



Service Priorities and Programmes Electronic Presentations

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QOCP Project : Innovative improvement measure - to implement the use of disposable paper rack with urine containers for doctor's inspection in ward

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Introduction

The conventional method of saving urine for inspection was not united as it needed extra manpower for searching reuse paper or plastic containers. It also required extra workflow to deal with disinfection procedure. Besides, it is nowadays not up to the standard of infectious control requirement. A disposable set of paper rack with 8 sequential standing plastic urine bottles is designed for clinical use in the NTEC.

Objectives

1) to improve infectious control effectiveness 2) to standardize the workflow of saving urine for inspection 3) to allow easy observation of saved urine 4) to dispose conveniently in wards

Methodology

The disposable paper rack set with diagrammed education sheets are dispensed to all surgical units in the NTEC. The rack should be used as follow: 1) The rack can be anchored at patient's bed end with plastic straps. 2) One rack is used for one patient only. 3) Nurse instruct patient to save urine in the transparent plastic bottles sequentially. 4) Patient should wash hands after saving urine. 5) The plastic bottles can be discarded after doctor's inspection. 6) New bottles can be refilled into the rack subsequently. 7) Discard the paper rack if contamination takes place, and use a new rack if continuous urine inspection is needed.

Result

Result The implementation of the disposable paper rack started in August 2015, 52 staff satisfactory surveys filled in by doctors, nursing and supporting staff of urology wards in NDH and PWH have been collected. Detail results are sorted as follow: 1) Staff understanding the rationale behind the implementation of the new tool: 77% very well, 23% well 2) How the training conducted before the implementation: 72% very well, 28% well 3) How staff prefer the new tool to the conventional method: 100% preferred the new method 4) How staff rate the difficulty in handling the new tool: 100% very easy 5) Overall satisfactory rate: 83% very satisfied, 17% well satisfied The conventional method took 3-5 minutes to prepare one container, but the new ready-to-use tool needs no preparation. **Conclusion** As the above design

is significantly cost effective and user friendly, it is worthwhile to promote use of the tool in a broader clinical area.