



Singapore Healthcare Management 2018

To improve current practice of nursing patients with incontinence post removal of catheter after Transurethral Resection of Prostate (TURP) surgery in W55B



Hery Yanto/ Ma Victoria Gonzales
Rodel Anuma/ Indiraa Naidu
Singapore General Hospital Ward 55B Urology.

Background of the problem

Ward 55B is a 44 bedded surgical department that provides acute care for patients admitted for Urological problem. It is also a place for post-operative care for patients who underwent minor to major urology surgeries. The most common operation among all is Transurethral resections of prostate (TURP).

All patients who underwent TURP will have an indwelling catheter (IDC) inserted for continuous bladder washout. The IDC will then be removed either on the 1st or 2nd post operative day (POD). Most of the patients will experience urinary incontinence after removal of the IDC.

Urinary frequency and urgency are some of the effect that patients will experience post removal of IDC as it is caused by involuntary contraction of the bladder. As the result patients often soiling their pants or bed linen before they reach the toilet. Patient felt embarrassed and frustrated for wetting their pants and bed linen. They felt sorry for calling the nurse to frequently change their pants and bed linen. Moreover, due to the nature of the blood stained urine, potential risk for cross infection to people that comes in contact with the blood stained linen. It is also time consuming for frequent change of pants and linens.

Analysis of problem

Our team decided to improve the work process by reducing the incident for patients wetting their pants after IDC removed.

Problems were discussed and identified using the Ishikawa cause and effect diagram (Fig 1). Nine solutions were brain stormed as shown in the tree diagram (Fig 2).

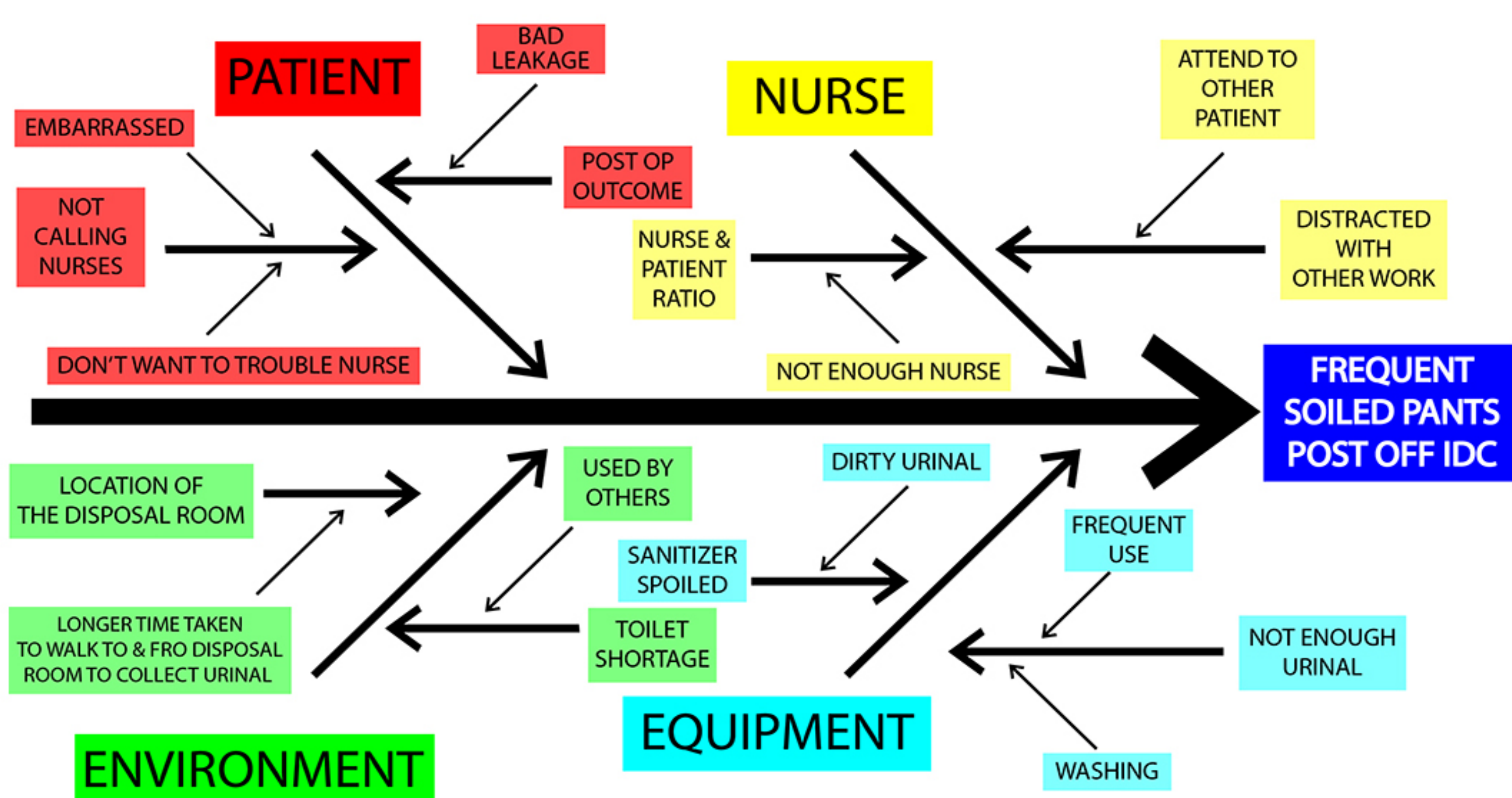


FIG. 1

Reduce stained pants	Solution	Criteria				Total
		Practical	Urgency	Safe	Within Control	
Easy accessibility of urinals	Install urine rack in the patient's room	3	3	3	3	12
	Urine hanger at bedside	4	4	2	3	13
	Change ward layout	1	1	3	1	6
Use absorbent materials	Incontinence sheet	3	4	5	5	17
	Disposable brief/male pad	4	5	5	5	19
	Adult diapers	4	5	5	5	19
	Bladder training	3	2	4	2	12
Prevent Incontinence	Medicine	2	1	2	1	6
	Urosheath	2	2	3	3	10

Scale: 1 - Meet Criteria Least
3 - Meet Criteria Moderately
5 - Meet Criteria Most

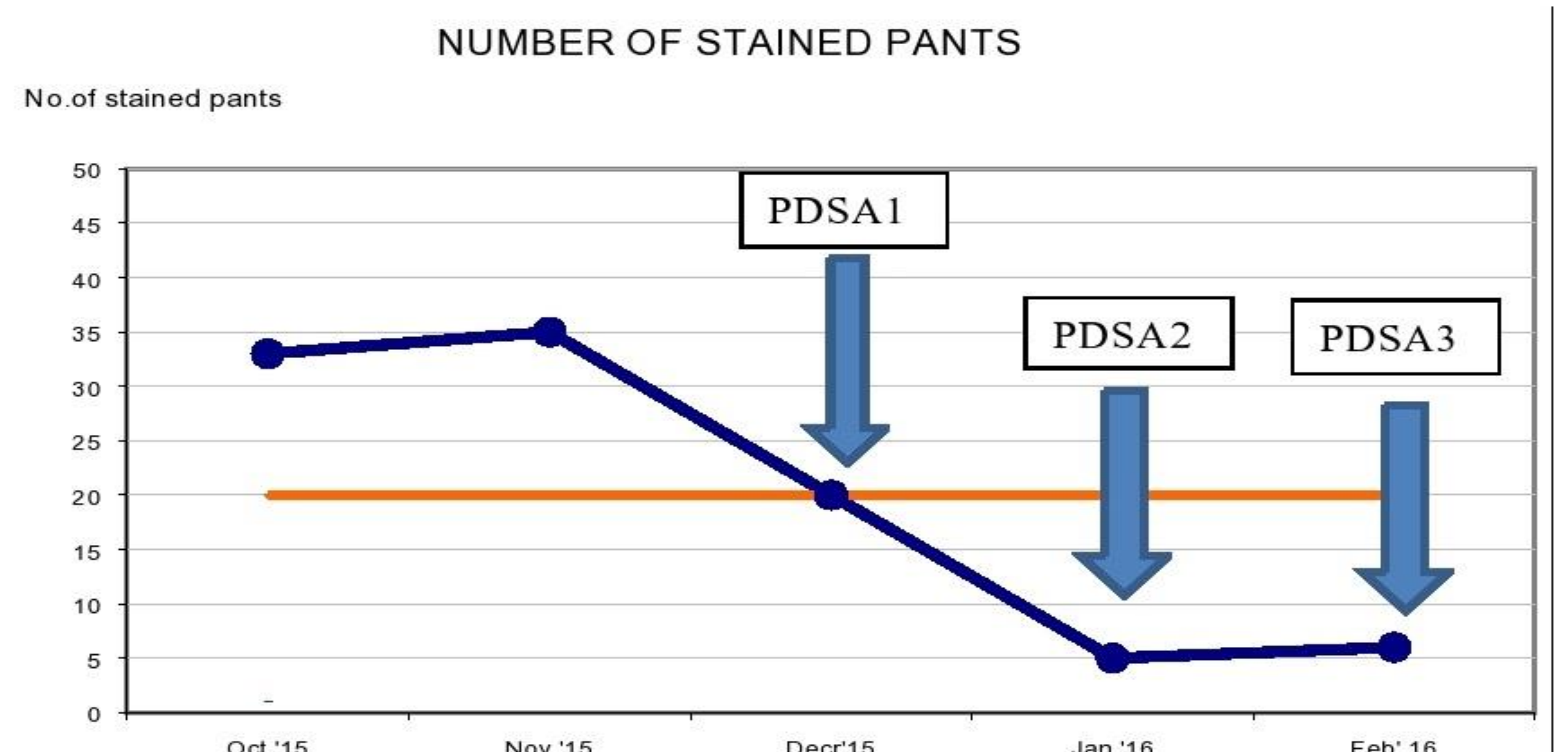
FIG. 2

Interventions / Initiatives

Our 1st PDSA cycle will be using the incontinence sheet. It was placed inside patient's pants around genital area to absorb the urine leakage. 2nd and 3rd PDSA were using the absorbent pad/protective underwear and adult diapers respectively.



Results



The run chart above shown the number of stained pants during our data collection. Although the incontinence sheet did reduce the number of stained pants, however patients verbalized the incontinence sheet often slip out of position and not comfortable in wearing. Both absorbent pad/protective underwear and adult diapers greatly reduced number of stained pants for patient. However some of the patient verbalised they dislike the idea of wearing diaper as they feel embarrassed and warm. Patient feel more satisfied with the male absorbent pad/protective underwear as they no longer dirty their pants.

On average there are 2 cases of TURP done everyday. If we convert it to number: $2 \text{ cases/day} \times 5 \text{ days/week} = 10 \text{ cases} \times 52 \text{ weeks/year} = 520 \text{ cases/year}$. That meant there were at least 520 of pants/linen need to be change yearly. After the implementation of the male absorbent pad/protective underwear, it significantly reduce the number of stained pants/linen that need to be change and patients were also more satisfied with it as compare with adult diaper and the incontinence sheet.

Lastly, we also received a positive feedbacks from the fellow colleagues that after the implementation of the the male absorbent pad/protective underwear, it reduced the frequency for them to change linen/pants for the patients. Therefore saved their time significantly.

Sustainability

New initiative would be shared during daily roll call. Team members demonstrate and educate the staffs on how to use and proper application of incontinent pad/protective underwear. New colleagues will be orientated on the practice during their induction programme. Future consideration to top up the incontinent pad/protective underwear as ward norm.