



Service Priorities and Programmes Electronic Presentations

Convention ID: 40

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Train Up the Patient Care Assistance to Perform Disinfection of Bronchoscope to Relieve the Nursing Workload

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Keywords:

Disinfection of bronchoscope

Nursing workload

Patient Care Assistance

Introduction

In the past, it is the ward in-charge's role to perform the disinfection of the bronchoscope which is a time consuming procedure. Due to the increasing utilization over the last 3 years (from 200 to nearly 380/year. It affects the clinical efficiency of the ward in-charge.

Objectives

Re-engineering the task by train up the patient care assistance to perform the disinfection of the bronchoscope and to evaluate it's effectiveness on relieving the workload of ward in-charged.

Methodology

Started at March/2016, CQI project to train up PCAII to perform this procedure by providing demonstration by bronchoscope team, design the training material (Chinese version), provide on-site smart points for guidance, return demonstration & supervised by trainer (at least 3 times)& lastly the trainee need to be audited by trainer. From March – Nov./2016, there are total 9 PCAII trained up to achieve this service can be covered very shift. Survey was conduct to evaluate this program by sending questionnaire to all in-charged.

Result

Survey was performed to ward in-charge to review the outcomes on relieving their workload after the training. Total 20 surveys delivered to APNs + clinical in-charge 18 surveys collected (response rate 90%). The satisfaction levels were evaluated in terms of a Likert Scales of 1-5 (1 = 'very disagreed' 5 = 'very agreed'). The results are as follows:

1) More than 80% feedback that the disinfection of bronchoscope is time consuming & can be performed by someone who have received adequate training.(Mean score: 4.5)

2)75% of the in-charge estimate this procedure needed 20-30 minutes. (Mean score:4.2)

3)More than 80% of the ward in-charge agreed that they can spend more time on clinical supervision or clinical work after the PCA take up this role for them. (Mean score: 4.5)

Apart from the survey to the clinical in-charge to evaluate the outcome, in-house monitor on the performance of the bronchoscopes are also done. After implementation of the project, there is no report of damage on the equipment which is due to the improper disinfection. It proved that the performance of the PCA is satisfactory.