

Targeting a Defect: Improving Preoperative Patient Education for Safer Surgery

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BACKGROUND

- Surgical site infections (SSI) are a largely preventable cause of patient harm.
- A colorectal surgery Comprehensive Unit-Based Safety (CUSP) team was developed to address the high SSI rate in this patient population.
- The CUSP team utilized the SSI Investigation and Learning from a Defect tools to help identify where systems and processes failed.
- Poor compliance with preoperative bowel preparation and chlorhexidine washcloth were recognized with the tools.
- We hypothesized that increased compliance with preoperative bowel preparations and chlorhexidine washcloths will lower the SSI rate.

AIMS

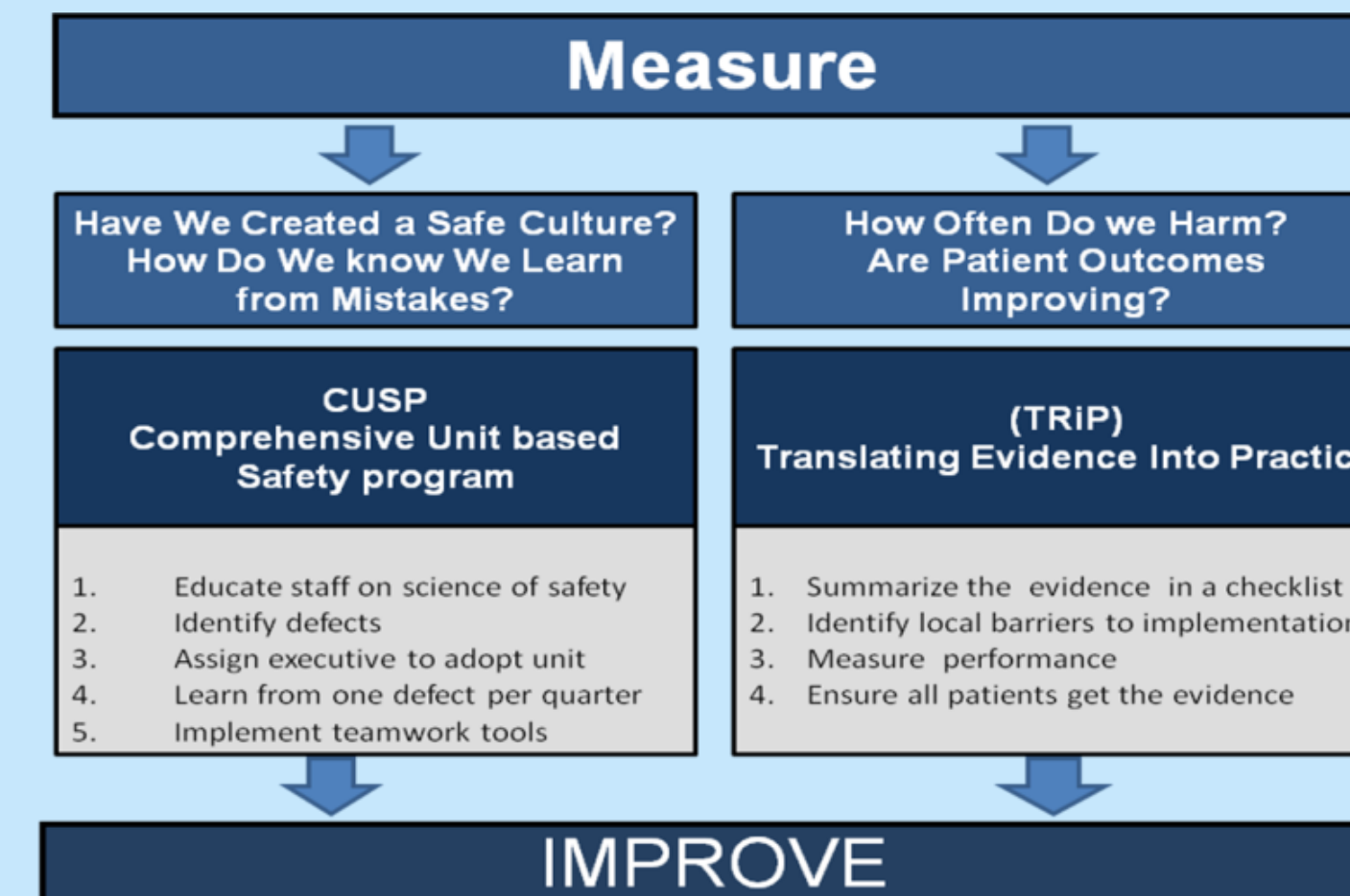
- Identify factors that contribute to SSI.
- Identify and improve compliance rate with preoperative bowel preparations and chlorhexidine washcloths.
- Design and implement tablet-based curriculum to educate patients

METHODS

- Key Contributing Factors Identified:
 - Poor compliance with preoperative bowel preparation and chlorhexidine washcloths were identified with the tools.
- Tablet Based Curriculum using teach-back method was created:
 - To address lapses in pre-op educational training that required increase in personnel resources which was unattainable.
 - The tablet educates patients about the proper bowel preparation and washcloth procedures, and their importance in preparing patients for safe surgery and reducing SSIs.
 - The components for the bowel preparation and the washcloths are given to the patient at their clinic visit to remove lack of materials as a contributing factor.

RESULTS

Use of CUSP and TRIP



Survey Questions	Response Options	% Response (n=4)
Did you learn new information from the tablet?	Lots of new information	50 %
	Some new information	50 %
	A little new information	0 %
	None	0 %
Do you feel better prepared for your surgery after using the tablet?	Certainly yes	50 %
	To a large extent	50 %
	To some extent	0 %
	No	0 %
Do you better understand how to complete your bowel preparation before surgery?	Certainly yes	75 %
	To a large extent	25 %
	To some extent	0 %
	No	0 %
Do you better understand how to use your chlorhexidine washcloths before surgery?	Certainly yes	100 %
	To a large extent	0 %
	To some extent	0 %
	No	0 %
Overall, how would you grade the tablet education?	Excellent	50 %
	Good	50 %
	Satisfactory	0 %
	Needs improvement	0 %
Was the time it took for you to go through the entire tablet ok?	Yes, it took just the right amount of time	25 %
	To a large extent	0 %
	Somewhat	75 %
	No, it took too long	0 %

CONCLUSIONS

- Tablet based preop education for colorectal surgery patients can be a useful resource for patients to learn about proper pre-surgical care, such as the proper use of chlorhexidine washcloths and proper bowel preparation techniques
- Goal was to better educate patients on preop education and chlorhexidine washcloths
- Data gathered from the PACU documentation identified factors that impact SSI and made it possible to track patient compliance data
- Tablet education promotes better patient-provider communication
- We hoped improved pre-op education may reduce SSIs
- Further research is needed to assess impact of preop education on SSI rates

IMPLICATIONS

- Utilizing readily available tools including CUSP model can allow unit-based teams to substantially improve clinical care.