

Project Title

Transitional Feeding Guide: Wean the Feeding Tube Off

Project Lead and Members

Project lead: Mr George Toh, Principal Dietitian

Project members:

- Ms Yiap Pok Leng, Deputy Director of Nursing
- Ms. Velusamy, Deputy Director of Nursing
- Ms. Guo Hui, Senior Nurse Manager
- Ms. Chin Guey Fong, Senior Nurse Clinician
- Ms. Meriani Chen, Nurse Clinician
- Ms. Sangeetha D/O Sodimani, Nurse Clinician
- Ms. Farhana Binte Salim, Nurse Clinician
- Ms. Serene Chew, Senior Dietitian

Organisation(s) Involved

Khoo Teck Puat Hospital

Project Period

Start date: April 2019

Completed date: July 2019

Aims

To achieve a timelier initiation of transitional feeding by creating a guide for ward nurses

Background

See poster attached/ below

Methods

See poster attached/ below

Results

See poster attached/ below

Lessons Learnt

- Team work is crucial, without the expertise and support from nursing team, this would not have been successfully implemented across hospital.
- As nationally, NHG and NUHS healthcare institutions will move to new generation electrical medical record (NGEMR). During the planning phase, this feeding guide should have been considered as one of the best care practice in NGEMR.

Conclusion

See poster attached/ below

Project Category

Care & Process Redesign

Keywords

Care & Process Redesign, Healthcare Training & Education, Job Redesign, Quality Improvement, Root Cause Analysis, Pareto Chart, Plan Do Check Act, Cost Saving, Gastroenterology, Nursing, Khoo Teck Puat Hospital, Transitional Feeding

Name and Email of Project Contact Person(s)

Name: George Toh, Principal Dietitian

Email: toh.george.ch@ktph.com.sg

Transitional Feeding Guide – Wean the Feeding Tube Off!

Toh G.C.H.¹, Chew S.¹, Yiap P.L.², Velusamy P.², Chin G.F.², Chen M.³, Sodimani S.³, Salim F.³, Guo H.³

¹Nutrition & Dietetics, ²Nursing Administration, ³Inpatient Nursing
Khoo Teck Puat Hospital

Background/Aim

Transitional feeding is the process of transitioning from enteral tube feeding to oral feeding. Often when indicated, ward nurses would call dietitians to review and amend the enteral feeding regimen in order to facilitate the success of weaning of the enteral tube feeding to oral feeding (Figure 1). The initiation of transitional feeding may be **delayed by 4-5 hours or more**. This project aimed to achieve a timelier initiation of transitional feeding.

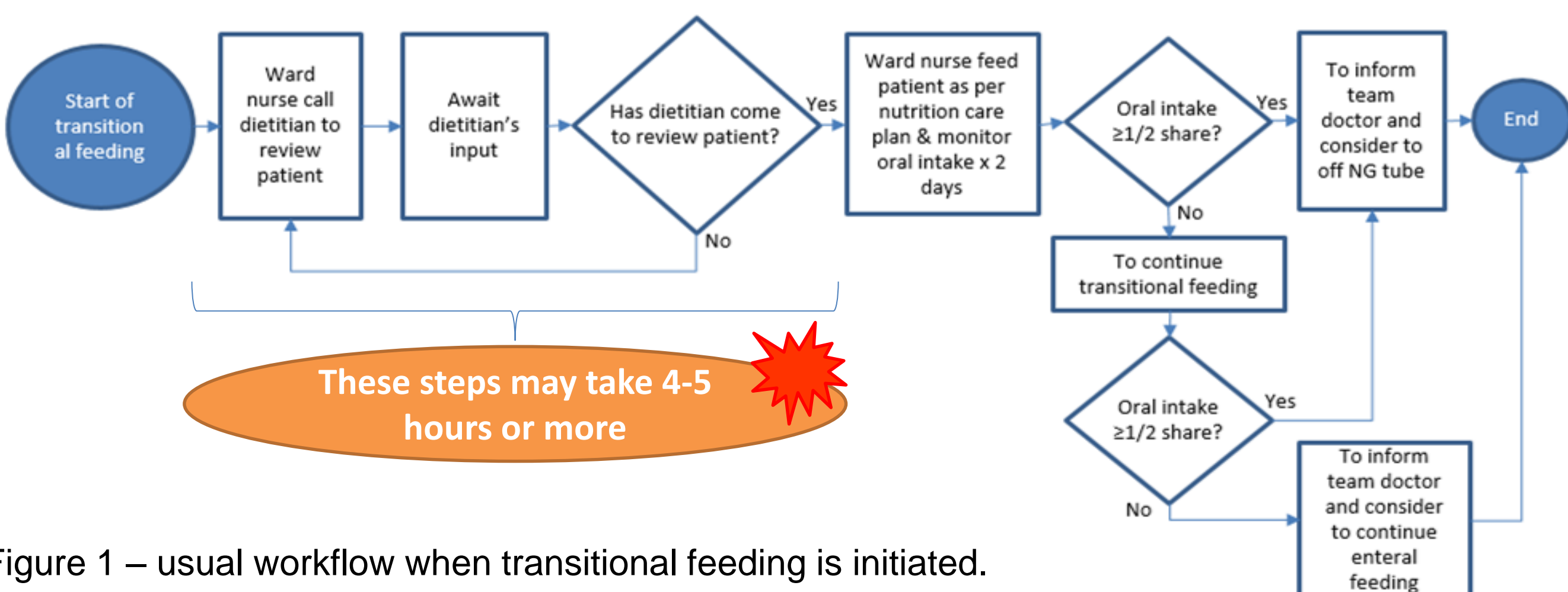


Figure 1 – usual workflow when transitional feeding is initiated.

Methodology

- Root cause analysis were performed (figure 2). PDCA model was adopted and a transitional feeding guide was created (Figure 3). This guide was piloted in 3 wards in April 2019; the updated and finalized version was then spread to all wards in July 2019.

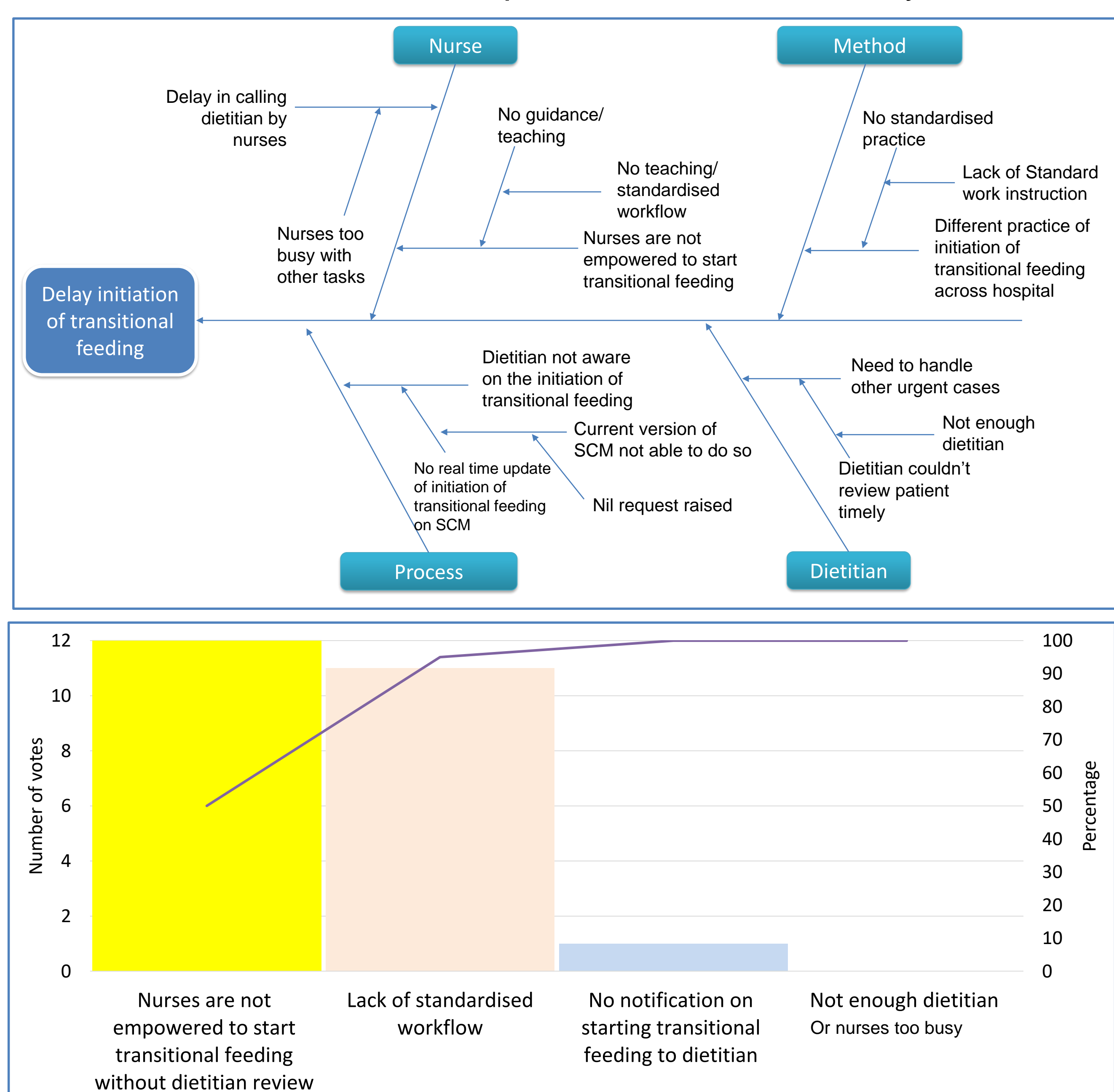


Figure 2 – fishbone diagram (top) and Pareto chart (below) for this project.

Sustainability/ follow up:

- This kaizen had been standardised & spread to all wards in KTPH in mid July 2019.
- This feeding guide has also been incorporated into the nursing induction program (dietitian part) to ensure new nurses are aware of this feeding guide

Conclusion

A transitional feeding guide has been shown to be effective in achieving a timelier initiation of transitional feeding process and lesser amount of time taken by dietitian and nurses in weaning patient's feeding tube off. Team work was crucial, without the expertise and support from nursing team, this would not have been successfully implemented across hospital.

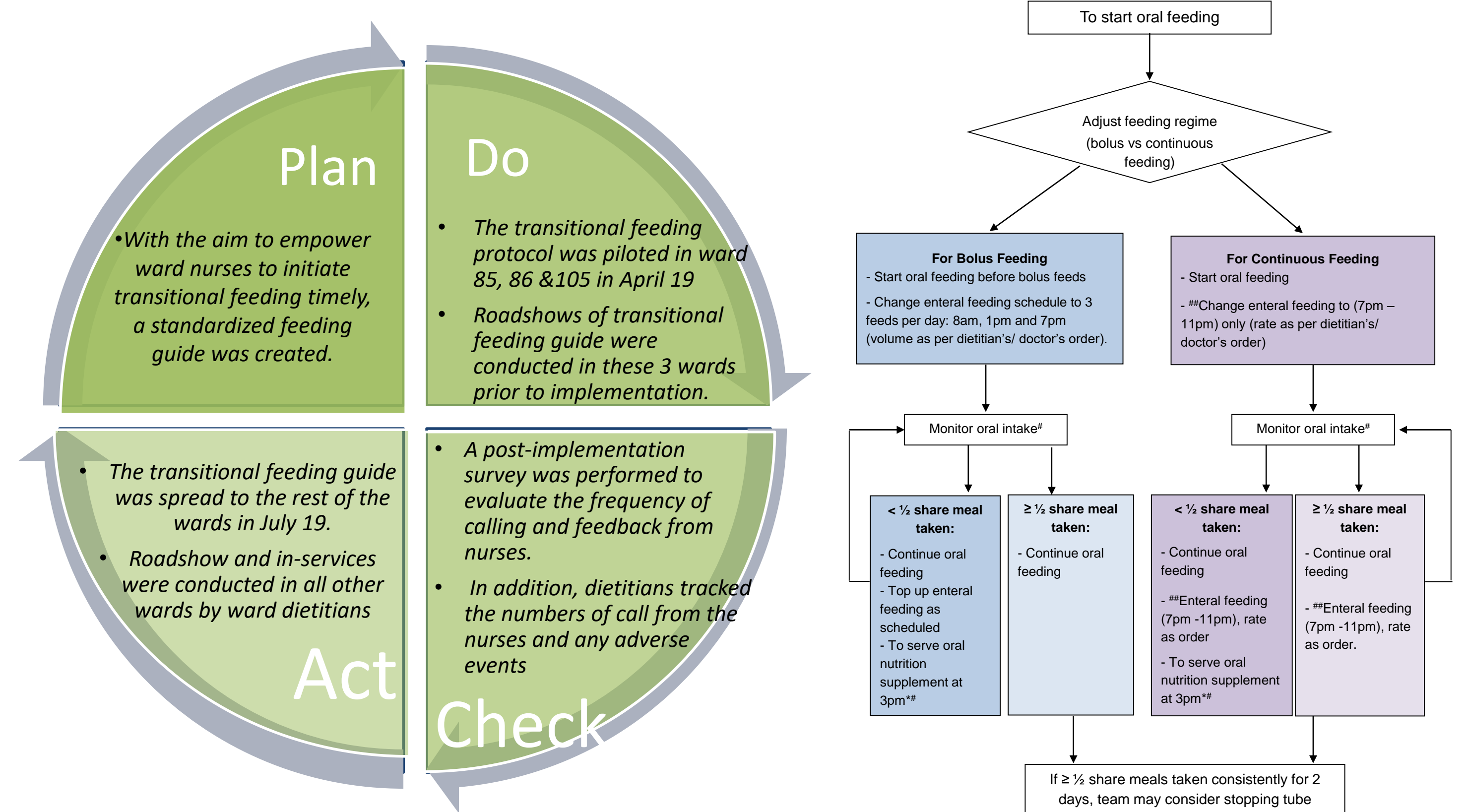


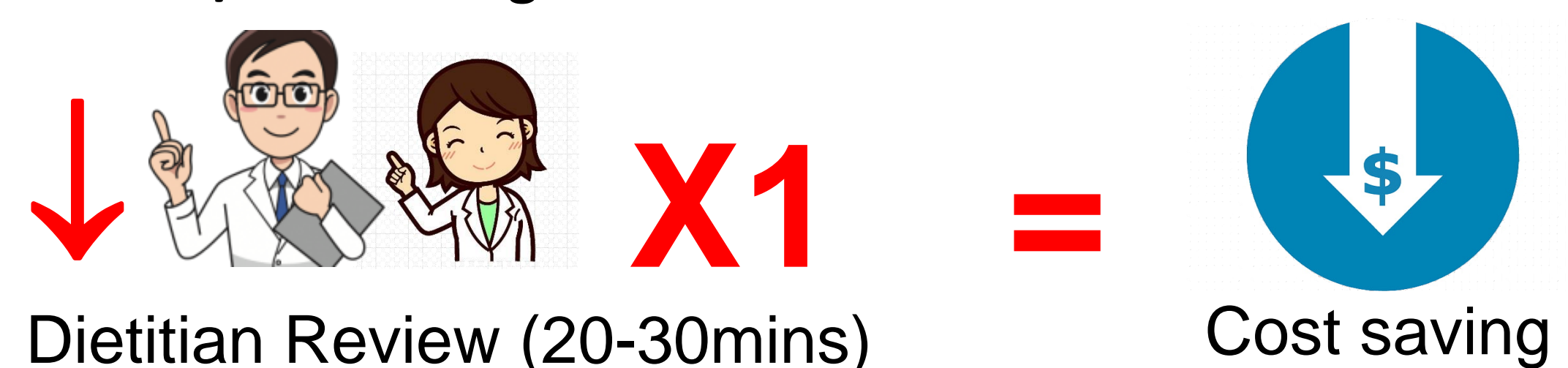
Figure 3 – PDCA model adopted for this project (left); transitional feeding guide (right)

Results

- Post-implementation survey (N= 77 nurses) showed:
 - 88% of the nurses had used the transitional feeding guide;
 - 93% of the nurses felt that this transitional feeding guide has saved time for them as it empowered nurses to manage patients' feeding

	Pilot Phase (2 months)	Spreading phase (2 months)
Number of patients on transitional feeding	20	29
Initiation of transitional feeding by nurses (without calling dietitian)	18 (90%)	26 (90%)
Number of patients whose feeding tube was successfully weaned off	15 (75%)	23 (88%)
Number of adverse events reported	0	0

Man-hour/ cost saving:



Project impact:

Appropriateness of care

Standardization of workflow to wean off the feeding tube without compromising nutrition provision for patients.

Hassle free administration

Timelier initiation of transition feeding process by nurses.

Productivity, innovation and value

Time saved from calling by nurses/ extra review visit by dietitian -> could be used for other activities & cheaper care for patient.