



**Service Priorities and Programmes
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Recognition of Respiratory Nurse Clinic by Accreditation: nurse clinic can make a difference

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Introduction

The development of HA nurse clinics have demonstrated nurses' commitment in the provision of quality client care. The respiratory nurse clinic services started since 2000 and which provides support to patients suffering from asthma, Chronic Obstructive Pulmonary Disease (COPD), Sleep-Related Breathing Disorder disease (SRBD) as well as chronic respiratory disease on NIPPV support.

Objectives

We aim to share and report the accreditation journey of respiratory nurse clinic.

Methodology

The accreditation mechanism of HA Nurse Clinic consists of two professional groups: "The Accreditation Panel of HA Nurse Clinics" and "The Assessment and Site Visit Working Group". According to "Guidelines on Accreditation of HA Nurse Clinics 2010", the standardized definition of nurse clinics for accreditation criteria are a) a nurse clinic is well formalized and structured b) demonstrate advanced nursing competence c) the nurse functions independently d) supported by and make referral to multidisciplinary team e) key interventions are nursing therapeutics f) key outcome measures are symptoms control, complications, prevention and care satisfaction g). a holistic approach to patient's needs

Result

Five year accredited period is approved from year of 2013-2018. Evaluation of 1-year services of nurse clinic were performed as follows. Problems with Meter Dose inhaler technique (MDI) are common. None of the patients (n=180) show full competence in demonstrating all 14 steps for MDI (n=50) and 11 steps for MDI with spacer (n=130) correctly. A significant difference is achieved after nurse clinic follow-up in 1-year. (MDI: 4.5 vs. 10.09; Spacer: 5.7 vs. 10.43) Another statistically significant result achieved with evidence of eight patients with severe COPD exacerbation and multiple readmission rates reduced from 3.75 to 0.85 episodes per patient after nurse clinic

services provision and intervention. Continuous Positive Airway pressure (CPAP) therapy is currently standard therapy with obstructive sleep apnoea syndrome (OSAS). However, it's acceptance and subsequent compliance rate is low. 224 patients with diagnosed OSAS attended the SRDB Clinic. 173 (77%) acknowledged sufficient understanding of these disease and demonstrated willingness for CPAP treatment. 86.7% patients agreed and started CPAP treatment after 3-month nurse clinic follow up. 117 patient satisfaction survey returned back and all patients (100%) admitted nurse clinic can offer a help and would like to attend follow-up continuously. Respiratory nurse clinic plays a vital role in optimizing pharmacological , non-pharmacological and self-care plan management