated for the techniques of bandaging and simple manual lymphatic drainage when available. Patients could be discharged earlier and prolonged the follow up interval in actual and maintenance phase in the
CLT clinic. Enquiries for changing of condition and early follow up were entertained by phone call.

**Result**

For the year 2014, there were 15 new cases reviewed and was nearly double the number of cases in the year 2013. The rate of withdrawal was zero. The appreciation of CLTC was high. In order to help and decrease the numbers of the lymphedema patients, awareness programs, community talks for prevention, training more staff and patients’ interest group would be held and organized in the future.