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Submitting author: Ms kwok Fei Ling **Post title:** Ward Manager, AHNH, NTEC

Direct On-site Coaching Conducted by Wound Nurses to Reduce Number of Dressing Visits

Kwok FL, Leung YF, Yip TM, Lau YY, Tse KY, Wong VPH, Chiu CWH, Leung SY, Hui

EMT, Hui Elsie, Li PKT

Department of Family Medicine, New Territories East Cluster, Hong Kong

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Introduction

Wound dressing is one of the core services in GOPC. The number for wound dressing has escalated tremendously in the past 5 years. The total headcounts increased by 20% from 34083 in 2013 to 40936 in 2017 while the total attendances increased by 13% from 160312 in 2013 to 181336 in 2017. The increased dressing workload has created stress on nursing manpower especially in Saturday, Sunday and public holiday when the manpower is stringent. Frequent complaints on long waiting for dressing created another stress on nurses. As the headcounts of wound dressing could not be reduced, direct on-site coaching strategy was taken to reduce the number of dressing visits and shorten the wound healing.

Objectives

- > To reduce the number of dressing visits per headcount.
- > To enhance wound healing by wound nurse assessment.
- > To empower nurse on assessment and management of wound.

<u>Methodology</u>

Direct on-site coaching approach was designed to coach nurses in performing wound dressing. Self-assessment on wound management and use of advanced dressing materials was done by nurses before and after the on-site coaching. Wound nurses would provide on-site coaching at least two sessions in each clinic to supervise nurses on dressing and support the use of advanced dressing materials. In order to shorten the wound healing time, the wound nurses would screen complicated cases to wound clinic and provide advanced dressing materials to wounds. Patients were taught to perform dressing at home if the patients had the desire and capability.

Result

The number of visits per headcount has dropped from 5.38 per headcount to 4.5 per headcount. The average number of total attendances in Saturday and Sunday dropped from 77.92 to 57.29 after the implementation of 'Direct on-site coaching'. The overtime duty arising from dressing workload did not occur after the coaching approach. Patients' complaints relating to long waiting time for dressing were not

received. In addition, self-assessment performed by nurses reflected increase in abilities and confidence in choice of dressing materials and wound management.