

National University Hospital Singapore

Country	Singapore
Solution	Vernacare System
Key Issue(s):	Infection Prevention, Environmental, Nurse Productivity



99% of nursing staff surveyed believe the Vernacare system could help reduce the risk of cross infection

Vernacare and National University Hospital Singapore work together to implement a new approach for Infection Control

Hospital Overview

The NUH is a 1,100 bed, tertiary hospital and major referral centre for a comprehensive range of medical, surgical and dental specialties. Staffed by a team of healthcare professionals who rank among the best in the field, the NUH offers quality patient care by embracing innovations and advances in medical treatment.

In 2007, the NUH was chosen by the Ministry of Health to develop two new national centres, the National University Cancer Institute, Singapore (NCIS) and the National University Heart Centre, Singapore (NUHCS) to meet the growing needs for cardiac and cancer treatment.

In 2004, the NUH became the first Singapore hospital to receive the Joint Commission International (JCI) accreditation, an international stamp for excellent clinical practices in patient care and safety.

A member of the National University Health System, it is the principal teaching hospital of the NUS Yong Loo Lin School of Medicine (YLL SoM) and NUS Faculty of Dentistry (FoD).



Background

Patient safety and good clinical outcomes remain the focus of the hospital. The Infection Control and Nursing teams were evaluating solutions as part of their approach to managing outbreaks and began discussions with Vernacare regarding its human waste management system. They agreed to trial the system across four wards - Short Stay, Cardiothoracic ICU, Oncology and EMD.

Solution

Together with the infection prevention benefits, the trial highlighted the nurse and staff benefits in terms of productivity, morale and crucially releasing time to care for patients. A survey of users revealed that:

92% believed that the Vernacare system will save time giving more time for the patient

99% of could see how the Vernacare system could help reduce the risk of cross infection

Boosted nurse morale through removal of the environmental hazards associated with bedpan washer/disinfectors was an important factor in NUH's decision to proceed with the Vernacare system.

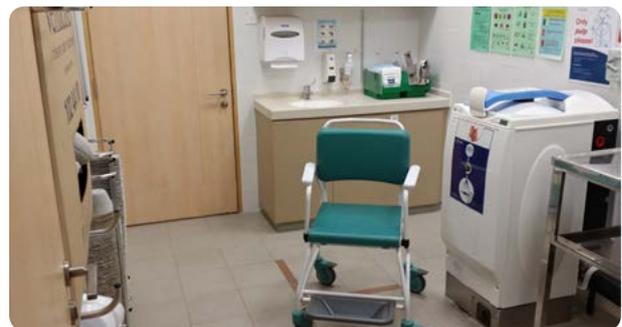
Following the successful trial, NUH fully converted their facility from of its reusable bedpan washer/disinfectant facilities to the ground-breaking Vernacare system, which included the installation of 54 Vortex disposal units and use of the wide range of Vernacare single-use utensils including bedpans, urinals and washbowls.

Vernacare worked closely with NUH to lead a project team to fully plan and oversee the 3 month implementation project, identifying individual ward requirements including staff training plans.

Feedback

Sarah Bown, International Business Development Manager, Vernacare, commented "We are delighted to work with NUH on this important infection prevention project, this truly has been a team endeavour involving Infection Control, OSS, Nursing teams, Hospital Management and Engineering. We have worked closely with our local distributor partner idsMED to implement the Vernacare system at NUH, including full installation, dirty utility room set up and comprehensive staff training across the hospital. idsMED are now on hand to offer dedicated training and support to NUH."

In 2015 the hospital undertook a large survey questionnaire to investigate user acceptance, perceptions, and any areas for improvement. The disposable system was seen to be more convenient, more hygienic, and less of a risk in spreading infectious diseases¹. Nurses perceived that patients regarded disposable receptacles as more hygienic and less likely to cause a health care-associated infection. Patients also felt more comfortable using a fresh single-use disposable receptacle.



1. Phua et al, "Disposable single-use receptacles in a tertiary hospital: A large survey of staff after a hospital-wide implementation" American Journal of Infection Control, In Press, Corrected Proof, Available online 11 March 2016