



Australian & New Zealand Orthopaedic Nurses Association

THE 7TH INTERNATIONAL AUSTRALIA NEW ZEALAND ORTHOPAEDIC NURSES ASSOCIATION (ANZONA) CONFERENCE

CLIMBING TO THE SUMMIT

BRIDGING RESEARCH AND PRACTICE IN ORTHOPAEDIC NURSING

11-13 NOVEMBER 2015 HILTON SYDNEY

2015

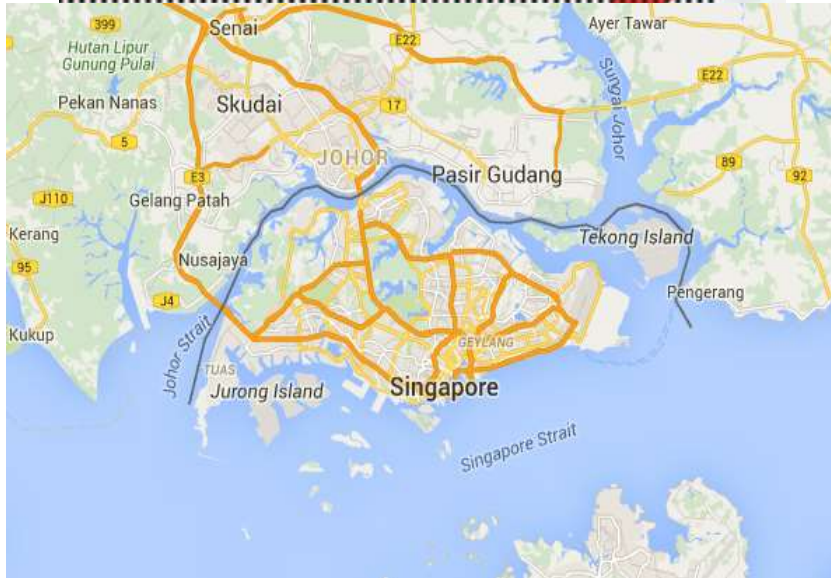
Bridging the Gap within Orthopaedic Nursing through 'Observership'

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November 13, 2015

the little red dot



- **Area:** 718.3km²
- **Population:** 5.5 million
- **Ethnicity:** Chinese, Malays, Indians and Eurasians
- **Language:** English, Mandarin, Malay & Tamil
- **Religion:** Christianity, Buddhism, Islam, Hinduism & Sikhism

Singapore General Hospital



- Joint Replacement
- Trauma
- Spine
- Sports Injuries
- Foot & Ankle
- Musculoskeletal Tumor
- Hand Surgery
- Ortho related infections

SGH's Health Manpower Development Plan

- Embarking clinical attachment to renowned overseas training centers to learn new skills, harness new technology and find new solutions for patients.

Integrated Care Programme for Hip Fracture Patients

Multi-disciplinary team approach- doctors, nurses, allied health & care co-ordinator

Aim & Objective:

- *To develop protocols, services and review processes for a more integrated care pathway for patients with hip fracture*

Demographics

- 562 patients were operated 2013
- Mean age: 76
- Gender: Female > Male

Observership Planning

- Nursing Director & Preceptor
- Logistics:
 - Workload & Planning
 - Supernumerary/observational capacity
- Indemnity
- Visa Requirements
- Cultural Exchange



6th January to 14th February 2014

- **Royal Adelaide Hospital**
 - Orthopaedic Inpatient Wards
 - Spinal Injury Unit
 - Operating Theatres
 - Outpatient Clinics
 - Joint Replacement Clinic
- **Hampstead Rehabilitation Centre**
 - Orthopaedic, Amputee and Burns Rehabilitation Unit
 - Spinal Injury Unit



With Anita Taylor and Meg Lewis

- 8 am: Report to Orthopaedic Nurse Practitioner
- 8.30am: Attend doctors morning trauma round
- 9 am onwards:
 - Review: - Newly admitted patients
 - Postoperative reviews
 - ED
- 10 am (Thursdays): Attend weekly discharge planning meeting

Activities

- Shadow the role of shift coordinator
- Morning trauma rounds
- Geriatric rounds
- Rehab rounds at Hampstead rehab centre
- Pre-operative evaluation for joint replacement
- Patient's journey- OT holding bay-> OT-> recovery room-> ward

	RAH	SGH
Nursing Management	<u>Done in ED:</u> <ul style="list-style-type: none"> • Bed & air mattress in ED • Oxygen administration • IDC insertion • 4-hour admission rule 	<u>Done in the ward:</u> <ul style="list-style-type: none"> • Patient trolley • Regular hospital mattress • Oxygen administration • Perform bladder scan-> for IDC insertion • Transfer to ward ASAP
	No traction	Apply Buck's traction
	Pain protocol- Initial opioid dose is based on patient's age	PO Paracetamol->escalate as necessary
	<ul style="list-style-type: none"> • MET call • Colour coded observation charts 	Escalation-> Primary team

	RAH	SGH
Medical Management	<ul style="list-style-type: none"> • Daily geriatric assessment (5/7) • Rapid optimisation of fitness for surgery • Nerve block • VTE Protocol • Supportive primary care 	<ul style="list-style-type: none"> • Geriatric assessment twice/week • Medical referral • VTE Protocol
Time to OT	Less than 48 hours	<ul style="list-style-type: none"> • 48 to 72 hours • Depending on planned trauma list • Surgeon's load & experience • Patient's medical condition
Ambulation status	Early ambulation- FWB/ WBAT	<ul style="list-style-type: none"> • FWB/WBAT

	RAH	SGH
Hospital Stay	Varies- depending on discharge destination	Varies- depending on discharge destination
Discharge Destination and Planning	<ul style="list-style-type: none"> • Home • Step down care e.g. district hospital, rehab centre • Transitional Care Programme • Weekly discharge planning meeting • Weekly visit by rehab nurse 	<ul style="list-style-type: none"> • Home • Step down care e.g. community hospital, inpatient rehab • Discharge planning is done on admission and follow up by RN in-charge

Recommendations

Implemented

- Multi-disciplinary Team weekly meeting
- Initiate referral to rehab nurse for inpatient rehab on POD 2
- Hip Fracture Patient Information Booklet

To be implemented

- Review nutritional assessment
- Review stool chart
- Nurse- led protocol and guidelines on removing short-term IDC
- Fast track admission
- Pain protocol
- Improve Patient and Family Education Booklet on Fall Precaution

Learning Point

- Rapid optimisation
- Early surgery followed by early mobilisation
- Facilitate early discharge
- Future plan- Hip Fracture Registry