



**Emergency
Care Institute**
NEW SOUTH WALES



ACI NSW Agency
for Clinical
Innovation

Innovation Presentation: **Removable Wrist Splints for Buckle Fractures**

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Issues Identified

Evidence to support change in practice

Previous requests declined: “No Way”!

New approach by a different clinician to ortho Director!

Service demand on clinics: resources & labour

Expenses: waterproof casts, appointments for removal, parking...

Time lost from work and school

Inconvenience and stress

Ultimate goal: removable splints for wrist buckle fractures. GP follow up as required.

Strategy / Intervention

Literature review

Confer with other Australian centres (2 detailed responses)

Audit: one year wrist fractures/pain/sprain (N=600+)

Total population = 160-200 p/a, age, side

Product procurement: locally available,
compliance with physio/ortho
cost effective (<\$25).

Agreement to purchase (ED)

Strategy / Intervention

Multidisciplinary 'buy-in': pilot strategy. Start small and slow! Address concerns

Use clinic follow-up for exposure to product and favourable consumer feedback. Ortho/physio evaluation.

Resources: CPG, clinical decision pathway, sizing/fitting guides, parent fact sheet, education (med/nursing), evaluation form/data, GP letter, stock Mx

Processes embedded for checks and safety:

prior to D/C

review of radiology report

Outcomes / Results

March 2014 - April 2015: 172 splints applied during pilot

Evaluated in clinic

Criteria - 'NO BUCKLE,NO SPLINT': initial changeovers, then good uptake and consistent with inclusion criteria

No unplanned # reductions

2 unplanned ED returns: pain despite compliance with inclusion criteria. Consistent with written carer instructions

Requests for additional splints from ortho clinics: broadened inclusion criteria.

Attrition: 28 Not logged (OPD, SMO discretion? # /sprain/pain)

No re-presentations of unlogged splint use

Outcomes / Results

Since 1 May 2015, 80 splints applied with GP F/U. No **unplanned** OPD/ED referrals.

GP referral pathway direct to ortho clinic negotiated but not as yet required.

Splint issues: revised design for comfort, amended paed sizing, improved packaging, fitting/care instructions, supply guarantees

Dissemination to other sites upon request

Lessons Learned

Slow and steady!

Evidence and data

Planning

'Buy in' / communication / feedback

Respond to issues as they arise

Resources to support change

Ongoing education and monitoring

Attitude shift! ✓

Happy families and clinicians! ✓



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