To improve overall efficiency by decreasing time taken from order of Manual Bladder Washout kit to intervention for overflow inpatient

# Singapore Healthcare Management 2017



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### Background

Ward 55B is a designated Urology ward. We receive significant number of referral letters from various disciplines regularly on Gross Hematuria (high concentration of blood in the urine) which requires immediate intervention – Manual Bladder Washout (MBWO). Out of all the patients suffering from Gross Hematuria, 40% of them are referrals from overflow inpatients.

### **Interventions / Initiatives**

1.Traditional "Black Box" is flimsy and small. It will be substituted with a bigger clear plastic box (Figure 2) so as to better visualize and house additional requisites.

Added requisites (Table 2) for a better equipped MBWO kit.
 With more requisites added, MBWO kit may be too heavy to be carried around. A trolley will be attached to box for easy transportation to overflow wards.
 Checklist with codes (Figure 2) will be placed in the MBWO kit to facilitate overflow wards in charging/obtaining requisites from MMD to return to Ward 55B.

MBWO is a specialized procedure which requires non-standard requisites from Urology – Ward 55B. Overflow inpatients from other wards do not carry such requisites in their stock order. Hence, most of the time, Urology ward needs to loan out non-standard requisites that are needed during MBWO.

## **Problems identified**

Due to the lack of requisites, nurses from overflow wards need to loan it from Ward 55B. Hence,

- **1. Time taken to intervention (MBWO) is prolonged** due to lack of non-standard requisites in overflow wards
- **2. Increased incidences of undercharging of patients on requisites** overflow wards do not have charging code on non-standard requisites borrrowed
- **3.** Prolonged time taken to return loaned requisites to Ward 55B overflow ward nurses unsure of ordering code of specialized non-standard requisites borrowed. Hence, more time will be needed to find out and order borrowed requisites from MMD.

## **Mission Statement**

To decrease time taken from order of MBWO to intervention for overflow inpatients by 60% within 3 months.

To eliminate incidences of under charging of requisites for overflow inpatients by 60% within 3 months.

#### Analysis

		MANNUAL BLADDER WASHOUT CHECKLIST		Affix Patient's Sticky Label	
		No	ltems	ltem Code	Quantit
		1	Sodium Chloride 1000mls	0011-40-030-1	1
and the second		2	Chlorhexidine 0.05% 500mls	0013-84-103-E	1
Figure 2: New MBWO Kit		5	Nelaton Catheter #18	1130-01-007-A	2
3-way Catheter (Sz16-24)		4	Nelaton Catheter #20 Nelaton Catheter #22	1130-01-008-A 1130-01-009-A	2
Nelaton Catheter (sz16-24)		6	3-way Catheter #18	1130-01-009-A	2
Catheter Introducer		7	3-way Catheter #20	1130-03-020-A	2
Surgical Blade			3-way Catheter #22	1130-03-021-A	2
Surgical Suture (prolene 2.0 & 3.0)			Blade	1112-01-007-A	1
3x Lignocaine Gel		10	Catheter Tip Syringe 60 mls	1220-03-016-A	2
2x 20 mls syringe		11	Lignocaine Gel		2
2x 10 mls syringe		12	Water For Injection 20 mls	0010-40-050-C	2
2x Sodium Chloride (1000mls)		13	20 mls Syringe	1220-02-004-A	2
Chlorhexidine 0.05%		14	Sterile Gloves #6.5	1162-02-031-A	1
2 x 60 mls catheter tip syringe		15	Sterile Gloves #7	1162-02-032-A	1
2 x Water for injection (20 mls)		+ +	Apron	1100-01-002-A	2
Sterile Gloves ( size 6.5 -7 )			Urine Bag	6-1309-01-006-B	1
Urine bag		-	Micropore Tape - 2 inches	1306-01-007-A	1
Sterile gauze			Sterile Gauze	1160-01-006-A	1
Sterile cotton balls			Sterile Cotton Balls	1132-02-005-A	1
Sodium chloride for bladder continuous			Suture (Prolene 2.0)		1
bladder irrigation (3000mls)			Suture (Prolene 3.0) Normal Saline for Bladder Irrigation 3000mls	0011-40-028-6	1
			Y-tube Bladder Irrigation set	6-2237-03-001-A	4
Bladder irrigation tube		25	r-tuve blauder migation set	0-2237-03-001-A	

Periodically, considerable amount of time would be taken for the Ward nurses/ Doctors to receive the MBWO kit (Figure 1) from overflow wards. In addition, there were also frequent incidences of under charging of requisites that are loaned, as there were no proper documentation of the requisites being brought over to overflow wards.



Figure 1: MBWO Kit

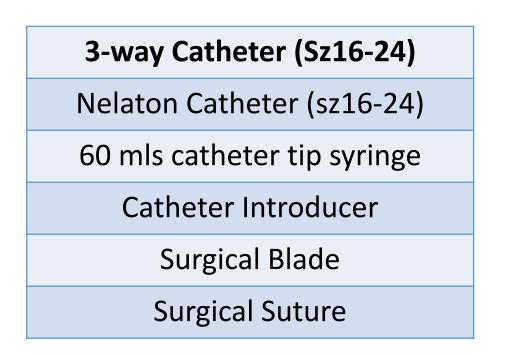
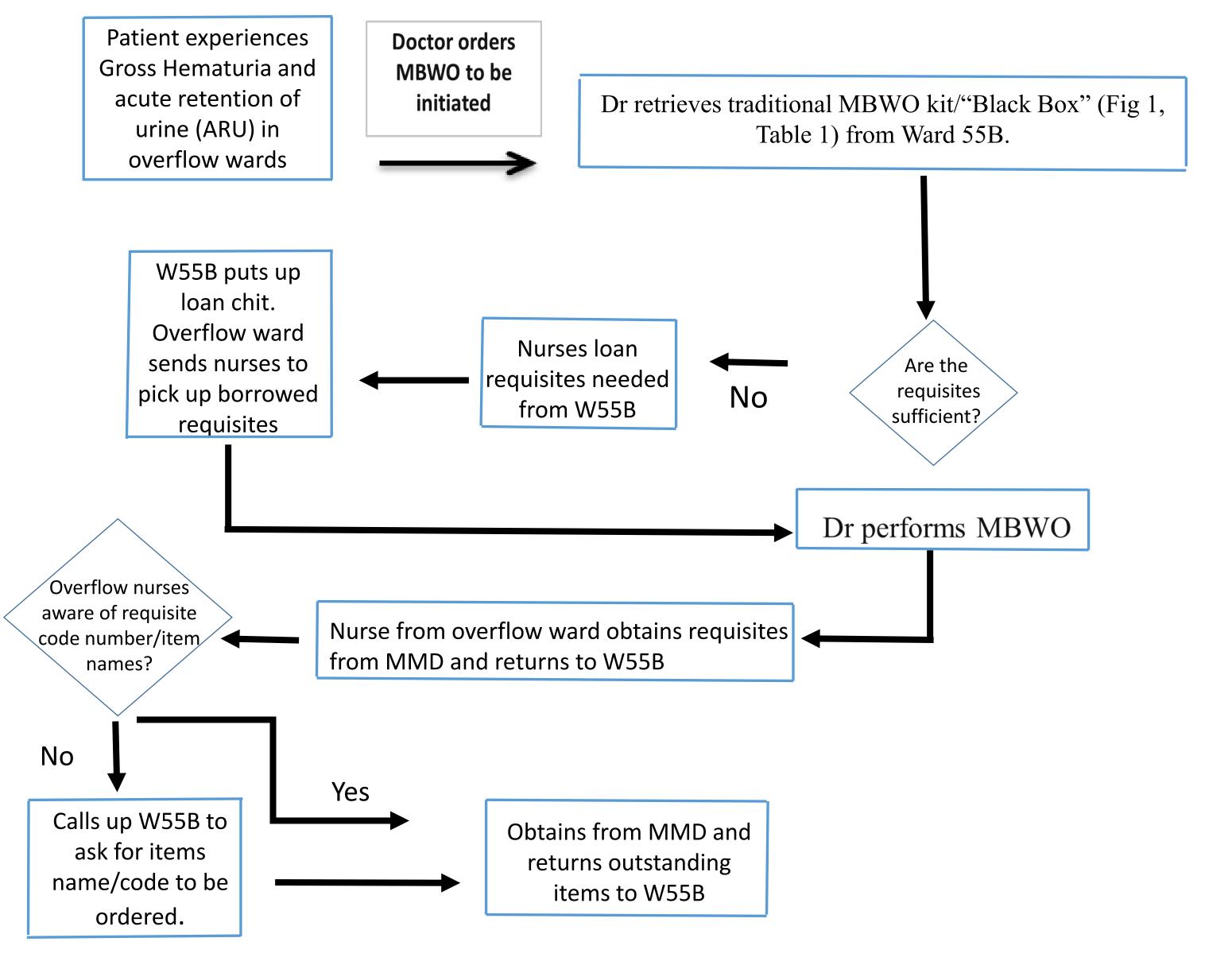


Table 1: Contents of Existing MBWO Kit



#### Bladder irrigation tube

\* Newly added requisites are in BLUE font Table 2: Contents of New MBWO Kit

### Results

The interventions were piloted on 4 patients and following are the results:

1. Time taken to receive MBWO kit and perform intervention in overflow wards is minimized by 75%.

**Pre-intervention** - mean duration from order to intervention: 40 mins

#### **Figure 2: Checklist with codes**

•Average time taken from order of MBWO kit till intervention: 40 mins
•Average number of patient in 1 month: 5
•Total time spent in a month: 3 hours 20 mins

**Post-intervention** - mean duration from order to intervention: 10 mins

Time difference : 40 mins - 10 mins = **30 mins (approximately 75% reduction)** 

Incidences of under charging:

✓ Pre-intervention – incidences of undercharging is approximately 60% of orders from-overflow wards
 ✓ Post-intervention – with the help of checklist added in the MBWO kit,

incidences of undercharging have been eliminated

## **Sustainability Plans**

#### Follow up:

Doctors and nurses in the department will be briefed on the new MBWO kit during department meetings and roll call respectively

> MBWO kit will be checked and topped up by high-dependency nurses every morning shift and/or after every use to ensure that requisites have not expired.