



Service Priorities and Programmes
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To streamline the admission process of colonoscopy cases by implementation of 'Home Bowel Preparation Program'

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Introduction

After the renovation and expansion of Endoscopy Center, the numbers of patients for colonoscopy has increased tremendously since June, 2016. The existing 4 surgical wards are facing great challenge to handle the high admission rate of patients at 7AM. The toilet facilities in wards cannot meet the demand of these patients when they are having their bowel preparation for the procedure. The non-value waiting time for the patients from 7AM till endoscopy time (usually after 2PM) is long. After consulting C.O.S. and Consultants of Department of Surgery, we decided to streamline the clinical admission work flow for some suitable colonoscopy cases.

Objectives

1. Shorten hospitalization by shorten the non-value waiting time for the selected patients
2. Relief the tension of demand of toilets facilities
3. Enhance patient's satisfactory level
4. Maintain the high quality of bowel preparation cleanliness after rolling out the program
5. Decrease nursing workload in the bottle neck hour

Methodology

1. Redesigned the work flow for the colonoscopy patients starting from SOPD till discharge. Patients aged 55 or below with good health condition for colonoscopy will be selected by the surgeons in SOPD or ward and prescribed home bowel preparation with admission time at 10AM.
2. Enhanced the patients' understanding of home bowel preparation, the following aids were used: new sets of pamphlets, preset FAQs, posters & roll up stands and provided video in all surgical wards, SOPD and endoscopy centre.
3. Formulated a new drug set in IPMOE by surgeons and approved by pharmacy, in order to make a clear instruction on dispensing medication.
4. Compared the pre-program bowel cleanliness audit and bowel cleanliness mid-term audit, a valid instrument of Boston Bowel Preparation Scale (BPPS) was used.
5. Evaluated other outcomes by using of patient satisfactory survey and staff satisfactory survey.

Result

To evaluate the bowel preparation of the patients, BBPS score 3 in pre-program (n=130, 30.3%) and mid-term evaluation (n=159, 34.27%), P=0.096359, which means

no significant change was happened between pre and post project of the bowel cleanliness. Besides, 41.9% of Home bowel preparation patient were extremely like the project and over 95.2% of patient were satisfactory to very satisfactory throughout the patient journey from SOPD to Pharmacy, from Endoscopy to ward. 86% of nursing staff shows welcome to the project. To conclude, the demands of toilets facilities are diminished. Patients' satisfaction level is also enhanced due to shorter hospitalization time and better bowel preparation in a more comfortable and familiar environment at home.