Nurse-led Surgical Wound Round: A Win-win Program for Wound Care Services and Training Enhancement in Department of Surgery, PWH.

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Introduction
It is a huge challenge for the Enterostomal Therapist to provide high standard of wound care services with limited manpower and inequality of dressing resources in all 9 teams of specialties in Department of Surgery of PWH. The implementation of Surgical wound round with standardization of stock dressing items in different wards can improve the overall wound care outcomes and promote the nurses’ knowledge in complicated wound management.

Objectives
(1) To enhance the wound care services in the department by providing specialist’s recommendations during regular Surgical wound round; (2) to provide continuous training on complicated wound management to wound nurses after PRCC training; (3) to develop a coordinated approach of wound care product supply across the department.

Methodology
Surgical wound round services was implemented in 6 wards of the department by nurse specialist and a wound care nurse graduated from PRCC. Regular schedule (2 round/ward/week) was fixed as routine consultations. Hand-on experiences on special wound management regime, product effectiveness and wound healing indices can be further experienced by newly graduated wound nurses. Besides, essential and commonly used stock dressing items were being selected as “standardized wound care products” with definite quantity for department wound round.

Result
Surgical wound round statistics of the department (July – Nov., 2012) can be obtained: Total wound round days: 90 days, total ward rounds: 196 rounds, total number of new cases: 97 cases. Distribution of wound types in each ward, wound management regime, products usage can be retrieved and documented. Besides, 15 stock dressing materials were selected as standard auto-refill items and all being utilized at cupboard in all treatment rooms. This allowed equity in access, cost-effectiveness, better quantity control and ongoing evaluation of wound care
products in the department. Conclusions: Services obtained good responses and
comments from surgeons and ward staff, and is a career pathway for wound nurse
achieving professionalism. The standardization of essential dressing items can
enhance cost effectiveness in dressing resource consumptions for the department.