Patient centred approach to improve thalassemia patient’s experience of blood transfusion service

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Introduction
Thalassemia patient requires lifelong blood transfusion (BT) every 3-4 weeks. Previous arrangement of BT is in general inpatient ward, however the congested and high workload inpatient environment cause prolong length of stay for BT. It is not only affects their social life on BT day, also tends to patient dissatisfaction with BT service.

Objectives
To shorten patient’s length of stay for BT. To improve thalassemia patients’ satisfaction in BT experience.

Methodology
Stage 1 – Collect patient comment Collect patient comment of BT service through interview and satisfaction survey. Stage 2 – Develop pilot programme Prepare procedure checklist and protocol driven BT guideline to facilitate workflow. Designate haematology nurse as case manager to follow. Debrief UACC staff for new service. Stage 3 – Switch thalassemia patient to UACC Interview and explain patients to get agreement of new arrangement. Switch 6 patients’ blood transfusion in United Ambulatory Care Centre (UACC) from 1st September 2015 to 30th December 2015. Stage 4 – Evaluation Patient satisfaction survey (Using 5 point scale) has performed before and after new arrangement for 3 months. These 6 patients’ feedbacks are analysed.

Result
1. Total length of staying hospital time was shortened from average 11 hours to 8 hours on BT day.
2. Patient satisfaction to environment of BT has been greatly improved from 3/5 to 4.5/5; also time management of BT day has been improved from 3.5/5 to 5/5.
3. Fewer disturbances in outpatient environment can smooth the clinical BT workflow to shorten the waiting time of blood typing, IV cannula insertion and transfer blood product in UACC.

Conclusion
The new arrangement is significantly improving thalassemia patient’s perception and satisfaction of clinical blood transfusion service and shorten their length of stay for blood transfusion in hospital.