

# AIHA Nursing Toolkit

## Leadership Projects: Individual Projects of Class 1

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### PROJECT AIM/GOAL:

Enhancing ophthalmology care at the Oblast Trauma Hospital in Donetsk, Ukraine

### EVALUATION CRITERIA:

- Evaluate the outcome using the survey instruments

### PROJECTS OUTLINES:

#### June 1999

The eye trauma unit with 589 m<sup>2</sup> floor space was designed for 60 hospital beds; there are 12 patient rooms in the unit, specifically: 2 of them have 8 beds, 3 – 6 beds, 3 – 3 beds, 3 – 4 beds, 1 – 5 beds. Hospital administration is planning to accommodate a maximum of 4 patients in one room. This will be accomplished on expense of moving the operating rooms (94 m<sup>2</sup> of the floor space) that are currently located within the unit.

Finding the necessary space for these eye trauma operating rooms wasn't difficult: there is the OR (64 m<sup>2</sup> of the floor space) on the third floor that is used for other purposes. After meeting with 18 unit's surgeons, it became clear that changes would have positively influenced the following:

- 1) adherence to the sanitary epidemiological routine in the wards and unit;
- 2) accommodation and patient stay in the eye trauma unit rooms;
- 3) observation of the patients' status by nurses;
- 4) maintaining the hygienic norm for space per patient in the patient rooms.

#### July 1999

After meeting with an epidemiologist, head nurse of the eye trauma unit, and chief scrub nurse, it became clear that changes would have positively influenced the unit issues as follows:

- 1) creation and maintenance of the sanitary epidemiological routine in patient rooms and the entire unit;
- 2) adherence to the patient internal regulations that are meant to accelerate their recovery;
- 3) quality of observation and patient care to be delivered by health care professionals;
- 4) quality of care in the operating rooms on the third floor;
- 5) control over health professionals in the operating rooms;
- 6) rational use of the personnel (covering each other responsibilities);
- 7) infection control in the operating rooms on the third floor;
- 8) ensuring the epidemiological safety of treatment and diagnostics.

After meeting with scrub nurses, it became possible to resolve some problem and carry out activities as follows:

- 1) making the personnel adherent to their responsibilities;
- 2) acquiring the new knowledge and skills;
- 3) improving the scrub nurses' labor organization;
- 4) observing the medical ethics' code and deontology;
- 5) improving the scrub nurses' level of training.

Task oriented interviews of 48 inpatients of the eye trauma unit suggest that:

- 1) the fact that patients stay in 6-8 patient rooms adversely affects their recovery and micro climate of their rooms;
- 2) hospital stay in the rooms for not more than 4 individuals will improve the quality of nursing care and patient monitoring.

#### July-September 1999

Heating system, hot/cold water piping, and sewage pipes were replaced in the operating rooms on the third floor. Expenses: 70, 000 Hr, including labor and material costs.

Work on the Project is in progress.