Improving Patient Safety by Scanning across the “Patient Pathway”

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19th May 2022
Thanks for joining today... We are going to cover the following points

1. What is the “Patient Pathway?”

2. How do we scan through the Patient Pathway?

3. Where is the highest risk most prevalent to patients?

4. Understand what data standards are applied and why they are really important to a hospital
My immediate question upon commencing the role...

For a Programme
with Patient Safety at it’s heart...
why don’t we

put the patient in the middle

and follow the entire patient journey?
Approaching the implementation

- Patient focussed
- Visited all 6 demo sites and learned from them
- Rachael Ellis developed the patient pathway approach
- Based on a model of “support from staff”
- I wanted to know the total cost of patient care
- With full costs visible for Staff, Products, Duration, Location
- Sustainable, small but perfectly formed team
The Patient Pathway

Sterile Services for Trays and instruments

Surgical Admissions Lounge

Perfusion (Cardiac Bypass)

Anaesthetics

Cardiac Surgery

ICU

Discharge – Home, Care Setting or Mortuary

Hull Scan4Safety followed the patient pathway
Q: Where does the “patient pathway” start and end?
A: Rachael Ellis created the 3 C’s

Connected to the Patient
Continuous
Complete
6 Benefits of implementing via the patient pathway

1. The patient has traceability throughout their hospital stay
2. We have visibility if a patient develops a contagious infection for which staff members have been in contact with the patient.
3. Sterile Trays and instruments are tracked to each patient (GIAI’s)
4. Product recalls within wards / departments have certainty and are automated (GTIN’s)
5. If expired or recalled products are scanned – they alert the staff in real time
6. We can extract data for NHS Digital for the new reporting requirement without manual intervention
Here’s some patient specific benefits...

• **VENTILATOR RECALL:**
  Ventilators which were recalled as part of Covid
  It took **38 minutes to identify, quarantine and recall** all
  patient linked machines.

• **PATIENT QUERIES:**
  The data has been used in responding to queries and
  enquiries from patients and patient relatives

• **TUBERCULOSIS (TB) ALERT:**
  All staff who had connected with the TB positive patient
  were identified across theatres, recovery, anaesthetics
  and ICU
When we receive this...

We used to ...

Now we simply ...
This is the message you receive if you scan a product, or sterile tray which is out of date.
These are the “wrong product” warning messages

These are based on specific product being identified by GTIN’s
What are the risks and therefore where should you scan?

- **Product Risks**
- **Reporting & Data**
- **Process risks**
- **Historical risks**
- **Contact risks**
- **Asset risks**
Why do GS1 Standards play an important role?

1. Product **GTIN’s** are easily read by barcode scanners
2. Most suppliers understand **GTIN’s** and their impact
3. Products are easily recalled
4. Different Product Unit Of Measures have different **GTIN’s** so are easier to manage stock
5. Assets which have **GIAI’s** can be recalled in the same manner
6. Having **GLN’s** around your estate make it easier to ensure that you are correct with your locations and sites
What were we surprised by?

- The engagement of clinical colleagues—most want to simplify and digitise
- The benefits it brings
- At the start the lack of barcodes on products
- How flexible you can be, most items now have barcodes on them
- The patient pathway impact— it was never mentioned before we started
- How automated you can be, in a short timescale
- How effectively you can implement
Scan4Safety... The “Firsts” here at HUTH...!

- **FIRST** to develop the “Patient Pathway approach” for Scan4Safety
- **FIRST** to scan within an ICU unit
- **FIRST** to scan items to community patients
- **FIRST** to scan to Mortuary
QUESTIONS