



Service Priorities and Programmes Electronic Presentations

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Quality Improvement Program: Streamline Workflow of Emptying Urine Bag in Department of Medicine (一人一鴨大行動)

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Introduction

Catheter-associated Urinary Tract Infection (CAUTI) is prevalent in healthcare setting. According to Nursing Standards for Patient Care launched by Hong Kong Hospital Authority in 2002, the implementation of standard practice of emptying drainage bag represents one of the important elements in preventing patient from acquiring CAUTI.

Objectives

Current practice of emptying of urine bag is diverse among 17 medical wards in our department. To prevent catheter associated urinary tract infection, the practice of emptying the urine bag is reviewed. A new workflow will be adopted with evidence based clinical practice to prevent CAUTI which eventually enhances quality care delivery to patient and decrease health costs.

Methodology

Review current practice

1. Current situation and problems:
 - No preset guidelines / practice in emptying urine bag among 17 medical wards
 - Use of different containers e.g. measuring jar or urinal for urine bag emptying
 - Use of different types of trolley during procedure
 - Low compliance of patient care assistants on the use of PPE
2. Ward managers and patient care assistances were invited to review current practices & provide input
3. Examine the feasibility to standardize the usage of utensils and the workflow of emptying urine bag

Design

1. Set up a workgroup which involved WMs & APN in September 2014
2. Redesign workflow throughout the entire procedure in accordance to Nursing Standards for Patient Care with patient care assistance's input and involvement
3. Highlight the importance of hand hygiene and concept of infection control to patient care assistance
4. Set up a designated trolley for emptying urine bag with utensils required

Process

1. Develop guiding notes which are based on Nursing Standards for patient care in indwelling urethral catheter care during urine bag emptying procedure
2. Develop one-page summary of workflow in Chinese for patient care assistance
3. Prepare training material - an video on appropriate technique during urine bag emptying to enhance the understanding of patient care assistance
4. Pilot in four medical wards by establishing designated trolley and preparing utensils
5. Introduce the new workflow

to ward managers in the department and then roll out to remaining wards afterwards
6. Training of patient care assistance by Ward managers / Infection control link nurse in ward

Result

1. Workflow in urine bag emptying is streamlined and adhered to infection control requirement. This practice is standardized & adopted in department of medicine 2. It has been implemented in 17 medical wards in December 2014 3. Designated trolley has been set up for emptying urine bag and gains positive feedback from colleagues